

## **Meeting Report of the Regional Learning and Consultation Meeting: Strengthening Child Care Systems**

**Theme:** Reflection on past, current and future efforts aimed at strengthening child care systems in East and Southern Africa



**19<sup>th</sup> and 20<sup>th</sup> August 2014  
Panari Hotel, Nairobi, Kenya**

## Executive Summary

In 2013 the Better Care Network (BCN) initiated a regional inter-agency initiative in Eastern and Southern Africa to build and share knowledge, advocate for care reform and technically sound policy and practices to strengthen families and provide appropriate alternative care in the region.

As a result of a consultative mapping this regional learning was planned to bring together organizations involved in family strengthening and alternative care to provide a forum to share information, build collaboration and prioritise needs in three interlinked thematic areas:

- i) *building and sharing evidence,*
- ii) *strengthening technical capacity and*
- iii) *improving joint advocacy efforts in Eastern and Southern Africa.*

The two day meeting was designed to have a mixed approach of presentations, plenary discussions and group work. There were 36 participants in total representing stakeholders involved in family strengthening and alternative care across Eastern and Southern Africa.

A presentation of the findings of the BCN's regional mapping provided a background to the meeting, as well as an outline of the expected outcomes which were threefold. Firstly, to jointly develop a regional plan and identify priorities and strategies to strengthen care systems in the Eastern and Southern Africa region (ESAR). Secondly, to come up with a suggested mechanism for sharing family strengthening and alternative care initiatives and thirdly, increase networking and collaboration among child care actors in the ESAR.

Over the course of two days a combination of panel presentations, plenary discussion and group work provided the opportunity for organisation representatives to share information and lessons learnt about current activities, gaps and/or challenges in each thematic area. The priorities identified to inform future planning were the following.

### *Building and sharing evidence:*

- Explore causes of separation and how to integrate family strengthening services into social protection
- Strengthen a multi-sector approach and collaboration with other research partnerships to ensure better synergies

- Have a repository of information for sub-Saharan Africa to support better use of the evidence on family strengthening and alternative care and care reform. Establish a community for exchange and learning on practice, research, M&E related to children's care.
- Provide accessible material on the continuum of care, explaining different forms of alternative care (definitions) reflecting regional context. Synthesise information and research to engage effectively with governments.
- Use the inter-agency Alternative Care Guidelines Tracking Tool to measure progress in care reform processes, strengthen coalitions at national level around care reforms and feed into regional bodies reporting processes and as entry point to national level advocacy. Facilitate child and community participation in the process.

#### *Capacity Strengthening:*

- Build the capacity of NGOs by coaching, mentoring and training about standards and practices on family strengthening and alternative care.
- Ensure that parents are included or targeted in capacity building efforts, through peer support and self-advocacy.
- Strengthen the capacity of government workers at national and decentralised levels about care policies and standards good practice.
- Develop standardised training curriculum, recognised competencies, and code of conduct for front line workers related to family strengthening and alternative care. Work with professional association of social workers, other professionals and youth care workers to strengthen their capacity to train, regulate and support social work practices with children and families related to care.
- Ensure that M&E is embedded in the entire capacity building approaches and strategies on care.
- Capacity building of care leavers linking youth services and care leavers

#### *Advocacy*

- Ensure information about regional efforts is disseminated and communicated at national level using the inter-agency framework for child protection system strengthening and inter-agency alternative care country briefs. Use the Alternative Care Guidelines for capacity building and awareness raising liaising and building with existing regional

platforms engaging with the ACERWC, EAC and SADC<sup>1</sup>. Use regional recommendations in national advocacy.

- Promote advocacy platforms for caregivers and children's participation
- Organise a Regional Expert Consultation on Violence against Children and Care in collaboration with the Special Representative for the Secretary General on Violence against children planned for 2015.
- Build on and use national coalitions to advocate with one voice to national governments (including donor, media and local district level). Ensure media is integrated within the advocacy strategy and have a media resource bank.
- Advocate for a long-term investment in child care reform including costing and budget allocations. Transform Faith Based supported residential care institutions to better care services (non-residential such as day care). Use of congregation for advocacy and Link faith based actors across the regional to international sources of support (faith based donors abroad) to advocate for best practice.
- Advocating on the issues facing care leavers transitioning out of care. Strengthen national network of care leavers and use voice and stories of care leavers in advocacy integrating care leavers in all collaboration.
- Advocating for child safeguarding policies and their implementation with residential care providers, other service providers, including FBOs.

An evaluation of the meeting found that participants felt that the objectives of the meeting were met, it was well planned and organized, and the participatory process enabled all participants to engage. A mixed approach of panel discussions and group work was appreciated and worked well. The next steps will be building this collaborative network and developing a plan of action on how the care reform agenda can move forward.

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<sup>1</sup> For SADC, build on the minimum package and link care leavers to youth empowerment agenda.

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## Abbreviations and Acronyms

AC	Alternative Care
ACERWC	African Committee of Experts on the Right and Welfare of the Child
ACPF	African Child Policy Forum
ANPPCAN	African Network on Protection and Prevention of Child Abuse
APRM	Africa Peer Review Mechanism
BCN	Better Care Network
CANEA	Child Adoption Network East Africa
CPSS	Child Protection System Strengthening
CRS	Catholic Relief Services
EAC	East African Community
ECD	Early Childhood Development
ECOWAS	Economic Community of West and African States
ESA	East and Southern Africa
ESARO	Eastern and Southern Africa Regional Office
FBA	Faith Based Actor
GCF	Give a Child a Family
GNRC	Global Network of Religions for Children
KESCA	Kenya Society of Care Leavers
NGO	Non-Governmental Organisation
PROSOWO	Promoting Professional Social Work in East Africa
REPSSI	Regional Psycho-social Support Initiative
RIATT	Regional Inter-Agency Task Team
SADC	Southern Africa Development Community
UNCRC	United Nations Convention on the Rights of the Child
UNICEF	United Nations Children's Fund

## 1. BACKGROUND AND INTRODUCTION

Over the past few years, a number of countries<sup>2</sup> in Sub-Saharan Africa have undertaken significant action to reform national policies and systems concerning the care for children. With this growing momentum for child care reform, there is a significant opportunity to support country-level initiatives by: increasing knowledge, political will and capacity; sharing promising policies and practices; facilitating targeted technical support; and encouraging national and regional collaborations and peer support mechanisms.

In 2013 and building on this momentum, the Better Care Network (BCN) initiated a regional inter-agency initiative in Eastern and Southern Africa. The primary objectives being to improve the knowledge and capacities of regional and national stakeholders, to develop and implement care reform policies and practices that strengthen families, and improve alternative care (AC) services. This initiative builds and shares knowledge on, and advocates for technically sound policy and practices for quality family and alternative care in the region.

During the first half of 2014, BCN undertook an exercise to map and consult with a broad range of regional groups and organizations which link to these areas of work. The report findings indicated that BCN's regional strategy and action plan reflects a realistic, clear set of objectives which focus primarily on evidence building, knowledge management and advocacy, which result in strengthened capacities at the regional level for evidence informed programming and policy making.

Furthermore, the report recommended that BCN should work to support other regional groups working at country and regional level, help move the agenda forward around family strengthening and the alternative care of children and provide concrete, useful and timely deliverables.

As a result, this consultative learning meeting was organised to bring together a group of stakeholders who are committed to strengthening child care systems in the region.

The two day learning workshop that took place in Nairobi on 19<sup>th</sup> and 20<sup>th</sup> August 2014, was designed and planned to have a focus on three thematic areas: i) *building and sharing the evidence*, ii) *strengthening technical capacity and ii) evidence-based advocacy*. (The agenda may be found in the annexure)

There were 38 participants in total (See annexe for list of names, organisations and contact details).

## 2. DAY ONE

### 2.1 Opening remarks

*Severine Chevrel, the BCN Senior Coordinator*, opened and welcomed participants to the meeting by thanking those who travelled from all over the region. This two day meeting is hoped to provide an opportunity to reflect on past, current and future efforts to strengthen childcare systems in Eastern and Southern Africa and to learn from and share the important work that is being conducted across the region. Severine also thanked the Oak Foundation

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<sup>2</sup> These include Rwanda, Ethiopia, Ghana, Liberia, Namibia, Malawi, Kenya and South Africa among others.

for making this gathering a reality and Save the Children for its ongoing organizational support to BCN regional initiative and this conference.

