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A matter of belonging

How faith-based organisations can strengthen families and communities to support orphans and vulnerable children



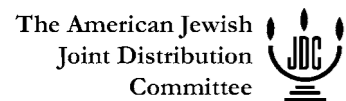
ANERELA



CHURCH WORLD SERVICE



International Community of Women Living with HIV and AIDS



Throughout the world, faith-based organisations are quietly and compassionately responding to the needs of millions of children made vulnerable by different causes. Faith-based organisations understand that children need to be brought up in loving families in their own communities. Faith-based organisations also realise that, in addition to their immediate need for food and shelter, children need a place in which they can grow emotionally and spiritually – a family in which they belong. This booklet gives guidance on approaches to caring for vulnerable children that address these needs. It should inspire community organisations to develop and expand their work so that they can make a real difference.

Desmond M Tutu
Archbishop Emeritus

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Introduction

Children (ages 0-17) by region that have lost one or both parents.

Source: Children on the Brink (2004) UNAIDS, UNICEF & USAID

Sub-Saharan Africa

350m Children

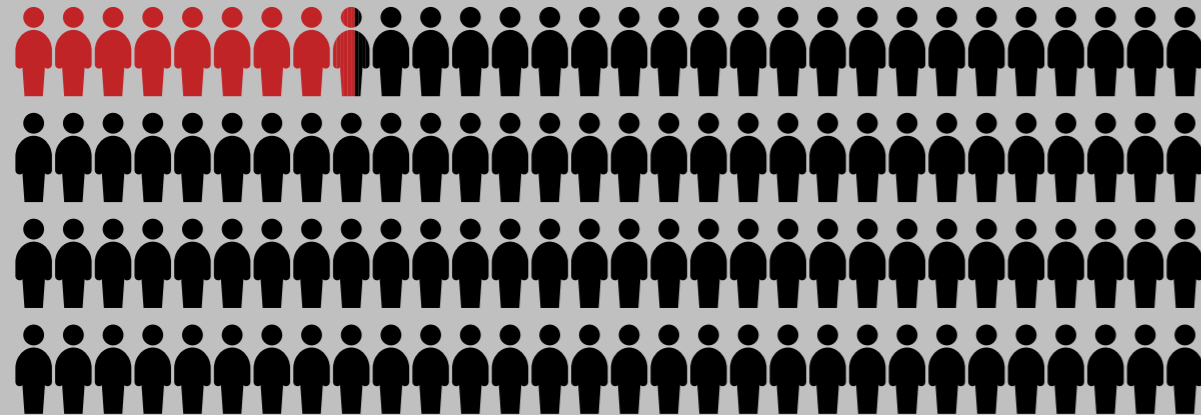
43.4m Orphans



Asia

1,200m Children

87.6m Orphans




Latin America and Caribbean

200m Children

12.4m Orphans



Key

 = 10m Children

 = 10m Orphans

All children should be cared for in a family environment by their parents, relatives or other loving adults. But there are growing numbers of children who do not enjoy this most basic right and suffer from neglect and extreme vulnerability.

Children's lives become precarious when they lose a parent because of illness, accident or conflict. The emotional, educational, spiritual and physical needs of children who live without parental care are often neglected and they may resort to dangerous activities to survive.

This handbook describes some innovative examples of how many faith-based organisations and local community groups around the world are already responding compassionately and effectively to the urgent needs of such children. Other groups see the growing need in their communities to protect children who are at risk of being separated from their families because of conflict, poverty, disability, natural disaster and the effects of HIV and AIDS.

This handbook provides basic information on family-based alternatives to institutional care, and offers simple and practical guidelines to help your organisation plan and implement projects to keep children in the care of families. It also recommends resources that will help with your work, ensuring that families and communities can continue to serve as the most vital component of a healthy and happy childhood.

Who is this handbook for?

This handbook is designed for faith-based organisations and small community groups that want to do something about the growing numbers of orphans and other vulnerable children in their village, town or city, and who understand the need for all children to enjoy the nurturing care of families and their own communities. These groups tend to work with limited resources, often in remote locations with limited communication links or access to the internet.

In this document red text is for further information while darker red text shows reference material.

Key to symbols used throughout this handbook



Strengthening families and communities



Material and economic support



Emotional support



Educational support



Advocacy

Why are extended families important?

A strong, supportive extended family can be the most important source of moral guidance, emotional support and material sustenance in a child's life.

Families not only take responsibility for feeding, clothing and educating children, they provide children with a sense of identity and self-esteem. Families and communities also play a vital role in helping children to acquire the cultural understanding, practical knowledge and skills they need to live full and healthy adult lives.

1. Why are extended families important?

The extended family and community are crucial to a child's development. Children learn from working side-by-side with their mothers, fathers, aunts, uncles, older brothers and sisters. They might learn farming techniques from relatives and neighbours in a rural community, or computing skills from their families or schools in urban areas.

Belonging to a community gives a child opportunities to learn culturally appropriate behaviour and skills, and to observe and learn from the lives and work of the adults around them.

Organisations whose work is rooted in faith have a special understanding of the need to protect and preserve the integrity of families. The active involvement of faith-based organisations in putting families first demonstrates and ensures consistent messages about where and how children should be cared for.

The extended family is the best place to care for children and of central importance in the teachings of many world religions.

Buddhism

The Filial Piety Sutra: 'Parents continually instruct and guide their children in the ways of propriety and morality as the youngsters mature into adults.'

Christianity

Ephesians 6:1 and 4: 'Children, obey your parents in the Lord, for this is right... Fathers, do not provoke your children to anger, but bring them up in the discipline and instruction of the Lord.'

Hinduism

Taittiriya Upanishad 1.11.2: 'Let your mother be to you like unto a god. Let your father be to you like unto a god.'

Islam

The Prophet (peace and blessings be upon him) said: 'The best house of Muslims is one where an orphan is cared for.'

Judaism

Psalms 68:6-7: 'A father to the fatherless, a defender of widows, is God in his holy dwelling. God sets the lonely in families ...'

What makes a family?

However they are defined from one culture to the next, families form the basic building blocks of society. A family is typically a group of people affiliated by birth, co-habitation, marriage or adoption, but they can vary hugely in size and shape. When we refer to a child's extended family we use the term in the broadest sense to include all those who take an active part in the upbringing of the child.

Why orphanages should be a last resort

Many orphanages were set up by faith-based organisations in response to a perceived need. They are often perpetuated because they can produce highly visible and compelling results.

By offering shelter, clothing, food and medical care, and providing for basic educational needs, orphanages can provide an immediate solution for children who have lost parents and caregivers. In some cases, where children have been separated from their families in times of conflict or natural disaster, or in cases of physical and sexual abuse, temporary shelters can extend a critical lifeline to children in urgent need of care.

Yet orphanages and other forms of long-term residential care, such as 'children's villages', unintentionally deprive children of a family setting. The very nature of these institutions makes it difficult for them to adequately support children's many different needs, which extend beyond food, medical care and schooling. Children, especially long-term residents, may not get the kind of love, individual attention and sense of belonging that only a family can provide. They may also become stigmatised because of their association with illness, poverty or disability.

In the worst cases, orphanages hinder children's development and fail to protect them from harsh treatment or conditions resembling child labour. Sexual abuse has been reported in some institutions – many of which do not have the systems or structures to monitor and prevent it. There are no international standards to govern institutional care, and few developing countries have up-to-date laws to regulate orphanages or certify staff.

Reintegration into society is another challenge. When any child leaves an institution, he or she may lack the communication skills and cultural identity to successfully reintegrate back into their community, or even the community in which the institution is located. For instance children from a rural area who have lived in an institution in a town or city for a long time may lose the ability to speak their family's traditional language and will not learn important aspects of their community's culture and traditions.

Many children in orphanages have parents and families outside

Just because a child is in an institution does not mean he or she does not have living relatives. They may have the will to care for a child, but may lack the means. Poverty-stricken or ailing mothers and fathers may abandon a child to an institution if they believe that the immediate needs of their child will be better served. Many children are living in institutions simply because of their race, ethnicity or physical disability.

'In one orphanage in Zimbabwe, it was estimated that 75 per cent of the resident children had contactable relatives.'
Greg Powell, SOS in Africa: the Need for a Fresh Approach.

Making the best use of community resources

Institutional care causes considerable concern among childcare professionals because of the enormous amount of resources it consumes, resources that could be spent on more appropriate family and community-based care for many more children.

One study shows that providing institutional care costs six times more than local fostering.¹ Family-based care is widely viewed as better serving the interests of the child and as a much more efficient use of resources. It is generally preferred by children and is less likely to socially isolate them.

Where an institution is available, it may actually undermine the community's motivation and willingness to develop family-based solutions. It also diverts resources away from initiatives that seek to keep children in the community.

'The concept of community care for orphans is simple. Where children no longer have adequate carers within their own families, members of the community are appointed as volunteers to visit them and help them care for themselves or otherwise cater for their basic needs. The aim is to train whole communities in the care and support of orphaned families so that children are able to remain living in the community, rather than being placed in institutions. This approach is more viable economically, and gives the children a more normal upbringing.'

Friends in Need: A Handbook for the Care of Orphans in the Community, Viva Network, 2002, www.viva.org/en/articles/fin.pdf

Helping children leave institutions

Priority should be given to helping children leave institutional care, rather than improving care within existing institutions or setting up new facilities.

