

October
2016

Key Findings and Recommendations

Isibindi Mid-Term Review



Child and Youth Care Workers – St Helena Bay





Dissemination of the Mid Term Review



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The Purpose of Dissemination

- What information is it that stakeholders want to disseminate?
- Who are the key stakeholders and what are they being offered in terms of information, guidance and strategic direction going forward?
- When are the optimal “windows of opportunity” for dissemination?
- What are the most effective ways of disseminating information at different levels?
- Who might be key agents in disseminating information?
- What are the key steps in developing a dissemination strategy?
- How can the dissemination strategy promote mid-term adjustments and improvements to the Isibindi project?
- How can the dissemination activities be costed, and who will contribute to this?
- How can the success of dissemination activities be measured?





Methodology



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Review Methodology

The research population for the MTR included the following stakeholders:

- Staff from the National and Provincial DSD;
- NACCW staff at head office and in the field;
- Staff from the implementing partners;
- Child and Youth Care Workers;
- Community members with a stake in the Isibindi programme;
- Staff from other government departments, including Health, Education, Home Affairs and Police Services;
- Parents and caregivers benefitting from Isibindi services; and
- Adolescents and youth benefitting from Isibindi services.



Site Selection for Field Visits

- The selected partners for inclusion in the research were based on purposive sampling of implementing partners based on the following criteria:

Geographical

- Urban sites
- Peri-urban sites
- Rural sites

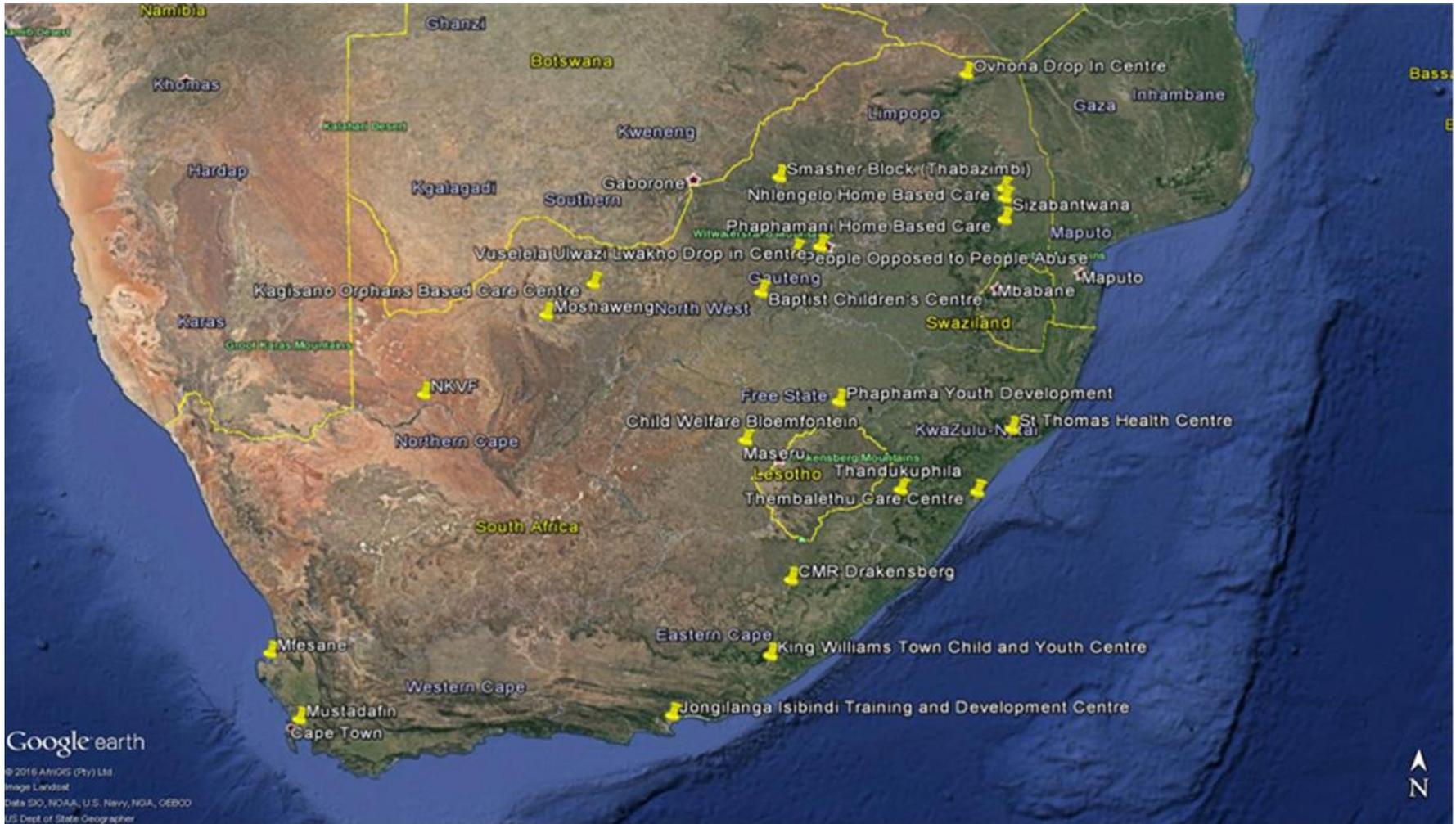
Experience

- Recently appointed implementing partners
- Implementing partners with more than one year involvement in Isibindi

Performance

- Well-performing partners
- Average performing partners
- Poorly performing partners

Field Work Coverage



Data Collection Tools

Data Collection Tool Purpose

Quantitative Data Collection Tool

This tool was designed to collect all quantitative data relevant to the implementation of the Isibindi project – with a focus on output and outcome level data that allows for analysis of progress against targets that are outlined in the project logframes

Key Informant Tool

Semi-structured interview schedule with questions designed to elicit project level information at policy, planning and implementation levels (three different questions) and a key informant interview guide was also developed

Focus Group Tool

Guiding questions specifically designed for discrete focus groups (caregivers, adolescents, youth) targeted at eliciting beneficiary responses to services provided through Isibindi / a focus group discussion facilitation guide was also developed

Observation Tool

This tool was designed to capture environmental factors at implementation sites (infrastructure, access, facilities, Safe Parks etc.)

Organisational Diagnostic Tool

This tool was designed to do a rapid organisational assessment of each implementing partner's capacity in areas including governance, finances, programming, human resources and M&E

Site Visit Verification Form

This tool was designed to ensure that key data with regard to the site location was captured and the implementing partner signed off on the visit

Site Visit Check List

This tool was developed to assist the field workers in ensuring that all necessary data was captured on site



Ethics Approval

The following documents were submitted to the Human Sciences Research Council (HSRC) for ethics approval:

- Field work methodology
- Schedule of sites to be visited
- Complete set of data collection tools

Ethics approval was granted as per the request submitted



Total Respondents – National and Provincial

Interview	Method	Total	Male	Female
Department of Social Development	KII	26	10	16
NACCW	KII	23	4	19
Implementing Partners	KII	24	4	20
Community Representatives	KII	42	27	15
Other Government Stakeholders	KII	34	19	15
Child and Youth Care Workers	FGD	294	43	251
Adolescents 13-18 years	FGD	231	108	123
Youth 19-25 years	FGD	58	22	36
Parents / Guardians	FGD	146	48	98
Total		878	285 (32%)	593 (68%)



Findings



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Data Analysis

Used a mixed method approach to integrate various review methods drawing on both quantitative and qualitative data. The data collection process has included the following collection techniques:

- Key informant interviews (KIIs) using semi-structured questionnaires;
- Focus group discussions (FGDs), using an FGD Question Guide tailored to the group being facilitated;
- A rapid desk review of existing secondary data;
- An environmental scan that examined site level socio-economic factors;
- Case studies to illustrate contextual issues at site level.

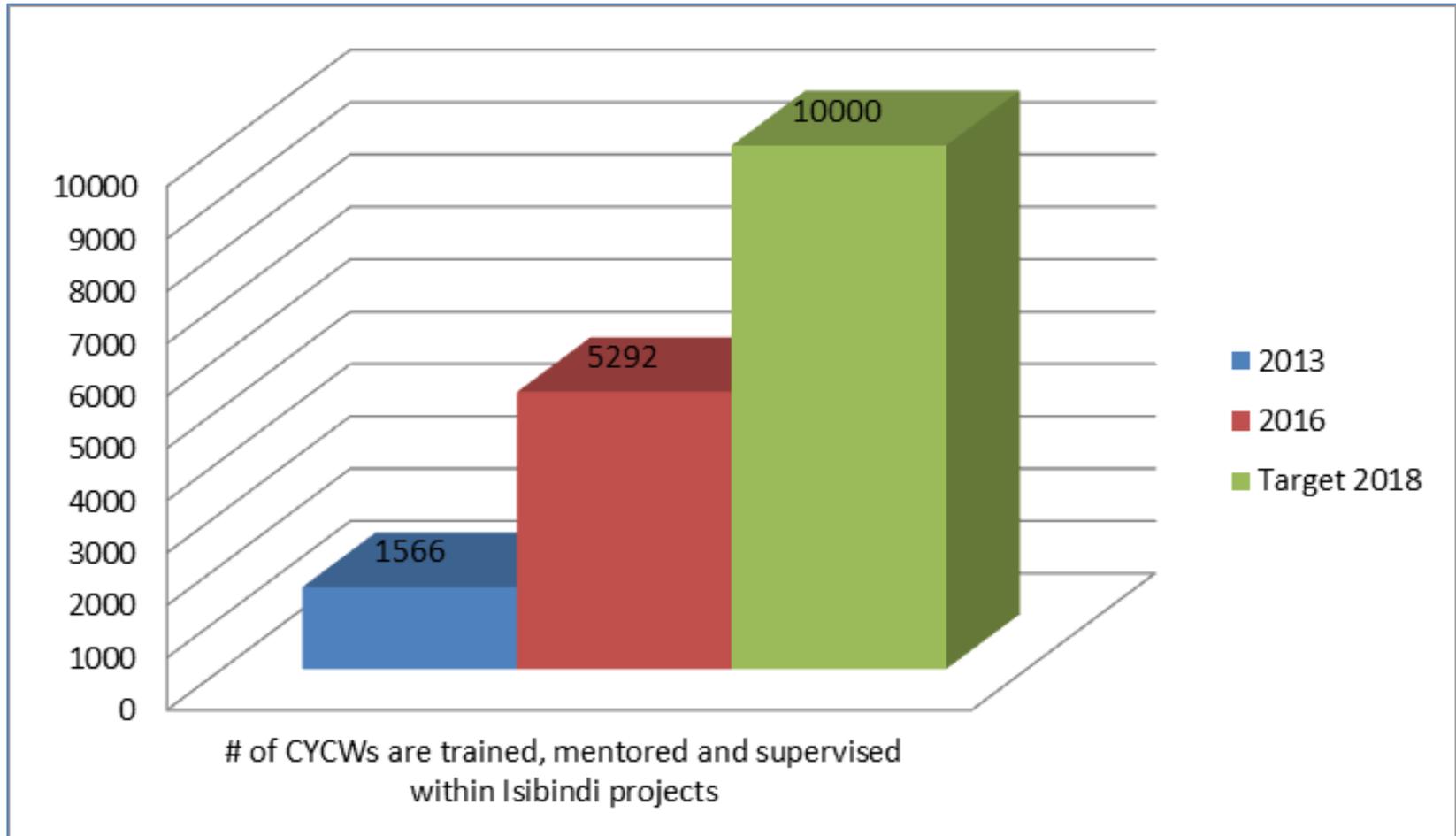


Progress on Targets to Date

- For the first two years of implementation the Isibindi programme lacked a definitive results-based management tool.
- Both NACCW and the Department of Social Development had developed their own logframes for implementation but these ran in parallel.
- In June 2016 the two principle partners held a joint planning workshop at the Kopanong Conference Centre in Kempton Park to consolidate these tools and agree on the indicators for measuring progress.