Severine provided a background and spoke about a clear need for support services that prevent unnecessary family separation and provide appropriate alternative care when separation is unavoidable. However in many countries, reliance on poorly regulated and often privately funded residential care remains high. Minimal investment has been made in family-based alternative care, whether formal or informal in nature.

We can see a strong momentum for change within this region across many countries including regional efforts ranging from high level conferences, advocacy efforts with the African Committee of Experts of the Rights and Welfare of the Child (ACERWC), as well as the development of the strategic framework, action plan and accompanying minimum package of services in Southern African Development. Collaborations, including those that are cross-sector such as health and education, are critical for strengthening care systems and broader child protection systems overall. In addition, with the social protection advocacy efforts linked to the African Union Social Policy Framework, it is an opportune time to further highlight the importance of social protection to strengthen the capacity of particularly vulnerable families to care for their children, prevent separations, support family reintegration as well as support appropriate family based alternative care. Furthermore the recent efforts these past few years across the region to strengthen child protection systems have been critical. It is very timely throughout these two days to reflect and discuss the respective work conducted and identify how strengthening care systems has been and can further be a key approach to strengthening the broader child protection system.

With the growing momentum on strengthening care systems - including family strengthening and alternative care - there is a significant opportunity to support existing and future initiatives. With this in mind, these two days together provide an opportunity to share different work underway within the region, collaborate and generate ideas and ways to increase and share the evidence, strengthen capacity and advocacy efforts to inform care reforms including best practice in family strengthening and alternative care in Eastern and Southern Africa.

*Anthony Njoroge, Save the Children Senior Child Protection Manager* added the point that when talking about strengthening child care systems it is imperative to recognize that if we do not, children will be unable to live and enjoy fulfilled lives – they will not realize their potential and will not enjoy their rights.

What needs to come out in the next two days of this meeting is on how best to work together as opposed to working in silos, and how best to consolidate and work together as a single system. He added that Save the Children is thankful to be part of this consultation and supporting the BCN regional initiative in organizing it.

## **2.2 Expectations, objectives and outcomes of meeting**

An introduction exercise was carried out that included participant's expectations for the meeting. (See annexure). These included having an opportunity of sharing information and lessons learnt from others, building cooperation and collaboration opportunities and having an idea or charting of the way forward at the end of the meeting.

*Valens Nkurikiyinka, BCN Technical and Knowledge Management Specialist for Eastern and Southern Africa* provided an overview of the objectives of the workshop:



- To provide a forum to share different initiatives and activities underway or planned across the region related to family strengthening and alternative care
- Identify inter-agency regional priorities in knowledge management, capacity building and advocacy,
- Identify strategic opportunities for strengthened collaboration, coordination and shared learning to strengthen care efforts in the region
- Discuss the findings from the BCN mapping of childcare actors in Eastern and Southern Africa and suggested regional guiding mechanisms.

The expected outcomes are that by the end of the workshop there will be:

- i. A regional plan of key inter-agency priority needs and strategic approaches to strengthen care systems in the region within regards to knowledge management, capacity building and advocacy
- ii. A suggested mechanism for sharing family strengthening and alternative care initiatives in the Eastern and Southern Africa Region (ESAR)
- iii. Increased networking and collaboration among child care actors in the region.

## 2.3 Overview of BCN mapping study

*Valens Nkurikiyinka* also presented the findings and recommendations of the regional mapping. He began by explaining that BCN is guided by the UN Guidelines of Alternative Care for Children and provided an overview of BCN's work globally and in Eastern and Southern Africa as well as a brief overview of efforts within the region that have contributed to building awareness and momentum toward family strengthening and alternative care.

The mapping exercise was undertaken to identify and consult with a broad range of regional organizations and groups which link to family strengthening and alternative care of children. The report includes a list of 47 organizations working regionally which link to the family strengthening and alternative care agenda. Informant interviews were conducted with regional stakeholders representing 22 different networks, international NGOs, regional NGOs, UNICEF, donors and academia.

Findings indicated that:

- The family strengthening and alternative care agenda is extremely relevant to the region
- Regional support to the family strengthening and alternative care agenda can add value to existing efforts already underway
- Engagement could be conducted at the regional and national levels
- Activities that strengthen the evidence base and raise awareness should be prioritized
- Support is needed for increased and improved knowledge, information sharing and coordination in the region
- Inter-agency approaches should focus on facilitating and enabling exchange; promoting advocacy and supporting existing groups to strengthen the evidence to inform the regional agenda.

The report also recommended that regional inter-agency efforts on family strengthening and alternative care, such as BCN regional initiative:

- target a broad range of actors such as policymakers, practitioners and officials regionally and in-country;
- be supportive of existing groups, be collaborative and have a facilitative role to promote dialogue to inform the agenda;

- have achievable and realistic objectives regarding its existing capacities and be defined by clear, simple, concrete, useful deliverables.

Findings and recommendations from the regional mapping can be found [here](#).

## 2.4 Panel Discussion: Building and Sharing the Evidence

*Moderator: Fassil Mariam, Oak Foundation*

This panel discussion focused on *sharing illustrative assessments, documentation, and research within the region including key learning related to family strengthening and alternative care*.

As an introduction, the moderator began by highlighting some relevant issues:

- Alternative care has not yet been fully researched, documented and shared to support and influence programming and policies in the region. This is an issue that more often than not is isolated.
- Family preservation and primary prevention work is really critical if family separation is to be prevented.
- A key challenge experienced is the link with broader development actors, government, and UN agencies, among others. Collaboration is critical therefore to influence policy and programming

The following are the key learning points presented by the panelists:

### **RIATT Knowledge Management Plan as per the new RIATT Strategic Plan**

*By: Naume Kupe, RIATT ESA Programme Manager*

Naume shared RIATT's approaches to research<sup>3</sup>. Research is critical to RIATT's work because it builds the evidence for its advocacy and knowledge management objectives.

The following are the approaches that have worked for RIATT:

- Being strategic on how it approaches research
- Partnership and collaboration is vital. RIATT recognises that it is unable to do everything on its own, and needs to work with partners to enable sound research to be carried out. It therefore collaborates with reputable researchers in the region including Stellenbosch University in South Africa and Makerere University in Uganda.
- RIATT's focus is on secondary rather than primary research because of the cost and the time involved. It does this by commissioning new analysis of existing data sets.
- RIATT ensures that its research translates to simple policy briefs that are easily understood by policy makers and programme staff. This approach helps bring about a bigger impact on the ground.
- RIATT uses its network members to manage, drive the research and to manage the process so that it is action oriented.

Key findings and recommended actions:

- Outcomes for children can be improved if interventions address a variety of factors such as parent's illness, disability, poverty, community violence, stigma and abuse. Interventions that address multiple factors translate into better outcomes for children.

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<sup>3</sup> RIATT-ESA aims to support a joint, scaled-up and sustainable drive towards universal access to prevention, treatment, care and support for children affected by HIV and AIDS in the region. RIATT-ESA is made up of regional political and economic bodies, civil society organisations, academia, donors and UN agencies. It seeks to speak with one voice on children issues in the region.

- Where cash transfers are granted to poor households adds potential of cutting the rate of transactional sex among teenage girls and allowing them to make safer sexual choices.
- The process of involving parents in treatment should include an emphasis on the importance of children's education.
- Linking critical interventions to bring greatest impact when implemented.

**Assessment of the current status of alternative care legislation, standards and practices and identified gaps in six countries: Kenya, Malawi, Swaziland, Tanzania, Zambia and Zimbabwe.**

*By: Daniel Ihansekhien, Regional Child Protection Adviser SOS Children's Villages*

*Key Findings:*

Frameworks, instruments, and legislation exist in the following countries with regards to supporting alternative care systems. Examples:

- Kenya: The National Policy on Alternative Care
- Zimbabwe: The Children's Act that includes Alternative Care
- Malawi: The National Child Protection and Justice Act 2010
- Swaziland: National Guidelines on Alternative Care have been adopted.

Challenges identified by the assessment are:

- A lack of national coordination or monitoring by governments to strengthen the legal framework and lack of practice in line with the Guidelines for the Alternative Care of Children amongst implementing national, international, regional NGOs.
- There is insufficient investment in alternative care systems.

