

Fourth Edition USAID Project Profiles: Children Affected by HIV/AIDS January 2005



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Table of Contents

Acronyms	. 5
Introduction	7
Africa	21
■ Burkina Faso 22 ■ Ethiopia 25 ■ Ghana 31 ■ Kenya 33 ■ Malawi 44 ■ Mozambique 49 ■ Namibia 57 ■ Nigeria 66 ■ Rwanda 73 ■ South Africa 78 ■ Tanzania 88 ■ Uganda 96 ■ Zambia 108 ■ Zimbabwe 120 ■ Africa Regional 125	
Education Activites in Sub-Saharan Africa1	147
Asia and the Near East1	157
■ Cambodia	
Europe and Eurasia	209
■ Russia	
Latin America and the Caribbean	213
■ Brazil .214 ■ Dominican Republic .217 ■ Haiti .221	
Global	223
Appendix: Previously Funded Projects for Children Affected by HIV/AIDS 2	247
Index: Project Profiles by Country and Primary Implementing Organization . 2	257

Acronyms

ACDI Agricultural Cooperative Development International

AED Academy for Educational Development

ARCH Applied Research in Child Health

ART Antiretroviral therapy

CBO Community-based organization

CEDPA Centre for Development and Population Activities

CHV Community health volunteer

CORE Communities Organized in Response to HIV/AIDS Epidemic

CRHCS Commonwealth Regional Health Community Secretariat

CRS Catholic Relief Services

CSW Commercial sex worker

DEMMIS District Education Management and Monitoring Information System

DfID Department for International Development (U.K.)

DOE Department of Education

EDC Educational Development Center

EDDI Education for Development and Democracy Initiative

EMIS Education management information system

FANTA Food and Nutrition Technical Assistance

FBO Faith-based organization

FHI Family Health International

FY Fiscal year

HBC Home-based care

HBCU Historically Black Colleges and Universities

HEARD Health Economics and HIV/AIDS Research Division (University of Natal)

IATT Inter-Agency Task Team

ICROSS International Community for the Relief of Starvation and Suffering

IEC Information, education, and communication

IMPACT Implementing AIDS Prevention and Care

INH Isoniazid

IRI Interactive radio instruction

JSI John Snow, Inc.

LIFE Leadership and Investment in Fighting an Epidemic

MAP Multi-Country HIV/AIDS Program for Africa (World Bank)

MCDI Medical Care Development International

MOE Minstry of Education

MOEYS Ministry of Education and Youth Services (Ghana)

MOH Ministry of Health

MTCT Mother-to-child transmission (HIV)

MTT Mobile task team

NGO Nongovernmental organization

OPA Older people association

PCI Project Concern International

PMTCT Prevention of mother-to-child transmission (HIV)

PTA Parent-teacher association

PVO Private voluntary organization

RCQHC Regional Centre for Quality of Health Care

REACH Rapid and Effective Action Against HIV/AIDS

REPSSI Regional Psychosocial Support Initiative

RTI Research Triangle Institute

SADC Southern Africa Development Community

SIDA AIDS

STI Sexually transmitted infection

TA Technical assistance

TASO The AIDS Support Organisation (Uganda)

UNAIDS Joint United Nations Program on HIV/AIDS

UNESCO United Nations Scientific, Educational and Cultural Organization

UNICEF United Nations Children's Fund

USAID United States Agency for International Development

VCT Voluntary counseling and testing

VOCA Volunteers in Overseas Cooperative Assistance

WFP World Food Program

YMCA Young Men's Christian Association

YWCA Young Women's Christian Association

Introduction

No generation is spared the catastrophic consequences of the HIV/AIDS pandemic. From newborn babies of HIV-positive mothers to elderly caregivers, the disease does not discriminate. One of the most tragic consequences is the toll on children. In 2003, more than 15 million children under age 18 had lost one or both parents to AIDS. Along with grief and abandonment, children in affected families face the added burdens of responsibilities far beyond their capabilities – nursing a sick or dying parent, raising younger siblings, running the household or family farm, replacing a breadwinner, or struggling for survival on city streets. An estimated 5 percent of children affected by HIV/AIDS worldwide have no support and are living on the streets or in residential institutions. Globally, approximately 2.1 million children under age 15 have HIV/AIDS.

But the pandemic's consequences go far beyond its effects on individual children's lives. It has devastated these children's families and the communities where they live. Millions of mothers and fathers who would otherwise be raising their children and playing key roles in their families and communities have died, and the surviving adults, as well as social institutions and community organizations, face overwhelming difficulties as they attempt to nurture, socialize, educate, and support so many children. Beyond the devastating impacts on emotional, economic, and social well-being, in a number of countries HIV/AIDS has also unraveled the substantial gains made in child health and survival in recent decades.

In response, activities supported by the U.S. Agency for International Development (USAID) have expanded in their number and range of services. With greater frequency, projects are addressing the complex and interconnected needs of children affected by HIV/AIDS. Services to children often include psychoso-

cial support, educational support, HIV prevention activities, income-generation activities, and health care. Reinforcing this multisector approach is the increased support to older persons who must shoulder the burden of raising, often alone, their grandchildren and great-grandchildren.

This fourth edition of *USAID Project Profiles:* Children Affected by HIV/AIDS presents profiles of 114 projects (90 country-specific, 12 regional, and 12 global) funded by USAID. The diversity of these projects demonstrates the determination of the U.S. government – and specifically USAID – to meet the wide variety of needs of children and adolescents affected by HIV/AIDS. Documenting their activities is designed to promote an exchange of ideas and information, leverage technical and financial resources, and encourage partnerships, collaboration, and coordination among programs supported by USAID, other U.S. agencies, new partners, and other donors.

This report contains information provided by the projects in the spring and summer of 2004. It does not, however, reflect the full extent of U.S. government support at the end of 2004 for orphans and vulnerable children. During the summer and fall of 2004, President Bush's Emergency Plan for AIDS Relief awarded 11 additional grants for support for orphans and vulnerable children to the following organizations:

- Africare Washington, D.C.
- Association of Volunteers in International Service – New York
- Christian Aid London
- Christian Children's Fund Richmond, Virginia

- Family Health International Durham, North Carolina
- HOPE Worldwide Wayne, Pennsylvania
- Plan International Warwick, Rhode Island
- Project Concern San Diego
- Project Hope Millwood, Virginia
- Salvation Army World Services Alexandria, Virginia
- World Concern Seattle

These projects are not included in this report, but this expanded programming under the President's Emergency Plan is further evidence of the United States' increased commitment to support for orphans and vulnerable children. Future editions of this report will detail the added support provided by the Emergency Plan and the collaboration it is building among all U.S. agencies who work in the area of care and support for orphans and

vulnerable children affected by AIDS. They will thus provide a more in-depth picture of the Emergency Plan's expanded investments in orphans and vulnerable children and the work of the U.S. government in mitigating the impact of the HIV/AIDS pandemic.

The profiles presented here have a common format that provides the names of implementing organizations, USAID funding periods and amounts, project objectives, strategies, key accomplishments, priority activities for the year ahead, and materials and tools available to other projects that can help meet the needs of children and youth affected by HIV/AIDS. The report also includes a section on USAID projects that support access to education in Africa, including projects that provide support to ministries of education. The final section describes previously funded projects that illustrate USAID's historic commitment to meeting the needs of children and youth affected by HIV/AIDS.

In updating the three previous editions of *Project Profiles* (October 2001, July 2002,

Funding Allocations Under President Bush's Emergency Plan for AIDS Relief

President Bush's Emergency Plan for AIDS Relief initiates new leadership for U.S. agencies working in HIV/AIDS prevention, treatment, and care services. The U.S. Global AIDS Coordinator, Ambassador Randall L. Tobias, directs the Emergency Plan and oversees all responsible departments and agencies of the federal government. USAID is responsible for administering funds and providing technical oversight for orphans and vulnerable children programming as part of the Emergency Plan's care component.

Under the Emergency Plan, programming for orphans and vulnerable children will receive 10 percent of the total funding approved by the U.S. Congress. Funding levels for the Emergency Plan's 15 focus countries will be allocated on the basis of approved country operation plans submitted by U.S. Embassies. Most of the Emergency Plan funds for orphans and vulnerable children will be disbursed through USAID field missions. Funding from USAID/Washington and field missions is occurring in intervals referred to as "tracks" numbered 1, 1.5, 2, etc., during the initial phases of the Emergency Plan. Some of the projects that have received these initial funds are represented in this report. For more information on the Emergency Plan, go to http://www.state.gov/s/gac/.

and September 2003), this edition also acknowledges the work tirelessly taken up every day by the people who make the projects possible.

USAID's Commitment to Children Affected by HIV/AIDS

In 2003, President George W. Bush brought new leadership to the challenges of HIV/AIDS with the launch of the President's Emergency Plan for AIDS Relief. The President's Emergency Plan signified a dramatic increase in support for orphans and vulnerable children, and in 2004 USAID received additional Emergency Plan funds intended for care activities that benefit children affected by HIV/AIDS. These new funds strengthen USAID's historical commitment to preserving families and expanding community responses. Since the first projects began in the early 1990s with the Displaced Children and Orphans Fund (DCOF), there has been an enormous expansion of support for children affected by HIV/AIDS. USAID now supports 102 projects in 27 countries and 12 projects working on a global level.

In addition to the Emergency Plan, the projects profiled in this report receive support from a variety of USAID funding sources, including the Child Survival and Health Programs Fund, Title II Food for Peace, basic education funds, DCOF, and the FREEDOM Support Act. Many of the projects also receive funding from other donors, further extending the reach and effectiveness of USAID support. Activities to provide care and support for HIV/AIDS-affected children and families are often integrated into larger projects in other sectors with objectives addressing the needs of all children. (Such projects are denoted in this report.) For example, since 1989 USAID has supported systemic reform of basic education in several countries, including those most dramatically affected by HIV/AIDS, and every country in the program has achieved gains in

school enrollment, educational quality, and efficiency.

Multifaceted Programming Approaches

Each of the 114 projects in this report aims to improve the lives of orphans and vulnerable children. How they achieve this varies in both strategy and scale. The vast majority of projects work with communities to identify opportunities that strengthen existing resources without undermining local ownership. In many places, communities are already mobilized and have systems in place to identify, protect, and provide basic necessities to the most vulnerable children. USAID supports the strengthening and monitoring of these existing activities. In other places, technical assistance providers facilitate mobilization of action around the needs of children and families affected by HIV/AIDS. Reaching into the lives of children may involve expanding voluntary counseling and testing and prevention of mother-to-child transmission (PMTCT) services to include the care and support of clients' children through home-based care.

All projects recognize that HIV/AIDS is more than a health crisis. All sectors of society – education, agriculture, business, and others – are dramatically affected by the pandemic, and all need to take part in the response. Nearly half of the USAID-funded projects profiled in this report reflect this need for multifaceted and multisector action by undertaking at least seven of the following activities:

- Providing psychosocial support to HIV/AIDSaffected children and families
- Enhancing food security or providing nutritional supplements for people affected by HIV
- Strengthening the economic status of households and communities through

income-generating activities, skills training, and microfinance.

- Providing access to health care or direct health services
- Advocating for increased awareness, policy reform, and stigma reduction
- Conducting HIV/AIDS prevention activities
- Providing educational assistance, such as payment of school-related expenses, support for community schools, and distance education programs
- Assisting families and community-based organizations to address the above men-

tioned actions and services for children affected by HIV/AIDS

Three areas receiving increasing attention by some projects are:

- Working with governments to formulate a comprehensive and coordinated national response to orphans and vulnerable children
- Building relationships with the private sector
- Focusing attention on securing child protection and rights

Providing Integrated Prevention, Care, and Treatment Services

No single intervention can adequately address the dynamic and destructive forces unleashed on a household affected by HIV/AIDS. The problems of children and families are complex and interlinked. All too often an ill caregiver receives home-based care while opportunities to provide prevention messages and psychosocial and economic support to other household members are missed. Fortunately, more and more programs are expanding to provide mutually reinforcing multisector initiatives for children affected by HIV/AIDS and their families.

Most of the projects represented in this report provide a combination of at least five types of services to children and their families (for example, nutrition, income-generating activities, home-based care, education assistance, and HIV prevention). There is increased recognition that children and youth become vulnerable well before the death of their ill caregivers, and support is thus starting sooner. The lack of parental support, both emotional and economical, makes youth particularly susceptible to engaging in risky behaviors.

There are several ways to achieve more integrated programming. One is to strengthen relationships between community and social welfare programs and basic services in other sectors such as health and education. Providing community schooling to orphans and vulnerable children can include messages on HIV prevention, as practiced by the Education Development Center in Zambia. Programs that support HIV-positive women and their families are being added to HIV/AIDS testing sites that offer PMTCT services. The World Vision project in Mozambique includes psychosocial support services for members of HIV/AIDS-affected households reached via a combination of integrated strategies including voluntary counseling and testing, PMTCT, and home-based care.

Strategic Framework for Action

Orphans and other children affected by HIV/AIDS have the same basic needs as other children, but the pandemic's impact is eroding family and community capacity to meet these needs. AIDS is having a negative impact on their education, nutrition, health, economic and food security, and emotional well-being. Increasingly, these children may slip through weakened family and community safety nets and end up living on the streets, in child-headed households, or in institutions.

Beyond enduring such hardships, these children may face increased vulnerability to HIV infection, violence, sexual coercion, and reduced access to essential services. The foundation of an effective USAID response must be to strengthen the capacity of families and communities to continue to provide care for vulnerable children and adolescents and thereby reduce the number of children struggling to survive on their own. Supplemental assistance and support services, such as provision of health care, food, school fees, etc., will still be needed because there will always be some who slip through the primary social safety nets. These supplemental services will, however, be overwhelmed if families and communities are unable to remain the basis of support for children and adolescents in AIDSaffected areas.

In October 2003, an opportunity arose to reinforce USAID's long-standing strategic approach to meeting the needs of children affected by HIV/AIDS. USAID joined a broad and diverse group of key stakeholders brought together by the United Nations Childrens Fund (UNICEF), with support from the Joint United Nations Program on HIV/AIDS (UNAIDS), to endorse a Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World With HIV and AIDS. This consensus document grew out of the fundamental strategies first introduced in the

1997 USAID report *Children on the Brink* and incorporates program guidance based on principles for programming that appeared in *Children on the Brink 2002*. The five strategies put forward in the *Framework* call for:

- Strengthening the capacity of families to protect and care for orphans and vulnerable children
- Mobilizing and supporting communitybased responses
- Ensuring access for orphans and vulnerable children to essential services
- Ensuring that governments protect the most vulnerable children
- Raising awareness at all levels of society to create a supportive environment for children affected by HIV/AIDS

The Framework is based on lessons learned from around the world over many years. It considers families and communities the foundation of an effective scaled-up response, recognizes the front-line role of communitybased organizations, and includes children and young people as key partners. The Framework recognizes that targeting only children affected by HIV/AIDS can exacerbate stigma and discrimination and advocates that protection, care, and support for orphans and vulnerable children be integrated with other programs designed to reduce poverty, promote children's well-being, and combat HIV/AIDS. USAID-supported efforts incorporate some or all of the *Framework*'s five strategies and thereby reinforce collaborative action needed by all groups concerned with the safety and well-being of orphans and vulnerable children.

1. Strengthening and supporting the capacity of families to protect and care for orphans and vulnerable children

The vast majority of children in HIV/AIDSaffected areas continue to live with surviving parents or their extended families. When HIV/AIDS affects a household, family relationships provide the most immediate source of support, and strengthening the capacity of families to care for orphans and vulnerable children must be at the core of a response strategy. Activities in this response include economic strengthening through support for and training in income generation and microfinance; increasing access to education; helping sick parents write wills and prepare for their children's futures; and training caregivers in supportive home-based care, including provision of food and treatment of AIDS-related conditions. In western Kenya, for example, the Speak for the Child Project trains mentors who then help caregivers improve the psychosocial, health, and nutrition care they provide children. Since the Project's inception, immunization rates among orphans and vulnerable

children increased from 44 to 95 percent and enrollment of eligible children in local preschools jumped from 10 to 94 percent. In addition, the Emergency Plan's work toward providing treatment for HIV-positive parents may have a positive effect on preventing orphanhood. These and many other supportive activities help in developing the capacity of families to care for their children.

2. Mobilizing and supporting communitybased responses to provide both immediate and long-term support to vulnerable households

For children whose families cannot provide for their basic needs, the community is the next safety net. Supporting community-led initiatives to care for children and adolescents affected by HIV/AIDS is therefore a USAID priority. Some USAID-funded activities provide direct support to community efforts, while others focus on building the capacity of local faith-based and other community organizations so that they in turn can support a greater number of community efforts. In many areas,

Support for Orphans and Other Vulnerable Children and Adolescents Affected by HIV/AIDS – Key Considerations

Magnitude. The global number of children orphaned by AIDS increased from 11.5 million in 2001 to 15 million in 2003. This number will continue to rise for at least another decade. Interventions must quickly be brought to a scale that can reach this vast and growing numbers of children and families.

