

# The Intentional Inclusion

**HOW THE GOVERNMENT OF RWANDA AND UNICEF  
WORKED TOGETHER TO MAKE SURE ALL CHILDREN  
CAN GROW UP SAFELY AND SECURELY AT HOME**

Programme Brief – Lessons Learnt

**FINAL REPORT**

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## Acknowledgements

Sincere thanks are due to all the individuals who shared their personal and professional experiences with the aim of continuing to improve the lives of children in Rwanda.

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I also appreciate the contribution of Joseph Munyandamutsa whom I worked with as national consultant.

I trust that the information contained in this document will help to continue improving the inclusion of children with disabilities in Rwanda and elsewhere.

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## Executive Summary

During the last ten years, the Government of Rwanda and UNICEF have been collaborating on childcare reform to ensure that:

- Children living in institutional care in Rwanda are reunited with their families or placed in suitable forms of family-based alternative care, and that
- children in families are prevented from separating.

Named in Kinyarwanda as the Tubarerere Mu Muryango (TMM) programme (Let's raise children in families) the childcare reform takes place in the context of wider child protection system strengthening. It is conceptually modelled on the socio-ecological framework and thus interventions are designed to work across several levels – structural, institutional, community, child and family – to complement and strengthen each other so that the wider system is robust enough to ensure families are strong and resilient.

To avoid further stigmatization and discrimination of children with disabilities, inclusive design was considered from the start as more appropriate than development of a stand-alone and parallel system.

This intentional inclusion approach made sure that during phase one of the reform, children with disabilities in target institutions were included in the reintegration process; and during the two-years from 2019-2021 made them the focus of the phase two childcare reforms.

Structural reform extended to inclusive policy and strategic planning across multiple sectors including early childhood development, education, and water and sanitation, as well as childcare.

At the institutional level there has been a concentration of effort on capacity building of the Rwandan National Child Development Agency (NCD) and National Council of Persons with Disabilities, (NCPD) including new Operational Guidance, provision of training as well as for local front-line workers in allied disciplines, and on-going continuous professional development.

Engagement with the Inshuti z'Umuryango (IZU), a supported voluntary community cadre, so they can be a friend to families who have a child with a disability, has been a feature of the community level actions.

Children and families have also been engaged through their inclusion in training opportunities and participation in decision making to erase the divide between worker expertise and parent know-how.

Despite several challenges of the last 18 months, including the global COVID-19 pandemic and extensive re-structuring at the NCD, as of June 2021 3,391, children and young adults have been placed with families, 14 of them from institutions for children with disabilities. Several resources which support the childcare reform are available for regional adaptation including the Operational Guidelines for Inclusive Case Management, as well as a number of training packages for professionals, community cadres and parents.

Six experiences have been identified that can inform future child protection systems strengthening in Rwanda and across the region:

- 1. Participation is important.** Significant investment in consultations with the people who will ultimately use and benefit from the outputs has been important in encouraging ownership and usage. This has included professional social service workers and IZU as well as parent's and caregivers. Obtaining these perspectives has meant that the materials developed, the training delivered, and the coaching and mentoring provided has a real chance of benefiting the community in the long-term.
- 2. Policies and programmes that invest in children, their families and communities create the enabling conditions for child development.** Children are embedded in families, who are, in turn, embedded in communities. Consequently, policies or programmes that strengthen the ecologies of children, that is their families and their communities, also promote children's healthy development. This collective efficacy can be enhanced through multi-sectoral collaboration and coordination.
- 3. Inclusive education and inclusive child protection are inter-dependent.** It is particularly important to making sure that support for education and childcare reforms is synergistic, so that children's right to education is not compromised through the reintegration process, and that access to education is not an acceptable driver of institutional placement.
- 4. A national approach to childcare reform, investing over the long-term and building on success, is more sustainable.** With government leadership and consistent support from UNICEF, the care reform process in Rwanda has been underway since 2012, and as a result can demonstrate real change for children. The key elements of success have been that it is:

- a. based on a costed national strategy/ plan of action
  - b. include a wide range of multi-sectoral services
  - c. is delivered in a coordinated and helpful way
  - d. builds community capacity to protect
  - e. considers the child and family as partners
  - f. puts investment in social work and case management (and referral mechanisms) at its heart, and
  - g. builds on, streamlines, and simplify current systems.
5. **Preparing to be flexible in response to changing circumstances.** Adopting both a flexible mindset and a practical drive for results means that continued support was provided for children and families to the extent possible, during even the most unforeseen circumstances such as COVID-19 such that the reform process was not halted.
6. **Continuing professional development delivers benefits to the individual, their employer, to the public, and helps to safeguard children.** Making sure the workforce capabilities keep pace with current standards in the sector helps individuals continue to make a meaningful contribution and be more effective in the workplace.

