



National Plan of Action for Orphans and Vulnerable Children

Establishing, reviewing and implementing National Plans of Action for Orphans and Vulnerable Children in Southern and East Africa: Lessons learnt and challenges

Multi-sectoral workshop on legal and policy frameworks protecting children

Pretoria, South Africa, April 20 – 21, 2010

Written by Isabel de Bruin Cardoso for Save the Children UK, Southern and East Africa Regional Office.



Save the Children

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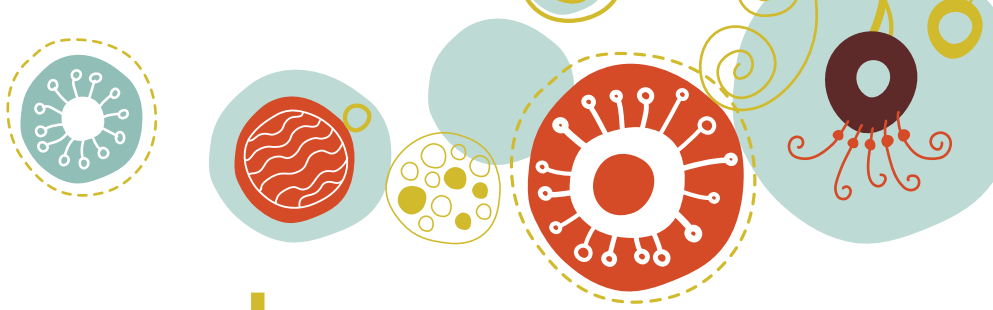
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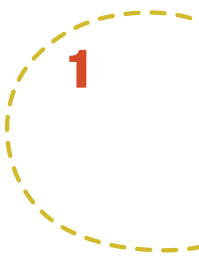
Disclaimer

The photos show children from different parts of Africa. The children do not have any connection with the specific contents of this report.



contents

Abbreviations	2
Executive Summary	3
Introduction	4
Methodology	6
The Consolidated Report.....	6
Save the Children UK's Regional Workshop on NPAs, 20-21 April, 2010, South Africa.....	6
Background on development of legal and policy frameworks	8
A Global Overview.....	8
A Regional Overview.....	9
Developing NPAs on OVC.....	9
Emerging trends in regulatory frameworks for vulnerable children.....	10
Analysis and discussion	13
Overview of National Plans of Action and other instruments protecting vulnerable children.....	13
Areas of commonality between Save the Children country offices in their support to NPA processes.....	17
Dissemination.....	17
Coordination, accountability and buy-in of stakeholders.....	19
Central coordination structures for OVC.....	19
Decentralised coordination structures for OVC.....	20
Absence of a specific coordination structure for OVC.....	21
Promising practices on district level coordination.....	21
Community capacity strengthening.....	21
Impacts of financial support on strengthening community structures and responses.....	23
Impacts of technical support on strengthening community structures and responses.....	23
Role of governments in strengthening community structures and responses.....	24
Child participation.....	24
Monitoring and evaluation, including sharing of practices	26
Key learnings and recommendations.....	26
Key findings.....	27
Dissemination.....	27
Coordination and accountability.....	27
Community capacity strengthening.....	28
Child participation.....	28
Monitoring and evaluation.....	29
Recommendations.....	29
Capacity Building/Strengthening of Community Systems.....	29
Coordination and accountability.....	30
Meaningful Participation of Key Stakeholders.....	30
Monitoring and Evaluation.....	31
Annex 1: Overview of Save the Children UK's Regional Advocacy for Children's Rights Programme.....	31





abbreviations

used in this report



ACC	Area Coordination Committees (Zimbabwe)
CCF	Child Care Forums (South Africa)
CPC	Child Protection Committee (Swaziland)
CSO	Civil Society Organisation
DFID	United Kingdom Department for International Development
DOSP	District OVC Strategic Plan (Uganda)
DSD	Department of Social Development (South Africa)
ESARO	Eastern and Southern Africa Regional Office
GPF	Global Partners Forum on Children Affected by HIV and AIDS
HSRC	Human Sciences Research Council
IATT	Inter-Agency Task Team on Children and AIDS
INAC	National Children's Institute
JI	Joint Initiative (Zimbabwe)
JLICA	Joint Learning Initiative on Children and AIDS
M&E	Monitoring and Evaluation
MoGLSD	Ministry of Gender, Labour and Social Development (Uganda)
MMAS	Ministry of Women and Social Affairs (Mozambique)
NCCU	National Children's Coordination Unit (Swaziland)
NCP	Neighbourhood Care Point
NPA	National Plan of Action
NSPPI	National Strategic Programme Plan of Action of Intervention (Uganda)
OPPEI	OVC Policy and Planning Effort Index
OVC	Orphans and Vulnerable Children
PEPFAR	US President's Emergency Plan for AIDS Relief
POS	Programme of Support (Zimbabwe)
PRSP	Poverty Reduction Strategy Plan
RAAAP	Rapid Assessment, Analysis and Action Planning Initiative
RIATT	Eastern and Southern Africa Regional Inter-Agency Task Team on Children and AIDS
SADC	Southern Africa Development Community
SCiMoz	Save the Children in Mozambique
SCiUG	Save the Children in Uganda
UNGASS	United Nations General Assembly Special Session for Children
UNAID	United Nations Joint Programme on HIV/AIDS
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WFP	World Food Programme

executive summary

Save the Children's Southern and East Africa Regional Programme has been working in partnership with seven country offices to implement activities contributing to the monitoring, implementation and review of National Plans of Action (NPAs) or key legislative instruments with a view to promoting harmonisation in key policy areas affecting vulnerable children across the region.

This report focuses on the experiences of Save the Children in monitoring, implementing and reviewing NPAs in Angola, Ethiopia, South Africa, Swaziland, Mozambique, Uganda and Zimbabwe. Each of the country offices commissioned the documentation of case studies to identify promising practices and challenges around effective implementation of NPAs.

This report consolidates these case studies and aims to draw lessons learnt from the various efforts undertaken by the country offices. The report analyses the differing processes that have been carried out in order to identify and develop a set of key messages and recommendations. Furthermore, this publication contextualises the development of NPAs on Orphans and Vulnerable Children (OVC) in the context of current thinking around social protection for all children in need. It also highlights the debate between stand-alone NPAs and mainstreaming children's issues into existing development strategies.

The report's findings and recommendations were presented to approximately forty regional and national stakeholders at Save the Children's two-day workshop on NPA implementation in April 2010 in South Africa. Together with the keynote presentations, these formed the main inputs for the workshop's discussion and were used as the basis to develop the workshop's recommendations.

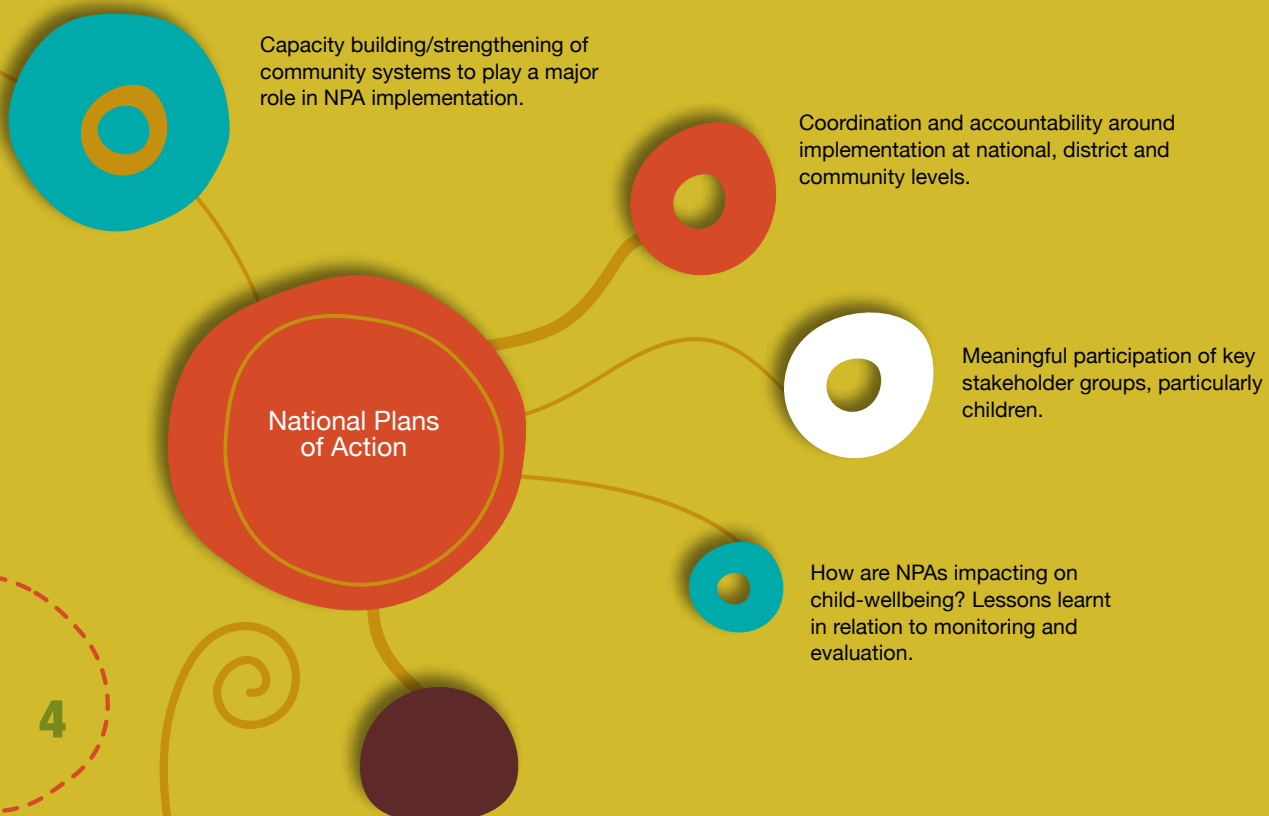
Despite the varying HIV epidemiological, infrastructure, political will and child welfare contexts of the seven case study countries, there are several areas that all identified, either as a promising practice or as a challenge, to implementing NPAs or other child-focused legal instruments. The report's key learning's and recommendations are directed at these four themes. These areas include:

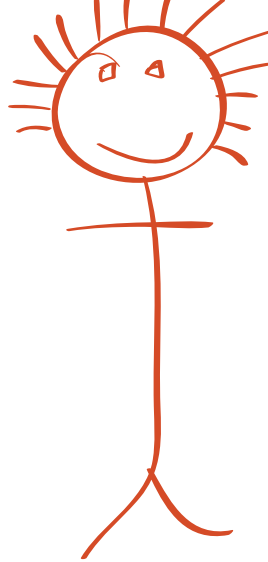
- User-friendly and timely dissemination of NPA across national, district and community levels.
- Coordination, buy-in and accountability of key stakeholders, including government, to implement the NPA, particularly at national level.
- Community capacity strengthening to ensure the effective mobilisation and use of both community structures and resources, including linkages with government facilities and services to operationalise the NPA.
- Children's meaningful and ongoing participation in supporting the implementation process.

Introduction

Southern and East Africa continues to be the epicentre of the HIV and AIDS epidemic, despite concerted efforts by a range of stakeholders to further prevent its spread and mitigate its impacts. Over the past decade, increasing global, regional and national attention has been paid to children; with the realisation they usually bear the brunt of the epidemic's impacts. Children are made even more vulnerable when confronted with poverty and livelihood insecurities in the context of HIV and AIDS. General Comment 3 of the Convention on the Rights of the Child recognises that "the epidemic impacts on the daily life of young children, and increases the victimisation and marginalisation of children, especially those living in particularly difficult circumstances."¹ At the same time, boys and girls often remain invisible due to uncoordinated and ill-defined approaches that are not measurable, which further weaken the capacity and the quality of the response to address children's needs. In addition, girls' and boys' voices are usually not heard and taken into consideration, hindering attempts to identify and effectively respond to the multiple and complex challenges that face them.

¹ General Comment 3, Committee on the Rights of the Child, 32nd Session, 2003.





To mobilise action and increase awareness on the plight of boys' and girls' in the context of HIV and AIDS, several countries around the world have mounted national level responses since the late 1990s. The majority of responses included developing national plans of action² for children affected by AIDS, or alternatively integrating responses for these boys and girls into sector plans for AIDS, health, education, social welfare and/or into national development instruments. National Plans of Action (NPA) can be defined "as a plan that is based on a situation assessment and multi-sectoral consultation, sets priorities and objectives, defines strategies, identifies corresponding coordinating bodies, includes a policy and legislative review and a monitoring and evaluation strategy and estimates costs and funding sources for priority actions."³

As a region, Southern and East Africa has made the most progress in planning and developing national responses for children affected by AIDS in light of the sub-region continuing to play host to the epicentre of the epidemic. This is largely made possible because the sub-region continues to receive a significant amount of donor assistance directed towards NPA development and implementation.

In general, however, responding to children affected by AIDS remains complex in this sub-region as well as in others, as it involves multi-sectoral collaboration and coordination, and the development of various systems to identify, support and monitor boys' and girls' wellbeing. The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World of AIDS (The Framework) was accordingly created in 2004 by the Global Partners Forum on Children Affected by HIV and AIDS (GPF)⁴. The Framework advocates for increased mobilisation of action by governments and other national stakeholders to support orphans and other vulnerable children (OVC). The Framework is heavily influenced by the Convention on the Rights of the Child, as well as the 2001 United Nations Special Session on HIV and AIDS and the 2002 United Nations General Assembly Special Session on Children.