Duration. The proportion of children who are orphans is already extraordinarily high in countries with advanced HIV epidemics. Even if HIV/AIDS rates began to decline now, levels of illness and death due to HIV/AIDS will continue to increase for almost a decade, because so many people are already infected. Interventions addressing the long-term needs of children and adolescents affected by HIV/AIDS must thus be sustained for at least two more decades.

Complexity. Children affected by HIV/AIDS suffer from the loss of caring adults, depletion of household financial resources, and the stigma and discrimination associated with the disease. Interventions must respond to this broad range of child and family needs.

communities have initiated activities themselves; in others, external efforts have mobilized community action. Actions that communities have taken to protect and support orphans and vulnerable children include:

- Visiting the most vulnerable children to provide emotional and material support
- Developing community gardens to assist vulnerable households
- Planting low-maintenance crops and distributing the produce to vulnerable households
- Organizing cooperative child care programs
- Raising funds for relief assistance to vulnerable individuals
- Organizing youth groups that use drama and music to encourage HIV prevention and compassion for people living with AIDS, their families, and orphans
- Organizing sports and recreation activities to promote the social integration of orphans
- Encouraging foster families to send orphans to school
- Encouraging schools to waive fees for orphans and vulnerable children
- Organizing community schools to begin to address orphan and vulnerable children issues and to destigmatize AIDS

In Zambia, the SCOPE project has established or strengthened 12 district committees and 130 community committees for orphans and vulnerable children and disbursed 131 subgrants to enhance the capacities of organiza-

tions and communities to carry out activities such as HIV/AIDS awareness, household economic support, education, and psychosocial support. More than 135,000 orphans and vulnerable children received support in 2003.

3. Ensuring access for orphans and vulnerable children to essential services

Partnerships with nongovernmental, faithbased, and civil society organizations are often critical in extending essential services to vulnerable communities. Over the years, more and more USAID-supported projects have adopted a continuum of prevention, care, and support services that also strive to provide or ensure access to essential services for orphans and vulnerable children. For example, the CONECTA project in the Dominican Republic works within the framework of the new national social security system to strengthen the integration and networking of services for children and families affected by HIV/AIDS. CONECTA works through existing private and public facilities to encourage a continuum of care among public, private, and community health and psychosocial support services.

Service delivery priorities and strategies across USAID-supported projects for children affected by HIV/AIDS vary but include a focus on:

- School enrollment and attendance
- Birth registration for orphans and vulnerable children
- Access to basic health and nutrition services
- Access to safe water and sanitation
- Judicial protections for vulnerable children

- Placement services for children without family care
- 4. Ensuring that governments protect the most vulnerable children through improved policy and legislation and by channeling resources to communities

No single ministry has sole jurisdiction over issues affecting orphans and vulnerable children. Governments must find ways to bring together education, finance, health, social welfare, and other ministries to respond in a coordinated and effective way. To meet this obligation, governments must undertake and receive support on a broad range of multisector actions. To fortify actions by governments,

USAID, in collaboration with UNICEF and others, has hosted regional conferences to support development and implementation of national policies and strategies in different regions of Africa. At these conferences, national delegates, including representatives of governments, donors, and implementing organizations, have reviewed national policies, guidance, and strategies, and outlined next steps for improving national responses.

5. Raising awareness at all levels of society to create a supportive environment for children affected by HIV/AIDS

No single stakeholder has the resources and capacity to mount an effective national

Principles to Guide Programming

Programs aimed at mitigating the effects of HIV/AIDS on children and their families can benefit from the principles developed by UNICEF, UNAIDS, and USAID and now incorporated into the *Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World With HIV and AIDS.** These principles evolved from widespread consultations with governments, nongovernmental organizations, international agencies, the private sector, community organizations, and young people. The principles apply at all levels – local, district, national, and global. They complement and expand upon the five programmatic strategies that provide a common point of reference for the various groups working to help children, families, and communities. The 12 principles are:

- Strengthen the caring capacities of families through community-based mechanisms
- Strengthen the economic-coping capacities of families and communities
- Enhance the capacity of families and communities to respond to the psychosocial needs of orphans and vulnerable children and their caregivers
- Foster linkages between HIV/AIDS prevention activities, home-based care, and efforts to support orphans and other vulnerable children
- Target the most vulnerable children and communities, not children orphaned by AIDS
- Give particular attention to how gender roles make a difference
- Involve children and adolescents as part of the solution
- Strengthen the role of schools and education systems
- Reduce stigma and discrimination
- Accelerate learning and information exchange
- Strengthen partnerships at all levels and build coalitions among key stakeholders
- Encourage actions that are child-centered and family- and community-focused

^{*} Available at www.unicef.org

response to the impacts of HIV/AIDS. Public, private, and civil society groups must develop a sense of shared responsibility for the protection and well-being of orphans and vulnerable children. USAID-supported projects carry out many activities to improve the social context for children and adolescents affected by HIV/AIDS. These activities include providing information and education on HIV/AIDS, challenging myths about HIV/AIDS, campaigning to reduce stigma and discrimination, and advocating for basic legal protections for persons living with HIV/AIDS and their families. Transforming the public perception of HIV/AIDS by engaging community, government, and religious leaders and the media to reach the wider community is also a critical function. Projects in Cambodia, for example, have developed models for cooperation among the military, Buddhist monks, and people living with AIDS to care for and support children affected by HIV/AIDS and their families. President Bush's Emergency Plan also seeks to encourage public-private partnerships that support strategies to mobilize and coordinate community initiatives, including industry and labor support for social protection programs for orphans and vulnerable children.

Supporting Alternatives to Institutional Care

Orphanages, children's villages, or other group residential facilities may seem a logical response to growing orphan populations. However, this approach can impede the development of national solutions to caring for orphans and vulnerable children. Such

institutions may be appealing because they can provide food, clothing, and education, but they generally fail to meet children's emotional and psychological needs. This failure, and its long-term ramifications, supports the conclusion of a study in Zimbabwe that countries – and children – are better served by programs that "keep children with the community, surrounded by leaders and peers they know and love."

The extended family and community are still the most important social safety nets for orphans, and disconnection from these support systems greatly increases an orphan's long-term vulnerability. Instead of encouraging independence and creative thinking, institutional life tends to promote dependency, discourage autonomy, and, in general, poorly prepare young people for eventual integration into community life. In addition, the cost of institutional care is many times higher than family- or community-based care,² and, with the large and growing number of orphans, it is essential that available resources be used to benefit as many children as effectively as possible.

For children who slip through the safety nets of extended family and community, arrangements preferable to institutional care include foster placements, adoption, surrogate family groups integrated into communities, and smaller-scale group residential care in homelike settings. Some residential institutions are recognizing their limited capacity to absorb children and adapting their programs to provide outreach and day support for vulnerable children. Such options must become far more

¹ Powell GM, Morreira S, Rudd C, Ngonyama PP. 1994. *Child Welfare Policy and Practice in Zimbabwe* (study of the Department of Pediatrics of the University of Zimbabwe and the Zimbabwe Department of Social Welfare). Zimbabwe: UNICEF.

² World Bank research in Tanzania found that institutional care was about six times more expensive than foster care. In Uganda, cost comparisons demonstrated that operating costs for an orphanage were 14 times higher than those for community care. Other studies have found ratios from 20:1 up to 100:1. (USAID, UNICEF, and UNAIDS. Children on the Brink 2002. Washington, D.C.: USAID.)

widespread than at present to further reduce reliance on residential institutions, and the projects profiled here are pioneers in developing such options. Until these options are more fully developed and implemented, institutions may be the only choice in certain circumstances and serve as an option of last resort, but they will never represent a cost-effective global solution to the problems of orphans and communities caring for them.

Making Progress Count

One of the major challenges facing governments, international organizations, and nongovernmental organizations in responding to the increasing number of orphans and other children made vulnerable by HIV/AIDS is the lack of data for monitoring and evaluation. Having information available that is reliable and consistent within and among countries is essential for policy and program planning and monitoring, national and global advocacy, decision making about the support that should be provided to families and communities, and focusing the different sectors and actors involved.³ Projects that plan time for identifying lessons learned and better practices through monitoring, evaluation, and research are equipped to use limited resources in the most efficient and effective ways possible.

In April 2003, USAID, along with a broad coalition of stakeholders, participated in the UNAIDS Inter-Agency Task Team on Orphans and Other Vulnerable Children to reach consensus on a set of core indicators for national-level measurement of the global goals for children orphaned and made vulnerable by HIV/AIDS. This group of experts distilled specific activities for improving the welfare of orphans and other children made vulnerable by HIV/AIDS into key domains that need to be

addressed and monitored at the national level. The key domains are:

- Policies and strategies
- Education
- Health
- Nutrition
- Psychosocial support
- Family capacity
- Community capacity
- National resources (expenditures) allocated to orphans and vulnerable children
- Child protection
- Institutional care and shelter

The gathering of information to monitor and evaluate progress within these domains must occur at both the national and program levels. Cohesive action to collect information from various levels will strengthen accountability and improve efforts intended to benefit children affected by HIV/AIDS. The majority of projects represented in this publication undertake program-level activities that include a combination of the domains listed above. USAID, in collaboration with other stakeholders, provides and supports technical assistance to national- and program-level initiatives. Mechanisms for monitoring and evaluating programs funded by the U.S. government include:

 Population-based surveys of care and support for orphans and vulnerable children

³ Framework for the Protection, Care and Support of Orphans and Other Children Made Vulnerable by HIV/AIDS, September 2003.

- Program monitoring of provider capacity and training
- Targeted evaluations of promising practices for outreach to and care for orphans and vulnerable children
- Management of information systems to strengthen data transmission and storage

In response to the need for methods to improve program data collection and its utility, USAID is supporting the production of a program monitoring and evaluation guide to help organizations serving children affected by HIV/AIDS and their families. The guide will be available in 2005 and will complement the national-level monitoring and evaluation handbook soon to be released by UNICEF. The guide will offer methods for determining and measuring relevant program-level indicators covering the key domains noted above (education, health, nutrition, etc.) and will also discuss linking monitoring and evaluation of program-level efforts with national responses.

In 2003, USAID participated in several targeted program evaluations, including the SCOPE project in Zambia, the STRIVE project in Zimbabwe, and the Social Action Trust Fund project in Tanzania. In each case, a participatory process facilitated the gathering of relevant information for immediate use for program improvements. Involvement of peers from outside the program coverage areas expanded the exchange of lessons learned and promising practices. Such evaluations can be used to expand and improve programming as well as to inform other programs on what does and does not work.

Advances are being made in determining how children are benefiting from USAID-supported activities. More and more projects are improving their methods of measuring their indicators to better capture outcomes in terms of changes in the lives of children affected by HIV/AIDS and their families. Household income levels, improved health status, and number of children completing primary education due to USAID-supported actions are among the indi-

Counting Beneficiaries

USAID aims to reach as many children as possible with improved programming. The majority of projects in this publication provide numbers, often several sets of numbers, of children who have received services and which services they have received. To make these numbers meaningful, projects face many challenges. Often there are multiple program components that reach a range of children affected by HIV/AIDS and their families. For example, a theatrical performance relating to stigma reduction reaches far more beneficiaries than support for individual children to attend primary school. Such numbers raise many questions about the depth and time span of services – Did the same child receive more than one service? If so, was this child counted once or twice as a beneficiary? Do the same children continue to receive services month after month? Do children graduate from needing services? If yes, at what point are they subtracted from the number of children being served? These are only some of the questions that arise when USAID tries to tally the total number of child beneficiaries of its programs. Such questions reflect the challenges that compound the task of defining who is a beneficiary. One way to advance more meaningful counting is to improve the monitoring and evaluation of initiatives aiming to benefit orphans and vulnerable children affected by HIV/AIDS. To this end, USAID and the President's Emergency Plan for AIDS Relief are intensifying their focus on gathering strategic information.

cators being tracked. In the future, key indicators for the Emergency Plan's strategy will be reflected in this report.

Research on ways to improve programming has expanded in the past year. The Pact/
Community REACH project is examining the effectiveness of selected interventions that serve orphans and vulnerable children aged 6 to 19 in Rwanda and Zambia and developing for broader use methods to determine program effectiveness. The project is also supporting research in four countries into topics such as orphan migration, older caregivers, care and support services, and foster care for orphans. Encouraging new partners to expand their networks and pursue innovative programming is part of the Emergency Plan and will be supported and expanded in fiscal year 2005.

The HORIZONS project has contributed research findings on the strengths and limitations of succession planning and mobilizing

young people as caregivers. HORIZONS found that young people can be a valuable resource in the care of persons living with HIV/AIDS and their children. HORIZONS is also gathering strategic information to determine the impact of home visits and mentoring programs on child-headed households and, with the Regional Psychosocial Support Initiative, is examining the influence of existing programs and community efforts on the psychosocial well-being of adolescent orphans and vulnerable children.

The Journey Ahead

We have the map for finding our way forward. Effective strategies and tools for assisting children and youth affected by HIV/AIDS exist and can be adapted to particular circumstances. Available funds are growing through a concerted U.S. government effort in conjunction with the President's Emergency Plan for AIDS Relief. With rapid, collective, and

National Responses to Orphans and Vulnerable Children

Action to stem the affects of HIV/AIDS on children requires a rapid, cohesive, and multifaceted response. The majority of USAID projects represented in this report focus on program-level efforts, i.e., strengthening family and community capacities to care for orphans and vulnerable children. Accelerated and coordinated action at the national level is also needed. Through direct technical assistance and regional workshops, USAID supports strengthening the responses of national governments to:

- Conduct participatory situation analyses
- Implement national policy and legislation to protect orphans and other children made vulnerable by HIV/AIDS
- Establish coordination mechanisms among partners
- Develop and implement national action plans for the protection and care of orphans and other children made vulnerable by HIV/AIDS
- Develop and implement monitoring and evaluation mechanisms

At the end of 2003, only 17 countries with generalized epidemics reported having a national policy for orphans and vulnerable children to guide strategic decision making and resource allocation. Through collaboration with UNICEF, USAID is committed to intensifying the focus on strengthening national responses to the crisis of children affected by HIV/AIDS. On top of this effort, President Bush's Emergency Plan is also committed to engendering bold leadership among national leaders to win the war against AIDS.

sustained action, more children can be reached. Achieving this requires determination to work beyond organizational boundaries and coordinate efforts. USAID supports a range of mechanisms that foster this needed coordination, including country-to-country exchange visits, town hall informational meetings, interagency working groups, the Children Affected by AIDS electronic discussion forum, regional consultations and training, and facilitation of national policy and strategy development. Beyond these activities, in an effort to simplify and expand access to materials by project implementers, USAID is supporting the launch of an electronic toolkit (Web-based and CD-ROM) in 2004 that will make it easier to access a wide range of articles, planning and implementation materials, training tools, and other resources.

Even with invigorated global commitment and dramatically increased funding, the number of children made vulnerable by HIV/AIDS continues to accelerate at a rate that far surpasses the current capacity of resources and efforts to care for them. Only through a unified effort can we truly begin to mitigate the impact of the epidemic on children and their families.

Africa



chard Marchew

Burkina Faso

COUNTRY:

Burkina Faso

PROJECT:

Supporting Nongovernmental Organization HIV/AIDS Service Expansion and Promoting Effective Responses to Address the Needs of Orphans and Vulnerable Children Affected by HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: International HIV/AIDS Alliance **Grantee:** Initiative Privée et Communautaire de Lutte Contre le VIH/SIDA

USAID FUNDING PERIOD:

September 1999-December 2005

USAID AMOUNT:

\$1,025,000

PURPOSE

This project works to improve the safety, living conditions, well-being, and prospects of the increasing number of orphans, other vulnerable children, and their families in 25 sites in Burkina Faso covering approximately 1.5% of the country's 12.6 million population (mid-2002 estimate). It aims to strengthen locally appropriate psychosocial, educational, health, and nutritional support and to enhance the children's and families' economic and social inclusion, thereby raising their social status.

To this end, the International HIV/AIDS Alliance works with the Initiative Privée et Communautaire de Lutte Contre le VIH/SIDA Burkina Faso (IPC), a national nongovernmental support organization, to mobilize and strengthen the capacity of local CBOs and other NGOs to facilitate community responses to orphans and other vulnerable children and to integrate services for orphans and vulnerable children into existing prevention and care activities.