Training of CYCWs



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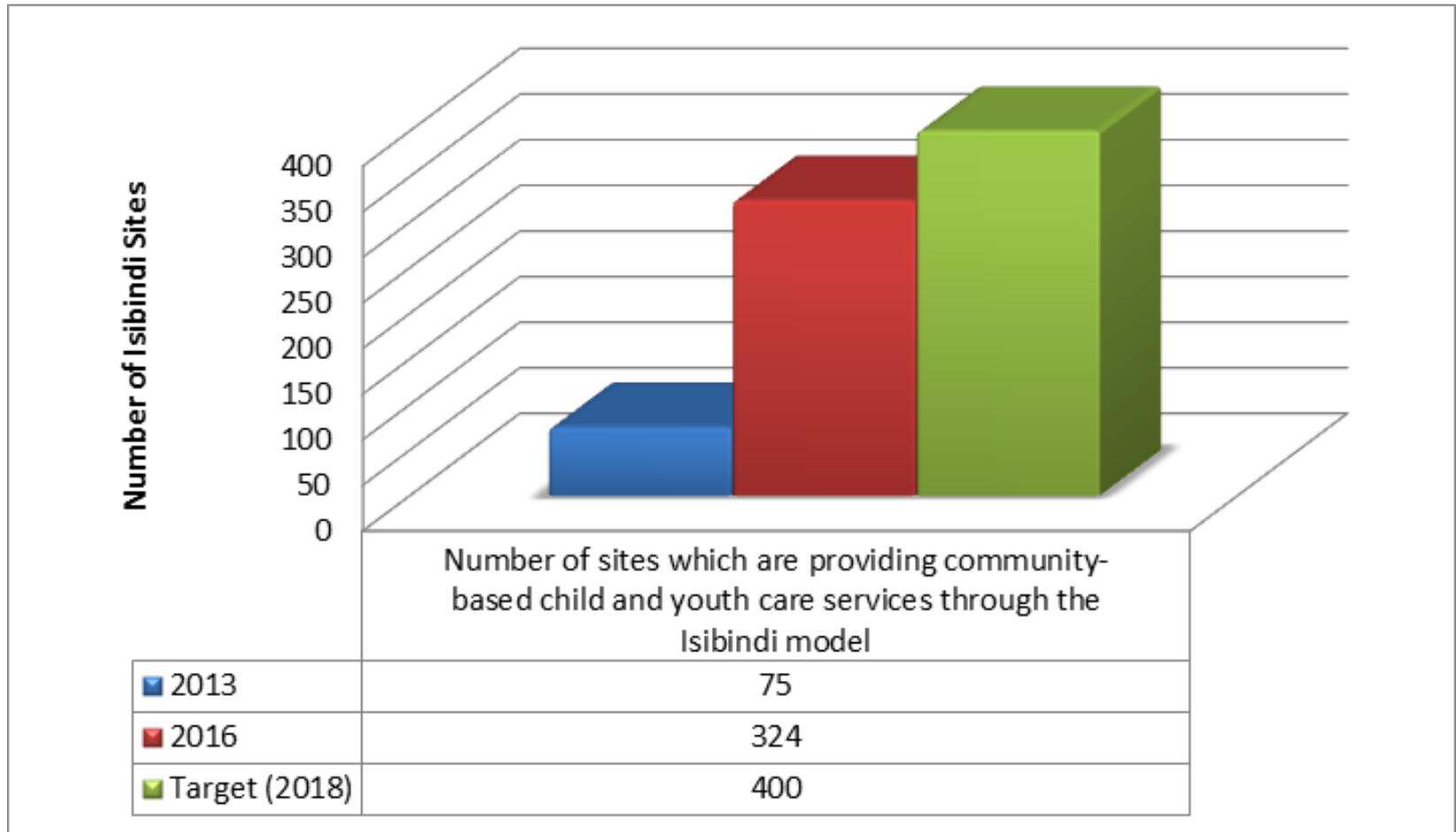


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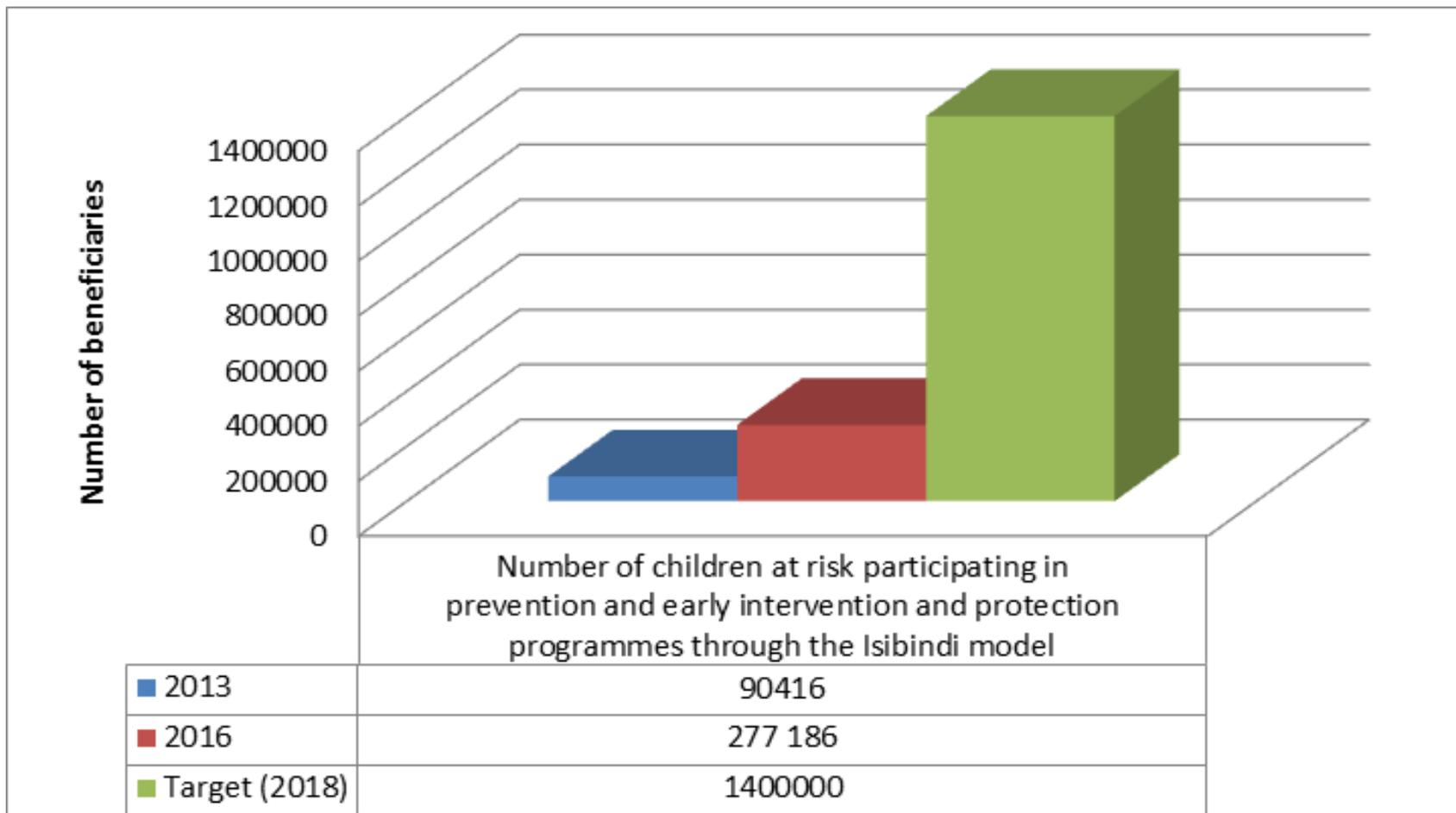
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Establishment of Isibindi Sites