# 1. Introduction

This present report describes the childcare reform process in Rwanda during 2020 and 2021, against the background of the overall reform initiated since 2012.<sup>1</sup>

## Overview

During the last ten years, the Government of Rwanda and UNICEF have been collaborating on childcare reform. Beginning in March 2012, the Government endorsed the Strategy for National Child Care Reform.<sup>2</sup> The implementation mechanism for this strategy is the Tubarerere Mu Muryango (TMM) programme (Let's raise children in families)<sup>3</sup> led by the National Child Development Agency (NCD) in collaboration with UNICEF.

The TMM programme aims to ensure that:

- children living in institutional care in Rwanda are reunited with their families or placed in suitable forms of family-based alternative care, and that
- children in families are prevented from separating.

The programme uses the childcare reform as a springboard for wider strengthening of the child protection system.

To avoid stigmatization and discrimination intentionally inclusive design was considered from the start as more appropriate than development of a stand-alone and parallel system for children with disabilities. Although the first phase of TMM did not have a specific focus on residential institutions for children with disabilities it nevertheless included reintegration of several children with disabilities who were residing in the target institutions. However, a 2018 evaluation of the TMM first phase reported that placement of children with disabilities into families utilizing the existing model was challenging.<sup>4</sup> Thus when the second phase of TMM was initiated in 2019 the design was revised to make it more intentionally inclusive; and the collaborating partnership expanded to include the National Council of Persons with Disabilities (NCPD).

Despite the challenges of the last 18 months, including the global COVID-19 pandemic and extensive re-structuring at the NCD, as of June 2021 3,391, children and young adults have been placed with families, 14 of them from institutions for children with disabilities.

1. See <https://bettercarenetwork.org/library/social-welfare-systems/child-care-and-protection-system-reforms/tubarerere-mu-muryango-tmm-documentation-of-child-care-reform-programme-in-rwanda> for a full range of documents reporting on the childcare reform process

2 Cabinet Brief: Strategy for National Child Care Reform (n.d.).

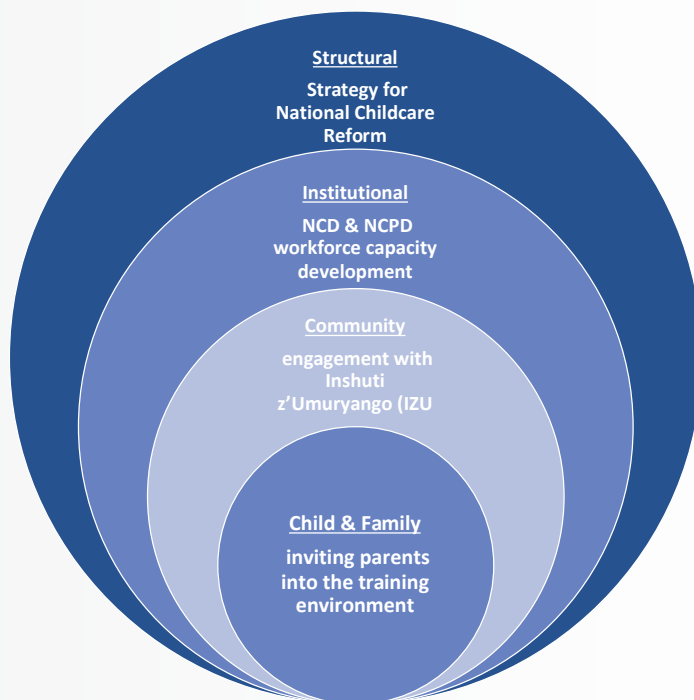
3 <https://bettercarenetwork.org/library/social-welfare-systems/child-care-and-protection-system-reforms/tubarerere-mu-muryango-tmm-documentation-of-child-care-reform-programme-in-rwanda>

4 Primson Management Services, 15 January 2018, Summative Evaluation of the Tubarerere Mu Muryango/Let's Raise Children in Families

## The conceptual framework

The socio-ecological model suggests that action needs to be taken at several levels in order to create a protective environment for children and contribute to child protection systems strengthening (Figure 1).

Figure 1. The Conceptual Framework





## 2. Progress towards inclusion

### Background

A series of steps have been identified as necessary to the success of the institutional closure programme and the development of a community-based child protection system. Reintegration with the family has been the preferred option, with alternative family-based care (adoption, foster care) an option for those children who cannot safely go home. In Rwanda, this institutional provision is mixed and can include day care and boarding schools, some of which are integrated services and about half of which are specialised.<sup>5</sup> Research conducted by the Ministry of Health in 2018 found that the children and young people living in these facilities “were overwhelmingly positive about their lives in the centres” and that “residing among, or spending time with, others with disabilities was by all accounts considered to be a liberating phenomenon.”<sup>6</sup> On the other hand, the staff said that sometimes the children were lonely or sad because they were separated from their families.<sup>7</sup>

Globally, children living in institutional care are known to experience significant protection risks.<sup>8</sup> Research in Rwanda, including the 2018 report of the Ministry of Health suggests this phenomenon is also evident in institutions for children including children with disabilities.<sup>9</sup> The report concluded that children with disabilities should have the opportunity to live with their families or in alternative family care, and that more community-based support is required for children and families to ensure that their full range of needs is met.

