

LESSONS FROM THE CHILDREN IN FAMILIES PLUS (CIF+) PILOT - VOLUME 1:

A Collective, Holistic Approach to Reintegrate Children in Residential Facilities to Family Care



PREFACE

PURPOSE OF THE LEARNING BRIEF

The CIF+ learning brief serves to provide partners with a consistent bi-annual progress/flash report with a focus on lessons learnt during the review period. The brief is informed by one on one review between CRS, partners and the GHR M&E consultant. It is hoped that the brief will provide reference information to inform deliberate changes for improved service delivery and case management during the life of the pilot.

Given the goal of the CIF+ pilot, the learning brief is potentially a reference resource for ultimate future replication of the project at larger scale in other districts in the country.

ACKNOWLEDGMENTS

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CREDITS

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BACKGROUND

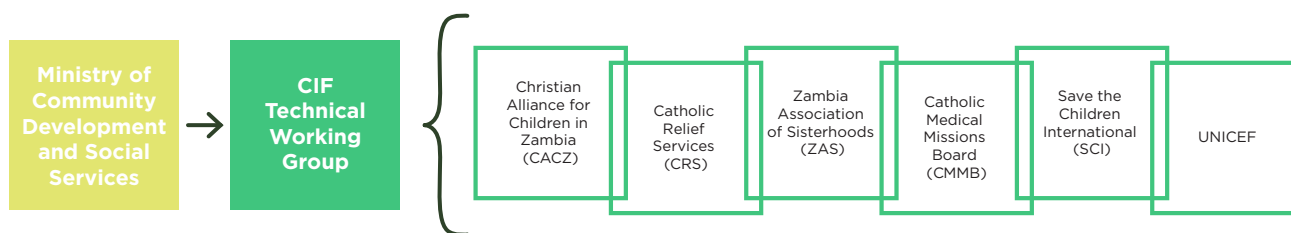
Global research shows 80-90% of children in orphanages have a living parent. Children are placed in orphanages often due to poverty and the inability of families to access basic services such as education or specialized care for children with disabilities. Eighty years of research shows that children in Institutional Care are at greater risk of abuse than their peers, with a negative impact on cognitive, physical, emotional and intellectual development. Long-term consequences include significantly higher rates of unemployment, drug abuse, suicide and sexual exploitation¹.

In Zambia, the extended family system has traditionally taken in children outside of parental care due to difficult circumstances such as the death of a parent, or a caregiver coping with chronic illness or disability. The family care structure in Zambia is especially strained due to context-specific challenges such as high levels of poverty, food security and HIV/AIDs, and the inability of the social protection system to meet growing demands for help. Left with few options, caregivers sometimes make the tough decision to place their children into residential Child Care Facilities (CCFs). The number of children in CCFs has increased from 4,500 children in 101 CCFs in 2005 to 6,413 children in 178 CCFs in 2017².

CHILDREN IN RESIDENTIAL CHILD CARE FACILITIES



Given the effects of institutionalization on a child, the family, and community, the need to respond to children in Child Care Facilities (CCFs) continues to rise. The Government of the Republic of Zambia has demonstrated the political commitment to improve conditions for orphaned and vulnerable children by strengthening the national family care system. The Ministry of Community Development and Social Services (MCDSS) is leading the Children in Families (CIF) Technical Working Group, a consortium of child-focused organizations working together to promote family care for children in Zambia. The CIF working group which includes the Christian Alliance for Children in Zambia (CACZ), Catholic Relief Services (CRS), Zambia Association of Sisterhoods (ZAS), Catholic Medical Missions Board (CMMB), Save the Children International (SCI), and UNICEF provides critical services for the reintegration of children into families and communities within the broader national continuum of care for children.



¹ Changing the Way We Care: A Public Private Partnership for Children. Catholic Relief Services 2018

² National Advocacy and Communication Strategy on Promotion of Family Based Care for Children in Zambia, Ministry of Community Development and Social Services, 2019

WHAT IS THE CIF+ PILOT?