¹ John Williamson, Displaced Children and Orphans Fund, personal research

The children that most need our support

By their nature, children are more vulnerable to exploitation and abuse than adults. The term 'vulnerable children' is commonly used to refer to children in a community who are at the most risk of losing their basic rights to parental care, healthcare, equality, education and protection. In this handbook, we use the term 'vulnerable children' to refer to all those under the age of 18 who lack, or are in danger of losing, family-based care.

Why children become vulnerable and separated from their family

In your community, you might know children:

- whose parents have died or are chronically ill
- whose parents misuse alcohol or drugs
- who experience gender or cultural discrimination
- living on the streets
- affected by armed conflict
- who have been forced to leave their homes
- employed in hazardous forms of child labour
- with disabilities
- who are chronically ill
- who have suffered abuse from parents or relatives.

What happens when children are separated from their family

Compared to other children, vulnerable children are more likely to:²

- underperform at school or drop out altogether
- begin working at an early age
- suffer from poor health and nutrition
- lose their rights to land and property
- feel isolated or excluded
- experience stigma and discrimination
- suffer abuse or exploitation (including sexual abuse or exploitation)
- become infected with sexually transmitted infections, including HIV
- have unwanted pregnancies
- experience long-term emotional problems
- use drugs
- become involved in crime.

'Orphans and vulnerable children are the children who, in a given local setting, are most likely to fall through the cracks of regular programs, policies and traditional safety nets and therefore need to be given special attention when programs and policy are designed and implemented.'³

² List adapted from the *International HIV and AIDS Alliance and Family Health International Orphans and Other Vulnerable Children Support Toolkit* www.ovcsupport.net

³ The World Bank's definition of orphans and vulnerable children

Why should faith-based organisations get involved?

Faith-based organisations have special connections with communities.⁴

- They live and work close to the communities they serve, many of which are in remote areas, often beyond the reach of government services.
- They have a prominent position within the community and are well-respected.
- People listen to religious leaders; when they feel strongly about keeping children in families, they can influence their congregations and the wider community.

Many religions teach that we have a responsibility to look after the most vulnerable members of our society, especially children.

Buddhism

Karaniya Metta Sutta: 'Just as a mother would protect her only child with her life even so let one cultivate a boundless love towards all beings.'

Christianity

James 1:27: 'A religion that is pure and stainless in the sight of God the Father is this: to take care of orphans and widows in their suffering and to keep oneself unstained by the world.'

Hinduism

Bhagarad Gita 3.10-26: 'Lovers of God are always active in the service of others, compassionately sharing their sorrows'.

Islam

The Prophet (peace and blessings be upon him) said: 'I and the one who cares for the orphans excellently will be as close in Paradise as these two fingers of mine!'

Judaism

Isaiah 1:17 'Uphold the rights of the orphan: Defend the cause of the widow.'

⁴ Adapted from TearFund's *Roots* series – No 8: HIV and AIDS

What faith leaders can do:

- Break the silence by remembering vulnerable children in prayer services, explaining how their suffering is increased by stigma and discrimination.
- End ignorance by talking with community members about the traditional role and sacred obligation religious communities have in caring for orphans and vulnerable children and supporting their caregivers.
- Prevent local fear and prejudice by convincing fellow faith and community leaders and local government that vulnerable children should not be sent away from the community or institutionalised, and that community-based solutions must be supported.
- Organise services and support by building partnerships with other faith-based organisations, NGOs and government agencies to coordinate and strengthen services for vulnerable children.

Adapted from *What Religious Leaders Can Do About HIV/AIDS: Action for Children and Young People* UNICEF, 2003.

What you can do

Throughout the world, the majority of orphaned, disabled or otherwise vulnerable children are cared for by their parents or extended family. It is therefore important to strengthen and support these families and, if they are struggling to cope, to prevent their breakdown. Where children have been separated from their families, the priority must be to reunite them, or to find homes for them in other family settings.⁵

This section outlines what faith-based organisations and communities around the world are doing to ensure that children grow up in a family. The activities are grouped into five sections that give examples of practical things your organisation can do to help children most at risk of being separated from their families or who need to be reunited with a natural or surrogate family.

Before embarking on a programme or project, your organisation should see which other organisations are already working in the area. They may be able to help you as you set up, or you might be able to combine your efforts to be more effective.

2. What you can do



2.1 Strengthen families and communities

Preventing the breakdown of families

If a child is separated from its family, his or her (and girls are particularly at risk) vulnerability increases dramatically and with it the emotional and financial cost to the carer. For example, rescuing and rehabilitating a child who has been abandoned and left to live on the streets is a complex process and does not always ensure the child a balanced and productive adult life. Helping a child to recover from emotional damage and physical abuse is also very expensive, compared to the relatively small cost of providing additional support to enable a family to continue to care for a child. So all efforts should be made to prevent the breakdown of families in the first place (with the rare exception of when the family is the cause of abuse or neglect).

When children are already living outside family care, whether by their own choice or not, other approaches are necessary to guarantee their right to a family environment, good health, equality, education and protection.

See 4.9 Sanlaap, India

Home-based care

Single parents, parents of children with disabilities, or carers who are sick can feel isolated and depressed and lack the money, strength and energy needed to care for their children.

The children of parents who are chronically ill or who work long hours are often forced to leave school to become carers themselves. This is increasingly common in countries where there is a high prevalence of HIV and other chronic illnesses. Elderly carers or siblings caring for younger children may lack the strength or skills to perform basic tasks such as cooking and cleaning for the children in their care. Families raising a child with disabilities often experience psychological and financial problems. Without support, these families may feel abandoned and unable to respond to their child's needs.

Your community group can support such families in a variety of low-cost ways. Volunteers can help with:

- food preparation
- household chores
- bathing
- providing spiritual and emotional support.

Your organisation can also teach family members to provide the additional care and palliative support needed by sick family members. Community nurses can be trained to:

- provide nutritional and health information
- teach family members ways of caring for and supporting a child with a disability
- treat illnesses and infections
- help supervise long-term medical treatments for tuberculosis, HIV and other chronic illness
- offer counselling and emotional support for parents, families and carers.

Keeping families together

The family unit can be preserved and protected when communities recognise warning signs and take action to minimise the risk of family breakdown. Your organisation might want to develop its own 'warning signs' to look out for. Examples might include:

Warning sign: Death of a parent

Preventative action: Other remaining parent can be offered financial, spiritual and emotional support, including help accessing benefits that may be available.

Where HIV is common, HIV counselling and testing could be provided, along with help in accessing treatment and planning for the children's future.

Warning sign: Family has become economically destitute

Preventative action: Facilitate training, or provide savings and loans schemes or income-generating activities so that families can obtain the skills and means to improve their economic situation, alleviating the need for children to become labourers.

Warning sign: Adolescent child has dropped out of school

Preventative action: Support the child in returning to school, or find a suitable apprenticeship, out-of-school learning opportunities or counselling.

Where available, you should make sure that vulnerable children and their families benefit from provisions such as feeding programmes and nutritional supplements.

In some cases, carers will be looking after infants and they will need important information about the risks and benefits of different feeding options. They will need guidance in choosing the most suitable option, and support for using the method they have chosen safely and effectively. People who care for infants should speak with staff from the local health facility to make sure that they have all the information they need to carry out this vital responsibility.

This type of assistance can improve and prolong the lives of parents and carers living with HIV, and their children can remain in their care longer. Home-based care can also help to ensure that children do not drop out of school or miss lessons because they are needed at home.

Similar community responses can also help carers who are looking after chronically ill children. Children living with HIV, for example, are more prone to opportunistic infections and so it is important that they are properly cared for, receive a full and balanced diet and have access to clean water.

See 4.3 Giving Hope, Rwanda

See 4.4 AMO-Congo, Democratic Republic of Congo

See 4.7 FACT, Zimbabwe

Reuniting children with families or extended families

Children living outside family care often have parents or relatives who are still alive. A child can be separated from their family as a result of conflict or because they have been abandoned by parents or relatives who feel that they are too poor or too ill to look after their children, who fear that a child in their care is HIV-positive, or who feel unable to care for a child with disability.

If children can be reunited with their natural parents or relatives, this is usually in the best interests of the child, and is often their preferred option when asked what they want.

In cases where a child cannot be reunited with their parents, for example because they have died, cannot be found, or were abusive in the past, the extended family is often the first place that children look for support. Many vulnerable children live with aunts, uncles, grandparents or older siblings; this is sometimes referred to as 'kinship care'. Many successful projects try to support this kind of care by finding these families and supporting caregivers.

See 4.5 Concerned Parents' Association, Uganda

Infant feeding

Detailed information on infant feeding and nutrition is available from the World Health Organisation's website. Click on 'health topics' and then 'infant nutrition'.
www.who.int

Save the Children has prepared *Care for Children Infected and Those Affected by HIV/AIDS: A handbook for community health workers, Uganda*.

It provides people who are responsible for the care and support of children living with or affected by HIV and AIDS with guidelines that aim to increase these children's access to proper care and support within the communities in which they live.

www.savethechildren.org.uk

Home-based care can take a lot of energy and carers need to feel that:

- they are competent to provide this care
- they are not working alone
- there are others who will help and support them and give them a chance to take a break.

