

# **Zambia Assessment**

## **Capacity to manage alternative care.**

**Andrew Dunn – Consultant for UNICEF ESARO**

**Draft - 17 October 2007**

### **1 People/Organisations Visited and Meetings Held**

Minister of Community Development and Social Services  
Registrar of Societies – Ministry of Home Affairs  
Deputy Registrar of Societies – Ministry of Home Affairs  
Assistant Registrar of Societies – Ministry of Home Affairs  
Acting Commissioner DSW MCDSS  
Gregory Mwanza, Chief Planning Officer, MCDSS  
Melvyn Zulu, Statistics Analyst, MCDSS  
Stanfield Michelo – Chief Social Welfare Officer Statutory Services, MCDSS  
Monica Mweenda Jalasi, Senior Social Welfare Officer, MCDSS  
Bridget Katati Munwungwe Senior Social Welfare Officer, MCDSS  
Felix Mwale, Zambia Association of Child Care Workers  
Irene Mungu, Provincial Social Welfare Officer Lusaka Province  
Assistant Welfare Officer, Lusaka District x 2  
Mulenga Sendeme Social Welfare Kafue  
Basil Mangani, Guidance and Counselling Coordinator, Education Department, DWAC, Kafue  
David Chanda, District TB/HIV Coordinator, Kafue DHMT, MOH  
Brian Siwisha, Information Officer, DOVCC, ZANIS, Kafue  
Elijah Nguni, Chairman, DOVCC, DWAC Kafue  
Cacious Miyanda, Project Development Officer CCF Kafue  
Mkanda Wire, Nangongwe, Community Welfare Assistance Committee  
L. Tazimaiwa, Nangongwe, Community Welfare Assistance Committee  
Magrete Mwale, Nangongwe, Community Welfare Assistance Committee  
Tony Kisadha Country Director SC Norway  
Director, Energy of Hope Children's Home, Kafue  
Sister Flora, Mwana Maria, Catholic Children's Home  
Pastor Godfrida Sumaili, Chairperson Children in Need Network and Jesus Cares Ministry  
Director, Fountain of Hope, Street Children Shelter  
M. Musukwana., Senior Regional Coordinator, Lusaka, YWCA  
Cindy Mwila, Counsellor, Child in Crisis Centre, Lusaka, YWCA  
Director, Christian Alliance Zambia  
Matron, House of Moses Babies Home  
Ivy Chipasha, Executive Secretary, Zambia Child Welfare and Adoption Society  
Paul Charles Phiri – Victim Support Unit, Zambia Police  
Harriet Sengolo – Counsellor, One Stop Centre for SGBV  
Sharon Williams, Head of Secretariat, Child Justice Forum  
Sharon Kaunda Nawa, Resident Magistrate, Child Justice Forum  
Bruce Wilkinson, Chief of Party, RAPIDS, USAID  
Stephen Mukumbula Plan International  
Stefan Szeless, Head of Mission, ICRC  
Mark Vander Vort, Director, Care International, Zambia  
Rev, Boston Mwebela, Lighthouse Community Church, Kabwe  
UNICEF Lusaka

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## 3 Socio Economic Context

Zambia has a population of about 11.5 million 49% are below 18 years and 20% < 5 years. There are fewer men than women in the 25-35 age range. The economy is improving, but agricultural production is suffering from climate change which effects about a one third of households who are dependant on agriculture.

67% of Zambians are poor and 46% of Zambians live in extreme poverty. Among the poorest of the poor 25% of households are headed by elderly persons and 27% by women. Poor children begin school at an older age with attendance rates for 7-13 year olds at 75% across the country but this lowers to 68% for the extremely poor. There is a strong connection between poverty and education. Only 33% of poor households are headed by a person with secondary education.