The program aims to directly reach 20,350 orphans and vulnerable children through the following strategies:

- Mobilizing and strengthening communities to support orphans and vulnerable children and their families
- Increasing the psychosocial and economic capacity of families to care for orphans and vulnerable children and people living with HIV/AIDS
- Increasing the capacity of children and young people to satisfy their own needs and to participate in community responses to orphans and vulnerable children
- Capturing and sharing lessons learned to contribute to an enabling national policy and programmatic environment

KEY ACCOMPLISHMENTS

- Direct care and support services to 3,420 orphans and other vulnerable children
- Direct awareness raising about the situation of orphans and other vulnerable children with 3,200 adults
- Indirect awareness raising about the situation of orphans and other vulnerable with 20,000 children, youth, and adults

Burkina Faso

- Direct participatory prevention work with 6,580 vulnerable children and youth
- Direct care and support services to 5,520 women and indirect support to around 15,000 dependent children and youth
- Financial and technical support to 73 NGOs and CBOs to mitigate the impact of AIDS on orphans, vulnerable children, and affected households, and to link activities for orphans and vulnerable children with care and prevention activities
- Over 4,700 NGO and CBO staff, volunteers, and service providers involved in workshops, training, and sessions on HIV/AIDS services, participatory techniques, project development and management, administration, and financial management
- Support for preparing a national orphans and vulnerable children policy, with IPC as vice-chair of the steering committee providing input into a report on a situation analysis, cofinancing and co-organizing a validation workshop, and providing input into the next step of preparing the national strategy
- Launch of a pilot project with AQUADEV and STEP-ILO (organizations specializing in microfinance and health micro-insurance) to strengthen the socioeconomic capacity of affected communities for supporting orphans, other vulnerable children, and people living with HIV/AIDS

PRIORITY ACTIVITIES

 Design and start-up of MAP-funded program in support of orphans and other vulnerable children in five new provinces and integration into ongoing program

- Strengthen the capacity of families to care for orphans and vulnerable children and people living with HIV/AIDS through:
 - Strengthening economic activities, including developing a model to integrate microfinance, health micro-insurance, and HIV/AIDS prevention and impact mitigation strategies
 - Collaborating with stakeholders to ensure that households have access to existing services for orphans and vulnerable children (e.g., nutrition, health, hygiene, and educational programs)
 - Strengthening activities for orphans and vulnerable children in ongoing community-based care programs for people living with HIV/AIDS, with a focus on developing tools that promote communication between people living with HIV/AIDS and their children to better equip families to prepare for the future
- Increase the capacity of children and young people to satisfy their own needs and to participate in community responses to support orphans and vulnerable children by:
 - Promoting the development of national and local environments that encourage the participation of children and young people at all levels of the community
 - Strengthening IPC staff members and resource people to promote and facilitate participation at the community level
- Increase the capacity of children and young people to participate by facilitating access to formal and nonformal education, reinforcing their awareness and skills about children's rights and HIV/AIDS, and support-

Burkina Faso

ing initiatives to increase psychosocial strength and skills

- Strengthen the links between IPC's prevention work and vulnerable children and youth
- Capitalize on IPC's strategic position and strength to promote approaches that can be scaled up effectively or that facilitate and drive others to scale up by:
 - Continuing input into the development of national policies for orphans and vulnerable children
 - Maintaining a critical mass of resource people concerned with orphans and vulnerable children
 - Facilitating national workshops and participating in regional and international meetings

PROJECT MATERIALS AND TOOLS

 Guide to facilitate participatory community-level situation analysis and project planning for orphans and other vulnerable children (available from IPC electronically in French only)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Accessing resource people trained in community mobilization and orphans and vulnerable children issues
- Training NGOs and CBOs in community mobilization

- Developing policies, programs, and projects to address issues of orphans and vulnerable children
- Providing psychosocial support for orphans and vulnerable children
- Carrying out participatory communitybased assessments of the problems and opportunities faced by orphans and vulnerable children
- Strengthening the economies of households supporting orphans and vulnerable children and people living with HIV/AIDS

CONTACT INFORMATION

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COUNTRY:

Ethiopia

PROJECT:

Capacity Building for HIV/AIDS Prevention, Care, and Support

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: HIV/AIDS Prevention, Care and Support Organization; Beza Lehiwot; Wegen

Aden; others to be determined

USAID FUNDING PERIOD:

FY 2001-2007

USAID AMOUNT:

\$600,000 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The program aims to ensure that a complete range of interventions and programs is delivered to reduce the transmission of HIV and STIs and the impact of HIV/AIDS on the population. The program also strives to improve quality of life for persons living with HIV/AIDS through strengthening of the continuum of prevention, care, and support.

The process includes working with all stakeholders to build consensus and recognize the key role of each stakeholder, including the government. The consensus-building process helps stakeholders begin to develop the referral network that is key to an expanded and comprehensive response. A well-developed referral network allows individual stakeholders to provide a continuum of care for people and households affected by HIV and AIDS, because each implementing organization can offer the services it is best equipped to deliver and refer beneficiaries to other organizations when needed. This framework, in which different organizations provide different key interventions, with government playing a

coordinating role, allows the linking of prevention, care, and support so that efforts are focused both on reducing the spread of HIV and on improving the quality of life for those living with HIV and AIDS.

From their inception, interventions are designed to function within the prevention, care, and support continuum and are developed in collaboration with members of the targeted groups, community representatives, care providers, the Regional HIV/AIDS Prevention and Control Offices, other stakeholders, and the donor. As such, programming for orphans and vulnerable children is not a separate approach; rather, it is fully integrated in the continuum and is designed to build on efforts to strengthen community coping mechanisms.

KEY ACCOMPLISHMENTS

In the first half of FY 2004, Beza Lehiwot and Wegen Aden, two local NGOs active in Addis Ketema Kifle Ketema in Addis Ababa (formerly wereda 5), provided tutoring sup-

port to 270 orphans and vulnerable children (140 girls and 130 boys) from poor families in their target areas. Nonformal basic education sessions were provided to 36 children (20 girls and 16 boys) who are not going to school.

- Community mobilization activities reached 978 persons and included community discussion on orphans and vulnerable children issues and HIV/AIDS.
- In the first half of FY 2004, volunteer caregivers engaged in home- and communitybased care identified 3,603 orphans and vulnerable children (1,821 girls and 1,782 boys) in their target communities and started providing basic care services to these children.
- In the first half of FY 2004, FHI worked with the Forum for Street Children Ethiopia, the Amhara HIV/AIDS Prevention and Control Office, and the Amhara Bureau of Labour and Social Affairs to conduct a baseline assessment to investigate the needs of orphans and vulnerable children in Bahir Dar, Gonder, and Dessie.

PRIORITY ACTIVITIES

- In Oromia and the Southern Peoples Nations and Nationalities Region (SNNPR), finish selecting areas of concentrated vulnerability based on findings of baseline assessments
- In these areas of concentrated vulnerability, finalize assessment of the organizational capacity of local organizations already providing home-based care and/or support services to orphans and vulnerable children

- In Amhara, Oromia, and SNNPR, work with the selected mentoring organizations to enlist idir (existing community self-help structures) to provide a community-based approach to care and support for persons living with HIV/AIDS and their families
- In Addis Ababa, Amhara, Oromia, and SNNPR, work with the selected mentoring organizations, idir, and other CBOs engaged in FHI's home- and communitybased care projects to organize, mobilize, and formalize a network of local stakeholders
- Provide technical assistance to mentoring organizations, idir, and other CBOs engaged in FHI-supported home- and community-based care projects

PROJECT MATERIALS AND TOOLS

The following are available upon request:

- Baseline assessment tools (mapping, care and support services assessment, people living with HIV/AIDS needs assessment, capacity assessment, behavior change communication formative assessment)
- Addis Ababa, Amhara, Oromia, and SNNPR baseline reports
- FHI HIV/AIDS Institute Program in Ethiopia: An Expanded and Comprehensive Response to HIV and AIDS
- FHI HIV/AIDS Institute Program in Ethiopia: Behavior Change Communication for HIV/AIDS
- The FHI/Ethiopia Home and Community-Based Care Approach

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Orphans and vulnerable children program design within the continuum of prevention, care, support, and referral networks
- Organizational strengthening
- Financial management
- Partnership with economic strengthening projects

CONTACT INFORMATION

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COUNTRY:

Ethiopia

PROJECT:

Improved Family Health and Maintaining Human Dignity of the Poorest

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services (CRS) **Grantees:** Missionaries of Charity; Medical Missionaries of Mary; Organization for Social

Services for AIDS

USAID FUNDING PERIOD:

FY 2003-2007

USAID AMOUNT:

\$2,382,656 (a portion supports children and families affected by HIV/AIDS)

PRIORITY ACTIVITIES

The project addresses HIV/AIDS as a crosscutting issue, focusing on raising awareness and understanding of HIV/AIDS (particularly among women) and promoting prevention education. The strength of community-level interventions provides opportunities for harnessing all community-level workers (e.g., agricultural extension agents, development

agents, community health workers, and water point attendants) and health facility personnel to work together to increase knowledge about HIV/AIDS and promote behavior change or behavior maintenance. At the partner level, HIV/AIDS information dissemination is incorporated into all training programs and integrated with government efforts.

The overall objective of the project is to promote and maintain the basic human dignity of the poorest of the poor.

In this follow-on development assistance program, Catholic Relief Services has focused its safety net program so that it provides support only to well-established organizations that are providing essential care and support for persons living with HIV/AIDS and for orphans and vulnerable children. The project subobjective is to meet the immediate humanitarian needs of 43,186 of the poorest of the poor in 15 urban and semi-urban areas throughout Ethiopia on a consistent basis.

KEY ACCOMPLISHMENTS

Following are the annual beneficiary numbers for the care and support interventions:

- The Missionaries of Charity assist through their 15 homes approximately 7,640 orphans due to HIV/AIDS and other vulnerable children; 9,458 HIV patients; and 22,802 other destitute and chronically sick beneficiaries.
- The Organization for Social Services for AIDS assists 1,000 orphans due to HIV/AIDS and 500 people living with HIV/AIDS in four locations (Addis Ababa, Nazareth, Harar, and Dire Dawa).

■ The Medical Missionaries of Mary assist 1,000 HIV/AIDS-affected people (200 orphans, 106 people living with HIV/AIDS, and 694 family members and caretakers) in Addis Ababa.

PRIORITY ACTIVITIES

Provide care and support to HIV/AIDS-infected and -affected people, including psychosocial support, food, educational support, medicine, and clothing

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in community mobilization and linking care and prevention.

CONTACT INFORMATION

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USAID/Washington: Cathy Brown (cabrown@usaid.gov)

USAID/Ethiopia:

Holly Fluty Dempsey (hdempsey@usaid.gov) Susan Anthony (santhony@usaid.gov)

COUNTRY:

Ethiopia

PROJECT:

Pact Community REACH (Rapid and Effective Action Against HIV/AIDS)

IMPLEMENTING ORGANIZATIONS:

Primary: Pact

Grantee: Hiwot HIV/AIDS Prevention, Care and Support Organization (HAPSCO)

Collaborating organizations for HIV testing:

Mary Joy AID Through Development;

Betezata Private Clinic

USAID FUNDING PERIOD:

July 2002-July 2005

USAID AMOUNT:

\$173,283

PURPOSE

The purpose of the project is to enhance the quality of life of those infected and affected by HIV/AIDS by providing accessible and efficient home care and by enhancing the collective capacity of the community to provide care and support.

KEY ACCOMPLISHMENTS

- 277 orphans and vulnerable children received regular psychosocial support and materials (e.g., school uniforms and other educational materials); 121 of these children received nutritional supplements.
- 50 volunteers (community outreach workers) received home-based care training.
- 61 idir (self-help associations formed by neighbors and residents of the same district) were assisted to form a union and incorporate into their association's bylaws the issue of provision of care and support for persons living with HIV/AIDS and children orphaned by AIDS.
- 69 leaders from 61 idir participated in a sensitization workshop. The project workshop served as a forum to advocate for

increased community participation in the care and support of persons affected by or living with HIV/AIDS.

68 individuals, representing CBOs, persons living with HIV/AIDS, elders, anti-AIDS clubs, youth, pertinent government offices, and NGOs participated in a project workshop on human rights.

PRIORITY ACTIVITIES

- Provide psychosocial support to orphans and other vulnerable children and persons living with HIV/AIDS
- Provide nutritional education and promote traditional food habits and counseling
- Recruit and train volunteer caregivers
- Train 50 volunteers (40 community activists and 10 people living with HIV/AIDS) on issues of human rights so they can disseminate that information to the community
- Initiate income-generating activities for persons living with HIV/AIDS and children orphaned by AIDS

PROJECT MATERIALS AND TOOLS

The following materials can be requested by mail:

- Nutritional needs assessment
- Home-based care training module

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Mentoring and materials on providing home-based care
- Community mobilization
- Engaging CBOs in HIV/AIDS-related activities

CONTACT INFORMATION

Pact Community REACH: Polly Mott, Program Director (reachgrants@pacthq.org)

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Ghana

COUNTRY:

Ghana

PROJECT:

POLICY Project Ghana

IMPLEMENTING ORGANIZATIONS:

Primary: Futures Group

Grantees: Ghana AIDS Commission; Ghana Department of Social Welfare; National AIDS Control Program of the Ghana Health Service **USAID FUNDING PERIOD:**

September 2003-September 2004

USAID AMOUNT:

\$75,000

PURPOSE

To support the development of a national policy guideline for orphans and vulnerable children

KEY ACCOMPLISHMENTS

The POLICY Project is providing evidence-based updates on the situation of and responses to orphans and vulnerable children by various government and NGO partners. For example, in the recent *AIDS in Ghana* update, about 26,000 children aged 0 to 14 years may be infected with HIV and between 250,000 and 300,000 children under age 14 are orphans from AIDS- and non-AIDS-related causes.

PRIORITY ACTIVITIES

- Through participatory dialogue, develop and seek the endorsement of a common framework and policy guidelines that underpin national program implementation for orphans and vulnerable children
- Develop a national framework for the protection, care, and support of orphans and vulnerable children

- Advocate for scaling up programs for orphans and vulnerable children
- Mobilize and guide substantially increased partnerships, resources, and action plans

PROJECT MATERIALS AND TOOLS

POLICY/Ghana is using the SPECTRUM series of reproductive health and HIV/AIDS policy analysis tools to carry out the fourth update of the Ghana AIDS Impact Model application, which will contain estimates of orphans and other children made vulnerable by AIDS. The products will be available on the POLICY project Web site by late July 2004.

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Assist national policy and strategy development
- Develop policy analysis tools to assess the burden of orphans and vulnerable children

Ghana

- Provide evidence-based updates of the situation of and responses to orphans and vulnerable children
- Support ongoing initiatives in HIV/AIDS programs that will result in developing national action plans and strategies for OVC programming

CONTACT INFORMATION

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Kenya

COUNTRY:

Kenya

PROJECT:

COGRI Lea Toto Community-Based Project for the Care of HIV-Positive Orphans

IMPLEMENTING ORGANIZATION:

Children of God Relief Institute (COGRI)

USAID FUNDING PERIOD:

August 2003-July 2005

USAID AMOUNT:

\$750,000

PURPOSE

The project's purpose is to mitigate the impact of HIV/AIDS and decrease the risk of HIV transmission by providing a comprehensive homebased care package. This will be achieved through the following five objectives:

- Provide 1,000 HIV-positive children and an estimated 5,000 family members with highquality home-based care and counseling services
- Provide a package of social support services to at least 50% of the 1,000 HIV-positive children and their families
- Improve the organizational capacity of the Lea Toto project to deliver high-quality care and counseling services for HIV-positive children and their families
- Improve the ability of targeted local communities to prioritize the needs of HIV-positive children and their families and carry out activities to meet these needs
- Provide the target communities with the skills necessary to negotiate, support, and maintain safe behaviors

KEY ACCOMPLISHMENTS

- Established a satellite center in one new sub-location (Kawangware)
- Expanded to six locations (Kangemi, Kawangware, Ruiru, Waithaka, Ruthimitu, and Mutuini)
- Identified and enrolled 649 HIV-positive children in the project
- Provided routine antibiotic prophylaxes and simple medications for clients and family members
- Established two caregiver solidarity groups
- Created one economic self-help group
- Began microfinance project for women in targeted families
- Established strong working collaborative relationships with six NGOs in the target area and with key stakeholders

PRIORITY ACTIVITIES

- Identify clients eligible for ART
- Promote VCT

Kenya

- Carry out pre-enrollment assessments
- Provide clinical care for home-bound clients
- Plan for permanency of the activities
- Provide support for economic sustainability

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

 Physical and psychological care to children and their families

- Counseling services to caregivers
- Income-generating activities

CONTACT INFORMATION

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USAID/Kenya:

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COUNTRY:

Kenya

PROJECT:

Community-Based Program for HIV/AIDS Prevention, Care and Support (COPHIA)

IMPLEMENTING ORGANIZATIONS:

Primary: Pathfinder International
Grantees: Population Services International;
Kenya Rural Enterprise Program; Kenya
Network of Women with AIDS; Redeemed

Gospel Church; Integrated AIDS Program of Catholic Diocese of Thika; Widows and Orphans Welfare Society of Kenya; Kenya AIDS Intervention Prevention Program; more than 20 other CBOs

USAID FUNDING PERIOD:

June 1999-March 2005

USAID AMOUNT:

\$7,263,189

PURPOSE

Launched in 1999, COPHIA helps local communities and CBOs identify, develop, manage, and implement a wide range of HIV/AIDS prevention, care, and support activities for persons living with HIV/AIDS and their families. Project activities are facilitated through a network of local implementing partners that include CBOs, FBOs, and AIDS support organizations and programs. COPHIA assists these organizations in eight districts of Kenya, a total catchment area of more than 10 million people.

