

Meeting the needs of Orphaned and Vulnerable Children by empowering community supported family care

A CAN training programme

Assembled from some of the best projects
in Lesotho, Eswatini, Kenya, and Uganda

CARE AFRICA NETWORK

Aims and Objectives

CAN's objective is to support and help develop African extended family and community care systems that meet the needs of orphans and vulnerable children within their extended families and communities now and for future generations



CARE AFRICA NETWORK

- CAN empowers community supported family care for children in crisis, including children orphaned by AIDS
- It disseminates by means of publications, consultations, and training, effective methods of meeting children's needs; and thus benefits more children
- CAN provides needs led training
- On occasion it may fund small income generating projects that enable future self sufficiency in meeting care needs.
- CAN aims to empower the continuation of African community care systems for the benefit of future generations against the unprecedented challenges of the AIDS orphan crisis.

Further information is available from

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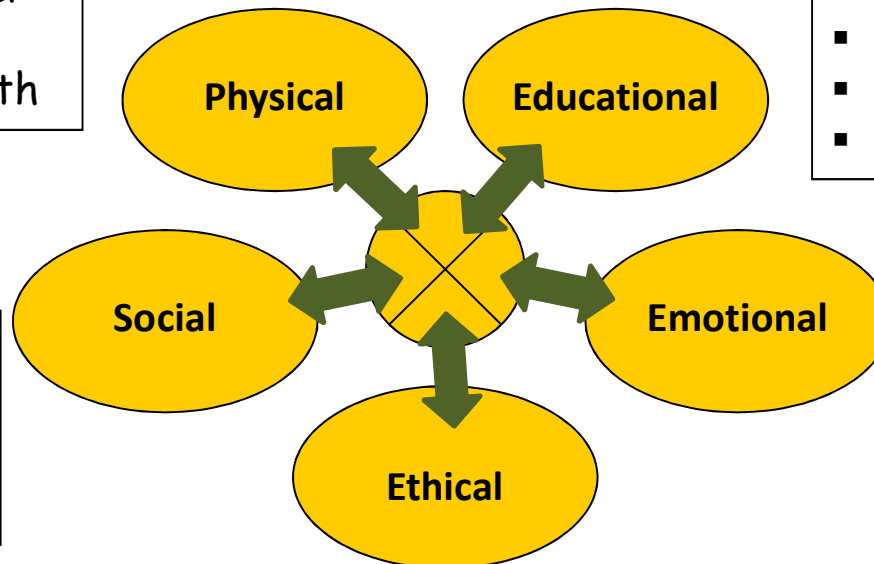
Website: www.careafrikanetwork.org.uk

The Needs of Children

The principal needs of Children are interdependent.
They include needs that are:

- Sleep
- Shelter
- Food
- Warmth

- Knowledge and background
- Encouragement
- Language & communication
- Acceptable behaviour
- Creativity



- Community
- Peer Group
- Friends
- Acceptance

- Self respect
- Identity
- Purpose
- Challenges

- Honesty
- Trust
- Belonging
- Love
- Stable relationships

Previous UK social/cultural model exported to Africa

**Community
collapse**



Family collapse

Labour mobility
leads to
destabilisation of
community support

Stigma towards
poverty both
adversely impacts
family and causes
community to step
away



Institutions

Provide physical
support

But ignore emotional
needs

Punitive impact on
family exacerbates
collapse

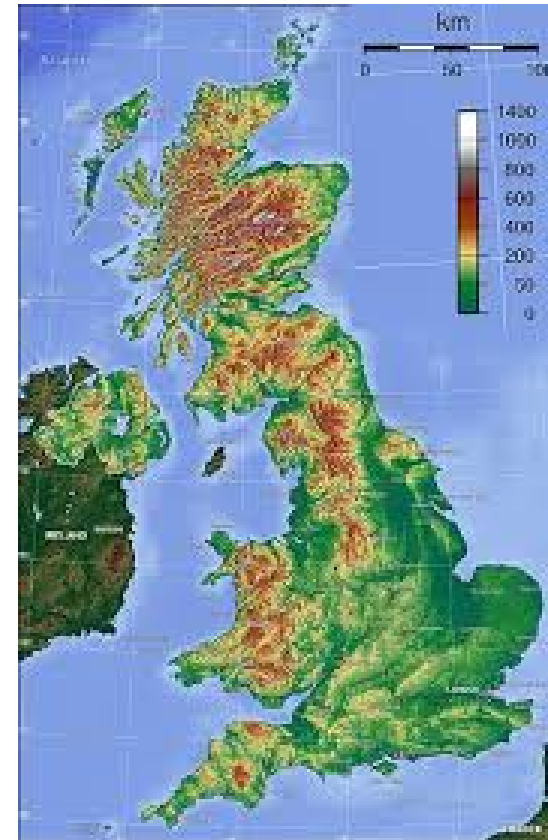
Children's psycho-social needs not properly understood

Development of UK care model

- In the 1950s Bowlby's research for the World Health Organisation recognised the importance of the emotional needs of children. A warm, loving, intimate, continuous relationship with a mother or mother substitute is essential for later life.
- He recognised that a lack of adequate quality and continuity of psychological care in childhood prevents normal psychological development and also undermines educational development. It even impairs physical growth.
- Bowlby established the importance of the "Attachment" need, although this was sometimes wrongly interpreted as the importance of the Mother in meeting the attachment need of the child.
- Margaret Mead observed that different cultures satisfy the "attachment" need in various ways. For example African shared care, where the essential attachment relationship is shared between a few key extended family members, can provide the quality and continuity of relationships that are necessary.

Current UK Thinking

- A child needs to grow up as part of a loving family, and where ever possible their own loving family. This is now recognised as an essential right of all children.
- Planning for children in difficult circumstances will always aim for this. Only if adequate or 'good enough care' is impossible in their own family would the alternative be considered of providing the child with a suitable loving permanent adoption family.
- Despite this many children are in alternative care, often for far too long, without stable placements and with very poor outcomes.



Fundamental principles

- It should be engraved on every social worker's heart that:
 - Care in the birth family does not have to be "better" than an alternative care solution
 - So long as the family provides "good enough" care, it is every child's right to be brought up as part of their family.
 - Care that is "not good enough" would be, for example, where the child is being abused and the abuse cannot be resolved by external interventions by social workers
 - No child should ever be removed from its own family when a grant of material aid would make this unnecessary.

Attachment and Resilience

- **Attachment:** Recognises security and continuity.
 - Good attachments
 - Broken attachments and their re-establishment
 - But difficulties arise when there has been poor attachment in the first instance
- **Resilience:** Observed factors that enable a child to cope with hardship.
 - Similar conditions are necessary for good attachment and resilience to adversity or broken attachments
 - Emphasises importance of security of family in meeting attachment needs and providing resilience
- **Institutional care:** Generally is unable to provide either the quality of attachment relationships a child needs, or the continuity needed. Have been described as total deprivation in this respect.

Attachment need is essential

- It is essential for the development of a child that the attachment need is met, especially within the first two years
- It underpins the child's future ability to form relationships and develop a good outlook on life
- Both the quality and continuity of these relationships are important
- The attachment need is best satisfied by growing up in its own, loving family
- Good foster care may provide an adequate alternative provided the care is permanent and continuous
- Institutional care will generally not provide either - see the outcomes from babies' homes in Eastern Europe
- **WARNING** - relatively few breaks in an attachment makes it difficult for the child to attach subsequently

African extended family and community care

- Traditionally African children belong to an extended family
- They are the responsibility of the whole community, which is overseen by the village chief
- The system has proved successful for centuries in meeting the needs of all children including OVC
- This has been despite the tragedies and catastrophes that countries have faced
- The African system compares favourably with the UK welfare state, but has the additional merit of being family and community orientated
- It should be valued and developed to meet the challenges that now face Africa

Sesotho Law

- The African care system is founded on Sesotho Law.
- There are two essential planks:
 1. Each child belongs to an extended family. It is the responsibility of all in the community and not just the parents
 2. Children have a reciprocal obligation to anyone who contributes to their care and support
- The obligation is two-way and provides a structured economic incentives for good child rearing
- It has proven particularly successful in meeting the physical, emotional, social, educational and ethical needs of children

Physical support

- In the African care system responsibility resides with the extended family to ensure the physical well being of the child. Financial and physical support are provided by land allocated by the village chief according to the subsistence needs of the family
- **Reciprocal obligations** rest with the child and are discharged through the future wage support that can be provided, or in the case of girls, by the sharing of any marriage bohali that can be contributed
- **Safety Nets**
 - Ensure physical needs are met even in hardship situations through the responsibility residing with the families of both lineages
 - Bohali payments enable separated or abused women and their children to return to the maternal family. Similar obligations rest on the paternal lineage for a brother's widow and her children
 - The widows inheritance of a deceased husband's land also provides a route for physical support.

Fulfilling the emotional need

- Both extended families cooperate to provide for the needs of every child in their families
- Care is child centred
- This ensures that the child receives good emotional care that helps them become well balanced adults, successful wage earners, attract a bride's wealth payments, and a caring future head of a family
- The child's reciprocal responsibilities encourages economic responsibility in adult life
- In challenging circumstances the attachment need is fulfilled through close relationships with the extended family
- Shared care provides continuity in the attachment need when the mother may not be present
- Orphans are cared for in the extended family, supported by the community, and overseen by the village chief.

Social, Educational, Ethical needs

- Growing up in an extended family fosters a sense of belonging and self-esteem. Growing up with numerous children of relatives also fosters friendships and mutual support
- Extended family members assist the child in receiving the best possible education so that the child can provide wage support for them in their old age
- Family members are obliged to pay for formal education whenever possible
- All family members contribute to teaching essential skills as part of the indigenous education system
- Skills taught include child care, cooking, pottery, house building, agriculture, and animal husbandry
- The indigenous education given by the family and community also includes philosophy, ethics, history, poetry and music
- Indigenous education culminates in "Initiation Schools"

A story of success

- The African care model has developed to meet the attachment need of children, but also builds resilience to hardships
- Its principal features are:
 - Child centred care from close quality relationships with a few family members, and other supportive relationships with the wider family
 - Shared care that provides continuity if the mother is not present
 - The child's development aided by a philosophy of community involvement
 - Reciprocal obligations on the child which give an economic incentive for excellence in upbringing and education
 - Orphans automatically cared for by the extended family, supported by the community, and overseen by the village chief
- Continuation of this system is essential if the needs of future generations of children and adults are to be met.

Destructive pressures at work

- The African care system is at risk from a number of external pressures that threaten its destruction. These include:
 - The increased geographic mobility of labour
 - Westernisation of care culture and institutions
 - Consequences of poverty
 - The AIDS orphan crisis
 - Institutionalisation of children
- A shortage of land coupled with the geographic mobility of labour has created conditions that shift the economy from a subsistence to a cash economy
- The Land Act in Lesotho would have destroyed the extended family care system ... but fortunately it remains unimplemented outside of Maseru

The AIDS orphan crisis

- The AIDS orphan crisis has exacerbated these pressures by leaving many AIDS orphans traumatised by the death of both parents, and without any means of support
- Extended family members may still exist but with so many of the income earning generation dead, financial support is often unavailable
- This can lead to child-headed families, and children living on the streets who must resort to crime and prostitution to support themselves and siblings
- Westernisation and institutionalisation of care threatens the traditional system with total collapse and the disastrous consequences this would bring

The AIDS orphan crisis

Children orphaned by AIDS

- Neither words nor statistics can adequately capture the human tragedy of children grieving for dying or dead parents, sometimes stigmatised by society through association with HIV/AIDS, plunged into economic crisis and insecurity by their parents' death and struggling without services and support systems in impoverished communities.



The AIDS orphan crisis

Children may experience deaths of both
parents and siblings through AIDS

- This results in trauma and often in stigmatisation.
- Children who live through their parent's pain often suffer from depression, stress and anxiety.
- Sudden poverty means they struggle to meet new commitments as a child head of family, farming and caring for younger siblings.
- Emotionally vulnerable and financially desperate orphaned children are more likely to be abused and forced into situations such as prostitution in order to survive
- There is considerable evidence that children separated from their parents are placed at increased risk



The AIDS orphan crisis

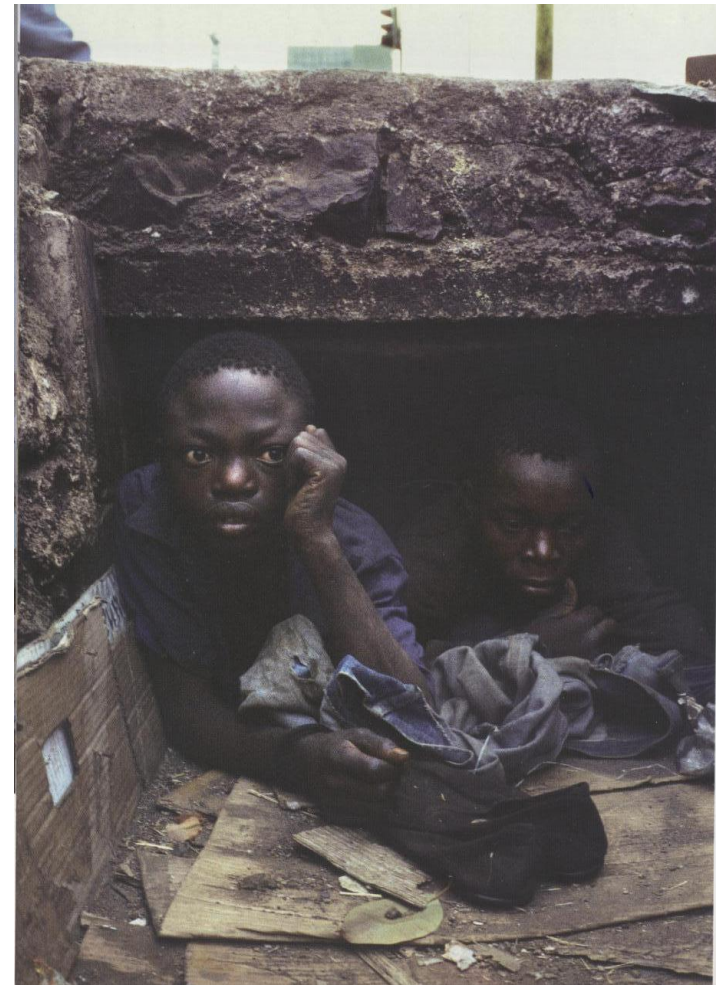
**Child headed families
struggle alone with
adult tasks and
responsibilities**



The AIDS orphan crisis

When care systems can
no longer cope children
may end up on the
streets

- To support siblings children are forced to live on the streets and become vulnerable to prostitution or crime for survival



African care system breakdown

- The breakdown can be characterised as 10 steps:
 1. The extended family comes under stress
 2. Extended family remains intact, but is no longer capable of meeting the needs of children
 3. Community members replace the extended family
 4. Child-headed families start to emerge, albeit still supported by the community
 5. Foster care placements become more common, or adoption within or outside the country
 6. Small family group homes become established
 7. Child-headed families become detached from the community
 8. Larger institutions are established
 9. Street children become prevalent
 10. Children become destitute and eventually die.