Fostering and adoption

When a child's family cannot be traced – for instance, when children have been abandoned at a very young age, or in countries where war or HIV have claimed the lives of parents and other family members – community members who are not directly related to the child may take on the duty of care. Fostering and adoption take a variety of forms in different countries depending on the beliefs, faith traditions and legal systems of the communities. Examples include:

- short-term fostering arrangements
- local adoption by community members
- adult support as 'surrogate parents' for child-headed households
- 'cluster foster care' where surrogate parents look after a number of orphans from their community, usually in the children's own homes. The long-term sustainability of this arrangement is difficult to ensure, however.

Ongoing support and supervision of new guardians or surrogate parents by the community is vital to ensure that children are being brought up in a healthy and happy home. Children should not be removed and isolated in separate communities.

Where families have taken in children in addition to their own, there have been instances of fostered or adopted children reporting that they have been treated differently to the family's biological children. Sometimes parents cannot afford to pay to send the fostered children to school or feel that the children that they are taking in owe them something for the care that they are receiving, such as help with chores or cleaning.

Community-based groups can help to select foster families and carry out monitoring visits to ensure that children are not exploited or neglected, and encourage families to treat their children equally. They can offer counselling to help families care for their new members who may be traumatised and find it difficult to adjust to their new situation. They can support families that have taken in vulnerable children by providing them with extra resources such as food, money or subsidies for education.

See 4.11 Maryknoll, Cambodia

See 4.12 Kaisahang Buhay Foundation, Philippines

Places of safety

In the rare cases where there is no family or community safety net, and particularly vulnerable children are left with no other means of support, temporary residential care may be the only option while a family is found for the child. For example, children who are sleeping rough on the streets, are at risk from abuse, or who have been abandoned have immediate needs such as food, shelter and basic medical care which a residential facility can provide.

However, the long-term needs and rights of children – including love, care and individual attention – can only be adequately met in family settings. Institutional care should only be seen as a temporary solution until the child can be returned to their community or found appropriate care in a family setting through adoption or local fostering arrangements.

See 4.8 Buddhist Leadership Initiative, Thailand

Keeping children in their community

In all cases the needs of children are best served if they remain in or close to their own communities. And wherever possible they should be kept with their siblings.

Hope and a future is a practical guide to working with street children – one of a series produced by Viva Network. www.viva.org



2.2 Material support

Poverty is often the main reason why extended family or members of the community are reluctant or unable to care for additional children. Families and guardians who are afraid that an additional child will reduce the quality of life in their household should receive all the help they need to support vulnerable children.

Your group could offer supplemental resources such as food, clothing and basic medical supplies. You could advise families about services offered by other organisations or local government – for example access to basic healthcare and immunisations, or childcare grants and disability benefits that are available in a small number of middle-income countries. In some countries, such as Rwanda, local authorities have provided vulnerable households with services such as labour or materials for maintaining their houses.

You can also help families to increase their income through:

- income-generating activities
- small-business training
- group savings and loan schemes
- microcredit programmes.

Income-generating activities for families or communities

If a family's prime wage-earner becomes ill and cannot work, or if others in the household are forced to leave their jobs to care for family members, this can result in a sharp reduction in household income. Other families who willingly open their homes to the children of their relatives and neighbours only have limited resources with which to provide for an extra child or children.

Income-generating activities and small-business training can provide families who have lost a wage-earner, or who are caring for orphans or other vulnerable children, with valuable additional resources. Community-based organisations can also offer families agricultural supplies such as seeds, tools and livestock, in addition to training in activities such as tailoring that can give caregivers a new source of income as they look after additional children.

See 4.2 Luwero District Programme, Uganda

See 4.4 AMO-Congo, Democratic Republic of Congo

Sustainability

When considering assisting families and communities with vulnerable children, it is important to assess the ability of your church or community group to maintain this support. It is essential that assistance be long-term and that families are monitored to ensure your support has a positive impact.

Group savings and loans schemes and microcredit

Small loans can help people start their own businesses and provide sustainable incomes for themselves and their families. Unfortunately, lending organisations are sometimes reluctant to offer loans to poorer households.

Communities wishing to set up microfinance projects for disadvantaged families caring for vulnerable children should consider working in partnership with organisations that specialise in microfinance and have access to start-up capital. But in some countries, such as Rwanda and Kenya, savings and loans schemes have been set up that are wholly administered by the community. They offer the same low-interest rate to borrowers and savers alike. The amounts involved are usually very small, and because the money is being borrowed from other community members there are very few cases of people not paying back what they have borrowed.

Faith-based organisations and communities wanting to set up savings and loans schemes will need basic training in book-keeping and the principles behind such schemes, which is often available from specialist NGOs.

See 4.3 YWCA, Rwanda

Improving access to social services

In general, children have a difficult time demanding and gaining access to services to which they are entitled, such as education, healthcare and social grants.

Some families may not be aware of the benefits available, or are unable to access them because they do not have the relevant documentation (eg identity papers). Communities can rectify this by ensuring that families know about these benefits and are equipped to access them, for example by making sure they have valid birth certificates.

See 4.6 Centre for Positive Care, South Africa

Microcredit

2005 was the UN Year of Microcredit. A list of organisations that are involved in microcredit and details of their programmes are available at www.yearofmicrocredit.org

Trickle Up

The Trickle Up programme was founded in 1979 to help people out of poverty by providing small loans and the training needed to make a small business work. In partnership with local agencies, Trickle Up has developed a training programme which highlights 19 steps for running a successful savings and credit scheme. For information, contact the organisation at:

104 W 27th Street, 12th Floor
New York, NY, USA 10001-6210
Phone: 00 1 212 255 9980
Fax: 00 1 212 255 9974
info@trickleup.org



2.3 Emotional and spiritual support

Churches and faith-based community groups have a vital role in providing spiritual and emotional counselling for these children, their families and their carers. Many vulnerable children will have seen their parents suffer through long periods of illness, or witnessed relatives die in conflict or natural disasters.

Vulnerable children need adult figures who are willing to listen to them, advise them and offer them love and emotional support. These adults can be people who know the child, or professionals who might be sought to help in especially difficult cases, such as when a child has been assaulted or sexually abused.

Support for children and their carers

Caregivers who are looking after additional children often have difficulty balancing their childcare responsibilities with providing for their own families. This is especially true of elderly caregivers who are ill or single carers who need to work during the day. Older children who look after younger siblings may be forced to skip school or drop out altogether.

Childcare centres can be set up by communities with the most basic resources and formal training. The main requirement is a group of willing volunteers and the ability to provide meals, recreation and stimulating activities.

Creating opportunities for young children to attend childcare centres can:

- offer relief to sick parents and elderly caregivers
- enable surrogate parents to work during the day
- allow children who are caring for siblings to remain in school
- provide educational, recreational and spiritual support.

Giving carers a break reduces the risk that children will be neglected, abused, abandoned or left in full-time institutional care.

Day care is also beneficial in terms of social, emotional and cognitive development, especially for children who may not have had a stable home life and consequently may have had fewer opportunities to play and learn with other children. Children with disabilities, for example, often grow up in isolation, but day-care centres can provide an opportunity for them to spend time with other children, as well as accessing educational and rehabilitation services tailored to their needs.

See 4.1 Kondwa Day Care Centre, Zambia

See 4.14 CFTA, Occupied Palestinian Territories

See 4.16 GAPA, Brazil



2.4 Educational support

Keeping children in school

Primary school education should be available to all children free of charge. The UN's millennium development goals declare that primary education should be universally available by the year 2015. But although some developing countries are now in a position to provide free education, the majority of them are not doing so. Even in the few cases where education is free, there are many related expenses – such as uniforms, text books, stationery, travel and exam fees – while secondary and higher education are often even more expensive.

In response, some community groups pay the costs of schooling for vulnerable children who cannot afford them, or provide caregivers with work that enables them to pay fees for children in their care. Other organisations negotiate with schools to waive requirements such as the need to purchase a school uniform. That said, the ultimate objective must be the reduction or outright abolition of school fees. To this end, faith-based organisations could advocate for the removal of formal and informal fees, ensuring that the most marginalised children benefit.

Your organisation can work with schools to ensure that all children have access to an education. By providing meals at a school that teaches many vulnerable children, you can give children an incentive to attend and improve their performance and concentration. By raising awareness among teachers, social workers, school administrators and public officials on the rights of children with disabilities, your organisation can improve their chances of attending mainstream school and, where applicable, gaining access to special education. Religious leaders are also in a strong position to encourage families not to push young girls into early marriage and out of school.

However, in assisting vulnerable children, communities must take care not to stigmatise them. Some schools have introduced feeding programmes which offer a nutritional meal to all students as a way of assisting vulnerable children without singling them out for special help. This can be used to create a learning opportunity for children if they are themselves involved, for example growing crops in a community-supported school garden or participating in food preparation.

Managing volunteers

Volunteers are motivated by deep reserves of faith, goodwill, compassion and a commitment to helping their neighbours. Yet many people who volunteer their time and effort are themselves poor or have difficulties at home. So it's important to make sure that their lives are enriched by their contributions to your church or community group – and that their efforts are recognised.

Faith-based organisations and community groups that enjoy the support of volunteers need to demonstrate the communities' gratitude for their efforts. For instance, by offering training, volunteers can acquire skills that could lead to paid employment. In some countries governments may help support volunteers through certification or other types of recognition.