As recognised by the Rapid Assessment, Analysis, and Action Planning Initiative (RAAAP), one approach to catalysing action and scaling up the national and multi-sectoral response to OVC is to develop country specific national action plans.⁵ Key aspects of these action plans include estimates of cost, specific sources of funding and priority interventions have been adopted by government and provide clear guidance to all ministries and departments. Largely as a result of the RAAAP, the majority of Southern and East African countries have legal frameworks that relate to the rights, protection, care and support of vulnerable children in the context of HIV. These frameworks are, amongst others, influenced by the UN Declaration of Commitment on HIV/AIDS (2001), which emphasises that vulnerable children must be prioritised in the response to the epidemic.

Under its Regional Advocacy for Children's Rights Programme, Save the Children United Kingdom has provided support and oversight to Angola, Ethiopia, Mozambique, South Africa, Swaziland, Uganda, and Zimbabwe in establishing, reviewing and implementing NPAs or other legal and policy instruments, on vulnerable children, including OVC. Save the Children, in partnership with a variety of national and local level stakeholders, continues to provide technical, financial and material support in some countries in the region to enhance the capacity of national and sub-national governments, as well as communities, to operationalise these instruments.

This report consolidates and analyses the processes that the seven Save the Children country offices undertook. The report further identifies the overarching key lessons learnt and challenges. These key messages were presented at Save the Children's Workshop on National Plans of Action from 21-22 April, 2010, in South Africa in order to facilitate the exchange and sharing of lessons with both regional and national level stakeholders, as well as to discuss the findings coming from the report. The Workshop's participants developed recommendations for both regional and national partners to consider when supporting in-country processes around stand-alone NPAs for OVC, or mainstreaming OVC issues into existing strategies.

² Also referred to as National Action Plan or Action Plan.

³ Gulaid, L. (2008).

⁴ The Global Partners Forum on Children Affected by HIV and AIDS (GPF), hosted by UNICEF and the UK Department for International Development (DFID and supported by UNAIDS, brings together senior representatives from 90 international and nongovernmental organisations and governments. The goal is to build up practical responses to the impact of the AIDS pandemic on children and young people. The GPF convenes approximately every 2 or 3 years. See http://www.unicef.org/aids/index_30958.html for more information on the GPF.

⁵ Webb, D. et al (2006). *Supporting and sustaining national responses to children orphaned and made vulnerable by HIV and AIDS: Experiences from the RAAAP Exercise in sub-Saharan Africa, Vulnerable Children and Youth Studies, August 2006; 1(2): 170-179.*

methodology

The Consolidated Report

The consolidated report is based on the experiences of seven Save the Children country offices (Angola, Ethiopia, Mozambique, Swaziland, South Africa, Uganda and Zimbabwe) in supporting and facilitating the establishment, implementation and review of National Plans of Action on Orphans and Vulnerable Children, or other legal and policy instruments protecting children.

These experiences were documented as case studies, which identified the lessons learnt and challenges that these offices encountered. Each case study was commissioned and managed by a country office, allowing any locally and contextually relevant aspects to be incorporated into the country report.

Any clarifications of the case studies were sought with the country offices, either via email or at the regional workshop (see next section).

The consolidated report includes a brief literature review to provide a concise historical overview and analysis of the development of NPAs on OVC. In addition, the current thinking about NPAs on OVC in the context of social protection is introduced, which relied on the recent and current literature, including programming evidence and recommendations stemming from both global and regional level debates.

Save the Children UK's Regional Workshop on NPAs, 20-21 April, 2010, South Africa

Save the Children convened a two-day workshop from April 20-21 2010 in Pretoria, South Africa, which brought together representatives of its country programmes, regional and national non-governmental organisations, government departments, the SADC Parliamentary Forum, donors, UNICEF and academic institutions.



Working group themes isolated from consolidated report findings

I

Capacity building/strengthening of community systems to play a major role in NPA implementation.

II

Coordination and accountability around implementation at national, district and community levels.

III

Meaningful participation of key stakeholder groups, particularly children.

IV

How are NPAs impacting on child-wellbeing? Lessons learnt in relation to monitoring and evaluation.

Forty representatives from eight countries met in order to:

- Review and discuss Save the Children's draft report of the case studies which documents efforts in the implementation of different aspects of National Plans of Action for Orphans and Vulnerable Children.
- Facilitate regional and cross-country sharing of lessons learnt around NPAs for OVC.
- Reflect on and discuss the current policy commitment to NPAs for OVC, and
- Outline key recommendations for the way forward.

The methodology of the workshop followed regional and country-level presentations, working groups and plenary discussions. The proceedings included a keynote address by Thomas Fenn, Regional Advisor for Children and AIDS, UNICEF ESARO, on the history of NPAs on OVC, progress in developing and implementing NPAs in Southern and East Africa, and contextualising NPAs in the current and emerging frameworks, including social protection. Isabel de Bruin Cardoso, consultant, then presented the consolidated report's key findings and tentative recommendations. Caroline Naude, consultant, presented on the processes undertaken to date around the development of the SADC Minimum Package of Services for Orphans and Vulnerable Children and Youth.

The findings and recommendations of the Situational Analysis were still in draft form and consequently not presented at the workshop. In addition to the key

note presentations, case studies from the Save the Children country offices were presented by country representatives and group discussions took place in working groups. These findings and recommendations formed the main inputs for discussion and were used as the basis to develop the workshop's recommendations. The themes for the working groups were influenced by the findings from the consolidated report and were as follows:

- **Theme One:** Capacity building/strengthening of community systems to play a major role in NPA implementation.
- **Theme Two:** Coordination and accountability around implementation at national, district and community levels.
- **Theme Three:** Meaningful participation of key stakeholder groups, particularly children.
- **Theme Four:** How are NPAs impacting on child-wellbeing? Lessons learnt in relation to monitoring and evaluation.

Guided by a set of questions influenced by the consolidated report, and through a facilitated process, each of the working groups produced a number of priority issues and recommendations applicable to either regional or national level actors, which participants were encouraged to consider taking forward at the relevant levels. They are presented as recommendations on page 29 which merge the report's and the participants' inputs.

background

on development of legal and policy frameworks protecting vulnerable children in Southern and East Africa

A Global Overview

States were first encouraged to develop national plans of action for children following the first World Summit for Children in 1990. The 'World Fit for Children', the outcome document of the 2002 UN General Assembly Special Session on Children. The document further called for states to commit to developing or strengthening specific, time-bound and measurable National Action Plans for Children by the end of 2003 to direct governments' focus towards children's health, education, protection, and the impact of HIV and AIDS. These are areas which are linked to the achievement of the child specific Millennium Development Goals. In addition, governments were called upon to mainstream the objectives of their country's NPA on children into other national legislation and policies.

In its General Comment 5, the Committee on the Rights of the Child further noted:

In order to promote and protect the rights of the child at all levels, States parties need to develop a comprehensive national strategy for children based on the Convention on the Rights of the Child. The strategy must set realistic and achievable targets and must include adequate allocation of human, financial and organisation resources...The Committee comments the development of a comprehensive national strategy or national plan of action for children, built on the framework of the Convention.⁶

In 2001, world leaders agreed on the first set of global commitments for children affected by AIDS at the United Nations General Assembly Special Session (UNGASS) on HIV and AIDS. Articles 65-67 of the Declaration of Commitment on HIV/AIDS identified children as a particularly vulnerable group and highlighted the need for policies and programming around HIV and AIDS to be child-sensitive. Specifically, leaders committed themselves to develop by 2003, and implement by 2005, "national policies and strategies to build and strengthen

government, family and community capacity to provide a supportive environment" for affected children.

Global commitment to combating the impact of AIDS on children was further delineated in 'A World Fit for Children'.

At the UNGASS Review in June 2006, world leaders resolved to be more particular and precise about their commitments to children, as captured in Article 32 of the Political Declaration on HIV/AIDS. They pledged to "address as a priority the vulnerabilities faced by children affected by and living with HIV, to provide support and rehabilitation to these children and their families, women and the elderly, particularly in their role as caregivers, to promoting child-oriented HIV/AIDS policies and programmes, and increased protection for children orphaned and affected by HIV/AIDS, to ensure access to treatment and intensify efforts to develop new treatments for children, and to build, where needed, and to support the social security systems that protect them."

The first global child and HIV and AIDS specific policy is The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV and AIDS. This framework provides guidelines and guiding principles for OVC programming. Developed in 2004, it builds on the programming principles provided by the Children on the Brink series⁷ and the analysis of the findings from the RAAAP Initiative⁸. The Framework was endorsed by UNICEF, UNAIDS and a broad range of representatives from donor and government agencies, faith-based and non-governmental organisations, academic institutions, the private sector and civil society at the 2004 GPF.

The four core strategies set forth in The Framework sets forth an agreed-upon common agenda to influence policies, programmes and resources directed to orphan and other vulnerable children, including the need "to ensure that governments protect the most vulnerable children through improved policy and legislation."⁹

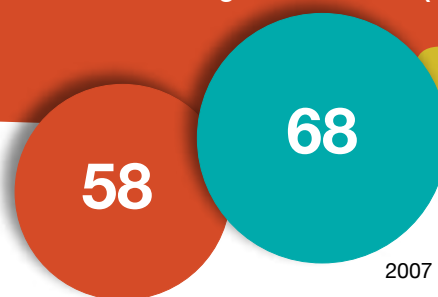
⁶ Committee on the Rights of the Child, 2003. General Comment Number 5. (UNICEF, 2002 and 2004)

⁷ See 'A Regional Overview' on page 9 for more information on the RAAAP.

⁸ See 'A Regional Overview' on page 9 for more information on the RAAAP.

⁹ A Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV and AIDS, UNICEF, 2004.

Countries participating in OVC Policy and Planning Effort Index (OPPEI) having made progress in establishing NPAs on OVC (%)



A Regional Overview

Developing NPAs on OVC

In Southern and East Africa, efforts were already underway dating back to 2000 to create frameworks for action to address the impacts of the epidemic on children. Fifteen Southern and East African countries convened in Lusaka, Zambia, to initiate discussions around the impacts of HIV and AIDS on children for both national and regional levels. Participants subsequently developed country specific action plans with the intention of creating national frameworks and strategies for action. Two years later in Windhoek, Namibia, a second Southern and East Africa high-level regional workshop was held to identify focus areas and to consequently develop strategies and activities for their implementation in order to accelerate action towards achieving the 2001 UNGASS goals.

In response to the general awareness by both policy makers and implementers of the increasing number of children impacted by HIV and AIDS, 17 countries in sub-Saharan Africa, including 10 SADC Member States, participated in country specific rapid assessments of children's conditions and wellbeing.¹⁰ The Rapid Assessment, Analysis and Action Planning (RAAAP) was undertaken between 2003 and 2007, with the assistance of USAID, UNICEF, UNAIDS, WFP the POLICY Project and in partnership with national OVC steering committees. RAAAP was as an emergency response to develop legislative frameworks in order to scale-up the national and multi-sectoral response to OVC. It was a large-scale effort to identify and analyse the range of services being provided to children orphaned by AIDS in the region.

Through the RAAAP process, the 17 high HIV prevalence countries were encouraged to develop or strengthen National Action Plans for OVC, reflecting provisions from

the Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child and the African Youth Charter. The process of developing the NPAs aimed to pledge political will and resources to address the challenges facing the rapidly escalating numbers of orphans, and other boys and girls made vulnerable by the epidemic. NPA advocates considered the RAAAP process critical to promoting and supporting children's rights as the NPAs were expected to clarify and coordinate the roles and responsibilities of duty bearers, in addition to developing key strategies and benchmarks for measuring and meeting targets.

Almost simultaneously with the RAAAP Initiative, the OVC Policy and Planning Effort Index (OPPEI)¹¹ took place. The OPPEI was developed by UNICEF, USAID and the Futures Group¹² to monitor the implementation of national responses for OVC. The OPPEI was conducted in 2004 and again in 2007. Comprised of eight indicators, it is a self-assessment tool for governments, NGOs and other stakeholders to measure and evaluate the national effort to respond to the needs of OVC. One of these indicators¹³ is the availability of a multi-sector nationally agreed upon action plan for OVC developed by a broad group of stakeholders, which includes estimates of cost, specifies sources of funding, prioritises interventions, has been adopted by government and provides clear guidance to all ministries and departments involved, as well as to non-government stakeholders. An indicator on NPAs for OVC was included with the understanding that national action plans are prerequisites for successful interventions focusing on OVC.

Thirty-five sub-Saharan African countries participated in the OPPEI in 2007. They reflected a 68%¹⁴ effort to have NPAs on OVC in place, which was the indicator with the second highest score. In 2004, they scored 58%, reflecting a steady improvement of countries to respond to the situation of OVC in their countries by developing

¹⁰ Countries that were targeted in the RAAAP included Botswana, Central African Republic, Côte d'Ivoire, Ethiopia, Kenya, Lesotho, Malawi, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe. Angola was not included in the RAAAP arguably because of its low HIV prevalence rate compared to the countries that were included in the RAAAP.

¹¹ UNICEF (2008). Progress in the National Response to Orphans and other Vulnerable Children in sub-Saharan Africa: The OVC Policy and Planning Effort Index (OPPEI) 2007 Round.

¹² An international development firm known for its evidence-based, integrated approach to improving the health and well-being of people worldwide.

¹³ The 7 other indicators include national situation analysis of OVC, consultative processes, coordinating mechanism, policy, legislative review, monitoring and evaluation, and resources.

¹⁴ The possible scores for each indicator are between 0 and 100, with a minimum of 0 indicating no effort and a maximum of 100 reflecting the best possible effort.



national plans of action.¹⁵ Of the OPPEI participating countries in sub-Saharan Africa, those in Southern Africa scored the highest on the national action plan indicator, with East Africa following closely behind.

Between 2004 and 2007, 29 out of the 35 sub-Saharan countries (82%) developed NPAs that focused either exclusively on orphaned children or included orphaned and other vulnerable children as well. In addition, 92% of the 35 countries had integrated OVC into national AIDS plans and 62% had incorporated OVC issues into National Development Plans (NDPs) or Poverty Reduction Strategy Papers (PRSPs). Figure 1 reflects the progress and challenges made in developing effective and strategic NPAs.