*Recommendations:*

- Alternative care systems need to be supported.
- Information can help in strengthening advocacy in the region as well as help in the designing of programs to build the capacity of care providers.

**Participatory research on kinship care in Kenya, Uganda, Ethiopia, Tanzania and Zanzibar**

*By: Anthony Njoroge, Senior Child Protection Manager, Save the Children EARO*

The emphasis of this research is on informal alternative care, in particular kinship care, with the participation of children, care givers, and families in the research to inform future action, advocacy and priorities that are related to strengthening care systems within the region. The research therefore aims to find a space for children, caregivers and families, to contribute to on-going discussions to help bring about a broad understanding of the reality of kinship care in these countries and the experiences of children and caregivers in that context that will eventually improve informal alternative care mechanisms. The thrust of the research focuses on policy and practice.

*Objectives of the research:*

- To enhance deeper understanding and knowledge about the reasons children are placed in informal alternative care, especially kinship care
- To analyse kinship care from the perspective of children
- To empower children to contribute and be part of the information and decision making process through their participation and contribution to the research.

## **Assessment of the outcomes of reintegration and Standard Operating Procedures (SOPs) for family reintegration**

*By: Joana Wakia, Monitoring & Research advisor Retrak Regional Office*

Retrak's work in reintegrating children back into safe families highlighted the lack of guidance and evidence around reintegration work, especially with street connected children. In this regard, Retrak sought to document the reintegration process within their programs in order to share their experience. Using the Guidelines for the Alternative Care of Children as a framework, the findings have informed the development of the Standard Operation Procedures for family reintegration.

Retrak developed a training package to train staff and their partners. A toolkit was also developed using the Child Status Index (CSI), a tool developed by Measure Evaluation that is comprised of a system of indicators that assess the multidimensional wellbeing of the individual child across six areas of measurement (food and nutrition, shelter and care, protection, health, psychosocial, and education and skills). The CSI was adapted for children separated from their families in order to carry out a baseline study of their wellbeing on the streets, track their wellbeing through its transit centres and then back into their families through follow-up visits.<sup>4</sup>

Evidence indicates that children's well-being is generally improved as a result of reintegration with their families. An important finding is that education and psychosocial wellbeing is slower to improve than other areas in the reintegration process.

## **BCN and UNICEF Country Care Profiles for Rwanda, Ghana and Liberia**

*By: Kelley Bunkers, Independent Consultant*

BCN and UNICEF have carried out country care profiles for Rwanda, Ghana and Liberia to document their respective national care reforms. These countries were chosen because they represent both East and West Africa, and lower and middle-income countries.

A key finding across all three country care profiles was the importance to have government body identified to lead the process, work with other ministries and sectors that include NGOs, community based organizations, academia, mass media, as well as FBOs. This has resulted in national directives and strategies that clearly outline the process of the national care reform, including key benchmarks.

### *Other Key Findings:*

- Most countries have very strong legal and policy frameworks supportive of the care reform. A key issue is that it takes more than frameworks for implementation to take place.
- Advocacy and public awareness were integrated and considered a key part of the reform using evidence gathered as the entry point to inform community members, care givers, children, mass media etc.

### *Challenges Identified:*

- Gathering data for children in alternative care for children in informal care was difficult and trusting that the data was indeed reliable.
- Significant gaps in the numbers, roles, functions, and capacity of social welfare workforce.

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<sup>4</sup> The child status index looks at 12 different areas of wellbeing that includes, among others, food, education, housing, and psychosocial needs.

- Using de-institutionalisation as an entry point into larger care reform was limiting and the focus became getting children out of care.
- Focus of children with disabilities is limited within the care reform in the three countries.
- The range of family based alternative care options remains limited – in terms of the number of children that they serve.

*Gaps in current research:*

- One of the limitations in the sector is there is insufficient documentation of child wellbeing outcomes for children who have been reintegrated. This needs to be demonstrated with hard evidence that shows that they are actually better off.
- A better understanding is needed about most effective separation prevention measures such as: household economic strengthening, access to basic services, having a local social worker who knows the family, improved parenting skills, or a combination of these.

**Key points arising from plenary discussion:**

*How we can be more effective in using research for advocacy purposes:* RIATT has found that having well known researchers speaking to the media and NGOs, can lead to policy makers taking interest in the research or its results. Asking the right questions for the research is also absolutely critical so that the research results bring out the actual information being looked for.

*How to use data analysis to influence policy at government level:* HelpAge International has worked with the Children's Department in the Ministry of Social Affairs in Kenya using data from the OVC cash transfer programme. It showed that 40% of the children were being cared for by older people – 80% grandmothers and 20% older men. These results have been accepted as one of the pillars to get acceptance of the need of policies and interventions for these caregivers by SADC, EAC, among other bodies.

*An example of an effective evidence based model* is the Transform Initiative in Kenya that focuses on preservation of families by engaging fathers and men to play an active role. Men are mobilized through religious or faith-based organizations.

*How to ensure that children's rights are protected when involving them in participatory research:* Save the Children has developed an ethical approach when it comes to participatory research that involves and engages with children.

*Examples of government commitment to care reform:* Rwanda and South Africa provide an example of countries where the government has dedicated resources to child protection system strengthening and care reform processes. It is vital that Ministries of Finance are engaged as decision makers. Further consideration is given to linking care reforms with other national initiatives such as early childhood development.

## **2.5 Building and sharing the evidence group work findings**

Group work was divided into five themes and identified gaps and suggested improvements on ways of working. The outputs on each theme were as follows:

**Theme: Alternative Care**

*Gaps in the current research agenda:*

- An accessible repository for information/knowledge is needed

- Regional gender equality household survey would add value to improve project design
- Definition of residential care is needed to clarify such as whether it includes both residential and family like care such as the SOS model.
- At present there is no known research about children who have been reintegrated from residential care to family and community-based care.
- Evidence of most effective interventions that prevent separation of children from families
- Use and impact of social media as dissemination tool
- Special needs of children with disabilities living in alternative care.

*Improved ways of working:*

At the outset it is important to advocate for the involvement of governments in research initiatives. Recommendations from research findings should actually be implemented for greater efficacy. Using mobile phone technology and social media to gather data and disseminate findings can be most effective particularly for those without access to internet. Greater harmonization of research on alternative care would avoid duplication and better use of resources.

**Theme: Links with other sectors (social protection, health, education etc.)**

*Gaps in current research agenda:*

- Need for a shift in the formulation and conceptualization of research so that it focuses on multi-sector perspectives and therefore promotes better ownership of the findings to inform policies and practice across all stakeholders. Eastern Europe has some good models that strengthen linkages between care and other sectors.
- More cross-sector research would deepen understanding and promote a holistic approach. Conduct research collaboratively and use it to influence policy.
- Mining data – analyzing existing data as a starting point to bring people together across different sectors.
- Defining care and how it is central to child protection systems and relevant across all sectors so it is not seen as a separate issue.

*Improved ways of working:*

Capitalize on existing inter/multi sector platforms to engage on care through mapping such platforms and ensuring that care is understood as part and parcel of child protection and therefore part of other sectors. Show casing the work that is being done by each organization is one way. Then also bringing together other actors to develop and undertake the research.

Promote mainstreaming care when research in these sectors is happening at the risk that mainstreaming can also lead to invisibility of the issue. However by defining what 'care' is and educating about appropriate terminology can help get the message through.

As mentioned above, ownership of the research by government as leaders of the research is crucial as well as having an effective dissemination strategy

**Theme: Family strengthening**

*Gaps in current research:*

While there is the SADC minimum package of services and family strengthening tools, this theme seems to be an area where knowledge is most needed. The group identified the following gaps:

- need to compile existing guidelines and toolkits

- overall there is a lack of research skills, documentation and dissemination of research
- Limited knowledge on the integration of family strengthening services into social protection
- Lack of knowledge on causes of separation
- Poor knowledge on child-caregiver and caregiver-caregiver relationships' impact on quality family care (including intergenerational relationships).

### **Theme: Utilisation of tools to track progress and gaps.**

#### *Gaps and ways of working:*

The results of the tracking tool process need to feed into the reporting process to regional bodies such as the African Committee of Experts of the Right and Welfare of the Child (ACERWC). Also it is noted that we need to focus on the substance of the Alternative Care (AC) guidelines as recognized international standards, as well as the instrument itself.