Supervision of volunteers is vital to ensure that they receive the encouragement and emotional support they need and that they are carrying out their work effectively. All volunteers need training in child protection, and it is important to ensure that systems are in place to screen and monitor volunteers.

The value of education

Guardians often cite the need for education as an important reason for putting their children into institutional care.

Children who have grown up in conflict zones or on the streets may have missed a large amount of formal schooling. Since it can be difficult for them to rejoin their country's state-run education system, some communities have set up schools to specifically address their needs.

Training for out-of-school youth

Children are increasingly being forced to take on the responsibilities of parents who are deceased, terminally ill or separated from their families – these range from cooking, cleaning and caring for younger siblings, to taking on paid work. However, many children lack appropriate skills and training, potentially leading to exploitation by employers and exposure to sexual abuse.

Your group can forge links with specialist workshops or local businesses that can provide vocational education and training to help young people acquire tools for economic survival and independence. Whether these young people are serving as heads of a household, augmenting the income of a family that has lost a wage-earner, or seeking to secure their own futures, such apprenticeships can help keep families intact and capable of caring for their children.

Programmes might cover:

- tailoring/sewing
- banana-leaf printmaking
- tie-dye T-shirt printing
- carpentry
- metalworking
- soap making
- baking
- hairdressing
- masonry
- computer skills.

Reproductive and sexual health education is also vital as young people who have lost their parents often lack the information they need to protect themselves from HIV and other sexually transmitted infections.

Life-skills education

Helping to support life-skills programmes – both in and outside of school settings – is another important way to make a difference in children's lives. Vulnerable children may face pressure to become sex workers in order to meet their own basic needs and those of their siblings. Life-skills training can enable young people to protect themselves from abuse and exploitation, as well as from unwanted pregnancy, sexually transmitted infections and HIV.

See 4.1 Kondwa Day Care Centre, Zambia

See 4.4 AMO-Congo DRC

See 4.15 Inclusive Education, Georgia

See 4.16 GAPA, Brazil

Life-skills education

Life-skills education has three main components:

- communication and interpersonal skills
- decision-making and critical-thinking skills
- coping and self-management skills.

Contact a local UNICEF office for more information and materials.

Viva Network has produced a series of handbooks, one of which is called *Jobs for Life*. It is a web-based resource that provides practical advice on helping out-of-school youth find vocational training. www.viva.org



2.5 Advocacy on behalf of children

Children who are vulnerable are more likely to be abused or exploited than their peers, and less likely to attend school and have access to essential services. Protecting vulnerable children involves tackling these inequalities.

At the same time, vulnerable children, such as those living with disabilities, are at particular risk of discrimination. Faith-based organisations are in a strong position to change attitudes towards marginalised children and ensure that they are accepted in their communities.

Tackling stigma and discrimination

Vulnerable children often experience the acute emotional pain of stigma and discrimination. They are feared or considered inferior to other children simply because of their associations with chronic illness including HIV/AIDS, extreme poverty, life on the streets or disability. Faith communities have a special moral obligation to take a leading role in eliminating stigma and discrimination and protecting these children from further emotional trauma.

Giving children a voice

Faith-based community groups can protect children in simple ways – for instance, by giving them the opportunity to speak for themselves on issues that affect their lives, or by highlighting particular problems at school board meetings or at the town or village council.

See 4.13 Outreach Mobile Teams for Child Protection, Serbia

Legal representation for children

Children may need legal representation to protect their rights – for instance those who have lost parents may need support concerning the inheritance of property. Your group can help children and their guardians to access legal representation when they need it, or help them to assert their rights to social benefits from the government or other groups.

See 4.10 Legal Aid for Widows, Pakistan

For effective action that will make a difference ...

This section outlines some key points to keep in mind when designing and implementing your programme. It is important to listen to the views of children themselves, key stakeholders in the community and other organisations that are working with children in the area. In this way you can ensure that the needs of boys and girls of all ages are addressed and that children are properly protected at all times.

3.1 Involve children in the decisions that affect their lives

When trying to understand and address the problems that vulnerable children face, the first thing to do is to ask the children themselves. There are three main reasons for this.

- **Children best understand their own needs.** Children will often observe things that adults might have overlooked or not considered important.
- **Children have a right to be consulted.** The UN convention on the rights of the child states that: 'Children have the right to express their views on all matters affecting them.'
- **Children need to feel ownership.** Consulting children about the design of a project can boost a child's self-esteem – and help your project to succeed!

How to consult vulnerable children

Discussions with children are best conducted as part of a wider consultation that includes their guardians or carers. They can be organised with the assistance of community leaders, local teachers or social workers. Children can be consulted on their own, in groups or through other, non-verbal methods, such as drawing.

Consulting vulnerable children can be difficult, especially when they have been exploited or sexually abused. Children may not be ready to talk about their experiences or may raise sensitive issues that you are not prepared or equipped to deal with.

Patience is vital as many children will not be accustomed to being asked their opinions. Games, animations, role plays and stories can put people at ease and help children to explain how they feel.

It may also be helpful to talk to parents or guardians, teachers, religious leaders or other groups that play a part in the children's lives; working with the wider community will give your project a much greater chance of success.

Family dream

In Rwanda, Church World Service uses a simple method of communication that enables children to set their own goals. Children are asked to draw pictures showing what they'd like to learn, to do and to be when they grow up, and what they want for their siblings. Church World Service then helps them to realise these 'family dreams'.

Family Health International has produced a useful guide: *Ethical approaches to gathering information from children in international settings*

3.2 Understand the different needs of girls and boys

When planning and implementing projects to support and care for vulnerable children, your organisation needs to consider the different challenges and risks faced by boys and girls.

Girls are less likely to complete their education and are more at risk of exploitation and sexual abuse than boys in many developing countries. Girls are also more likely to be taken out of school to care for sick relatives and have less say in their own development. For a variety of physiological, social, cultural and economic reasons, girls in countries with high incidences of HIV and AIDS are more likely to become HIV-positive than boys of the same age.

Yet boys also face particular challenges. They are often expected to work at an early age in physically demanding jobs and are more likely to come into contact with the judicial system or to go to jail than girls. In countries or regions where the HIV epidemic is concentrated among men who have sex with men, sex workers or injecting drug users, young men are at a greater risk of becoming HIV-positive.

Add it up

As a starting point, you should always find out how many boys and girls are benefiting from the project and record this throughout the project.

3.3 Consider the needs of all age groups

While there are many projects that care for young children and babies that are orphaned or otherwise vulnerable, the needs of vulnerable adolescents are often overlooked. Providing healthcare, educational and nutritional support for young children can be relatively straightforward. But giving adolescents the kind of emotional support, education and training in life-skills and reproductive and sexual health they need can be much more challenging.

Children of different ages have different needs and a good project should consider the age range that it is suited for and how the needs of children who are too old or too young for the project will be met. This is likely to involve cooperation with other agencies or institutions, but the aim should be to provide for the needs of children, from infancy to early adulthood, within a community setting.

3.4 Protect children

Whenever you work with children it is important to have some simple rules and procedures to ensure that they are protected.

While some countries will have strict laws, police, social services and courts to protect children and young people, in many developing countries these systems are weak or non-existent, and organisations need to take extra care that children are not open to abuse. Faith-based organisations are well placed to ensure that laws are being observed and can work alongside national law-enforcement structures to protect children.

To ensure that children are properly protected you can:

- discuss with staff and volunteers the appropriate behaviour when working with children – for example, the appropriate ways of showing affection and disciplining a child
- prepare step-by-step guidelines for staff on what to do in different situations, such as if a child tells a staff member that they are being abused
- make sure children know who they can talk to in confidence if they have a problem or if they are being abused
- write an organisational child-protection policy.

For more advice and help designing your own rules and procedures, contact local field offices in your country:

UNICEF – www.unicef.org/infobycountry/index.html
UNAIDS – www.unaids.org/en/contactus/default.asp
YWCA – www.worldywca1.org/nat_assoc.html

Frameworks for child protection

For more ideas see *Setting the Standard: A Common Approach to Child Protection for International NGOs* available at www.peopleinaid.org

The Viva Network has produced an eight-step guide that takes you through the questions that need to be addressed when writing a child-protection policy, and how to make sure the policy is put into practice effectively.

www.viva.org

3.5 Learn from other organisations

There are a number of ways in which groups can work together to improve their projects.

- Informal cooperation – sharing information, skills or resources such as office space, transportation or training manuals.
- Local exchanges – exchange visits for staff, volunteers or groups of children.
- Networks – collaborating with other groups that have similar objectives (such as the Children in Need Network in Zambia).
- Formal partnerships – working together with one or more partners on a particular activity or project.
- Mentoring – requesting support and advice from technical experts.
- International exchanges – visiting projects from another country (these can be expensive and may need the support of a donor).

Working together with other organisations can bring a number of advantages. It can:

- strengthen your organisation and its work by introducing new ideas, knowledge and skills
- provide encouragement and motivation for staff and volunteers who can often feel they are working in isolation
- create opportunities for your organisation to work constructively with others to meet the full range of children's needs, resulting in improved services for vulnerable children.