Key program strategies and activities include:

- Prevention activities targeting in-school and out-of-school youth, emphasizing the "ABC" (Abstinence, Be faithful, consistent and correct use of Condoms as appropriate) strategy; risk behavior reduction; and stigma reduction
- Provision of home-based care for persons living with HIV/AIDS through networks of community health workers, trainers, and supervisors

Kenya

- Training of caregivers in basic care, nutrition, and infection control
- Two-way referrals between community and health facilities
- Community resource mobilization through networks of community implementation committees
- Support initiatives, such as community- and facility-based HIV counselor training and linkages to emotional, spiritual, legal, education, and economic support services
- Strengthening of orphan and vulnerable child support services through linkages with local partners, addressing health, education, nutrition, and general welfare programs
- Stakeholder participation and advocacy, with emphasis on greater involvement of people living with AIDS
- Income-generation activities and safety nets funded through microcredit activities targeting caregivers, home-based care clients, and mature orphans
- Institutional capacity building of local partners through specific training in program and fiscal management, program planning and development, monitoring and evaluation and direct funding for care and support activities

KEY ACCOMPLISHMENTS

- Trained more than 900 community health workers
- Provided home-based care and support services to more than 17,000 clients since the start of the program, averaging 1,500 new clients every quarter

- Trained over 36,000 caregivers in nutrition, nursing care, and prevention
- In 2003-2004, trained 100 paralegal advisors to assist widows and orphans in issues of inheritance, property disposal, and succession
- During the program year 2003-2004, trained more than 80 community and facilitybased HIV counselors
- In 2003-2004, assisted 9,000 orphans with home-based care services and educational and nutritional support services
- In 2003-2004, provided business management training and microcredit loans to more than 200 caregivers, health workers, and mature orphans
- Began a rapid response fund grant program for local community-based organizations to access support for HIV/AIDS-related programs and activities
- Conducted a survey of home-based care clients that determined demographic profiles of clients and average number of orphans and vulnerable children per client household

PRIORITY ACTIVITIES

- Support household food security in rural and urban households through the development of a nutritional field school and urban gardening projects
- Expand support in education and nutrition initiatives through local implementing partnerships

Kenya

- Provide specialized training in organizational and program management capacity for local implementing partners and collaborators
- Expand cadre of community health workers, trainers and supervisors, and HIV counselors to provide home-based care and support services
- Expand number of VCT centers at referral facilities
- Provide refresher training for health workers in prevention of mother-to-child HIV transmission, the role of community health workers in ART, and family counseling and referral services

PROJECT MATERIALS AND TOOLS

- Home-based care survey tool
- Home-based care training curriculum
- Home-based care workbook for community health workers and caregivers

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training of home-based care providers
- Training of home-based care trainers/facilitators, supervisors
- Capacity building in fiscal and program development/management

CONTACT INFORMATION

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COUNTRY:

Kenya

PROJECT:

Leadership and Investment in Fighting an Epidemic (LIFE)

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services (CRS) **Grantees:** Adventist Relief and Development Agency, Kenya; Food for the Hungry

International, Kenya; World Vision, Kenya;

Archdiocese of Mombassa; Pathfinder International; Children of God Relief Institute

USAID FUNDING PERIOD:

FY 2002-2005

USAID AMOUNT:

\$6,663,840 (\$1,570,000 in monetization commodities and \$5,093,840 in distribution commodities; this proportion may change as field practicalities dictate)

PURPOSE

The project aims to provide 5,000 children affected by HIV/AIDS and 25,000 indirect beneficiaries in seven districts in Kenya with food resources.

The monetization and distribution commodities from the LIFE initiative have been incorporated into and used to strengthen other ongoing projects that support orphans and vulnerable children.

Activities undertaken to meet the above objective include:

- Community mobilization for the continuous identification of project beneficiaries, such as children affected by HIV/AIDS (including orphans), children in child-headed households, and children who have lost at least three family members to HIV/AIDS
- Registration of project beneficiaries
- Distribution of a monthly food ration to beneficiaries as part of a short-term mitigation effort aimed at addressing some of the food needs of households impacted by HIV/AIDS

KEY ACCOMPLISHMENTS

- 5,000 project beneficiaries were identified.
- As of September 2003, 824.7 metric tons of corn/soy blend (CSB) and 120.08 metric tons of oil were distributed to an average of 4,523 households (average for FY 2003) on a monthly basis.
- Household rations of 12.5 kilograms of CSB flour and 2 liters of vegetable oil (2.18 kg) were distributed to beneficiaries as part of a comprehensive package of home-based care activities.
- The ability of children benefiting from the program to concentrate better in school, due in part to improved nutrition from receiving one nutritious meal per day and the subsequent reduced susceptibility to disease and infections, was observed to improve.
- Reports were received from caregivers of beneficiaries that the provision of food rations to households freed up household income for other expenses such as pens and books for the children and fuel.

Kenya

PRIORITY ACTIVITIES

- Incorporate the additional 20,000 children affected by HIV/AIDS in Kilifi District (one of the districts already in the LIFE program) targeted under the grant from the President's Emergency Plan for AIDS Relief
- Strengthen HIV/AIDS education in ongoing program activities to improve the care and prevention linkage

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Home-based care
- Counseling of orphans and vulnerable children
- Community mobilization
- Linking care and prevention

- Training community health workers
- Strengthening program monitoring and evaluation

CONTACT INFORMATION

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COUNTRY:

Kenya

USAID FUNDING PERIOD:

August 2002-September 2004

PROJECT:

Pact Community REACH (Rapid and Effective Action Against HIV/AIDS)

USAID AMOUNT:

\$234,060

IMPLEMENTING ORGANIZATIONS:

Primary: Pact

Grantee: International Community for the Relief of Starvation and Suffering (ICROSS)

PURPOSE

The purpose of the project is to:

■ Improve the lives of persons living with HIV/AIDS and their families through home-

based care and the development of support groups

 Develop systems to care for orphans and vulnerable children through community mobilization, links to networks of CBOs (including FBOs), and integration of governmental and nongovernmental services

 Improve the economic and social situation of vulnerable families by increasing access to community and government social services

KEY ACCOMPLISHMENTS

- 7,659 orphans and vulnerable children benefited from counseling and family support activities.
- 77 service providers and caregivers received training in care and support of orphans and vulnerable children.
- The strengths of existing community systems and structures were identified so they can be developed to provide care and support for more than 400 orphans and vulnerable children.
- Training and sensitization sessions were held for community leaders to address weaknesses in community systems.
- The project negotiated for structures to accommodate for orphans and vulnerable children.
- Project activities ensured that orphans and vulnerable children have access to relevant quality education.

PRIORITY ACTIVITIES

- Identify women living with HIV/AIDS and help them address, in a socially acceptable manner, issues of succession, inheritance, and access to legal aid
- Help orphans connect with other support organizations

Encourage the formation of groups to support services and activities for orphans, other vulnerable children, and persons living with HIV/AIDS to ensure that children are aware of their rights.

PROJECT MATERIALS AND TOOLS

■ Training of trainers in home-based care

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in community mobilization and homebased care.

CONTACT INFORMATION

Pact Community REACH Headquarters: Polly Mott, Project Director (reachgrants@pacthq.org)

ICROSS Field:

Augustine Wasonga, Program Development Director (icrosskenya@extremeusers.com)

USAID/Washington:

Ron MacInnis (rmacinnis@usaid.gov)

Kenya

COUNTRY:

Kenya

PROJECT:

Speak for the Child

IMPLEMENTING ORGANIZATION:

Academy for Educational Development

(AED)

USAID FUNDING PERIOD:

Pilot Phase: August 2000-February 2003 Expansion Phase: January 2003-March 2005

USAID AMOUNT:

Pilot Phase: \$530,340

Expansion Phase: \$750,000

PURPOSE

The goal of the project is to support families and communities to improve the health, nutrition, and psychosocial care and development of orphans and vulnerable children age 5 and under.

Core program activities include:

- Regular home-visiting by mentors to support vulnerable households and coach them to solve problems in nutrition, health, and psychosocial and cognitive care
- Provision of preschool fees to send children in vulnerable families to local preschools
- Immunizations and health cards
- Capacity building for Speak for the Child community committees working to increase human and financial resources for better care of young children
- Capacity building for local women's groups, self-help groups, and FBOs to become local implementing partners and to identify orphan households, assess needs, and deliver services
- Support groups for caregivers and visiting mentors that provide guidance, a social network, and economic support

KEY ACCOMPLISHMENTS

- 560 orphans and vulnerable children were enrolled in the program and reached each month.
- 9 community organizations received assistance in caring for orphans and vulnerable children each month.
- 95% of enrolled orphans and vulnerable children were fully immunized (44% immunized at enrollment; 51% immunized by project).
- 94% of eligible children were enrolled in local preschools (10% enrolled before the project began).
- 100% of project "graduates" were enrolled in primary school.
- Behavior changes among caregivers were achieved as follows:
 - Verbal interactions 57% of caregivers are talking to the children; telling stories; trying to talk in a gentle manner or to shout less; and trying to listen more.
 - Stimulation 49% of caregivers are spending more time with the young children, providing play materials, and encouraging them to play and socialize.

- Discipline 48% of caregivers are trying to replace beating as their main disciplinary method with talk and explanations.
- Night terrors 49% of caregivers have understood and allayed young children's fears by explaining death and the parents' absence and by reassuring children about fears of abandonment.
- Nutrition 59% of caregivers are combining and enriching foods to improve the diets of children under 5.
- Feeding 61% of caregivers feed young children more frequently during the day.
- Food production 88% of caregivers have planted new crops or have prepared land for planting.
- Hygiene 74% of caregivers are washing children with soap more regularly and washing dishes and drying them on dish racks.

PRIORITY ACTIVITIES

- With new NGO and CBO partners, program scale-up in other communities of western Kenya (Bungoma, Busia, Vihiga, and others), including training, regular technical assistance and trouble-shooting, and monitoring
- Complete coverage of orphans in South Kabras and expanded program services in East and West Kabras
- Adaptation of administrative, training, implementation, and monitoring tools to needs of diverse NGOs and CBOs
- Documentation and dissemination of adaptations and lessons learned during scale-up through local NGOs and CBOs

PROJECT MATERIALS AND TOOLS

- Speak for the Child: A Case Study provides a detailed program description, lessons learned, and suggested adaptations.
- Speak for the Child: A Program Guide with Tools provides step-by-step information on program implementation. The following tools are included:
 - Connecting with the community
 - Community surveys to identify and target young orphans and vulnerable children
 - Training guide for community volunteers implementing surveys
 - Household intake guide for use by mentors visiting caregivers of orphans and vulnerable children
 - Baseline tools to assess and monitor the development of young orphans and vulnerable children
 - Mentor training manual that includes counseling and home visit protocols
 - Manual for mentors implementing home visiting program
 - Guidance for mentor and caregiver support groups
 - Monitoring and evaluation tools for child and caregiver outcomes, home visits, immunization, preschool, and support groups

Tools can be obtained by contacting Joy Okinda in Kenya at aed@africaonline.co.ke. or Sarah Dastur in Washington, DC at sdastur@aed.org.

Kenya

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training in listening and problem-solving approaches for home visitors
- Nutrition, health, and child development counseling for children aged 5 and under
- Approaches to community mobilization
- Survey research
- Volunteer supervision
- Early childhood development
- Community-based care for orphans and vulnerable childre
- Monitoring for services and commodities

 Evaluation of activities for orphans and vulnerable children

CONTACT INFORMATION

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COUNTRY:

Kenya

PROJECT:

Teso Child Survival Project

IMPLEMENTING ORGANIZATION:

World Vision International

USAID FUNDING PERIOD:

September 2001-September 2006

USAID AMOUNT:

\$1,295,302 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The project's purpose is to reduce morbidity and mortality among children under 5 years old and mitigate the impact of HIV and AIDS on children under 15 years old. Activities include:

- Capacity building of organizations addressing the needs of orphans
- Medical examinations and treatment of orphans through support to the Ministry of Health
- Income-generating activities for orphan caregivers

Kenya

Training of village health committee members and community health workers on child survival initiatives to prevent serious illnesses among vulnerable children with limited access to health facilities

KEY ACCOMPLISHMENTS

- Provided 430 free mosquito nets to orphans and other vulnerable children through caregivers identified during social marketing training courses and to orphanages
- Distributed gifts such as clothes to orphans through groups that identify them
- Trained 12 health workers on psychosocial support methods to support caregivers and orphans

PRIORITY ACTIVITIES

 Scale up activities for orphans and vulnerable children through PMTCT programming

CONTACT INFORMATION

World Vision/ Kenya:
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World Vision/Washington, D.C.: Peggy McLaughlin (pmclaugh@worldvision.org)

USAID/Kenya: Cheryl Sonnichsen (csonnichsen@usaid.gov)

USAID/Washington: Susan Youll (syoull@usiad.gov)

COUNTRY:

Malawi

PROJECT:

Child Survival Program

IMPLEMENTING ORGANIZATIONS:

Primary: World Relief

Grantee: Church of Central Africa Presbyterian Synod of Livingstonia **USAID FUNDING PERIOD:**

October 2000-September 2004

USAID AMOUNT:

\$823,389 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The project aims to achieve the following:

- Reduce mortality and morbidity among children aged less than 5 years and women of childbearing age
- Strengthen capacity of the Synod of Livingstonia primary health care staff in implementing child survival interventions
- Empower communities to address their health issues

KEY ACCOMPLISHMENTS

- 58,824 orphans and vulnerable children have been provided services.
- 218 care groups have been assisted.

PRIORITY ACTIVITIES

The project will undergo its final evaluation in July 2004.

PROJECT MATERIALS AND TOOLS

Best practices (care group structure, health innovations, health information system, curriculum development, training modules)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Community mobilization
- Community-based training
- Mentoring
- Monitoring and evaluation

CONTACT INFORMATION

World Relief:

Sandress Msiska (sandressmsiska@malawi.net)

USAID/Washington:

Susan Youll (syoull@usaid.gov)

COUNTRY:

Malawi

PROJECT:

Home-Based Care for Chronically Sick People and Care for Orphans and Other Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: The Salvation Army; Light House; Word Alive Ministries; Trinity; Friends of AIDS

Trust; Family Health Education Care and Counseling; Namwera AIDS Counseling Centre; Mponela AIDS information and Counseling Center

USAID FUNDING PERIOD:

October 2002-September 2006

USAID AMOUNT:

\$6,500,000 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

FHI is supporting the development of an integrated home-based care program for chronically sick persons and for orphans and other vulnerable children to be implemented in Malawi's central and southern regions. In July 2002, FHI conducted an initial rapid assessment. From the assessment results, FHI and USAID identified the five districts of Blantyre, Chikwawa, Dowa, Mangochi, and Nsanje in which to implement the integrated home-based care/orphans and vulnerable children program. A subsequent assessment was carried out in November 2002 to identify and determine the capacity of potential implementing partners, to explore avenues for enhancing coordination and collaboration, and to strengthen referrals to the health system.

Care and support will be provided to more than 5,000 chronically ill people and to at least 10,000 children drawn from these households and others considered vulnerable in the community.

Interventions will include:

Providing psychosocial support

- Training volunteers and care committees in management and support skills for orphans and vulnerable children
- Equipping volunteers and providing them with incentives
- Supporting children's education
- Supporting and strengthening client referrals
- Developing linkages with formal health care facilities and other service providers

In addition, the project will enhance coordination and monitoring of community care activities for the chronically sick and orphans and vulnerable children by working closely with existing supportive structures.

KEY ACCOMPLISHMENTS

Between October 2003 and March 2004, the following achievements were realized:

 5,453 orphans and vulnerable children (4,318 of them orphans) received support.
 The care provided included counseling support for 1,709 children, first-time

placement of 332 children in schools, 43 referrals for health care, vocational skill training for 40 children, and food support for 2,756 children.

- 122 community mobilization events/meetings were held to sensitize the community on orphans and vulnerable children issues.
- 89 community initiative groups (eight orphans and vulnerable care committees, eight community AIDS care committees, 69 village AIDS care committees, and four NGOs) received training.
- 12 home-based care service providers underwent training of trainers.
- 164 community volunteers received training.

PRIORITY ACTIVITIES

- Provide technical assistance to Ministry of Gender and Community Services to review the training manual for orphans and vulnerable children
- Provide more comprehensive services and increase coverage
- Strengthen an integrated approach to providing services
- Increase material assistance to orphans and vulnerable children through linkages and referrals, particularly for food and nutrition support and educational materials
- Conduct a baseline assessment of homebased care for orphans and vulnerable children in the catchment areas of the implementing partners
- Conduct refresher training for implementing partners and government partners in

home-based care for orphans and vulnerable children and monitoring and evaluation

PROJECT MATERIALS AND TOOLS

The following project materials and tools are available and can be accessed at the addresses listed:

- FHI/Malawi Home-Based Care and Support to Orphans and Vulnerable Children – Assessment, July-August 2002 (FHI Malawi, Arwa House, Box 30455, Lilongwe 3, Malawi (ckay-saccur@FHI.ORG)
- Developing a Comprehensive Monitoring and Evaluation Work Plan for HIV/AIDS and STIs, 2003 (National AIDS Commission of Malawi, Box 30362 Lilongwe 3, Malawi [nac@aidsmalawi.org.mw])
- Training Manual on Orphan Care (Ministry of Gender and Community Services, Private Bag 330, Lilongwe, Malawi)
- National Policy on Orphans and Vulnerable Children (Ministry of Gender and Community Services, Private Bag 330, Lilongwe, Malawi)
- Best Practices on Community-Based Care for Orphans (Ministry of Gender and Community Services, Private Bag 330, Lilongwe, Malawi)

TECHNICAL ASSISTANCE

FHI technical officers can provide training in home-based care and interventions for orphans and vulnerable children that include program design, community and resource mobilization, psychosocial support for affected households, proposal writing, and monitoring and evaluation.