Figure 1: Progress in NPA development for OVC - 35 countries in sub-Saharan Africa, 2007 (%)

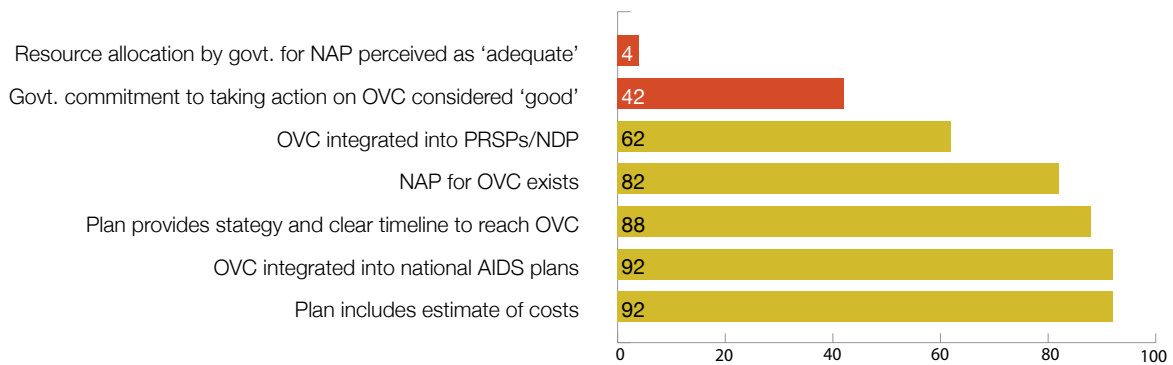


Figure 1 shows that 92% of countries did include an estimated budget for their NPA, yet only 4% of them had adequately allocated resources. Furthermore, while awareness on, and political will to, address the needs of OVC seemed apparent through the integration of OVC into National AIDS Plans (92%) and Poverty Reduction Strategy Plans (PRSPs) or National Development Plans (NDPs) (62%), government buy-in to take action on OVC remained low (42%). Much still needed to be done to ensure that NPAs receive the necessary political commitment, as well as to warrant that adequate resources are mobilised and allocated to meet the plan's costs.

Emerging trends in regulatory frameworks for vulnerable children

Several RAAAP country reports recommended the need for countries to develop specific legislation for OVC, particularly since OVC issues were not frequently integrated into national poverty alleviation plans, national HIV and AIDS strategic plans and policies, or human rights frameworks. For example, a Rapid Appraisal was undertaken in South Africa to identify key priorities for children affected by HIV and stated:

*The lack of a policy framework within which to understand the whole subject of children and HIV/AIDS in South Africa was identified as a barrier to effective, coordinated action... The National Strategic Framework should be finalised as a matter of urgency... It should then be disseminated and actively promoted as the framework within which all sectors of society should develop their priorities.*¹⁶

¹⁵ In 2007, national situation analysis had the highest score (75%) and legislative review and resources had the combined lowest score (48%). In 2004, consultative processes had the highest score (63%) and legislative review and monitoring and evaluation had the combined lowest score (33%). Even though legislative review scored the lowest number of points in both years, significant progress was made between 2004 and 2007 to strengthen national attempts around reviewing legislation.

¹⁶ Smart, R., (2003). *Children Affected by HIV/AIDS in South Africa: A Rapid Appraisal of Priorities, Policies and Practices*. Commissioned by Save the Children UK South Africa in collaboration with the Department of Social Development.



However, while the RAAAP Initiative was effective in identifying and addressing the shortcomings in OVC programming, the OPPEI reflected that while the number of NPAs increased as a result, a closer look revealed that the most important aspects of NPAs were not in place. It argued that it was not necessarily viable or strategic for all RAAAP participating countries to develop a stand-alone NPA for OVC.¹⁷

Instead, the Inter-Agency Task Team on Children and AIDS¹⁸ Working Group on National Plans of Action (IATT WG on NPAs)¹⁹ recommended that “rather than encouraging all countries to develop stand alone NPAs, national governments and their partners should be supported to:

- assess their country’s context in terms of HIV epidemiology, political will, infrastructure and children’s welfare,
- identify practical policies and strategies for mitigating the impact of AIDS on children, and
- either develop and implement a stand alone NPA for a locally defined target group or integrate key strategies for children affected by AIDS into existing sector plans (e.g., health, education, social welfare, HIV and AIDS) and national development instruments.”

At the Save the Children UK Workshop on NPAs on OVC in April 2010, Thomas Fenn further highlighted the debate between developing stand-alone plans that maintained a vertical programme response versus the mainstreaming of vulnerable children’s issues into development instruments that provide for an integrated, multi-sectoral response.

Guidance for those countries that opt to pursue a stand-alone NPA could draw on the lessons learnt from the IATT WG on NPAs:

- The definition of the target population include locally defined vulnerability factors,

- The locus for NPA coordination is seated above the level of line ministries and has the requisite authority,
- The NPA budget is aligned with the government budget cycle,
- National budget authorities (e.g. Ministry of Finance) are consulted and have commitment to the NPA,
- Capacity assessment and plans to address capacity gaps (especially within Ministries of Social Welfare) are included and budgeted for within the NPA development process, and
- The NPA promotes a family-centred approach to HIV and AIDS to ensure prevention, treatment, care and mitigation are well-linked.”²⁰

Of particular interest is the IATT WG on NPAs recommendation to consider all factors exposing children to vulnerabilities, and not to focus solely on HIV and AIDS. While orphanhood has been used as an indicator to mark the severity of the epidemic on countries, there is increasing evidence confirming that orphanhood alone is not a consistent predictor of vulnerability.²¹ Other child and household criteria, including poverty and food insecurity, are increasingly considered to be more reliable in identifying boys’ and girls’ needs compared to solely focusing on socio-demographic indicators.²² This has significant implications on developing appropriate national responses for all vulnerable children that are affected by the convergence of AIDS, poverty and food insecurity, as governments are responsible for providing protection, support and services to all children based on need.

The global and regional thinking around vulnerable children had already started to shift from solely targeting orphaned children and other children affected by AIDS as the neediest children, and instead began to focus efforts on better protecting children made vulnerable due to all causes, including poverty, conflict and natural disasters.

17 Gulaid, L. (2008). *National Responses for Children Affected by AIDS: Review of Progress and Lessons Learned*. IATT Working Group on National Plans of Action.

18 Developed in 2004, the Inter Agency Task Team on Children and AIDS, led by UNICEF, is a multi-sectoral global partnership charged with setting goals and targets for the expanded response for the protection of children affected by HIV and AIDS, identifying key strategies for scale up, agreeing on principles to guide programming, and setting expectations for inter-agency partners. The IATT is responsible for facilitating the implementation of the GPF recommendations.

19 The IATT Working Group on NPAs was developed to address the 2006 GPF recommendation ‘integrate a multi-sectoral response for children affected by HIV and AIDS into developmental instruments, including Poverty Reduction Strategies’. The WG was comprised of representatives from various UNICEF regional offices, UNAIDS, UNDRP, Better Care Network, World Vision, Family Health International, and Constella Futures Group and functioned from 2006 to 2008. These organisations have substantial experience in providing technical support in strengthening national legislations and policies pertaining to children and / or development, allowing them to advocate for contextually relevant frameworks, which can include either stand-alone NPAs or mainstreaming into existing development strategies. See http://www.unicef.org/aids/index_41740.html for the WG’s terms of reference.

20 *Ibid.*, p. 1

21 JLICA (2009). *Home Truths: Facing the Facts on Children, AIDS and Poverty*, p. 11.

22 Gulaid, L. (2008); JLICA (2009) *Home Truths*.



Governments and programmers started to shift their attention towards building capacity of and strengthening national social welfare systems and community structures, in support of the broader concept of social protection,²³ rather than narrowly focusing on legal frameworks. Strong evidence has indicated that social protection has the capacity to alleviate poverty, foster social and economic development, and reduce inequality amongst children, families and communities.²⁴

Several countries in Southern and East Africa are developing national social protection policies in line with the March 2006 Livingstone Call for Action on Social Protection and the 2008 African Union Social Protection Framework. Both affirmed social protection as a means to reduce poverty and promote growth, with the latter specifically acknowledging the need to develop a minimum package of essential social protection services.

Donors too have attempted to move away from funding AIDS exclusivity to AIDS sensitive programming, including coordinating funds for social protection. For example, in 1998-99, UNICEF, UNAIDS and the USAID and other donors supported several governments in the sub-region to conduct situational analyses, hold national consultations and plan for a national response to the escalating impacts of HIV and AIDS impact on boys and girls.²⁵ More recently, however, DFID and the Australian Agency for International Development, in coordination with UNICEF, are supporting 9 countries through the Children and AIDS Regional Initiative to strengthen laws and policies, and service delivery for all vulnerable children.²⁶

The Southern and East Africa Regional IATT Children's Conference, held in Dar es Salaam, Tanzania in 2008, confirmed the value and importance of social protection as a critical lever to improve children's and families outcomes, and not only in the context of HIV and AIDS. One of the recommendations was to "integrate social protection policies and plans into national development policies and plans, and strengthen national social welfare systems, with a focus on care and protection of vulnerable children including at the community level." At the same time, the RIATT Conference also recognized the significance of NPAs on OVC, particularly when they are properly aligned at all levels of government.

Even though the global, regional and, more increasingly national, debate currently focuses on designing and implementing child-sensitive social protection initiatives, the benefits offered by NPAs for OVC should not be deemed redundant. While arguments for mainstreaming OVC issues into National AIDS Plans or PRSPs are valid, NPAs on OVC remain critical to promoting and supporting children's rights and ensuring that children remain foremost in national level planning. Well-designed NPAs recognise the unique vulnerability of particular groups of children, including those affected by HIV/AIDS, conflict and poverty. They also clarify the roles and responsibilities of duty bearers, including how they should be coordinated, and set key benchmarks and strategies for measuring and meeting targets.

23 Social protection has been conceptually defined as "all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks, and enhance the social status and rights of the marginalised; with the overall objective of reducing the economic and social vulnerability of the poor, vulnerable and marginalized groups." Devereux, S. & Sabates-Wheeler, R. (2004) *Transformative social protection*. Institute of Development Studies Working Paper 232, October, page 9.

24 See for example, JLICA (2009), *Home Truths: Facing the Facts on Children, AIDS and Poverty*; Save the Children UK (2009), *Lasting Benefits: the Role of Cash Transfers in Tackling Child Mortality*.

25 Gulaid, L. (2008), *National Responses for Children Affected by AIDS: Review of Progress and Lessons Learned*. Inter-Agency task Team on Children and HIV and AIDS Working Group on National Plans of Action.

26 In the context of AIDS, child sensitive social protection includes support services, social transfers and social policies and legislations. For more information see DFID, HelpAge International, Hope & Homes for Children, Institute of Development Studies, International Labour Organization, ODI, Save the Children UK, UNDP, UNICEF and World Bank (2009), *Advancing Child-Sensitive Social Protection: The Joint Statement on Child Sensitive Social Protection*.

analysis

Analysis and discussion of seven Save the Children country office experiences in supporting processes around NPAs on OVC and other legal and policy instruments for vulnerable children.

Table 1 provides an overview of the seven case study countries and at what stage they are in terms of designing, implementing or reviewing their NPAs on OVC.

Table 1: Overview of National Plans of Action and other instruments protecting vulnerable children.

	Existence of National Plan of Action on Vulnerable Children	Time-frame	Current status	Implementing body	Other legal or policy instruments relating directly to OVC or all vulnerable children ²⁷
Angola	No National Plan of Action on Vulnerable Children	N/A		N/A	Eleven Commitments. Policy that focuses on all children's rights and welfare.
Ethiopia	No National Plan of Action on Vulnerable Children	N/A	NPA 2004-2006 has expired. A review in 2008 identified the existing legal and policy frameworks for OVC, its strengths and gaps, and stressed the need to draft an updated NPA. Key findings were presented to the National OVC Taskforce in 2009 and disseminated to over 50 stakeholders, including the Ministry of Women's Affairs. A follow up discussion was broadcast for Ethiopian TV.	N/A	<ul style="list-style-type: none"> Standard Service Delivery Guidelines for OVC Care and Support Programme (2010). NPA on Children, 2003-2010. <p>Comprises four major themes (1) health (2) education (3) protection (4) HIV and AIDS.</p> <ul style="list-style-type: none"> NPA on Sexual Abuse and Exploitation of Children (2006-2010). National Youth Policy (2004). <p>Focuses on good governance, democracy, education, capacity building and HIV and AIDS for 15 – 29 year olds.</p>
Mozambique	<p>Yes-</p> <p>Vulnerable children are defined as including children affected or infected by HIV and AIDS, children in households headed by children, youth, women or elderly persons, street children, children in institutions, children with disabilities, internally displaced or refugee children, etc.</p> <p>Two areas of action defined: strengthening of national capacities and direct support to the most vulnerable children. Four key strategic areas:</p> <ul style="list-style-type: none"> creating a protective environment to reduce the impact of HIV and AIDS on orphaned and vulnerable children building institutional capacity in the government to respond to the crisis of orphaned and vulnerable children strengthening the capacity of families and communities to find local solutions for the protection and care of orphans and other children made vulnerable by HIV AND AIDS establishing and strengthening systems to gather, monitor and evaluate data 	2006 - 2010	Currently being evaluated and discussions around development of the next NPA have been initiated. The process is still with government.	Ministry of Women and Social Action (MMAS). The OVC Technical Working Group provides technical advice at national and provincial levels, and in some districts.	<ul style="list-style-type: none"> National OVC Policy. National Policy on Social Affairs (1998). <p>Focuses on children in difficult situations and notes their need of special attention to basic services.</p>