Funded by the GHR Foundation, the CIF+ pilot is a collaborative, locally led, intensive effort with the main aim to **reintegrate 200 children from CCFs in Lusaka district, into families over a period of three years** (2019-2021). Through strong documentation of the innovative collective approach, the pilot will inform MCDSS efforts to develop a replicable and scalable model for more effective case management and successful reintegration for children living in CCFs. The pilot also responds to GHR's overall goal to support the development of robust, resilient country-level systems that are sustainable with or without external support.

Under the leadership of MCDSS, and with coordination support from CRS and technical advice from UNICEF, CIF+ implementing partners are leveraging their individual strengths to deliver a holistic, integrated set of critical services to each child and family in line with the reintegration pathways outlined in the Alternative Care and Reintegration Guidelines. The pilot uses data collected by MCDSS to target “hotspot” communities in N'gombe, Matero, Misisi and Kanyama, which have all been indicated to have relatively high numbers of children placed in CCFs.

Service delivery has been an iterative, nonlinear process with each participating child and family receiving tailored services to address individual needs and support successful family reintegration. In line with the reintegration pathways, the following services have been identified as critical for the reintegration of children:



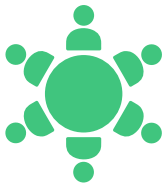
Identification and Enrolment:

Working with CCFs, the District Social Welfare Office (DSWO) and CACZ identify and assess participants for inclusion in the pilot through completion of the child intake, child case record and child assessment forms of the case management process.



Family Tracing and Assessment:

Once children are identified, DSWO and CACZ begin the process of locating and assessing families and compiling findings in social welfare reports.



Case Review Committee:

A committee comprised of representatives from MCDSS and all CIF+ partners meet once a month to review cases presented by the DSWO Case Managers. This meeting allows all CIF+ partners to understand the specific needs of each case, discuss services required, and devise a timeline to start and complete interventions to support the reintegration of each child into family care.



Implementation of Case Plans:

Based on developed and agreed upon case plans, MCDSS in collaboration with CIF+ partners engage relevant stakeholders (including the facility, child and/or parent) to deliver services. MCDSS in collaboration with CRS coordinate case management processes to facilitate seamless communication, transition and cohesion amongst CIF+ partners.



Counselling:

Using the Singing to The Lions (STTL) model for group therapy and the Serenity Harm Reduction Therapy for individuals, ZAS provides counselling services to children within their respective CCFs.



Community Sensitization:

ZAS spearheads sensitization activities in communities by using Catholic structures including the Diocesan, Deanery, Parish and Small Christian Community to create awareness on the need for children to grow up in families.



Family Conferencing:

The DSWO and CMMB convenes the family unit to prepare the child and family for reintegration.



Family Strengthening:

Each participating family receives a reintegration package which varies according to the immediate needs of a child and the target family. Family strengthening services including entrepreneurship and financial management training, and formation of self-help groups such as Village Savings and Lending Associations (provided by SCI) to help families increase income at household level. Positive parenting trainings are provided for target families prior to reintegration.



Education Support:

Identified as one of the biggest drivers of admission to CCFs, this assistance involves MCDSS securing spots for a child to attend school, provision of school supplies by SCI, and support with school fee payments by CMMB for a one-year period.



Post-placement:

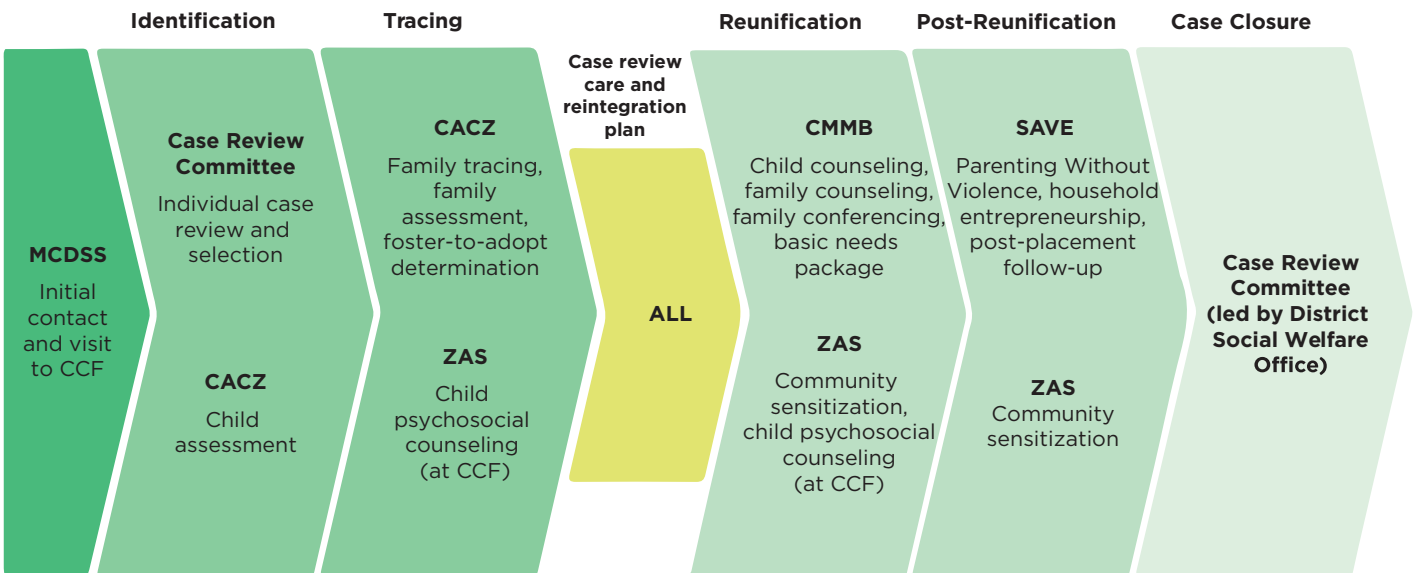
Depending on need and progress, pre-unification services will be continued after reunification. Using the post placement form of the case management tools, the DSWO will conduct post placement bi-monthly visits/assessments with the family as need arises and services will be provided in line with the unique needs identified during assessments.

Post placement services will include continued family strengthening services initiated before placement, such as Village Savings and Loans Association, education support, positive parenting, and linkages to support group within the community. Other interventions may require linking/referring families to institutions outside CIF+ in response to issues arising after placement.

Current summary of CIF+ roles for GHR partners (subject to change)



Under the leadership of the MCDSS and the Lusaka District Social Welfare Office:



NEW LEVELS OF INTENTIONAL COLLABORATION

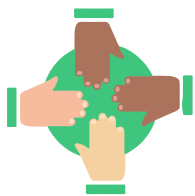
CIF+ IS AN INNOVATIVE CASE MANAGEMENT APPROACH FOR GREATER IMPACT ON SYSTEM-LEVEL CHANGE:

The consortium is implementing the Children in Families Plus (CIF+) pilot, which purposely and strategically integrates each partner's individual strengths into a single, complementary approach to case management (CM) of a targeted study group of reintegration cases. This innovative, collective approach to CM tests the assumption that a harmonized group of key actors from different sectors will have a greater impact on system-level change to support successful reintegration of children living outside of family-based care than isolated, individual interventions. Although CIF partners collaborated during Phase I, each implementing partner maintained separate work and measured progress according to individual impact, as well as each organization's individual contribution towards the CIF overreaching, system-level goals. It is envisioned that the implementation of the CIF+ under Phase II will transform current CIF partnership to a new level of intentional collaboration. The CIF+ will further showcase the collective impact that can be attained when Government provides programme direction for NGOs to meaningfully complement government efforts. The impact of the CIF+ on responding to primary separation, and preventing secondary family-child separation, will be determined according to the synergistic effect of the entire CIF partnership leadership of the GRZ (Ministry of Community Development and Social Services), rather than measuring the isolated contribution of each partner.

The CIF+ will further showcase the collective impact that can be attained when Government provides programme direction for NGOS to meaningfully complement government efforts.

ACHIEVEMENTS TO DATE

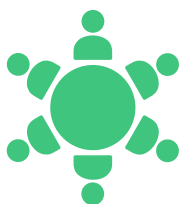
Under the strategic leadership of MCDSS, the CIF+ pilot has made tangible progress on key milestones from inception to date.



CIF+ partners conducted planning meetings to discuss and mutually agree upon key project processes, including:

- The overall methodology and core strategies to meet the project goal.
- Related timelines and targets.
- The menu of services offered by partners to support successful child reintegration from CCFs to birth or extended families.