Consideration should be given to the existing tools at various country levels for different care systems and/or initiatives. An example is that SOS Children's Villages has already started developing tools, for example the Care for Me campaign.

Tools can be comprehensive but evidence that they are being used at county level is often unavailable. A challenge is that sources of information are often captured in silos, so that there is a need to involve multiple sectors in the tracking process.

We need to ensure child and community participation in the assessment process while being sensitive of local culture and contexts.

### **Theme: Dissemination initiatives**

#### *Ways of working:*

##### *For Practitioners*

- Availability of on-line intra-agency dissemination as well as entry point for regular updates about research undertaken through social media and other channels
- Learning forums, symposia, conferences and exchanges at local, national, regional and international levels
- Building in critical reflection time for practitioners in busy schedules is vital
- Strengthening research skills amongst practitioners and peer review

##### *Building Linkages*

- Using existing networks (ACERWC, RIATT, etc...)
- Research involving academic and NGOs partnerships
- Sustained links with agencies responsible for research in the country
- Having one point of contact for coordination purposes is helpful
- Media strategy to disseminate research by providing fact sheets and one-page journalist briefs to summarize outputs e.g. RIATT's card with research outcomes and actions.

##### *Engaging government and policy makers*

- Engage with government right from the design stage
- Synthesizing information into manageable chunks
- Dissemination of policy briefs, as well as strategies that include 'show and tell', site visits and videos are innovative and creative ways to disseminate research.

### **3 DAY ONE: Afternoon session**

#### **3.1 Panel Discussion: Capacity Building**

*Moderator: Denise Stuckenbruck, Child Protection Specialist (Protection, Care and Support)  
UNICEF Eastern and Southern Africa Regional Office (ESARO)*

The theme of this panel discussion was *sharing lessons learnt in strengthening the technical capacity of stakeholders involved in family strengthening and alternative care within the region*. Four experts shared their experience in strengthening the technical capacity of care stakeholders in the region.

#### **Capacity building of para professional social workers**

*By: Noreen Huni, REPSSI*

REPSSI realised the substantive work being done by community care workers who provide much-needed care and support to children. It has taken the lead by adopting three levels of technical support to community care workers.

- *Running learning workshops* (10 days to 2 weeks) around community mobilization, community conversations and developing community action plans around child care, protection and support.
- *Supporting distance learning programmes* with multi-sector approach and collaboration. There are 6 modules that include child rights and psychosocial wellbeing. The Certificate course is being rolled out in ten countries with the University of Kwa Zulu Natal being the accredited authority and REPSSI partners (academic institutions, among others) at country level who recruit at country level and support the deliverables. Those countries are Botswana, Lesotho, Malawi, Namibia, South Africa, Swaziland, Tanzania, Uganda, Zambia, Zimbabwe, Kenya (offered one cycle, stopped to evaluate and is resuming in 2015) and Mozambique (local facilitators have been trained). REPSSI has gone into partnership with learning institutions in the respective countries to have the Certificate course accredited nationally.
- *Working with the Ministry of Education in Zambia* to develop a Teacher Diploma in Psychosocial Care Support that works in tandem with teacher education academic institutions and in collaboration with community care workers.

A key lesson for REPSSI is that community care workers are now being absorbed into the formal social work system, so that accreditation of these trainings is absolutely critical.

#### **Strengthening Professional Social Work in East Africa: The case of PROSOWO**

*By: Gidraph G. Wairire ,PhD, Association of Schools of Social Work in Africa (ASSWA) and Senior Lecturer Department of Sociology and Social Work University of Nairobi*

PROSOWO is a research project that involved Social Work institutions from Makerere University in Uganda, University of Nairobi, Kenya, Institute of Social Work Tanzania and the National University of Rwanda. PROSOWO has also partnered with Carinthia University of Applied Sciences in Austria University on this project which ran from 2011 and ended in March 2014. The final outputs are now being collated.

The PROSOWO project focused on:



- Promoting the social work profession by making it more recognized and noted as a key driver for social development and towards the realization of the MDGs.
- Strengthening the capacity of higher social work education institutions in the region through research, curriculum development, and joint publications.
- Developing sustainable academic partnerships as well as networks in Africa in social work training and research.
- Bringing together social workers within the region through e.g. conferences whereby issues can be discussed that affect the profession.

A research exercise was carried out within the East African region. The results brought to the fore how social workers can partner with practitioners, policy makers, government, and other stakeholders in order to address issues that are of significance to family strengthening and alternative care, child protection and social development.

The process has been able to produce 4 significant national research reports and 1 comparative research report. The project has also been able to produce 15 scientific manuscripts which can now be used by social work educators and practitioners that would enable them know, see and understand what social work is all about in the East African context.

### **Building the capacity of social workforce professionals in Rwanda and the capacity of national NGOs on the de-institutionalisation of care system and strengthening child protection system in the region**

*By: Claudine Nyinawagaga, Country Director of Hope and Homes*

Claudine spoke about the Rwanda experience where the government approved a new strategy to reform the child care system by closing all institutions, re-integrating all children and strengthening their child care and child protection systems. The strategy was adopted in March 2012. A risk identified was that local NGOs and partners wanted to reintegrate children without proper and standardized tools and methodologies which threatened the safety of children and sustainability of the process.

Hope and Homes is an NGO involved in de-institutionalisation and first informed the government by running a pilot project of the closure of an institution. This pilot lead on to build capacity for de-institutionalisation in Rwanda by ensuring that skills are developed in the sector so to enable the process to run smoothly and ensure that the different components of the child protection system is strengthened. It ensured that all partners involved in closing the institutions were also involved in building the child protection system

Hope and Homes conducts child protection training sessions along with provision of technical support and field based supervision with local government, local partners and NGOs, churches and professionals from the health and education sectors This approach indicates how implementation is being carried out and ensuring the methodology and tools used are applied in a proper way. The partners involved in capacity building include the National Commission for Children (the government body in charge of implementing the strategy on national child care reform in Rwanda), UNICEF and Tulane University (a U.S. based social work training institution).

*Key Learning:* The factors that bring about change are: i) evidence and know-how, ii) capacity of the government and all partners involved in service provision and advocacy, iii) political will, iv) availability of funding.

### **Parenting support strategies in Early Childhood Development (ECD):**

*By: Marc Aguirre, Hope Worldwide*

What happens in early childhood has lifelong impact on health outcomes, psychosocial outcomes and economic outcomes. Sadly, many of our children are not reaching their full developmental potential because they are facing a barrage of challenges such as, poverty, malnutrition, toxic stress, and maltreatment, among others. Much of this can be altered by changing the environment the children live in.

However, many governments have not prioritised early childhood development in terms of their health, education into their national plans. Many countries do not have formal policies and plans around early childhood development, and when they do it is more often focused on education for professionalising the workforce. Yet caregivers are ultimately responsible for their children including their access to healthcare, nutrition and other basic services, their social and emotional development and their overall protection.

In this regard, childcare reform cannot be complete without addressing caregivers' involvement. In South Africa, diagnostic reviews have shown that very little is in place to support caregivers and build their capacity. There is need therefore for a shift in terms of care reform. In this regard, Hope Worldwide has created a framework for supporting marginalized caregivers with young children that focuses on taking them through the process of awareness, skills acquisition, action, accountability and ultimately access (5A's). Hope Worldwide works with the communities, health care systems, and social workers.

Caregivers are taken through an orientation workshop and then into parents support groups. Training is both competency and curriculum based and based on building self-esteem, promoting positive parenting, bonding with caregivers as well as benefits of health, nutrition, child and social protection. It tracks these indicators on a monthly basis as well as through focused group discussions.

Hope Worldwide has seen an enormous improvement in nutrition, exclusive breast feeding, balanced diet and uptake in terms of access of healthcare services, vaccinations, social grants, women's economic empowerment opportunities, reduced maltreatment of children, reduced parental stress, among others.

This programme has been established in South Africa and introduced in Kenya, Mozambique, Zambia, Zimbabwe and Botswana. Hope World Wide is working with the governments of Botswana, Kenya and SA and beginning discussions in Zambia on the same programme. The information emanating from this programme is being used as advocacy at national and regional fora.

*Key Learning:* A focus on parenting and ECD has value in terms of, i) influencing the child care reform agenda, ii) child protection strategies, iii) prevention of separation and iv) family strengthening. This critical approach should be integrated into all programmes to help enable children develop in the way they are supposed to.