Failure of Institutional care

- Westernisation of care practices and the introduction of institutional care has proved particularly damaging to traditional African care
- Poverty remains the main reason why a child's needs cannot be met, but poverty should not be a reason for consigning children to institutions
- It is more cost effective and helpful to the child's development for families to provide for their own needs
- Sadly many children have been admitted to institutions for inappropriate reasons
- Institutional care disadvantages the family and community to the detriment of society
- The poorest lose contact with children and thus forfeit their future security net
- Institutional care is extremely inefficient in that it reserves scarce resources for a very few
- The poverty it engenders tends to create yet more demand for institutional care

Research into institutional care

- Simms estimated (1985) that:
 - "for the cost of caring for one child in a damaging African institution for one year, 1000 children could be permanently supported in their extended families by developing income generating projects"*
- A 1997 study of children's institutions in Lesotho showed that:
 - 67% of admissions were not needed
 - 92% could be prevented if alternative help had been available
 - 8% required only temporary care whilst the family was traced and rehabilitation planned
- The reasons for admission had the purpose of:
 - Obtaining economic advantage through free child rearing and education
 - Poverty which meant the family could no longer feed or educate their children
 - Protection of the child in the absence of social workers to resolve the situation
 - Abandonment of children and a lack of police to trace the family

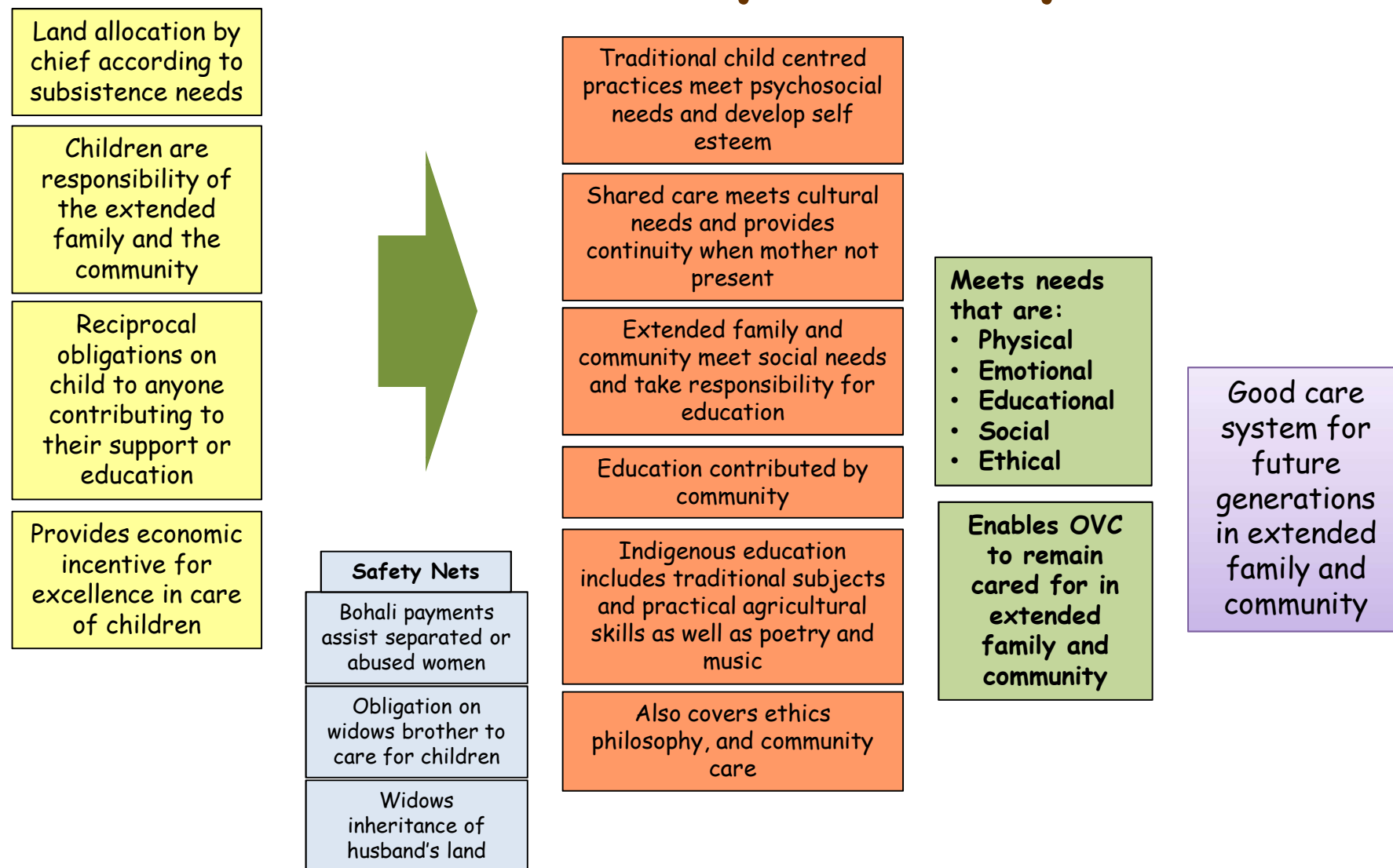
Maintaining the African system

- Instead of institutions, families need help and support to sustain the African care culture and continue to care for children
- Communities must be empowered to support families and care for OVC
- Where immediate family members cannot provide adequate support then the more effective approach should be to provide help from the extended family and community, and if this is not forthcoming then from NGOs and finally government
- If adequate care is still not possible then suitable carers in the extended family or community should be identified, and assisted (if necessary) to provide this care
- If destruction of the cost effective African care system is allowed to continue it will have a disastrous effect and leave thousands of destitute adults and children, as well as reversing all development goals.

Planning emergency child care

- If the traditional system has failed completely, and the child is seriously at risk, perhaps from substantial abuse, should temporary alternative care be considered.
- In these cases a plan should be made immediately for the safe return of the child to their parents or extended family
- Only when all efforts have been unsuccessfully applied for the safe return to family and community should permanent alternatives be considered such as adoption
- No child should be left to live permanently in an institution. Such 'Places of Safety' must be temporary whilst work is actively carried out to enable sustained and permanent care in their own family and community, or if this is not possible, then through adoption
- The extended family and community care system needs to be supported and developed so that it can rise to new challenges in meeting the care needs of the many OVCs

African extended family and community care system

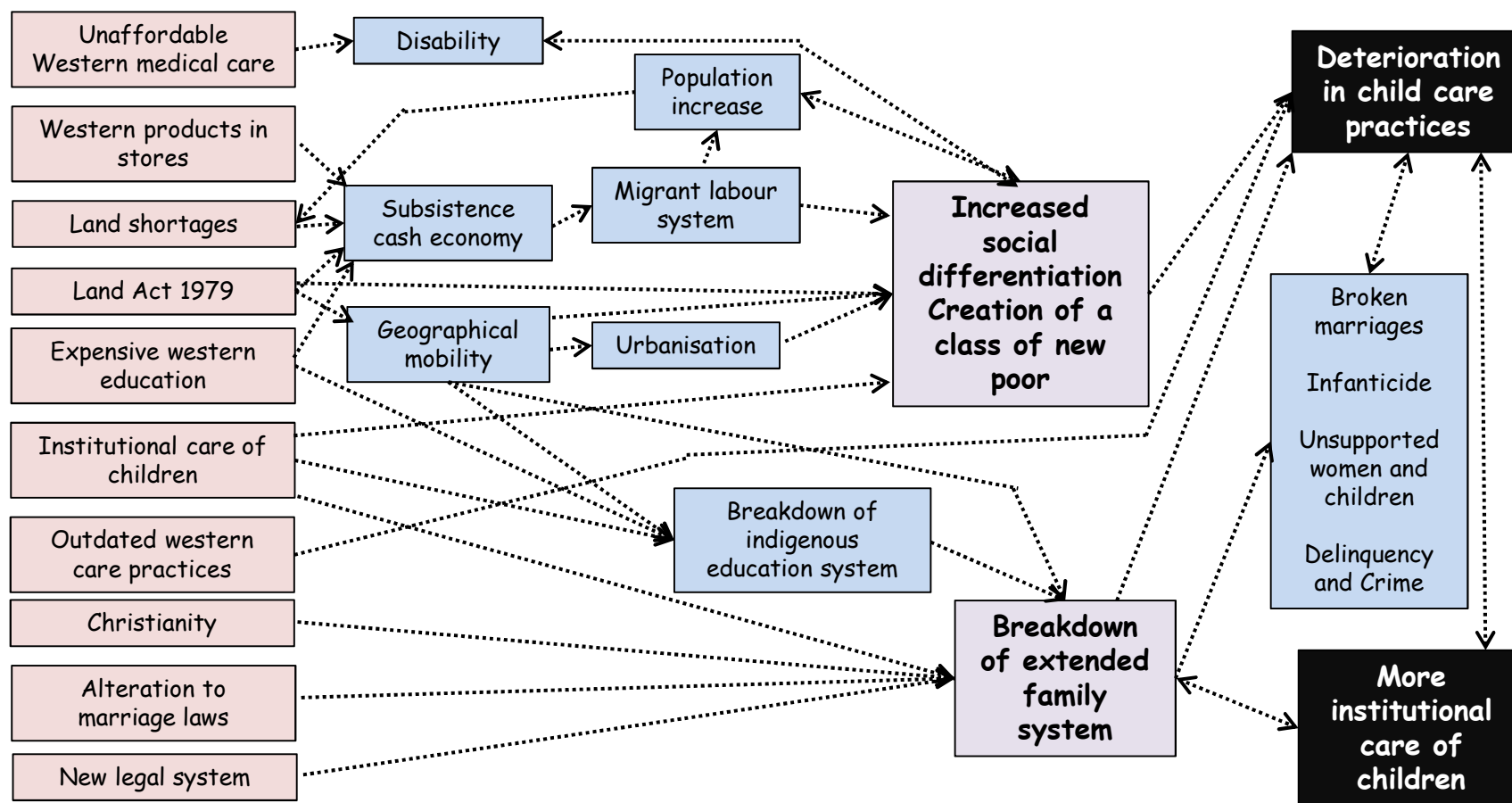


Effects of Western influences on African care system

Western Influences



Their Consequences



The challenge

Reversing the destruction of the African care system is a challenge facing all who care about children

The beneficial and cost effective extended family and community care system must be supported and developed to meet the new challenges facing Africa so that it can continue to meet the needs of the future generations of children and vulnerable adults

CAN research in four countries

Care Africa Network has researched how four countries have risen to the challenge of reversing the destruction of their extended family and community care systems by introducing initiatives that empower the provision of good care for children despite these extraneous pressures.

The background in each of these countries is somewhat different.

Ideas and Methods from 4 countries



Uganda



Kenya



Eswatini

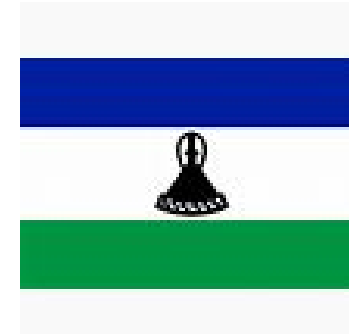


Lesotho



All these countries have excellent projects that empower the continuation of community supported family care for OVC despite challenges.

Lesotho



- Lesotho is a remote mountainous kingdom traditionally reliant on subsistence agriculture. Over the years it has changed from a subsistence to increasingly a cash economy with each family dependent on the cash earnings of family members. Their earnings are distributed amongst the extended family who usually continue to farm the family homestead
- With so many of the middle wage earning generation dead, the care of many orphans often falls on the older generation. But many of this generation have lost the wage support they relied upon from their children who have died
- Employment opportunities are scarce, particularly with the reduced employment of Basotho mine workers in South Africa
- Although primary education is free, the cost of uniform, shoes, registration fees, or the need to earn ones' own keep, perhaps as a herd boy, make it out of reach for many of the most needy OVC. Secondary education is expensive and not available to most

Lesotho



- Westernisation, poverty, and the *AIDS* orphan crisis has put pressures on the extended family care system and its capacity to care for an increasing number of OVC in the family
- Institutional care of children has been introduced to Lesotho. It is as an easy option but inappropriate, cost ineffective, and damaging. It competes with the beneficial and traditional system of care provided by the community and extended family
- Child abuse rates are high and child protection systems are needed for vulnerable OVC
- Communities have innovated to find ways of meeting the needs of all the orphans and vulnerable children within the extended family supported by the community, as is the African custom.
- The achievements are remarkable.

A catalogue of some Lesotho initiatives and projects

- Village and urban support groups for OVC
- Training support groups
- Village care facilitators
- Psychosocial programmes
- Child protection training
- Share cropping of orphans' land
- Conservation methods in agriculture
- Permaculture (key hole) gardens
- Training in income generation
- Training in community development
- Station days for registration and health checks
- Educational access
- Mother and babies' care and educational centres



Eswatini issues



- Eswatini struggles with three devastating and interrelated problems:
 - **HIV** - As of 2016, Eswatini has the highest prevalence of HIV among adults aged 15 to 49 in the world (27.2%).
 - **POVERTY** - Poverty has persisted. Nationally, 59% of Swazis lived below the national poverty line in 2017. This follows a decline from 63% in 2009, and 69.0% in 2001. By international poverty standards, 38.6% of Swazis lived below the 2011 purchasing power parity (PPP) of \$1.90 per person per day.
 - **FOOD INSECURITY** - These problems have been exacerbated by rising food insecurity following several years of persistent drought. In February 2016 the Swazi government declared a national drought emergency as a result of an El Nino induced drought. 300,000 people are estimated to be dependent upon food aid for survival.

The challenge ahead



- The rapid increase in the mortality of parents caused by HIV and the AIDS pandemic has left a generation of bereaved and traumatised children. Coupled with the high prevalence of poverty, this has denied many children their basic human rights and services.
- The Government estimated that 130,000 children, or almost one third of the children in the country, are orphaned or vulnerable. This number was expected to grow to 200,000 by 2010
- Eswatini has an admirable tradition of extended family and community care of OVC but with so many middle-income-generating adults dead, the burden of caring for the large numbers of young children without parents falls on the elderly.
- The Eswatini Demographic and Health Survey (SDHS, 2007) estimates that a third of children do not live with either parent. Increasing poverty and so many AIDS orphans has placed unprecedented pressures on the extended family and traditional community structures which struggle under the burden

The National Emergency Response Council on HIV and AIDS

NERCHA coordinates and facilitates the national multi-sectoral HIV and AIDS response and oversees the implementation of the national strategic plans and frameworks. Aspects include:

- **Food nutrition** - food aid and food support at Neighbourhood Care Points (NCPs), agricultural input-provision support and back-yard gardens.
- **Education** - school fees, school materials, and uniform support, and a school feeding programme.
- **Socialisation and protection** - support for child-headed households, prevention of and protection from abuse, legal support, and provision of shelter.
- **Psychosocial support** - including grief and trauma counselling, emotional counselling, substance and abuse counselling, and home-based care.
- **Community strengthening** - including Kagogo centres, Neighbourhood Care Points, (NCPs), support groups for people living with HIV/AIDS (PLHIV), caregivers and external caregivers, basic medical services, credit, development finance, income-generating activities, and income support. The income support includes the elderly grant, Young Heroes support, child welfare grant, public assistance grant, foster care grant, and OVC support, which are received by some of those in need.

Challenges facing OVC in Kenya



- In contrast to Lesotho and Eswatini, Kenya has already become more significantly westernised. In many instances traditional African care systems have broken down and been replaced by the permanent institutionalisation of children.
- Institutions caring for children have mushroomed taking over from community and extended family care systems. They have become the default mechanism for children in need.
- Institutional care of children is cost ineffective and cannot meet the needs of children who need to be raised in a caring family.
- Children are admitted for inappropriate reasons and are then unable to return to their families. Often the whereabouts of a child's family is not recorded. Children become permanently institutionalised and find difficulty in coping as adults.



Breakdown in Kenyan society

Westernisation, increased social differentiation and institutional care has led to a breakdown in traditional Kenyan society.

- Many children live on the streets. The multitude of different ethnic groupings in Kenya has led to intergroup conflict with consequent, homelessness, poverty, trauma and deaths.
- Although Kenya is wealthy in comparison to Lesotho and Eswatini, the egalitarian nature of African society has been replaced by social differentiation
- The slums of Nairobi create appalling living conditions and lack access to essential services, education, and employment. Primary education is officially universal and free, with free school meal, but schools are not provided in slum areas.
- Corruption is a challenge at all levels.
- Child abuse rates are high in families and in the institutions meant to protect them. HIV/AIDs has created orphans and poverty.



Reversing the trend to institutional care



- The most impressive projects in Kenya are those that try to reverse the trend to institutional care and rebuild African community and extended family care systems for OVC.
- Organisations such as 'Little Angels' work to influence policy and legislation, and to train institutional staff in returning children to good family care. Resources thus released can be used by other families to provide good care; thus preventing the institutionalisation of their children.
- However the legacy of thousands of institutionalised children who are unable to cope in society as adults is a daunting challenge. Without records, rehabilitation is difficult since often contact with the family has been lost. The only means of providing permanent family care in some cases is adoption.
- Child protection programmes are being developed, but with significant challenges owing to lack of services to meet children's needs and protect their rights in the community, together with the practice of permanent institutions where children are often abused.

Other Kenyan projects



- Other projects attempt to address the lack of opportunities and the poverty trap of the slums, such as developing income generating projects for those most in need and furthering education; although it would be better if these inequalities and the lack of provision of basic services and education in slum areas could be addressed at a macro policy level.
- There are a number of excellent projects for the support and empowerment of those infected or affected by AIDS, and that develop income generating projects to enable families to support themselves including the OVC of relatives
- Kenya has also developed an impressive cash transfer project for the most needy in some areas, but exit strategies are needed such as development of income generating projects.
- Little Angels is an excellent example of a project that works at the policy level and with institutions towards reintegrating institutionalised children with their birth family or providing permanent adoption. They aim to provide institutions with the competence to return institutionalised children to the care of their family, and provide the family with the help they need to cope.
- The institutions are then able to use the resources released to assist other families in caring for their OVC. Empty institutions can become centres for promoting the good family care of children.

The task facing Kenya



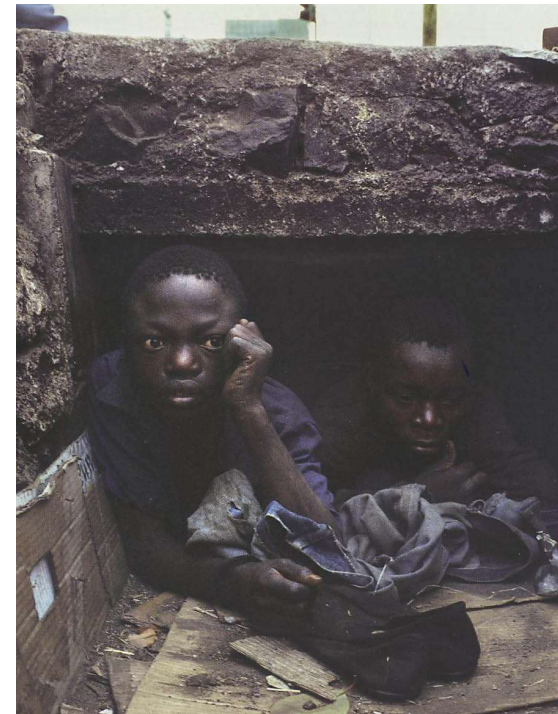
A difficult pattern to break

- Rebuilding community structures, divert people from an institutionalised way of thinking, and recast laws and funding arrangements that favour institutions represents a huge task .
- Donor support for institutions is a major problem since they provide incentives for institutions to collect more children, instead of working with communities to enable them to remain with their families.
- A complete lack of records when admitted to an institution makes rehabilitation difficult since the child may not know the whereabouts of its family. This can lead to individuals becoming institutionalised for life, and frequently abused.
- Kenya now has a huge problem of institutionalised children growing to young adults and not coping in all sorts of ways in the community.
- Corruption is a major issue. There are many people wishing to foster raising the danger that they will pay officials for the privilege. This can result in trafficking. Stricter controls are a necessity.
- The position is exacerbated by government and community officers being rewarded for children 'rescued', and not for children that have been rehabilitated.