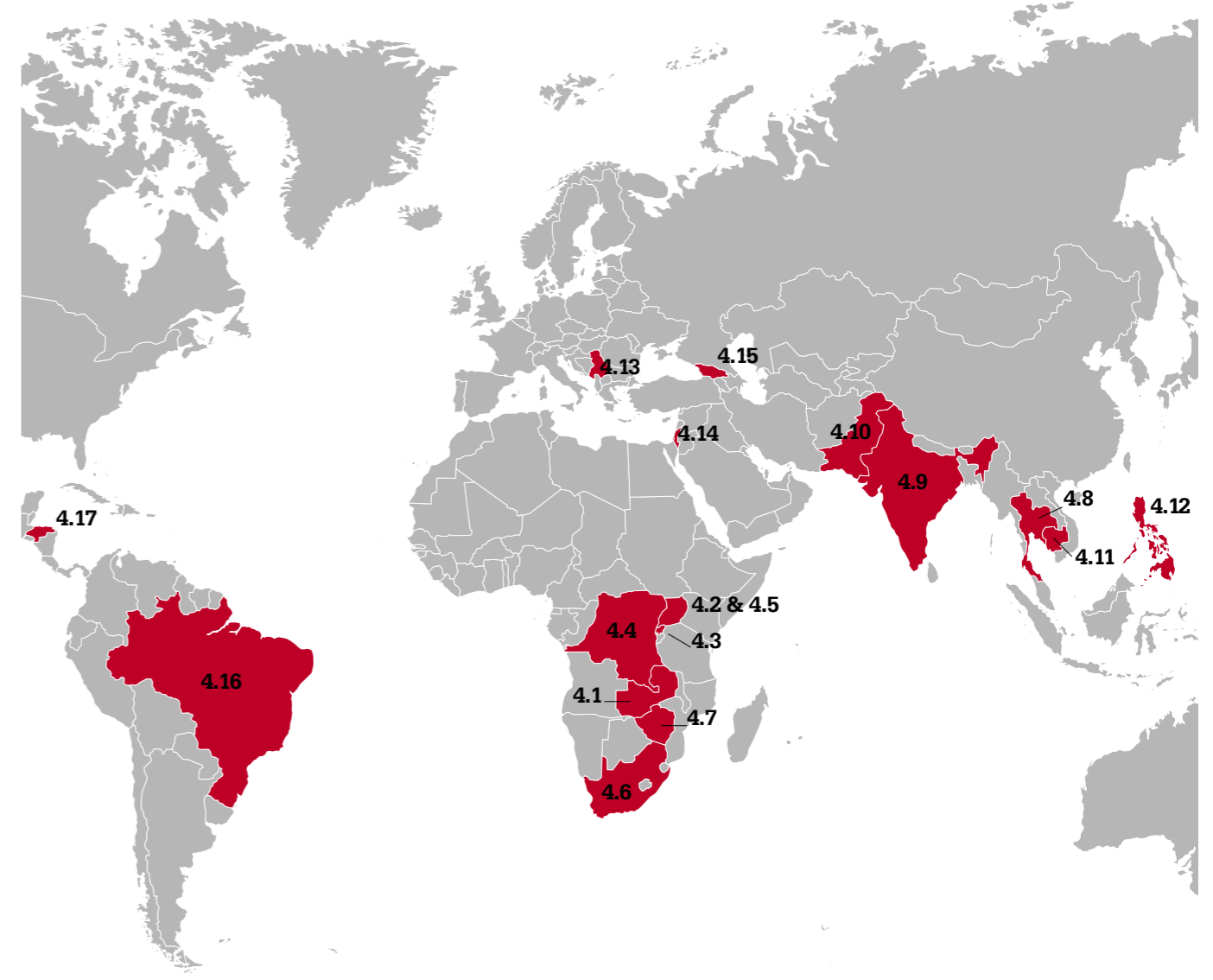
Arranging an exchange visit

Exchange visits can be an effective way of strengthening an organisation. When organising an exchange visit:

- try to involve vulnerable children and their carers in the exchange and not just project coordinators or staff
- arrange a return trip so that both organisations have the opportunity to see each other's programmes in action
- plan visits to coincide with celebrations or special events.

Case studies

This section provides examples of how faith-based organisations and community groups are helping to ensure that children grow up in family environments. Some of this work focuses directly on family life, while other interventions seek to provide temporary shelter or improve the conditions of children's lives in their communities.



Location map key

Zambia	4.1	South Africa	4.6	Philippines	4.12	Brazil	4.16
Uganda	4.2	Zimbabwe	4.7	Serbia	4.13	Honduras	4.17
Rwanda	4.3	Thailand	4.8	Occupied Palestinian Territories	4.14		
Democratic Republic of Congo (DRC)	4.4	India	4.9	Georgia	4.15		
Uganda	4.5	Pakistan	4.10				
		Cambodia	4.11				

4.1 Kondwa Day Care Centre, Zambia

Giving guardians a break from looking after orphans



Problem: During home visits, volunteers noticed that guardians were exhausted and did not have time to go to work or rest when caring for orphaned children; some were even having trouble providing enough food for their young children.

Solution: Early learning and childcare programme for young children to give guardians a break, and allow children to socialise, participate in educational activities and enjoy nutritious meals.

Background

Since the economic catastrophes of the 1970s, Zambia has struggled to cope with its crippling debts. Three-quarters of the population now live in poverty and the growing HIV epidemic – one in five adults in Zambia is HIV-positive – is largely responsible for a life expectancy of less than 35 years, and a sharp increase in the number of orphans.

Features of the project

Daytime childcare for young orphaned children

- Children play and learn in a caring environment.
- Children share stories and receive basic education in maths, English and home crafts.

Nutritional support

- The centre grows vegetables on a small piece of land, helping to ensure children get two meals each day.

Material support

- Secondhand clothes and help with medical expenses are available to those children that need them.
- When possible, Kondwa finds funds to help pay for school fees, uniforms and school books for children who leave day-care and attend primary school.
- The centre organises workshops in small-scale business management, income-generating activities and counselling for guardians in an effort to help them provide for the children in their care.

Emotional support

- The centre provides spiritual guidance, as well as a formal counselling service.
- It promotes 'memory approaches', a tool to help children and their guardians deal with loss, grief and change, and to become more resilient. Parents are encouraged to make 'memory books' or 'memory boxes', which allow them to pass on important information about their family history and their hopes for their children's future.

A personal story

Memory Phiri, seven, lives with her maternal grandmother but cannot remember the names of her mother and father, who have both died. She was very small when her mother passed away, but she can remember seeing her. As well as her grandmother, Memory lives with 13 other family members. She has two older sisters and three older brothers, none of whom go to school. The centre has made a big difference to Memory's life. 'I like coming to Kondwa to learn and I like maths. I am also happy to get food, clothes, shoes and sweets. If I do not come I will miss playing with my friends. I want to go to a primary school when I leave Kondwa.'

For more details, write to:
Kondwa Day Care Centre
PO Box 33652
Lusaka
Zambia

4.2 Luwero District Programme, Uganda

Ensuring that orphans and their guardians benefit from community and government services



Problem: Orphans constitute more than ten per cent of the Luwero District population – one-third of these are cared for by elderly grandparents, while a tenth look after themselves.

Solution: Mobilise and support the community to take responsibility for these orphans.

Background

A 19-year civil war in Uganda has displaced 1.6 million people and led to widespread family breakdown. This, coupled with the region's HIV epidemic, has resulted in a huge number of orphans in the area.

Features of the project

Starting point

- The organisation conducted a participatory survey on the needs of orphans and how those needs were being met by families and local institutions.

Community mobilisation and partnerships

- The programme has made the community aware of the need to take responsibility for orphans and vulnerable children, and has ensured they have access to essential services such as healthcare and education.
- It has worked in partnership with existing government structures at district, sub-county, parish and village level to encourage sustainability and ownership.
- The project has ensured that activities are included in district plans and budgets, making possible the replication of similar projects across the district and beyond. This ensures that project activities are sustainable in the future.
- It has also helped to reduce the stigmatisation of orphans by treating them as a group with rights equal to other members of society.

Material support

A holistic approach is taken to caring for children by also supporting their carers and guardians.

- Both guardians and orphans can receive loans and training to initiate income generating activities such as rearing livestock and making clothes.
- Vocational training is provided to orphans in areas such as construction and metal-work.
- School fees, uniforms and materials are provided to the most disadvantaged orphans.

A personal story

Isma Kyakka, 18, had to leave school to look after his younger sisters, Rose, 12, and Florence, ten, after their father died in 1999, and their mother in 2001. The Luwero District Programme gave Isma a cow, which he looked after and was able to sell for a good price. He then bought a young cow with part of the money and spent the rest on bricks and sand, which he used to build a house.

He now plans to fatten up his new cow, sell it and with the proceeds buy two more cows. Eventually, he hopes that this business will help him to earn school fees for his two sisters. 'We really treasure this cow because it's not an easy thing to acquire,' Isma says.

For details, write to:
AMREF Uganda
Plot 29 Nakasero Rd
PO Box 10663
Kampala
Uganda
info@amrefug.org

AMREF UK
Kensington Charity Centre
4th Floor, Charles House
375 Kensington High Street
London W14 8QH
UK
info@amrefuk.org

4.3 Giving Hope, YWCA, Rwanda

Helping to create community-based orphan associations



Problem: Orphans are stigmatised, isolated and often cannot care for themselves.

Solution: Child-headed households form groups to support each other.

Background

The genocide of 1994 orphaned 400,000 children. Rape was used as a weapon of war, accelerating the HIV-infection rate and further increasing the number of orphans.