Consequently, the full range of childcare protection system resources (TMM and others) and services have been adapted to make them inclusive of children with disabilities, ensuring that any special requirements for support and care in the community are considered and where necessary special support services developed.

### Structural reform – strategy and planning

Recognising that residential institutions need to be replaced with community-based support for children and families to ensure that their full range of needs

5 UNICEF Rwanda, Rwanda Biomedical Center (RBC), International Research Development Center of Canada (IDRC), 2018, Violence Against Children and Youth with Disabilities in Institutional Settings in Rwanda. Rwanda Ministry of Health: Kigali <https://www.unicef.org/rwanda/reports/violence-against-children-and-youth-disabilities-institutional-settings-rwanda>

6 Ibid.

7 Ibid.

8 Browne, K. (2009) The Risk of Harm to Young Children in Institutional Care. Save the Children: London [https://bettercarenetwork.org/sites/default/files/The%20Risk%20of%20Harm%20to%20Young%20Children%20in%20Institutional%20Care\\_0.pdf](https://bettercarenetwork.org/sites/default/files/The%20Risk%20of%20Harm%20to%20Young%20Children%20in%20Institutional%20Care_0.pdf) [27.06.2019] and UNICEF (2013) State of the World's Children. Children with Disabilities. UNICEF: New York [https://www.unicef.org/publications/index\\_69379.html](https://www.unicef.org/publications/index_69379.html) [27.06.2019]

9 NCPD and NCC (2016) National Assessment of Centres Caring for Children with Disabilities. NCPD and NCC: Kigali, and Ministry of Health (2018) Violence Against Children and Youth with Disabilities in Institutional Settings in Rwanda. Ministry of Health: Kigali.

is met, the government of Rwanda has initiated a series of policy reforms. The National Strategy for Childcare Reform and its action plan the TMM Programme, provide the structural backbone for the development of the wider child protection system in Rwanda. This is supported by interventions in allied sectors, including:

- » The National Model for Inclusive Education in Rwanda, which includes models of inclusive schools and initiation of Parents Associations to assist teachers and school management
- » The National Early Childhood Development Policy, which promotes “equitable access for all children aged 0-6 to adequate early stimulation, effective and relevant education, sufficient nutrition, quality health care and protection”
- » The National Sanitation Implementation Policy which includes two indicators on disability related to schools and health centres having gender and disability appropriate sanitation facilities,
- » The National Water Supply Policy which “endeavours that all population groups, including vulnerable households, children, elderly and disabled persons benefit from its interventions.”

Basic community supports for children with disabilities include access to broader social services and specialist services. The Government of Rwanda is engaged in significant activity through partnerships with UNICEF to develop national programmes in education and early childhood development and demonstrates a cross-sectoral commitment to inclusion ([Table 1](#)).

The National Model for Inclusive Education in Rwanda including model inclusive schools is being rolled-out across 30 districts. This includes establishment of Parents Associations to assist teachers and school management with certain services like the development of adapted teaching and learning material, as classroom volunteers etc. These parents’ associations include parents of children with and without disabilities.<sup>10</sup> Imboni z’uburezi Budaheza (Inclusive Education Community Workers) are being created at sector, cell and village levels. They are community-based groups with a specific role of helping in identification of problems that are preventing children with disabilities from accessing schools and produce reports to local authorities for community-level action to address the issues. They also reach out to families that have children with disabilities and mobilize them to support their children to go to school. The Inclusive Education Activists are working in synergy with parents/schools and local authorities.<sup>11</sup>

<sup>10</sup> AUTHOR INTERVIEW WITH SARA MCGINTY, UNICEF CHIEF EDUCATION, AT UNICEF KIGALI ON 25TH JUNE 2019

<sup>11</sup> IBID.

**Table 1. Some inclusion initiatives, current September 2020**

Education	Water and Sanitation	Other Social Policy
Guide to Inclusive Education in Pre-primary, Primary and Secondary Education	National Sanitation Implementation Policy 2016 includes two indicators on disability related to schools and health centres having gender and disability appropriate sanitation facilities	Minimum Standards and Norms for Early Childhood Development Services in Rwanda 2016
Training Manual on Special Needs and Inclusive Education	National Water Supply Policy 2016 “endeavours that all population groups, including vulnerable households, children, elderly and disabled persons benefit from its interventions.”	National Early Childhood Development Programme (NECDP) Disability Screening Tools
National Model for Inclusive Education in Rwanda		NECDP National Parenting Curriculum
National Guide for Assessment of Children with Special Needs and Disabilities and Assessment tools		National Community Based Rehabilitation Guidelines
National Guide for Development of IEP for Children with Special Needs and Disability and Tools		Case Management in support of Extremely Poor and Vulnerable Households Business Model 2018
Toolkit for Awareness Raising on Inclusive Education (draft)		Guidelines for Vision Umurenge Programme (VUP) Direct Support Scheme includes provision for households where persons with disabilities reside
Adapted Curriculum for Children with Cognitive and Development Disabilities (draft)		