Number of Beneficiaries Reached



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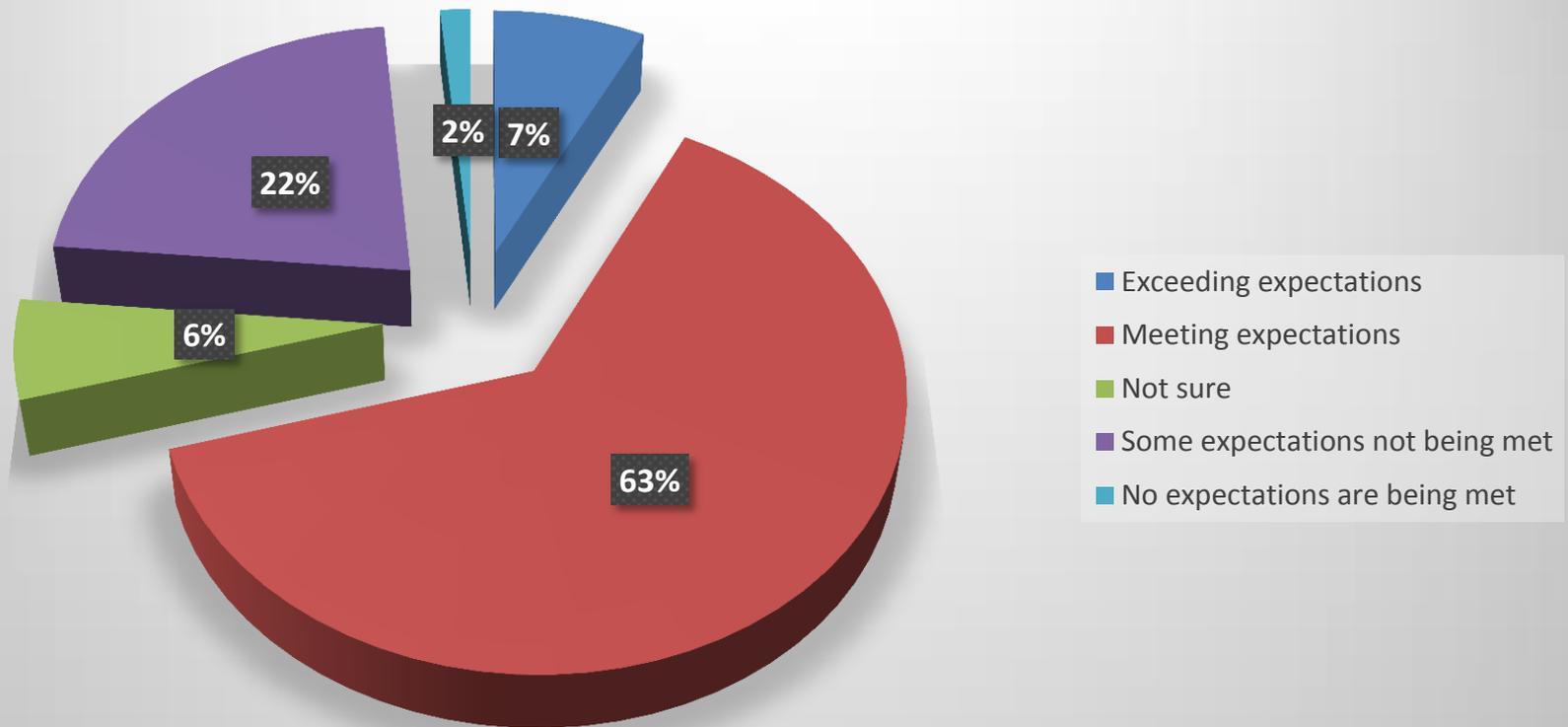
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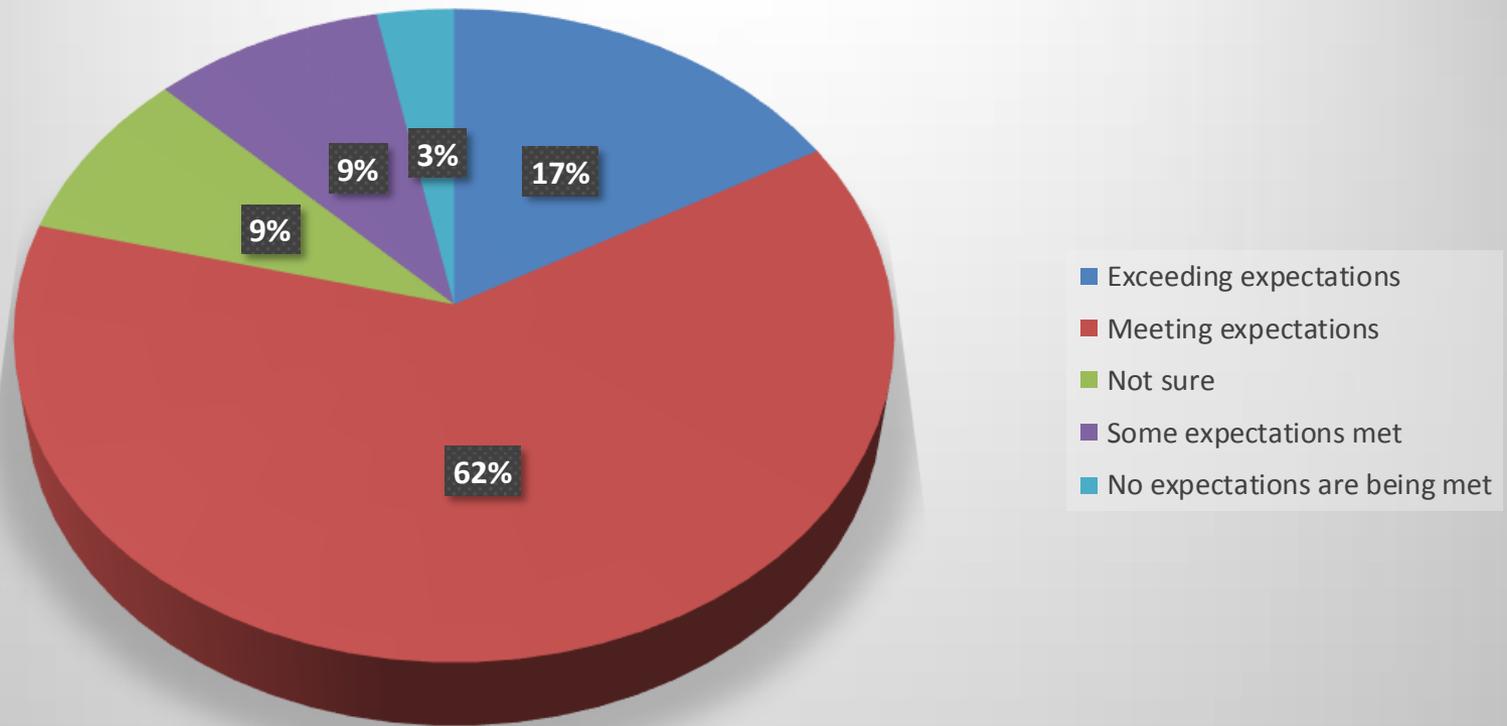
Is Isibindi Working? Stakeholder View