Features of the project

Helping to create mutual-support groups

- Orphans from one community are introduced to each other and helped to form informal working groups or associations of between five and ten child-headed households. They then nominate an adult from their community to become their mentor. In Rwanda, children call these mentors *nkundabana*, which means 'one who cares for and loves children'.
- As part of a group, children build friendships and receive emotional support, as well as help with household chores.
- The children select leaders for their groups, who receive training from YWCA – in using natural fertilisers to grow vegetables, for example – and then return to share what they have learned.
- Groups have set up their own savings schemes, called *isanduku*. Each member puts a small amount – equivalent to US\$0.10 to US\$0.35 – into the fund each month and the group decides how the money will be used.
- Group members can apply for emergency loans – for example to pay school fees for a sibling or for a grant to set up a small business. In some groups, the money is simply given to a different household each month.

Advocacy

- The YWCA, the *nkundabana* and the children themselves have drawn the situation of child-headed households to the attention of local authorities, community members and church congregations in the town of Gitarama. All of these groups are now involved in supporting orphan households – protecting their rights and providing resources where appropriate.

A personal story

Jean D'Amour Twagirimana – 'Rukara' to his friends – lost both his parents to HIV-related illnesses by the time he was 13 years old. His mother's death made him head of the household and guardian of his two younger sisters, Claire, six, and Clementine, three.

Rukara joined an orphan-support group, which included 14 other families. The group helped him build beds for himself and his sisters, while community members worked on Rukara's house and provided the wood to repair the roof. YWCA training helped Rukara's group create a nursery and household compost pits.

Rukara plans to provide both primary and secondary education for his sisters – he has teamed up with another group member to run a bike-taxi so he can start making a living.

For more details, write to:

YWCA Rwanda
Mairie de la Ville de Gitarama
PO Box 9
Gitarama
Rwanda
ucfrwa@yahoo.com

Church World Service
475 Riverside Drive
New York, NY 10115
USA
info@churchworldservice.org

4.4 Avenir Meilleur pour les Orphelins (AMO-Congo), Democratic Republic of Congo

Financial and emotional support for families struggling to care for vulnerable children, and reuniting children with their families



Problem: Extremely poor families affected by HIV are finding it difficult to provide for additional children.

Solution: Short-term financial assistance plus other material and emotional support.

Background

The Democratic Republic of Congo's vast natural resources have been a source of conflict for many years. Fighting, disease, starvation and an inadequate international response have resulted in more than four million deaths. Many children have been forced to leave their homes, have lost their parents or been separated from their families. The war also contributed to the spread of HIV and there are now more than a million orphans who have lost one or both parents to an HIV-related illness. AMO-Congo (translated its name means 'a better future for orphans') has bases in five regions of the country and has been helping 8,000 families look after children orphaned by HIV.

Features of the project

Material support

- Families struggling to care for additional children receive short-term financial assistance to meet their immediate nutritional and medical needs.
- The most destitute families are provided with housing-rent assistance and material support such as cooking utensils, soap and mattresses.
- Where appropriate, families are taught how to create small businesses – eg selling food or coal outside their home – and are given start-up costs, training and regular supervision.
- Families are encouraged to use the money they earn to pay for school fees, but receive some help in paying the fees if they need it.

Emotional support

- Volunteers offer families emotional support and educate them about HIV, helping to prevent further transmission and reducing HIV-related stigma and ignorance.
- Regular home visits offer families support to look after orphans and monitor the wellbeing of the children.

Unanticipated results

The volunteers themselves say their own attitudes have changed since starting the work. Previously they would not have discussed reproductive and sexual health with their children but now think it is essential to do so. Many churches and other groups donate books, school uniforms and other supplies to AMO-Congo to distribute to the children. Some schools now allow a number of AMO-Congo children to attend for free.

A personal story

Yumba Kamwanya's husband died of an HIV-related illness, and her family abandoned her when they found out the cause of his death. She is HIV-positive and was very sick when she was found, destitute, by an AMO-Congo volunteer. She has seven children, six of whom are under 16. Four had left home to fend for themselves on the streets.

AMO paid for Yumba to receive medical care, found her children and brought them home and provided food and clothing to get them back on their feet. Staff and volunteers made regular visits, and helped Yumba start a small business. She is now selling flour and oil outside her home and using the money to buy food for her family. She is finally able to send one of her children to primary school.

Yumba is the first person in the region of Lubumbashi to have talked openly about her HIV status, and has now done so twice on television.

For more details, write to:

Dr Henri Mukumbi
Director
AMO-Congo
BP 67 Kinshasa
DR Congo
amocongordc@ic.cd

4.5 Concerned Parents' Association (CPA), Uganda

Helping young girls captured during the war to rejoin their families



Problem: Young girls are abducted during the conflict in northern Uganda and forced to serve as soldiers' 'wives'.
Solution: Advocating for the release of child wives and helping them to reintegrate into society.

Features of the project

- Counselling for parents and basic training on how to handle children returning home.
- Advocating locally, nationally and internationally for the unconditional release of children.
- Training and help for girls to reintegrate into society, with emphasis on education and health.

4.6 Centre for Positive Care (CPC), South Africa

Helping children to claim benefits from the government



Problem: Lack of identity documents prevents young people from accessing government support.
Solution: Assisting young people in getting papers so that they can receive benefits to which they are entitled.

Features of the project

- Community volunteers have helped 43 children to get child-care grants, 32 to return to school and 55 to receive food parcels from social services.
- Help is also offered in drawing up wills, locating the guardians of vulnerable children and securing the property of the deceased for their children.

For details, write to:
Ms Mashudu Madadzhe
Centre for Positive Care (CPC)
91 Tamboti Street
PO Box 817
Sibasa, 0970
Limpopo Province
South Africa
mashudu@posicare.co.za

4.7 Family AIDS Caring Trust (FACT), Zimbabwe

Support for families affected by HIV



Problem: Child-headed households caring for sick family members need help in the home.
Solution: Train family members to care for sick relatives and offer other support as necessary.

Features of the project

- Training volunteers to make home visits, helping orphans cope with life without their parents and providing help with chores such as bathing, cooking or washing.
- Providing school fees for orphans.
- Training orphans in income-generating activities.
- Organising recreational activities to promote mental and physical development, for all children in the community so that those orphaned by HIV aren't singled out and stigmatised.
- Running campaigns to raise awareness about HIV prevention, care and support.
- Promoting the rights of children.
- Helping stop 'property-grabbing', where relatives and neighbours seize the houses of widows who are powerless to prevent this.

For more details, write to:
FACT
PO Box 970
Mutare
Zimbabwe
info@fact.org.zw

4.8 Sangha Metta Project, Buddhist Leadership Initiative, Thailand

Temple-based activities for young people affected by HIV and their families



Problem: Lack of support services for people who are HIV-positive or have lost relatives to HIV-related illness.
Solution: Monks and nuns in Chiang Mai offer support to families affected by HIV.

Features of the project

- Working with temples to support children whose parents have died from HIV-related illnesses. This can involve ordination as novice monks or nuns or as temple boys or girls, and by providing children with scholarships.
- Establishing community-support groups at village level to oversee the wellbeing of families affected by HIV.

For details, write to:
Sanga Metta Project
47/30 Mu Baan Daen Tawan Nua
Suthep Road
Tambon Suthep
Muang District
Chiang Mai
Thailand 50200
lauriejm@gmail.com

4.9 Sanlaap, India

Rescuing young girls who are trafficked for commercial sexual exploitation



Christian Aid/Jackie Murray

Problem: Young girls are sometimes considered a financial burden by their families, and are sold into trafficking networks and exposed to sexual abuse.

Solution: Providing education for young girls and their families to prevent them being separated, and caring for girls who have been rescued from sexual exploitation.

Background

Sanlaap is based in Kolata, in west Bengal, where child trafficking is a big problem. Children are trafficked from rural areas to Mumbai and other big cities within and outside of the country. The national police force is powerless unless it can cooperate with counterparts in neighbouring countries, and it often treats child sex workers as criminals. Girls are particularly vulnerable because they have fewer educational and job opportunities, so may be regarded by their families as a financial burden. Some may choose to enter sex work as a profession because of a lack of alternatives.

Features of the project

Advocacy

- Lobbying governments for political agreements and legislation to prevent trafficking.
- Campaigning for more child-friendly services, including counselling and access to quality healthcare.
- Educating police forces on the rights and special needs of children.

Community education

- Informing communities about the issues that underlie sex trafficking. For example, families who struggle to support their children are often tricked into handing them over to unscrupulous operators who promise to give the children a 'good job'.

Vocational training

- Providing girls with skills so they can earn a living. For example, by teaching them batik painting, block printing, tailoring and embroidery so that they can design and make clothes and bedspreads.

Rescue and rehabilitation

- Emotional and vocational support for children who have been trafficked and forced into sex work.
- Counselling for children who are HIV-positive. Peer groups are also set up to help children deal with rejection by their families and communities.
- Through collaboration with other organisations, caregivers in India, Nepal and Bangladesh are being trained to offer specialist counselling and therapy for affected children; 36 school-based schemes have been set up to offer affected children advice and support.

A personal story

'T' was abducted and taken to Mumbai's red-light district when she was 11. For two years she was moved from brothel to brothel. She often tried to run away but was always brought back and tortured. Finally, during a police raid, she was taken to a remand centre and later referred to Sanlaap. She has been living at one of the organisation's shelters since then.