²⁷ For a comprehensive and in-depth overview of the stand-alone and mainstreamed legal and policy frameworks protecting children see *National Legislations and Policies for OVC in the SADC Region. Save the Children Southern and East Africa Regional Programme, forthcoming.*

Timeframes of National Plans of Action on Orphans and vulnerable children

Angola
No NPA



Ethiopia
NPA 2004
(Expired 2006)



Mozambique
NPA 2006-2010



Zimbabwe
NPA 2004-2010



Uganda
NPA 2004-2010



Swaziland
NPA 2006-2010



	Existence of National Plan of Action on Vulnerable Children	Time-frame	Current status	Implementing body	Other legal or policy instruments relating directly to OVC or all vulnerable children ²⁷
South Africa	<p>Yes- National Action Plan for Orphans and Other Children Made Vulnerable by HIV and AIDS.</p> <p>The Strategic Goals of the NPA 2009-2012 are:</p> <p>Strategy 1: Strengthen and support the capacity of families to protect and care for OVC</p> <p>Strategy 2: Mobilise and strengthen community-based responses for the care, support and protection of OVC</p> <p>Strategy 3: Ensure that legislation, policy, strategies and programmes are in place to protect the most vulnerable children</p> <p>Strategy 4: Ensure access of OVC to essential services</p> <p>Strategy 5: Raise awareness and advocate for the creation of a supportive environment for OVC</p> <p>Strategy 6: Strengthen mechanisms to drive and support the implementation of the NAP</p>	2009 - 2012	This is South Africa's second NAP, and builds on the experiences and lessons learned from the 2006-2008 Plan. The second NAP has a greater focus on coordination and additional focus on monitoring.	<p>Provincial level: Department of Cooperative Governance and Traditional Affairs</p> <p>National level: Department of Social Development</p>	<ul style="list-style-type: none"> Children's Act (2005) and Children's Amendment Bill (2007). Focuses on care and protection of children, defines parental responsibilities and the need to strengthen community structures. Child Justice Act 75 (2008) Gives effect to child protection measures stipulated under the South African Constitution (2006) and focuses on children accused of committing a crime. National Policy Framework for OVC, 2005. Focuses on protection and provision of comprehensive and integrated developmental services across all levels. South African Schools Act 2005. Stipulates compulsory education for 10 years. Guidelines on Antiretroviral therapy in children (2005). Recommended initial and ongoing management of HIV infected child by an experienced practitioner. National Integrated Plan for Children Infected and Affected by HIV and AIDS (2002) Coordinates efforts of government to focus on life skills education, home and community based care and support, voluntary counselling and testing, and poverty relief. National Guidelines for Social Services to Children Infected and Affected by HIV and AIDS (2002). Defines categories of vulnerable children, outlines framework for action, models of care, and functions of various players, specifies assessment, reporting and monitoring tools and mechanisms.
Swaziland	<p>Yes – National Plan of Action for OVC</p> <p>Addresses health and education needs of OVC and co-ordinates efforts of NGOs and government agencies. The overall goals of the OVC National Plan of Action can be summarised as follows:</p> <p>Goal 1: Children are ensured access to shelter and protection from abuse, violence, exploitation, discrimination, trafficking and loss of inheritance</p> <p>Goal 2: Vulnerable individuals and households are able to produce or acquire sufficient appropriate food to meet short and long term nutritional needs</p> <p>Goal 3: Improved access to basic health care services for the most vulnerable children</p> <p>Goal 4: Universal primary education achieved, and support provided to OVC in secondary schools</p>	2006 - 2010	A mid term review was carried out in 2009, laying the foundation for the NPAs second phase from 2011-2015, which has already been finalized. The major difference is that the 2nd NPA moves away from OVC and focuses on all children, and is now aligned to the draft Child Policy's thematic themes.	National Children's Coordination Unit (NCUU) in the Prime Minister's Office.	<ul style="list-style-type: none"> National Policy on Children including Vulnerable Children Focuses on protection, access to basic services, strengthening capacity of families and communities, and to create child-focused M&E mechanism



	Existence of National Plan of Action on Vulnerable Children	Time-frame	Current status	Implementing body	Other legal or policy instruments relating directly to OVC or all vulnerable children ²⁷
Uganda	<p>Yes – the Strategic Programme Plan of Interventions (NSPPI) for OVC Goal:</p> <ul style="list-style-type: none"> To increase the scale of effective programme interventions that reach vulnerable children, either directly or through the households in which they live, by 2010. <p>The Strategic Programme Plan Objectives (SPPOs) are:</p> <ul style="list-style-type: none"> To create an environment conducive for the survival, growth, development and participation of vulnerable children and households. To deliver integrated and equitably distributed essential services to vulnerable children and households that are of sufficient quality To strengthen the legal, policy, and institutional frameworks for programmes that seek to protect orphans and other vulnerable children and households at all levels To enhance the capacity of households, communities, other implementing agents and agencies to deliver integrated, equitable and quality services for vulnerable children and households. 	2004 - 2010	There are plans by the Government of Uganda and partners to revise the current NSPPI in order to develop an updated 2nd programme plan.	Ministry of Gender, Labour and Social Development (MGLSD) with support from the National Council for Children (NCC)	<ul style="list-style-type: none"> Children's Act 2003. National Policy for Most Vulnerable Children National Plan on Child Sexual Abuse and Exploitation (under development).
Zimbabwe	<p>Yes - National Action Plan for OVC</p> <p>It describes a holistic and comprehensive set of interventions which include birth registration, education, health care, food, water and sanitation, child protection, psycho-social support, strengthening co-ordination structures for OVC programming, and increasing children's participation.</p>	Cabinet endorsed NAP in 2004. Programme of Support to implement NAP is from 2006 - 2010	First funding round to implement the NAP will end in December 2010. A review of the current NAP is ongoing.	Programme of Support to implement the NPA jointly managed by donors (through basket funding to UNICEF) and the National Secretariat for the NAP, housed in the Ministry of Public Service, Labour and Social Welfare.	<ul style="list-style-type: none"> National Orphan Care Policy (1999) <p>Ensures access to package of basic care and protection measures for all children, with special reference to orphans.</p> <ul style="list-style-type: none"> Zimbabwe National Strategy on Children in Difficult Circumstances (2001) <p>Focuses on strengthening communities' and local authorities' capacity to respond to children made vulnerable by HIV and AIDS and socio-economic factors. Expanded on in NPA.</p>



Out of the seven countries, two (Angola and Ethiopia) do not have an NPA on OVC. While Ethiopia has had an NPA on OVC in the past, an updated one has not been developed since its expiration in 2006²⁸ SC UK commissioned a review of the legal and policy frameworks protecting orphans and vulnerable children in Ethiopia in 2008, which recommended the urgent need for Ethiopia to develop an updated NPA. This recommendation was broadly disseminated, including on Ethiopian TV, and a situational analysis will soon be undertaken to inform whether there is indeed a need to develop an updated NPA on OVC.

Out of the five countries that do have an NPA on OVC, four NPAs, namely from Mozambique, Swaziland, Uganda and Zimbabwe, will expire at the end of 2010. This report and the workshop thus provide a significant and strategic opportunity to consolidate the lessons learnt and to formulate recommendations or guidelines for these countries to take forward and consider during in-country processes around reviewing and updating their NPA.

The Save the Children UK Workshop on NPAs on OVC is particularly timely as these four countries have initiated processes and discussions around the development of their second NPAs. Swaziland has already finalised its new NPA on OVC for 2011-2015. Mozambique and Uganda have recently finalised situational analyses that will heavily influence discussions firstly around the need to have a second NPA on OVC, and secondly around the scope of the updated NPA. A process to review Zimbabwe's 2006-2010 Programme of Support to implement the NPA has also begun. While the Government of Zimbabwe, donors, and other key stakeholders have started a review process of the 2006-2010 Programme of Support, it is unclear at this stage whether the 2004 NPA itself will be revised and updated.²⁹

In general, most NPAs are four years in duration, with the exception of Uganda, which has a six year plan. Ethiopia's NPA expired two years ago. In addition, Zimbabwe has an NPA that was developed and endorsed by cabinet in 2004, but without any specific indication on the timeframe of the plan. The Programme

of Support to implement the NPA is four years in duration, and will also expire at the end of 2010.

The primary body responsible for NPA implementation are mostly line ministries, as in four out of the five countries, government ministries or departments are the primary actors tasked with facilitating, coordinating and providing oversight to the implementation of the action plans. In these four countries, the ministries mandated to operationalise the NPA are also the lead agencies for social welfare, development or action. It is interesting to note that South Africa's NPA on OVC differentiates responsibility between national and provincial level implementation, with the Department of Social Development responsible for national level implementation and the Department of Cooperative Governance and Traditional Affairs responsible for provincial level implementation.

The implementation of the NPA on OVC in Swaziland is seated above the line ministries and falls under the National Children's Coordination Unit (NCCU) in the Deputy-Prime Minister's Office. In addition to its implementation and coordination role, the capacity of the NCCU continues to be strengthened to develop systems of reporting, tracking, documentation and learning on issues affecting children.³⁰ "Civil Society complained about having to go to different places for children's issues and asked for a coordinating unit. Out of recognition of the importance of children's issue and the need for these issues to be prominent, the decision was made to situate them in the Deputy Prime Minister's Office. The Deputy Prime Minister is passionate about children's issues and politically having the children's issues and NPA there has had a positive effect."³¹

In Ethiopia, Mozambique, South Africa and Uganda, the responsible ministries share their duties with an independent and multi-sectoral body dedicated to children's development and wellbeing, respectively the OVC National Taskforce in both Ethiopia and Mozambique, the National Action Committee for Children and AIDS and the National Council Children. In Zimbabwe, donors and others contributing to the NPA basket fund also play a fundamental role in the NPAs implementation.

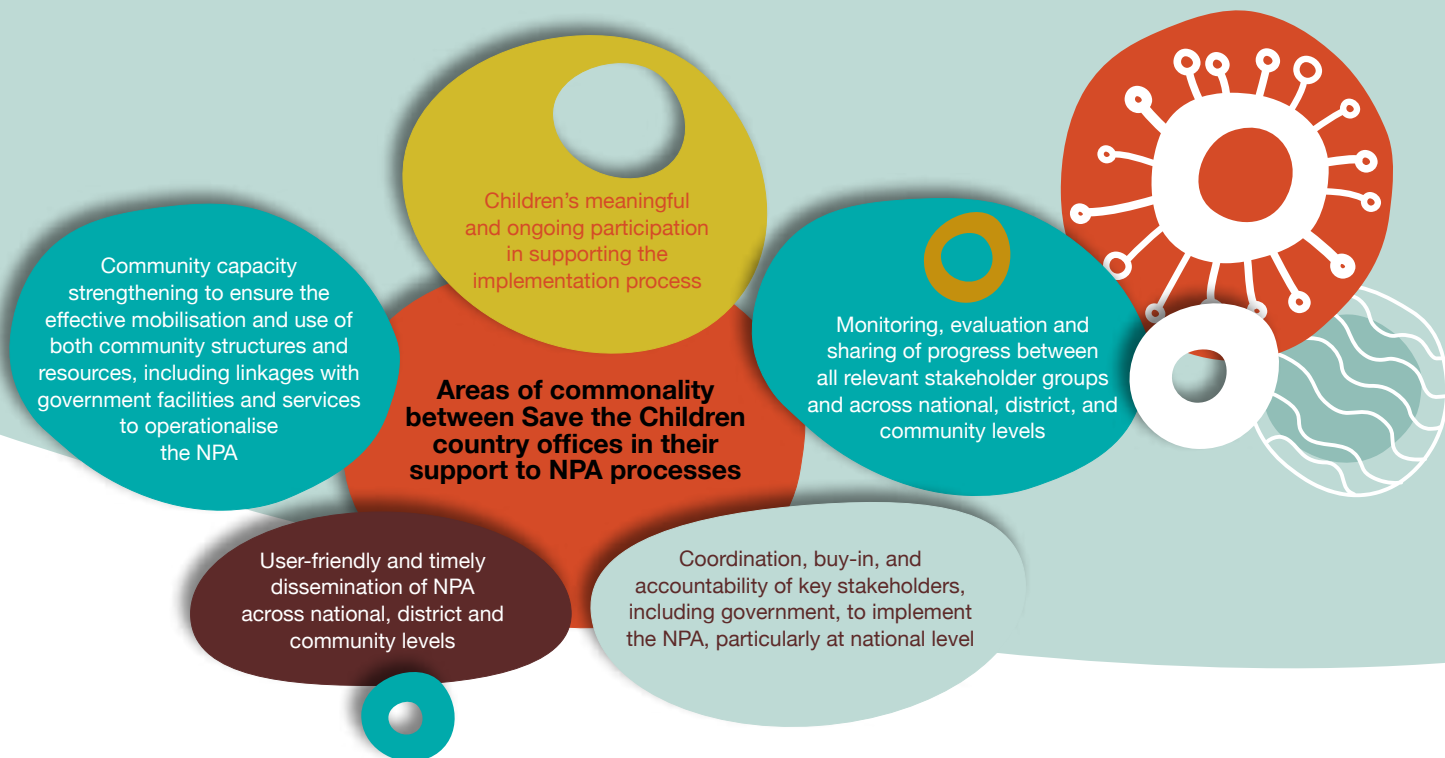
²⁸ Ethiopia does, however, have a NPA on all children (2003-2010). The NPA for OVC (2004-2006) was published after the NPA for Children.

The NPA for Children focuses on a wider range of issues compared to the more specific NPA for OVC. The question of developing an updated NPA on OVC remains.

²⁹ Email correspondence with Lynn Walker, Country Director, Save the Children UK, April 9 2010.

³⁰ Case study Swaziland, (March 2010).

³¹ Presentation by Mandla Mazibuko, Save the Children Swaziland, at Save the Children's UK Workshop on NPAs on OVCs, April 20-21, 2010.