Challenges facing Uganda



- Uganda, admirably, has been the pioneer of adapting a policy of supporting a community development approach to meeting the needs of OVC, but nevertheless faces challenges
- Poverty and HIV/AIDS including orphaned children
- Recent conflict in the north; refugees and traumatised child soldiers
- Street children
- Mushrooming of institutions introduced by aid organisations and a lack of understanding even amongst social workers of the need for children to grow up in a family, and how to enable that.



Ministry of Gender, Labour, and Social Development



- Promotes issues of social protection, gender equality, equity, human rights, culture, decent work conditions and empowerment for different groups such as women, children, the unemployed youth, internally displaced persons, the older persons and persons with disabilities.
- Ministry has a mandate to empower communities to harness their potential through cultural growth, skills development and Labour productivity for sustainable and gender responsive development. `
- Care Consultant Mike Riley promotes deinstitutionalisation in Uganda, believing that many qualified social workers do not fully understand the importance of the family in the development of the child.
- He advocates direct training of all Ugandan social workers in Alternative Care, and active promotion of family care for children.

Projects promoting family care of children



Many excellent projects promote good family care of OVC, including those affected by AIDS. Some examples are:

- Ugandan Woman's effort to save Orphans, (UWESO).
- The Aids Support Organisation, (TASO)
- Reach Out Myba Parish
- Action Aid

There are also cutting edge new ideas:

- **NET 4 Hope Foundation** - Paul Brethren has exciting ideas on how to rebuild broken communities. He believes organisations dealing with broken communities, should be rebuilding them.
- **Viva Network** - is a networking organisation that provides training and consultations so as to encourage the retention of children in communities and families.

Organisations promoting rehabilitation



Retrak - a street children project

- A drop-in centre in Kampala aimed at reuniting street children with their families. Provides significant resources and social work help. Only when this fails is an alternative plan for adoption made.
- Children placed for adoption are fostered with a view to adoption. Foster families are carefully selected and trained, and closely supervised.
- Only if this care proves to be successful in meeting the needs of the child can an adoption order be made

Malaika - a transitional centre for babies

- This centre for mothers and their babies, and for abandoned babies, helps mothers get on their feet and care for their baby.
- Families of abandoned babies are traced and the baby returned with the help needed to enable the baby's needs to be met.
- Only if this fails is the baby placed for adoption with a carefully chosen Ugandan family.

Successful routes for family care of OVC



- Development of income generating projects
- Establishing Savings and Loans groups
- Rebuilding Communities
- Drop in centres for street children for purpose of rehabilitation
- Retracing families and rehabilitation of institutionalised and street children
- Empowering mothers to care for their new babies
- Training and consultations for organisations so as to enable community supported family care
- Facilitating adoption within Uganda when there is no other alternative.

Project categories – a multifaceted approach

- All countries take a multifaceted approach to the challenges they face in meeting the needs of children
- Perhaps most essential are community developments that empower communities and families to meet children's needs in the future
- Additional strategies could be necessary for children who are victims of the degradation of the African care systems, and who may be living on the street or in large institutions with no family records
- Allocation of projects to particular categories is somewhat arbitrary since most span a number of categories. Many are multifaceted which raises the child care capacity of a community through a combination of approaches
- For example a community development project is likely to use economic empowerment ideas. Some of the best child protection schemes could also be community development projects.
- The inclusion of a project in a specific category is to illustrate a point, and not because they fit solely into that category.

Project categories for the next parts of this course



1. Community development and family empowerment including rebuilding collapsed communities.
2. Economic empowerment and food security - including cash transfer, income generating projects, savings and loan groups, developing agriculture, sharecropping, key hole gardens
3. Treatment Access and economic empowerment for people living with Aids.
4. Access to education
5. Child protection programmes including identification of need.
6. Additional psycho social support programmes
7. Child empowerment programmes
8. Alternative care -rehabilitation to birth family programmes for children in institutions and development of adoption.
9. Rehabilitation of street children
10. 'Catalyst' organisations- transferring information and capacity building

1. COMMUNITY DEVELOPMENT AND FAMILY EMPOWERMENT

INCLUDING REBUILDING COLLAPSED COMMUNITIES

Community development and family empowerment

- If the African extended family and community care system is to flourish, and develop to meet the new challenges and needs of future generations perhaps the most important aspect, is a community development approach that enables families to be empowered so as to continue to meet the needs of children
- The four countries were included in the research because they all exhibited varying degrees of excellence in this respect, but their methods needed disseminating elsewhere in order to benefit more OVC.



Lesotho



Eswatini



Kenya



Uganda

Village Support Groups in Lesotho

- Faced with the large numbers of orphans, sometimes due to the death of both parents from AIDS, village communities have organised themselves into support groups.
- They innovate to ensure each orphan is well cared for within a family in the community and provided with food and education.
- This may be by growing food for OVC, developing income generating projects to finance their needs, and providing support in other ways for family members, who may then continue to provide a home for their relatives, orphans, and vulnerable children.
- This is an admirable way of community members working together to ensure that needs of all children in their community are met, whilst still living within their extended family ... as is the African custom.

Society for Women and AIDS in Africa

- **SWAALS** is an example of a Village Support Group that ensures 208 orphans in Ramapepe are cared for by extended family members, or by members of the community where necessary
- The village allocates land and supports group members. Each support group member has special responsibility for 5 orphans ensuring their needs are met, and give psychosocial support
- Support group members work on the land to grow food for the orphans, and are helped by the orphans after school
- Orphans learn horticulture and receive extra psychosocial support from their support group worker in addition to that from their caring relatives.



SWAALS project

- Orphans are collected together after school and have a communal meal here from food grown for them on the donated land
- Food is also given to them to take home to their caring relatives
- Support group members raise money through income generation to ensure that all OVC can attend school



SWAALS project

- The Department of Social Welfare provides training for the support group leaders in the psychosocial support of the bereaved children. Leaders then train other group members
- The group has inspired 20 surrounding villages to follow their example
- This cow was donated to the group by a villager and provides milk for the orphans



Urban Support Groups Lesotho

- Urban support groups for OVC have an even more difficult task since orphaned children do not always know the whereabouts of their extended family
- Urban support groups try to ensure they are cared for by families or by a support group member
- They raise money to ensure orphans have food and education through income generating schemes and grant applications
- They also provide additional psychosocial support



Tsoane support group - Maseru

- Tsoane support group is an example of an Urban support group
- This group has 13 members and helps 29 OVC including 4 child-headed families
- These children whose parents had recently died lived alone in this tiny room
- As they had no family, a support group member took them in to live near her and cared for them



Maseru support group

- It was encouraging to meet in an area of Maseru in 2015, leaders of support groups that had developed with the encouragement of the Chief
- Between them many were already using many of the methods disseminated by this course.
- As a result of their discussion they planned to introduce village savings and loans groups to add to their initiatives to empower local families in the care of their OVC.



Lesotho Red Cross

- A powerful way of empowering communities to continue to care for OVC is by working in partnership with the communities and village chiefs by providing training and development, and supporting village support groups.
- An excellent example of such a project is that run by the Lesotho Red Cross. There are many reports of its successful impact, but perhaps best summarised by Chief Ntsane of Ha Ntsane who said:
- *"The project has brought changes in co-operation. People now want to come together to see if there is work to be done. We see the Red Cross as a saviour come to alleviate the problems of orphans and vulnerable children. The sad faces are disappearing from the children. We see them as children once again..."*

Lesotho Red Cross

- The project works in partnership with communities by developing, training, and supporting village support groups for OVC
- It provides training programmes for village chiefs, care facilitators, volunteers, youth leaders, and teachers.
- It includes the prevention of HIV, children's rights, psychosocial support for orphans, counselling, child protection, conflict management and dealing with stigmas

*OVC whose care is
overseen by the village
care facilitator*



Lesotho Red Cross

- The project assists with food production on communal land for OVC; and developing income generating projects for support of OVC.
- Elderly carers help by growing food themselves, whilst youth volunteers are encouraged to assist.
- It also advises on the establishment of safe water supplies in villages.
- It funds and facilitates the development of village income generating projects.

Widower, whose children have also died cares for his orphaned grandson, growing food with the help of Lesotho Red Cross



Lesotho Red Cross trains village care facilitators

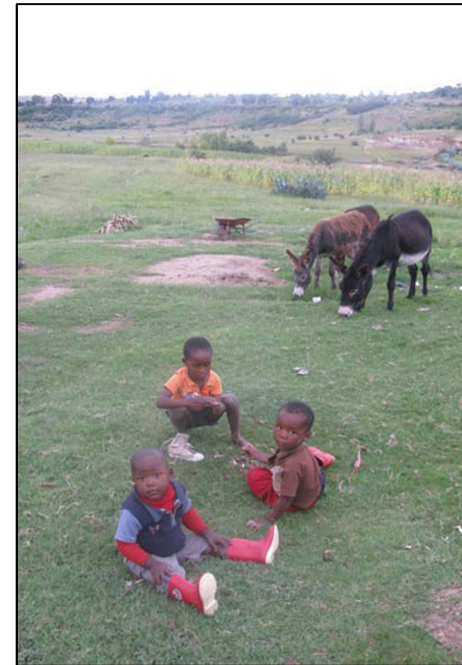
- ❖ A Leader of volunteers growing food on communal land for OVC



- ❖ Village Care Facilitator with potato harvest from communal OVC land



- ❖ ... and some of the OVC that she oversees



Lesotho Red Cross Psychosocial support

- Lesotho Red Cross assists communities by ensuring each OVC is cared for by a loving relative
- It trains community volunteers in psycho-social support and works with dying parents to prepare for children's future
- Works with children providing psychosocial support using tools such as The Tree of Life
- Makes memory books and boxes for children and encourages them to make their own and hero books
- Facilitates development and provides training for youth clubs, playgroups and buddy clubs for OVC

- ❖ Lesotho Red Cross workers with some of the tools they use when training in psychosocial support



Lesotho Red Cross support and development

- Lesotho Red Cross encourages and trains local support group members to run playgroups for OVC. This group made the toys the children play with.
- Lesotho Red Cross has financed village income generating projects. The income from these is then used to support and meet the needs of OVC in the village
- It also supports the improvement of village water supply schemes by, for example, protecting water sources from contamination by animals



Community development approaches in Eswatini

- Like Lesotho, Eswatini has a persisting and admirable culture of community care
- Community care organisations exist on a national basis but the community caring groups are more active in some areas than others

Community care schemes Lutsango LwakaNgwane

- This is an outstanding example of a beneficial community-care scheme that empowers families and communities to continue to care for children.
- A national regiment of women volunteers under the Queen, operates in every region of Eswatini, but is more active in some areas than others. It promotes Swazi culture and customs including community care. In response to the HIV/AIDS pandemic it has evolved its traditional women's activities to care for and support the community OVCs.
- The programme is known as Banakekeli Bebantfwana Bendlunkhulu. Children belong to the community, and the community has the responsibility for caring for the child, even when a child has lost its biological parents.
- It supports OVCs in their homes, whether in families or in child-headed households, and identifies children who are in particular need. It helps in whatever ways are required, including building houses and providing material support of food, clothing, care, and psychosocial support for child-headed families.

Lutsango LwakaNgwane Community volunteers at work

- A volunteer walks several kilometres each morning to care for an extended family of three child-headed families where all the older generation have died.
- She sees them off to school each morning and ensures that their needs are met.
- The Lutsango LwakaNgwane has also built a house for these children.
- This particular group of volunteers work hard to farm land on which they grow sorghum. They use the profits to provide for the OVCs they support in the community.



Where children lived before



Community care schemes

Marula project

- In addition, the Queen has started a Marula project to create income generating activities for women across Eswatini.
- The Marula tree produces fruit, fruit juice, and marula beer, as well as seeds from which oils, soaps and lotions can be manufactured.
- Women throughout Eswatini collect Marula seeds and extract the nuts which they sell to a Marula factory
- It would be beneficial to OVCs in Eswatini if this project could be expanded further by training volunteers and families in income-generating projects
- These would include appropriate agriculture and permaculture methods to secure food supplies and ensure sustainable self-sufficiency
- Methods for sustaining production in drought conditions are a priority.



Other community development initiatives in Eswatini

Rural Health Monitors (or Bagcugcuteli)

- Established by the Government of Eswatini in 1976 to spread primary health-care to rural communities in all chiefdoms and sigodzi (home clusters).
- Each Rural Health Monitor is responsible for 20 homesteads in their community. Initially responsible for training communities in primary health care, personal hygiene, environmental health, sanitation, immunisation and provision of basic medication, but now provide home-based care services following the advent of AIDS.

Bananakekeli labanakekeli labagulela ekhaya

- Volunteer Community Home-Based Caregivers who take care of the sick within their respective communities in both urban and rural areas.
- Often mobilised by NGOs, community-based organisations, faith-based organisations, women's groups, youth groups, and Organisations of People living with AIDS. Also develop support groups for such people.

Other community development initiatives in Eswatini

Community police volunteers

- Volunteers carry out policing roles under the Royal Eswatini Police

Community Support Officers

- Operate under the Ministry of Regional and Youth Affairs develop and implement programmes for households/families caring for children including OVCs. They:
 - Support efforts to identify OVCs and ensure access to relevant services
 - Integrate OVC strategy and work plan into Regional Development Plan
 - Facilitate HIV and AIDS awareness activities at grass-roots levels
 - Encourage initiatives for support of OVCs
 - Maintain a management information system for recording OVC numbers.

Lihlombe Lekukhalela

- Community development child protection programme described further in later section of course

Home based care in Eswatini

- Conducted by local community volunteers this includes many impressive agricultural development projects, socialisation and child protection initiatives, psychosocial support initiatives, and support for vulnerable or child-headed families
- Working in consultation and partnership with local community structures is crucial. If communities are involved in developing an idea from its inception the community will 'own' and implement the strategy and its projects leading to a sustainable future, even when those initiating a project withdraw.
- Projects range from food aid for those in urgent need to social development which in turn spawn income generation, development finance, and development of agriculture and homestead gardens. Impressive are the large number of family and community volunteers working at every level to meet children's needs whether taking children to be cared for in their own homes, or community volunteers working to meet the needs of OVC.

Ugandan community development

- Uganda has been a pioneer of the community development approach for meeting OVC needs. Many government and non government programmes are broadly of this type, empowering extended families to continue to care for OVC.
- These will be addressed under the relevant categories, such as economic empowerment and food security, which are of course an essential aspect of any community development approach.
- A particularly important and pioneering community development approach is the Net for Hope Foundation. This is worthy of consideration because it endeavours to re-establish communities that have already collapsed.

Rebuilding Ugandan communities

- The **Net 4 Hope** foundation was established by Paul Brethren
 - His background is in child mental health and his specialism is in drug addiction and uses. He employs systems theory and a cognitive behaviour approach, and previously ran a clinic that focused on the practice of social systems in the community, and where he trained other clinicians in the matrix model.
 - Paul came to Africa in 2008 to develop community work following the death of his sister in Africa, and was inspired to carry her work forward.
 - His thesis is that community psychology can sabotage community development. His view is that poverty is a mind-set. People expect to be poor and where corruption is rife they expect others to cheat. Therefore they compete and do not co-operate. Lack of trust in each other leads to sabotage of any help for individuals or individual progress.

The Net 4 Hope approach

- His approach is to teach trust of each other and thus persuade communities to change their psychology and mind-set away from an attitude of destruction and poverty and broken relationships, which has led to nihilism and self-destruction.
- Instead communities must be encouraged to develop as a thriving supportive community not as a self-destructive one. An asset based approach can enable this. Economic opportunities and relationship based help is required in order to establish a co-operative community.
- The Buckeye community is the N4H pilot project. In this project the community is encouraged to develop its own solutions.
- The community selects nine key strong and effective leaders. One leader represents each group in the community, for example elderly people, children, single mothers, single men, etc.
- Leaders are assisted in registering a community NGO, which is owned by the community. Through this community members are empowered to help themselves.

N4H Buckeye community

- There are approximately 3,000 people in the Buckeye community, some in very poor areas, but there are also some middle-class people.
- The aim is that any community member should have access to:
 - Training
 - Support groups
 - The credit sharing scheme.
- He believes you have to create revenue for the benefit of the whole community, and then a saving scheme. His plans include:
 - A fish farm, which is being built,
 - Perhaps a manufacturing plant, or
 - A solar production unit.
- He obtains expertise and initial funding for establishing these businesses, which will produce revenues excess to that needed by the community. The project requires capital at the start but then it will be self-sustaining.

Practice and approach

- The nine elected leaders decide on the payment for labour. This is similar to a tax system providing care. A Community Savings Service Bank (CSSB) teaches the population how to save.
- To benefit from the scheme community members must attend classes and support groups for which they could also get credit hours. Attendance at a group counts as part of a community service.
- The groups are relevant to each sector of society or a particular need. For example one is entitled "Father's Heart", where the discussion is focused on what it means to be a father. This is aimed at changing an entrenched mind set.
- Groups focus on relationship building. Support groups lead to community reconciliation by:
 - The restoration of broken relationships.
 - Looking at the inner self and how it affects an individual's interactions.
 - There are Alcoholism and Children's Needs service groups to deal with these problem areas.

"It takes the community to change a community"

- Net 4 Hope also believes training is needed in:
 - Overall structure and philosophy of the scheme
 - Making the constitution
 - Counselling
 - Administration of the groups.
- The Buckeye project is a pilot. Future plans for community rebuilding propose taking on the challenge of Bakia, a big slum area in Uganda.
- The Kebber foundation in Canada is working on transformation and is linked to the university. It may send students on field placements.
- Network 4 Hope is registered as a not-for-profit organisation in US and Uganda



Further reading - developing community care for OVC

- 'From Faith to Action - Strengthening family and community care for orphans and vulnerable children in Sub- Saharan Africa' by Firelight Foundation 2006
- To obtain copies of this publication (free of charge) email info@firelightfoundation.com
- Or download from the Firelight website www.firelightfoundation.org

2. ECONOMIC EMPOWERMENT AND FOOD SECURITY

**ESSENTIAL TO ANY
DEVELOPMENT PROJECT**

Economic empowerment and food security

Essential to any development project

- The Net 4 Hope approach of rebuilding caring communities that have been destroyed has exciting possibilities for African community care.
- However, it relies on the successful development of community income generating projects or businesses that can fund the project.
- Economic empowerment and food security are an essential part of any community development approach for OVC.
- They are particularly essential to communities flung into sudden poverty by the AIDS epidemic.