Perceptions of Isibindi Utility

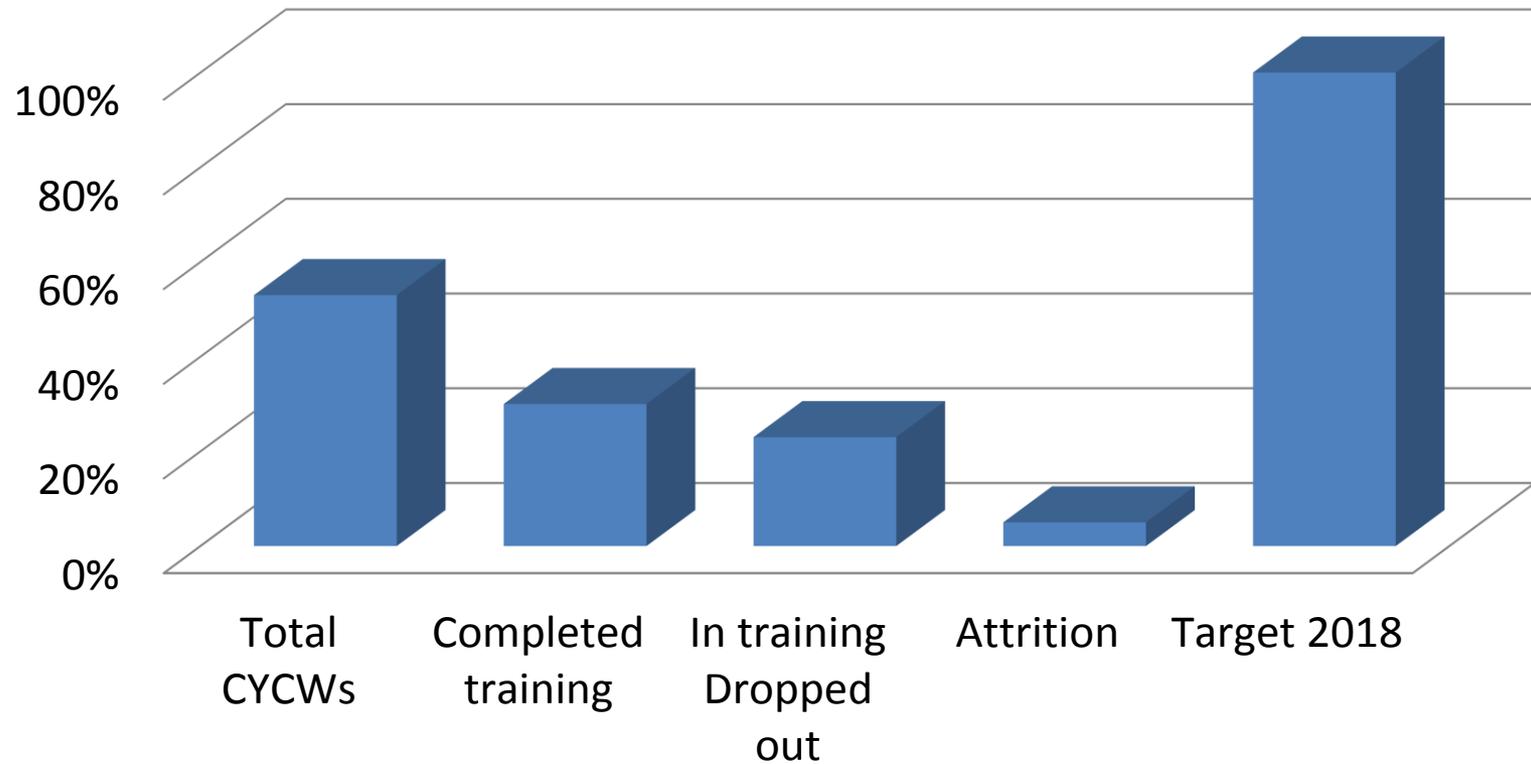


Is Isibindi Working? Beneficiary View

Beneficiary Perceptions of Isibindi Utility

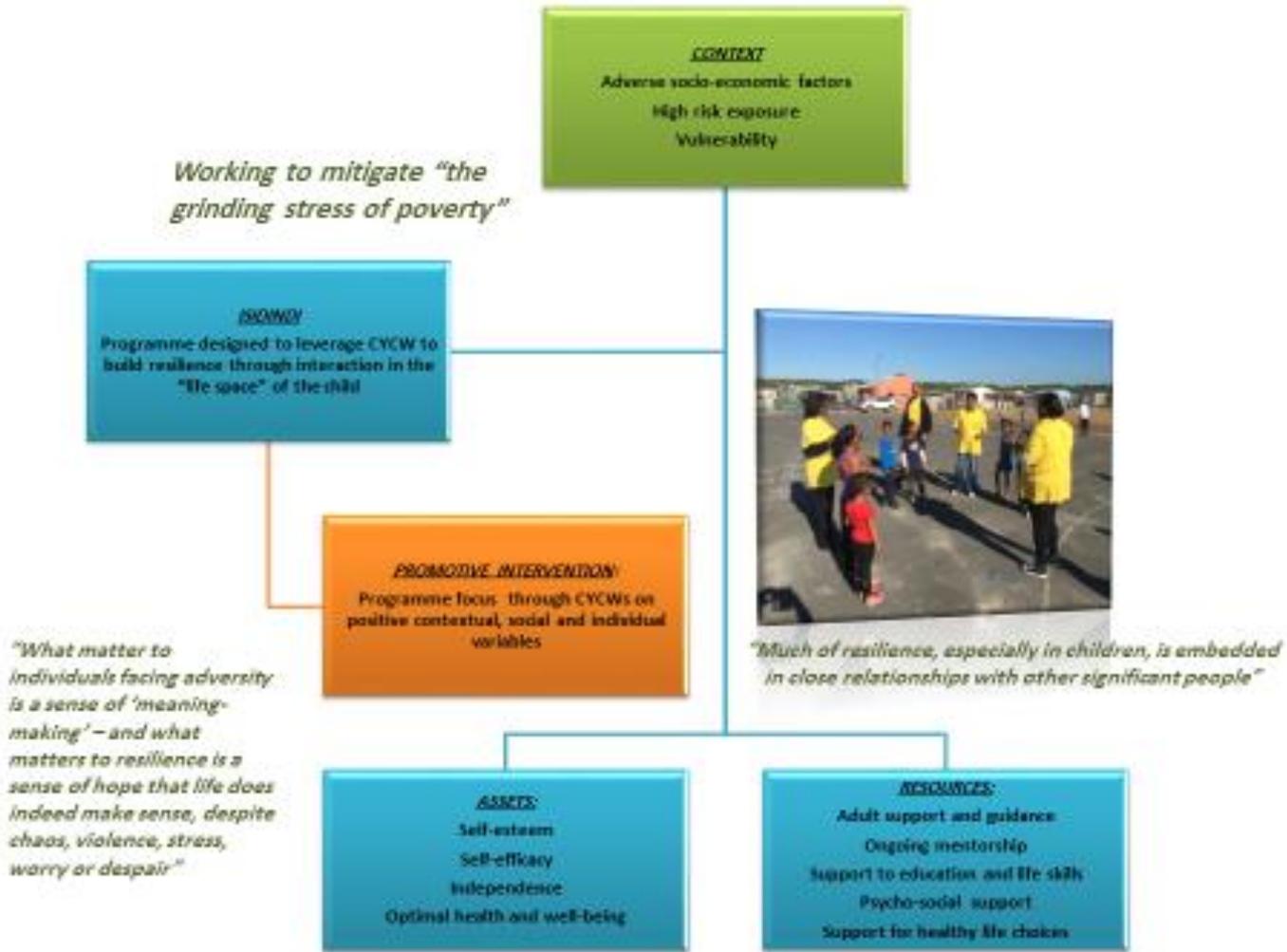


Training of CYCWs to Date



■ Training Reach June 2016

Isibindi Impact – Building Resilience?



Quality of Relationships – DSD and NACCCW

- Generally strong and built on a mutual trust and professional respect basis
- NACCCW training and mentorship is recognised by DSD as a core component of Isibindi
- Both have a strong commitment to strengthening and professionalising the child / youth care work sector
- Frustrations arise around contracting / payment issues
- In some cases tensions arise over boundaries and responsibilities (eg. role of social workers, expectations of CYCWs, selection of implementing partners)



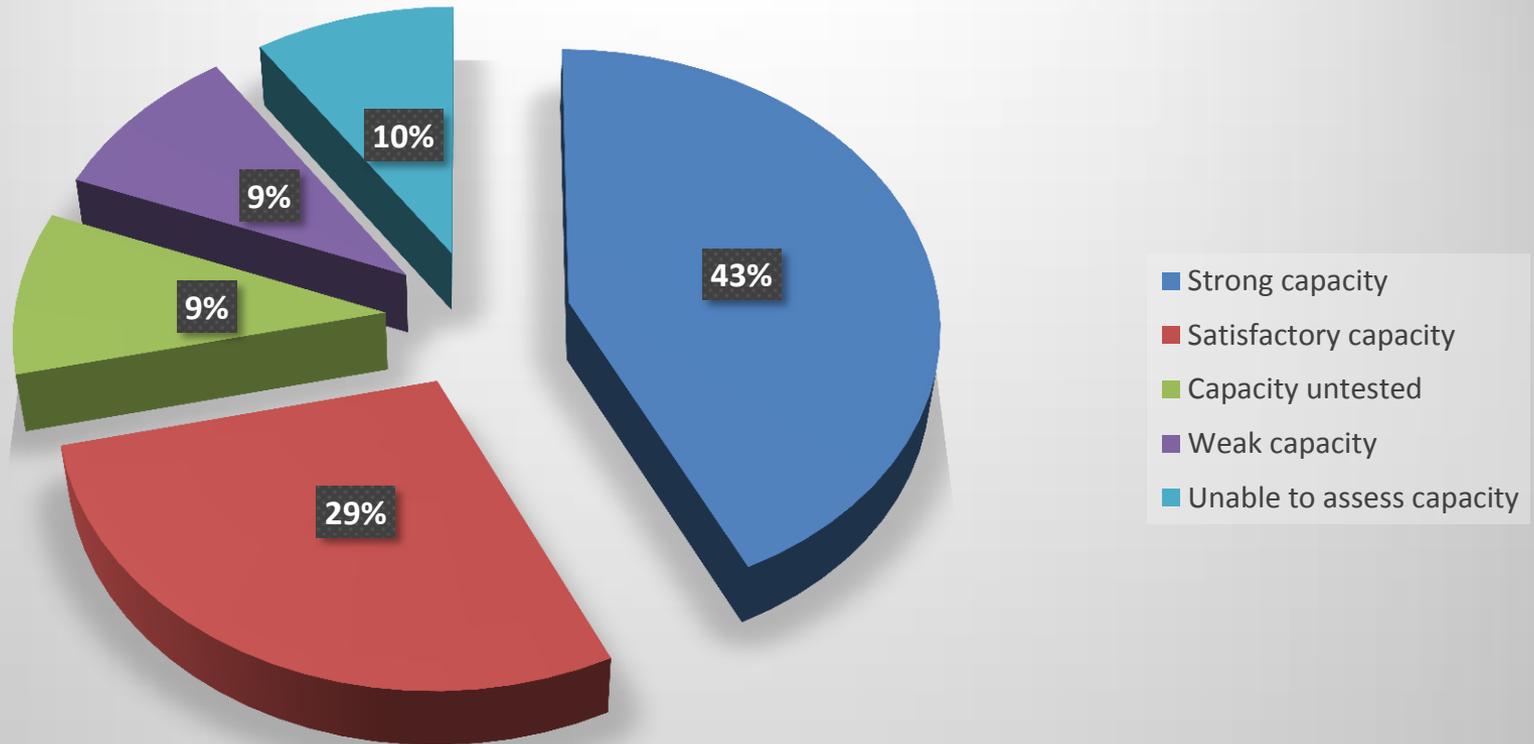
Provincial / District DSD and Implementing Partner

- Relationships appear to be province and even district-dependent – some excellent, some satisfactory, some poor
- In WC, NC, MP, KZN implementing partners have regular engagement with DSD through district coordinators, social workers and via network meetings
- In other provinces implementing partners have very limited engagement with DSD
- Where DSD is hands-on the collaborative and oversight roles have evident efficiency benefits
- Implementing partners in more remote, rural sites have less frequent contact with DSD



Capacity of Implementing Partners

Organisational Capacity Assessment



Provision of Isibindi Services

A key research question for the MTR was whether the services being provided by CYCWs through the Isibindi model have been implemented. In particular the reviewers looked at the following variables:

- To what extent these services aligned to the DSD's basket of services for OVCY?
- Are the services of a sufficiently high quality and relevance?
- Are there any obvious gaps in the current package of services?
- Are the core Isibindi services being provided to the most vulnerable children and youth in the poorest communities across all nine provinces in South Africa?
- Are these services are being provided in a coherent, integrated, efficient, and effective way through the CYCWs?



Comparative Cross-Site Variables

Mustadafin site in Tafelsig, Western Cape



- Urban high density
- Predominantly coloured
- Poor, high unemployment
- Relatively stable population
- High levels of gangsterism
- Strong service provider
- Safety concerns for CYCWs

Thandukaphila in Harry Gwala District, KwaZulu-Natal



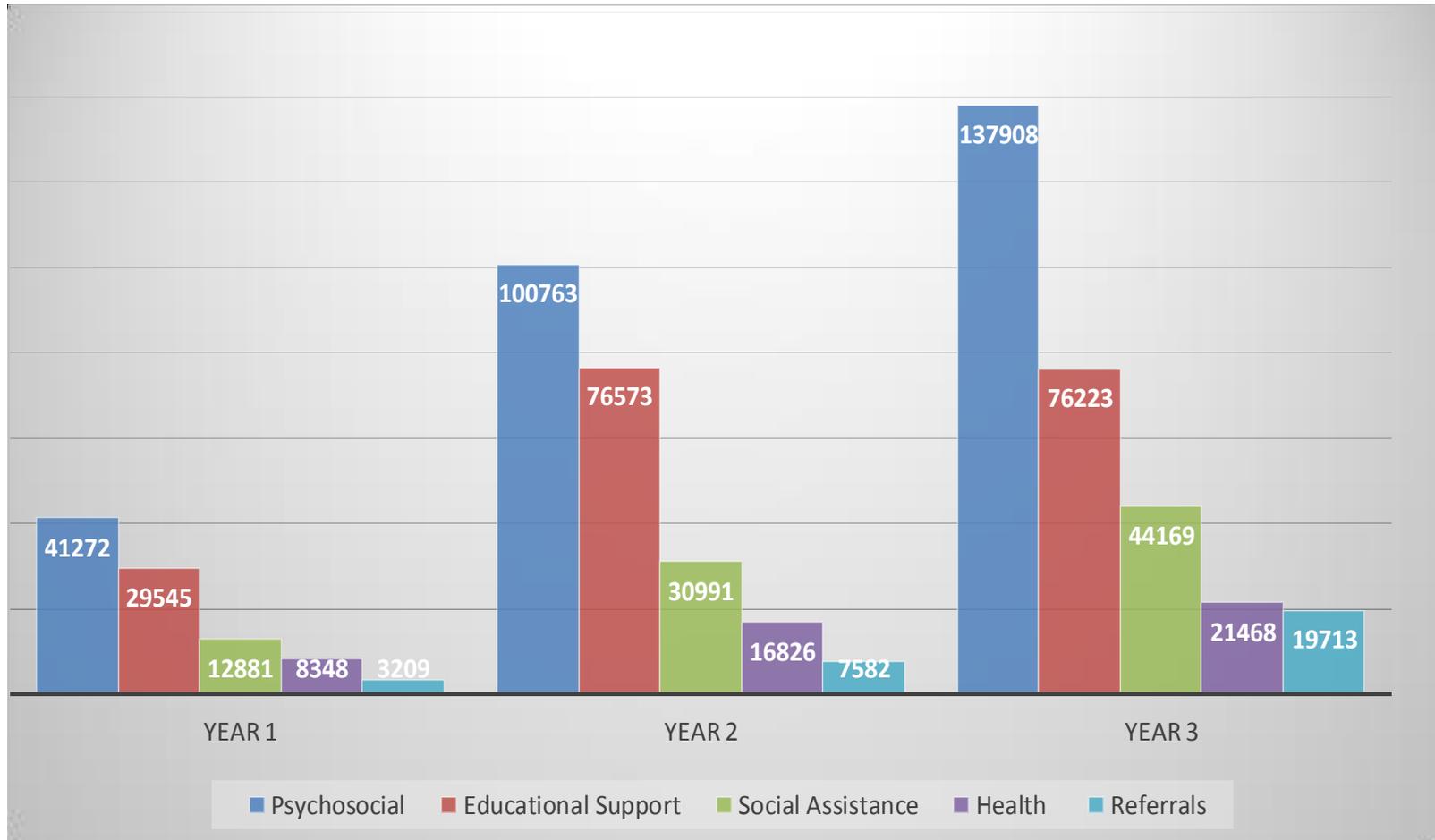
- Rural, low density
- Predominantly Zulu
- Poor, high unemployment
- High out-migration
- Child abduction (Ukutwala)
- Weak service provider
- No CYCW safety concerns