Source: Author

## Institutional landscape and developments

The institutional landscape has also been transforming culminating in the establishment of the National Child Development Agency in 2020. The NCD absorbs the functions of both the National Commission for Children (NCC) and the National Early Childhood Development Programme (NECDP) with a mission “to foster the development of a child, the promotion and the protection of his or her rights.” Together with the NCPD this new agency is responsible for the full implementation of the 2020 Joint Action Plan for Inclusive De-institutionalisation of Children, agreed by NCC and NCPD and supported by UNICEF. This Action Plan defines the lead agency for each specific activity grouped under three phased domains, sensitisation, implementation, and coordination. It assigns responsibilities to the NCD’s District Child Protection and Welfare Officers for child and family assessment during the reintegration process.

At the start of the childcare reform process a cohort of social workers and psychologists was recruited to fast-track the TMM institutional closure programme, about half of whom have been absorbed by the NCD to form a foundational cadre of District Child Protection and Welfare Officers (one per district). Several more staff are deployed, through the government’s partnership with UNICEF.

All are educated to degree level and have had additional training in child protection, case management and family reintegration. The case management system supports the provision of quality support and promotes multi-sectoral work.

Both NCD and NCPD are involved in the process to make sure the decisions are taken in the best interest of the child. A joint agreement is in place to have a final declaration before the child leaves the centre, where everyone involved in the case management process must sign off on the resolution, including a local District Child Protection and Welfare Officer.

Intentional inclusion has involved the development of Operational Guidance on Inclusive Children’s Reintegration<sup>12</sup> which constituted the guiding framework for the development of an accompanying Training Package. Given that all children, including children with disabilities may require different services across multiple sectors at different times in their lives, the Operational Guidance is underpinned by the functioning case management system and existing mechanisms for coordination and collaboration.

<sup>12</sup><https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration/tubarerere-mu-muryango-programme-%E2%80%98-raise-children-in-families%E2%80%99-operational-guidance-on>

A specific Training Package was developed primarily for Government of Rwanda District Child Protection and Welfare Officers<sup>13</sup> who work directly with children and families on reintegration of children, including children with disabilities, from residential institutions; and who have completed the TMM Pre-service and In-service Training Modules for the Social Workforce Professionals. However, the content is suitable for any government or non-government organisation workers who are involved in supporting family-based care for children. It can also provide useful information to people working in other local government roles, for example District Disability Mainstreaming Officers and Gender & Family Promotion Officers, as well as people working in non-governmental organizations (NGOs) or community-based systems who support children and families, and particularly those who have contact with children during the reintegration process.

It can be helpful for all workers who have limited or no training specifically on inclusive practices, is available in English and is easily adaptable for contexts other than Rwanda.

The Training Module on Inclusive Case Management for Reintegration, comprising a Facilitators Manual<sup>14</sup> and a Participants Handbook<sup>15</sup> was added to the overall TMM Training Package in 2019 to make it more inclusive. The intention is to help the social service workforce to better understand the reintegration process for all children, including children with disabilities who may require additional support.

A three-day training event of Module Three, for NCD District Child Protection and Welfare Officers and representatives of NCPD and civil society was held in Kigali in January 2020.

Building on the Operational Guidance and Training Package for Inclusive Reintegration operationalised in 2019-2020 a plan to consolidate this learning was implemented during August 2020-August 2021. Progress towards inclusion was further enhanced with an emphasis on continuing professional development for the Social Workforce Professionals through:

- planned regular coaching and mentoring support
- further development of a national training team, and
- Support for roll-out of refresher training nationally.

13 Previously referred to as a social worker or psychologist depending on their graduate level qualification and now called Child Protection Welfare Officers, these are also referred to hereinafter as “case workers”

14 <https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration/tubarerere-mu-muryango-programme-%E2%80%98%E2%80%99s-raise-children-in-families%E2%80%99-inclusive-case-management-for-0>

15 <https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration/tubarerere-mu-muryango-programme-%E2%80%98%E2%80%99s-raise-children-in-families%E2%80%99-inclusive-case-management-for-0>

## Coaching, mentoring and supervision

A process for coaching and mentoring (leading towards a model of supportive supervision) for the District Child Protection and Welfare Officers was agreed based on a detailed methodology. This approach to workforce capacity building is based on the use of one-to-one and/or group conversations to enhance an individual's skills, knowledge, or work performance. Whilst there is no universally accepted definition of coaching, mentoring and supervision, it is possible to draw distinctions between them ([Table 2.](#))

In practice, the terms coaching, and mentoring are often used interchangeably to describe a short-term training and support process, whilst supervision is an on-going management tool which is central to effective social work.