Food Security

- **From food aid to economic empowerment and home food production**
- In food emergencies, such as the drought driven food shortages of Eastern Eswatini, emergency food aid is sometimes essential, although it is now recognised as being counterproductive in the longer term.
- Sponsorships, cash transfers or social security benefits are a better method for enabling food security and education access, but both should be replaced when practicable by economic empowerment.
- Nonetheless all these methods that enable children to remain in the care of their extended families are infinitely more preferable than removing the children to be cared for in institutions.

Combating HIV/AIDS poverty and food insecurity - Eswatini

- **The National Emergency Response Council for HIV and AIDS (NERCHA)** was established to oversee the implementation of a strategic plan for:-
 - those sick with AIDS,
 - the orphans and vulnerable children caused by AIDS, and
 - the elderly generation, many of whom have lost their economic and other support that was previously provided by their children who had died, and who are often left to care for orphaned grandchildren but without the financial means to do so.
- This presentation focuses on OVC, but it also includes ideas and methods that also assist vulnerable adults who care for the OVC.

Food and Nutrition in Eswatini

- 69% of the Swazi population live below the poverty line and some 43% are in extreme poverty. Many are vulnerable to food insecurity. 29% of under-5s suffer from chronic malnutrition. Almost one quarter of the population have received food assistance, although this is recognised as being detrimental since it acts as a disincentive for the indigenous production of food.
- Families that cannot provide food for OVC are unable to care for relatives and orphans as is the custom. Food security is also crucial for OVCs to benefit from the psychosocial support provided by living with a family; rather than in a child-headed household, on the streets, or at a damaging institution.
- Free school meals greatly benefit children who have access to education, but do not reach most neediest children who are unable to attend school.
- Persistent drought in the East together with the numbers of OVC living with unsupported elderly relatives has required a continued emergency response of food aid.

Neighbourhood Care Points

- Although not recommended as a system for replication, NCPs have been a major feature of the emergency response that provides the food and care for OVC. On a small village scale they can be beneficial, but their disadvantages are now becoming apparent.
- NCPs were built in many areas and staffed by community volunteers. OVCs attend these daily to receive food aid, some care and education if they were unable to attend school. The plan was for NCP's to grow food, but few succeeded and instead most relied on food aid.
- Many OVCs still had no food at home, so when the centres were closed, they did not eat. In addition the family members who cared for them felt displaced by the NCPs.
- Care from NCPs cannot replace the essential caring relationships provided by family members.



CAN's views concerning NCPs

- CAN's belief is that instead of funding NCPs, the monies would be better spent assessing the needs of an individual child, and devising plans to meet its needs within the family.
- For child-headed families, this will involve identifying a suitable family caregiver, and for all OVCs implementing a plan that enables the caregivers to meet the needs of the children in their care.
- This is likely to involve training and, when necessary, an initial capital investment in food self-sufficiency and income generation, together with help from the community such as share-cropping or growing food on communal land as well as perhaps initially cash transfer or food aid.
- Education is better provided by enabling OVC to attend school where they would also receive a free school meal. Existing NCPs could be used as centres for the assessment and coordination of children's needs and providing training for self-sufficiency, pre-school playgroups, or bereavement support groups.

Cash transfer in Eswatini

- **The elderly grant**, although small (E600, or approximately £50 paid four times a year), has been instrumental in improving the lives of elderly people in Eswatini, many of whom have lost their children to AIDS, and who would have provided for them. Therefore grandparents are left with orphaned grandchildren to support without the means to do so.



This grandmother lived with her five grandchildren in a plastic shelter until she received her elderly grant. This enabled her to purchase materials for a more substantial house which the community are building for her.



Eswatini grants and sponsorship – Young Heroes

- Young Heroes schemes for OVC Provides a good orphans and vulnerable children sponsorship programme based on the internet.
- Individuals choose to sponsor a child or children for money, for food, and sometimes also for education.
- This enables children to be cared for by their extended family.
- If living as a child-headed family it ensures that siblings remain together for mutual support and they remain in their homestead and so inherit it and their land for the future.
- As salaries of Young Heroes staff are paid by NERCHA, all the money donated goes directly to the family for the children concerned. This is often crucial in enabling family members to continue to care for the child.



Young Heroes scheme ... and its limitations

- Young Heroes has an arrangement with the Post Office to distribute the money to a child's identified caregiver, who they provide with an identity card. A field officer visits the families regularly to check on progress and collect information for their sponsor.
- Sometimes the sponsorship is insufficient and children are sent home from school because of lack of top-up fees. Sponsorship of only one child in a family can cause difficulties within a family with others in need. In addition grants for children from sponsorship schemes only benefit a few of the many children in the country who need them.
- There is also a need to train children in skills to provide for themselves in the future particularly as with pressures of poverty many have not acquired much formal education.
- Funding has been offered to Eswatini to provide a more comprehensive cash transfer system for OVCs, but first the details of its administration need to be developed. The Post Office has advised that it does not believe it has the capacity to administer a national scheme.

Social security for children in Eswatini – Save the Children

- Study (2007b) found many children, especially those growing up without parents do not have access to basic needs. NCPs offered food and informal education for OVCs but only covered two thirds of communities. Caregivers and community members agreed that food insecurity is the biggest challenge.
- Save the Children recommended the development of a social security system to ensure children receive a minimum of free, compulsory primary school education, food, clothing, shelter, water and sanitation and health services.
- A conditional cash transfer system was proposed that would provide access to education, health facilities, immunisations, and birth certificates. Infrastructure funding would be necessary and include improved schools and health facilities.
- Save the Children piloted an emergency drought-response cash transfer project during the food crisis of 2007/08. Evaluation showed that cash recipients suffered less hunger and food insecurity than they would have done without such assistance.
- They also found that cash improved nutrition with more diverse diets, allowed purchase of essential non-food items, and could be invested in assets and livelihood activities that increased incomes and empowered women. Cash delivery systems were judged appropriate, timely, safe, well targeted and scalable.
- They concluded this amounted to choice, dignity and empowerment.

Cash Transfer Programme for OVC in Kenya (CT-OVC)

- In Kenya a comprehensive cash transfer programme to a few of the poorest families is being developed. CT-OVC is a cash grant programme to support poor households with OVC.
- 46% of the population were estimated to live below the poverty line including 8.6 million children. Many OVC were deprived of basic needs due to poverty. They were also prone to exploitation and abuse due to their vulnerable circumstances.
- Recognising that the family remains the natural unit for proper socialisation and growth for every child, the key strategic response in addressing the situation of OVC is to strengthen the capacities of families to care for OVC within their communities.
- It is in this spirit that the cash transfer system was established in 2004 in Kenya. Prior to this it had been successfully developed in Mexico, Columbia, and Brazil.
- CAN understands that by 2011 it had been rolled out to most areas of Kenya.

Principal objectives of CT-OVC

Overall Objective: Provide a social protection system through regular and predictable cash transfers to poor households living with OVC so as to strengthen the capacity of families to care, protect, and promote their human capital development.

Specific Objectives:

- **Education** : Increase demand and access for school enrolment or retention of 6-7 years old children in basic primary (up to standard 8).
- **Health** : Increase access to basic health services among 0-5 year old
- **Food security**: Increase access to basic food consumption
- **Civil Registration**: Increase birth certificates for OVC, national ID for caregivers and Death certificates for deceased parents.
- **Strengthen capabilities within the household**: Increase access to other available related services.

CT-OVC eligibility selection & payment

Eligibility

- For a household to be considered in the programme it must have OVC, be extremely poor, and not benefit from a similar programme.

Selection of Beneficiaries

- The programme uses community based targeting and socio- economic assessment in the selection of beneficiaries. The Area Advisory Council (AAC) promotes the programme to the community. The community selects a committee to manage the programme at the local level which then identifies potential beneficiaries based on eligibility criteria.
- The data collected is processed using Management Information System at the Central Programme Unit, and a list of potential beneficiaries produced. The community validates the list after which beneficiaries are enrolled and payments start to flow.

Payments

- The selected caregivers receive cash payments through the Post Offices of Kshs 3,000/= after every 2 months

CT-OVC implementation

Implementing Structures

- Managed by the Ministry of Gender, Children and Social Development through the Department of Children's Services, a National Steering Committee on OVC provides policy guidelines for the programme which is coordinated by a Central Programme Unit at the Department of Children's Service.
- A technical arm of the Area Advisory Council, the District OVC committee, coordinated by the District Children's officer, implements the programme at the district level. Location OVC Committees assist in identifying beneficiaries and monitoring the programme. This is crucial in ensuring children most in need benefit. The system is also cost effective to manage so that nearly all funds benefit the OVC.

Monitoring and Evaluation

- This is undertaken continuously to ensure effectiveness and efficiency. The review is undertaken internally by programme staff and externally by auditors.
- Initially the benefits were conditional on caregivers ensuring children received immunization, growth monitoring, schooling, birth certificates and attending awareness sessions. However it has been reconsidered whether the benefits should be unconditional

CT-OVC future development

- The Director of the Kenya Alliance for Advancement of Children's Rights believes the cash transfer program is successful but there are shortcomings, for example the lack of choice of caregivers and the creation of dependency. His view is that:
 - Funds should be used for all the family and not just orphans
 - Families should be able to decide their priorities for the money, and use it for whatever the family saw as their most pressing need
 - There should be a right to choose and not told that they must spend the money on particular aspects of the child's care
 - Exit strategies should be developed and income generating training included so that families could develop self sufficiency in meeting the needs of the children for whom they cared
 - More information is available from:

OVC secretariat, Department of Children's Services

P.O. Box 46205-00100 Nairobi

Tel + 254-20-2228411 Ext 30040

Children@gender.go.ke

ctovckkenya@gmail.com

Sustainable development projects preferable to cash transfer

- Although Eswatini has developed cash transfer schemes,
- More effective than cash transfer schemes for the longer term are the establishment of income generating and agricultural projects. These can empower families and communities, particularly women to support OVC
- **World Vision** in Eswatini is a good example of many organisations that empower communities to develop income generating projects for OVC
- These practices are a powerful illustration of the community care ethic in Eswatini where children belong to the community and are their responsibility.
- Such schemes have a particular merit by enabling extended families to care for children so that their psychosocial needs can be met through growing up within a family. Unfortunately they are not in all locations.
- CAN would like to see such projects put in place across all of Eswatini through the development of support groups, the training of their leaders, and the provision of set-up capital if this is required.

Development of income generating projects is crucial

- With few employment opportunities such projects are crucial to sustainable development and meeting the needs of OVC, since nearly all families have taken orphans into their family to care for as their own.
- Savings and loans groups are a successful way of funding and maintaining income generating projects.
- Community projects where the community works together to ensure that the needs of all are met are ideal.

Income generation projects - unemployed youth in Lesotho

- The **Peka Development** group is an example of how an income generating project in Lesotho has benefitted unemployed youths.
- Mr Janefeke Hlaping worked with community groups and organisations to form the group which he chairs. It is run by 10 young people from the village who are unemployed. Their aim is to reduce levels of poverty.
- Their target groups are OVC, people living with disease (mainly HIV and TB), youth who are unemployed, and children at surrounding schools.
- The project trains unemployed youths including 1,761 OVC in income generating projects, house building, and growing tree seedlings and vegetables
- By 2009 it had:
 - provided food packages for 2,802 OVC,
 - renovated 220 houses and built 40 new houses for those caring for OVC
 - Assisted the chronically sick with relief packages of food; 2,457 patients were helped between 2005 and 2009
- It has also assisted those with HIV by enabling access to treatment, encouraging others to establish their HIV status and if necessary access treatment, reduced stigma, and enabling independence by including those living with HIV/AIDS in the training programmes.

Peka Development Group meeting OVC housing needs

A successful model for replication

- This elderly grandmother lived in an old shack with her 5 orphaned grandchildren. It leaked when it rained, froze in winter, and roasted in summer. There was no food. Unsurprisingly the grandmother was depressed by her impossible situation.
- **Peka** built her a new house, and was also taught her how to grow sufficient food for herself and her grandchildren. There was also some spare to sell.
- The income she has earned means the children now attend school. She is now content in her new house, and happy to know that she is able to care for her orphaned grandchildren.
- The unemployed young people building her house also learnt income generating skills from the project thus enabling their future self-sufficiency.



Savings and Loans Groups

Ugandan Womens Effort to Save Orphans

- An effective Ugandan project that empowers families to continue to care for OVC, and also promotes child protection and education, particularly health education is the Ugandan Womens Effort to Save Orphans (UWESO) .
- Features of its approach include:
 - Savings and loans groups
 - Development of income generating projects
 - Water provision - training group members to make water tanks which store rain water to last throughout the dry season
 - Street children project to rehabilitate street children, often refugees traumatised by conflict, that provides counselling and training in income generation projects, retraces families, and prepares for successful rehabilitation so that adoption is not needed

Savings and Loans Groups

- Lack of initial set up capital and other skills are often reasons that inhibit the development of income generating activities.
- Training community groups in the “savings and loans” method, together with any other skills required, has proved most effective at empowering communities and families to provide for the needs of their OVC.
- “Credit sharing” is a well developed and successful method researched by Care, and practiced in every area in Uganda by many organisations, including UWESO.
- A toolbox is provided, which includes a money box with three padlocks, and the group trained in the scheme. The loans are for businesses with group members trained in the relevant income generating skills.
- UWESO has now trained over 200 groups each with 25 members. All members have children to support. Families are selected by a system of peer voting where the community votes for the neediest families to participate.

S&L groups - method

- The Savings and Loans group elects a leader. They also select a record keeper and the key holders.
- The group holds meetings attended by a UWESO member who provides additional training in aspects such as HIV prevention and primary health care.
- The group is trained in credit sharing, small business skills, leadership, how to make their constitution, and serving the community culture.
- UWESO also trains community-based trainers who are volunteers who get a small stipend and sometimes a bike, and they in turn train community members

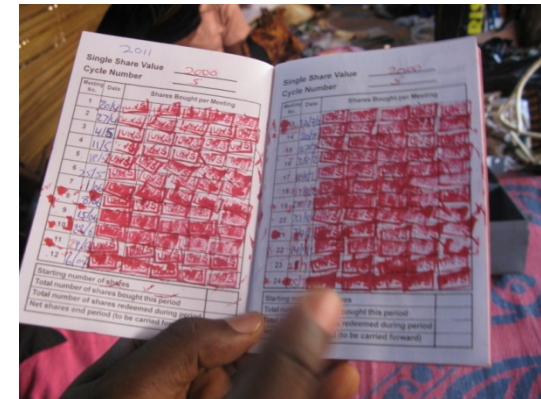


S&L groups - in practice



Starting with very small enterprises, they quickly grow to larger and successful businesses such as chicken or pig farms. The income from the businesses enables the community to support and educate the OVC for whom they care.

- Each business cycle is 9- 12 months after which all the money is paid back and the profits shared amongst the members according to the shareholding each member has bought



Savings and Loans groups

A force for positive change

- Savings and Loans Groups are encouraged by UWESO to be a force in the community for positive change.
- They check on the welfare of other children in the community and negotiate positive change - rather like the OVC support groups in Lesotho and the LLs in Eswatini.
- By grouping together, they have more impact and a voice that can be heard. They can negotiate, for example, for better education from their schools, and other resources that are needed in their area.

Seeding a new S&L group

Funding a briquette making machine

- Receiving training and funding for one initial income generating activity gives a new savings and loans group a head start.
- For instance UWESO trains groups to make "briquettes", which is fuel made from materials they collect, and which can then be sold as fuel for cooking instead of charcoal
- CAN funded this briquette making machine to start a new UWESO loans and savings group



Economic empowerment challenges

Disadvantaged urban communities

- Disadvantaged urban communities present particular challenges to economic empowerment and the care of OVC
- Some areas, such the slums of Nairobi in Kenya are disadvantaged in so many ways that economic empowerment to support OVC is a considerable challenge
- There may be no access to basic services such a safe drainage, water, and education. Individual families are likely to be separated from their extended family support system and their community
- Also there is no space for agriculture, and cash needs are therefore higher.

Korogocho slum in Nairobi

- The Korogocho slum is the fourth largest informal settlement in Nairobi. It is 11 kilometres from the central business district and is estimated to have a little under 20,000 households.
- It is a large poor population with no access to minimum services. Structure owners and tenants struggle over land and tenure rights
- Hygiene is poor and the spread of cholera, malaria, typhoid, dysentery, and water and air borne diseases can be rapid. Sexually transmitted diseases and HIV/AIDS are also widespread.
- Unemployment rates are high with the majority of youth lacking the necessary skills and education for formal employment.
- The rest of the population is employed in informal businesses. Most women operate road-side stalls offering goods at cheap rates. Men who are not employed in the construction industry or stone cutting prefer manual activities such as carpentry, and welding



Slum projects for economic empowerment

- Projects that address the lack of opportunity in these slums aim at those most in need, those affected by AIDS, and enabling access to education.
- However, some also promote support and empowerment through income generating schemes.