Visited **22 CCFs** and conducted **64 home assessments** across Lusaka district.



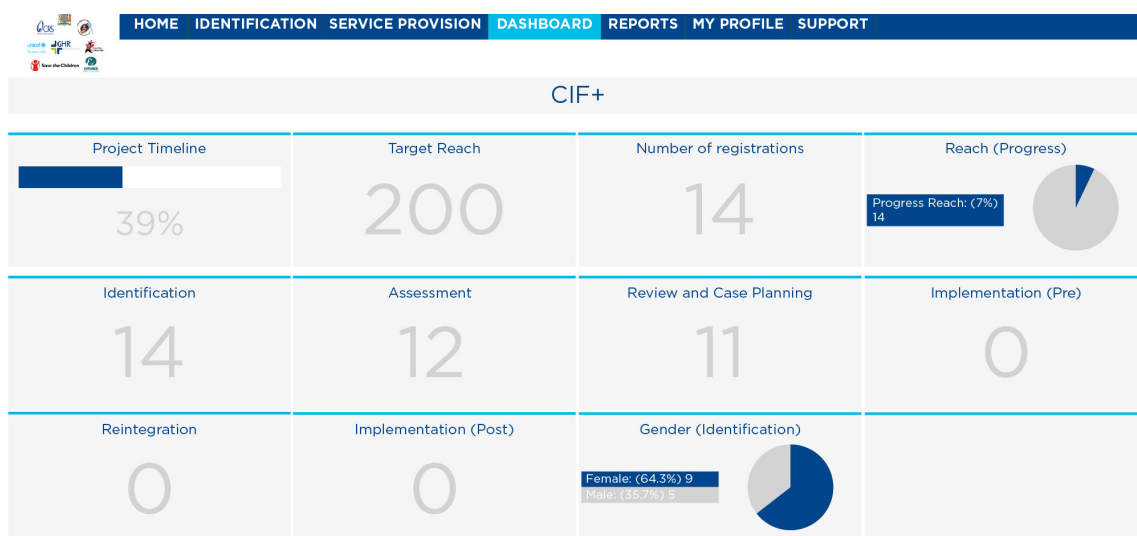
The consortium formed the Case Review Committee (CRC) and finalized the committees' terms of reference.

Facilitated **5 CRC meetings** where **25 priority cases were reviewed** and subsequent interventions planned among partners to support successful case reintegration.

CCFs are invited to participate in CRC meetings to improve coordination of activities such as family tracing, child assessments and preparing a child for reintegration while building local sustainability and case management capacity.



CRS advanced the development of a **dashboard to track services delivered from identification to closure** and allow providers to follow up and assess impact over time. CRS developed the first draft of the dashboard tool which has since been reviewed by CIF+ partners at key junctures. The dashboard was refined through an iterative process to reflect changing priorities and needs as voiced by the MCDSS and other CIF+ partners.



LESSONS LEARNT

CIF+ partner interviews highlight several important lessons from the initial stages of the pilot for any stakeholders working to strengthen the national alternative care system and increase awareness of child and family reintegration efforts:

BENEFITS OF A COLLABORATIVE APPROACH

Building on phase one of the CIF, the CIF pilot has experienced strengthened working relationships with partners through: collective planning; the provision of a comprehensive and holistic package of services to meet the needs of children in CCFs and their families; and partner accompanied field visits. In-depth and frequent discussions on partner services during CRC and CIF meetings have helped to increase the knowledge of each partner's work and facilitate sharing of ideas for improved service delivery. The working group has also enhanced accountability and reduced duplication of efforts.

AN INCEPTION PHASE PRIOR TO IMPLEMENTATION PROVED CRUCIAL TO CLARIFYING THE METHODOLOGY AND PARTNER ROLES.

This period provided an opportunity to bring all CIF+ partners and CCFs on board to agree on an approach that would be responsive to circumstances on the ground. This clarity from the outset helped avoid implementation delays, duplication of effort and gaps in service provision. During this phase, it was observed that mapping of services and providers in the hotspots to identify stakeholders for referral services that may not be offered from the CIF+ consortium is key for meeting the diverse needs of the target children and families.