Coaching and mentoring aim to produce optimal performance and improvement at work, by focusing on specific skills and goals, although it may also have an impact on an individual's personal attributes such as social interaction or confidence. The process typically lasts for a defined period, following which a transition to supervision is expected.

Social work supervision incorporates the elements of education and training support provided through coaching and mentoring and adds a component of accountability. Supervision involves oversight and performance monitoring, to maintain quality in service provision. It is a continuous planned process integrated into management systems.

**Table 2. Coaching, mentoring and supervision**

Coaching and mentoring	Supervision
Education, training and support	Education, support, and accountability
Practice concepts learned during training events	Explore decision making
Defined period of time	On-going management tool
Build confidence	Prevent burn-out

Source: Author

The coaching and mentoring methodology was therefore designed in such a way that the transition to supervision can take place seamlessly, and therefore an element of sustainability is introduced. The Guidance Manual for Coaching, Mentoring and Supervision forms part of the suite of tools and instruments available to the NCD and NCPD, with potential for their introduction into the normative framework. The processes for coaching, mentoring and supervision were also introduced into design and delivery of the training for the national trainers' team.

During the coaching and mentoring process for deinstitutionalisation in the two institutions an experienced Rwandan consultant worked directly with NCD. It was planned that they would participate in the case management process on the basis of a quarterly plan matched to the plans of the District Child Protection and Welfare Officer/ Case Manager and linked to the coaching and mentoring sessions. The coaching and mentoring support maintained a focus on case management for reintegration. This included ensuring that the case file for the child is appropriately preserved in line with government regulations for maintenance of records. The process also involved accompanying the Child Protection and Welfare Officer on family visits to offer advice on support and referral processes (Box 1).

These visits focused on observation of the child and family environment, discussion with parents and identification of opportunities for support.

### **Box 1. Albert's story**

*Albert is around 12 years old and lives with his foster parents and six siblings. When he first moved to live with them, he was stunted and was unable to walk, to communicate and engage in basic self-care. At the beginning, his foster-mother was unsure if she could meet Albert's needs, but with the encouragement of the family, especially her oldest son, she became more confident. Finding a loving foster care family and being surrounded by other children has helped Albert to improve his functional independence and his participation in family and community life. The District Child Protection and Welfare Officer has supported the family with advice, with linking them to networks of parents in similar situations and communicating on their behalf with the local school to make sure Albert is enrolled. During the coaching and mentoring process, the District Child Protection and Welfare Officer was advised to encourage and support the family to make sure Albert is registered in the civil registration system, and to seek a consultation with an occupational therapist to support development of self-care skills. The District Child Protection and Welfare Officer was also encouraged to engage in community awareness raising activities. The result is that not only has Albert's functional independence increased, but also the attitude among the neighbours has changed. Initially, neighbours did not want to visit the family, due to fear and the stereotypes linked to the traditional thinking about persons with disabilities. But now, neighbours are no longer afraid to make a visit and Albert sometimes goes out to play with his peers in the community.*

### **Development of the National Training Team and refresher training**

The NCD and NCPD jointly identified 12 professional workers, including both government and non-government workers in the child protection sector, to form the Na-

tional Training Team. Derived from priority issues identified during a Training Needs Assessment, a Training Module was developed for a four-day Training of Trainers programme, accompanied by collated set of reference materials. Although planned as a face-to-face training, a flexible approach to training delivery required that re-design was critical in response to COVID-19 restrictions. It was agreed that the training programme would be re-configured to be delivered through an on-line platform.

A post-training end-of-course assessment was conducted on-line to both reinforce the learning and check participants knowledge. All participants scored above the threshold of 70 per cent to allow Certificates of Completion to be issued.

The training materials were collated into a training package for participants and accessible through a dropbox link. This included an up-dated Compendium of Resources (Box 2).

### **Box 2. Compendium of Resources**

*Given that childcare reform and the development of a broader child protection system is dynamic and evolving, a Compendium of Resources was initiated in 2019 and has been continually populated. This Compendium provides signposts for District Child Protection and Welfare Officers to a wide range of additional materials to support them in their day-to-day practice, such as assessment tools, as well as training courses to contribute to their continuing professional development.*

Following the training of the National Training Team, NCD planned to train District Child Protection and Welfare Officers, District Mainstreaming Officers, District Gender and Family Promotion Officers, NCPD District Coordinators, and institution managers. A detailed written plan was developed in which key trainers were identified and a preparation plan for each session was developed.