Areas of commonality between Save the Children country offices in their support to NPA processes

Despite the varying HIV epidemiological, infrastructural, political will and child welfare contexts of the seven case study countries, there are several areas that all the case studies identified, either as a promising practice or as a challenge, to implementing NPAs or other child focused legal instruments. These areas include:

- User-friendly and timely dissemination of NPA across national, district and community levels
- Coordination, buy-in, and accountability of key stakeholders, including government, to implement the NPA, particularly at national level
- Community capacity strengthening to ensure the effective mobilisation and use of both community structures and resources, including linkages with government facilities and services to operationalise the NPA
- Children's meaningful and ongoing participation in supporting the implementation process
- Monitoring, evaluation and sharing of progress between all relevant stakeholder groups and across national, district, and community levels.

The above topics are listed in a particular order, and they do follow, albeit generally, the main steps that need to be taken to ensure effective implementation of legal and policy instruments. These steps can guide how to maximise the impacts of a NPA on its target groups and beneficiaries. These steps are not specific to solely implementing NPAs on OVC, but can also be applied to social protection and other frameworks.

Dissemination

Dissemination is a prerequisite to effectively translating policy into practice and enhancing implementation. In accordance with one of The Framework's strategies to raise awareness and advocate for the creation of a supportive environment for OVC, dissemination across stakeholders and between administrative levels is the starting point in ensuring effective implementation of the legal and policy instruments. Dissemination should be a priority to facilitating and operationalising the implementation of laws and policies, both at national and district levels. Dissemination can be a cost-effective and practical means to raise awareness, increase understanding and sensitise groups of people on a particular issue, empowering people to take informed decisions on a particular topic and generate positive change. Effective dissemination strategies can include translation into local languages, and user-and reader-friendly materials for specific audiences, including children.

Save the Children commissioned a study to review legislation protecting orphaned and other vulnerable children in Ethiopia, including assessing the expired NPAs (2004-2006) strengths and gaps.³² A key finding and recommendation was:

Existing legislation protecting children is held in a number of legal and policy documents, and as such a few government officials, service providers or community leaders have a comprehensive understanding of the measures protecting children. Effort needs to be made to compile these provisions into a readable and usable format. An analysis can then be undertaken on legislative and policy gaps. This will also help inform the debate on the need for a new National Plan of Action on Orphans and Vulnerable Children.³³

³² The review was completed in March 2008 but only disseminated in June 2009. The report was not updated to include the legislative and policy changes since 2008, resulting in the report's findings and recommendations being outdated upon its release.

³³ Case study Ethiopia (October 2009), p. 16.

A draft report was presented and shared with the National OVC Taskforce³⁴ in June 2009. The OVC Taskforce provided comments on the report, after which it was finalised and published. In October 2009, Save the Children organised a larger dissemination event to include over 50 stakeholders, including various ministries, parliamentarians, donors, international and national organisations, as well as children. This event identified key action points for OVC policy and programming in an effort to directly support OVC initiatives. A follow-up discussion programme on Ethiopian television was consequently funded to highlight some of the key issues and recommendations coming from the report's launch in October 2009, in order to reach a broader audience. The Ministry of Women's Affairs has since commissioned a situational analysis on vulnerable children, the findings of which will influence the need for and scope of a new NPA on OVC.

The case of Uganda confirms that dissemination is not the sole responsibility of one actor, but should instead be seen as the duty of the various stakeholders who were involved in designing and developing the NPA. For example, even though the Ministry of Gender, Labour and Social Development (MoGLSD) is mandated with the instrument's implementation, other stakeholders can also play a significant role in promoting an environment where implementation can be realised.

Save the Children in Uganda (SCIUG) took the primary responsibility for disseminating the National Strategic Programme Plan of Action of Intervention (NSPPI) and the National OVC Policy (NOP) in the three districts in Eastern Uganda.³⁵ SCIUG disseminated these instruments in order to initiate a multi-sectoral process for developing district strategic plans for OVC. Those that were targeted in the dissemination included district administrative staff, as well as Local Council Chairman IV, technical staff from the departments of health and education, and at sub-county level, sub-county parish chiefs, technical staff under the office of assistant community development officers, local administrative police and local council chairpersons.

These stakeholders were trained by SCIUG to strengthen the capacity of district technical staff and key local

implementing partners. The following highlights the impact of the trainings on the attitude and actions of the leaders and civil society towards children's rights:

*The NOP has helped empower opinion leaders in the district who are sensitised thus go back to the village levels to save children whose rights are violated, they also sensitise people in families, talking to them and reminding them of their responsibility.*³⁶

*The NOP has really enhanced our work in programming. Before the dissemination of the NOP by SCIUG, we had scanty knowledge on working with children... Incorporating the NOP into our work has made our work a lot easier. After the dissemination, we now know what should be done, what the interventions are and who the target groups are. We follow up at all projects level implementations. (Project Officer, Transcultural Psychosocial Organization).*³⁷

*Disseminating the OVC policy has helped change [street and refugee] children by preparing them in all areas and by sensitizing the communities as well as orienting the teachers in how to handle these children. (Teacher)*³⁸

Upon completion of the trainings, SCIUG and other partners supported the districts in conducting a mapping exercise to identify the number of OVC, the available number and quality of service providers, and the priority areas for OVC. The findings from these exercises formed the basis for formulating District OVC Strategic Plans (DOSPs), which are a guiding tool to implement the NSPPI at lower government levels. Each DOSP focuses on addressing the specific challenges that children within that district face, yet each DOSP works towards achieving the various provisions captured in the NSPPI. All District OVC Strategic Plans are calculated, and districts access funds from a basket funding (Civil Society Funding) by different donors in Uganda to respond to OVC and HIV and AIDS.

SCIUG itself confirms the importance of dissemination and trainings:

Orienting partners and even government workers on policies that are passed is paramount for effective implementation of the policies. A number of partners including government staff were ignorant of the plight of

³⁴ Even though the OVC Taskforce was primarily responsible for overseeing the implementation of the NPA, the Taskforce is still a relevant mechanism as it continues to be a strong advocate for children's rights. It lobbies primarily government ministries to ensure a child focus within their programming. A range of representatives from government, civil society and the international community comprise the OVC Taskforce. ³⁵ This does not imply that the NSPPI and NOP were only disseminated in these three districts.

³⁵ This does not imply that the NSPPI and NOP were only disseminated in these three districts.

³⁶ Case study Uganda (DATE), p. 13

³⁷ Ibid, p. 16.

³⁸ Ibid, p. 17



OVC and on the OVC Policy thus there was a need to carry out sensitisation sessions. The Policy provides for a standard way of approaching issues affecting OVC, as it calls for broad approach to addressing issues concerning children.³⁹

Swaziland has also identified the need for trainings and sensitisation campaigns for government officials in order for legal instruments to be operationalized and put into effect:

Further capacity building is required for government officials on how to implement policies and laws... otherwise [the legal instrument] will be rendered useless in terms of protecting children. In general, the challenge seems not to be about the capacity to put policies in place, but rather the lack of leadership with specialised social welfare experience at important levels that are capable of translating policy into practice and the ability to measure and monitor interventions.⁴⁰

Uganda's and Swaziland's experiences speak to the recommendation formulated as a result of the RAAAP Initiative in South Africa that "it [the framework] should be disseminated and actively promoted as the framework within which all sectors of society should develop their initiatives."⁴¹ The development of the DOSPs in Uganda also provides lessons learnt around coordination within district levels.

Also in South Africa and Angola, it has been noted that advocacy and awareness-raising has enhanced implementation. For example, in South Africa efforts through the civil society network ACCESS (Alliance for Children's Entitlement to Social Security) has increased the number of children eligible for the Child Support Grant through increasing the age limit and removing some of the practical constraints, such as fixed income threshold and proof of identity.⁴² In Angola, awareness raising of child protection issues via regular radio and television debates has encouraged the development of the Eleven Commitments, which is a policy tool and reference point to put children's welfare on the political agenda. In Huambo, the Vice Governor has made the Eleven Commitments an integral part of all municipal planning and policy development, reflecting the intention to make 'children an absolute priority'.⁴³

Coordination, accountability and buy-in of stakeholders

The 2009-2012 NPA on OVC in South Africa notes the importance of ensuring a comprehensive framework for children "in order to consolidate efforts, accelerate service delivery, and to ensure optimal use of human and financial resources."⁴⁴ The following sums up the importance and relevance of coordination:

Coordination is required not just between departments that have a role in providing statutory services, but between and with non-government organisations who are often reaching individual children within a community with one or two types of support but are not able to refer the children to the full range of services. It is also required to enable partnerships between public and private partners at local level...At all levels (ward, local municipality, district municipality, province and national) there should be mechanisms for all stakeholders to meet regularly and work together. Where existing coordination groups that work with children already exist, these should not be duplicated but should take on a responsibility for identifying and supporting vulnerable children by supporting community based responses. However, these coordinating bodies rarely exist because of the capacity constraints identified above, and where they do often lack the time and resources to meet regularly and work together.⁴⁵

Central coordination structures for OVC

South Africa identified its National Action Committee for Children affected by HIV and AIDS (NACCA)⁴⁶ as the permanent coordination body to address the need "to strengthen intra- and inter-departmental co-ordination at all levels and ensure that municipalities play a leading role at district and local level to deliver effective and coordinated services for orphans and other made vulnerable by HIV and AIDS."⁴⁷ In addition, a national coordinating body was considered the relevant response to address the challenge of "functional integration [which] is seriously undermined by government's structure of departmental mandates, separate budgets and programmes that do not necessarily compliment each other."⁴⁸

39 Case study Uganda, p. 19.

40 Case study Swaziland, p.22

41 Smart, R. (2003). *Children Affected by HIV/AIDS in South Africa: A Rapid Appraisal of Priorities, Policies and Practices*. Commissioned by Save the Children UK South Africa Programme in collaboration with Department of Social Development.

42 Case study South Africa (February 2010), p.2.

43 Case study Angola (Date), p.6.

44 South Africa 2009-2012 NPA on OVC, p. 15.

45 Proposal from South Africa's Department of Social Development submission to the Global Fund on AIDS, TB and Malaria, Round 8.

46 NACCA includes representatives of government departments, civil society, business and development agencies, lead by the Department of Social Development.

47 Case study South Africa, p.6-7.

48 Chandiwana, K. (2006). *Research to assess local level functional integration of HIV and AIDS services in South Africa*. University of Witwatersrand, Johannesburg.



However, in light of South Africa's complex administrative structure, linkages between provincial and district level services are weak, making it extremely difficult for NACCA, as the central coordinating body, to have any significant impact on improving children's lives. Furthermore, while the Department of Cooperative Governance and Traditional Affairs is mandated to coordinate the local municipalities, not all departments, such as social development and health, are represented at that level.⁴⁹

Recent discussions within NACCA opened the debate about whether there should be a coordination mechanism that would focus on coordination of service provision, as a type of service delivery forum, while the current CCF members would be referred to as groups of community caregivers.⁵⁰ This would indeed be a possible step to build and strengthen linkages between community service provision structures and government facilities. The South African case study further notes that "coordination at service provider level requires considerable and ongoing investment at all management levels and policies for integrated planning need to be actively addressed at every service delivery."⁵¹

In spite of NACCA's mandate to act as the central coordination body, the 2009-2012 NPA summarises the weak coordinating mechanisms under the 2006-2008 NPA:

The NAP was not working efficiently and effectively because of a lack of ownership and co-ordination within and between NPA structures and sector departments. There was a lack of accountability and coordination in regard to key activities and programmes. There were capacity gaps in skills, systems and processes and resource mobilization amongst role-players implementing the NAP.

This is a relevant lesson learnt for Save the Children Angola, who recommended the government "establish a central coordinating body for OVC...to ensure a more engaged and coordinated approach is taken to strengthening the capacity of both government and local NGO's to effectively support OVC."⁵² This recommendation was heavily influenced by the findings and recommendations coming from the Situational

Analysis on OVC in Huambo province, which highlighted that there was poor coordination among key actors and insufficient support for programmes supporting OVC. The Situational Analysis further noted the lack of a national action plan and policy on OVC, which could be a major hindering factor in establishing effective coordination systems for these children.

Decentralised coordination structures for OVC

Despite Swaziland's modest geographical size, the government embarked on a national decentralisation process, launching the Decentralisation Policy in 2006. A Decentralisation Unit has been established under the Ministry of Tinkundhla (Chiefdoms), Administration and Development. Such a unit was established to provide opportunities to strengthen regional and community coordination and capacity to provide services responsive to the needs of vulnerable children.⁵³ A referral system on child protection between institutions has been developed, strengthening operational linkages between community and government structures. While there is no evidence at the time of writing to assess the impact of the creation of the Decentralisation Unit on increased access of services at the regional and community levels, it seems valid to create such a unit under the same departmental umbrella tasked with overall coordination. This is assuming the units under the Prime Minister's Office are internally coordinated and have communication structures in place to share and discuss progress and address programming bottlenecks.

However, the Decentralisation Unit's mandate will remain redundant if Swaziland's laws and policies for OVC are not aligned. Specifically, the draft Child Protection and Welfare Bill, which is a crucial reference point for the NPA on OVC, has not been approved by cabinet, and consequently not ratified by parliament.⁵⁴ This has implications for Swaziland on approving its 2011-2015 NPA, as it cannot be enforced in a court of law if the Bill is not passed into law. In other words, the Unit will not be able to carry out its mandate of coordinating access of services for children at regional and community levels if the Bill is not passed.