Hidden education costs and health user charges affect the ability of the poor to access these services and in Kafue District the PWAS is frequently used to pay for school uniforms, school maintenance costs or costs involved with transport for CD4 tests or collecting ARVs

## **4 HIV and AIDS**

PLHIV are estimated to be 1.1 million people, and of these 130,000 are estimated to be under 15 years. Estimated number of children born to HIV+ women annually is 89,000, with 28,000 of these estimated to be HIV+

- Less than 5% of those needing ARV treatment are receiving it. People receive ART according to CD4 count or vulnerability to infections.
- Over 50% of HIV-infected children who do not receive treatment die by the age of two. 7200 are receiving ART
- Worse only 1% of children needing Cotrimoxazole prophylaxis treatment have access to it.

In Kafue District with a population of 176,000, 23% of adults are estimated to be HIV infected. Of these 2000 are registered for treatment with 1,600 on ART. Better statistics came from RAPIDS where out of 40,000 PLHIV, 14,000 were receiving ART

## **5 Child Protection**

### **5.1 Violence and Abuse/SGBV**

Sexual abuse is a mode of HIV transmission to children.

There are no national statistics on violence or abuse perpetrated against children. The Child in Crisis Centres/One Stop Centres each deal with 10 to 12 cases a month. There are only 3 or 4 centres in Zambia. But Care and RAPIDS have secured funding for 8 more centres between them.

SGBV is being increasingly reported to organisations like Victim Support and YWCA, particularly in the One Stop Centres. It has been well documented by Human Rights Watch.<sup>1</sup> There are an increasing number of abuse cases against girls perpetrated within the family. The One Stop Centre in Lusaka provides counselling, organises medical, legal and protection services all under one roof. It can receive 5 child abuse cases a week. This and two similar centres try to ensure justice for the child and conviction of the perpetrator. Very often a child will spend several months at the YWCA shelter so that her testimony/witness capacity is not interfered with. Penalties for defilement are 15 years plus.

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<sup>1</sup> Suffering in Silence HRW 2002

There is some role confusion between the NGO, police and DSW over who makes decisions regarding the protection of the child. There are no formal case conferences, no at risk register, and few court orders applied for get a place of safety. The police and the NGO are making the decisions regarding the child's placement. There is no use of court orders to protect a child where the perpetrator is on bail or if criminal conviction is not secured on a particular man but there is evidence of sexual abuse by someone.

Points:

- Uncertainties regarding rights of protection - where evidence of abuse is not provable – ie word of child against word of perpetrator;
- In 2006 out of 1008 offences committed by children 108 are for defilement. What are the sentences for children if the sex was “consensual” between children of similar ages?
- Women and girls travel many miles to the One Stop Centres to get justice, there is a growing demand for justice.
- Slight concern that achieving justice and prevention of witness interference is given greater priority than protecting the child from further harm.

## **5.2 Homelessness**

The number of street children in Zambia is estimated at 13,500 of which 15% are girls. Approximately 25% of children seen on the streets during the day are sleeping on the streets at night<sup>2</sup>. The ratio is less for girls.

Interventions are reintegration with family and use of residential care either permanent or in temporary shelter

## **5.3 Early Marriage**

The legal age for marriage is 21 years and for sexual consent is 16 years. 42% of girls are traditionally married before 18 years. (Check is USI/defilement now below 18 years

## **6 Informal Care**

The number of children from 0-14 years living with both parents is 62%, but this can decline to 49% when figures are disaggregated for 10-14 age group and to 51% for Western Province. Even lower rates can be expected for the 15-18 age range where there

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<sup>2</sup> The situation of street children in Zambia: A study by Ministry of Community Development and Social Services Ministry of Sport, Youth and Child Development Supported by UNICEF, Project Concern International and RAPIDS. Zambia 2007

is no disaggregated data. These figures are fairly constant across the 1992, 1996 and 2002 DHS.

23% of children live with mother only. 6.1% children live with mother when the father is dead as against 11.7% who live with mother but father is alive. Only 4% of children live with just their father,

8.1% of children live with neither parent but both are alive which rises to 12.4% for 10-14 age range.

Children with both mother and father dead are 2.9%, father dead only 12% and mother dead only 6.0%.