## **3.2 Plenary Discussion**

### *Social Work curriculum development*

- Research results about social work curriculum development in Kenya found that training should include focus on *adoption and gender mainstreaming*. Also that the extent to which the implementation will be carried out lies squarely on the respective learning institutions Senate's to take leadership and drive the process.
- Considering that social work skills are crucial, there is a need to work with the National Councils for Higher education to influence the curriculum at university so that the graduates are capacitated to handle the challenges in the field.

- The social workforce systems development needs to start looking beyond the social worker for purposes of reaching all children, and therefore roles and responsibilities should be well defined. Professionals involved in child protection must be connected with government professionals otherwise success may not be achieved.

#### *Training community based child care workers.*

- African Network on Protection and Prevention of Child Abuse (ANPPCANN) has collaborated with Daystar University to produce a programme on child development at degree and master's level.
- PROSOWO has found that gender transformative norms to address deep-rooted practices that perpetuate violence against women and children need to be incorporated into curricula by using examples of best practices. Regular technical field based supervision is used to ensure effectiveness and to see how case management is conducted. If gaps are detected in the curriculum, mitigation measures are put in place. Gender norms are also incorporated in the training materials.
- The development of REPSSI training has been a professional process bringing international, regional and national experts including the learners to the process. There is also an intensive quality assurance process that goes into developing the materials. REPSSI has also ensured that the gender aspect is incorporated into its training materials.

#### *Building parenting skills*

- Hope Worldwide's material is based on existing and well known training material that is used with permission. Its material is field-tested, is competency based and is currently being accredited. On gender issues, Hope Worldwide is acutely aware of the lack of men and fathers in the family setting, it is therefore looking at strategies to involve men.
- Caregivers peer support groups are key for preventing separation, but do not fully cater for parents who have children living in institutions. Research findings have shown that short-term interventions do not work for parents as they do not internalize the skills. Hope Worldwide is therefore investing in caregivers support group. These groups, i) have 10 to 15 members per group, ii) are from the same location, iii) meet once or twice a month, iv) have 10 core thematic areas that they need to attend, v) there is in place a loyalty card system, vi) the training is very practical to allow positive interaction with the child, vii) there is a reward at the end of the training.
- Hope Worldwide works in communities that are highly affected by HIV. It therefore talks to these communities on the whole aspect of access to services, access to treatment, care giver wellbeing – which has huge implications on the well-being of the child. Hope and Homes assesses each child, and depending on their respective special needs, such as disability, HIV, etc. each need is addressed based on the specific need of the child. It is a requirement that family who receive back these children must be able to address the special needs of each child. The issue of HIV is therefore addressed in this manner.

#### *Ethical guidelines for training*

- REPSSI has an ethical code of conduct in place for the graduates of the programmes it is offering. This is being managed by the alumni group developed for continuous learning and engagement with the learners themselves.
- In the Kenyan context, there is no specified code of ethics unanimously agreed upon by the professional body of social workers. This body need to be strengthened so that it have a mutually agreed upon code of ethics to help guide the practice.

#### *Role of government*

- Linkage with government agencies responsible for hiring social workers would help in the development of proper Terms of Reference and job descriptions.

- REPSSI supports efforts of various governments to human resource capacity development and their acknowledgement of the graduates of social work as professional workers.
- In Rwanda NGO and FBO professionals are coordinated by the government. This enables to have social work professionals at the district or county level as well at the grassroots level all of whom are contributing to the child protection system and all coordinated - including NGOs and FBOs involved in the process – by the government.

### 3.3 Group Work on Capacity Building

The group works were formed based on types of stakeholders to be targeted by capacity building efforts. The following were the findings of group discussions on Capacity Building:

#### **Theme: Community Based/Para Professionals**

*Current initiatives:* REPSSI, Isibindi programme in South Africa, a joint initiative with Department of Social Development and Tulane University (U.S) and Hope Worldwide

Gaps and Challenges:

- Lack of coordination in training agenda/curriculum/competencies
- Retaining capacity- demand is great for trained workers
- At community level, CBOs, strong services but weak in organizational capacity
- One person playing many roles
- Oversight/limited consideration of workforce issues y other sectors (e.g. SP in Ethiopia)

Recommendations

- i. Develop standardized training curriculum, recognized competencies, code of conduct and fair compensation packages (e.g. Global Social Service Workforce Alliance (GSSWFA) Working Group)
- ii. Recognizing parents as largest workforce and include them in agenda (e.g. Hope Worldwide)
- iii. Integration of workforce into other sectors like education and health
- iv. Community care work should be included in government policy (e.g. policy for the carers in Zimbabwe). Also include kinship caregivers such as grandparents and other relatives or friends of relatives in policies.
- v. Strengthen CBOs beyond programmatic aspects but also in organization development. (e.g. HelpAge)

#### **Theme: Non-governmental Organizations**

*Current initiatives:*

- PLAN International trains other NGOs and partners on child rights, community based child protection, community development and facilitation.
- ACPF: Focuses on child protection in training forums
- Hope and Homes is piloting training of national/local child care NGOs.
- Kenya Society for Care Leavers trains childcare institutions on alternative care, child rights and role of men in families.
- RIATT: Driving knowledge management and evidence, convenes/facilitates dialogue for advocacy.

*Gaps or challenges:*

- Definition of what we mean by capacity building. Are we building institutions of CSOs or the individuals within the institutions.

- Sustainability remains an issue– when one trains individuals vs. organizational
- Lack of transition from exclusive CSO service provision to build government capacity to implement (alienation of CSOs from government)
- 'Briefcase NGOs' who tend to come in and work for short periods of time, then leave
- NGOs over dominance (have lots of information) but do not pass it on or transfer to others
- Competition between NGOs for funding can lead to fragmentation and lack of coordination
- Weak capacity to engage with government/limited advocacy strategies
- Other challenges include: Infrastructure, long distances and poor communication as well as insufficient financial resources to support adequate human resource capacity. Mentoring and coaching support can be effective.

*Recommendations:*

- i. Broaden capacity building to include other sectors
- ii. Encourage collaboration as opposed to competition by improving networks
- iii. CSOs to clearly identify their niche and build on it
- iv. Peer learning and exchange should be encouraged
- v. Embed monitoring and evaluation in capacity building approaches and strategies.

**Theme: National Government**

*Current initiatives:*

Child Right policies are in place in many countries. Efforts are on the way in the region to strengthen social work education and practice through the schools of social work as well as training for social auxiliary workers and community caregivers that are government led in partnership with CSOs.

*Gaps or challenges:*

- Government workers especially outside cities are not aware of laws and policies
- Stretched workforce and limited administrative support in government departments.
- Accreditation and qualifications need to be recognized.
- One off trainings are too brief
- Insufficient support for government sector capacity building by donors.

*Recommendations:*

- i. Work with UNICEF, government and CSOs.
- ii. Set up an NGO forums to do joint actions/speak in one voice
- iii. Persistence is required
- iv. Advocacy needed by CSOs as well as sufficient allocation of budgets.

**Theme: Social Workers and other professionals**

*Current initiatives:*

- Professional bodies, higher learning institutions and social work associations to build member capacity
- Child protection is now embedded in social work curriculum in some countries
- Inter and intra professional collaboration
- Collaboration between child focused CSOs and academic institutions on family strengthening and alternative care research
- Strengthening multi-sector approaches between social work and other professionals
- Training of Magistrates, police, nurses/doctors, district level officials

*Gaps or challenges:*

- Limited capacity of professional associations and weak organizational capacity of secretariat
- Non recognition of social workers especially in government
- Still there is a mismatch between theory and practice in social work education
- Transfer or promotion of trained skilled workers to become managers leaves a gap
- Lack of professional code of ethics in practice and inclusive professional association

**Recommendations:**

- i. Harmonize curriculum in academic institutions to include focus on children and in particular family strengthening and alternative care
- ii. Incorporate practice based modules for skills development
- iii. Lobby for public recognition by academic institutions and associations
- iv. Enhance networks between social workers and other professionals to promote child care and protection
- v. Advocate for legislative measures to recognize/regulate professional practice

**Denise Stuckenbruck (Moderator)** wrapped up this session by emphasizing the need to keep focus on the care reform agenda, whilst taking into account the following key issues:

- Need for cross sector cooperation to improve and deepen capacity development initiatives
- All efforts need to connect with systems building efforts to be sustainable and to make or bring about an impact. Isolated trainings, workshops and interventions do not effectively produce the needed results.
- Strengthening capacity of formal and informal workers is important so that when capacities of informal workers are built, they are enabled to move into formal workforce. Accreditation of the trainings is therefore key.
- There is need for building the evidence base.
- We need to find better ways to ensure that the experiences coming out of the communities and CSOs connect or link with academic institutions.