49 Case study South Africa, p.7.

50 Case study South Africa, p.6.

51 Case study South Africa, p. 18.

52 Case study Angola, p.14-15.

53 Case study Swaziland, p.6.

54 One reason for this includes the dissolution of Parliament prior to the Bill having been approved.



Absence of a specific coordination structure for OVC

The absence of a specific coordination structure for children can further marginalise them. Without such a structure, children can fall through the gaps created by the various legislations. They can remain invisible until a coordinating structure can identify and monitor them. For example, largely as a result of the absence of a comprehensive coordinating structure for children in Ethiopia, programming targets less than 1/5 of the OVC population.⁵⁵

Promising practices on district level coordination

In Uganda, the development of the District OVC Strategic Plans has positively impacted on district level coordination in numerous ways. Specifically, district committees for children and referral systems have been developed. The establishment of the district committee was supported by the MoGLSD in order to build capacity of local governments. The committees are multi-sectoral and include the Local Council IV Chairperson, as well as representatives from local government sector heads and technical staff, NGOs and civil society. The role of the committee is to bring together the different actors in the OVC area to discuss and share experiences, challenges and design a way on integrating and improving the situation of OVC, which is aimed at minimising duplication and conflict of interest.⁵⁶ “Cases against OVC like forced marriages, defilement and property grabbing have tremendously reduced because of OVC sensitisation at the district level,” said the LC III Chairman.⁵⁷

Through the increased networking opportunities put in place during the design and implementation of the District OVC Strategic Plans, a referral system was established, which has clarified roles amongst all stakeholders, including children, on how to effectively and efficiently handle and address various child protection issues. It has further provided children with the opportunity to report cases of abuse. Referral systems have also provided a means to follow-up on cases. As a result, SCIUG has acknowledged the importance of extending the referral system to lower community and administrative structures in order to maximise the impacts for children.

Furthermore, in South Africa, Save the Children played a major role in strengthening district coordination bodies through establishing Child Care Forums (CCF). The CCFs was considered to have a positive impact in increasing the leadership roles of the municipalities, including of the Local AIDS Councils, to strengthen local coordination to identify OVC, be aware of initiatives involving child care and support, create awareness, and build capacity of families and communities.⁵⁸ However, the model recognised the importance of broader coordination and that there was a need to “ensure operational links between CCF, government and non-government coordination and service provision structures at ward, district and provincial level, to build accountability and share best practice.”⁵⁹

Community capacity strengthening

Community-based structures form an integral part of the response to ensuring that the needs of OVC are addressed. Communities have continued to be the backbone of providing support to vulnerable children in the context of HIV and AIDS, even when community structures are stretched and resources limited. Communities often take it upon themselves to provide as much support as possible, regardless of whether they have been mandated or not by legal frameworks, or even assisted by donors, national and international NGOs, and government.

Despite organised community responses having mobilised to act as ‘safety nets’ to children and families in need, these responses have been funded largely by community members’ out-of-pocket spending or in-kind gifts.⁶⁰ Yet despite communities’ good will, their capacities continue to be stretched as the cumulative burden of HIV and AIDS, poverty and food insecurity increases, and those providing care and support lack the necessary skills, resources and connections to networks of best practice.⁶¹

The fundamental role that communities play in providing the first line of support has been increasingly acknowledged by governments and other stakeholders. It has also been recognised that resources need to be channelled to the community level in order to reinforce and strengthen community action. For international agencies, mobilising communities as a programming

55 Case study Ethiopia, p.2.

56 Case study Uganda, p.12.

57 Case study Uganda, p.12.

58 Case study South Africa.

59 Save the Children UK South Africa Programme, 2004, Thusani Bana – Child Responsive Integrated Support Project – Phase 1.

Proposal to PEPFAR South Africa by Save the Children UK in partnership with Centre for Positive Care.

60 JLICA (2009). Home Truths: Facing the Facts on Children, AIDS, and Poverty.

61 JLICA, p. 29.



response has become “favoured” by international agencies, especially where national and local government is unable to fulfil children’s rights to care and protection.⁶² This is evidenced in current OVC programming guidelines and models, which frequently stress the central role of communities in mitigating the impacts of HIV and AIDS on vulnerable children and their families.

A review of evidence-based interventions of community based OVC programming in Southern Africa commissioned by the Human Sciences Research Council (HSRC) in 2004 identified the ample examples of such programmes. The HSRC noted specifically that multi-sectoral collaborations between national and local government, NGOs and community structures appear to provide the most effective services.⁶³ A further review carried out by the Southern Africa Regional Office of Catholic Relief Services in 2007 confirmed the HSRC’s findings and recommended that “good practices in OVC care and support programming must build on existing community assets, actively include adults and children, and are able to incorporate new ideas and structures to develop sustainable, replicable and community accepted approaches that improve vulnerable children’s wellbeing.”⁶⁴

A major aspect of successfully implementing NPAs on OVC has been to build or strengthen coordinated structures within communities in order for them to meet the quality of service delivery as set out in the NPA. The large majority of initiatives receiving external support are mostly in the form of cash, material, or technical support. In Uganda, for example, three externally-funded multi-year programmes (World Bank, Global Fund and US President’s Emergency Plan for AIDS Relief (PEPFAR) provide over USD 100 million to reach vulnerable children at community level.⁶⁵

JLICA’s research confirms the critical importance of increased support from outside sources to strengthen community action for children affected by HIV and AIDS.⁶⁶ However, while it is essential to strengthen the capacity of communities to continue to be key players in the response for providing care and support to children and families in need in the context of HIV and AIDS,

their role should not be considered as a substitute for involvement and accountability by government.

The debate about the effectiveness, cost, scalability and sustainability of community committees⁶⁷ is an important factor to consider when assessing the experiences of the seven case study countries, and usually these factors are interlinked. While this report does not aim to provide a holistic summary and discussion of this debate, key aspects will be discussed here in order to highlight a certain point.

All seven case studies provided examples of community-based structures providing care and support for children. It was interesting to note that the case studies did not discuss financial resources or aid effectiveness in the context of community structures. While community groups varied in membership or volunteer size, the primary functions of most groups included:

- Various approaches to awareness raising amongst community members on child protection issues, some referring to the NPA on OVC or other legal frameworks as setting standards.
- Increased networking with both formal and non-formal groups to identify who is doing what.
- Building or strengthening referral systems, including follow-up mechanisms. However, most of these systems were used to address cases of abuse. There was no reference to using these referral systems to address aspects of children’s health or vulnerability to HIV.
- Psychosocial support was a strong component in all community structures, and was usually incorporated as part of the referral systems.
- Some community structures were aware of the importance of child participation, but those that were, struggled to grasp how to effectively include children in their committees.
- The community structures seemed to have a clear understanding of the structures’ as well as the members’ appropriate roles and responsibilities.

62 Wessels, M. (2009) *What are we learning about protecting children in the community? An inter-agency review of evidence on community based child protection mechanisms.* Commissioned for Save the Children. Executive summary, p. 1.

63 HSRC (2004). *The Development, Implementation and Evaluation of Interventions for the Care of Orphans and Vulnerable Children in Botswana, South Africa and Zimbabwe: A Literature Review of Evidence-based Interventions for Home-Based Child-Centred Development.* Cape Town, South Africa.

64 Catholic Relief Services (2008). *Programming for Impact: A Review of Literature and Lessons Learned from the Field on Programming for Vulnerable Children.* Baltimore, USA.

65 JLICA, p.29.

66 P. 30.

67 See for example *Save the Children (2005), Bottlenecks and Drip-Feeds; Save the Children (2007), Children at the Centre; Save the Children, UNICEF, USAID, World Vision, Oak Foundation, (2009) What Are We Learning About Protecting Children At The Community?: An Inter-Agency Review of Evidence on Community-Based Child Protection Mechanisms; JLICA (2009) Home Truths, chapter 3.*



Impacts of financial support on strengthening community structures and responses

In Mozambique, Save the Children and other partners have provided financial support to community based initiatives with the aim of allowing communities to respond to the livelihood challenges faced by OVC and their families. The grants have assisted communities to diversify the range of their responses to provide care and support for children, including the establishment of food gardens and providing other nutritional support.⁶⁸

There is no robust evidence on how effective increased donor funding for community organisations has been, given the lack of impact assessments and systems for tracking resource flows to communities.⁶⁹ However, the above example can reflect that the resource flows were managed carefully as community contributions seem to be strengthened rather than overridden as community members are engaged in participating in the design and maintenance of food gardens.

However, as the number of external agencies seeking to operate and establish partnerships at grassroots level multiplies, the need for effective donor coordination is fundamental to ensure effectiveness and sustainability of programming. For example, similar to the CCFs in South Africa, Save the Children has supported the establishment of Child Protection Committees (CPCs) in Swaziland, which are also community level structures that raise awareness around child protection and HIV and AIDS.

In order for CPCs to be effective, selected community members must undergo extensive training. Save the Children only had funds to provide training for 3-5 days, which could only have scratched the surface of the necessary topics that needed to be covered, let alone to provide support to community members to engage in practical exercises. Save the Children noted the lack of funds as an issue to conduct more in-depth and extensive trainings, and also recognised the importance of regular refresher courses to ensure that CPCs are equipped with the most up-to-date knowledge and skills.⁷⁰

Impacts of technical support on strengthening community structures and responses

While financial support is an important factor to strengthening communities' capacity to respond to children's needs, technical support is key to effectively involving communities, impacting on a structure's or programme's sustainability. For example, Save the Children mobilised community volunteers to participate in the process of developing and strengthening CCFs. Over time, community volunteers started to own the process, which "lay the foundations of a sustainable structure at community level as well as provide immediate short term assistance to OVC who are precipitated into dire situations."⁷¹ The review of the 2006-2008 NPA noted that the CCF interventions made significant progress in capacitating families to protect and care for OVC and in addition to strengthening other relevant community based services.

As a result of SCiUG's training on the NSPPI to NGOs, a local NGO consequently developed a training curriculum for sub-county leaders, health workers and community development officers on practical child protection measures in order to build capacity of both government structures and community services. As a direct outcome of SCiUG's technical support to strengthen local organisations, the number of child-related cases dropped almost 50% from 809 to 460 cases between 2006 and 2009. The reduction of these cases was attributed to strengthened capacity of communities, including children, to take action through identifying and reporting abuses, as well as referring cases to the relevant facilities.⁷²

Another example is of Save the Children in Zimbabwe, which provided technical support and trainings on child protection to Area Coordination Committees (ACC), a local network that engages government officials from various line ministries, the police, the Joint Initiative (JI)⁷³ coordinating partners, local partners, and other stakeholders. As a result of these trainings, ACCs were used to reactivate the Child Protection Committees which are mandated with identifying, reporting and responding to cases of child abuse.

68 Save the Children (2010). *Annual Report, Scale up Hope Programme, 2009.*

69 JLICA (2009). *Home Truths.*

70 Case study Swaziland

71 Save the Children UK South Africa Programme, 2004. *Thusani Bana – Child Responsive Integrated Support Project – Phase 1. Proposal to PEPFAR South Africa by Save the Children UK in partnership with Centre for Positive Care.*

72 Case study Uganda, p.14-15.

73 The Joint Initiative is a coordinated humanitarian response project involving seven agencies working together to provide livelihoods, food security, social and child protection, shelter, education assistance to vulnerable communities in six urban centres in Zimbabwe. The Initiative commenced in 2006 and is scheduled to end in November 2010.



Role of governments in strengthening community structures and responses

In recognition of the multitude of community structures providing services to OVC and their families, Mozambique's Ministry of Women and Social Affairs (MMAS) and other stakeholders noted the importance of developing guidelines around standardising the quality of services that community structures provide. In early April 2010, MMAS approved the Child Protection Community Committee Guidelines in order to harmonise the indicators around scope and quality of services set out in the NPA on OVC with the services provided at community level. These guidelines further aim to strengthen coordination amongst community structures in order to provide the minimum and comprehensive package of services to children and families in need.⁷⁴

Child participation

Child participation is a fundamental human right as enshrined in the Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child, and other global, regional and national laws and policies relating to children. It involves encouraging and empowering children to develop and voice their opinions on issues affecting them. Key to child participation is ensuring that children's views are taken into account by adults and consequently adults engaging in constructive dialogue, and exchange of opinions with children. However, child participation Southern and East Africa to date has not been particularly meaningful and effective, largely due to adults' exclusionary approach.

All case studies reflected on the importance of incorporating children's voices and their active participation during the implementation process of NPAs on OVC or other instruments that target them, yet struggled to identify sustainable means of effectively involving children.

Save the Children in Zimbabwe has been working to build the capacity of both national and international NGOs to incorporate child participation into the design and implementation of their OVC and other programming. Below is an excerpt of Save the Children's

attempt to raise the Joint Initiative (JI) partner's awareness about the importance of child participation:

Save the Children encouraged the participation of children at the earliest stages of the JI project by recommending that partners involve them in key planning meetings and that they be represented on committees related to the project. This initially was met with some resistance as it was such a different way of working for most JI partners, and most did not have the relevant experience. As such, this initiative had limited success except in cases where Save the Children staff themselves facilitated the children's consultative meetings or took a strong lead role in the process. Suggestions were developed on where it would be relevant and appropriate for children's input to be sought, and Save the Children encouraged partners to work through existing children's structures as much as possible. Indicators and targets for children's involvement in the project cycle were then set...⁷⁵

Feedback meetings were later held to solicit the views of children on the effectiveness of different aspects of the project, which were shared with JI partners, and were deemed important in demonstrating the value of children's contributions and on the impact of programme re-design.⁷⁶ In particular the findings from JI partners around child participation are important lessons to take forward, namely because child participation:

- Provided partners with a forum in which they could get to know children better and children could get to know them better.
- Helped partners to show where there are gaps in their interventions.
- Assisted partners to prioritise interventions.
- Partners became aware of specific problems experienced by children.
- Children were able to identify the main perpetrators of abuse in their community.
- Children's participation in the meetings made them part of the overall decision-making process of the project.⁷⁷

⁷⁴ Case study Mozambique (November 2009).

⁷⁵ Case study Zimbabwe, p. 6.