Slum income generating projects

- World Vision's goal in the Korogosho slums is to improve the livelihoods of all OVC. The project is designed at building capacity of OVCs with the purpose of preventing the extension of HIV.
- Urban slum areas lack the advantages of more rural communities in that they are unable to grow their own food which is essential in most rural communities for food security and economic empowerment to meet the needs of OVC
- The Korogosho projects aim to help OVC create and sustain businesses by providing vocational training.
- World vision works closely with community-based organisations which have already developed in the slums. The community based organisations (CBOs) decide which are the neediest OVC that should be targeted.
- World Vision then provides training in life skills which can enable families to protect themselves from HIV infection.

A World Vision case study

David and Orion computers

- Both David's parents are dead, his father died when he was 10 and his mother died when he was 15. There were six children in the family; David was the eldest boy. His elder sister had been at high school but died shortly after his mother died. The family now comprised two boys and three girls. David left school at 15 and assumed responsibility for them all.
- When his parents died the family had to move out of their home. David lived with his aunt in the slums where a few friends helped him to complete Forms 2 to 4, but then David left school to look after his brothers and sisters.
- **It was then that David met world vision.**
- They offered to send him to computer college where he studied IT to diploma level. World vision sponsored his IT training and then gave him three computers as a start-up kit for an IT school. He now has a successful IT business and is supporting many of his OVC siblings.

The success of Orion Computer

- Since he started an IT training school with a friend things have got better. He has many people queueing to be students on his IT courses.
- The students pay 4005 Kenyan shillings, or approximately £35 for a course of nine lessons. He now has a training school with premises.
- His dream is to have a larger college with many computers. There are many students waiting to attend his courses.
- He would like to obtain funding so that he can offer these courses freely and thus help others in the slums to develop their own computer businesses and support their families.



Developing capacity to grow food for economic empowerment and community development

- Developing a capacity to grow food is essential for food security, economic empowerment, and the sustainable care of OVC in the community.
- Although food aid may be needed in emergencies such as drought, and cash transfers may sometimes be essential in the short term so that families can care for their OVC, it is better in the longer term for families and communities to produce the food they need, or as an income generating activity.
- Community agricultural projects are particularly beneficial to ensure the needs of all are met.
- Share cropping projects in Lesotho are a good example, as are projects run by Peka Development group and Lesotho Red Cross that may utilise methods of drought resistant permaculture.

Share cropping of orphan's land in Lesotho

- When parents' die their orphans often inherit their land, but are sometimes too young to farm it and so risk losing it. They are then left with no means of subsistence.
- In a share cropping scheme orphans in this position are identified and linked to a family who can farm the land for them, and share the proceeds with the orphans.
- The initial capital for seed, ploughing, and fertiliser is provided by the scheme which then enables the production of crops and food.
- Such share cropping projects are successful in providing food for both the orphans and the family that is farming the land for them.

Wellness Centre share cropping

- This project successfully developed sharecropping by:
 1. Training 10 field supervisors who covered 65 villages
 2. The supervisors identified orphans in need with land they could not farm
 3. Orphans were linked with families who could farm the land for them
 4. The initial capital for seed, ploughing and fertilizer was provided
 5. The proceeds were shared 50:50 between the family and the orphans thus benefitting both
- This provided sufficient to meet the needs of the orphans for food, clothes and education
- It also enabled the extended family members to continue to care for the orphans as their financial needs were met.

Share cropping benefitting OVC without land

- So successful was the share cropping project that village chiefs allocated communal land for this purpose.
- Under the scheme anyone could farm the land, dividing the produce 40% for the family farming it, 40% for orphans in the village, and 20% to fund the future capital requirements for seed, ploughing, and fertilizer.

❖ Community members working on sharecropping communal land for the benefit of OVC



Share cropping for whole communities

- Sharecropping then extended to whole communities that worked together to farm communal land
- As before 40% of the produce went to those families farming it, 40% to orphans in the village, and 20% was put aside for future investment in seed and fertilizer.
- These sharecropping projects now met the material needs of orphans, and all those who worked on the project.
- Extended family members could continue to care for the OVC.



Incorporation of agricultural conservation methods

- The initial capital requirement of the sharecropping projects were reduced by training in agricultural conservation methods
- The food security section of the Wellness Centre advised on techniques that included:
 - Contouring - furrows following contours which prevents soil erosion
 - Potholing - planting a maize and bean seed in each pothole and fertilising with locally collected wood ash or manure, thus eliminating the need to plough and fertilize artificially
 - Use of local seed varieties



Wellness project other features of the scheme

- The Wellness project also includes advice on:
 - Counselling and psychosocial support for OVC
 - A child protection focus group
 - Training to help other vulnerable children
 - Income generation as well as and sharecropping projects
 - Community Development - which overlaps with the food security projects as the whole community is involved
- Which benefit all as well as the orphans and vulnerable children

Drought resistant permaculture

- Sourcing food in periods of drought presents a major challenge in many areas of Africa. Many children are malnourished from poor diet especially a lack of vegetables
- In Lesotho where 60% of the population (2005) live below the poverty line, and many families rely on subsistence farming for their food, drought conditions can result in many vulnerable families and children risking starvation
- Drought resistant permaculture methods such as keyhole gardens that utilise "grey" water can transform a family from going hungry for much of the year to producing plenty to eat and sell
- Once they have sufficient food families can then care for the OVC in the community, and finance their educational needs.

Keyhole gardens

An effective permaculture method

- Gardens are watered with waste water from washing so maintained even in drought
- Can be built using local materials freely collected
- Require no artificial fertilizer but are very productive at growing large vegetables.
- Kidney shaped so can be weeded even by a disabled person sitting in a chair
- Provide plentiful vegetables to eat, donate or sell to cover other educational expenses.



- Training communities in Keyhole gardens in Lesotho has enabled whole villages to continue to care for OVC and even sell vegetables to surrounding villages

Building a keyhole garden



Methods promoted by Send-a-Cow

- “Send-a cow” focuses on social and community development through training community groups in methods where the community works together. Training is provided in:-
 - Horticulture including Keyhole Gardens for each family
 - Marketing of produce
 - Hafir dam construction for storing water for irrigation
 - Fuel saving stoves, and their construction
 - Tip Tap hygiene, which improves hygiene and saves water by making a simple Tip Tap from a jerry can
 - Child protection awareness
- Livestock Rearing. Those trained are expected to “**pass on the gift**” both in the methods and by giving the kids of goats to other needy families in the area.



Keyhole Gardens Resources

- Send A Cow - DVD: Key Hole Gardens - Life through a Keyhole.
 - <http://www.sendacow.org/>
 - info@sendacow.org.is
- Send A Cow Lesotho Training Manual, Social Development, Horticulture, Livestock, marketing compiled by Send A Cow Lesotho - 2007
- **Catholic Relief Services** have also trained villages in this method and published an excellent instruction manual of how to make keyhole gardens:
 - Catholic Relief Services Key hole Garden Manual. A Manual for Program Managers, Implementers, and Practitioners.

MOVE - CRS project in Lesotho

- MOVE is for Mountain Orphan and Vulnerable Children Empowerment



- 2,100 orphans in the area have been fostered with an extended family member
- Initially station days monitor progress in meeting the needs of OVC and plan future interventions
- The project donates starter seeds, garden tools, and frost covers. It manages and trains community work groups to build keyhole and trench gardens which will provide food, even in drought conditions
- The group builds these for each household enabling adequate food for OVC, and income for their education.

MOVE in Lesotho

- The project installs irrigation systems, and provides training on nutrition for community members
- Life skill camps are held for orphans and vulnerable children
- They is also training for community leaders, teachers, community based organisations, resource facilitators and education volunteers in psychosocial care and support, child protection, gender awareness including the rights of women and girls, and conflict resolution
- Move also has a project for increasing awareness of educational needs and enabling access to schooling (see later).



Agricultural productivity in Eswatini

- In Eswatini, increasing agricultural productivity and competitiveness are key to addressing the root causes of poverty and food security. It is a national priority (NAS, 2007).
- **The Ministry of Agriculture and Cooperatives (MOAC)** was established in 1967 with the aim of facilitating the management and development of the agricultural sector in Eswatini. It consists of three core technical departments:
 - agricultural and extension
 - veterinary and livestock services;
 - cooperatives development and marketing
- The aim of the Ministry is to achieve food self-sufficiency and security and promote economic growth in order to enhance the quality of life of rural communities. This is to be achieved through diversification and enhancement of commercial agricultural activities, formation of cooperatives, development of appropriate technologies and efficient extension services, whilst ensuring stakeholder participation and sustainable development and management of the country's natural resources
- Government home economics officers train communities in homestead trench gardens, food storage and preparation, and good child care. They also promote breastfeeding.



Agriculture in Eswatini

NGO assistance

World Vision

- Trains farmers in new farming methods
 - Distributes farming implements to communities
 - Encourages communities to establish back yard gardens and plant fruit trees
 - Provides goats for vulnerable children
- ❖ Church members trained in agriculture by World Vision grow sweet potatoes on land donated to them by a community member. Proceeds of sales are used to meet needs of OVC in their community

The MAYO centre

- Trains Government agricultural extension workers in permaculture methods, such as trench gardens - which require no artificial and expensive fertilisers
- Train communities in these methods to enable self-sufficiency in food production for even the poorest families as the capital required is reduced



Drought resistant permaculture

A CAN intervention

- Despite years of drought in the East of Eswatini causing crop failure and the need for food aid, CAN found that neither the Department of Agriculture nor the aid organisations had heard of keyhole gardens which have been so successful in Lesotho
- Community groups visited in Eswatini reported that if they could teach families the method they could empowered communities to help care for their OVC
- CAN provided the Government and NGOs with the CRS training manual on keyhole gardens, together with funding to buy seeds for the neediest families. The organisations trained their employees and community based volunteers to teach families this method.
- Since then it has been reported that key hole gardens have become established in the drought stricken east of Eswatini
- Organisations with volunteers at grass root community level are particularly well placed to spread these methods widely. It is the purpose of this course to promulgate the successful ideas that have been uncovered by the research in this manner.

3. PROJECTS TO ENABLE PEOPLE LIVING WITH AIDS TO MEET NEEDS OF OVC

PREVENTION, TREATMENT AND EMPOWERMENT

Pamphlet reference Page 57

An important group

- People living with Aids are a group that particularly needs help to access treatment so they can survive to care for their children.
- There is also the need to support and economically empower these people as well
- Some excellent projects have developed that specifically target this group, although they may also be advantaged by the methods already described
- These projects focus on the prevention, treatment and empowerment of people living with AIDs so that they can meet the needs of OVC

Kenya Widows and Orphans Support Group

An excellent example of a project that provides support, protection, treatment opportunities, income generation creation and empowerment of those infected or affected by AIDS, some of whom live in slum areas.

KWOSP Vision

- The vision of KWOSP is for a society where all persons infected and affected by HIV/AIDS can attain quality livelihoods.

KWOSP Mission

- KWOSP strives to improve livelihoods for women infected and affected by HIV/AIDS and protect OVCs from all forms of abuse.
- This mission is accomplished through broad strategies of providing comprehensive psychological, emotional, and physical care and support, whilst collaborating with key stakeholders especially communities and the Government



KWOSP activities - 1

Feeding Programs and Food Baskets for Orphans and bedridden widows.

- Desperate families are provided with free monthly baskets of food that supplement their meager resources. Those on ART gain benefit from this activity as food intake aids drug absorption, and quickens recovery from infection.

Orphan's school support

- Aimed mainly at ensuring OVCs can access uninterrupted education. School accessories are provided including uniforms, books, and pens for the younger orphans in primary schools. In some instances school fees are paid for bright orphans in secondary schools. School drop outs are accommodated through a vocational training programme below.

Vocational training for older orphans

- KWOSP has seconded over 112 orphans to various vocational training institutions to learn skills from which they can earn a living. These skills include; tailoring and dress making, computer maintenance, carpentry and joinery, hair dressing and beautification, electronic repairs and maintenance, metal work & fabrication, welding, panel beating and automobile mechanics. Many of these orphans are today earning their own living thanks to support from KWOSP and development partners.

KWOSP activities - 2

Training widows living with HIV/AIDS on memory book and disclosure to children affected by HIV/AIDS:

- Trains the guardian and caregivers in how to inform OVC about their parents. The surviving parent who is living with HIV/AIDS is trained in how to disclose their status to children and prepare them for their parents death. Issues such as inheritance and family tree are discussed in the Memory Project.

Provision of Home-Based Care and Hospital Visits

- Home-based care for the bedridden and home visits to ascertain if children are living in a favorable environment and identify their needs. Guardians and other family members are taught to handle the affected and the infected widows and children.

Provision of counseling and psychosocial support to widows living with HIV/AIDS:

- Counseling helps widows and orphans to come to terms with the loss of loved ones and to cope with their HIV/AIDS status.

Group Therapy Sessions and sharing of experiences:

- Offers a chance for widows to meet twice each month to share experiences regarding HIV/AIDS, inheritances rights, and socio-cultural practices

KWOSP activities - 3

Families Matter! Program

- A strategy that targets adolescents, parents and guardians. It equips parents with skills and confidence to talk to about sex and sexuality with the aim of delaying the sexual debut

Income Generating Activities for widows living with HIV/AIDS

- Training in tailoring and dressmaking. Also a revolving loan scheme started for membership as a long term strategy of care and support

Grandmothers support.

- Targets households headed by aged grandmothers. Project improves housing, gives access to clean water, and emphasises the importance of sanitation through establishing safe pit latrines

Dairy Goat project:

- Addresses nutritional needs of the HIV/AIDS infected and affected households and serves as an income generating activity. Since 2006, KWOSP has provided dairy goats to over 30 vulnerable families in the Nyando District of Nyanza Province

KWOSP activities - 4

HIV/AIDS Behavior Change Communication

- Strives to prevent new HIV/AIDS infections. KWOSP organizes monthly HIV/AIDS education outreach sessions that target both youths and adults.
- Trained personnel facilitate sessions on HIV/AIDS and for those living with HIV/AIDS. Provides HIV/AIDS education as well as sharing personal testimonies and experiences.
- The key issues are the science of HIV/AIDS, prevention of HIV infection, safer sex options, condom use, and socio-cultural practices that enhances the spread of HIV/AIDS form the key issues addressed. During these activities, KWOSP encourages community members to seek voluntary counselling and testing services. IEC materials and condoms are distributed free of charge to participants

HIV Testing and Counseling (HTC) Services:

- KWOSP recently embraced the delivery of HTC services to the general public. Strategies employed include door to door campaigns, outreaches and moonlight activities. KWOSP HTC officers are trained and certified by NASCOP

KWOSP in action

KWOSP trained these widows in tailoring and funded their sewing machines. As a result they have developed a successful business in the slums and are able to support themselves and the OVC for whom they care



KWOSP with CAN help

- This young mother is an AIDS orphan who was trained by KWOSP in dressmaking. She given a sewing machine which enabled her to support herself and her little boy.
- The Kenyan ethnic riots destroyed her house and sewing machine. She and her little boy escaped with their lives. Unable to earn a living she slept on the floors of her friends' houses in the slums.
- When CAN first met her she was staying here with no electricity, water, drainage, toilet, or even a door. She, her little boy and a new baby slept on the floor without even enough space to lie down.
- CAN donated a new sewing machine with which she was confident she could rebuild her business, rent a house, and support her family.



3
days
later



The AIDS Support Organisation in Uganda

- TASO is an excellent programme helping People Living with AIDS throughout Uganda.
- TASO empowers and supports such people and also children orphaned or vulnerable as a result of AIDS, and the families who care for them
- It provides access to treatment and economic empowerment
- It also has services aimed more specifically at helping OVC
- The 2011 programme provided Young People from 12 centres with:
 - HIV prevention for 9,050
 - Counselling for 6,483
 - Health care for 6,354
 - Education (formal and vocational) for 3,481
 - Child protection for 5,708
 - Economic strengthening for 2,783
 - Food security for 17,142

Access to Treatment and Economic Empowerment

- TASO provides support in various ways by forming community support groups of people affected. It helps struggling families, who often lack food, to recover their health, get on their feet economically, and educate the OVC in their care. It empower others in the group to do likewise.
- One example is a man who was bedridden for 10 years and suffered from TB and AIDS. TASO enabled him to receive treatment and funded his first income generating piglet project. Now his health has recovered he has given piglets to other families in the group, and has expanded his work to other successful income generating projects. From these he supports and educates 7 children including 4 orphaned grandchildren. He is currently building a house with his own hands for them all.



CAN also funded a TASO piglet project

- CAN funded a similar piglet project for a 60 year-old grandmother, widowed by AIDS. Ill herself with AIDS, she was struggling to care for her children and her orphaned grandchild. She has raised 15 children.
- The income from the piglets enabled her to join the government savings scheme, develop other income generating activities, care for the children, and send her sons to vocational school; following which they too will be able to support the family in the future.



Reach-Out Mbuya Parish HIV/AIDS initiative Uganda

- **Reach Out** is a local project that treats, supports, and empowers people living with AIDs, and OVC affected by AIDS together and their families in one region of Uganda.
- Many of those working for the project are people living with AIDS

Medical Services include:

- Treatment
- Prevention, including outreach prevention work
- Counselling
- Nutrition assessment and food support for households in positions of food insecurity
- Intensive adherence assessment and monitoring

Social Support Services include:

- Village Savings & Loans Schemes - 80 savings groups formed
- Operational Child support - school fees and materials paid
- Psychosocial support - home and school visits, brass band, pop group, traditional dance groups, drama
- Child to child support,
- Legal support and shelter

Reach-Out Roses of Mbuya tailoring

- Roses of Mbuya offers skills and employment to clients
- It empowers woman towards self sustainability through tailoring and craft making
- Produces high quality products for sale
- Profits go to OVC programme and have funded school fees for 66 OVC



Reach-Out Community Support

Income Generation

- Clients are encouraged to become self-sustaining through income generating activities
- These include:
 - Large scale farming in Kasaala
 - Bringing grandmothers together for live stock rearing, crop growing, piggeries and mushroom growing
 - Teaching catering skills to women and helping them to form catering groups

Network of Care

- Community ARV and TB treatment supporters ensure continuous adherence to treatment programmes
- Mother to mother and adolescent community workers support pregnant mothers and teenagers
- Referrals made to other when services needed
- Home based care provided

CAN support for Reach-Out aided family

- With her husband dead and children to support, including a disabled son, Fiona needed to find an income generating project
- Can assisted her in identifying a project CAN donated UGX 500,000 to fund the establishment of a second hand clothing sale business
- Reach-Out later reported that the initial capital had rapidly grown to a working capital of UGX 750,000 in just 4 months.