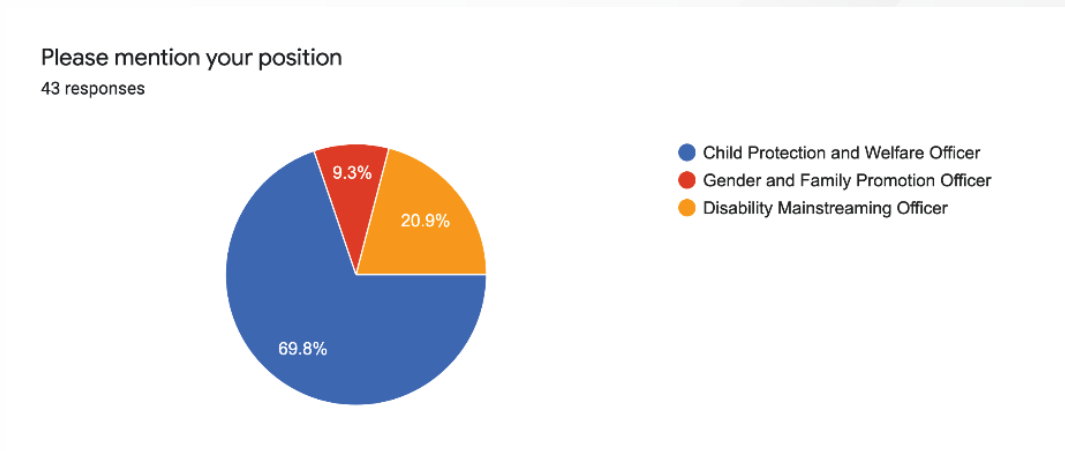
The training was divided into five clusters, with each comprising several invited participants from all the districts. For each cluster, two facilitators from the National Training Team were assigned. During the training process, coaching and mentoring was provided to guide and quality assure the content delivery. Furthermore, NCD was supported to generate an online post-training evaluation form.<sup>16</sup>

A total of 43 participants responded, the majority being District Child Protection and Welfare Officers (Figure 2.).

<sup>16</sup> FOLLOW THIS LINK TO ACCESS THE FULL RESULTS [HTTPS://DOCS.GOOGLE.COM/FORMS/D/16fJCDKbV1DQJGOV-H4E0QZHI0C5GB564G5RUJISN25DM/EDIT#RESPONSES](https://docs.google.com/forms/d/16fJCDKbV1DQJGOV-H4E0QZHI0C5GB564G5RUJISN25DM/edit#responses)

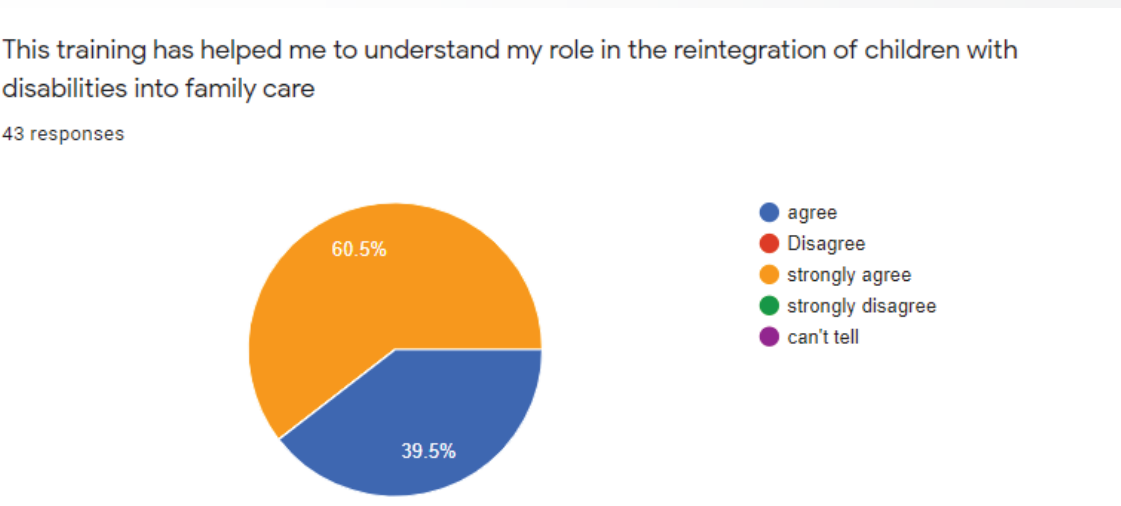


**Figure 2. Respondents to the post-training questionnaire**



All the participants agreed that the training had helped them understand their role in the reintegration of children with disabilities into family care, and almost two thirds strongly agreed (Figure 3.).