CONTACT INFORMATION

FHI/Malawi:

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FHI/Virginia:

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USAID/Malawi:

Elise Jensen (ejensen@usaid.gov) Alfred Chirwa (achirwa@usaid.gov)

Mexon Nyirongo (mnyirongo@usaid.gov)

COUNTRY:

Malawi

PROJECT:

Safety Net

USAID FUNDING PERIOD:

February 2000-September 2004

USAID AMOUNT:

\$14,309,000 (total for five-year program)

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services (CRS)

Grantee: Catholic Development Commission

in Malawi

PURPOSE

The project aims to enhance food access for orphans, other vulnerable children, and households by providing food rations to households with persons living with HIV/AIDS and families caring for orphans and other vulnerable children. The project is being implemented in 42 villages in Phalombe and 42 villages in Chikwawa. Staff help identify and verify vulnerable households, individuals, and orphan care committees. Agriculture development facilitators and growth-monitoring volunteers select the eligible vulnerable children and monitor their nutritional status.

The overall goal is to improve access to food and increase the feeding and care of children and sick adults infected and affected by HIV/AIDS through community-based care organizations. The objectives are to:

- Increase adoption of child care practices by guardians and families caring for orphans
- Increase community participation in providing for destitute children and vulnerable groups
- Increase the self-reliance of older orphans

KEY ACCOMPLISHMENTS

- The project has provided rations to 4,382 orphans aged 5 and under; 3,657 orphans aged 6 to 18; and 9,095 other vulnerable children (612 of whom are chronically ill).
- 6,000 households have participated in agricultural production activities; demonstration plots have been established; and 98 communal gardens have been established in both Phalombe and Chikwawa.

- 27 local community-based artisans received training in various skills (carpentry, metal sheet work, pottery, bakery) and then trained 328 older orphans in specific skills; another 530 older orphans will also receive this training.
- 170 growth-monitoring volunteers have been trained, and training has begun for volunteer caregivers for established child care centers.
- Community-based child care centers have been established in 40 localities.
- 86 community organizations received support.
- 2,233 orphans are attending school, a 5.6% increase from last year.

PRIORITY ACTIVITIES

- Consolidate child survival/health and Safety Net linkage
- Support vocational training for eligible orphans and other vulnerable children
- Consolidate activities in early childhood development centers and communitybased child care centers
- Consolidate agriculture and Safety Net linkage
- Consolidate use of graduation criteria for beneficiaries
- Support collaboration linkages with other development stakeholders, such as the ministries of gender and community services; youth; agriculture, irrigation, and food security; and community services

PROJECT MATERIALS AND TOOLS

■ Project indicators

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Linking agriculture and natural resource management
- Supporting community initiatives
- Supporting establishment and capacity building of CBOs
- Strengthening community mobilization
- Monitoring health care, nutrition, and growth
- Distributing food to vulnerable households
- Strengthening agricultural productivity

CONTACT INFORMATION

Catholic Relief Services (CRS)/Malawi: Hanna Dagnachew (hdadnachew@crs-malawi.org) Tel: 265-175-5534

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USAID/Malawi:

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COUNTRY:

Mozambique

PROJECT:

Maputo Corridor AIDS Prevention Project, Kuhluvuka – Corridor of Hope

IMPLEMENTING ORGANIZATION:

Foundation for Community Development

USAID FUNDING PERIOD:

October 2001-September 2004

USAID AMOUNT:

\$365,000

PURPOSE

The Foundation for Community Development, a Mozambican organization, implements a community-based HIV/AIDS prevention and care program in the Maputo transport corridor (Maputo City, and Maputo, Gaza, and Inhambane provinces). The Mozambican government's National Strategic Plan for Combating HIV/AIDS gives priority to the transport corridors.

The overall project focuses primarily on prevention, but activities to address the needs of people living with HIV/AIDS and orphans and vulnerable children are included as an integral part of impact mitigation. Under the umbrella of the Kuhluvuka project, the care and support initiative for orphans and other vulnerable children started in June 2002. The intervention emphasizes establishing community involvement to identify and address the needs of orphans and other vulnerable children and mobilizing community leaders to initiate support programs for those infected and affected.

The Foundation, in collaboration with the Ministry of Women and Social Action, has completed a comprehensive orphans and vulnerable children strategy. The strategy focuses on meeting the needs of orphans and

vulnerable children in five major areas – education, citizenship, nutrition, health, and psychosocial support.

KEY ACCOMPLISHMENTS

- Signed four subgrants that are providing psychosocial support to identified orphans and vulnerable children and extended families; will mobilize communities to register children as citizens, thus enabling free or subsidized access to education and health care
- Completed an orphans and vulnerable children strategy
- Initiated four pilot projects along the Maputo transport corridor
- Completed mapping and identification of orphans and vulnerable children
- Designed community initiatives to meet needs of 1,400 in health, nutrition, and health care
- Through the Anglican Church, established a vocational training center for youth that particularly targets orphans and vulnerable children

IEC campaigns are well under way, focusing primarily on personal and social behavior change, with orphans and vulnerable children one of the campaigns' target groups

PRIORITY ACTIVITIES

- Conduct research, analysis, and needs assessments to identify the best approaches to meet the needs of orphans and vulnerable children in the corridor or its segments
- Develop and implement an education strategy for orphans and vulnerable children
- Develop a community mobilization strategy that includes leadership mobilization and psychosocial response
- Provide training to community leaders, organization staff, and orphans to enable them to be peer leaders and to deliver specific products and services
- Carry out research, coordinated with community-based partners and government, on the number and situation of orphaned children to inform the national strategy for orphans and vulnerable children
- Build the capacity of communities to recognize solutions that meet the needs of orphans and vulnerable children and help communities meet those needs
- Sensitize communities to reduce the stigma associated with HIV/AIDS and ignorance about HIV/AIDS
- Expand vocational training for youth, with a special emphasis on orphans and vulnerable children

PROJECT MATERIALS AND TOOLS

- Educational materials for youth are available in a variety of formats
- IEC materials, both mass media and direct, under development, including materials to raise awareness among the general population about the plight of orphans and vulnerable children

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Organizational capacity building
- Design of a comprehensive orphans and vulnerable children strategy
- Monitoring and evaluation
- Community mobilization

CONTACT INFORMATION

Foundation for Community Development: Eduarda Cipriano (educipriano@fdc.org.mz)

USAID/Mozambique: Carol Culler (cculler@usaid.gov)

COUNTRY:

Mozambique

PROJECT:

RITA (Reduced Impact and Transmission of HIV/AIDS)

IMPLEMENTING ORGANIZATIONS:

Primary: World Vision International

Grantee: Development Aid from People to

People/Mozambique

USAID FUNDING PERIOD:

January 2004-April 2005

USAID AMOUNT:

\$3,800,001 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

To expand and enhance current HIV/AIDS activities in Zambezia and Sofala provinces over a 15-month period by:

- Improving the quality of life and resilience of orphans and vulnerable children
- Improving the quality of health and life of HIV-infected people and their families
- Reducing HIV transmission and improving treatment referrals by increasing access to VCT services
- Reducing mother-to-child HIV transmission

RITA will mobilize and train community care coalitions to assume the principal responsibility for the well-being of their children, working through home visitors to identify, monitor, protect, and provide material, spiritual and psychosocial support to orphans and vulnerable children in the community. The coalitions and visitors will provide home-based care and psychosocial support to chronically ill persons in the community.

Quantitative goals include:

- 206 community care coalitions established
- 2,474 home visitors trained

- 24,735 orphans and vulnerable children provided with care and support
- 4,811 persons living with HIV/AIDS provided with care and support
- 149 home-based care activists trained
- 1,945 referrals to VCT centers

KEY ACCOMPLISHMENTS

The project staff have been hired and trained, and community-based activities have just begun.

PROJECT MATERIALS AND TOOLS

 Guide for Mobilizing and Strengthening Community-Led OVC Care (a global World Vision resource used by RITA)

CONTACT INFORMATION

World Vision/United States: Mark Vander Vort markvandervort@worldvision.org

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World Vision/Africa Regional: Martha Holley Newsome Phone (27) 11 375 4645 martha_newsome@wvi.org USAID/Mozambique: Carol Culler (cculler@usaid.gov)

COUNTRY:

Mozambique

PROJECT:

Strengthening Community Responses to Orphans and Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: International HIV/AIDS Alliance Grantees: Kubatsirana; Ajúda Mútua (Mutual

Help); Associação Nacional para o

Desenvolvimento Auto-Sustentável (National Association for Sustainable Development)

USAID FUNDING PERIOD:

October 2003-June 2004

USAID AMOUNT:

\$400,000 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

This project works to improve the safety, living conditions, well-being, and prospects for the increasing number of orphans and other vulnerable children and their families in the provinces of Sofala and Manica in central Mozambique. It aims to strengthen locally appropriate psychosocial, educational, health, and nutritional support and to enhance the economic and social inclusion of the children and their families, thereby raising their social status.

The purpose of the program is to:

- Mobilize and strengthen the capacity of local CBOs, FBOs, and other NGOs to facilitate community responses to orphans and other vulnerable children and to integrate services for orphans and vulnerable children into existing prevention and care activities
- Establish community involvement to identify and address the needs of orphans and vulnerable children and mobilize community

leaders to initiate support programs for those infected and affected

 Scale up support for orphans and vulnerable children by identifying additional partners for program implementation

PRIORITY ACTIVITIES

- Develop and implement an education strategy for orphans and vulnerable children to include local and national advocacy, a drop-in center, and exemption from school-related expenses
- Improve the quality of health and nutrition of orphans and vulnerable children through more comprehensive home-based care training and services
- Improve the psychosocial well being of orphans and vulnerable children
- Raise community awareness of HIV/AIDS and of care and impact mitigation

■ Facilitate the scaling up of activities for orphans and vulnerable children

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Capacity building in organizational, managerial, and institutional development
- Community mobilization
- Capacity building of peer educators and home-based caregivers
- Linking care and prevention

CONTACT INFORMATION

International HIV/AIDS Alliance:
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USAID/Washington: Ron MacInnis (rmacinnis@usaid.gov)

USAID/Mozambique: Carol Culler (cculler@usaid.gov) Karen Shelley (kshelley@usaid.gov)

COUNTRY:

Mozambique

PROJECT:

Technical Support to Accelerate the Planning for and Expansion of Orphan and Vulnerable Children Support Services to Mozambique

IMPLEMENTING ORGANIZATION(s):

To be determined

USAID FUNDING PERIOD:

May 2004-September 2005

USAID AMOUNT:

\$750,000

PURPOSE

Assistance will be provided through a twopronged approach. First, technical assistance will be provided to the Ministry of Women and Coordination of Social Action (the ministry responsible for orphans and vulnerable children) to help Mozambique establish a coherent and effective national response to the growing number of orphans and vulnerable children. Actions to be taken include:

- Conducting a participatory situation analysis to clarify the current and projected challenges
- Reviewing policy and legislation relevant to safeguarding children's property and inheritance rights
- Developing a national action plan, with estimated costs, to assist orphans and vulnerable children

 Establishing a national system to monitor coverage and quality of services provision to vulnerable children

At the same time, grant support will be provided to one or more NGOs to expand support services to reach additional children and strengthen the ability of CBOs and FBOs to sustain services for orphans and vulnerable children.

KEY ACCOMPLISHMENTS

The Ministry of Women and Coordination of Social Action uses its National Action Plan for orphans and vulnerable children to prioritize and implement government services to these children and to obtain support from donors for those priorities for which governmental funds are not available.

PRIORITY ACTIVITIES

- Complete situation analysis
- Review policy and legislation relevant to protecting children's rights
- Develop a national action plan with estimated costs and begin implementation to assist orphans and vulnerable children in selected provinces
- Develop national guidelines for training volunteers in providing services for orphans and vulnerable children

PROJECT MATERIALS AND TOOLS

- Situation analysis to be available around December 2004
- National orphans and vulnerable children action plan with estimated costs – to be available around March 2005
- Policy documents for orphans and vulnerable children in Mozambique – to be available around June 2005
- Guidelines for service provisions for orphans and vulnerable children – to be available around September 2005

CONTACT INFORMATION

Ministry of Women and Coordination of Social Action:

Joel Calaso, Chief of Planning, Studies and Social Development (jccalaso@hotmail.com)

USAID/Mozambique: Carol Culler (cculler@usaid.gov)

COUNTRY:

Mozambique

PROJECT:

Tshembeka Mobilizing for Care

IMPLEMENTING ORGANIZATION:

World Relief

USAID FUNDING PERIOD:

January 2004-March 2005

USAID AMOUNT:

\$1,998,704

PURPOSE

The goal of Tshembeka Mobilizing for Care is to strengthen households affected by HIV/AIDS through community home care and to support and equip church-based volunteers to mitigate suffering and provide a productive future for families affected by AIDS, orphans, and other vulnerable children. World Relief will augment these efforts with small-scale economic strengthening projects and limited food security programs.

Core components of the strategy include strengthening the capacity of extended families, wide-scale community response through churches, and helping families proactively address the impacts of AIDS in order to reduce the effects of AIDS on children.

The project will support children affected by HIV/AIDS through:

- Preparations for the death of a parent and proactive planning for the care of children
- Crisis intervention and counseling for the orphan surrounding the death of a parent
- The development of an enhancing environment and family support system for surviving children

The project aims to meet the following objectives:

- Strengthen the capacity of 860 churches to develop and implement their own support program for families affected by HIV/AIDS
- Make bimonthly, weekly, or daily (depending on need) visits to 12,900 families affected by AIDS using 4,300 church volunteers and provide basic care and food security assistance when possible
- Engage 860 churches in identifying children whose families are vulnerable to the impact of AIDS and who live within a 2 kilometer radius of a church and support them through family, church, and community volunteers
- Mobilizing Youth for Life activity Involve youth through community churches and schools to visit families and orphans affected by AIDS, help support the families, and aid them in guiding their own decisions to choose and maintain an AIDS-free life

Activities will be conducted in the three provinces of Maputo, Gaza, and Inhambane.

KEY ACCOMPLISHMENTS

Activities were recently funded.

PRIORITY ACTIVITIES

Over the next 12 months, the Tshembeka Mobilizing for Care project will engage 860 churches and 4,300 volunteers in 43 sites. The project will build upon previous efforts of mobilizing over 350 churches in Gaza, Inhambane, and Maputo. Volunteer sustainability will be strengthened through integrating training and care for volunteers into church programs, supporting churches in publicly recognizing their volunteers, and encouraging participation by volunteers, animators, and pastors in a food security project.

PROJECT MATERIALS AND TOOLS

- Living Hope for Africa: The Church Responds to the AIDS crisis (Chaangan, Portuguese) – Interactive video to mobilize church action in AIDS, including section specifically addressing orphans
- Choose Life (Portuguese) Youth manual
- Hope at Home (Chaangan, Portuguese) –
 Home care manual for low-literacy groups
- Our Children (Portuguese) Manual for church-based orphan support, companion to home care manual
- Tsembeka (Chaangan, Portuguese) Story brochure for workplace
- Helpers for a Healing Community (Chaangan, Portuguese) – Pastoral counseling manual
- Facing AIDS Together (Portuguese, Chaangan-questions only) – Interactive training curriculum for community banks

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Materials development
- Community mobilization
- Home-based care

CONTACT INFORMATION

Project:

Country Director, World Relief Mozambique – Samuel M. Grottis (sgrottis@wr.org) HIV/AIDS Director, World Relief Mozambique – Joaquina Nhanala (jnhanala@wr.org)

USAID/Mozambique: Carol Culler (cculler@usaid.gov)

COUNTRY:

Namibia

PROJECT:

Assistance to Government Ministries for National Plan of Action for Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International (FHI)/IMPACT

Grantees: Ministry of Women's Affairs and Child Welfare; Ministry of Health and Social Services

USAID FUNDING PERIOD:

September 2002-March 2005

USAID AMOUNT:

\$425,000

PURPOSE

Through technical support to the Ministry of Women's Affairs and Child Welfare, the project aims to:

- Inform key stakeholders about the complexity of the issues associated with orphans and vulnerable children
- Strengthen networks, linkages, and multisectoral alliances to create a more enabling environment to plan for the needs of orphans and vulnerable children at the national level
- Assist with implementing the goals of the United Nations General Assembly Special Session on HIV/AIDS
- Increase responsive programming for orphans and vulnerable children
- Establish regular quality assessments of programs for orphans and vulnerable children

To achieve these aims, the project will help the Ministry of Women's Affairs and Child Welfare develop and implement a national plan of action for children supported by the orphans and vulnerable children permanent task force. Assistance will be offered to encourage the placement of a technical advisor for orphans and vulnerable children in the Ministry and the establishment of subcommittees for orphans and vulnerable children and child development. Additional technical assistance will be provided to improve the program management capacity of key stakeholders, including NGOs and FBOs.