Child Welfare site in Thaba Nchu, Free State



- Peri-Unban, medium density
- Mixed SA / Lesotho citizens
- Poor, high unemployment
- High in-migration
- Severe child neglect
- Disengaged service provider
- Moderate CYCW safety concerns

OVCY Beneficiaries by Type of Intervention



Range of Isibindi Services Observed

Practical / Basic Needs

- Making referrals
- Help with household chores / cooking meals / household food gardening
- Addressing family issues and challenges / psychosocial support
- Food parcels / provision of meals
- Assistance with uniforms / shoes
- Helping the family to budget and manage household resources
- Support to obtaining ID documents / accessing grants
- Teaching basic health and hygiene skills / encouraging cleanliness
- Support for school attendance / school work / homework / reading supervision



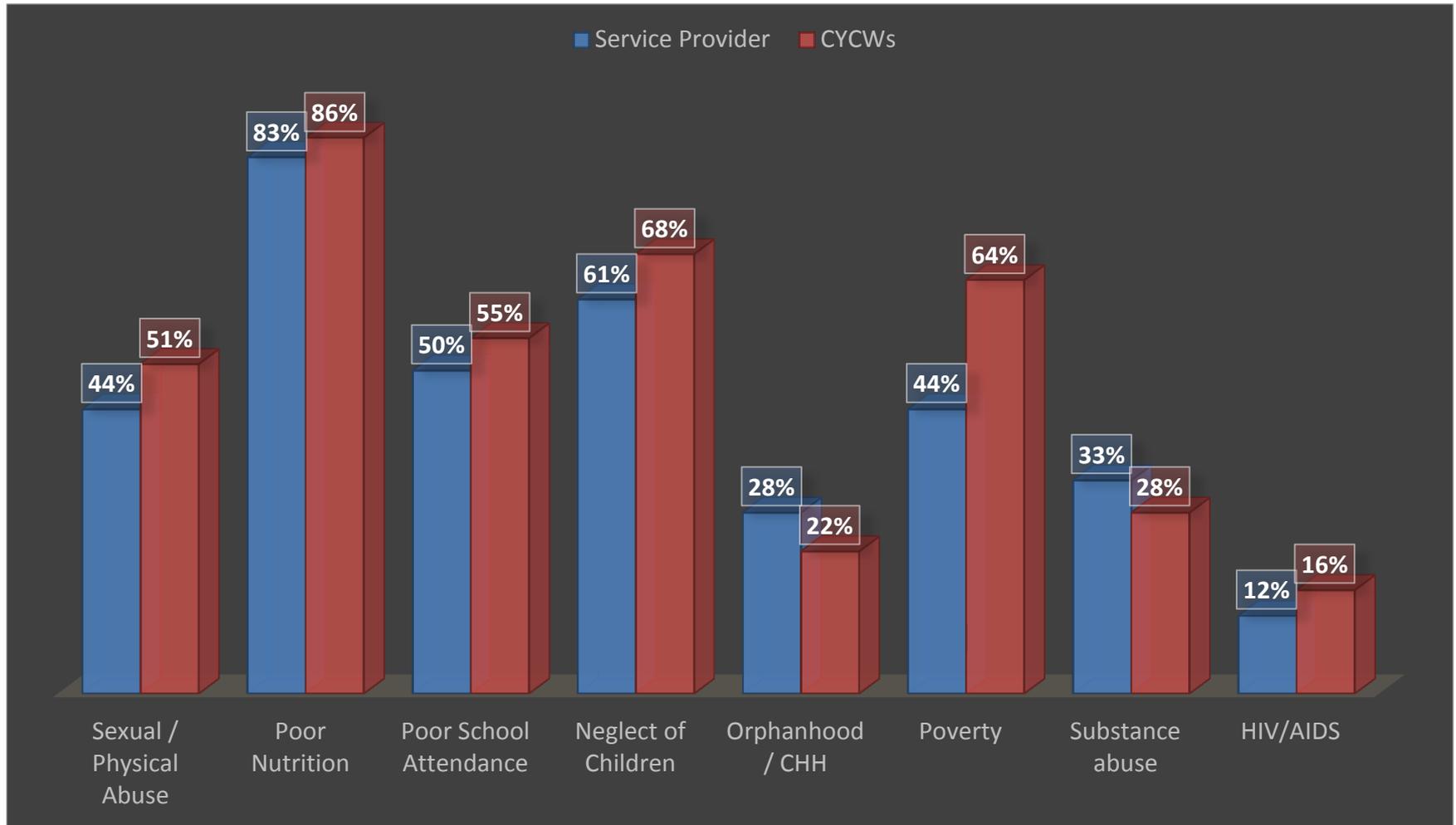
Range of Isibindi Services Observed

Therapeutic: Life Skills / Psychosocial Support / Building Resilience /

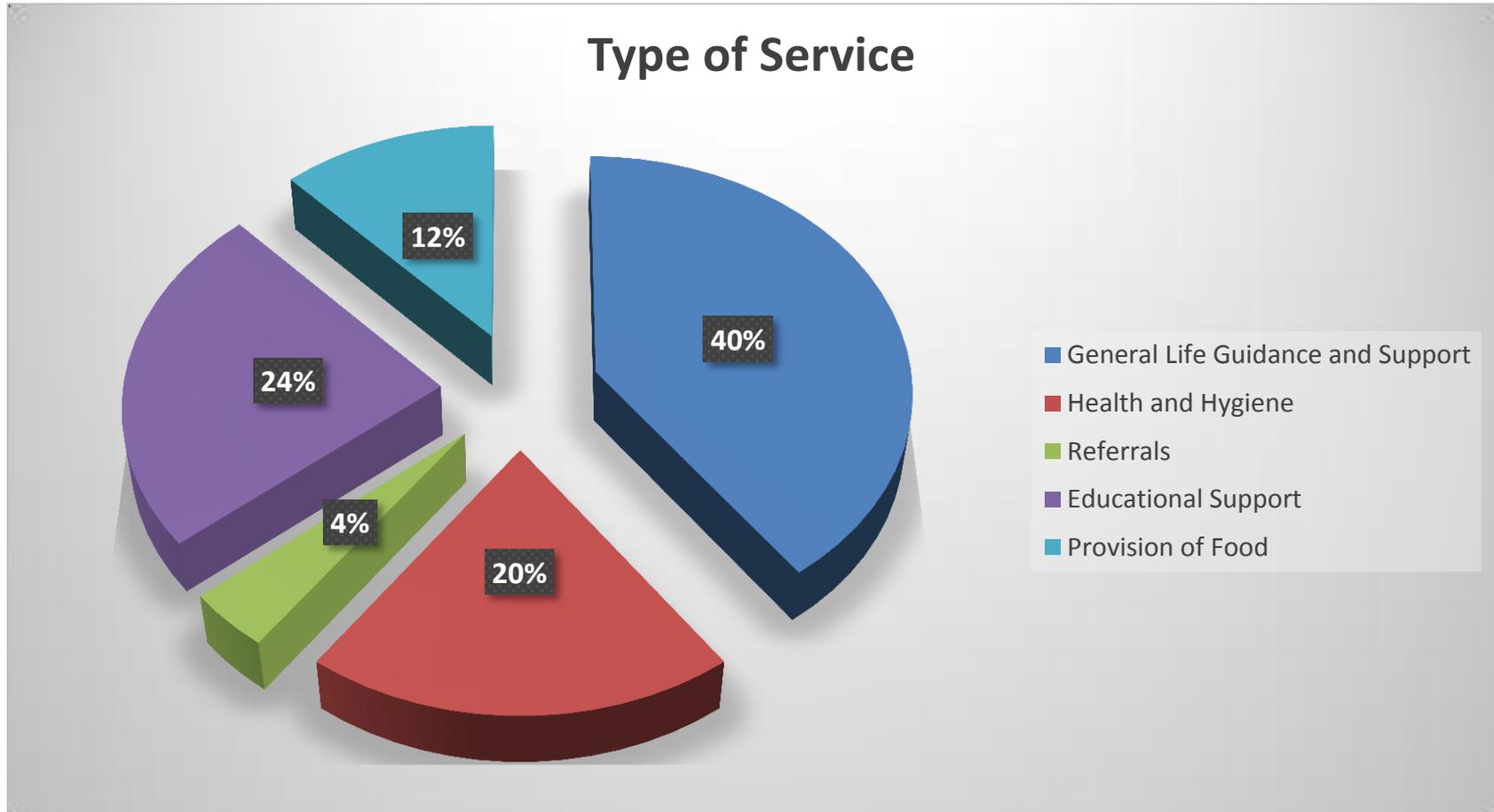
- Empowering children to take care of themselves / practical coping and life skills
- Building self-esteem / self-confidence through regular interaction
- Assessing and referral of children and families – health, trauma, education, need for material assistance relating to severe food insecurity and crises
- Transferral of knowledge and skills - HIV/AIDS awareness, testing and management, safety, nutrition and educational assistance
- Life-space counselling – in the moment assistance with difficult situations of conflict, crisis, stress and grief
- Addressing problems of physical / sexual abuse
- Supervised play / structured after-school activities
- Leadership skills for adolescents and youth