**Figure 2. Training output**



**Community - support from the people closest to children and families**

The professional network is supplemented by the cohort of community volunteers Inshuti z’Umuryango (IZU - Friends of the Family). The IZU are a community resource with extraordinary access to children and families. Almost 30,000 volunteers have received basic training and can provide a first level assessment of child protection needs and make immediate referrals. IZUs identify particularly vulnerable children in the community and carry out household visits, including to children who have been reintegrated from residential institutions or those in foster care.<sup>17</sup>

<sup>17</sup> NATIONAL COMMISSION FOR CHILDREN AND UNICEF, N.D., PROGRAMME BRIEF BUILDING THE SOCIAL SERVICE WORKFORCE FOR CHILDCARE REFORM IN RWANDA. KIGALI: NCC AND UNICEF [HTTPS://WWW.UNICEF.ORG/RWANDA/MEDIA/1656/FILE/PROGRAMME%20BRIEF%20-%20BUILDING%20SOCIAL%20WORKFORCE.PDF](https://www.unicef.org/rwanda/media/1656/file/PROGRAMME%20BRIEF%20-%20BUILDING%20SOCIAL%20WORKFORCE.PDF) [ACCESSED 27.01.2020]

They have a unique set of competencies that enable them to facilitate disability-inclusive community development in rural areas, alongside and supervised by the District Child Protection and Welfare Officers, Disability Mainstreaming Officers and Gender Officers.

Whilst the District Child Protection and Welfare Officers play a critical role in raising awareness of the rights of children with disabilities, the NCD also acknowledges the support of the community as a critical factor in creating a protective environment for children (Box 3.). Therefore, NCD has identified the IZU as a critical cadre in breaking down the stigma and discrimination that can sometimes be associated with disabilities. For that reason, a Training Module was developed to build awareness amongst the IZU on the rights and needs of children with disabilities, so that they can be allies in helping children with disabilities and families to participate fully in the life of their communities.

### **Box 3. Aurole's story**

*Aurole, is a 6-year-old girl who lives in an extended family with her mother, her younger brother, her uncle, aunts, and grandmother. She has a physical disability that affects her ability to walk and hasn't been enrolled in the nearby school. A neighbour who used to pass by every day first noticed that the child and family might need support and contacted the District Child Protection and Welfare Officer. The Officer has done a child and family assessment with the primary focus of helping Aurole to continue living at home with her loving family whilst getting an education.*

The content for the IZU training module was developed in consultation with IZUs at local level based on a Training Needs Assessment, and in collaboration with NCD, NCPD and UNICEF. This Training Module comprises a:

- Facilitators Manual
- PowerPoint Presentation, and
- Handouts for participants

The Facilitators Manual is primarily for people who work directly with children and families on inclusive reintegration from residential institutions to family care, and on prevention of family separation. This can include:

- Government of Rwanda National Child Development Agency (NCD) Child Protection and Welfare Officers,
- Representatives of the Rwandan National Council of Persons with a Disability (NCPD),
- District Disability Mainstreaming Officers, Gender & Family Promotion Officers, and people working in other local government roles,
- People working in non-governmental organizations (NGOs) or community-based systems.

These social service workforce personnel are the frontline Facilitators for delivering training to the IZUs.

In view of the many responsibilities IZU undertake in their voluntary capacity the training is designed to be concise and succinct and consists of:

- 1 x day training that has 5 sessions:
  - Why it is important to include children with a disability

The definition of disability

The types and effects of disability

- Stigma and discrimination; and
- Why the words we use to talk about disability are important.

- 3 x 2-hour sessional activities to be delivered as convenient

- How the IZU can use the Parents' Sheets (see below) to work directly with families of children with disabilities in their community

The Training Module for IZU is available in Kinyarwanda and English and suitable for adaption in external contexts.

### **Children and families - involving parents and caregivers**

At the same time and as part of the overall TMM programme, a set of "Parents' Sheets" was developed as a guide for parents and caregivers on childhood disability. This reflects emerging best practice to create systems where parents are invited into the training environment.<sup>18</sup> The sharing of information using the materials is facilitated by District Child Protection and Welfare Officers, and other community stakeholders who create the supportive community environment for children with disabilities and their families (Box 4.). The material was conceived collaboratively with the participation of parents and professionals. It is designed as a standing flipboard with pictures on one side facing outwards to the parents and caregivers, with the written text and instructions facing in towards the facilitator. The "Parents' Sheets" is available in both Kinyarwanda and English and is easily adaptable for contexts other than Rwanda.