KEY ACCOMPLISHMENTS

- The national policy on orphans and vulnerable children was completed and endorsed by the Ministry of Women Affairs and Child Welfare.
- Piloting of the national orphans and vulnerable children monitoring and evaluation toolkit was completed.
- The national orphans and vulnerable children trust fund is in operation.

PRIORITY ACTIVITIES

 Endorsement of the national policy on orphans and vulnerable children by the Cabinet and Parliament

- Implementation of the national policy on orphans and vulnerable children
- Official national launch and implementation of the national monitoring and evaluation toolkit for orphans and vulnerable children
- Implementation of a national identification system for orphans and vulnerable children
- Third national conference on orphans and vulnerable children
- Tracking usage of the monitoring and evaluation tool

PROJECT MATERIALS AND TOOLS

- National policy on orphans and vulnerable children
- Toolkit on monitoring and evaluation of activities for orphans and vulnerable children

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Technical assistance for training
- Technical assistance for IEC materials

CONTACT INFORMATION

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USAID/Namibia:

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COUNTRY:

Namibia

PROJECT:

Human Rights and Legal Support for Orphans and Vulnerable Children and People Living With HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: AIDS Law Unit-Legal Assistance Centre

USAID FUNDING PERIOD:

April 2001-September 2004

USAID AMOUNT:

\$273,767 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The project focuses on preventing and mitigating HIV/AIDS in the workplace in Namibia and on reducing the vulnerability of children by addressing discrimination and promoting a human rights-based approach to HIV/AIDS.

The project works to establish a legal and social environment that encourages openness about HIV infection in which people with HIV/AIDS receive fair and equitable treatment from society.

The project addresses issues of discrimination and other rights issues pertaining to HIV/AIDS on a number of levels including litigation, research, policy formulation, education, advocacy (with a view toward placing HIV/AIDS on the agenda as a human rights issue), and the provision of free basic client services in terms of legal advice and assistance to people with HIV/AIDS.

The project operates a legal advice clinic for people living with and affected by HIV/AIDS at the offices of Catholic AIDS Action in Katutura. Attendance at the clinic is consistent. The main issues addressed include the drafting of wills, maintenance, and social security claims; insurance; unprofessional conduct on the part of medical practitioners, including breaches of confidentiality; and adoption. The clinic also serves as an important referral agency for problems that are not of a legal nature.

The AIDS Law Unit works closely with other AIDS service organizations in Namibia, including, under this project, Catholic AIDS Action, AIDS Care Trust, and organizations of people living with HIV/AIDS such as Lironga Eparu. The project provides to staff members of these and other organizations training on inheritance, writing wills, basic rights, and access to benefits and entitlements.

KEY ACCOMPLISHMENTS

■ The AIDS Law Unit was instrumental in assisting the ministries of education (higher and basic education) with the consultative process and the development of a new national policy on HIV/AIDS for the entire education sector. The new policy reinforces the constitutional right to free primary education and provides information on obtaining a waiver of school development fees for orphans and vulnerable children.

- The AIDS Law Unit led the process of developing a national policy on orphans and vulnerable children with the Ministry of Women's Affairs and Child Welfare. The policy has been finalized and approved by the Minister of Women Affairs and Child Welfare and will be presented to the Cabinet shortly.
- The project trained 1,106 community paralegals, community volunteers, and peer educators on the rights of orphans and vulnerable children and will writing.
- The project helped 231 orphans and vulnerable children get access to benefits through the free legal clinic.
- The project hosted a preparatory meeting for Namibian AIDS service organizations, NGOs, and other civil society representatives for the United Nations General Assembly Special Session on HIV/AIDS.

PRIORITY ACTIVITIES

- Disseminate and provide training on the national orphans and vulnerable children policy
- Review new legislation relating to child protection to ensure that the vulnerability of children and young people in the context of the epidemic is adequately addressed
- Engage in research and advocacy in order to address the underlying socioeconomic causes that fuel vulnerability to HIV

PROJECT MATERIALS AND TOOLS

- Guide to the Namibian HIV/AIDS Charter of Rights
- A publication on inheritance and wills

- A publication on HIV and pregnancy
- A pamphlet, T-shirts, and a series of posters on HIV treatment literacy
- Training pamphlets on HIV/AIDS in the workplace, HIV/AIDS insurance, social benefits, and the rights of children orphaned by or living with HIV/AIDS
- Pocket-size guide HIV/AIDS in the Workplace

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

 Capacity building in proposal writing; planning; advocacy skills; HIV, human rights, and workplace policies; and policy formulation; HIV and human rights in the region and facilitating South-South exchanges of expertise in this area

CONTACT INFORMATION

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USAID/Namibia:

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COUNTRY:

Namibia

PROJECT:

Psychosocial Support Training for Orphans and Other Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Philippi Trust, Namibia

USAID FUNDING PERIOD:

November 2002-September 2004

USAID AMOUNT:

\$88,000

PURPOSE

The goal of the project is to increase the wellbeing of orphans and other vulnerable children by building the capacity of communities to provide psychosocial support via youth volunteers. Project staff developed a psychosocial support curriculum and training services for home-based care volunteers and teachers in Namibia. Based on this expertise, the Philippi Trust will expand training and the curriculum to teach youth to provide support and care to orphans and vulnerable children in their communities. Staff work with existing youth groups and churches to increase involvement in help-

ing vulnerable children in their communities through experiential learning camps.

KEY ACCOMPLISHMENTS

- Conducted nine listening and responding workshops for 265 young people
- Conducted four psychosocial support training workshops for 60 group leaders
- Conducted seven experiential learning camps for 465 orphans and vulnerable children
- Established eleven kids clubs
- Held a focus group discussion on the impact of loss

PRIORITY ACTIVITIES:

- Conduct three more listening and responding workshops
- Conduct two more psychosocial support workshops for group leaders
- Conduct three more experiential learning camps for orphans and vulnerable children
- Establish 12 additional kids clubs by group leaders
- Translate the youth curriculum into two local languages and make it available for use by other agencies

PROJECT MATERIALS AND TOOLS

Psychosocial support curriculum for youth

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Psychosocial support training for orphans and other vulnerable children
- General counseling training (certificate to diploma level) and specialist counseling training in addictions and sexual abuse
- Training in supervision for experienced counselors to enable them to supervise other counselors
- Training of trainers in counseling and homebased care
- Counseling training in HIV prevention for church leaders

CONTACT INFORMATION

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COUNTRY:

Namibia

PROJECT:

School Program for the Prevention of Violence, Sexual Abuse, and HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: LifeLine/Childline

USAID FUNDING PERIOD:

February 2002-December 2004

USAID AMOUNT:

\$171,789 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The goal of the project is to address the issues of abuse of and sexual violence against children. LifeLine/Childline is implementing a child-focused program to complement its existing counseling and hotline services. The project aims to break the cycle of trauma, specifically violence, to children through a program focusing on children of primary school age and involving adults, including committed teachers and parents.

The program teaches children about sexual assault and abuse and how to prevent them from happening, and gives children the skills to respond to unwanted sexual approaches and deal with strangers. It also teaches children about HIV/AIDS and sexuality before they become sexually active. In addition, lay counselors and teachers are trained to recognize abused children and provide them with initial support and counseling and then refer them to specialized counselors and child protection services when needed.

The project works to improve the access of vulnerable and abused children to special counseling and other services in line with the International Convention on the Rights of the Child. LifeLine/Childline also seeks to increase the capacity of the communities covered by the school program to address the needs

of children at risk of, or traumatized by, sexual assault.

KEY ACCOMPLISHMENTS

- Reached more than 62,700 schoolchildren in the past five years in eight regions, with USAID funding directly affecting approximately 23,700 of these children over the past two years
- Visited 338 classes in more than 61 schools with the drama program as of March 2003, reaching an average of 5,900 children per quarter, with all children receiving promotional items
- Reached teachers at 15 different schools with a seven-hour teacher workshop to provide them with the skills necessary to identify and support traumatized children
- Referred 32 children for child therapy with various therapists in the Oshana, Erongo, Khomas, and Hardap regions, some of whom will receive several months of therapy to support the healing process
- Fully trained 106 lay counselors by March 2004, with more to graduate in the coming months (average time for fully training one lay counselor approximately nine months)

PROJECT MATERIALS AND TOOLS

- Video film Feeling Yes, Feeling No
- IEC materials for children (collectors cards) on issues of protection and the rights of children
- CD-ROM version of radio production of Feeling Yes, Feeling No program
- Teacher workshop curriculum on basic care for traumatized children and support strategies to identify and support traumatized children

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

Training for lay people to become counselors through a three-phase training course (Phase One focuses on personal growth and awareness, Phase Two focuses on basic counseling skills, and Phase Three provides hands-on practical training)

 Identifying and supporting traumatized children through teacher workshops that provide basic tools

CONTACT INFORMATION

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COUNTRY:

Namibia

PROJECT:

Schooled for Success: Promoting Full School Participation by Orphans and Other

Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Catholic AIDS Action

USAID FUNDING PERIOD:

May 2001-September 2004

USAID AMOUNT:

\$486,229

PURPOSE

The objective of the project is to ensure that orphaned and vulnerable children succeed in school. The project goals are to promote full school participation for identified orphaned

and vulnerable children (with emphasis on increasing the educational opportunities for girls) and to provide psychosocial and other kinds of support in four regions in Namibia where Catholic AIDS Action has ongoing

home-based care programs. Through positive relationships with local school personnel and lay leaders, fee waivers have been obtained from all primary schools serving the children. Those who are most needy also receive school uniforms and supplies in partnership with a local retailer. After-school clubs with supplemental feeding have been formed in seven locations across the country.

Catholic AIDS Action has expanded the function of its home-based care program volunteers to include identification and registration of needy orphans and vulnerable children. Volunteers are trained to use a simple questionnaire and a request-for-assistance form.

The project works closely with the Ministry of Women's Affairs and Child Welfare, the Ministry of Basic Education, Sport, and Culture, other line ministries, church groups, and NGOs on the national and regional levels involved with orphans and vulnerable children.

KEY ACCOMPLISHMENTS

- 8,442 orphans and vulnerable children registered as needy in the four regions have received support (only orphans and other vulnerable children who are considered needy are registered).
- 176 school-age orphans and vulnerable children who never attended school are now attending.
- 4,170 orphans and vulnerable children have received school uniforms or assistance.
- 8,442 orphans and vulnerable children have benefited from psychosocial support.
- Volunteer assessment of the needs of orphans and vulnerable children has been completed.

- The orphans and other vulnerable children household data form has been finalized and implemented.
- In close collaboration with FHI, USAID, other NGOs, and the Namibian government, Catholic AIDS Action developed and pilottested a monitoring and evaluation system which will be of use to the government and NGOs working to support orphans and vulnerable children in Namibia.
- Seven two-week training-of-trainers courses were held for representatives from across the country on the psychosocial needs of orphans and vulnerable children. An extra week of training was provided for people without extensive background in HIV/AIDS issues.
- Community-level training in psychosocial support is being implemented countrywide.

PRIORITY ACTIVITIES

- Hold additional training-of-trainers workshops in Namibia for Catholic AIDS Action and other NGO staff and volunteers
- Begin planning a program to train senior learners as assistants on psychosocial issues
- Provide psychosocial training to all volunteers (more than 1,600) and to hostel staff at church-affiliated schools
- Expand training in HIV prevention, health education, and the rights and needs of orphans and other vulnerable children to teachers, volunteers, and community leaders in all regions
- Based on the availability of legal assistance training programs, train selected volunteers as community paralegals

PROJECT MATERIALS AND TOOLS

- Orphans and other vulnerable children household data form
- Handbook on child resilience in three languages
- Children's storybook on the constitutional right to free primary education in three languages
- Psychosocial training curriculum in three languages

TECHNICAL ASSISTANCE

The project can provide expertise and written materials to other projects for orphans and vulnerable children in the following areas:

- Home-based counseling and care
- Organizational structure and training
- Training in psychosocial support
- Care for caregivers

CONTACT INFORMATION

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C. Kirk Lazell (klazell@usaid.gov)

COUNTRY:

Nigeria

PROJECT:

Orphans and Vulnerable Children Project Implementation

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: Justice, Development and Peace of the Catholic Archdiocese of Onitsha,

Anambra State; Methodist Care Ministry, Abakaliki, Ebonyi State; Methodist Women's Fellowship, Ilesha, Osun State

USAID FUNDING PERIOD:

FY 2001-2007

USAID AMOUNT:

\$500,000

PURPOSE

The goal of FHI Nigeria's orphans and other vulnerable children work is to improve the quality of life and promote and protect the well-being of orphans and other vulnerable children. As a follow up to the orphans and vulnerable children situation analysis and mobilization process conducted in 2001, FHI developed sub-agreements to provide programmatic and technical support to three indigenous FBOs in Ilesha, Osun State; Onitsha, Anambra State; and Abakaliki, Ebonyi State. The goal is to strengthen and expand efforts in mobilizing support for the well-being of orphans and other vulnerable children and their families.

One strategy to achieve improved well-being of orphans and vulnerable children is advocacy and the mobilization of key influential community leaders and policymakers to increase their involvement as partners in programming. Another strategy is technical capacity building to provide more effective assistance to orphans and vulnerable children and their families in the areas of home-based care, psychosocial support, improved access to education, and protection.

FHI is working with local stakeholders to establish working groups to build their capacity to advocate and coordinate activities within their geographic catchment areas for the needs of orphans and vulnerable children. Working groups include representatives from state and local governments, local communities, the religious sector, the private sector, NGOs and associations/groups of persons living with HIV/AIDS groups. Specific activities include:

- Conducting advocacy visits and meetings with community leaders and policymakers to ensure policies are adequately addressing the needs of orphans and vulnerable children
- Intensifying community resource mobilization efforts with community members, government, and the private sector to increase community resources for orphans and vulnerable children and ownership of activities
- Establishing and strengthening community and parish committees to support orphans and vulnerable children

- Increasing capacity of local NGOs, CBOs, FBOs, and local government stakeholders to deliver quality support to orphans and other vulnerable children
- Increased access to education, psychosocial support, and home-based care for children

KEY ACCOMPLISHMENTS

- Completed the situation analysis and mobilization assessment of orphans and other vulnerable children in six states
- Disseminated findings from the situation analysis and mobilization assessment at the national and state levels
- Conducted sensitization seminars with key state-level stakeholders to increase provision of ongoing support to identified orphans and vulnerable children in llesha and Abakalili
- Conducted technical skills-building workshops in llesha, Onitsha and Abakaliki states on HIV/AIDS, orphans and vulnerable children issues, and psychosocial support, for the three FHI implementing partners and other partner organizations and representatives, including local governments, other public sector agencies, community homebased care groups, and FBOs

PRIORITY ACTIVITIES

- Continue support per the sub-agreements
- Develop a memorandum of collaboration with key in-state stakeholders

PROJECT MATERIALS AND TOOLS

- Head-of-household surveys and results
- Interviewer training guide
- Qualitative orphans and vulnerable children assessment tools
- Orphans and vulnerable children situation analysis and mobilization protocol

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Home-based care
- Training in networking and linking care and prevention
- Counseling
- Orphans and vulnerable children situation analysis and mobilization
- Monitoring and evaluation

CONTACT INFORMATION

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COUNTRY:

Nigeria

PROJECT:

POLICY Project

USAID FUNDING PERIOD:

FY 2001-2004

USAID AMOUNT:

\$100,000

IMPLEMENTING ORGANIZATION:

Futures Group

PURPOSE

The POLICY Project works to increase political and popular support for policies and plans that support activities for orphans and vulnerable children.

