Improving child protection through economic strengthening among highly vulnerable, HIV and AIDS affected families
Program Context

Poverty and HIV and AIDS are major underlying causes of vulnerability in Ethiopia and Tanzania

- *Yekokeb Berhan* covers 11 regions of Ethiopia and *Pamoja Tuwalee* covers 10 regions of Tanzania
- Both programs support families, communities, local partners, and government to strengthen their capacities to improve and sustain care for highly/most vulnerable children
- Implement targeted economic strengthening initiatives combined with parenting skills development and protection
- Cumulative reach to date: **687,050** children and **385,316** households
- Working with **4,722** community committees, **81** local partners
Household Economic Strengthening

Ethiopian experience:

- Vulnerability assessment & analysis conducted using Child Support Index (CSI) tool
- Categorized households into three cohorts: Families in Destitution, Families Struggling to Survive and Families Ready to Grow.
- 8 of the indicators used address shelter, access to safe water, latrine, ability to meet the needs, regular income, child access to health services, etc.
- Score ranking 1 - 4 is calculated. (< or = 1.5 are families in Destitution ; between 1.6 and 2.9 are Strugglers; 3 or > Ready to Grow families)
Destitute families:
• basic needs support – stabilize then moved to Struggler’s level

Strugglers families
• ME-SPM (Microenterprise Selection, Planning and Management) training, support and follow up
• Savings, Credit and Investment based on the most relevant model (Savings and Credit Cooperatives an Enhanced Community Savings/Self-Help Groups)

Families Ready to Grow
• Families are supported to consolidate income, build resilience through the SCI methodology
Economic empowerment intervention

Tanzanian experience - WORTH

- Most vulnerable children identified through government process though through MVC ID Process.
- Caregivers of vulnerable children mobilized into WORTH savings groups
- Receive lessons on WORTH economic empowerment, good parenting, child protection and GBV and early childhood development, nutrition
- Using loans from their groups caregivers start up small businesses to improve the household income and cater for the needs of the MVC
Challenges/Gaps Addressed via HES

- Lack of income to meet needs of their own (food, shelter, education, health, protection)
  - Savings schemes to mobilize income & access to loans
- Household ability to retain & acquire more assets
  - Use income generated through their business
- Social isolation of households living in extreme poverty/affected by HIV/AIDS
  - Formation of support groups
- Households inability to access necessary information due to illiteracy levels
  - Literacy program part of the savings groups
- Child/Family Separation and Reintegration
  - Families’ improved ability to meet children’s basic needs has reduced incidences of child separation and increased child reintegration
Outcomes/ Impact – Yekokeb Berhan

<table>
<thead>
<tr>
<th>No. of Households</th>
<th>Destitute</th>
<th>Struggler</th>
<th>Growing</th>
</tr>
</thead>
<tbody>
<tr>
<td>CSI-I</td>
<td>3,018</td>
<td>42,493</td>
<td>3,386</td>
</tr>
<tr>
<td>CSI-II</td>
<td>142,321</td>
<td>160,575</td>
<td>14,204</td>
</tr>
<tr>
<td>CSI-III</td>
<td>167,867</td>
<td>180,000</td>
<td>167,867</td>
</tr>
</tbody>
</table>

Legend:
- Blue: Destitute
- Red: Struggler
- Green: Growing
### WORTH Rapid Assessment 2010 – 2011 Results

#### Key Results from an Evaluation of WORTH/Tanzania as Reported by OVC Caregivers (n:744)

<table>
<thead>
<tr>
<th>Category</th>
<th>WORTH Households</th>
<th>Non- WORTH Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>WORTH Savings</td>
<td>US$ 18 – 30*</td>
<td>US $ 3 - 6</td>
</tr>
<tr>
<td>Shelter &amp; Care</td>
<td>42% reported improved shelter &amp; care</td>
<td>18% reported improved shelter &amp; care</td>
</tr>
<tr>
<td></td>
<td>23% increase in permanent housing</td>
<td>6% increase in permanent housing</td>
</tr>
<tr>
<td>Food &amp; nutrition</td>
<td>78% have three meals a day</td>
<td>57% have three meals a day</td>
</tr>
<tr>
<td>Health</td>
<td>77% reported improved child health</td>
<td>65% reported improved child health</td>
</tr>
<tr>
<td>Emotional Health</td>
<td>36% reported improved child emotional well-being</td>
<td>19% reported improved child emotional well-being</td>
</tr>
</tbody>
</table>
Living Proof: A Caregiver in Her Own Words

- http://www.youtube.com/watch?v=WrtOgC80ikM#t=56
Lessons Learned

- Economic well-being is not only dependent upon economic strengthening interventions; it results from the interplay of multiple interventions targeting vulnerable households:
  - Including protection and psychosocial care, parenting skills, household gardening, and education support for children, among others.
- This mix of interventions help to keep children in families.
- Pact’s programs have documented cases of preventing child separation and child reintegration
- Caregivers have shared stories of how they were at the verge of giving away their children to be cared for by others or to seek work in order to support the family when the program reached them.
Sustainability of ES activities

**PEPFAR OVC Programming** (PEPFAR 2012 guidance)

- The interventions are scalable because the caregivers do it for themselves – hence breaking the dependency mentality
- Use of community facilitators who remain in order to support beyond program lifetime
- Strengthening local structures and systems: family, community, local CSOs, government