<sup>18</sup> Underwood, K., Haché, A. & Douglas, P. (2021). IECSS Policy Brief No. 11: Submission to the Day of General Discussion on Children's Rights and Alternative Care: Disability and Childhood. Inclusive Early Childhood Service System project. [https://www.ryerson.ca/content/dam/inclusive-early-childhood-service-system/findings/publications/PolicyBriefNo.11\\_EN\\_SubmissiontotheDayofGeneralDiscussiononchildren%27srightsandalternativecare-Disabilityandchildhood\\_June16,2021\\_updatedFINAL.pdf](https://www.ryerson.ca/content/dam/inclusive-early-childhood-service-system/findings/publications/PolicyBriefNo.11_EN_SubmissiontotheDayofGeneralDiscussiononchildren%27srightsandalternativecare-Disabilityandchildhood_June16,2021_updatedFINAL.pdf)

#### Box 4. The story of Leoncie, Claver and Gift

*Nine-year old Claver has been fostered by Leoncie since he was one-year old, when she noticed that his birth mother was struggling to take care of him. He doesn't like to pay attention to people or have physical contact and spends a lot of his time by himself, manipulating objects. His foster mother recently gave birth to Gift, who has significant health problems and potential disabilities. She was so overwhelmed she called the NCDs hotline and is now assigned a District Child Protection and Welfare Officer for family support. Claver now gets picked up and dropped off by bus for school, the neighbours are helping out with childcare, especially when Gift has to go to hospital and Leoncie says that she has found a "new family at NCD".*

The "Parents' Sheets" are intended to be internationally relevant but locally and culturally contextualized for Rwanda. Human character illustrations make sure the material is user friendly and considers the literacy levels of Facilitators and parent and caregiver participants. The "Parents' Sheets" includes:

- a short introduction to disability
- information on the rights of children with disabilities and the types and effects of disabilities
- a description of child developmental milestones
- learning activities for parents to engage in with their child to stimulate their development
- some ideas for communicating with a child who has a disability
- information about how parents and caregivers of children with disabilities can support each other
- advice for parents and caregivers to think about how they can involve their child with a disability in the usual community activities
- advice for parents and caregivers to think about the different types of services they can access in their own area if they need help for their child

In view of the COVID-19 restrictions it is anticipated that when circumstances allow, UNICEF, NCC and NCPD will host a stakeholder workshop to validate the "Parent's Sheets" as a national tool.

The "Parents' Sheets" is available in both Kinyarwanda and English and is easily adaptable for contexts other than Rwanda

### 3. Learning from the experience

Participation is important. Significant effort was put into making sure the childcare reform process was participative. This two-way dialogue between decision makers and stakeholders ensures better outcomes for children. Investment in consultation with the people who will ultimately use and benefit from the outputs has been important in encouraging ownership and usage. This has included pre-and post-assessment and evaluation with the National Training Team, and local consultation – and where possible validation – with IZU as well as parent’s and caregivers. Obtaining these perspectives has meant that the materials developed, the training delivered, and the coaching and mentoring provided has a real chance of benefitting the community in the long-term.

Policies and programmes that invest in children, their families and communities create the enabling conditions for child development. Children are embedded in families, who are, in turn, embedded in communities. Consequently, policies or programmes that strengthen the ecologies of children, that is their families and their communities, also promote children’s healthy development. Policies and programmes investing in family and community are often more cost-effective than services provided only to children, because they affect a broader population of children and the adults in their lives and are more likely to have longer-term effects. This “collective efficacy” can be enhanced through multi-sectoral collaboration and coordination.

Inclusive education and inclusive child protection are inter-dependent. It is particularly important to make sure that support for education and childcare reforms is synergistic, so that children’s right to education is not compromised through the reintegration process, and that access to education is not an acceptable driver of institutional placement.

A national approach to childcare reform, investing over the long-term and building on success, is more sustainable. The fundamental components of care reform are well established, and a national approach which commits to develop a robust child protection system will result in change over time. Short-term projects over one to three years can build individual components, but consolidation over the longer-term, making sure that a system is embedded in the public good requires a long-term view. With government leadership and consistent UNICEF, the care reform process in Rwanda has been underway since 2012, and as a result can demonstrate real change for children. The key elements of success have been that it is:

- based on a costed national strategy/plan of action
- include a wide range of multi-sectoral services
- is delivered in a coordinated and helpful way
- builds community capacity to protect
- considers the child and family as partners
- puts investment in social work and case management (and referral mechanisms) at its heart, and
- builds on, streamlines, and simplify current systems.

Preparing to be flexible in response to changing circumstances. The work described took place against the background of the global COVID-19 pandemic. The sudden changes in the operational context – for example, when internal travel and face-to-face meetings were restricted with little warning – resulted in uncertainty which could have led to paralysis. However, adopting both a flexible mindset and a practical drive for results meant that continued support was provided for children and families to the extent possible, and that the reform process was not halted. NCD, NCPD and UNICEF, together with the technical advisors continually sought to adapt to new ways of working and were not constrained in changing course when planned parameters altered. This flexibility can now extend to identification of lost opportunities, so that continued support can be offered, for example, supplementing on-line with face-to-face training for consolidation of learning.

Continuing professional development delivers benefits to the individual, their employer, to the public, and helps to safeguard children. Making sure the workforce capabilities keep pace with current standards in the sector helps individuals continue to make a meaningful contribution and be more effective in the workplace. It contributes to improved protection and ultimately to realisation of children’s rights. It helps individual workers to stay interested and interesting and can contribute to worker retention which ultimately benefits everyone.