⁷⁶ Case study Zimbabwe, p. 8.

⁷⁷ Case study Zimbabwe, p. 15.



Positive trend in number of child-related cases reported in Mozambique

809

2006

460

2009

Similarly, after sensitisation of children's right to participation, an NGO called the Uganda Women's Concern Ministries, reflects a change not just in understanding why child participation is important, but also how their increased awareness impacted on their programming:

Previously we were just helping children and did not expect them to say much because we thought they were just the needy children. We thought that these were just vulnerable children who should be grateful. We did not expect them to say anything. But with the training we realised that in our own ignorance, we were not ably upholding children's rights like of participation because we were only looking at them from the receiving end. Now we have learnt to communicate and to deal with children.⁷⁸

Other case studies reflect that while adults recognised the importance of child participation, there was lack of understanding on how to systematically involve children. For example, in South Africa, while children have been involved in pre-conference consultations or included as youth groups in a District AIDS Council group on OVC, "opportunities such as child participation in the development of Integrated Development Planning, formal partnerships with child and youth groups, or local support to build up child representation at ward or local level does not appear to have been systematically implemented."⁷⁹

While Save the Children in Swaziland trained child peer educators and radio programmers on the NPA and encouraged them to disseminate their opinions to their peers and other community members Save the Children acknowledged:

[There is a] need for continued dialogue on child participation. This includes the sensitisation and capacity building of communities, children and youth groups, and government structures on how to engage young people and ensure their participation in decision-making processes. These interventions should therefore include the establishment of safe spaces to facilitate broader debate and inclusion of families and communities to influence the imperative shift of mindsets pertaining to children's worth in society. Children's participation through organised and monitored action is imperative for their development. As active citizens they have the responsibility to engage in these opportunities, educational programmes and community services.⁸⁰

A key lesson learnt is that while partners are aware of the theory of incorporating children's participation into their plans, long term technical and follow-up support is needed to ensure meaningful and effective child participation becomes a reality. In addition, more research is needed to ensure how to effectively and systematically include the most vulnerable children, as they often remain invisible in child participatory activities.

⁷⁸ Case study Uganda, p. 15.

⁷⁹ Case study South Africa, p. 11.

⁸⁰ Case study Swaziland, p.23.

monitoring

and evaluation, including sharing of practices



Effectively monitoring and evaluating (M&E) the implementation of NPAs on OVC is fundamental to understanding and tracking the changing nature and scope of vulnerability facing children. This is in addition to measuring the quality and impact of interventions on children's wellbeing. The OPPEI recommends one national level organisation to be mandated with M&E, and that interventions by both government and other stakeholders are monitored and evaluated. These findings should then be widely and publicly circulated, and used as advocacy in order to inform policy, programme development and fundraising efforts.

A key challenge to effective implementation of NPAs or other legal frameworks is an overall weakness in comprehensive data collection for planning and monitoring purposes. In addition, there are few indicators that measure the preventive aspects of child protection and vulnerability to HIV. Where these do exist, they often fall under other sector's data systems and are not shared.

A case in point is South Africa, where the grants system can indirectly track the impact of transfers on children's health and education, yet this data is not shared for coordinated planning.⁸¹ To this end, and in the absence of comprehensive national data on the situation of OVC in South Africa, Save the Children is participating in the multi-sectoral collaborative process with the Department of Social Services (DSD) to develop a child wellbeing assessment tool, which has the potential to track children's wellbeing and development over time. However, monitoring the wellbeing of unregistered children, particularly migrant children, remains challenging. Save the Children Ethiopia's review on legal and policy frameworks in Ethiopia also noted the need for "identification systems to track the level of need in the community and to allow government to accurately plan for social needs."⁸² Save the Children in Zimbabwe provided M&E support to JI partners to strengthen their indicators to include an age and gender component. As a result, partners had a clear understanding of child protection mainstreaming and child protection programming as they adopted a reporting format. The format included feedback on child protection issues in terms of the number of children, their age, gender and vulnerability categories, including orphan status, whether the child was disabled, from a child-headed household, an adolescent mother, in school or out of school.

Partners further incorporated these disaggregated child protection issues into community awareness campaigns. These and other child specific child protection activities were included for the first time into JI partners' budget lines and included as outputs and indicators in their plans of actions.⁸³

Save the Children in Angola recommended the need for the National Institute of Children's monitoring capacity to be reinforced to ensure effective collection and analysis of data, and future implementation. In addition, Save the Children Angola encouraged INAC to lead a process of research and information sharing on vulnerable children, and noted that this would be particularly valuable to building the capacity of protection mechanisms, especially the child protection committees.⁸⁴

Information sharing and follow-up discussions were noted as crucial to effective and coordinated monitoring in several case studies. Most case studies referenced the OVC committees, or similar structures, as encouraging examples of information sharing platforms amongst multi-sectoral stakeholders. These regular meetings are designed to exchange learnings, discuss progress and identify bottlenecks, as well as on agreeing on a way forward highlighting stakeholders' specific roles and responsibilities. While this was noted as a promising practice and effective to coordination, this was limited to the level at which these meetings took place. More often than not, these meetings did not take into consideration developments from multi-sectoral stakeholder meetings at other levels. This was mostly because these outputs are not widely disseminated to actors beyond the committee members. In general, there is a lack of up-stream and down-stream information sharing and discussion events.

Key learnings and recommendations

Lessons learnt and challenges identified in the consolidated report were presented to stakeholders at SC UK's Workshop on NPAs on OVC. At the workshop, participants discussed the findings of particular themes in groups. They were requested to call upon their experiences in supporting NPA processes to develop recommendations that regional and national stakeholders could consider taking forward. The next section presents the lessons learnt and challenges experienced in the implementation of NPAs.

⁸¹ Case study South Africa, p. 3.

⁸² Case study Ethiopia, p.10.

⁸³ Case study Zimbabwe, p. 7

⁸⁴ Case study Angola, p. 11



Key findings

Dissemination

Lessons learnt:

- A high level multi-sectoral dissemination event, including government representatives, is a significant step in raising awareness as well as an important opportunity in sharing and discussing key priority areas and gaps in order to identify a common ground for future coordinated action.
- The dissemination of the national legal framework across administrative levels coupled with training and sensitising of government technical and administrative staff, including chairpersons and chiefs, is a practical and effective precursor for administrative levels to identify priority areas and accordingly develop costed strategies or plans that can translate the instruments into coordinated action.
- Children play a powerful role in dissemination activities, as their involvement, particularly through radio and outreach programmes, can reach a broad audience, influencing their understanding on children's rights and welfare, as well as bringing attention to pertinent issues affecting young people.

Challenge:

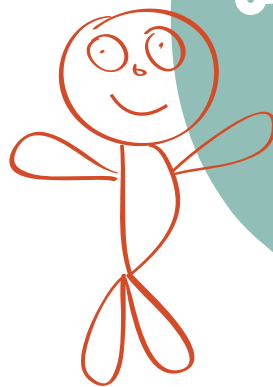
- In order for dissemination strategies to be effective, the findings and recommendations must be up-to-date. When developing a new NPA, the most recent qualitative and quantitative data needs to be taken into consideration to ensure the objectives and activities within the NPA are relevant and speak to the priority areas.

Coordination and accountability

Lessons learnt:

- Identifying a central coordinating mechanism is important to providing leadership in guiding and facilitating the range of stakeholders when implementing the NPA, including across the various administrative levels. Such a coordinating mechanism can only be effective, however, if each stakeholder can be held accountable and responsible for implementing activities in line with their mandates. Together with key stakeholders, the coordinating body should draw up an action plan identifying who does what with timelines.

- Relevant action points should be incorporated into stakeholders' own action plans or strategies, to ensure that stakeholders provide the necessary human and financial resources to carry out them out. In addition, at coordination meetings, discussions should revolve around identifying progress and challenges in meeting the agreed upon activities, and discussing any new opportunities for harmonisation. The coordination mechanism should have a full-time secretariat to provide continuous technical and administrative support, monitor productivity and follow-up on the agreed commitments made by stakeholders.
- A legal or policy instrument relevant for all children provides a comprehensive and coordinated approach that acknowledges and addresses the unique vulnerabilities facing children, including those affected by HIV and AIDS, poverty, conflict and other causes. Such instruments provide a means for standardising the minimum level of services all OVC should receive while emphasising the roles and responsibilities of all those accountable for meeting the needs of children, which is an important step to developing a key coordination mechanism.
- Establishment of district level strategies to implement NPAs is both a practical exercise and tool that can expand networks within the district, develop multi-sectoral committees who regularly monitor the situation of children, and strengthen referral systems and follow-up support to lead to improved wellbeing of children.
- The establishment of a unit or mechanism responsible for regional and community coordination is an important step to building their capacity to provide services responsive to the needs of vulnerable children. This unit should have regular strategic communication with the primary unit responsible for implementing the legal framework in order to allow sharing and discussion of progress and addressing bottlenecks in an effective and coordinated manner.
- National structures need to be aligned and linked to provincial and district level structures with political leadership enforcing information flows and dissemination exchange at all levels, including top-down, down-up and horizontally.
- The regular involvement of parliamentarians needs to be ensured in addition to strengthening linkages between CSOs and parliamentarians.



- It is necessary to ensure that quality of service provision is not compromised and that donor compliance is not being prioritised over wider accountability, e.g. conflict of interest if stakeholders are overseeing implementation as well as being an implementer.

Challenges:

- Material and financial resources are limited particularly at local level largely due to bottlenecks preventing the effective flow of resources from donors or the national level to communities.
- There is a lack of capacity and skills at all levels and insufficient human resources (in terms of numbers of people, especially those with the necessary abilities/skills).

Community capacity strengthening

Lesson learnt:

- A major aspect of effectively and successfully implementing NPAs on OVC has been to build or strengthen coordinated structures within communities in order for them to meet the quality of service delivery as set out in the NPA.
- However, while it is essential to strengthen the capacity of communities to continue to be key players in the response for providing care and support to children and families in need in the context of HIV and AIDS, their role should not be considered as a substitute for involvement and accountability by government. While community groups varied in membership or volunteer size, the primary functions of most groups providing care and support for vulnerable children and households are similar.

Challenge:

There continues to be little evidence regarding community structures providing care and support for children, especially since measures to strengthen such structures have not been evaluated on their long-term impacts. In general, this is largely due to an absence of baseline measurements and weak methodologies. However, the case studies do reflect the initiation and expansion of community-based structures for child protection, which is useful to learn about the current state of practice. Yet, evidence continues to be anecdotal, and recommendations should be considered as provisional.

To this end, the evidence base should be strengthened by conducting appropriate evaluations on how community based structures impact on children's overall wellbeing. This is an important step to ensure that what is currently being undertaken does indeed reduce children's risk to harm and decreases their vulnerability to HIV. These lessons should be shared widely, both across countries as well as between in-country administrative levels and stakeholder groups, to identify best practice frameworks for accountability and strengthened partnerships.

Child participation

Lesson learnt:

- While the majority of stakeholders acknowledge that children should be incorporated into the various stages of the NPA cycle, many do so for tokenistic purposes largely because they are not aware how to provide and ensure systematic engagement.
- More research is needed to ensure that the most vulnerable children are effectively and systematically included as they often remain invisible in child participatory activities.
- Practical guidelines should be developed and widely disseminated to highlight what measures are effective and which also encourage the empowerment of the child. At the regional level accountability rests with SADC, RIATT, UNICEF and regional NGOs. The forthcoming RIATT study assessing various child participation methods and mechanisms will identify promising practices on what is effective and what encourages children's empowerment. The study will provide a set of recommendations to guide stakeholders in establishing and maintaining child participation structures across the various administrative levels. The report's findings should be disseminated in user-friendly formats to regional and national level actors, including children. At the national level, and with support from local networks of NGOs and civil society, government ministers are responsible to ensure ongoing and sustainable child structures and platforms.
- There is a need to ensure that platforms, especially for children, are regular rather than occasional, and then forgetting what children have said. Child parliaments are not influencing decisions effectively and meaningfully.



Monitoring and evaluation

Lessons learnt:

- Joint regular planning meetings called by coordinating bodies are vital to disseminating and discussing progress and bottlenecks around policy and programming implementation. This helps clarify roles, especially amongst community structures.
- Strengthened monitoring & evaluation plans should be able to monitor processes, progress and impact of implementation and can be achieved by:
 - Harmonisation of donor and national sectoral reporting requirements (multiple accountabilities).
 - Strengthening outcome and impact level reporting (through use of cohort studies and periodic national household surveys, for example).
 - Establishing Child Focused M&E Systems.
 - Strengthening M&E information to support essential data for decision-making and priority setting.
 - Address gap in M&E in terms of preventative aspects (not just for orphans, but also abuse, child headed households etc).

Challenges:

- Overall weakness in comprehensive data collection for planning and monitoring purposes. In addition, there are few indicators that measure the preventive aspects of child protection and vulnerability to HIV. Where these do exist, they often fall under other sector's data systems and are not shared.

Recommendations

General:

Government:

- Through a multi-sectoral stakeholder process, including children, develop, agree on, and endorse a legal and policy instrument relevant for all children, which includes estimates of cost, specifies sources of funding, prioritises interventions, and provides clear guidance to all ministries and departments and other NGO stakeholders involved. These stakeholders should then be involved to participate in any subsequent review processes and to identify gaps that the following instrument should address.