## **4. DAY TWO**

### **4.1 Panel Discussion: Evidence Based Advocacy**

Moderator: Lucy Jamieson, Senior Advocacy Coordinator, Children's Institute, University of Cape Town.

The theme of this panel discussion was on *sharing past, current and planned advocacy efforts around strengthening child care and protection systems and identifying priority areas for interagency advocacy efforts on family strengthening and alternative care in the region.*

The following are the experiences on advocacy efforts shared by 5 presenters:

#### **Advocacy Efforts with the African Committee of Experts on the Rights and Welfare of the Child (ACERWC)**

*By: Clare Feinstein, Save the Children Africa Representative for the Child Protection Initiative*

The strength of this advocacy effort is that it is a group of agencies that have come together around two agenda's and speak with one voice. The strong relationship between the participating agencies and target audience (ACERWC) has created access and created space in their committee meetings whereby the work has been presented.

The child protection system strengthening advocacy effort was based on child protection system strengthening work with an inter-agency group in West and Central Africa. This then moved to East Africa that begun carrying out mapping exercises supported by UNICEF in 2010-2011. Various conferences took place about child protection system strengthening and the Child Protection Strengthening group produced a joint statement on Child Protection Strengthening in sub-Saharan Africa which was launched at the ACERWC in September 2013. Advocacy activities have since been held in various countries – the success of this initiative can be attributed to the fact that it is an inter-agency initiative that involved 13+ agencies. In addition, advocacy efforts related to family strengthening and alternative care started in 2009 with the First International Conference in Africa on Family-Based Care for Children in Nairobi, Kenya followed by the Conference on Family Strengthening and Alternative Care in Sub-Saharan Francophone and Lusophone Africa in Dakar, Senegal in 2012. In April 2013, the *Moving Forward: Implementing the Guidelines for the Alternative Care of Children* was launched at the ACERWC following which, the members requested a more in-depth briefing on the Alternative Care Guidelines.

The alternative care and child protection system-strengthening groups gave a one-day briefing to the ACERWC. The first half day focused on system strengthening and the second half day on alternative care. The alternative care group composed by Better Care Network, Save the Children, ISS and SOS Children's Village, gave the briefing on family strengthening and preventing separation, provision of different forms of quality care and special circumstances with an accent to the alternative care in emergencies. The briefing provided concrete examples from Rwanda, South Africa, Algeria and the refugee camp in Dadaab, Kenya. One of the key result was the Committee ask to prepare country briefs on alternative care for countries due to report to the Committee this year. The Inter-agency group proposed to the committee to include care component in final framework for analyzing state party reports with a systems lens and it was proposed to produce a concept note to request the Committee that the thematic discussion in the next session is on family strengthening and alternative care – as part of 5<sup>th</sup> anniversary of the guidelines and 20<sup>th</sup> anniversary of IYF.

The Committee has agreed to produce, before the end of its current mandate, a General Comment on Child Protection Systems Strengthening and general measures of Implementation. It has also agreed to use a framework produced by the Child Protection System Strengthening group for analysing State part reports. The Committee has requested that inter-agency work at national level with governments and through the respective agencies to ensure that the report comes to the Committee.

Similar advocacy efforts have been carried out in Economic Community of West and African States (ECOWAS). The aim of these efforts is that all regional economic committee's take up the child protection system strengthening agenda.

### **Advocacy Effort with the East African Community (EAC)**

*By: Beulah Hephzibah, Plan International*

Beulah presented on an inter-agency proposal that focused on engagement with the East African Community.

An opportunity for policy integration was identified with the EAC and seen as an opportunity to introduce a child rights policy. In 2011-2012 a number of organizations came together and formed an inter-agency group towards supporting the EAC to develop an EAC child rights policy. The inter-agency group identified a sectoral committee or department within the EAC that would help in championing the entire process.

The inter-agency then picked member states representation from governments and hosted the first child rights East African conference in 2012. This conference led to the development

of the East African Child Rights Policy and the inter-agency group drew it up with the help of ACPF. The first Draft was developed in early 2014.

The 'champion' person leading the process in the EAC has since moved out of the organisation which has led to a loss of momentum. However, the 2<sup>nd</sup> draft of the policy is soon to be drawn up which then will be presented to the sectoral committee.

### **Advocacy Effort with the Southern African Development Community (SADC)**

*By: Noreen Huni, REPSSI*

SADC has a social, human development and special programmes section and orphans and other vulnerable children and youth fall under this. SADC recognises the role of CSOs and considers them, as well as private organizations, as integral parts of the member states. REPSSI took note of this as it begun talks with SADC between 2003 and 2006 to bring in the issue of children and prioritising their needs. What was achieved during this period was for REPSSI to second an orphans and vulnerable children and youth advisor to SADC in 2006. This stimulated the establishment of a programme of orphans, vulnerable children and youth, established in 2007 within SADC.

The SADC Strategic and Business Plan 2010-2015 was approved in 2009 and REPSSI immediately began developing a comprehensive care and support policy for orphans and vulnerable children which was approved in 2012. REPSSI once again began working on the Minimum Package of Services and Care with others in a consultative process. Save the Children came in at this point with additional technical expertise to carry out a regional mapping of services for children and provided recommendations. The critical areas of work that are in the minimum package of services include, i) education, that includes early childhood development, ii) healthcare and sanitation, iii) food security and nutrition, iv) protection for children and youth, v) psychosocial support.

In terms of supporting and delivering the minimum package, REPSSI has been advocating with the members states and pushing for the domestication of the minimum package in each of the countries. REPSSI has also provided training and sensitization for the member states at regional level in terms of defining the contents of the minimum package.

*Key Learning:* i) To be successful, advocacy efforts should appreciate the role and mandate of the SADC secretariat, ii) One needs to understand fully the politics surrounding the purpose and the structures, iii) agreeing values and working modalities is important especially around consensus building, iv) working with SADC can be a very slow process.

### **Building the Evidence for Effective Advocacy**

*Florence Martin, BCN Senior Policy and Knowledge Management Adviser*

Florence spoke on three global evidence-building initiatives that present strategic opportunities for advocacy at the regional level.

- i. The inter-agency tracking tool on the implementation of the alternative care guidelines is an initiative made up of over eight organizations. The tracking tool aims to provide a way for national level actors to measure progress in terms of implementation of the alternative care guidelines. It will enable national level actors to assess what progress is happening with regards to implementation of guidelines, what the gaps are and to plan how to address them. The tool will be web based and interactive and its main objective is to strengthen national coalitions around care reform and inform on the priorities that need to be addressed. The tool will be field tested in three countries: Rwanda, Paraguay and Romania.



- ii. The Child Protection Monitoring and Evaluation Reference Group (CP MERG) has established a Technical Working Group on Children without parental care led by BCN and Family For Every Child at the global level. One of its main areas of focus is on strengthening the use of data relevant to children's care and in particular household level surveys such as Demographic Health Surveys (DHS) and the Multiple Indicators Clustered Surveys (MICS). BCN is working with various agencies involved in the household surveys to unpack the data and analyse it to provide information as to what is happening to families, children's care and their living arrangements. BCN is also developing a number of country briefs using the DHS/MICS data providing an analysis of children's living and care arrangements. 10 country briefs are being developed, most on countries from this region.
- iii. An inter-agency working group on children without parental care is based in New York. BCN is co-chairing the group together with SOS Children's Villages and one initiative that it is facilitating in collaboration with the Office of the Special Representative on Violence against Children is to have a series of expert consultations at the regional level on violence and the care setting. The first regional consultation is due take place in Brazil in December 2014 to coincide with the 5<sup>th</sup> anniversary of the guidelines. If there is interest in this region a similar expert consultation could be organized in 2015. The UN Special Representative on violence against children is carrying out expert consultation around various themes and it would be important to address the issue of violence in all care settings through these.