Single orphan = 12.2%

Double orphan = 2.9% though this figure may rise to 9% for the 15-18 age group

Any orphan = 15.1%

33% of orphans and 12% of non-orphaned children are being brought up by their grandparents (around 710,000 children)<sup>3</sup>. There are now five times more orphaned children staying with their grandparents than twelve years ago. Fewer orphans now stay with their aunts, older siblings or other relatives.

The care of children by relatives on death of parents is discussed at the time of the funeral and anecdotally given less consideration than other property<sup>4</sup>. When the grandparents become too old or die the children are passed to other relatives.

Points:

- Very few orphaned children are subject to statutory or formal care or supervision by DSW
- Many absent fathers, what is their role?
- Remarriage and step children – is this an issue?
- Are the decisions made by families about orphan care always in the best interests of the child? Would improving the frequency of making wills or counselling improve these decisions? The frequency of orphanhood would seem to rule out State oversight but how are children or communities participating in these decisions?
- Considerable use of fosterage when parents are alive. Has there been any research in Southern Africa into the fosterage arrangements when parents are alive?
- Research needed into orphan care – what works best. Ask range of children/orphaned what type of care is preferred?

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<sup>3</sup> Orphans and Vulnerable Children in Zambia 2004 Situation Analysis Summary Report Vol 1 MSYCD

<sup>4</sup> CWAC member Kafue

## **7 Formal Care**

In 2007 to date Lusaka District committed 61 children to formal placements. 20 to non relatives, 10 to relatives and 30 to babies homes pending adoption.

There is no legal guardianship in Zambia that can give a relative parental responsibilities in law.

### **7.1 Foster Care**

During 2006 DSW worked with 231 male and 108 female foster care cases. Of these 132 male and 23 female orders were granted. Most foster care is a precursor to adoption.

A foster allowance is payable at the rate of 100,000Kwacha (US\$25) per month. Payment is however infrequent and is disbursed centrally.

Appears that children under 3 are more likely to be placed in Babies Homes than with foster parents

### **7.2 Adoption**

DSW Figures: 47 male and 52 female new adoption casework cases were received in 2006. Orders made were 31 male and 38 female. The DSW acted as Guardian ad Litem in 31 cases.

In 2007 to date, the Child Welfare and Adoption Society for Zambia has received about 100 applications for adoption mainly from abroad/external. 20 applications received from Zambians. CWAS particularly concerned with regard to USA as to which Adoption Societies are accredited. Late social work and police reports are slowing up adoption processes. Residence requirement is blocking overseas adoptions.

Points:

- Ministerial concerns as to whether there is due process
- No independent guardian ad litem representing the child
- “Matching” with regard to ethnic background of child/adoptive parents
- Consents can be with held. No ability by court to overturn consents with held by relatives or parents
- No abortion on demand, but no pre birth adoption counselling
- Supply exceeds internal demand but not external. Children not being placed due to delays, uncertainties, legitimate concerns and blockages during process. This means some children may miss opportunities and remain in homes for a lifetime.
- Discordant HIV+ couples?

### 7.3 Residential Care

The Registrar of Societies responsible for all formal registration has no monitoring mechanism to ensure that the organizations registered are providing services as per the application. They have registered 191 orphanages or organizations operating orphanages between 2005 to date.

The Department of Social Welfare has the statutory responsibility of inspection and has set standards but due to lack of resources is not able to be thorough as regards frequency or coverage of inspection.

DSW Annual Report 2005 - 101 homes contain 4592 children

Children's homes MCDSS<sup>5</sup>

Province	No. of Homes	Total number of children
Lusaka	41	2, 702
Southern	19	555
Copperbelt	22	961
Luapula	2	44
North Western	4	149
Eastern	2	101
Northern	2	80
Central	6	499
Western	3	104
<b>8 Total</b>	<b>101</b>	<b>4, 592</b>

DSW Annual Report 2006 – “By close of the year, the statistics showed that there were 200 children’s homes benefiting over 5000 children.” To date Lusaka DSW has “registered” 53 homes and 15 of these are used by DSW to place children either by court committal order or by written referral. These homes are viewed as being cooperative. There appears to be some inconsistency in reporting of numbers of homes and the number of children in them.