Reach-Out feedback on CAN support

- Reach-Out reported that Fiona had been able to re-enroll her two daughters into school; Stella in Senior 6 and Tracy in Primary 7. They no longer had to worry about being sent out of school because their mother could not afford to pay their school fees. These children can now afford a smile on their faces.

- Reach Out wrote:

'Your Support has helped Fiona become creative in starting up other businesses that are helping her sustain her family. Although her customer base will not be around for the next 3 months (Kyambogo University Students), she will not be resting. She has started a small business selling breakfast to Reach Out clients and staff. Together we can change many lives for the better'



4. PROJECTS THAT ENABLE ACCESS TO EDUCATION

Access to education

- Access to education is crucial if children are to support themselves, and their children and extended family in the future .
- Unfortunately it is often the poorest families who are most in need of their children's future support who are least able give their children access to education.
- Ideally free universal education is the best way of meeting educational need, but it remains out of reach in many African countries. This is especially so of secondary education which is expensive and available only to a few
- Even where universal free primary education is available, such as Lesotho, OVC may not be able to attend due to lack of funds for uniforms and school materials, or because they are needed at home to earn a living for the family or care for children
- Other places that theoretically have free primary education, such as Kenya, may have no educational facilities in slum areas

Making education available in slum areas in Kenya

- In Kenya some remarkable individuals have used their own funds and expertise to provide education in slum areas where there are no government schools.
- Moses Otungo retired from teaching after 25 years. He used his retirement benefit on this project for OVC in the Korogocho slums.
- Moses Otunga started the project initially and later Faith joined him to establish a centre for secondary education.
- The churches also raised money to help the project get started.
- There was no school in the Korogocho slums before this.

Kao la Tumaini Education Centre
Shelter of Hope



Kao la Tumaini Education Centre Shelter of Hope

- Moses recognised that the most needy areas of Kenya do not get schools, and so the children have no way of accessing education.
- The children who attend this school could never afford to go to any other school, even though government schools offer free primary education, because there are still many expenses for uniforms and pens, and money is needed for food and exam entry.
- None of the children or their families in this district could afford these things so the children would be hanging about, taking drugs and getting into crime since they had nothing else to do



Kao la Tumaini Education Centre Shelter of Hope

- Moses decided to use his 25 years of teaching experience to start a school and give local children a chance of an education
- This was a challenge since there was no help from the government to be had. There is much corruption. Schools access government grants, but the richest schools who pass bribes to those distributing the grants benefit most
- There is meant to be free food for children at school, but those distributing it charge for its transport
- His school runs without government assistance, there are no fees nor any requirement to have uniforms, which his pupils cannot afford.



Kao la Tumaini Education Centre Shelter of Hope

- He runs the school with volunteer teachers who have completed secondary school. None of these get paid. They all give their time freely.
- Although they are not qualified, Moses feels that they teach well. He has produced a manual based on the normal curriculum of government schools up to standard 4 secondary school, and his students are reaching that standard.
- He has taught the volunteers how to plan their lessons and he has provided lesson plans that follow the structure that they have to teach.



Kao la Tumaini Education Centre Shelter of Hope

- These are the children who would not get an education elsewhere. He believes no parent who could afford education would choose to send children to his school.
- They are taught well and in small classes of around 12 with each pupil having their own desk. No child is turned away.
- Despite being taught by unqualified teachers many reach the Standard Form 4 level when they would normally graduate to secondary school.
- A problem is that most cannot afford the entrance exam fee of 6000 KSH or about £50. This year he has 12 students in form 4 but only two can afford the fee.



Kao la Tumaini Education Centre Shelter of Hope

- Initially the secondary school started in this tin shack with an earth floor and no equipment with the primary school
- Mr Otango managed to raise the funds to build the present secondary school buildings. He had to buy the land and then demolish the metal shacks on it. He raised the money for the new building which was partly built by volunteers.
- The building has basic facilities, a classroom, an office and a small teachers staff room where equipment can be locked.
- The pre-school and primary schools still run in the tin shack where volunteer teachers keep the children happy and busy learning.
- Where possible younger children are provided with a meal.



Kao la Tumaini Education Centre Shelter of Hope

- As well as formal education, the school teaches life skills and HIV prevention. It also teaches Sack Gardening.
- In other rented premises Moses Otenga had started a vocational training school for children who have no formal education, perhaps because they were too old or it had not been available.
- The vocational school is designed to set them on their feet with an income generating project. He includes hairdressing, computer training, tailoring and dressmaking. He has funded six sewing machines.
- When they complete their training, he helps them with starter kits for their businesses



Kao la Tumaini Education Centre Shelter of Hope

- He also started a training initiative that targeted young people who had no education and had turned to drugs and crime as a way of living.
- He helped them learn to make footballs. He bought the material and they worked sewing them together. He included sport, particularly soccer in the programme.
- He would only let them attend if they gave up their drugs and crime. Many did so this being their first opportunity to earn a living by selling the footballs they made.
- Unfortunately this project had to close since there were no longer the funds to pay the rent of 1400 KSH per annum.



Kao la Tumaini Education Centre Shelter of Hope

- Pauline is an AIDS orphan. Her father had recently died and her mother was very ill with AIDS . She had no money for lunch and was seen crying in the classroom whilst her friends went out to eat.
- She also had no money to pay her exam fees. She was aware that when her mother died she would have to support her younger brothers and sisters but unless she passed her exams she had no hope of doing so.
- CAN paid her exam fees. The photograph shows her smile when she heard this news.



Kao la Tumaini Education Centre Shelter of Hope

- The Centre also holds workshops and classes for HIV sufferers in the slum. There are 72 adults divided into four groups of 18 who attend.
- The adults who attend these classes do so twice a week, either on Wednesday morning or Thursday afternoons.
- The programme includes workshops that teach sufferers:
 - How to live positively with AIDS
 - How to look after their children
 - How to protect their children against AIDS.
- They also provide individual counselling intended to empower them with knowledge for income generation. The counselling also helps address the problems of children with HIV, and encourages them to live positively.
- This is mainly conducted through group work. Sometimes professionals are invited to talk on specialist issues, sometimes the groups are run by community volunteers.

Kenya education issues

- Although remarkable projects like these fill some of the educational gaps in Kenya, it is really the lack of government schools in slum areas that needs to be addressed, together with the corruption that prevents resources such as school meals reaching those for whom they are intended.
- Other financial barriers such as uniforms and examination fees that prevent the poorest OVC from receiving education also need to be considered.
- Perhaps what is really needed is for Kenya to contemplate why, in a country which is not unduly poor, there are no schools available for those most in need of the empowerment that education would bring.

Enabling access to education in Eswatini

- Eswatini has introduced universal primary education starting with standard 1 and working up.
- Whilst some OVC are still unable to attend school, various strategies have emerged to fill the educational gap.
- OVC attending the community care points for food were also given a form of education, but it is recognised that it would be better if they had access to universal primary education; with a free school meal included.
- Other OVC have been enabled to attend primary schools by being granted a school fee bursary.
- Increasingly OVC are included in free primary education, but there are many financial deterrents that prevent them attending. These need to be addressed.

Education bursaries in Eswatini

- OVC Bursaries were established as a safety net to cover the fees of children unable to attend school. Some OVCs receive school-fee sponsorships from aid organisations which have helped produce a high take-up (92%) of primary education.
- Considerably higher fees of secondary education have limited the take-up to 52%, and there is also a difference between the access levels of OVC and other children.
- The government plan intends to increase gradually the free education that was introduced for grades 1 and 2 of primary school in 2010 thus enabling many children at NCPs to attend school. It has the aim of free education for all, including those with special needs.
- *Research and Analysis of the OVC Education Bursary*, a report by Save the Children Fund (2007a) recognised the OVC bursary as a positive step but pointed up a number of challenges. It noted that the bursary was fuelling stigma and discrimination, whereas free education would enable children to be treated equally in their right to access education.

Some of the challenges in Eswatini

- Other problems were also identified before the programme could develop to universal free education.
- There is no standardised fee charged by schools and the bursary is insufficient to cover the full fees of most schools. This results in the poorest children being unable to benefit from the bursary an access education as they cannot top-up the bursaries, or buy uniforms and shoes, and sometimes even the bus fares to attend school.
- Heart rending tales are told of orphans crying at their parents' grave, having been turned away from school due to shortfalls in the fees and lack of uniforms. They also lose the free school meals, friendships and other support services provided by schools.
- The plan, when studied in 2010, was to fix grade I and 2 school fees at E260 which would be paid by the Government. It is hoped that other impediments to enabling OVC to access education and the free school meal, will have been overcome.

Access to education in Lesotho

- In Lesotho, where there is free primary education the same financial restrictions stop the poorest OVC attending school. These include the cost of uniforms and school materials, as well as registration fees.
- Some children, such as herd boys in rural areas need to work either to care for their families and livestock. Increasingly the OVC from the poorest families herd the animals of more wealthy families in return for food, so that the other families' children are freed to attend school.
- Access to secondary school is expensive and many OVC do not have the chance of attending, nor is there alternative vocational training available to them.
- However a number of projects have emerged that economically empower families so that their children can access education.

The CRS MOVE project

- The Catholic Relief Services MOVE project has enabled an increased number of children to attend school in the area of the project
- This has been achieved by:
 - Training community leaders in the importance of education
 - Distributing school uniforms and shoes where needed to primary school students. MOVE also provides blankets and hygiene kits for orphans and vulnerable children.
- Caregivers temporary inability to fund schooling cost has been mitigated by:
 - The development of community fundraising mechanisms,
 - The development of savings and internal lending committees for community members
 - Resource exchanges for secondary school students.
- CRS also empowers families economically by teaching keyhole garden methods of drought resistant agriculture, and improved agricultural techniques.

Herd boys in Lesotho

- Herd boys are often disadvantaged because they are unable to attend school due to having to look after their herds on remote mountain sides
- Projects which provide education and income generating classes for them in the evenings in their rural homes gives them more opportunities for supporting their families in the future.
- **Lesotho Save the Children** has developed such a project as well as empowering income generating projects in remote areas to provide the income needed to meet the needs of OVC in their communities



Good Shepherd Centre, Lesotho

- The Good Shepherd Centre in Lesotho prevents infant abandonment by providing physical and psychosocial care and education for vulnerable teenage mothers so they, in turn, can provide good care for their babies. It offers:
 - Informal counselling and psychosocial support
 - Formal education
 - Training in income generating projects and food production, agricultural projects, and dressmaking.
 - Assistance in setting up income generating projects to support their family in their home village.
 - Training in child care
- It has also established play groups for older children of the unsupported mothers, as well as village children so as to maximise integration.



'Mothering the Mother'

- The Good Shepherd project might also be considered as a project that prevents child abuse.
- The project selects teenage unsupported mothers who have no means of supporting and caring for their baby, and may resort to abandoning the child or even infanticide.
- By caring for the mother and providing all the psychosocial support they need, together with an education that provides them with skills, enables them to support themselves and care for their baby in the future. The ethical guidance offered inspires them to do so. The needs of their baby are thus met.
- Empowering care-givers in the community with these skills with the appropriate support is fundamental for child protection projects in the community.

5. CHILD PROTECTION PROGRAMMES

Abuse of children

- The abuse of children is being increasingly recognised and uncovered in Africa and other countries, including the UK
- Abuse of children may be
 - Physical such as in corporal punishment
 - Sexual
 - Emotional
- Reasons for child abuse are often complex. This is an area that demands the highest levels of social worker skills in dealing with the issue sensitively and effectively
- Children may also need protection from neglect. Often abuse occurs as a result of poverty, which needs to be addressed through economic empowerment.

Child Protection programmes require variety of components

1. Education of the community concerning a child's needs
2. Partnership with family and community to identify cases of abuse
3. Assessment of the causes and identify unmet needs
4. Assess ability of caregivers to meet the child's needs and identify resources required
5. Construct a plan that prevents abuse or neglect in the future and ensure needs can be met
6. Implement the plan obtaining resources and help as needed
7. Ensure the safety of the child whilst this occurs
8. Undertake measures to prevent further abuse
9. If relevant obtain conviction of the abuser
10. Monitor the continued well being of the child; working in partnership with the family and community to resolve difficulties.

Difficulties in developing child protection systems

- For abuse to be prevented the perpetrator must know that it will be recognised, reported and taken seriously by family, community, chief and authorities. If serious it will lead to conviction.
- If legal processes can not deal adequately and quickly with the situation, or if there are insufficient trained people to undertake the above programme then there is a danger is that the abused child may be removed to a 'place of safety'
- This is likely to be worse than the situation from which the child was rescued
- This will be particularly the case if there is no plan to rehabilitate the child quickly safely within their family and their community.

Difficulties in child protection projects in Kenya - ANPPCAN

- The work of the *African Network for Prevention and Protection of Child Abuse and Neglect* illustrates many of the practical difficulties in Kenya
- ANPPCAN has programmes for education and identification of abuse, but are still powerless to improve matters for the child because they lack skilled personnel at the community level
- These would enable a child's needs to be met within the family
- Furthermore places of safety are only in institutions where the environment can be more damaging than the home from which the child has been removed
- Invariably no records are taken so there is no prospect of rehabilitation
- Community development projects found in Eswatini and in Lesotho could be relevant in these circumstances as described below
- Also projects that improve admission and rehabilitation practices in institutions such as the 'Little Angels' project in Kenya would be effective

Educating the community in children's needs and rights

- Key to any child protection programme is the education of community members and village chief concerning children's rights
- They must also be able to identify the signs of abuse, and have established channels for reporting abuse and accessing help
- Lesotho and Eswatini are developing in some areas an approach to child protection that educates all levels of the community on these matters, with good results
- It is reported that many abusers cease to abuse once they are aware that this will be reported and acted upon
- Examples of these schemes are the Send a Cow project in Lesotho, and the LL child protection committees in Eswatini (described later)
- There have also been some projects to educate against abuse in Kenya

KAACR

Kenya Alliance for Advancement of Children's Rights

- KAACR focuses on the implementation of UN convention of children's rights, particularly the protection of children against abuse and violence, and the Kenyan Children's Act
- It studies and researches the different issues affecting children
- It works with governments, civil society, and local organisations, including Non-Government Organisations (NGO's) and Community-Based Organisations (CBO's)
- It also works towards child protection at the national level on harmful cultural practices such as female genital mutilation
- It seeks to empower systems for the protection of children.

For more information see the KAACR website
www.kaacr.com.

KAACR child protection work

- **Education and empowerment of schools** - KAACR educates and empowers schools, hospitals, police, traditional leaders, and community based organisations in their role as child protectors by explaining the law. Hospitals and Police have been advised that they should not charge for treating or reporting abuse. Both were unaware of this. They capacity build in other ways by training in child protection issues.
- **Children's Rights Clubs** - Clubs organised by KAACR started in 1992 and ran until 1995. KAACR then withdrew but the clubs still run in schools. The clubs advise children of their rights, and give children a voice. The clubs involve young people as peer educators and have a national forum
- **Prevention of FGM** - Using child empowerment methods the project has saved many girls from female genital mutilation
- **Area advisory councils** - These are now established at district and local level to address child protection issues
- **Training elsewhere** - KAACR also train in Tanzania and Uganda by replicating the Children's Rights Clubs developed in Kenya.

CAN advice to KAACR

- CAN has described to the Director of KAACR the LL program in Eswatini and training of LL community volunteers in child protection that operates at a household cluster level (see later)
- He believes this to be a useful idea for incorporation in the Kenyan programmes since training has not yet reached the grass roots level
- Information has also been provided on Eswatini Action Against Abuse (SWAAGA.) and the Super Buddies Club in Eswatini, and support groups in Lesotho and organisations such as the Lesotho Red Cross
- The Lesotho CRS Homestead Garden Manual for the development of keyhole gardens that enable drought resistant permaculture to economically empower families
- All these are viewed as effective methods for enabling child protection and for families to support children's rights and meet their children's needs.