### **Regional inter-faith advocacy initiatives that promote, enhance and strengthen children's welfare**

*By: Belall Maudarbux, Network Manager, Global Network of Religions for Children/ Nairobi office*

The Global Network of Religions for Children specifically focuses on grassroots childhood issues. Some of its key initiatives include, i) the world day of prayer and action for children (20<sup>th</sup> November), ii) the end child poverty initiative, iii) ethics based education programme.

The critical factors that the network has identified include mobilization of religious leaders towards raising resources that can be channeled towards child rights and child welfare, in addition to mobilizing congregations to bring to the fore issues concerning childhood.

Key learning: Working with government agencies and inter government agencies may be very slow and painful. In addition childhood cannot wait – 'a childhood delayed is childhood denied'.

## **4.2 Plenary discussion**

The following considerations arose from the plenary discussions:

- While work in the bigger arena is taking place, important on-going grassroots efforts are happening that can strategically inform national and regional level advocacy initiatives.
- Policy guidelines and monitoring instruments can be effective tools to monitor progress and hold governments to be more accountable and ultimately make an important contribution to improving lives for children. There have been good pilot initiatives but not enough has been done to ensure their sustainability and that they are scaled up to national level.

*Key Challenges:*

- With a 'bottom-up' approach where evidence at local level is used for advocacy at national and regional levels, the main challenges are: i) weak capacity of people in the field who are concerned with day to day situations and challenges rather than seeing the 'bigger picture', ii) insufficient data collection and reporting so, although important work is being carried out, many do not know about it, iii) lack of resources and weak research capacity, and iv) the means and capability to produce good reports.

*Key Learning:*

- Need to understand the workings and structures of bureaucracies and identify entry points. This may require considerable engagement and time in order to promote advocacy issues.
- It is not helpful to have a 'one-size fits all' approach as situations and contexts are different. It is therefore important to work bearing in mind the balance of probabilities.

### **4.3 Group Work: Evidence Based Advocacy**

The process of the Group work was organized in a café format with five "Cafe tables" that had a constant 'host' remaining at each table. The café conversations facilitated a process of collaborative dialogue to bring out ways of making a difference using the power of collective intelligence. In this way ideas are formed and spread with insights emerging. This helped to bring out a cross pollination of ideas.

#### **Theme: Regional Level Bodies**

*Issues:*

- Regional and national linkages need to be strengthened;
- We can seize capacity building opportunities through the ACERWC, EAC and legislative assembly, SADC, religious bodies and regional practitioner bodies.

*Collaboration opportunities:*

- Use regional 'tools' to strengthen regional bodies and to strengthen national CSO collaboration so that we have 'one voice' and guidelines to bring us together
- Develop country care briefs for ACERWC when reviewing state reports. This is currently facilitated by BCN on behalf of the inter-agency alternative care group working with the ACERWC. Other interested organizations are welcomed to join.
- Facilitating wider 'café' discussions such as the regional learning events for promoting collaboration within regional stakeholders.

#### **Theme: National Level governments**

*Issues:*

- We have resource guidelines that include the Guidelines for the Alternative Care of Children and UN Convention on the Rights of the Child (UNCRC) as well as evidence that provide disaggregated data and examples of good practices
- National level coalitions, bodies and alliances are a critical mass to improve speaking with one voice and should include donors, media and participation of children
- Investment in terms of human and financial resources is crucial because advocacy necessitates long term commitment.
- There is government overreliance on donor funding, so we need to explore internal resource mobilization to budget for service delivery and child care. Aid comes with conditions and these need to be set priorities by governments rather than donors.

*Collaboration opportunities:*

- Focus on national and country or regional governments

- Engage with regional actors and mechanisms such as the ACERWC, Africa Peer Review Mechanism (APRM), to provide feedback and use to advocate with national governments.

### **Theme: Media**

#### *Issues:*

- Target groups include national, regional and international stakeholders.
- Resources include community radio stations, theatre and social media.
- We need to understand the politics of media and build relations.
- As well as train journalists and editors and integrate media advocacy messages in our plans.
- Use of language needs to be culturally sensitive as well as technically correct.

#### *Collaboration opportunities:*

- Have regular talks on thematic issues and feature print pieces and editorial forums
- It is important to sustain collaboration with actors and build on established platforms.
- Develop a regional media strategy with involvement from RIATT, BCN and SCI.

### **Theme: Children and Care Givers**

#### *Issues:*

- Children need to be seen not as 'objects but subjects', they need to be given voice through promotion of child participation in more ways.
- More data needed on who are caregivers, what are their needs, what interventions work and clarity of concepts
- A smooth transition from care needs to be both appropriate and a full spectrum of options needs consideration
- Child safeguarding and "social protection+"<sup>5</sup> are not found in some organizations' policies and practices
- Use existing tools, standards and evaluations to harmonize and contextualize when necessary. The approach should be participatory and rights based.

#### *Collaboration opportunities:*

- Interagency advocacy on social protection and use existing platforms to share and disseminate research and roll out tools that work to support caregivers.
- Collaboration needs to have a clear agenda and MOUs.

### **Theme: Faith Based Actors (FBAs)**

#### *Issues:*

- Need to keep the centrality of child -not focus on faiths
- Readapt faith-based institutions to 'better' care institutions
- Platform is needed to sensitize faith leaders on child care reforms
- Promote programmatic long-term care instead of short-term one-off programs
- Use 'congregations' for advocacy as there is power in numbers
- Transform orphanages to day care centers or other services supporting families and communities
- Educate FBAs on the Alternative Care Guidelines and good practices.

#### *Collaboration opportunities:*

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<sup>5</sup> Integrating better child protection in social protection and vice versa (including providing psychosocial services together with cash/economic strengthening

- Use FBAs to identify foster parents and identify other role players within faith communities
- A word of caution that potential donor or NGO partners should not be 'patronising' towards FBAs. FBAs need to 'own' and feel involved in care reforms
- Connect FBAs to donors abroad
- Get faith leaders to involve parents in their respective groups
- Need for materials and resources from faith traditions and scriptures on child protection

### **Theme: Care Leavers**

#### *Issues:*

- Need to promote national networks to add value on advocacy by replicating the model of Kenya Society of Care Leavers (KESCA) across the region
- Use the voices and stories of care leavers for advocacy
- Capacity building for care leavers in terms of life skills and vocational training
- Research gaps needs filling on the plight and experiences of care leavers and use for awareness raising and advocacy purposes
- Transition bridge needs to widen beyond 18 years of age to 21 to 23 years.

#### *Collaboration opportunities:*

- Integration of care leavers issues in programme strategies other actors
- Involve donors, faith based actors and others in inter-agency advocacy
- Promote the links between child care organizations and government ministries in charge of the youth for vocational skills and employability. In the Kenyan case, would be the National Youth Service.

Lucy Jamieson wrapped up the session by thanking participants and emphasized the need to include engagement with government, inter-agency collaboration, evidence based research and media in regional advocacy efforts.

## **5. DAY TWO AFTERNOON SESSION**

The purpose of the session was to provide planning direction for the child care sector by identifying priorities in the three thematic areas of the meeting: building and sharing the evidence, capacity strengthening and advocacy. Priorities were drawn from examples of efforts led by stakeholders shared in plenary presentations, and arising from discussions and group work during the previous sessions.

The process involved participants visiting a 'gallery' of posters that outlined each outcome area, then selecting priorities and interest areas, by placing sticky notes with the name of the interested organization concerned in following up.