She says: 'What I have been through has been painful and traumatic... Since I came to Sanlaap I have received medical treatment and have eaten properly, unlike in the remand centre where I was treated badly. I thought I was in such a bad condition that no one wanted to touch me.'

Since joining Sanlaap, 'T' has been taught many new skills. 'What I have learned will help me to generate an income for myself. By learning a skill I won't be dependent on anyone. Having learned a number of skills gives me some measure of choice.'

For more details, write to:
Sanlaap
38B Mahanirban Road
Kolkata 700 029
India
sanlaap@giascl01.vsnl.net.in

4.10 Legal Aid for Widows (LAW), Pakistan

Legal assistance for female-headed households



Problem: Poor women do not have a legal identity and are therefore being denied their rights to social security, property and the vote.

Solution: Providing legal support and training to allow poor families to secure official documents and access to benefits.

Background

Many families in Pakistan do not have national identity cards or other documents which are required to access legal protection and other services. Children need birth certificates to enrol in school. Widows and orphans without legal documentation are often refused family property by their in-laws. In especially poor families, the eldest children often leave school to contribute to family income. Many girls end up working as domestic servants.

The government of Pakistan has taken steps to extend support to widows and orphans, but many are either unaware of the benefits or are not in a position to access them.

Features of the project

Legal assistance

- Lawyers employed by the project provide legal assistance for poor women who are raising families on their own so that they can obtain citizenship documents and settle issues related to property and pensions.
- Helping widows obtain the documentation they need to cast votes and participate in local and national elections.
- Training widows to open and manage bank accounts.

Education

- Girls are taught about their basic human rights so they are more aware of when these rights are being violated.
- Adult literacy classes and workshops on women's rights are organised with journalists and religious leaders.

Personal stories

Naseem's father left her some property when he died, but because she does not have an identity card or citizenship status she cannot claim it. 'I have inherited a house from my father, which is in possession of my stepbrother,' she says. 'I need my share in the property for the sake of my children's future.'

LAW is helping Naseem get the legal documentation she needs to claim her share in the property.

Nayaz is 80 years old and has four daughters and three sons. She lives with her eldest son, Rasheed, and grandson, Majid, in Islamabad. 'Majid's father died three years ago,' she explains, 'and his mother went back to her family and left [Majid] with me.' Rasheed, meanwhile, is disabled, but, she says, 'I cannot afford his treatment.'

Nayaz is often sick and her eyesight has started to deteriorate. She wants to apply for support from the local district office, but she does not have an identity card. LAW is helping her to apply for one so that she can claim the benefits to which she is entitled. They are also helping her to apply for a grant so that she can pay for an operation to restore her eyesight, which will help her look after Majid and Rasheed. 'I will be able to walk and work,' she says. 'I want to read once again.'

For more details, write to:
Islamic Relief-Pakistan
6A Park Road F – 8/2
Islamabad,
Pakistan
info@irp.org.pk

4.11 Little Folks, Maryknoll, Cambodia

Finding homes for vulnerable children



Problem: HIV-positive parents who are no longer able to work withdraw their children from school so they can work or beg for money. When their parents die, children live on the street, where they are vulnerable to violence, trafficking and drug use.

Solution: Working with families, extended families and foster families to protect children.

Background

Since the genocide of the 1970s, the traditional, extended family structure in Cambodia has been very weak. As a result, extended families, fostering and 'group homes' have become particularly important in Cambodian communities.

Features of the project

Fostering and group homes

- Little Folks has now helped more than 400 children to find caring homes. Most of the children receiving support from the project live with their extended families, but 28 have been placed in foster families and 50 live in 'group homes'. Group homes house six to eight people – all of whom are infected or affected by HIV.
- When placing children, Maryknoll aims to keep siblings together within a strong extended family wherever possible. If there are no extended family members willing or able (even with assistance) to care for the children, project staff look for foster parents.
- Foster parents are carefully screened and the project has been familiar to most of them for a long time. Many are staff members or their relatives, and all live near each other so that they can meet easily, sometimes every day.

Personal story

Sophat, 11, Chiva, seven, and Chivy, five, lost their mother in 2003 and their father in 2004. Their natural grandmother visited but was not able to provide for them – she has a job that she did not want to give up. The children were not well cared for; they had few clothes and were very hungry. With their father's permission, before he died, and grandmother's blessing, Little Folks found a couple whose own children were grown up and who agreed to care for the three boys. They are all attending school and are very happy with their new foster parents.

For more details, write to:

Fr James Noonan
Maryknoll
PO Box 632
Phnom Penh
Cambodia
mkmekong@everyday.com.kh

4.12 Kaisahang Buhay Foundation, the National Council of Churches in the Philippines

Local adoption and childcare for children of working parents



Problem: Poor, working parents who feel they cannot care for their children sometimes abandon them to institutions.

Solution: Encouraging parents to keep their children by offering day-time childcare, and finding adoptive families for abandoned children.

Features of the project

Keeping children with their parents

- The project's childcare centre relieves parents of the burden of care from Monday to Friday, providing children with meals and regular medical check-ups.
- The centre gives expectant single mothers food, shelter, medical care, counselling and skills training, making it more likely they will keep their children.

Local adoption

- The foundation provides the social, legal and professional services that are required from the time a family makes an application to adopt until adoption is finalised in court.
- It recruits, assesses, develops and maintains a pool of adoptive families.
- The foundation monitors new placements with monthly visits and provides support with phonecalls and counselling, both before and during adoption.

Personal story

Randy's mother put him up for temporary care when he was two years old and promised to come back for him after six months. She never returned. He was placed for local adoption with the Navejas family, who came to consider him as one of their own children.

Randy is now almost 17 and graduated from high school in April 2005. He has enrolled at business college and is taking a course in hotel and restaurant management as a full-time scholar with free tuition.

'My foster family raised and took care of me,' he says. 'They love me without expecting anything in return. Even though I am not their biological child they never treated me as an unrelated one. They love me for what I am and who I am. There are times they discipline me and I know that it is just a part of their love for me.'

For more details, write to:

National Council of Churches in the Philippines
879 Epifanio delos Santos Avenue,
Quezon City 1104,
Philippines
Tel: 63-2-928 8636 / 929 3745
Fax: 63-2-926 7076
nccp-ga@philonline.com

4.13 Outreach Mobile Teams for Child Protection, Serbia

Making the home a safer place in cases where domestic violence causes family breakdown



Problem: Social services lack the resources and skills to meet the needs of vulnerable children in abusive home environments.

Solution: Working with families to prevent abuse and to create a healthy home environment for children.

Background

The wars of the 1990s created more than half a million refugees and internally displaced people in Serbia and Montenegro. The period was marked by economic crisis and deteriorating family relations. Many children in Serbia are victims of abuse, neglect and violence, but the extent of the problem is grossly underreported. More than 5,000 children are deprived of parental care, 2,000 of whom live in institutions.

Features of the project

Outreach to families in the community

- The project's mobile teams are composed of social workers, psychiatrists, and medical and educational experts who are well known in their local communities.
- Once alerted by sources such as schools, relatives, neighbours or children themselves, mobile teams visit the home to assess the family situation. They determine whether children are at risk and what steps should be taken to help them. They then take the appropriate action, in conjunction with other groups such as the police and healthcare professionals.
- The project provides counselling for children in conflict with the law.

Results

- The project has increased the ability of social services to reach families throughout Serbia and its practices have been integrated into official social services.
- It has inspired local communities to develop their own methods of preventing and responding to domestic violence, abuse and neglect against children, on the basis that dealing with abuse against children is not a 'private' family affair, but the responsibility of the community.

Personal story

Ivan is eight years old. His mother left the family home in Smederevo in northern Serbia more than three years ago. His father, Milovan, 34, was an alcoholic who beat his wife regularly. When she left, he turned his anger onto Ivan.

One evening, a police patrol found the boy wandering through the streets of his village, badly beaten. The police filed charges against the father, and notified a mobile team.

'After consultation with the centre for social work, we concluded that the only chance for the boy was to help the father become capable of parenthood, to empower him to quit drinking and take proper care of the child,' explains mobile team worker Vesna Emersic. 'We try out all the possible solutions before even considering placing a child in an institution. Such a measure is a last resort in the most drastic cases.'

She and her colleague, psychiatrist Dejan Zivanovic, befriended the family and were always there to give support when it was needed. For the past nine months, Ivan's father has not had a drink. Ivan is well fed, nicely dressed and cheerful.

For more details, write to:
UNICEF-Serbia and Montenegro
Svetozara Markovica 58
11000 Belgrade
Serbia and Montenegro
belgrade@unicef.org

4.14 Culture and Free Thought Association (CFTA), Occupied Palestinian Territories

Children's centre helps young people living in a refugee camp



Problem: Children living in the refugee camps of the Gaza Strip have few safe places to learn and play.

Solution: Setting up youth centres which run community activities for children.

Background

There is approximately 80 per cent unemployment in the Khan Yunis refugee camp in the Gaza Strip due to restrictions on trade and movement caused by the Israeli occupation. This has led to problems such as domestic violence and depression. Many children are suffering from trauma, ranging from nightmares and bedwetting to physical aggression and violence, as a result of the occupation.