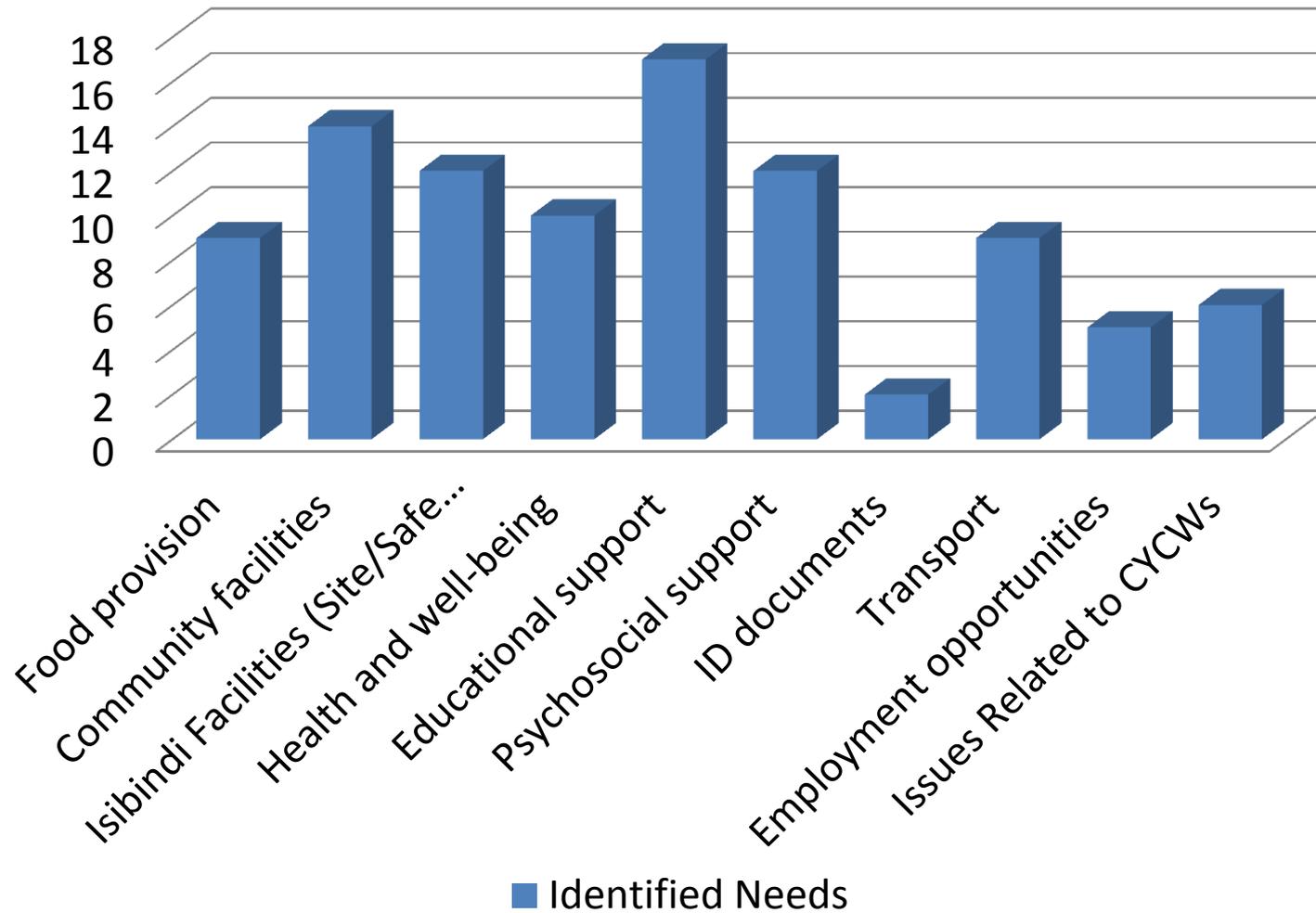
Issues Impacting Children – Comparative View



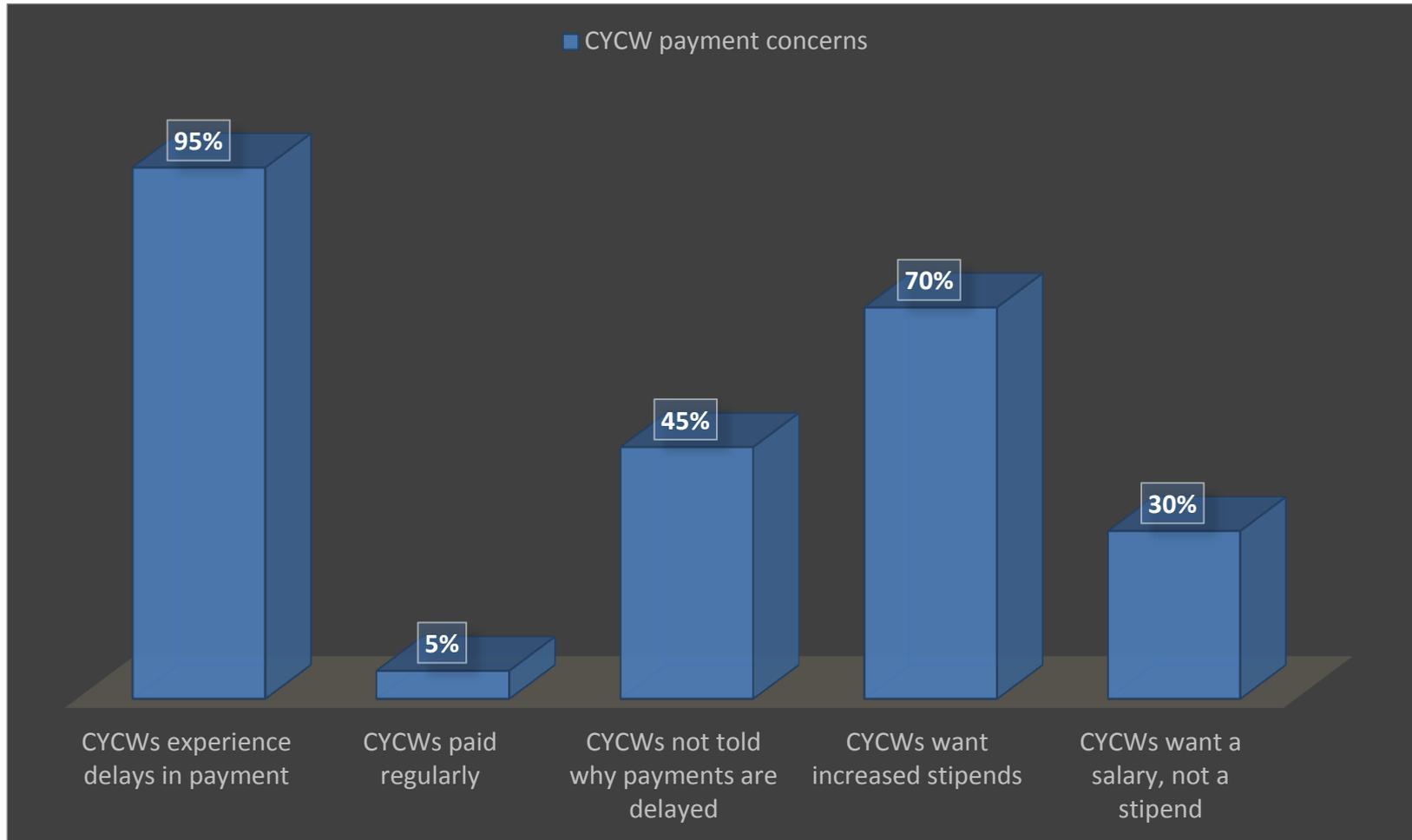
Services Received by Adolescents



Services most Required by Adolescents



Issues with CYCW Payments



Issues for CYCWs - Strengths

- Child and Youth Care work provides a career opportunity
- Feel that they are “professional” workers
- Training enhances skills and knowledge for child care
- Supervision and support through Mentorship gives them confidence
- Gives a focus to their lives
- Feel that they are “foot soldiers” in addressing community problems
- Are recognised, respected and valued in the community



Issues for Child Care Workers - Challenges

- Non-payment of stipends / salaries
- Delays in training programme
- Delays in receiving certificates
- Poor coordination by implementing partner
- Lack of psychosocial support / debriefing
- Concerns for personal safety in some areas
- Long distances to travel to households
- Attitudes of social workers

Number of Safe Parks

PROVINCE	FORMAL SAFE PARKS	INFORMAL SAFE PARKS	TOTAL SAFE PARKS
Eastern Cape	12	82	94
Free State	5	14	19
Gauteng	0	24	24
KwaZulu-Natal	55	123	178
Limpopo	20	23	43
Mpumalanga	6	29	35
North West	11	23	34
Northern Cape	4	22	26
Western Cape	1	12	13
TOTAL	114	352	466