KEY ACCOMPLISHMENTS

- Collaborated on the adoption of the draft short-term national plan for orphans and vulnerable children
- Provided technical assistance to Nigeria's first national conference on orphans and vulnerable children
- Facilitated improved planning and financing for orphans and vulnerable children
- Published the document Estimating the Number of Orphans at the National and State Levels in Nigeria, 2000-2015 in January 2002
- Produced An Overview of Orphans and Vulnerable Children in Nigeria, February 2004
- Conducted a sensitization workshop for the Federal Ministry of Women Affairs and Youth Development (the lead government agency for national response to orphans and vulnerable children)

PRIORITY ACTIVITIES

- Support development of education support strategy
- Develop and produce an advocacy brochure on orphans and vulnerable children
- Revise the Estimating Orphans in Nigeria data based on the new sentinel survey data released in April 2004

PROJECT MATERIALS AND TOOLS

- Estimating the Number of Orphans at the National and State Levels in Nigeria, 2000-2015 by Robert Ssengonzi and Scott Moreland
- An Overview of Orphans and Vulnerable Children in Nigeria, February 2004

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Monitoring and evaluation
- Provision of information and advocacy materials on orphans and vulnerable children
- Development of action plans with cost estimates

CONTACT INFORMATION

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COUNTRY:

Nigeria

PROJECT:

Rivers State Enhanced Care of Orphans

IMPLEMENTING ORGANIZATIONS:

Primary: Centre for Development and

Population Activities (CEDPA)

Grantees: Africare; Ogoni Youth

Development Project

USAID FUNDING PERIOD:

October 2002-September 2004

USAID AMOUNT:

\$699,825

PURPOSE

Africare, working in partnership with the Ogoni Youth Development Project, is implementing the Enhanced Care of Orphans Project in five local government areas of Rivers State (Bonny, Eleme, Khana, Obio-Akpor, and Okrika). The project goal is to improve the quality of life for children under age 15 who have lost one or both parents to AIDS. To avoid stigmatization, all children who have lost their parents due to sickness or death are being targeted. The project's purpose is to improve the quality of life of orphans in targeted communities through capacity building of CBOs and economic empowerment of primary caregivers

The objectives of this project are to:

 Provide access to basic education and health care to orphans in project communities

- Identify existing community support structures and strengthen their ability to care for orphans
- Promote positive attitudes, beliefs, and practices of community members toward orphans and people living with AIDS
- Develop the capacity of communities, especially women's group and diverse local associations, to advocate for positive policy and social change for persons infected and affected by HIV/AIDS

Strategies to achieve these objectives include:

 Educational support for orphans in target areas through the provision of school books, uniforms, sandals, and fees or other levies

- Vocational training for older orphans to receive life skills and a microfinance scheme to provide grants to then to establish their own businesses after training
- Access to health care and establishment of a fund to pay for treatment
- Small business management, income-generation training, and a revolving credit program support for caregivers
- Counseling services to address the needs of orphans with regards to HIV/AIDS control

KEY ACCOMPLISHMENTS

- Provided educational support to 1,548 orphans
- Provided vocational training to 102 of these orphans
- Provided access to health care for 1,650 orphans
- Provided business management training for 1,000 orphan caregivers
- Provided microcredit grants to 1,000 caregivers;
- To sustain the project, provided leadership training to 55 CBOs in project communities
- Provided education on HIV/AIDS prevention and control for stakeholders in project communities
- Conducted formative research, including a baseline survey, participatory learning, action focus groups with caregivers, and enumeration of orphans and their needs

 Hosted training and capacity building workshops on HIV/AIDS and microcredit administration for up to 55 CBOs

PRIORITY ACTIVITIES

- Use experience in the selected local government areas to inform policy and service development at state and federal levels
- Network with other NGOs to promote HIV/AIDS awareness/prevention activities
- Introduce economic empowerment to 650 additional caregivers
- Improve organizational and program management capabilities of CBOs
- Establish the Vita Cow nutritional supplement pilot in the project community of Sogho
- Improve advocacy among local, state, and federal governments

PROJECT MATERIALS AND TOOLS

Handbook on Income-Generating Activities Training for Caregivers

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Networking
- Community mobilization
- Income-generation training

Nigeria

CONTACT INFORMATION

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COUNTRY:

Nigeria

PROJECT:

Vulnerable Children's Project

IMPLEMENTING ORGANIZATIONS:

Primary: Centre for Development and

Population Activities (CEDPA)

Grantees: Catholic Women's Organization; Opiatoha Kanyin Idoma Multi-Purpose Cooperative Society

USAID FUNDING PERIOD:

April 2003-August 2004

USAID AMOUNT:

\$106,649

PURPOSE

The goal of the project is to improve the quality of life of children aged 0 to 15 in Otukpo and Okpokwu local government areas of Benue state, Nigeria, who have lost one or both parents to AIDS by:

- Providing opportunities for the empowerment of orphans and vulnerable children
- Identifying existing community support structures and strengthening their ability to care for orphans and vulnerable children
- Promoting positive attitudes, beliefs, and practices of community members toward orphans and people living with HIV/AIDS
- Developing the capacity of communities (especially women's groups, diverse local associations, and religious groups) to advo-

cate for positive policy and social change for persons infected and affected by HIV/AIDS

- Using experience gained since inception of the project to inform policy and service development at the state and federal levels
- Strengthening the economic and technical capacities of caregivers to provide for basic needs such as good nutrition, education, and other health and psychosocial needs

KEY ACCOMPLISHMENTS

 Provided 1,500 indigent orphans with basic education and health needs

Nigeria

- Provided 1,211 households with orphans and vulnerable children with care and support through income-generating activities
- Provided 1,500 children and their caregivers with psychosocial support
- Trained 56 volunteers on counseling skills
- Trained and sensitized 60 policymakers in STI/HIV/AIDS and advocacy
- Provided home-based care training for 150 men and women in the community, including faith leaders
- Trained 35 members of CBOs in HIV/AIDS prevention, care, and support for persons affected or infected by HIV/AIDS
- Trained 100 caregivers in nutrition

PRIORITY ACTIVITIES

- Negotiate with the Benue state government to take over education and health of orphans and vulnerable children
- Develop and strengthen existing community sustainable structures for care and support of persons affected or infected by HIV/AIDS
- Increase the income of caregivers through proper management of income-generating activities and facilitate equal or fair distribution of funds earned under a common agreement adopted by the caregivers

PROJECT MATERIALS AND TOOLS

- Home Care for People Living with HIV/AIDS: The Power of Our Community (CEDPA training manual series)
- Partners for Positive Action: Social Mobilization for HIV/AIDS Prevention, Care

- and Support (CEDPA training manual series)
- Sustaining the Benefits: A Field Guide for Sustaining Reproductive and Child Health Services (CEDPA training manual series)

(The training manuals can be accessed through the CEDPA Web site www.cedpa.org)

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Community mobilization training
- Advocacy training and materials development
- Monitoring and evaluation
- HIV/AIDS prevention
- Institutional strengthening
- Home-based care and support training

CONTACT INFORMATION

Centre for Development and Population Activities (CEDPA)/Nigeria: P.K. Makinwa - Adebusoye (padebusoye@usips.org) Tel: 234 -01-2600022

CEDPA/Washington:
Rose Khasiala Amolo (rkamolo@cedpa.org)

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Lynn Gorton (Igorton@usaid.gov)
Shelagh O'Rourke (so'rourke@usaid.gov)

USAID/Washington: Alexandra Todd (atodd@usaid.gov)

PROJECT:

Mobilizing for Life

IMPLEMENTING ORGANIZATIONS:

Primary: World Relief

Grantees: Church-affiliated care and support programs are expected to receive an esti-

mated \$360,000 in funding

USAID FUNDING PERIOD:

April 2004-April 2005

USAID AMOUNT:

\$1,750,000

PURPOSE

The program mobilizes churches to take action to minimize the affects of AIDS by:

- Preventing the spread of AIDS through the promotion of healthy patterns of family life and sexual practice
- Mobilizing and equipping churches to bring care and hope to families affected by HIV/AIDS
- Enabling individuals and families affected by HIV/AIDS, including children, to live with dignity by effectively addressing the economic burden of this disease
- Increasing awareness of, demand for, and links to essential services beyond the scope of congregational ministry (e.g. clinical treatment, VCT, PMTCT)

KEY ACCOMPLISHMENTS

New activities were recently funded and build on previous achievements of World Relief's HIV/AIDS program *Mobilizing for Life*. At the end of a five-year funding period by the USAID mission, 674 churches in 58 denominations and three provinces were participating in *Mobilizing for Life*, which included support to children affected by AIDS.

PRIORITY ACTIVITIES

- Rapidly scale up activities for orphans and vulnerable children
- Develop a training video for use in training workshops based on the Abana Bacu ("Our Children") manual and training curricula for church leaders
- Distribute the Abana Bacu manual (15,000 copies) and curricula (550) throughout the country
- Provide 4,000 orphans and vulnerable children in eight provinces with school fees and/or uniforms/supplies
- Enable the mobilization of volunteers in 20% of church parishes to act as supporters for children in their communities
- Train church volunteers in identification and support of orphans and vulnerable children
- Hold seminars to reach 600 church parish members and sensitize churches

PROJECT MATERIALS AND TOOLS

The following are available in English, Kinyarwanda, and Portuguese:

- Our Children, a guide to church- and community-based orphan care and support
- Hope at Home, a guide to giving home care to AIDS-affected people and their families (also available in French, Shangaan, and Kiswahili)
- Interactive video Living Hope for Africa: The Church Responds to the AIDS Crisis, a tool to mobilize churches to address AIDS (also available in Shangaan)

To obtain these materials, contact Peggy (mlaughlin@wr.org or wraids@wr.org.)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Community mobilization for care and prevention
- Curriculum development in youth manuals on sexual education and HIV/AIDS prevention, mobilization of the church to care for orphans and persons living with HIV/AIDS, and a participatory adult education curriculum about AIDS designed for community bank settings

CONTACT INFORMATION

World Relief:

Margaret Laughlin (mlaughlin@wr.org) Rebecca Chandler (rchandler@wr.org)

USAID/Rwanda:

Nancy Fitch, M.D. (nfitch@usaid.gov)

COUNTRY:

Rwanda

PROJECT:

Pact Community REACH (Rapid and Effective Action Combating HIV/AIDS)

IMPLEMENTING ORGANIZATIONS:

Primary: Pact

Grantees: CARE International; Cyeza Parish; associations of persons living with HIV/AIDS

USAID FUNDING PERIOD:

July 2002-July 2005

USAID AMOUNT:

\$397,846

PURPOSE

The project's goal is to have a maximum impact on HIV/AIDS and its consequences, especially on vulnerable groups such as persons living with HIV/AIDS and orphans and vulnerable children.

KEY ACCOMPLISHMENTS

Helped three associations of people living with HIV/AIDS and one faith-based organization design mini-projects and budgets, with training in monitoring and evaluation, basic fund management, and subgrant/partnership procedures

- Provided nutrition and behavior change communication training to 10 associations of persons living with HIV/AIDS
- Gave nutrition/food assistance to 2,429 orphaned children on monthly basis
- Encouraged child-headed households and their mentors to participate in a monthly savings and loan scheme
- Helped anti-AIDS clubs of orphaned children to distribute HIV/AIDS messages to promote behavior change
- Helped 36 orphaned children establish income-generating activities
- Trained 196 service providers and caregivers in care and support
- Providing ongoing mentor counseling to 1.859 children

PRIORITY ACTIVITIES

- Train CBOs and FBOs on the basic skills of home-based care
- Visit the homes of persons living with HIV/AIDS and orphans and vulnerable children to provide counseling and care
- Hold workshops on the psychosocial support needs of orphans and vulnerable children
- Disseminate behavior change communication materials to partners

PROJECT MATERIALS AND TOOLS

- Capacity assessment tools for CBOs and FBOs to provide psychosocial support to orphans and other vulnerable children
- Home-based care training module
- Behavior change communication materials (flip charts)
- Finance management tools for subgrant management

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Behavior change communication materials
- Skills training to improve home-based care practices
- Developing management skills of CBOs and FBOs

CONTACT INFORMATION

Pact Community REACH Headquarters: Polly Mott, Program Director (reachgrants@pacthq.org)

CARE International/Rwanda:
Andrew Jones, Assistant Country
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CARE International Field Staff: Antoinette Mukaneza, Deputy Project Manager (antoinettem@care.org.rw)

USAID/Washington:
Ron MacInnis (rmacinnis@usaid.gov)

COUNTRY:

Rwanda

PROJECT:

Safety Net and Leadership Initiative for Fighting Epidemics (LIFE) Food Programs

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services (CRS) Grantees: CARE International; Caritas

Rwanda; World Relief; Association Nationale

de Soutien aux Personnes Vivant avec le

VIH/SIDA

USAID FUNDING PERIOD:

January 2001 - July 2005

USAID AMOUNT:

\$538,257 per year (2004-2005) (Safety Net/LIFE activities)

\$2,188,721 per year (2004-2005) (total Development Assistance Program activities) (A portion of these funds supports children and families affected by HIV/AIDS.)

PURPOSE

By 2005, the Safety Net and LIFE programs aim to ensure increased food security for 29,000 of Rwanda's most vulnerable people per month, with additional activities to increase the capacity of partners and implementing centers to ensure sustainability.

Currently, the Safety Net project is supporting 7,000 institutionalized orphans, street children, infants in prison with their mothers, and handicapped and elderly persons each month. Rations are calculated to meet approximately 75% of the daily needs of the target population, with 25% provided by partner centers. CRS provides training in commodity management, general management practices, and small-income generation to increase the operational capacity of its partners. CRS is currently conducting training sessions on how to monitor the nutrition status indicators of the beneficiaries as a result of the food distributed and consumed.

The LIFE component of the project is providing food to 22,000 AIDS-affected Rwandans (4,400 households) per month to supplement their nutritional requirements. Food provided under this intervention covers 50% of monthly household rations. Beneficiaries include child-headed households, children aged 0 to 18 who are

orphaned by AIDS, families with HIV-positive parents, families with HIV-positive children, and families with foster children who are orphans due to AIDS. Food assistance is linked with HIV/AIDS education, home-based care, counseling, vocational training, and incomegenerating activities provided by sub-grantee agencies. Provision of food is intended to facilitate increased productivity and capacity to care for the increasing number of children affected by HIV/AIDS. Food assistance will be maintained until households can generate sufficient income to meet basic needs.

KEY ACCOMPLISHMENTS

- In FY 2002, the Safety Net/LIFE program successfully maintained monthly food distribution to its targeted 29,000 beneficiaries.
- 22% of Safety Net centers and 18% of LIFE implementing partners demonstrated improved organizational capacity during 2002.
- Five workshops on Title II food management, small income-generating activities, HIV/AIDS sector issues, and general management practices were held in FY 2002 to improve partner capacity.

- A mid-term evaluation of Safety Net and LIFE activities was conducted from May to June 2003.
- A plan of action was developed to address mid-term evaluation recommendations.

PRIORITY ACTIVITIES

- Advocate for HIV/AIDS-affected populations in Rwanda
- Continue collaboration with government and civil society to find sustainable alternatives to institutional care for orphans and vulnerable children
- Increase support and funding for small income-generating activities in LIFE and Safety Net centers
- Develop a new development assistance plan with an expanded scope for orphans and vulnerable children, per the recommendation of the mid-term evaluation

PROJECT MATERIALS AND TOOLS

Nutrition status monitoring tool

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Monitoring and evaluation
- Community sensitization and mobilization
- Home-based care
- Development of guidelines in nutrition and HIV/AIDS
- Integration of Safety Net/LIFE and other CRS programs (peace and justice, agriculture, ART, orphans and vulnerable children)

CONTACT INFORMATION

Catholic Relief Services (CRS)/Rwanda: David Leege (cr@crs.org.rw) Tel: 00250-82109/82112/82114

CRS/Baltimore:

Mark Jones (mjones@catholicrelief.org) Tel: 410-625-2220 Web site: www.catholicrelief.org

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COUNTRY:

South Africa

PROJECT:

Abaqulusi Child Survival Program

IMPLEMENTING ORGANIZATION:

Salvation Army World Service Office

USAID FUNDING PERIOD:

October 2002–September 2007

USAID AMOUNT:

\$1,299,958 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

Reduce morbidity and mortality among children under 5 years old and mitigate the impact of HIV and AIDS on children under 15 years old

KEY ACCOMPLISHMENTS

- A registry of orphans and vulnerable children has been established. The registry is called the Safety Net Registry rather than an orphan registry in order to reduce the stigma associated with these children and to encourage the implementing partners to view the registry as a tool for improving conditions for the children on the registry.
- Two sets of test cases have been established as a means for developing a more efficient method of making sure that all children eligible for South Africa's child support grants are receiving them.
- Community health committees were established in two communities.
- The Program has coordinated the design of a home-based care curriculum together with the Department of Health, the Department of Education, and the LethempiloYouth Organization. The curriculum deals with issues affecting orphans

and vulnerable children and the role of home-based care volunteers in addressing their needs.

- Together with the Lethempilo Youth Organization, the Program has trained 24 home-based care volunteers from 12 churches in the first module of the new curriculum.
- The Program established a life skills discussion program in schools, using teams of young adult mentors and peer educators chosen from among the students. The Program has trained 30 peer educators and, with a local NGO, Yabantu, 18 mentors. Life skills discussions involve approximately 500 students each week.

PRIORITY ACTIVITIES

- Establish community health committees and develop community-level plans to respond to the needs of orphans and vulnerable children
- Train more home-based care volunteers in association with sponsoring churches that will supervise and support their work

 Advocate with the Department of Social Welfare to improve the efficiency of the administration of child support grants

Criteria, design, and collection of registry for orphans and vulnerable children

■ Home-based care training

PROJECT MATERIALS AND TOOLS

- Safety net registry for orphans and vulnerable children (collects information regarding school attendance, child-headed status, receipt of child support grants, etc.)
- Home-based care training manual (includes training guide and some background materials), covering a 10-day classroom course accompanied by five to 10 additional days of supervised practical field experience
- Community counseling manual
- Mentoring (young adults to youth)
- Life skills programming

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

 Use of participatory techniques to mobilize and organize community groups (community counseling)

CONTACT INFORMATION

Salvation Army/South Africa:
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South Africa

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Salvation Army World Service Office/Virginia: Claire Boswell (Claire_Boswell@usn.salvationarmy.org)

USAID/South Africa: Anita Sampson (asampson@usaid.gov) John Crowley (jcrowley@usaid.gov)

USAID/Washington: Susan Youll (syoull@usaid.gov)

COUNTRY:

South Africa

PROJECT:

Goelama Program – A strategic response to improving the well-being of orphans and vulnerable children in Limpopo, KwaZulu Natal, and Mpumalanga provinces of South Africa

IMPLEMENTING ORGANIZATIONS:

Primary: The Nelson Mandela Children's Fund **Grantees:** A network of 23 NGOs, CBOs, and FBOs

USAID FUNDING PERIOD:

September 2000-June 2004

USAID AMOUNT:

\$5,000,000

PURPOSE

Goelama's goal is to improve the well-being of orphans and vulnerable children through innovative community support and economic strengthening strategies. In its first two years, Goelama's framework for guiding program implementation emphasized results in the four areas of strengthening households, building community support systems for orphans and vulnerable children, expanding and integrating local government response, and changing behavior for preventing new infections.