There are no statistics regarding what category of children are in residential care or the reasons for their admission. From a quick sample during a visit to a home in Kafue would seem to be in the homes for poverty reasons, poor parenting/neglect, orphanhood, abuse. Kafue DSW staff thought they might be able to reintegrate 50% of the 169 children from the 8 homes in their District with the proviso that financial resources for DSW and the children were available

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<sup>5</sup> Information received from MCDSS 9/11/2005. Due to robbery at the MCDSS in 5/11/05 some of the updated information was lost.

### 8.1.1 Examples of Homes

Mwana Maria, Kafue – opened 2004, run by Catholic Church houses 33 children. Only 1 child has returned home. Eldest is 16 – newest placements were aged 4 and 5 months respectively. Admissions are identified through referral by the congregation to a committee. Admissions are then reported to DSW. No court orders. No clarity between DSW and home regarding who had the authority to transfer or discharge, Records but no care plan or reviews.

Energy of Hope, Kafue , opened 4 months ago with 12 children . Good material conditions. Children come from two evangelical churches. Sponsor is in USA

Christian Alliance of Zambia:

Established 1988, organisation runs 3 Homes for the following age ranges

- 0 – 18 months House of Moses
- 18 months – 3 years
- 4 to 12 years – then transfer to SOS Children’s Village or similar

Admits babies and tries to work with families to return children home after 6 month stay. Referral by Hospital SW, Police, Churches. Good conditions. Deaths from HIV & AIDS. Good liaison with DSW. Shared decision making. 560 children have passed through the 3 homes. 100 to 200 have been adopted, 70 to 80 fostered with a view to adoption. 20 – 30 transferred to other Homes. Adoption now stopped on verbal decision by Minister. Real uncertainty expressed by Director of home and DSW as to legal authorities to act.

Bethel Home (Kafue)

Staff member in charge suspended over allegations of sexual abuse. Home now managed by DSW staff member on secondment

### 8.1.2 Standards

Quality standards usually state desired outcomes for the child and measurable indicators against which the performance of the home can be measured<sup>6</sup>.

The minimum standards in Zambia have the feel of regulatory guidelines (and are described as regulatory measures in Paragraph A of the Standards) and should perhaps not be called standards. As regulation they are very comprehensive with regard to the care of the children in the home.

Points

- Some uncertainty about the number of homes;
- No information regarding reason for residential care placement, No evidence of prevention or homes being used as last resort;

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<sup>6</sup> See Lesotho Standards

- Placement and admission is usual done by the home without referral to DSW;
- Admission is sometimes reported afterwards to DSW, and is ratified by placement letter. Very few children are committed through court by the Juvenile Inspector (
- Poor reporting to Registrar of Societies by the homes
- No standardised system of case records
- No evidence of case plans or case reviews
- Reintegration: Some evidence of family reintegration by DSW and agencies from transit shelters for street children,. In 2006, 62 children passed through the Fountain of Hope Shelter. In 2007 48 were reintegrated and 35 placed in other homes or shelters.

## **9 Policy**

### **9.1 National Child Policy of Zambia made by MSYCD**

This is overarching policy for children and as such has insufficient detail on child protection.