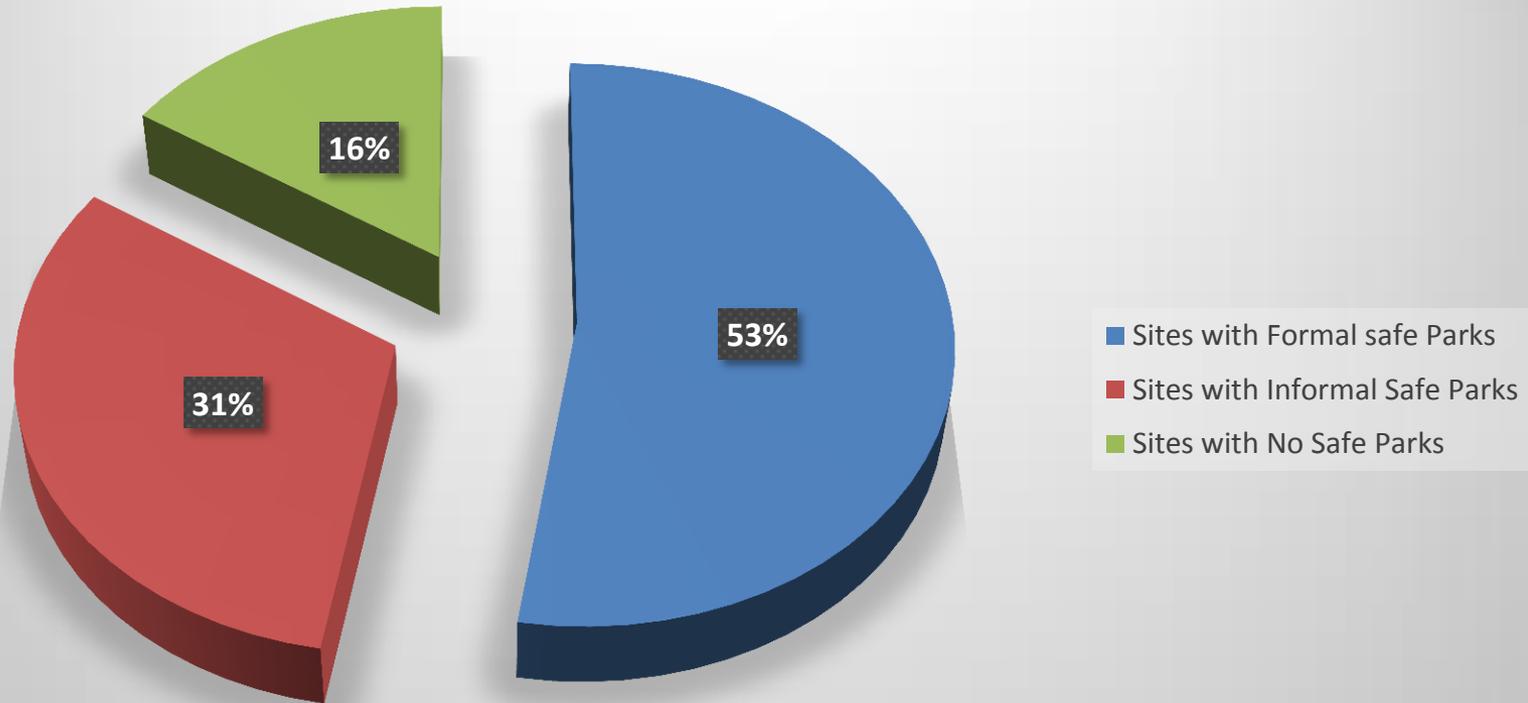


Number of Safe Parks and Children Visits Per Province

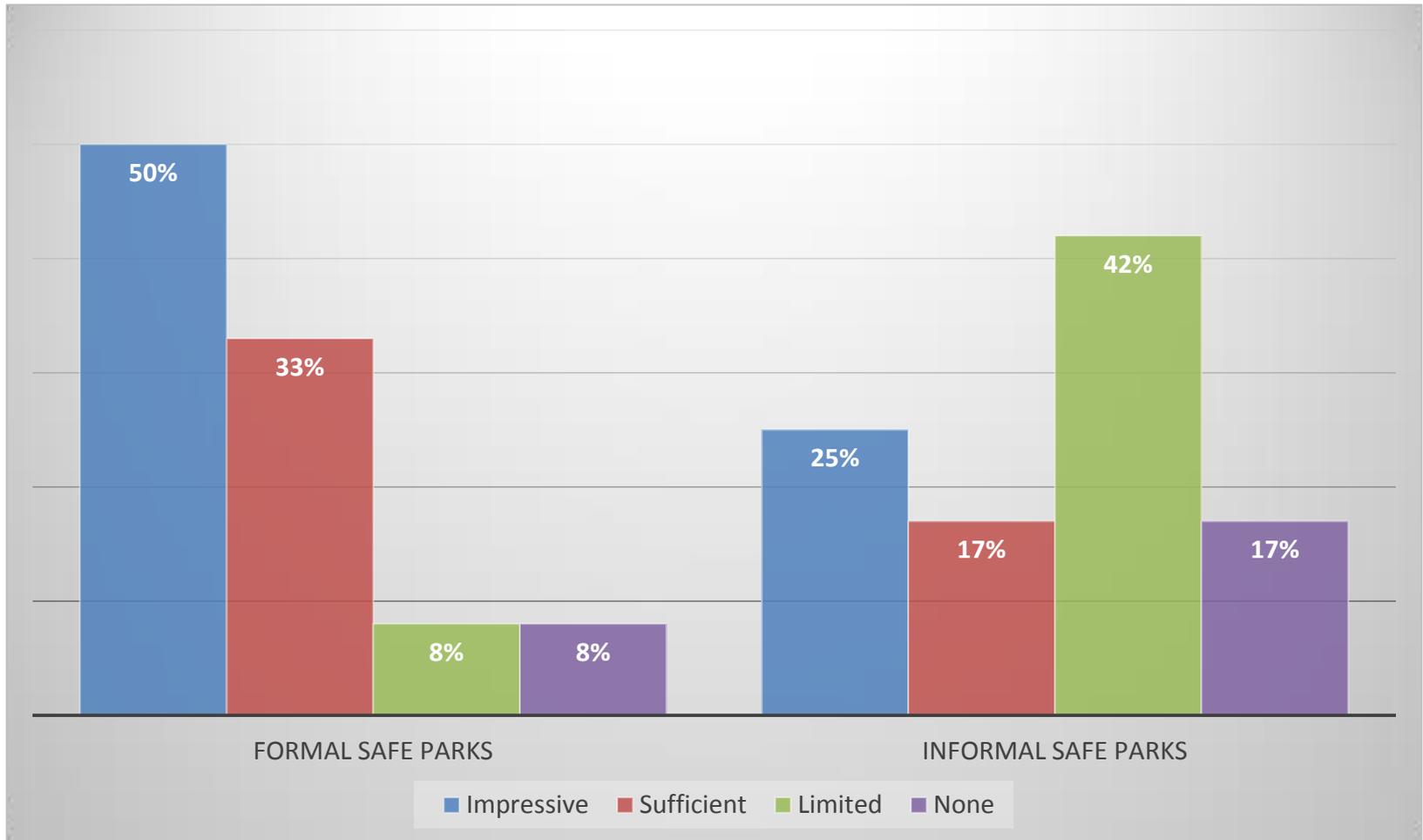
Province	Formal safe Parks	Informal Safe Parks	Total safe Parks	Total Children	Number of Visits	Average Visits per Year
Eastern Cape	13	70	83	8 989	248 554	28
Free State	6	18	24	3 107	54 673	18
Gauteng	9	26	35	9 494	850 708	90
KwaZulu-Natal	69	187	256	22 201	476 837	21
Limpopo	26	23	49	17 481	976 035	56
Mpumalanga	7	98	105	14 171	319 977	23
North West	11	23	34	-	-	-
Northern Cape	5	21	26	3 357	106 253	32
Western Cape	2	10	12	6 590	250 586	38
Total	148	476	624	85 390	3 283 623	38

National Spread of Safe Parks by Type

Safe Parks



Availability of Safe Park Equipment



Variety of Safe Parks



Critical Enablers for Programme Enhancement

Strong, aligned and efficient institutional arrangements that facilitate effective service delivery

Clearly defined stakeholder roles and responsibilities that reduce scope for unnecessary overlaps and duplication of services

Isibindi Critical Enablers

Regular, structured and transparent communication that keeps all relevant stakeholders informed and up to date, and reduces uncertainty

Openness to learning from implementation and the capacity to continually adapt and innovate for optimal programme impact

Isibindi - Performance Assessment

Criteria	Assessment Areas	Excellent	Good	Average	Poor
Relevance	Alignment of programme activities with the Isibindi Theory of Change				
	Extent to which Isibindi represents a strategic response to OVCY in South Africa				
	Degree to which Isibindi is characterised by strategic learning, reassessment and re-engineering				
Efficiency	Performance of Implementing Partners in delivering Isibindi programme				
	Overall management by the key programme stakeholders - NDSD/PDSD/NACCW				

Isibindi - Performance Assessment

Criteria	Assessment Areas	Excellent	Good	Average	Poor
Effectiveness	Quality of package of services provided by the CYCWs to children and youth				
	Quality of service delivery through performance of CYCWs				
	Quality of programme oversight through performance of mentors / mentor supervisors				
	Extent to which Isibindi has leveraged an integrated multi-sectoral response				
M&E	Capacity to collect, collate and analyse programme data against established targets, outcomes and outputs				
Impact	Evidence of change at household and community level				
Sustainability	Possibilities for programme replication / scale-up				



Recommendations



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Recommendation 1: Strategy Development and Resource Planning

It is strongly recommended that DSD, in collaboration with its key sector stakeholders, convene a multi stakeholder forum to review the conceptual underpinnings, strategic direction, and implementation modalities of Isibindi to ensure that the overall goal is met in a relevant, sustainable, and effective manner. A revised Isibindi strategy should address the following factors:

- The strategic plan must articulate clear objectives, measurable indicators and realistic and achievable targets and these must be agreed to by all relevant stakeholders. As far as possible this should be aligned with the National Development Plan and the DSD Strategic Plan 2015-2020 (in particular Programme 4: Create an enabling environment for the delivery of equitable developmental welfare services through the formulation of policies, norms and standards, best practices and support to implementing agencies).



Recommendation 1: Strategy Development and Resource Planning (continued)

- An implementation plan and aligned resource plan must ensure that the objectives can be met based on the principles of specificity, measurability and attainability within realistic timeframes.
- Together with this MTR the recently completed KPMG sustainability report should serve as a guide in this respect.



Recommendation 2: Enhance the Professional Status of CYCWs

During the MTR process it was noted that CYCWs see themselves as professionals and approach their work in accordance with that understanding. A challenge exists, however, with counterparts in the different child protection sectors who do not always acknowledge them as peers or professional counterparts. It is recommended that:

- The DSD and its key stakeholders should, through their work with the different cadres, continually reinforce the commonality of purpose and overlaps in their roles and functioning. Members of each cadre should be encouraged to transcend narrow disciplinary and professional divides and be fully acquainted with the roles, responsibilities, strengths and limitations of their role and functions, as well as areas that offer scope for professional working synergies, efficiencies, and cost-savings.



Recommendation 2: Enhance the Professional Status of CYCWs (continued)

- DSD as national and provincial level can utilise available forums to bring participating stakeholders together to discuss and better understand the Isibindi model as well as the roles and responsibilities of the CYCWs. In this regard the South African Council for Social Service Professions (SACSSP) should be a reference for the delineations of the disciplines and roles and responsibilities that are accorded to the various professional cadres.
- Participating stakeholders – including DSD provincial and district Isibindi coordinators, social workers and NACCW mentors – need to dialogue more regularly around their own roles and responsibilities in supporting the intervention and complimenting the services offered to the beneficiaries through Isibindi;
- A multi-stakeholder discussion and planning session should be held at national and provincial levels, in which all stakeholders can contribute so that a common understanding of the role that CYCWs play within the OVCY sector and the critical auxiliary strength that they bring. This could potentially culminate in a specific framework to guide their work.



Recommendation 3: Working Conditions and Job Satisfaction

The quality and effectiveness of the Isibindi programme is currently being compromised by the inconsistencies and uncertainties in ensuring that contracts with implementing partners are signed on time, and that CYCW stipends and related expenses are paid. As with any profession the working environment and terms and conditions of employment are critical factors in ensuring motivation, morale and job satisfaction. The MTR found that at many of the sites visited the challenge is that the morale of both the implementing partners and the CYCWs is being impacted by these delays and inconsistencies. It is recommended that:



Recommendation 3: Working Conditions and Job Satisfaction (continued)

- The DSD prioritise this issue as a matter of urgency and find ways to promote efficient financial management, contracting and disbursement processes to ensure that the OVCY work force can concentrate their energies and focus on achieving enhanced service delivery in communities and also securing the retention of CYCWs.
- The DSD should consider tasking Isibindi District Coordinators to support identified implementing partners to prepare their applications, business plans and other supporting documentation in line with DSD requirements to avoid unnecessary delays in the processing and finalisation of contracts.