KAACR manuals and resources

- ***Millennium Development Goals*** (leaflet) KAACR with financial support from UNICEF 2007
- ***Child Abuse - You can help stop it*** (leaflet) KAACR and Save The Children, Finland
- ***Good Practice Community Based child Protection Guidelines and Procedure***, Save The Children and KAACR 2009
- ***Enhancing Capacity of NGOs, CBOs, and FBOs in Western Kenya - Lessons Learnt*** KAACR 2007
- ***An Assessment of Corporal Punishment in Schools*** 2008
- ***Stop Child Labour - Support Child Rights through Education, Arts and Media, (SCREAM)***. KAACR 2008
- ***Children's Rights Clubs - A facilitators Manual***, KAACR 2009
- ***Trainer's Guide for Institutional and Non- Institutional Care for Children***, KAACR 2003

KAACR is happy for their manuals and methods to be disseminated



ANPPCAN

African Network for Prevention and Protection of Child Abuse and Neglect

- Its Mission is to improve the welfare of children in Kenya and enhance opportunities for them to reach their full potential
- Its Vision is for a society in which children's rights and responsibilities are respected and valued
- Its Priorities are to:
 - Act as a national centre for protection against the prevention of Child abuse and neglect.
 - Facilitate the promotion, defence and advocacy of children's rights as set out in the UN Convention and the African Charter on the rights and welfare of the child, and the Kenyan Children Act 2001.
 - Provide legal aid and where necessary litigate on behalf of child victims of abuse and neglect, or those in conflict with the law
 - Empower communities to protect children from abuse and neglect
 - Collaborate with organisations with similar ideals to their own

ANPPCAN Programmes

- **Special programmes department** - Community-based and time bound programmes addressing issues affecting child welfare. Examples are:
 - Soweto programme aimed at raising social consciousness of children's right and how to help and protect them
 - Lower Ambira community child development programme, a community based initiative that promotes the welfare and protect the rights of children affected by HIV/AIDS
- **Information and documentation department**
 - ANPPCAN Kenya documentation and resource centre houses up-to-date collections of materials on children's issues in Kenya. Collaborating partners, CBO's and the public can access this highly specialised library for books CD-ROMs and videos
 - ANPPCAN Kenya's interactive **legal and social advice website** has an online hotline where members of the public can report child abuse and neglect anonymously. It also operated children's radio programmes run by children, albeit now closed due to lack of funding

ANPPCAN Programmes

- **Legal Services Department**

- The main aim of the legal department is to promote the legal rights of the child and to provide assistance and protection to children or those acting on their behalf who have become victims of abuse and neglect, or those who are in conflict with the law.
- Key strategies include paralegal education, research and advocacy, provision of legal aid in the form of advice and litigation, and training on children's rights.

- **The Child Helpdesk**

- Objective is to provide a sympathetic and non-judgemental ear where children and adults can talk freely about child abuse and neglect
- They confidentially receive reports from the public of cases of child abuse and neglect, or those suspected, and offer advice and help.

ANPPCAN

Prevention of Corporal Punishment

- 'No kiboko' or No Caning Days are days held for capacity building on the improper use of corporal punishment. Even though illegal in Kenya, its use continues
- A different area is selected for each day and the day includes:
 - Workshops for children that empower them on children's rights
 - Provision of information on networks that can help abused children
 - These include Child Line which is run by a different NGO. Children anywhere can dial 116 free of charge to report abuse, and receive counselling and referrals to an appropriate organisation
 - Seminars for teachers, community committees, chiefs, police and local administrators, that explain the inappropriateness of caning and which teach other methods of controlling children
- Published source: 'From Physical Punishment to Positive Discipline'
ANPPCAN KENYA 2005

Challenges to child protection in Kenya

- Challenges include:
 - Institutionalisation practices
 - Lack of records
 - Lack of re-integration social services for children in institutions
 - Lack of alternative community support and child protection systems
- ANPPCAN appreciates the bad practice of taking children to institutions but unfortunately these are the only places of safety in Kenya, albeit they are invariably full
- Children arriving at these institutions have no records. Without proper records there can be no plan for rehabilitation nor any prospect of it.
- Many children are often abused in these institutions and are worse off than if they stayed with their families. ANPPCAN is aware of this but without outreach that can work with the families little can be done to improve the position.

ANPPCAN practical challenges

- **Save the Children Sweden** has helped some police stations develop child protection units. These are small fenced off areas that act as a home for children. Training has been provided for police in how to handle children who have been abused, but often no records are kept.
- ANPPCAN volunteer social workers work with local chiefs and children's officers to refer child abuse perpetrators to court but when places of safety are institutions, which are also often abusive, this may not improve matters for the child.
- Volunteers battle against almost impossible odds with very little training to assist them in working with families to resolve issues if the child is to remain in the family
- Lack of records about children who are left in institutions is a major problem. There are now many children in institutions with no information whatsoever as to why they are there or of their origins
- Training is urgently needed in assessment, record keeping and rehabilitation care plans so that there is a chance that these children might be rehabilitated.

Corruption, an invasive problem

- Corruption is reported to be a real problem
- Many lawyers are corrupt. If children do not have access to funds they cannot get their rights represented in the courts.
- Courts take an inordinately long time. Lawyers tend to take preferred cases through mediation rather than going to court which, because of the time delay, has become a last resort
- For those who cannot afford to bribe lawyers, organisations emerged such as CRADLE and CLAN who have their own lawyers who cannot be bribed, and who help represent families in court
- The CRADLE (The Children's Foundation) is a non-profit making NGO committed to the protection, promotion and enhancement of the rights of the child through court representation, advocacy and law reform. It runs a number of programmes; such as legal Aid, Policy and Legislative Advocacy , Research, Monitoring and Documentation, Child Rights Awareness and Networking, Lobbying and Advocacy.

CAN advice to ANPPCAN

- CAN has suggested community development approaches for child protection that have been successful elsewhere. These included:
 - The LL 'Shoulder to Cry On' community and volunteer child protection programme in Eswatini, and
 - Village support groups in Lesotho together with the organisations that promote these such as Lesotho Red Cross
- These methods embrace the vital missing link of people at the grassroots level who can meet the needs of children and protect them without the child having to move to the damaging environment of institutions
- ANPPCAN attempts to empower communities with knowledge that will protect a child's rights. They recognise that without an approach that meets a child's needs and provides protection locally, then when uncovering abuse they are powerless to improve matters for the child.
- There are many women's groups and community-based organisations initiated by the communities themselves for this purpose.
- **Plan International** already works in this way, training community groups and training support groups to meet the needs of children.

Developing child protection through knowledge transfer

- ANPPCAN representative agreed that this was an area where Kenya could usefully develop further. It needs an action plan.
- An effective project is that for the international exchange of staff funded by a Norwegian NGO FREDSKORPSET, and referred to as the exchange programme North-South and North-North.
- The programmes sends people to a country where they can learn about a specific project which will benefit their originating country. Staff from ANPPCAN have worked in Uganda, Zambia, Ethiopia, Liberia, and Ghana.
- The donor funds everything; salary, recruitment to fill the vacancy created, rent and subsistence allowances for the person overseas
- On return the individual is expected to stay with the sending organisation for a year so as to implement the new skills learnt through projects in the area, thus exchanging ideas between the countries.
- Even if they do leave after the year it will often be to start a programme for another organisation
- ANPPCAN thought they might benefit from an exchange with SWAAGA and other organisations in Eswatini, and also learn about the support groups of the Lesotho Red Cross.

An ANPPCAN case study

David Ochola and the St. Johns school

- ANPPCAN has a capacity building project at St John's school in the Korogosho slums. It focuses on child protection issues, such as the avoidance of corporal punishment and the needs of the child as a first priority
- David Ochola is the headmaster of the St Johns school, which he has developed and where he undertakes his child protection work. He is writing a 25 page child protection policy.
- He noticed children trying to earn a living by collecting rubbish from the adjacent tip, a dangerous and violent place. He encouraged them to attend his school instead.
- St John's School was started to help parents in the area by catering for street children and OVC in the area who could not afford to attend school. The project recognised that children need access to basic education rather than rehabilitation.



David Ochola
St John's School
Korogosho slums

Evolution of St John's school

- David started as a teacher at the school in 2000 and worked with the community to improve the school, which is attended by many orphans.
- He then extended it to secondary level. Many of the children had no options after primary school and girls of necessity became prostitutes and boys turned to crime. He recognised the importance of secondary education.
- As headmaster of the school, he arranged for murals on the outside walls of the buildings to be painted. These are both bright and cheerful and also educational. He has also developed the extracurricular activities of children.



Success of St John's school

- Most of the ex-pupils at the school became teachers at the school. Unfortunately since they could not be paid, they often moved elsewhere and this part of the project collapsed.
- David then pursued another idea. He obtained funding for students to attend secondary school. He has helped 15 students attend secondary school, three of which now attend University with individual sponsorships.



Care in the Korogosho slums

- He also created awareness of children's rights in the area, and children report to him if they have any problems. He visits the families and works with them to resolve difficulties.
- David will work with any family to stop child abuse. He then monitors the situation until it ceases
- This is a personal initiative. He goes with the children to see their parents and provides counselling and help
- David recognises that most problems are due to poverty. He helps families with ideas for income generation. In particular he recognises that children with HIV need food at school to assist the effectiveness of their medication.



Station Days, registering OVC

- 'Station Days' are an effective idea for the identification and registration of orphans and vulnerable children and assessing their needs and progress. The process is
 - A general health check and referrals are made where necessary to meet medical and health needs
 - Psycho-social well being is checked by a counsellor who sees each child and asks them six questions about their personal, home, and school life
 - Each child is given a sweet for attending
 - They are then divided into groups by gender and age to meet their 'grandmother or grandfather' who is a same gender volunteer can discuss age appropriate issues such as health, hygiene onset of puberty, and sex
 - Next they attend the library where their academic achievement is assessed
 - Finally the children each receive a small gift such as toothpaste or soap
 - Process enables staff to be aware of progress in meeting children's needs, and make any necessary adjustments, and inform future decisions
 - Station Days were developed in Zimbabwe but are used by Catholic Relief Services as part of their "Move" project in Lesotho

Child Protection Committees

Lihlombe Lekukhalela

- Lihlombe Lekukhalela (LL) which literally means 'a shoulder to cry on', is a model of child protection that warrants replication. This is a community initiative for supporting OVC against abuse and HIV/AIDS.
- Volunteers are selected at the *sigodzi* level with the support of the Chiefs and Inner Council. A committee of four or five in each *sigodzi* is selected in the presence of the children as their protectors.
- An LL volunteer is chosen for each cluster of households. Since they know the children they are responsible for well they will be fully aware of their situations and needs.
- Lihlombe Lekukhalela is strengthened by training and support in target communities to carry out their mandate of supporting OVCs effectively
- The training has been developed by UNICEF and its partners. Relevant service providers are engaged to train selected community members.
- Several different NGOs implement the LL programme. Each has responsibility for an area of Eswatini with the objective of making the scheme available across the country.

Objectives of LL child protection volunteers

- The objectives of the LLs are to:
 - Protect children from abuse, which is defined as sex with a minor, emotional abuse, neglect and abandonment, child labour, child slavery, physical abuse including corporal punishment, denial of education, shelter and food;
 - Educate and sensitise communities to fulfil the rights of children, especially OVCs;
 - Provide an avenue for children to report abuse at the community level;
 - Reduce child abuse and exploitation by providing a 'shoulder to cry on' within the community and schools.



Roles of LL volunteers

- The role of LLs is to **raise awareness among adult leaders and parents to act against child abuse**. This involves explaining
 - the psychological and physical damage abuse can do to children
 - the subsequent damage to the community through the spread of HIV
 - how to recognise the signs of a child that has been abused and how to counsel such a child.
- LLs also reach children in and out of school with information and knowledge about sexual abuse and what to do to prevent it. This covers
 - why it is wrong for children to have sex
 - how to read the warning signs of an adult with an evil intention
 - the importance of finding someone to talk to about threats of abuse and how to get help from the LL and others in the community
- LLs also serve as a 'shoulder to cry on' for abused children. They identify children who have been victims of abuse, comfort and draw the child out to speak about what has happened, seek further help from the leaders of the *Umphakatsi* (chief), health system, the police, and the school.

Roles of LL volunteers

- LLs monitor an abused child closely to ensure that the child does not suffer further abuse
- They also provide the Chief and Inner Council with knowledge about how to stop abusers and how to ensure that the child is protected from further suffering by:
 - talking to and educating community members who pose a risk to the child;
 - discussing whether such threats require further action from the Chief and Council;
 - referring suspected cases of child abuse to the Royal Eswatini Police and give advocacy for the best interests of the child when they handle a case of abuse
 - discussing with school authorities ways of helping an abused child in school.
- LLs also refer abused children to the Royal Eswatini Police, traditional leaders, social workers, medical doctors and teachers.

LL child protection community volunteers in action

- In each *sigodzi* LLs meet as a group every week to discuss issues, learn from each other, and prepare reports.
- They exchange information about children at risk in the community, develop strategies for controlling the behaviour of potential or actual abusers, and keep records of group meetings and decisions.



LL child protection volunteers co-ordinated by Eswatini Save The Children discussing problems of preventing abuse of children due to poverty

Poverty leads to child abuse

- LLs report that most abuse results from poverty causing neglect of children's rights and forcing orphans to tolerate abuse in return for the food or education.
- LL volunteers have been trained to teach families and children who lack sufficient food income generating methods how to make homestead trench gardens so that vegetables to be grown without fertilisers
- Years of drought in the poverty-stricken areas of the Lubombo region of eastern Eswatini has rendered this method useless as the seedlings always die through lack of water. Here many people must walk many kilometres to collect water, but can only carry sufficient for the essentials
- Vulnerability to starvation in times of drought forces these people into abusive situations with consequent HIV infection. Orphaned children are particularly vulnerable in this respect.
- CAN provided Eswatini Save The Children, as well as other key organisations with manuals and money for seed, who can then train LL's to teach families how to build drought resistant keyhole gardens

Extending the LL model

- In 2010 the programme had trained 8,000 men, women and youths as LLs in 47 communities.
- It had established links between LLs and the Domestic Violence and Child Protection Unit of the Royal Eswatini Police to facilitate early reporting of abuse cases
- The Swazi Government recognises the project as a critical component of the national effort to protect the rights of children in the country and has pledged its continuing support
- Other organisations such as NERCHA have adopted the initiative and are providing funding for a roll-out of the LL at national level.
- Programme partners are UNICEF, the Swazi Government, SWAAGA, Save the Children, Swazi Police, Alliance of Mayors' Initiative for Community Action on AIDS at the Local Level (Africa) (AMICAALL) and World University Service Eswatini
- High child abuse rates in Eswatini make this programme much needed.

Eswatini Action Against Abuse

- SWAAGA's Mission is the eradication of all abuse in Eswatini, particularly that of a sexual and physical nature
- Its objectives are to empower survivors of abuse through counselling, and bring about a positive change in behaviour and attitudes through education and awareness
- In this manner it hopes to prevent gender related violence, and equip survivors to cope with the aftermath of abuse
- It seeks to bring about change in the social, cultural and legal systems
- SWAAGA works through its two main programmes of education and counselling
- It has also researched the causes of abuse and is acutely aware of the importance of economic empowerment in its prevention.

SWAAGA education programme

- The **SWAAGA** education programme is largely concerned with training workshops and educational initiatives regarding gender-based violence
- It works with academic institutions, professional and community groups, faith-based organisations, and other institutions.
- It operates through:
 - **Lihlombe Lekukhalela**, where SWAAGA provides training for the community volunteers (LLs)
 - **Girls empowerment clubs**, that are schools based initiatives aimed at empowering girls with skills and knowledge to tackle gender based violence at a personal level
 - **A male involvement project**, that seeks to transform men's lives and assist them in becoming a solution to abuse
 - **Weekly radio programmes** which are educational shows that explore gender based violence and related issues

SWAAGA counselling

- SWAAGA also assists survivors of abuse and human trafficking by providing counselling and support services
- Free individual counselling sessions are available at six bases throughout the country at Mbabane, Mankayane, Manzini, Motshane, Hlathikulu and Simunye
- Survivors support groups are often formed in rural communities for those infected or affected by HIV and where abuse remains an issue.
- These groups provide emotional support in the form of counselling, and survivors are also taught income generating projects
- Economic empowerment also strengthens survivors to resist abuse, and enables families to accommodate and provide care and protection for the orphaned children of deceased relatives.



A SWAAGA survivors of abuse, support and economic empowerment group

Economic empowerment to prevent abuse

- Income generating projects: are a good example of positive community development work that protects the rights of OVCs, prevents abuse, and enables needs to be met by empowering the families that care for them. SWAAGA funds income generating projects chosen by the community and monitored by LLs to ensure their sustainability that OVCs benefit
- Self Help Groups: SWAAGA also runs self-help groups. These seek to empower rural women economically and so reduce their vulnerability to abuse. Generally these women who will often be the carers for orphaned children of deceased relatives. This income helps provide for the needs of the OVCs and enables them to take in more orphans when needed.
- Savings and Loans: Self-help group members regularly contribute R5 to a pool from which funds are lent to group members for income generating projects. Profits provide for OVCs, but some are returned to the pool enabling the group to take on larger projects. The group decides on the project and SWAAGA provides training, skills and encouragement. Not being reliant on male support protects the women in the group against abuse.

Survivors support group in practice



- All the women in this abuse survivors support and economic empowerment group care for OVCs of relatives who may have died of AIDS.
- The income generating projects and saving and loans scheme has enabled them to do so, and empowered them against further abuse.

6. ADDITIONAL PSYCHOSOCIAL SUPPORT FOR CHILDREN

Psychosocial support

- Children growing up within a loving family will usually have their psychosocial needs met. But children who have been abused or otherwise traumatised, or who do not have a caring family may need additional psychosocial support.
- In Eswatini the need for additional psychosocial support supplementing that received from caring relatives has been identified in the UNICEF (2008c) report *National Response to Psychosocial Needs of Children strategic plan*.
- This support, which includes grief and trauma counselling, and emotional and substance and abuse counselling is provided in a variety of ways
- Schools have developed as 'centres of care' providing some counselling as well identifying a child's needs and helping them gain access to relevant resources
- SWAAGA also provides counselling for those who have been abused .
- Trained volunteer caregivers in NCPs are expected to provide psychosocial support for OVCs who attend. Whilst this is beneficial with increasing number of child-headed households it is a concern that group counselling by caregivers in NCPs may be the only psychosocial help the child receives.

7. PEER EDUCATION AND CHILD EMPOWERMENT PROJECTS IN ESWATINI

The Super Buddies Club

- Peer-education and child-empowerment projects generally involve child volunteers who are trained as peer educators.
- An excellent example is the **Super Buddies Club** which aims to be the leading institution for empowering children and youth through participation
- Its objective is to achieve an HIV-free generation by 2020
- Their mission is to provide child and youth participation platforms and ensure child protection through awareness campaigns, life skills and child-rights education.
- The values they promote are:
 - *We uphold good values and abstain from untoward activities*
 - *We do all we can to help children in need*
 - *We model good behaviour to our peers, and*
 - *We participate in community development*
- The club is immensely popular in many areas. It has enthusiastic and talented child educators trained by a well motivated and caring organisation.