### **9.2 Draft Policy DSW – 2007**

#### **9.2.1 Policy Objectives**

- To review the various Acts related to children's homes, fostering and adoption to ensure provisions are relevant and clear;
- To create a Juvenile Code to support and explain the law on matters relating to juveniles;
- To promote co-ordination among all service providers to create high quality physical and professional standards in institutional care facilities as provided in some pieces of legislation and policies.
- To promote the placement of children in suitable adoption or foster homes.
- To promote the reintegration of children from homes back into society.
- To Ensure children with disabilities are accorded special treatment and facilities

#### **9.2.2 Measures that are going to be taken**

- A review of legislation pertaining to child custody and care, fostering and adoption will be carried out in order to assess the relevance and utility of current regulations;
- Revised legislation will be drafted where necessary, and a draft Juvenile Code will be produced, for consultation with stakeholders;
- The requirements for institutional care facilities will be reviewed and updated, and provided freely to all involved or interested organisations in the establishment and running of Adoption Societies and Children's Homes;
- The supervision of Children's Homes will be enhanced in accordance with relevant Acts and policies, and action taken where necessary to improve performance or implement specified standards as appropriate;
- Provision of training in child care will be given to all officers involved in the promotion and implementation by 2010 to ensure that performance is thorough, professional, legal and ethical;

- Facilitate the preparation of the family and society for reintegration of children from homes.
- Civic education programmes to promote improved understanding of childcare in the extended family, in homes, and in foster or adoptive families will be carried out.
- Establish networks of co-ordination

## 10 Legislation

About 25 Acts concern children but in the majority, children are only referred to in a few sections. There are 4 Acts which are either entirely or to a large extent about children

- The Juvenile Act, 1956, with amendments
- The Adoption Act, 1956, with amendments
- The Probation of Offenders Act, 1953 with amendments
- The Affiliation and Maintenance of Children Act, 1995

The laws enacted in the 1950's have not been amended to deal with social economic change, the HIV and AIDS pandemic or to reflect the CRC and other international standards and guidelines. The Juvenile Act does at least separate issues of care and protection from offending and social control which is more modern than similar Anglophone Africa colonial legislation.

The Juvenile Act covers the protection of children from abuse, children in need of care. It provides for places of safety, fostering, fit persons, regulation of children's homes and placements. It also gives considerable power for "juvenile inspectors" to act as parent. If implemented it would offer considerable legal protection to children. The major problem appears to management, guidelines, regulation and resources from the responsible Ministry

There is no Guardianship in Zambia

A Law Reform process is underway but has not made much progress since the Conceptualisation Meeting in 2006. An Advisory Committee is appointed as per the meeting recommendations. Reviews are taking place and TORs drafted. It is the view of stakeholders that the review and reform process be all inclusive, involving line ministries, traditional rulers, children, NGO's, with support from development partners. It was also recognized that the process should extend to other statutes that have a bearing on child welfare.

In order to effectively and exclusively undertake this process, a Secretariat was set up under the Department of Social Welfare, coordinated by the Zambia Law Development Commission.<sup>7</sup>

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<sup>7</sup> The Child Law Reform Secretariat was set up with the support of Save the Children (Norway)

## **11 Service Delivery**

Child Protection and Social Services are delivered to children and families by NGOs, Faith Based Organisations and MSYCD and MCDSS. Major NGO/Church service providers are registered, known and documented in the OVC Situation Analysis

### **11.1 Department of Social Welfare**

The present social welfare staff number 180, the level set by Public Service is 200. Recruitment is now in process to achieve this quota. However as part of Zambia's HIPC obligations it is unable to increase its number of public servants. To manage the social cash transfer when/if it is rolled out, it was thought by DSW that a further 140 staff would be needed. Most of the 73 Districts now have one social welfare officer.

Kafue had 4 staff, Lusaka District 9 staff but 4 of these were on secondment. From Kafue and Lusaka the officers said they spent 5 hours a day processing Public Welfare Assistance (PWAS) and 3 hours on court investigations for Juvenile offenders. They had very little time for either inspections of homes or child care and protection.

The demands were from a constant queue of clients wanting to be assisted or counselled or from the police and the Magistrates court. Through looking at the number of cases brought forward each year it appears that the court and other processes are lengthy.

### **11.2 (I)NGO Sector**

Considerable income received by INGOs from Donors due in part to some inability of Government to disburse due to manpower restrictions. Also Zambia more politically favoured over Zimbabwe at present.