Features of the project

- More than 100 children aged between the ages of seven and 18 visit the Shuruq wal Amal (Sunrise and Hope) and Bunat Al Ghad (Builders of the Future) centres run by CFTA to participate in debates, games, trips and performances. They also publish their own magazine.
- One of the centres has a scientific laboratory with basic equipment which the teenagers can use on a daily basis.
- The centre's summer clubs provide young children with a safe environment in which to be expressive, creative and behave like children.
- CFTA provides special training to help children learn to manage their anger.
- The teenagers are heavily involved in organising their activities. Only one-third of the activities are run by the educators and the rest are run by the children through the 'Teenagers' Parliament', which teaches them about democratic process and their rights.

For further details about this work visit:
www.cfta-ps.org

4.15 Child and the Environment, Georgia

Inclusive education for children in ten kindergartens and primary schools in Tbilisi



Problem: Due to a lack of alternatives, children with disabilities continue to be placed in great numbers in institutional care and special schools, segregated from the community and cut off from family.

Solution: Creating and advocating for conditions that make it possible for children with disabilities to attend mainstream kindergartens and public schools, thus enabling them to remain in their communities and to grow up in a family environment.

Features of the project

- Helping families to establish parent associations and provide them with counselling services and training in parental skills.
- Establishing centres where kindergarten children with disabilities can play together with their able-bodied peers, while receiving professional attention and care, to help them prepare for mainstream primary school.
- Training for employees and teachers about inclusive education and interactive teaching and learning methods.
- Together with the ministry of education, the project established a coordination committee which advocates for the inclusion of children with disabilities.

Results

The project has demonstrated that, when it comes to providing for the needs of children with disabilities, there are viable alternatives to institutionalisation and special schools. There are 55 disabled children who grow and learn side by side with their able-bodied peers in ten kindergartens and ten primary schools in Tbilisi. The project has helped to raise awareness around disability issues and to overcome common stereotypes and fears of children with disabilities. Parents and their children who have benefited from the project feel supported, safer and more integrated into community life.

For further details, write to:
Nino Shatberashvili
UNICEF-Georgia
UN House
9, Eristavi Street, Floor IV
380079 Tbilisi
Georgia
nshatberashvili@un.org

4.16 Group to Support the Prevention of AIDS (GAPA), Bahia, Brazil

Clinic-based childcare for children of HIV-infected women



Christian Aid/Hannah Morley

Personal story

Rosario, 48, is originally from Uruguay but has been living in Brazil for 20 years. Her daughter attends the playschool or *brinquedoteca* run by GAPA. 'My youngest daughter still goes to the *brinquedoteca* where children and young people affected by HIV and AIDS can go to play and participate in educational activities,' says Rosario. 'She felt better with them, there is a good network of support. The children learn how to cope with the stigma. My daughter also takes part in the theatre project now.'

'I go to the meetings of the carers of the young people who go to the *brinquedoteca*. We talk about how to give medicines or look after young people affected by HIV and AIDS,' she says.

For more details, write to:
Harley Nascimento
Rua Comendador Gomes Costa,
39 Barris
Salvador – BA
40070-120
Brazil
www.gapabahia.org.br

Problem: When HIV-positive mothers took their children to the hospital with them, there was nowhere for them to play.

Solution: GAPA set up a childcare centre where parents receiving counselling or treatment can drop off their children to play with other children and benefit from educational activities.

Features of the project

Short-term, clinic-based childcare

- Young children can play safely with other children while their carers receive counselling and treatment.
- A psychologist works at the playschool, providing support for children, teenagers and carers. The school helps the children understand that there is a world outside HIV.
- There are regular meetings where parents or guardians get together and talk about issues surrounding caring for children and young people affected by HIV.
- The project works closely with parents and guardians, as well as with the local hospital, to make sure that all their children's needs are addressed.

Education

- Recently GAPA staff realised that 70 per cent of the children at the playschool were failing at school. Carers are now encouraged to get their children to take their homework with them to the nursery. There are also meetings with the parents to talk about the importance of studying.

4.17 Association for people living with HIV/AIDS in Honduras (ASONAPVSI DAH)

A network of self-help groups, assisting families infected and affected by HIV



Christian Aid/Amabel Davis

Features of the project

- Supporting self-help groups which in turn support families. They give people living with HIV emotional support so they can tell their families about their status, and they employ psychologists to help families come to terms with the illness. It also offers this support to other NGOs and government institutions working on HIV.
- Teaching people how to understand their illness, how to improve their nutrition, how to take their medicine and helping them understand the implications of not taking it.
- Arranging healthy, nutritious food packages to elderly people looking after orphaned grandchildren and providing cash donations so they can buy clothes for their families.
- Organising a volunteer programme to care for people in hospital and in their homes when they return.
- Running a social centre for the self-help groups, so they have a space to meet and share ideas, as well as a place to attend counselling sessions and yoga and relaxation classes. It also organises workshops on pottery, handicrafts, hairdressing and clothes making so HIV-positive people can learn new skills and earn a living.
- Carrying out advocacy work to ensure people living with HIV have access to free or reduced-cost treatment. It campaigns to ensure that the labour and health rights of HIV-positive people are respected.

Problem: Hundreds of children in Honduras have been orphaned by HIV. Many live with elderly grandparents who do not know how to take care of them. There are few hospitals or health centres in rural areas and some refuse to care for people living with HIV.

Solution: ASONAPVSI DAH runs self-help groups which support people in their own homes. It teaches them how to live with HIV. It carries out home visits and runs a volunteer programme to care for people in hospitals who are HIV positive.

Background

Honduras has the highest HIV-infection rate in Central America. Almost half of those who are infected are women. Of all children who lost a parent in 2005, nearly one third of these was due to HIV.

For more details about this work, contact:
Marely Garcia at asonapvsdiah@yahoo.com

Additional resources

If you would like more background or technical information on the issues covered in this handbook, the following resources will be useful. If you have trouble obtaining any of these resources, please contact your local Christian Aid or UNICEF office, or write to them at the addresses provided on the back cover.

UN Convention on the Rights of the Child
www.unicef.org/crc/

The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV and AIDS
www.unicef.org/aids/files/Framework_English.pdf

State of the World's Children, 2005: Childhood Under Threat
[www.unicef.org/publications/files/SOWC_2005_\(English\).pdf](http://www.unicef.org/publications/files/SOWC_2005_(English).pdf)

State of the World's Children, 2006: Excluded and Invisible
www.unicef.org/publications/index_30398.html

Children on the Brink, 2004
www.unicef.org/publications/index_22212.html

Involving children/Child protection

Ethical Approaches to Gathering Information from Children in International Settings
www.popcouncil.org/pdfs/horizons/childrenethics.pdf

Setting the Standard: A common approach to child protection for International NGOs
www.peopleinaid.org/download/Setting%20The%20Standards.pdf

Children as Partners in Planning
www.savethechildren.org.uk/scuk/jsp/resources/

Global Movement for Children
www.gmfc.org

Community-based care

Orphans and Other Vulnerable Children Support Toolkit
www.ovcsupport.net

Building Blocks: Africa-wide briefing notes
www.aidsalliance.org/sw9170.asp

Community Based Care for Separated Children
<http://se-web-01.rb.se/Shop/Products/Product.aspx?ItemId=398>

Restoring Playfulness
<http://se-web-01.rb.se/Shop/Products/Product.aspx?ItemId=361>

The Journey of Life
www.repssi.org

Roofs and Roots
H.Abuzaid@scfuk.org.uk

Facing the Crisis
www.savethechildren.org.uk/scuk/jsp/resources/

Advocacy against institutional care

A Last Resort: The growing concern about children in residential care
www.savethechildren.org.uk/scuk_cache/scuk/cache/cmsattach/1110_lastresort.pdf

The Promise of a Future
www.firelightfoundation.org

Children in Residential Care and Alternatives
[http://tilz.tearfund.org/webdocs/Tilz/Topics/CareENG_full%20doc\(1\).pdf](http://tilz.tearfund.org/webdocs/Tilz/Topics/CareENG_full%20doc(1).pdf)

Resources for faith leaders

What Religious Leaders Can Do About HIV/AIDS: Actions for children and young people
www.unicef.org/aids/files/Unicef_HIV_Aids.pdf

From Faith to Action: Strengthening Family and Community Care for Orphans and Vulnerable Children in Sub-Saharan Africa.
www.firelightfoundation.org

Ecumenical Advocacy Alliance
www.e-alliance.ch

Acknowledgements

This handbook is the result of a collaboration between Christian Aid, UNICEF and Islamic Relief. It draws on the expertise of a number of faith-based and secular non-governmental organisations that are working at community level. They include Aids Alliance, American Jewish Joint Distribution Committee, American Jewish World Service, AMREF, ANERELA, APRODEV, Cafod, Care, Church World Service, Cordaid, Ecumenical Advocacy Alliance, Firelight Foundation, International Community of Women Living with HIV and AIDs, International HIV/AIDS Alliance, Kinder Postzegels, Sanga Metta Project, Save the Children Fund UK, Tearfund, Viva Network, World Council of Churches, World Conference of Religions for Peace and World Vision.

The principles and policies of each agency may differ, but they are all committed to the right of children to be raised in families within their own communities.

Authors

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Editorial support was provided by Alexandra Yuster and Helen Schulte at UNICEF and Andrew Jacques and Matthew Cunningham at Christian Aid.