The Super Buddies Club

Super Buddy Founders

- The organisation has produced the *Super Buddies* magazine since 2003. This promotes the values of Super Buddies. Its popularity amongst children led to demands for them to become Super Buddies also and the Super Buddies Club was born
- The club runs outreach programmes to 40 schools and nine community clubs engaging them in a number of different activities including drama, music, poetry and dance as a means of peer education.
- In collaboration with Save the Children, and funding from UNICEF and Art Action (of Singapore), Super Buddies runs a radio programme staffed by children providing education on topical issues and drama.
- Debates and community dialogues engage children and youth in schools and communities and a children's parliament is planned with other partners.



Super Buddies in action

- HIV prevention is taught to and by children in roadshows which include 'edutainment' (entertainment designed to educate) through drama, music, dance, poetry and other cultural activities.
- This is immensely popular amongst children and effective at empowering them with skills for life that helps protect them from abuse and retain positive values for the future.
- Peer-education programmes are a powerful way of involving children. Super Buddies hopes to expand into other areas such as teaching income-generating skills, art and homestead gardening.



8. REHABILITATION TO BIRTH FAMILY FROM INSTITUTIONS, AND DEVELOPMENT OF ADOPTION

The scourge of institutions

- Institutional care of children has mushroomed in all 4 countries, despite knowledge that it is inappropriate and the efforts to prevent it.
- The inappropriate admission of children to these institutions, instead of resolving the difficulties in their care in the community, creates a legacy that is difficult to solve.
- This is especially so since often no records are kept and all contact and information concerning the children's families is lost.
- In Kenya this is a particularly serious problem as community and extended family care systems have been depleted, and then replaced by the institutionalisation of children.

Psychosocial need challenge in Kenya

- The challenge is how to equip families so they can care for their own children and provide for all their needs.
- **Chief Executive of Little Angels**, Mr Mutero, is concerned that pressures on the extended family and lack of adequate support have already resulted in Kenya losing its system of community care and extended family.
- Kenya now has 10 to 20 years of active institutionalisation with the number of children in institutions in the region of 300,000. Whenever there is a child in need people turn towards an institution, which has become the default mechanism.
- Social workers in institutions have little training and are mainly involved with meeting material needs. They are wholly unaware of the psychosocial needs or their role in preventing admissions, or if children are admitted then the need to work towards rehabilitation to their extended family, or adoption.
- Most of the public do not understand how damaging institutions are, and even believe they have done well to get a child placed in an institution.
- This is a problem of material needs being very visible whilst psychosocial needs being invisible and unknown. It is not that parents do not care but they simply do not understand the damage done to their children by placing them in institutions.

The Little Angels project

The Little Angels Project is concerned with:

- Making laws and procedures that can facilitate rehabilitation and inhibit admissions easier
- Collaborating with UNICEF and the government on new policy alternatives to children's care
- Having kinship formally recognised so that this can be not only promoted but also controlled
- Negotiating changes of policy with institutions
- Informing public opinion about children's psychosocial needs and why institutional care is so damaging
- Developing income generating projects that can enable children to be cared for in families
- More information is available on the Little Angels web site:

www.littleangelsnetwork.org

The Little Angels project

- The project commenced in 2009. It started with children who were known to have families.
- Little Angels campaigned for the significant investment the country needed in social workers for developing family support work and rehabilitation work in families, and also the technical training for families that is required to enable their self-sufficiency.
- Little Angels targets staff and managers in institutions and capacity builds on the need for rehabilitation and preventing children from being admitted to the institutions in the first place
- They seek to change the funding arrangements for institutions so funding is dependent on the number of children dealt with rather than the number admitted. Thus children who stay with their family score as highly as children who are institutionalised.
- This frees funds from institutions for rehabilitation work which is much more cost effective.

The Little Angels project

- Little Angels is active in two fields:
 - reintegration work, mainly on capacity building
 - changing attitudes in policies and laws.
- They have also facilitated around 350 adoptions of which 55 were outside the country, and around 300 within Kenya
- Adoption systems are comparatively well developed in Kenya, and many people want to adopt, although this does need regulation.
- Little Angels was dealing with their first rehabilitation cases when CAN visited the project in 2011. They had rehabilitated 50 children the previous year, although the year was mainly spent in training and capacity building.
- In addition to the investment in social workers who can undertake rehabilitation work into families, there is also a need for technical training of families to enable their self-sufficiency.

The Little Angels project

- Little Angels main objective is to show that it is possible to rehabilitate children which many institutions doubt.
- Institutions receive £10 per child per month and therefore there is a huge incentives to keep children within the institution
- Government is supportive of the changes Little Angels and UNICEF are trying to introduce, and provide some capacity building seminars. They are trying to amend the law so that there must be an exit strategy for every child in an institution and for managers to keep records of this.
- There is also a drive to ensure records are kept when children are admitted. Without these there is no knowledge of where a child comes from and rehabilitation becomes more difficult.
- As in Eswatini the number of children that need help exceeds the number of places in the institutions.
- Little Angels has to maintain good relationships with the institutions since otherwise there is nowhere to put the children that need a place of safety.

St Clare's Orphanage

A Little Angels case study

- Opened in 2007, most children were admitted following the post election disruption when some parents were displaced or killed.
- Sister Lucy came to the institution in 2010. It then housed 75 children. She believed they needed to be return to their families and worked with Little Angels to facilitate this. At the time of the CAN visit in 2011, the number in the home had been reduced to 45.
- Some had parents who had not realised that their children were there, so they could be reunited quickly once found. 25 children were able to return to their parents when the parents were given help that enabled them to provide for them. Another 10 could go home without any assistance and should never have been admitted.
- Work is in hand to enable the remaining children to be re-united with their family, or failing that adopted.



Families happily reunited

- Some children were admitted to the orphanage when their mother had lost everything in the riots and had become ill. When approached by a social worker many years later and offered material help, their mother was happy to be reunited with her children.
- Others were admitted when the mother was ill and relatives could not afford their school fees. No other assistance was offered at the time. With assistance with school fees, at a fraction of the cost of institutional care, they were happily returned to their relatives and mother.
- Another child was taken to the orphanage by his grandmother as he was HIV positive and his grandmother felt that she did not know how to care for him. Approached later with help to access treatment for the child, the grandmother was happy to have him home with her again.



Families happily reunited

- Another child was admitted to a different institution under a place of safety order as their mother, under the influence of drugs, had tried to jump off a bridge with them.
- Their grandmother was able to provide them with a good home, but did not have the resources to travel to their area to attend the necessary court procedures to enable this. Years later a Little Angels social worker assisted her to do so.



All these cases are examples of children admitted to orphanages, when what was really required was help for the family in meeting their needs.

No child should be institutionalised when material aid would enable them to receive good care within their extended family .



A successful rehabilitation project for replication

- Kenya has an enormous challenge in reversing the destruction of the extended family and community care system
- Institutionalisation has caused the psychosocial needs of children to no longer be met and left many children, who may have been abused in the institution, unable to cope with life as an adult.
- Little Angels is an excellent example of a project that has started to address the issue of how communities can be rebuilt and children rehabilitated with their families. It is worthy of consideration for replication elsewhere.
- With so many children in inappropriate institutions without any record of their families whereabouts the question arises whether foster care would be preferable to a child remaining in an institution.
- The ideal is of course for rehabilitation with their family, but the view of Little Angels is that foster care would not work in Kenya

Child Welfare Society of Kenya 'Foster Homes'

- Kenya has large children's institutions, but also organises adoption and some reintegration of children into families.
- They have established what are called small group foster homes, but these are really small family sized children's homes.
- Although they provide better care than the large institutions, they should be regarded as suitable only for temporary emergency care, since children would be better reintegrated with their family or adopted.
- Every child needs to belong to a permanent family which can best meet his or her psychosocial needs.



Rehabilitation programmes are essential

- Rehabilitation projects for institutionalised children are widely needed in Africa
- Uganda, Eswatini, and Lesotho have also seen the mushrooming of institutional care despite policies of community development and approaches that rebuild extended family and community care systems that can prevent institutionalisation.
- Nonetheless the growth of institutions has been difficult to control and reverse.
- Skills in supporting families in order to prevent admissions, together with rehabilitation programmes for children that have been institutionalised need to be promulgated
- The Little Angels scheme could be a model for replication.

Eswatini UNICEF 2010 report

- In Eswatini residential care is seen as a last resort. The focus for any child admitted to such care is that it should be returned to family care, preferably its own.
- Services facilitating this remain a challenge. A study in 2006 found that up to 700 children lived in 20 registered residential child-care facilities. Such facilities continue to increase despite a policy that they should be the absolute last resort for the care of children.
- The report accepts that official foster care is preferable to care in residential facilities, but fostering is little developed in Eswatini.
- Whilst adoption is recognised as being the best permanent solution for a child that cannot return to its extended family, adoption is reported to be under-utilised despite research showing that the longer babies stay in a residential home, the more their emotional, cognitive, and physical development suffers
- Inter-country adoptions in Eswatini are on the increase even though the country has yet to ratify the Hague Convention

Preventing residential care in Eswatini

- Institutional care is damaging to children and often occurs as poverty prevents families from adequately meeting the needs of OVC. It is also cost ineffective. It is better to use resources for assisting families to meet the needs of OVC in their care.
- It has been estimated that the cost of caring for one child in a damaging African institution, 1000 children could be permanently provided for by developing income generating projects in the community. Family-based care is preferable and more cost-effective than institutional based alternatives (Simms - 1985)
- Eswatini recognise that the most important factor in meeting the psychosocial needs of children is that they should grow up as part of a caring family and community.
- Child protection and supplementary psychosocial support that can supplement that provided by the family will also reduce the need for care in institutions

Other support policies in Eswatini

- Other support policies that help prevent alternative care in Eswatini, and which have already been considered, are:
 - **Food Aid** which is necessary for disaster mitigation and preferable to institutional care. It often enables families to continue to care for their OVC
 - **Cash transfers** which are preferable to food aid, since food aid can act as a disincentive to production and is not sustainable. Cash transfer, whilst also not sustainable, enables the development of income generating activities and food production the income from which can be used to fund education and thus enhance future income for the community.
 - Income generation, agricultural development, and education are the sustainable methods of poverty reduction that can ensure future self-sufficiency.

Rehabilitation or adoption of abandoned babies

- In Uganda the **Child I Foundation** provides temporary care for abandoned babies
- It attempts to trace their mothers and provide the help they need so that they can care for the baby.
- 53% return home.
- Child I allows mothers who would have abandoned their baby to stay at their centre with their baby while the centre provides her with help and income generation to care for her baby
- The foundation can arrange adoption for babies whose relatives cannot be found

9. REHABILITATION OF STREET CHILDREN

Rehabilitation of street children – Retrak, Uganda

- Retrak's objective is to rehabilitate street children into family care.
- There are 5,000 unaccompanied children living on the streets of Kampala due to conflict, as well as many displaced families
- Retrak workers approach children sleeping on the streets and tell them of the Retrak drop in centre
- At the centre football sessions are run which can be joined by the street children. This is often the means used for introducing them to the benefits offered by the centre
- Children can opt to stay at the centre where they sleep and are provided with meals, counselling, catch-up education, training in income generation, family tracing ... as well as football
- Rehabilitation work is aimed at enabling these children to return to their families

Retracing families and rehabilitation in Uganda

- Retrack contacts other organisations in the child's home area to locate the family and also visits the area themselves
- If lost the child can be returned home at once
- If the problem is more complicated a Retrack worker works with the family to solve issues so the child can return home safely
- Retrack introduces income generation set-up that enables the family to support the child
- It can refer to other organisations such as the government savings and loans scheme, and income generating training
- When needed it can provide school fees
- Retrack provides counselling for the child
- It will work with the family to resolve any other problems or child protection issues

Half-way houses and fostering

- Children who cannot be quickly returned to their family are transferred to half way houses. These are cottages with permanent house parents who live there all the time and have no more than 8 children living with them.
- In the half way houses the children receives intensive counselling and preparation for rehabilitation. Catch-up education is provided and income generation training is also offered before being re-integrated with their family
- Where rehabilitation attempts repeatedly fail and children require alternative parenting they are placed with carefully chosen and intensively supported foster parents with a view to adoption.
- Children thus fostered generally thrive once receiving good family care.

Retrack and Foster Parents

- Skilled work is needed to select foster parents who must be carefully chosen, trained, matched to the child, supported and supervised
- They are paid only a minimum amount to cover the expense of caring for the child.
- Although it is clear from the child's name that they are not a birth member of a foster family Retrack has found that fostering can be successful for children who cannot be rehabilitated
- Retrack has 25 children in foster care. Another 26 have been successfully fostered and are now independent.
- None has actually been formally adopted since Ugandan law requires a child to be in a foster home for 3 years before legal adoption can occur. By then most are adult and prefer to be independent
- Older "young people" who are not successfully rehabilitated sometimes prefer to be independent. In these cases Retrack provides vocational training when they stay at a Retrack hostel so they can support themselves in the future

Uganda Overview

- Uganda has been the pioneer of a community development approach to meeting the needs of OVC
- It has some good economic empowerment projects particularly its savings and loans groups and income generating projects.
- It has a number of pioneering projects for the rehabilitation of abandoned babies and street children
- There are also some cutting edge projects concerning the rebuilding of caring communities that have collapsed.

Kenya Overview

- Kenya faces the greatest challenges for enabling children to receive good community supported care within their extended families
- Westernization has already resulted in a break-down of African caring systems and institutionalisation has unfortunately to some extent taken over
- Increased social differentiation has resulted in slums with lack of access to all services
- Both these issues need challenging at source, community care needs redeveloping, and children rehabilitating with their families, or if that is impossible in alternative family care.
- It does have a good pioneer project concerning rehabilitation from this in Little Angels.
- It has developed a cash transfer project but recognises exit strategies for sustainable development are needed such as more income generating projects.

Lesotho overview

- Lesotho has a number of excellent examples of projects that empower families supported by communities to continue to meet the needs of orphans and vulnerable children.
- The challenge is to extend such projects to enable all children to receive good family based care by reaching all children in need of these projects, in such challenging circumstances

Eswatini Overview

- The combination of community based programmes and home based care initiatives amounts to an impressive network of community development, with volunteers working to meet all facets of children's needs
- It is a remarkable system developed in a partnership between communities and based on traditional community care principles that are owned by them for future sustainability.
- Volunteers are trained to refer when appropriate issues to volunteers in other specialities. This provides a network of care and support backed by other organisations and government departments
- This amounts to an excellent committed and trained community that work together despite the enormous challenges posed by drought, poverty and the AIDS orphan crisis.
- It is a system of which Eswatini can be justly proud and from which other countries can learn. However it needs to expand and develop its approaches to cover OVCs in all areas of Eswatini by filling gaps in the services.

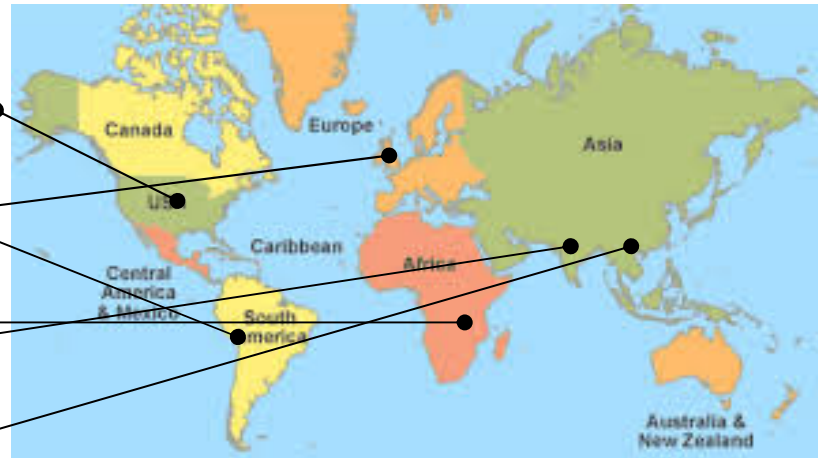
10.CATALYSTS AND NETWORKING ORGANISATIONS

The Viva Network

'When we act together.... we can build a better world for children'

Chief Executive - VIVA Network

- Viva Network is a networking organisation that encourages other organisations to work together to enable OVC to be well cared for in their families and communities
- It provides networking, training, and consultations.
- It links and unites organisations with a common cause for the benefit and protection of the rights of OVC so that they can become a force for change
- VIVA has branches in:
 - Wisconsin, North America
 - Cochabamba, Bolivia
 - Oxford, UK
 - Harare, Zimbabwe
 - Delhi, India
 - Phnom Penh, Cambodia



VIVA achievements

- In 2010 it had
 - 44 city-wide networks that united and equipped people to work together in their communities
 - 1,884 local projects and churches were significantly involved in joint action for children at risk
 - 239 of those organisations were strengthened by the Viva Equip Projects training
 - 340 of those church and project workers benefitted from the Viva Equip People course
 - Over 1.1 million children were protected, educated and empowered in the year

Care Africa Network extension workers

"Acting together we can build a better world for children"

- This is also the philosophy of CAN
- All of us here want to build a better world for children, but individually we have little impact.
- Working together towards a common aim we can effect real change to the benefit of the greatest number of OVC
- **CAN extension workers** will spread ideas, methods, and practices that enable children to grow up in a secure, loving, family environment where all their needs can be met.
- This will enable them to become a generation of fine people who will benefit the world.



CHILDREN NEED FAMILIES - TOGETHER WE CAN