Recommendation 4: Selection of Implementing Partners

Many of the implementing partners felt or acted as though the project was an add-on to their core business and as a result was not necessarily prioritised. In several instances, it was clear that the implementing partner did not clearly understand the nature and scope of what Isibindi is intended to achieve. It is highly recommended that:

- Existing criteria set out for the selection of implementing partners should be more rigorously applied by DSD.
- Following selection the implementing partner should be thoroughly oriented to the Isibindi model and encouraged to fully embrace and understand the Isibindi approach as part of their service package “brand”.
- The implementing partner must be financially sound and capable of managing finances responsibly.



Recommendation 4: Selection of Implementing Partners (continued)

- The implementing partner should also have a verifiable track record of working effectively in OVCY or home based care in the community, so that they already understand the concept of community workers and the processes involved in monitoring the work.
- A capacity assessment should be conducted with all existing implementing partners and where they do not meet the criteria, a rescue plan or reallocation plan needs to be developed.
- It is also vitally important that DSD and NACCW conduct an inception or orientation workshop with the management team of each implementing partner so that they fully commit to the terms and conditions of the SLA.
- A monitoring or performance management system is developed and established, based on a developmental approach, to constantly monitor and support selected implementing partners to ensure that the Isibindi programme is effectively advanced.



Recommendation 5: Capacity Strengthening for Implementing Partners

The MTR site visits demonstrated very clearly that the selected Isibindi implementing partners cover a spectrum of organisational and programme management capacity. If the DSD wants to achieve its objective of strengthening community based organisations through Isibindi then it must take into account key capacity development considerations. It is recommended that:

- When the DSD appoints an emerging NPO to deliver Isibindi it develops in discussion with the new partner a time-bound capacity development action plan based on a capacity needs assessment. The DSD and the implementing partner will then agree on a timeframe for the action plan and agree how the capacity development will be delivered.



Recommendation 5: Capacity Strengthening for Implementing Partners (continued)

- The DSD District Coordinator and/or the social worker responsible for that area then take responsibility for ensuring that the capacity development action plan is carried out as part of their key performance indicators (KPIs).
- NACCW mentors / mentor supervisors can potentially be part of this capacity development process.
- At the end of the agreed process the DSD should receive a report on the capacity development process for that organisation, which can then serve to inform decisions around contract extensions / renewals.



Recommendation 6: Financial and Governance Arrangements

If the DSD is to ultimately manage this project as a DSD programme, then a system must be developed to ensure that the programme is monitored and managed by the DSD. Based on these findings it is recommended that:

- The system must eventually allow for all the programmatic elements to be managed through the DSD – thereby providing one clear management, reporting and accountability process for the CYCWs. A collaborative process may be further envisioned, however, before this ideal of full national ownership is reached. This process requires a structured process before DSD can transmission into the management of the project, hence an operational and capacity plan should be considered.



Recommendation 6: Financial and Governance Arrangements (continued)

- Given the capacity challenges and unevenness within and across provincial DSDs the NACCW should continue to play a central training, monitoring, mentoring and other support services as it is currently contracted to do.
- The selection, contracting and funding processes must be managed in a more systematic, transparent, and structured manner, and it is imperative that the implementing partners receive their allocations in full and on time.



Recommendation 7: Streamline Current M&E Systems for Optimal Data Generation

This MTR relied heavily on data provided by NACCW through its M&E unit, and on data provided by NDSD through the Isibindi M&E Coordinator. The MTR found that the NACCW have put in place a sophisticated and very comprehensive system for data collection, data management and data analysis that covers all the components of the Isibindi intervention.

- There is a need to transition to a single data system for national child data with minimal disruption to the collection of regular and verified Isibindi data;
- The MTR has found the NACCW M&E system for Isibindi to be sophisticated yet relatively easy to implement, and that it produces a diverse range of critical programme data. The NDSD should, therefore, consider maintaining the status quo with regard to NACCW data collection while the CBIMS is being rolled out to all the provinces in order to avoid data losses and compromising what is in reality an effective data management system;
- In discussion between NACCW, NDSD and DSD North West and interim solution should be identified to address the challenge of Isibindi data gaps in the North West.



Recommendation 8: Visioning an Alternative Institutional Arrangement

The evidence points to a consensus that the current institutional arrangement is sub-optimal and may over time erode the gains that the Isibindi programme scale-up has made over the past three years. It is recommended that at this Isibindi scale-up mid-point the key partners come together in a forum – possibly in a retreat format – to undertake a strategic re-visioning exercise. Using the MTR Report and the KPMG Sustainability Report as a basis for dialogue, scenario-setting and re-visioning the partners look at possible options that could include the following:

- Retain the programme status quo based on the existing outcomes and outputs, and attempt to prioritise and address management and implementation challenges over the final two years;
- Appoint a non-governmental or private sector agent to manage implementation;
- Contract a private sector entity to act as paymaster for implementing partners and CYCWs;
- Set up a semi-autonomous Isibindi agency within DSD to manage implementation.



Recommendation 9: Implementation and Resource Plan

Resource issues were universally acknowledged as necessary for the project to achieve what it plans to achieve and for South Africa to give effect to some of its constitutional and legislative obligations in relation to children's rights. If the project is to be sustained and to positively impact on the lives of its beneficiaries, then a clear, well-resourced plan has to be put in place. In addition, it was clear from the majority of respondents that the CYCWs have been a huge support to people in the community and that without them, communities would be a lot worse off. To this end it is recommended that:

- The findings and recommendations of this MTR and the KPMG Sustainability Report are consolidated into a new Implementation and Resource Plan that will serve as a solid foundation for continuation of the current programme with options for further scale-up where available and projected resources allow.



Recommendation 9: Implementation and Resource Plan

- As this is a multi-sectoral, multi-stakeholder intervention the NDSD may want to consider tabling a proposal to its partner departments (Health, Education, Home Affairs, Presidency) to undertake a comprehensive gap analysis to identify the systemic blockages to effective implementation and to identify strategic joint actions that can be taken to address these blockages;
- The DSD should consider ways to sensitise, inform and capacitate partners at site level (implementing partners, CYCWs, NACCW mentors) to develop their own resource mobilisation strategies that could assist them in leveraging additional financial or in-kind support from local communities and businesses, and potentially from other donors.



Recommendation 10: Continual Capacity

Improvement for CYCWs

The MTR had a strong focus on the work undertaken by the CYCWs and what came out clearly was that the need that CYCWs had for ongoing professional development over and above the support provided through the mentorship programme. It is recommended that:

- The DSD and NACCW work with implementing partners to ensure that CYCWs can be upskilled through additional resource allocations to help expand Isibindi special programme training and implementation. The kinds of training recommended are drawn from the CYCWs themselves and would be in the following areas:
 - ECD interventions;
 - HIV/AIDS, prevention, contraception and broader SRHR issues;
 - Youth empowerment and career planning;
 - Child protection and statutory processes and procedures;
 - Substance abuse, prevention and mitigation, and rehabilitation; and
 - Promotion of sports, arts and culture.



Recommendation 10: Continual Capacity Improvement for CYCWs (continued)

- It may be best to standardize an in-service training and support programme in these areas in order to build on the initial training that the CYCWs are receiving. Accredited programmes should be considered for the purpose of continuous professional development (CPD) within the sector. The longer term benefits would be an increased capacity to address priority issues for children and young people and for beneficiaries transitioning to young adulthood. There is also a high demand for child protection interventions. It was evident that those CYCWs who were still in the NACCW training programme would benefit from additional knowledge and training support for handling and addressing some of these challenging issues. It is further recommended that:



Recommendation 10: Continual Capacity Improvement for CYCWs (continued)

- An expanded specialised training programme should be developed as an augmentation to the existing training and should be geared to providing CYCWs with the necessary skills to deliver an integrated package of services that are informed, professional and responsive to the needs of children, young people and their families.
- Such supplementary training programmes should only be considered if the required resources are available for a particular site to then move ahead and implement the special programme. Training in skills that are not used soon afterwards generally results in the skills being forgotten.
- Additional support in the form of specialised counselling services for CYCWs was frequently mentioned. The work of the CYCW can be traumatic and very difficult as they are in direct personal contact with families and children in distress. It is important that they receive adequate, professional debriefing and counselling services, which will also model the responses that they are expected to render to their clients.



Recommendation 11: Establish Fully Functioning and Holistic Safe Parks

The MTR has found that where the Safe Parks are “formal”, well-equipped and effectively utilised they serve as a unifying core of the Isibindi programme. Where the Safe Parks were properly secured and provided a “basket of activities”, they were greatly appreciated by the community, which otherwise would not have anything at all. It is recommended that:

- A clear, costed national “Safe Parks” plan is developed to enable the effective resourcing of Safe Parks and to establish formal Safe Parks at as many sites as possible.
- DSD should develop a short, concise “business case” for Safe Parks that can be shared with community leaders and decision makers and can serve as a motivation for identifying a suitable site for the Safe Park, ensuring security and providing basic infrastructure.



Recommendation 11: Establish Fully Functioning and Holistic Safe Parks

- Outlying Safe Parks can function as satellite Safe Parks with a reduced basket of services and facilities, but should also be a place from where children and young people could be transported to attend activities and events at a central Safe Park and a place where children in outlying areas can also learn and play securely.



Recommendation 12: Build and Sustain Multi-Stakeholder Forums

The issue of resourcing for Safe Parks was not always clear to the field work teams as different sites appeared to have different understandings of how funds – if any – were being allocated for Safe Parks. There were also very clear provincial differences. It was also clear that the energy, dynamism, and commitment of the implementing partner played a crucial role in the quality of the Safe Parks and the kinds of resources that they had. Safe Parks need to be properly resourced and fully-functional in order to provide a holistic, multi-purpose community environment for the beneficiaries. It is recommended that:

- Over and above any funding that comes through the DSD, the planning and resourcing of Safe Parks be done in local multi-stakeholder forums, where resources can be pooled and/or leveraged to adequately provide for the beneficiaries. This process will have to be driven and it is recommended that the DSD at provincial / district level either drives this process or supports an organisation to do so.



Recommendation 12: Build and Sustain Multi-Stakeholder Forums (continued)

- Given the size of the project efforts could be made to generate public-private partnerships, as well as joint initiatives with municipalities who play a significant role in the provision and development of local infrastructure.
- A combination of ECD, home based care, drop in centre, resource centre and community park or playground could be considered as the ideal models, although special focus on vulnerable children must at all times be maintained.
- Other possibilities to consider include a “convergence model” where the centre can also host other essential services on a rotational mobile basis: for example a mobile clinic and mobile SASSA and Home Affairs office. This would alleviate the transport issue and bring necessary services to where they are most needed.



Key Discussion Questions

Considering the recommendations, reflect on the following:

- Is there anything that you feel is missing? Why would you say this?
- Are there recommendations that you feel need to be changed / amended / adjusted? What are the reasons?



Thank You



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