#### RAPIDS

12,000 community care givers in 52 Districts. Trained volunteer care givers supply kits, counselling, giving support to chronically ill. Help with access to education and health. Care givers identify then are assigned 5 or 6 households. 46,000 on home based care of which 14,000 on ART. 200,000 children supported. Some work on wills which are being followed. Less on memory books. Care givers = access to services = better well being. Results of M & E soon.

#### Plan International

1. Learning/Education both formal and informal – improving quality. ECD
2. Health – PHC
3. Child and Community Development
4. Food Security and Income Generation

#### Care International

Involved in SGBV, OVC education – SCOPE and cash transfers.

## UNICEF

Support to law reform with Save the Children Norway

Support to SGBV and street children work

Technical Support to developing social protection and cash transfers

Development of Standards in Child Care

## **12 Social Protection**

### **12.1 Public Welfare Assistance Scheme**

In terms of outcomes for 2006, a total of 166,559 clients were assisted under PWAS. This represented 90,704 females and 75,855 males. 10.1 billion Kwacha was disbursed. The programme aims to target the poorest 2%. The scheme is managed through the 73 District Departments of Social Welfare. The District Social Welfare Offices receive weighted financial allocations from the Department Headquarters, based on vulnerability index and district population. District Social Welfare Officers through District Welfare Assistance Committee (DWAC) allocate resources to Area Coordinating Committees (ACCs) made of Community Welfare Assistance Committee (CWAC) members and other local partners who identify beneficiaries and provide the assistance.

For instance in Kafue with 176,000 population, there were 12 ACCs and 144 CWACs. The DWAC processes the received applications which number between 200 - 300 each month. The furthest CWAC is 300kms distant. Money is used for school costs, medical costs and repatriations. About 10 people are assisted each month. Last month transport to hospital for tests or drugs for 3 people cost 330,000 Kwacha.

### **12.2 Social Cash Transfers**

- Social Cash Transfer: 64,700 beneficiaries with 5.7 Billion Kwacha expenditure
- WFP School Feeding 173,000 beneficiaries at 22.4 billion kwacha
- GRZ Food Security pack – basic agriculture inputs 35,000 beneficiaries at 21 Billion Kwacha

Evidence from Care International is that the major problem in the cash transfer system is the time it takes to report financially from receiver to funder. Agencies are trying to be sympathetic to this issue and will release funds before previous tranche is liquidated. No evidence of leakage.

### **12.2.1 Kalomo Cash Transfer Pilot<sup>8</sup>**

The pilot area includes two agricultural blocks, six Area Coordinating Committees (ACCs), 35 Community Welfare Assistance Committees (CWACs) and approximately 10,000 households living in about two hundred villages. The scheme targets households considered to be extremely needy, destitute or incapacitated.

To date there are 169 beneficiary households, 56% of which are female-headed and 44% male-headed, from 18 villages. One hundred and forty-eight households are receiving transfers through the Finance Bank and 31 through a pay point. The scheme is reaching a total population of 644, averaging 3.8 per household in the target area.

The DSW office was the weakest link in the scheme during the test phase, the main problem being the irregular, unpredictable and rather sporadic availability of the DSWO at the office. The lack of handover between the incoming and outgoing DSWOs may have contributed to the problem.

## **13 General Issues on Capacity and Resources to Manage Alternative Care**

### **13.1 Knowledge Management, Information, Research, M&E**

#### **13.1.1 Children's Homes**

Although UNICEF and DSW are making efforts to rectify the situation there is still little available information or analysis of informal and formal alternative care. It is recommended that a database is set up to help DSW manage:

- Data on Children's Homes
- Inspection Visits which would include an assessment form to assist the inspection of a home
- Information on children in the home, family

#### **13.1.2 Informal Care**

There is little national data on informal care. Are the informal family placements always in the child's best interests? Do children participate in the decisions regarding where they live and with whom? INGOs may have data that can be analysed. More data may also help the targeting of social cash transfers