Case Review Committee meeting once a month to understand the specific needs of each case.

CLEAR AND CONTINUOUS COORDINATION IS KEY TO IMPLEMENTING A COLLECTIVE FAMILY REINTEGRATION CASE MANAGEMENT APPROACH.

From inception, partners were clear on the purpose of the pilot and the need to work in a collaborative manner. However, elements of siloed programming have crept in, challenging the ability to seamlessly provide services to the targeted beneficiaries. These issues have highlighted the importance of continuous coordination and intentional communication to ensure that the status of each case is openly shared, particularly during handover discussions when a client is transferred to another partner for additional, appropriate services.

FOSTER A CULTURE OF LEARNING AND OPENNESS TO STRENGTHEN WORKING RELATIONSHIPS, ADVANCE SYSTEM IMPROVEMENTS AND IMPROVE THE QUALITY OF CLIENT SERVICES.

Creating meeting platforms does not automatically ensure that a broader understanding of each other's work grows. A culture of openness and provision of respectful and constructive feedback has enhanced group cohesion while improving CIF+ service provision. The pilot has observed strengthened working relationships as partners conduct collective planning and joint accompanied field visits. During CIF+ meetings, the working group delved into in-depth reviews of partner contributions. These discussions have helped to increase the knowledge about each partner's work and facilitate sharing of ideas for improved service delivery. They have not only helped improve CIF+ interventions but also social protection techniques at the DSWO and other partner organizations.

ESTABLISH A MULTI-SECTOR CASE REVIEW COMMITTEE TO IMPROVE CASE MANAGEMENT AND ENHANCE LOCAL OWNERSHIP AND SUSTAINABILITY.

The CRC has representation from key line ministries including the MCDSS, the Ministry of Youth, Sports and Child Development, the Zambia Police-Child Protection Unit, CCF Managers, Community Development Assistants, Community Welfare Assistant Committees, and CIF+ partners. To date however MCDSS and CIF + partners have been the main participants. The pilot will work to improve engagement of these stakeholders as their participation will enhance the smooth review, planning, implementation and handover of cases for support.

While there has been significant success from the CRC meetings, CIF+ partners continue to discuss ways to improve the efficiency of CRC meetings especially for cases that require urgent services or interventions. To this end, a fast track committee has been submitted for consideration in follow-on high-level CIF+ meetings. as a requirement to have all cases go through the CRC can cause delays in finalizing more straightforward cases. The group is developing a fast track committee within the CRC to deal with urgent cases requiring prompt action and service provision.

APPLY AN INCLUSIVE, ADAPTIVE MANAGEMENT APPROACH TO REFINE THE APPROACH AND BETTER RESPOND TO CLIENT NEEDS.

The CIF+ pilot has prioritized inclusive and consistent partner engagement and adaptive management of project processes based on lessons learnt and continuous partner feedback. The project has made iterative modifications to the CIF+ pilot methodology, overall project plan and budget to reflect changing needs and priorities and promising practices. CIF+ partners have demonstrated their commitment to the pilot by being flexible and focus driven while prioritizing client needs above all considerations.

BENEFITS OF A HOTSPOT APPROACH ON CIF+ STAKEHOLDERS AND TARGET COMMUNITIES.

The hotspot approach enables implementing partners to work with targeted communities that contribute the greatest number of children living in CCFs in Lusaka. These community level interventions provide an opportunity to understand the specific drivers of child placement in CIF+ target communities and develop tailored interventions around community awareness messaging, family strengthening and support group services.

The hotspot approach enables partners to strengthen the capacity of key stakeholders including CCFs, CWAC members with the necessary knowledge and skills required for working with children and families towards reintegration.

NEXT STEPS

The CIF+ pilot is undoubtedly a unique effort that could potentially inform more effective case management for children living in residential care. While the CIF+ pilot has largely been iterative with some deviations from the initially designed processes, partners have demonstrated their commitment to the pilot by being flexible and innovative in meeting the project's objective. Over the next few months, the CIF+ pilot will:

- Prioritize service delivery for the twenty-five (25) cases reviewed by the CRC
- Finalize the development of the dashboard
- Upload reviewed cases to the dashboard for tracking



SECOND YEAR TARGET:

70 cases