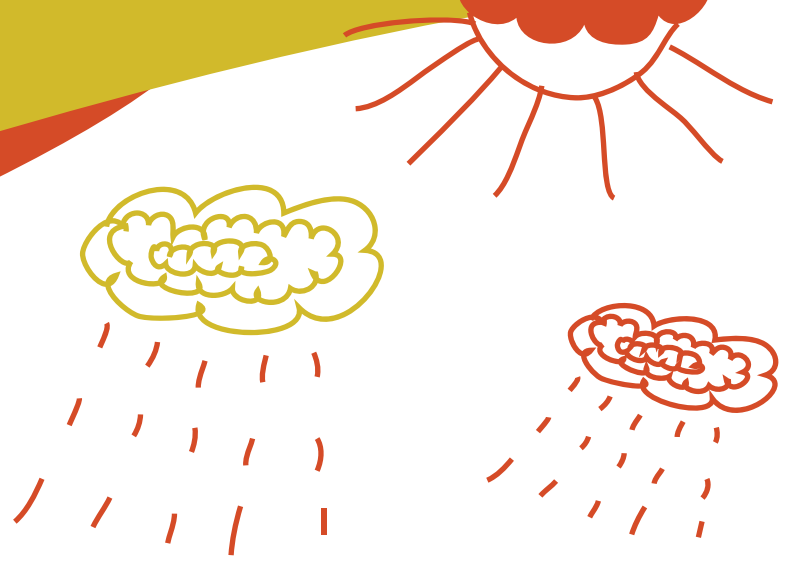
Programmers:

- Introduce mechanisms to assess the effectiveness and impact of community based structures aimed at improving children's wellbeing. These need to be assessed in line with both qualitative and quantitative indicators relating to service delivery as stipulated in the legal instrument. Such an evaluation should focus on the cost, scalability, sustainability and effectiveness of such structures.
- A formal and permanent coordination structure needs to be identified that can coordinate translating policy into practice. This structure must have an accountability structure and be a statutory authority. It should be responsible for setting key benchmarks and strategies for meeting targets and provide a means for collecting accurate data on the needs of particular groups of children.
- Encourage, participate in, and where necessary facilitate, the regular sharing of progress in policy implementation and programming. Not only does this strengthen the network of stakeholders, such meetings are key to establishing roles and responsibilities, monitoring progress and productivity, identifying gaps and bottlenecks, and discussing action points. Such events further encourage generation and dissemination of up-to-date data.

Capacity Building/Strengthening of Community Systems

The themes highlighted during the group discussion included identification and involvement of community structures and components. The group also discussed the Capacity Building Model, its focus and the roles of different stakeholders in that model. The process elements of coordination and capacity development, as well as measurement and tracking, were also debated. The key recommendations and the level they are aimed at were presented as follows:

- Capacity building models should take the form of societal structures - National Level.
- Capacity building processes should be informed by rapid assessment - National Level.
- There is need for clear guidelines for standardisation - National and CSO Level.
- Skill audits are necessary to identify strengths - National and CSO Level.



- Programming must acknowledge needs on the ground and not undermine local responses – CSOs and Donors.
- There is need to establish functional social services within the spaces where children live (physical structures such as schools; with qualified human resources; quality services; and with necessary allocation of funding) – National Government informed by local government and supported by civil society.
- We should aim towards sustainable care for children to reduce dependency on external aid and build economic strength of families and communities – Government CSOs and Donors.
- All policies, plans and recommendations should be presented in simple and child-friendly language – All stakeholders.
- There is need to move away from NPA for OVC to NPA for children - All stakeholders.

Coordination and Accountability

The working group explored the issue of coordination in the various countries. The discussion touched on the role that child participation can play. It then turned to the issue of accountability and the relationship between civil society and government. The group also discussed the issue of accountability of other stakeholders. Finally, the group debated on how best to operationalise linkages between government structures and communities. The working group made the following recommendations:

- There is a need for a clear and comprehensive Regional M&E Framework with lines of accountability and alignment of information on implementation of NPAs – SADC, national Governments, CSOs.
- It is necessary to develop a Regional Policy Framework on Accountability which clearly states who is accountable to whom, how they are accountable, on for what they are accountable, flows of accountability and coordination – SADC, National Governments.
- Promote collaboration between parliamentarians and civil society because both stakeholders are closer to the people – National Governments, CSOs.
- There should be national networks on coordination and accountability of NPAs at all levels. This will strengthen accountability and coordination at all levels and enhance participation opportunities (links to regional framework) – National Governments, SADC, CSOs

- Establish inter-regional Forums to share information, learning and best practices. This will motivate existing in-country networks and increase capacity for accountability and coordination of NPAs -National Governments, SADC, and CSOs.

Meaningful Participation of Key Stakeholders

The group focussed on the conceptualisation of meaningful child participation. Aspects related to practice and enabling factors were debated. The group discussion then turned to the role that child participation can play in advocacy and legal reform. The contribution of other role-players such as the media in advocating for child participation and child issues was briefly explored. The following recommendations were made:

- Develop standardised guidelines for Eastern and Southern Africa which are age-appropriate; offer fair representation of all marginalised groups including the disabled; and are gender-sensitive. RIATT to build on existing child participation desk review; RIATT to partner with SADC to take process forward; UNICEF to take the lead in advocating with the East African Community and other key partners. Funding should come from a regional donor funding basket and partners. The output aimed at national governments.
- Use case studies and lessons-sharing workshops to determine regional good practice and develop user-friendly versions of the NPA for children and lay people. These should be disseminated through simplified materials and tools e.g. illustrations, drama, radio, non-verbal multi-media – Save the Children; UNICEF; Whoever is responsible for next NPA review advised to include review on user-friendly NPAs and include section on how to action user-friendly material.
- Focus on, and acknowledge, asset-based experience at community level to foster a culture of automatic child participation. NGOs to take the initiative and document local experience, and share upwards with local government and national government. A change of attitudes should emanate from the community level up – NGOs; government; and donors.
- Sensitise governments on useful and well-resourced structures to ensure inclusion of children at various appropriate levels and strengthen existing structures – NGOs.
- Strengthen structures to use media for all themes relating to children – NGOs.

Monitoring and Evaluation

The working group focused on the various NPA M&E systems and tools in the various countries. Capacity, structural and coordination issues were discussed. Attention was also given to implementation, data flow and data management issues. A substantial portion of the discussion threw the spotlight on the onerous task created for CSOs by the multiple, unaligned, and changeable reporting accountabilities. Attention was, however, redirected onto the role of M&E in programme management and effectiveness. This also served to bring the child clearly into the spotlight and the merits of including prevention indicators. The collection, quality and verification of data were also discussed briefly. The key recommendations were as follows:

- Convene National Multi-sectoral M&E Committee to review and harmonise monitoring and reporting requirements; and review and develop plans for assessing the impact of child protection, care & support interventions on long-term child well-being and the National AIDS, Development & Social Protection Programmes – All levels but accountability rests with National Government and/or the National M&E Coordinating Committee.
- Ensure that sufficient data is routinely available within the harmonised M&E system to: design, plan, implement, manage, monitor, prioritise and evaluate comprehensive interventions for children, families and the communities supporting them. This data should be generated, understandable, useful, used, and disseminated at all levels of the programme including its rights-holders – All levels but accountability rests with National Government and/or the National M&E Coordinating Committee.
- Mobilise resources and technical support to strengthen in-country capacity at all levels to roll-out, harmonised M&E system and effectively utilise them – Donors; Development Partners; National Government.

Annex 1: Overview of Save the Children UK's Regional Advocacy for Children's Rights Programme

Since 2004, SC UK, with support from Irish AIDS, has been implementing a regional project that aims to ensure that local and national structures across Southern and East Africa are able to deliver a rights-based response for and with orphans and vulnerable children through child-focused policy, legislation and good practice.

During the first phase of the project,⁸⁵ from 2004 to 2006, the project focussed on five countries, namely Angola, Mozambique, South Africa, Swaziland and Zimbabwe and aimed to:

- Increase child participation. Children's participation in OVC programme and policy design is increased and recognised as important, and has an impact on the nature of OVC response in Southern Africa.
- Focus research and analysis. Policy and financial gaps in meeting the fundamental rights of vulnerable children are analysed and a regional advocacy strategy for responding to the gaps has been designed and implemented.
- Strengthen capacity to respond. National and sub-national institutions across Southern Africa have increased capacity to design and deliver OVC programmes that are responsive to children's rights.

Key achievements of the project include:

- **Creation of the space for civil society to engage with governments, particularly some of the most vulnerable groups of civil society e.g. children.** A significant number of community structures have institutionalised the involvement of children. The project is now supporting programmes and partners to promote children's engagement at decision-making level, such as school management structures or district AIDS committees, in order to have an impact on policy implementation.
- **Sharing of lessons learned in participation, including training through the Southern African AIDS Trust and documentation through them and the Southern Africa AIDS Dissemination Service.**

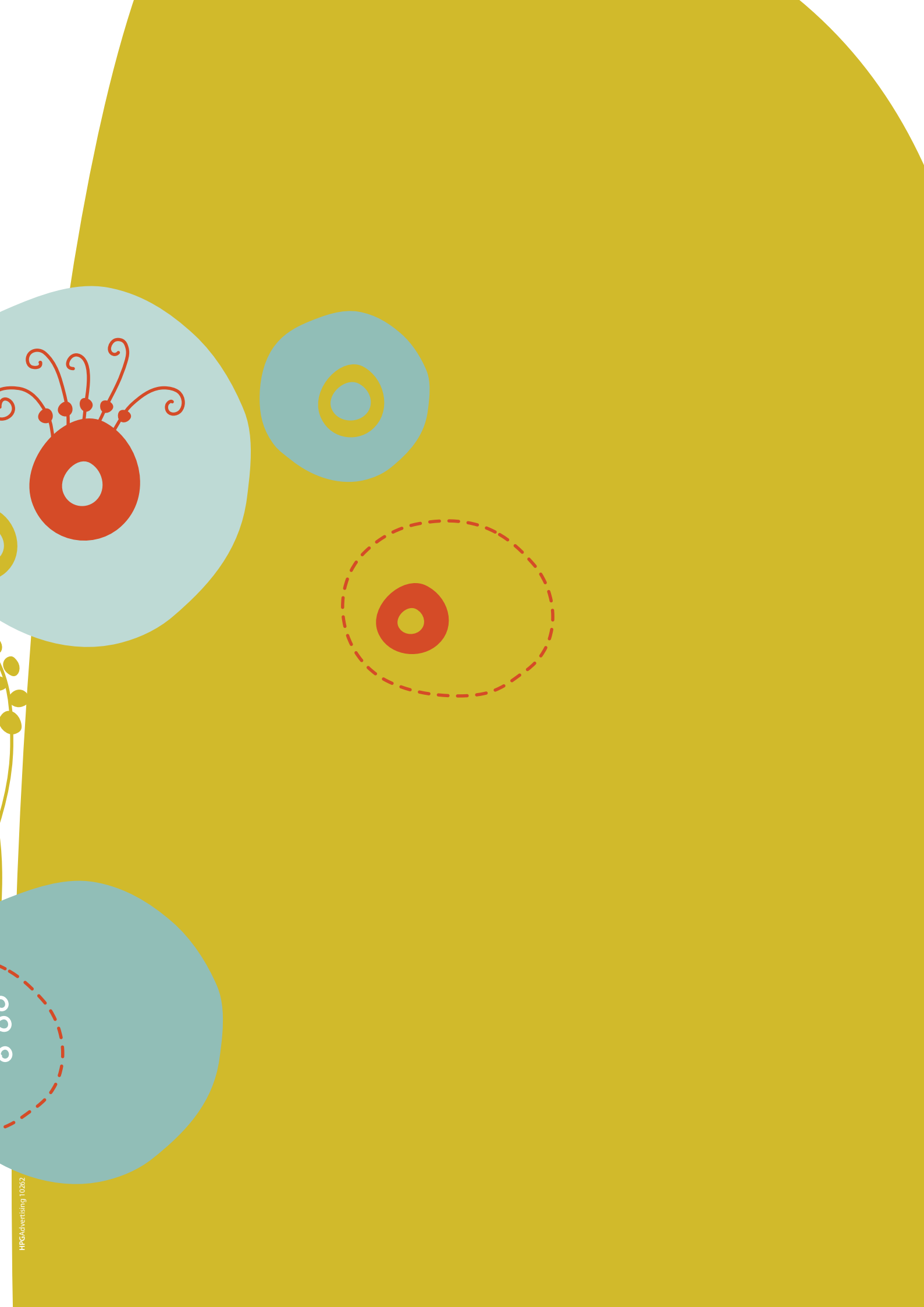
⁸⁵ See Sumburu, Sarah (2006) "Evaluation of Save the Children UK Regional Orphan and Vulnerable Children Programme" for lessons learned, challenges and recommendations stemming from the 2004-2006 phase of the project.

- A report into legal frameworks and practical means for vulnerable children to access their entitlements through legal frameworks and procedures was finalised and disseminated in 2006. This review was aimed at civil society organisations in Southern Africa who are working to secure the rights of vulnerable children, to provide an overview of the national policy environment and to enable civil society organisations to influence governments to fulfil obligations under the laws put in place. It is also intended to inform Southern African governments of the gaps that are occurring in policy development and implementation. The report is currently being updated to reflect the changing legal frameworks protecting children, including social protection.

The first period of the project was followed by another three year phase from 2007 to 2009, also funded by Irish AID. The second phase of the project built on the evidence based findings and recommendations from the first phase, with a particular focus on using regional instruments to advocate for harmonisation and coordination of policies across the region to effectively respond to children's rights. The second phase expanded to 7 countries to include Ethiopia and Uganda in addition to the five countries identified in the first phase. The project objectives were to:

- Monitor, implement and review NPAs or key legislative instruments with a view to promoting harmonisation in key policy areas affecting vulnerable children across the region.
- Research and advocate on the rights and protection of migrant and non-national children and incorporate them into regional agendas on migration and trafficking.
- Document, disseminate and replicate programmes empowering the most vulnerable and excluded children in Southern and East Africa through regional information sharing and learning.





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Save the Children

Save the Children South Africa Office
Tel: +27 (0) 12 342 0222

PO Box 14038, Hatfield,
Pretoria, 0028, South Africa