### **13.2 Who are the duty bearers?**

There is uncertainty, occasionally in law but mainly in practice regarding the duty bearer and the responsible agency for child protection with regard to:

- SGBV

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<sup>8</sup> From **KALOMO SOCIAL CASH TRANSFER SCHEME** Ministry of Community Development and Social Services (MCDSS) GRZ, Vol 6 Models of Care, **Orphans and Vulnerable Children in Zambia** 2004 Situation Analysis. MSYCD

- Placement in a children's home; presently the DSW takes quasi administrative but not legal responsibility through the courts
- Reintegration of children
- The role of the courts
- Uncertainty regarding responsibility at many stages of the child care and protection processes, regarding parental responsibility Urbanisation

### **13.3 Quality Standards in Child Care and Protection**

#### **13.3.1 Residential Care**

It is suggested that both NGOs and DSW in Zambia come together to look at quality care standards that include developing outcomes for children in line with the CRC, standards and practice indicators. These would be standards that are to be worked towards by the NGO. They would complement the existing guidelines and it is recommended that the DSW produce a set of short Ministerial Regulations that are enforceable and deal with homes who refuse to comply and work towards the standards.

#### **13.3.2 Social Work Practice**

- The adoption process should be examined and if necessary amended so that it meets international standards and safeguards the rights of the child. Children especially babies that are generally more "adoptable" are missing out on adoption and remaining in care
- Fostering and not residential care should be practised for babies and young children
- The State is not taking on the role of parent for children in need of care and protection. Improvements are indicated in prevention, assessment and case management (care plans, periodic review of placement, reintegration)

### **13.4 Policy and Law**

There are developments in the making of policy and planning for children. Legal reform is in the early stages but perhaps lacks momentum. It is suggested in child protection that the reformers look at current social work practice against international standards and best practice.

The policy remit of the present ministries involved in child protection and development would benefit from more clarity which would then enable Ministers to present legislation relevant to their Ministries.

### **13.5 Service Delivery**

The DSW has a considerable workload that it is currently struggling to manage. It has insufficient human and financial resources to manage juvenile offending, child protection (especially the growth in reported sexual abuse) in urban areas.

Adding the managing of social cash transfers to their workload needs careful consideration and planning. Social Workers are generally not suited to managing financial reporting systems. A balance in responsibilities will need to be found.

If Departments who have to work within staffing limits have to disburse more resources incoming from donors or government they may wish to examine the role of public private partnerships and NGOs sub contracted after due process to delivery child protection services over the short term.

Decentralisation and urbanisation need to be studied and planned for.

### **13.6 Social Protection**

Social cash transfers can be used in a transformative way to help families develop, care for their children and to prevent family breakdown (due to migration for work, residential care or children going onto the streets to work etc) A methodology of targeting children and families at risk might be very helpful towards this end.

## **14 UNICEF**

- There appears to be commitment on the part of government to change and develop child protection – Police, MCDSS, Courts and lawyers, The development of cash transfers is also exciting and if managed well has tremendous potential for reducing risk and vulnerability to children. UNICEF are expected to follow and support these processes.
- The Concluding Remarks of the Committee on the Rights of the Child need to be widely disseminated and acted on. ( Some improvements have been made but some like children on remand in the adult prison need working on.) This is an advocacy issue with Government in particular MCDSS.
- It is necessary for Government to modernise and transform its child care and protection: policy, law, service delivery and practice. These processes will need to go hand in hand. UNICEF may wish to plan and budget for long term technical support to DSW. This will call for both leadership and a long term child protection strategy which has support to government at its core.
- It is recommended that a component of any strategy be to resource and support DSW to build capacity in selected urban areas and perhaps to pilot decentralisation (devolved services) to some rural districts
- Develop some timeframes and annual objectives within the law reform process. This may also benefit from external African technical assistance or advice from Uganda or Ghana
- Research the impact of fosterage and family placements/decision making on children and ascertain whether improvements can be made as to process and monitoring of informal care.