### **5.1 Priority Outcome Areas in going forward.**

<b>KEY AREAS AND OUTCOMES OF WORKSHOP</b>		
<b>Priority areas</b>	<b>Scoring</b>	<b>Interested organizations</b>
<b><i>Building and sharing evidence</i></b>		
Strengthening collaboration with other networks, research initiatives to ensure better synergies with other sectors (in use of research, advocacy initiatives)	***** ***(15)	African Child Policy Forum, Better Care Network, Global Network of Religions for Children

etc. ) with a multi-sector approach		
Addressing the gaps in our knowledge: <ul style="list-style-type: none"> <li>Causes of separation</li> <li>Integration of family strengthening services into social protection</li> </ul>	***** **(14)	Better Care Network, Children's Institute, Give a Child a Family, Hope and Homes for Children, Hope Worldwide, Sonke Gender Justice, Plan International, UNICEF ESARO, Retrak, HelpAge, Save the Children.
Having a repository of information for sub-Saharan Africa to support better use of the evidence on care	***** (12)	African Child Policy Forum, African Network on Protection and Prevention of Child Abuse, Better Care Network, Children's Institute, RIATT ESA, Save the Children, SONKE, SOS.
Synthesising information/research to engage effectively with governments	***** (11)	Better Care Network, UNICEF ESARO
Providing accessible material on the continuum of care, explaining different forms of alternative care (definitions) reflecting regional context.	***** (7)	Better Care Network, Children's Institute, Give a Child a Family
Support/facilitate child and community participation in the tracking process to measure implementation of AC guidelines	***** (8)	SOS, Regional Inter-Agency Task Team on Children and Aids/ESA
Making use of the inter-agency tracking tool to measure progress in care reform processes, strengthen coalitions at national level around care reforms, feed into regional bodies reporting processes and as entry point to national level advocacy,	***** (7)	Better Care Network, Hope and Homes for Children, RETRAK, Save the Children, SOS
Establishing a forum/community for exchange/learning on practice, research, M&E on children's care	***** (6)	African Network on Protection and Prevention of Child Abuse, Better Care Network, Retrak, Regional Inter-Agency Task Team on Children and Aids/ESA, Terres des Hommes, Sonke Gender Justice
<b>Priority areas</b>	<b>Scoring</b>	<b>Interested organisations</b>
<b>Capacity building</b>		
Build the capacity of NGOs (coaching, mentoring and training) on approaches and strategies, standards and practices on family strengthening and alternative care.	***** (10)	African Child Policy Forum, Catholic Relief Services, Give a Child a Family, Global Network of Religions for Children, HelpAge International, Hope and Homes for Children, ICS, Sonke Gender Justice, Save the Children,
Ensure that parents are included and targeted in capacity building efforts, including through peer support and self-advocacy as the largest workforce.	***** (8)	Give a Child a Family, Hope World Wide, Investing in Children and their Societies, Parenting in Africa Network, RETRAK, Save the Children, Sonke Gender Justice, SOS.
Strengthen the capacity of government	***** (8)	African Network on Protection and

workers at national and decentralised levels on care (awareness of policies and standards, knowledge of good practices training and qualifications)		Prevention of Child Abuse, Better Care Network, Give a Child a Family, Global Network of Religions for Children, Hope and Homes for Children, Save the Children.
Develop standardised training curriculum, recognised competencies, and code of conduct for front line workers focused on care (including a mechanism for integration with/relations with professionals and mandated agencies)	***** (8)	Catholic Relief Services, Children's Institute, Hope and Homes for Children, Investing in Children and their Societies and Sonke Gender Justice.
Ensure that M&E is embedded in the entire capacity building approaches and strategies on care	***** (7)	RETRAK, Save the Children, SOS.
Capacity building of care leavers linking youth services and care leavers	**** (4)	Kenya Society of Care Leavers and SOS
Work with professional association of social workers, other professionals and youth care workers to strengthen their capacity to train, regulate and support social work practices with children and families (with focus on care)	** (2)	Children's Institute, Give a Child a Family

<b>Advocacy</b>		
<b>Priority Areas</b>	<b>Scoring</b>	<b>Interested Organizations</b>
Ensure regional efforts are brought back to national level using the framework for Child Protection System Strengthening (CPSS) and AC country briefs	***** * (13)	African Network on Protection and Prevention of Child Abuse, Better Care Network, Children's Institute, HelpAge, Hope & homes for children, Give a Child a Family, RETRAK, Save the Children, SOS.
Set up advocacy platforms for caregivers and children (child participation)	***** (10)	Help Age, Hope World Wide, Investing in Children and their Societies, RETRAK, Save the Children (Kinship Care Research), Sonke Gender Justice, SOS.
Regional expert consultation on violence against children in all care settings (2015)	***** (8)	African Child Policy Forum, Better Care Network, Children's institute, Hope & Homes for Children, Regional Inter-Agency Task Team on Children and Aids/ESA, Save the Children, Sonke Gender Justices, SOS.
Transform Faith Based Institutions to better care services (non-residential such as day care). Focus on institutions willing to change	***** (6)	Better Care Network in collaboration with the Faith to Action Initiative, Catholic Relief Services, Give a Child a Family, Global Network of Religions for Children, Kenya Society of Care Leavers, Save the Children, Sonke Gender Justice, Terre des Hommes.
Using alternative care guidelines for capacity building/awareness liaising	***** (6)	African Child Policy Forum, Better Care Network, Hope & Homes for

with ACERWC, EAC, SADC (add on to the minimum package, link care leavers to youth empowerment)		Children, Plan International, RETRAK, Save the Children.
Using national coalitions to advocate with one voice to national governments (including donor, media and local district level)	***** (5)	Children's institute
Advocate for a long-term investment in child care reform (including costing and budget allocations argument)	*** (3)	Hope & Homes for Children
Integrated media in Advocacy Strategy (messages and planning)	*** (3)	Parenting in Africa Network, Regional Inter-Agency Task Team on Children and Aids/ESA, Sonke Gender Justice.
Building on existing national and regional platforms	*** (3)	
Advocating on the issues facing care leavers transition out of care – beyond 18 (bridge)	*** (3)	Kenya Society of Care Leavers, Plan International
Advocating for child safeguarding policies and their implementation with residential care providers, other service providers, including FBOs	*** (3)	African Network on Protection and Prevention of Child Abuse, Give a Child a Family , Kenya Society of Care Leavers, Plan International
Using regional recommendations in national advocacy	** (2)	SOS
Media resource bank (press statement)	** (2)	Regional Inter-Agency Task Team on Children and Aids/ESA, SONKE Gender justice
Use of congregation for advocacy (need for materials for faith tradition and scriptures on Child Protection)	** (2)	Better Care Network in collaboration with the Faith to Action Initiative, Give a Child a Family
National network of care leavers and use voice and stories of care leavers in advocacy integrating care leavers in all collaboration	** (2)	Better Care Network, Kenya Society of Care Leavers
Link Faith Based Actors to international sources of support (donors abroad)	* (1)	Better Care Network in collaboration with the Faith to Action Initiative, Global Network of Religions for Children

## 5.2 Next Steps and Way Forward

*By: Valens Nkurikiyinka, BCN Regional Specialist*

Valens summed up by informing participants that a workshop report will be circulated. . Following this learning meeting, a next step will be to identify selected priorities for joint action that BCN can facilitate aligned with its mandate and capacity and taking in account and building on efforts already underway. BCN will follow up with organizations that showed interest in the identified priority efforts as well as continue to facilitate information sharing and collaboration within the care sector.

## 5.3 Closing Remarks

*By: Severine Chevrel, Senior Coordinator for BCN*

Severine acknowledged that this has been a very full and productive meeting and a great start. In this regard, we have achieved a lot in this meeting yet more work lies ahead and is needed towards improving the lives of children, families and communities.

She thanked everyone for their contribution in terms of energy, expertise and provision of direction on how to move the agenda forward and as mentioned by Valens previously, reiterated that BCN was committed to follow-up on specific joint priority actions in line with its mandate and capacity and taking in account the work already underway within the region. Severine thanked the Oak foundation for making this meeting possible and for all participants for making this meeting a success, including the rapporteur and facilitator for a job well done.

*By: Anthony Njoroge, Save the Children*

On behalf of Save the Children, Anthony thanked all for full participation in this meeting. He urged further collaboration to enable participants to accomplish the tasks ahead. Finally, he emphasized Save the Children's commitment to supporting the BCN regional initiative and to continue providing support.

## **5.4 Evaluation of the meeting**

The evaluation of the workshop was positive and all participants felt the objectives of the meeting were met. It was found to be a participatory, well planned and organized. A mixed approach of panel discussions and group work was largely appreciated. Much work was covered in a short space of time and key outcome areas were identified to provide direction for a way forward for the different stakeholders to work together on family strengthening and alternative care. (See annexure for evaluation summary).

## **ANNEXES**

[Annex 1: Agenda](#)

[Annex 2: Summary of Expectations](#)

[Annex 3: Summary Evaluation](#)

[Annex 4: Participants List](#)

[Annex 5: Summary of Child Care related Research Efforts conducted in Eastern and Southern Africa](#)