KEY ACCOMPLISHMENTS

- 31,206 children were reached.
- 9,449 households received 1,381,380 homebased care visits.
- Home visits successfully reached children affected by AIDS before they became orphans.
- Programs for children affected by AIDS were linked with care and support programs for persons living with HIV/AIDS.
- School governing bodies were strengthened to ensure that orphans and vulnerable children have access to free primary education.
- Under the male involvement program implemented by the KwaZulu-Natal Christian Council, church members are fostering children.

PRIORITY ACTIVITIES

Strengthen household capacity to cope with the effects of HIV and AIDS through scaled-up treatment, care, and prevention; psychosocial support for orphans and vulnerable children; educational support for

- orphans and vulnerable children; child safety/protection; and poverty reduction
- Strengthen community support systems by building community capacity and structures to identify problems, plan for action, take action, and monitor/evaluate actions, and by linking communities with external resources
- Strengthen the local government response by influencing the integrated development planning process to ensure that children's issues are adequately addressed
- Strengthen service delivery by helping local governments build private-public partnerships with NGOs, businesses, and other nongovernment entities
- Improve documentation of best practices on both program and technical programmatic elements
- Provide technical assistance in programming, data capture and analysis, report writing, monitoring and evaluation, and overall compliance and project management

PROJECT MATERIALS AND TOOLS

- Two (USAID and Ayanka) evaluation reports on Goelama
- Monthly reporting format (monitoring and evaluation)
- Monitoring and evaluation tools
- Monitoring and evaluation training reports
- Baseline data results
- Research reports

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Community mobilization
- Training in a child rights approach to programming
- Facilitation of provincial reference groups for sharing lessons learned
- Facilitating strategic alliances and partnerships for improving networking, referrals, and resource sharing
- Establishment of linkages with local, provincial, and national governments for advocacy

CONTACT INFORMATION

The Nelson Mandela Children's Fund:
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Web site: http://www.nelsonmandelachildrensfund.com

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USAID/South Africa: Anita Sampson (asampson@usaid.gov) John Crowley (jcrowley@usaid.gov)

COUNTRY:

South Africa

PROJECT:

Ndwedwe District Child Survival Project

IMPLEMENTING ORGANIZATIONS:

Primary: Medical Care Development

International (MCDI)

Grantees: Department of Health; DramAidE; Diakonia Council of Churches; National Association of People Living with AIDS, eKhaya Project of the KZN Interfaith Forum

USAID FUNDING PERIOD:

Child Survival Project: September 1995-

September 2005

Pact Community REACH: June 2003-June

2005

USAID AMOUNT:

Child Survival Amount: \$1,603,850 (includes

cost extension)

Pact Community REACH Amount: \$100,000 (A portion of these funds supports children and families affected by HIV/AIDS.)

PURPOSE

The goal of the project is to reduce morbidity and mortality among children aged 0 to 5 and to improve the health status of women of reproductive age. The project is currently implementing a second four-year program in an extended area of Ndwedwe district in KwaZulu Natal province. The levels of effort for the phase II interventions are as follows:

- HIV/AIDS/STIs 30%
- Control of diarrheal diseases 20%
- Immunizations 20%
- Pneumonia 15%
- Maternal/newborn care 15%

In the Mavela community of Ndwedwe, an identified priority problem is the growing number of orphans due to HIV/AIDS. Medical Care Development International (MCDI) facilitates collaboration between the eKhaya Project, an interfaith initiative, and the community of Mavela to ensure an approach that addresses the spectrum of needs of orphans and other vulnerable children.

KEY ACCOMPLISHMENTS

- 350 orphans were identified in this tribal authority using an orphan register developed by MCDI.
- A day care center provided a safe and positive environment for 67 children, 30 of whom are orphans who lost their parents to HIV/AIDS.
- 18 child-headed households are provided one meal a day and an opportunity to participate in income-generation activities.
- An income-generating component has trained at least 14 local women in beadwork and fabric painting.
- Volunteers maintain a community garden attached to the day care center. The garden provides additional food for the center, child-headed households, and households supporting orphans.
- An MCDI social worker helps the community access government grants for orphans and vulnerable children.

PRIORITY ACTIVITIES

Upgrade the physical structure of the day care center to accommodate a community hall, library/resource center, HIV/AIDS support group, an office for the social worker, and a legal/paralegal desk

- Establish legal protection services for orphans and HIV-affected households
- Commence activities for establishing two more model day care centers
- Initiate two functional income-generation groups, a woman's group in catering, community gardening and beadwork, and a youth group comprising out-of-school youth and child-headed household members in handicraft and artwork

PROJECT MATERIALS AND TOOLS

 Training material and guidelines on how to access government grants in Zulu and English (mcdi@mweb.co.za)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in mentoring and networking.

CONTACT INFORMATION

Project:

Medical Care Development International (MCDI)/South Africa:

Dr. Farshid Meidany (mcdi@mweb.co.za) Tel: 27-31-304-0357

MCDI/Washington:

Joseph Carter

E-mail: mcdi@mcd.org

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USAID/South Africa:

Anita Sampson (asampson@usaid.gov) John Crowley (jcrowley@usaid.gov)

USAID/Washington:

Susan Youll (syoull@usaid.gov)

COUNTRY:

South Africa

PROJECT:

Nurturing Orphans of AIDS for Humanity (NOAH)

IMPLEMENTING ORGANIZATIONS:

Primary: Pact **Grantees: NOAH**

PURPOSE

NOAH aims to help 11 communities focus on the problem of children orphaned by AIDS and to take ownership of that problem in their communities. Resource centers for direct orphan care will be established in the 11 communities.

KEY ACCOMPLISHMENTS

Project activities are newly funded.

PRIORITY ACTIVITIES

- Work toward March 2006 goal of identifying and training 10 community leaders and between 20 and 30 volunteers in each of the 11 targeted communities
- Mobilize and build capacity in these communities by providing training programs
- Data capture, analysis, and synthesis for reporting on orphans and vulnerable children in the targeted areas
- Upgrade sites and secure use of infrastructure for implementing five resource centers to accommodate approximately 150 children per center

USAID FUNDING PERIOD:

April 2004-April 2006

USAID AMOUNT:

\$1,500,000

PROJECT MATERIALS AND TOOLS

- Database to collate and store relevant program statistics and various listings of the leader and volunteer training
- NOAH handbook focusing on a 12-step program for mobilization (available by mail request)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Use of NOAH's database to obtain national trend information for orphans and vulnerable children
- Application of the NOAH handbook on community mobilization

CONTACT INFORMATION

Nurturing Orphans of AIDS for Humanity (NOAH):

Pact South Africa: Malika Magagula (malika@pactsa.org.za) 358 Rivonia Boulevard, Rivonia - PO Box 4043, Rivonia, 2128

USAID/South Africa:

Anita Sampson (asampson@usaid.gov)

COUNTRY:

South Africa

PROJECT:

SIYAWELA II Project-Replication of Comprehensive Community Child Care Responses

IMPLEMENTING ORGANIZATION:

HOPE Worldwide South Africa

USAID FUNDING PERIOD:

September 2001-August 2004

USAID AMOUNT:

\$3,800,000

PURPOSE

HOPE Worldwide South Africa provides and facilitates integrated care and support for orphans and other vulnerable children as part of its comprehensive community-based care, prevention, mobilization, and support activities to people living with HIV/AIDS. The project links care, support, and prevention of HIV through peer education, community mobilization, referral networks, community- and homebased care, and support groups for persons living with HIV/AIDS and orphans and vulnerable children.

With assistance from FHI, HOPE Worldwide South Africa developed an initial capacity development program in Soweto that is now replicated in Cape Town (Khaylitsha), Durban (Cato Crest), Port Elizabeth (Veeplaas, Motherwell, and Soweto-on-Sea), Umtata, and Johannesburg (Alexandra, Diepsloot, and Zandspruit). The program model provides orphans and vulnerable children with nutritional support; recreational activities; life skills education; referrals; assistance with psychosocial support and counseling; disclosure of HIV status; future planning; and access to welfare grants, medical care (including ART) and play therapy.

The project aims to strengthen the links between community capacity and response and institutional services, such as those of the Perinatal HIV Research Unit at the Chris Baragwanath Hospital in Soweto, to ensure a continuum of care and support is available for people using VCT services. The project serves orphans, vulnerable children, HIV-infected and -affected children, persons living with HIV/AIDS, primary caregivers, and family and community members.

The community mobilization efforts have developed into an HIV competency framework and a facilitation process that will be used with schools and congregations.

KEY ACCOMPLISHMENTS

- Established support groups for children within the adult support groups (some support groups include only after-school activities)
- Mobilized four locations in Soweto to adopt a functional care group model for orphaned children and vulnerable families
- Developed an HIV competency framework based on the competency assessment tool of UNAIDS and the United Nations Institute for Training and Research
- Trained and supervised lay counselors in 13 clinics to offer VCT services and PMTCT programs
- Enhanced capacity in six national locations
- Established more linkages with local PMTCT and VCT services

- Developed greater capacity for psychosocial support and counseling for children affected by AIDS with technical assistance from REPSSI (Regional Psychosocial Support Initiative)
- Improved local partner networks at all sites
- Provided approximately 15,500 children with services in the second year

PRIORITY ACTIVITIES

- Facilitate the use of the HIV competency framework by schools and congregations in targeted communities
- Formalize partnerships with education department at provincial and district levels to roll out competency framework
- Develop capacity with other communitybased groups in peer education, counseling, psychosocial support for orphans and vulnerable children, facilitation of support groups, and community facilitation
- Promote leadership and management development for project members and community partners
- Develop partnerships with other prevention, care, and support service providers

PROJECT MATERIALS AND TOOLS

- Brochures
- Referral and follow-up guidelines

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Program/project planning, monitoring and evaluation, management and reporting
- Community mobilization and facilitation
- Peer education training and facilitation in psychosocial support and ART
- Referral and follow-up systems
- Psychosocial support and counseling for children
- Linking prevention, care, and support
- Pre/post-test counseling and ongoing care and support for persons living with HIV/AIDS

CONTACT INFORMATION

HOPE Worldwide/South Africa:
Dr. Mark Ottenweller
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USAID/South Africa:
Anita Sampson (asampson@usaid.gov)
John Crowley (jcrowley@usaid.gov)

COUNTRY:

South Africa

PROJECT:

Technical Assistance to USAID/South Africa-Funded Initiatives for Orphans and Other Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International (FHI) **Grantees**: Hope *WorldWide* (HWW) South

Africa; Nelson Mandela Children's Fund (NMCF) Goelama Program

USAID FUNDING PERIOD:

FY 2002-2005 (no cost extension)

USAID AMOUNT:

\$800,000

PURPOSE

FHI/IMPACT provides technical assistance to USAID/South Africa and its primary partners working with orphans and other vulnerable children, including the Nelson Mandela Children's Fund (NMCF) and HOPE Worldwide (HWW). The goal of the technical assistance is to expand and improve current efforts being implemented in South Africa. FHI expects to support NMCF and HWW in the following areas:

- Documentation of best practices to improve programs
- Technical and programmatic support to HWW in its new role as a VCT/PMTCT trainer
- Monitoring and evaluation to provide more effective and extensive programming and reporting
- Adoption of optimal ways and approaches to integrate the needs of children within the continuum of HIV/AIDS prevention, care, and support programming
- Community mobilization
- National-level coordination and collaboration related to issues specific to orphans and vulnerable children

Improved ability to reach more children with quality programming

KEY ACCOMPLISHMENTS

- Capacity building for social and community health workers in care and support issues of vulnerable or traumatized children included training in psychosocial support and counseling and exchange visits to regional programs.
- A community mobilization process, Future Search, was piloted with great success in four communities.
- HWW established a partnership with the Perinatal HIV Research Unit of the largest hospital in Soweto to address weak links in the continuum of care and support. Existing referral protocols, processes, and tools were reviewed, and a referral form, referral system manual, and agreement for a code of conduct were designed.
- HWW has secured additional funding to replicate its model in four other regions of the country. HWW's role has evolved to that of PMTVT/VCT trainer and an intermediary organization with the mandate of building small NGO capacity through subgrants and technical assistance.

- In May/June 2003, an external evaluation of the GOELAMA program was conducted to determine next steps. FHI participated and developed a technical assistance strategy and plan for the GOELAMA program based on the outcome and recommendation.
- NMCF's partners had a two-week training program in monitoring and evaluation in January 2004. Follow-up technical assistance will develop a database to track activities for orphans and vulnerable children and finalize the monitoring and evaluation plan and data collection tools.

PRIORITY ACTIVITIES

- Strengthen monitoring and evaluation systems and tools; coordinate and establish common indicators with other large programs assisting orphans and vulnerable children
- Document and disseminate best practices; adopt optimal ways of addressing the needs of orphans and vulnerable children

CONTACT INFORMATION

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FHI/Virginia: Sara Bowsky (sbowsky@fhi.org) Tel: 703-516-9779 Web site: http://www.fhi.

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Anita Sampson (asampson@usaid.gov)

COUNTRY:

Tanzania

PROJECT:

Organizational Capacity Building

IMPLEMENTING ORGANIZATIONS:

Primary: Social Action Trust Fund (SATF)
Grantees: African Women AIDS Working
Group; Archdiocese of Songea; Balm of
Gilead; CARITAS; Faraja Trust Fund; Women

Against AIDS in Kilimanjaro; MEDI;

Sanganigwa Children's Home; Tabora NGO

Cluster; Tanzania Home Economics Association; the Village of Hope; the Uhai Centre; People in the Fight Against AIDS in Tanzania; Service for Children; the Tanzanian Karagwe Development Association; KADEA; MWAOMI; Kilimanjaro NGO Cluster for STD/HIV/AIDS Interventions and Reproductive Health; Sr. Theresa of Bukoba; Service Health and Development for People Living with HIV/AIDS

USAID FUNDING PERIOD:

Capitalized in 1998

USAID AMOUNT:

\$12,000,000 (initial capital)

PURPOSE

The Social Action Trust Fund (SATF) is a nongovernmental Tanzanian trust that supports children orphaned by AIDS. Initiated in 1995 through technical support and capitalization from USAID, the fund became fully functional and self-supporting in 1998. SATF uses earnings from interest on loans and investments in the private sector to make grants to NGOs registered in Tanzania to assist children orphaned by AIDS. It also links promotion of private sector development and social benefits to vulnerable children. Ownership of SATF resides within a group of socially conscious, committed members of the Tanzanian business community and generates income using sound business and investment practices.

SATF is governed by a five-member board of trustees from the business community and managed on a day-to-day basis by a chief executive officer and small supporting staff. Its performance reflects effective management and consistent growth, enabling it to become a local sustainable mechanism to respond to

HIV/AIDS in Tanzania. SATF invests in two funds, one of which uses capital of \$2,000,000 to invest in small and micro-enterprises, with the surpluses returned to SATF, while the other fund (capital \$10,000,000) offers mediumand long-term loans, with all profits used to support orphans.

SATF grants to NGOs are used primarily to support basic education costs such as school fees, uniforms, textbooks, and, occasionally, transportation. The staff monitors NGO performance and ensures that its grants directly benefit the maximum number of orphans. Grants must be used for direct assistance to orphans and cannot be used for operational costs of recipient NGOs, which must be covered from other sources. SATF is exploring ways to increase its capitalization so that more orphans can benefit. The project goal is to support as many orphans as cost-effectively as possible without compromising the quality of interventions.

KEY ACCOMPLISHMENTS

- Expanded the amount of grants per year from \$112,000 (distributed through NGOs) in eight regions of the Tanzanian mainland in 1999 to more than \$1,900,000, as of December 2003, in 18 regions.
- As of December 2003, supported 80,563 orphans due to AIDS with primary and secondary school education.

PRIORITY ACTIVITIES

- Continue to support orphans on the SATF register
- Assist orphans on the SATF register with their nutritional/medical needs
- Provide vocational training for primary school graduates
- Provide working tools to vocational training graduates

PROJECT MATERIALS AND TOOLS

The following are available on the SATF Web site (http://www.saft.org):

 General information on investments and orphans' grants programs

- Loan conditions
- Fact sheet
- Annual report

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training on accounting/budgeting systems
- Financial management
- Networking

CONTACT INFORMATION

The Social Action Trust Fund (SATF): Valentine Rweyemamu, CEO (info@satf.org) P.O. Box 10123 Dar es Salaam, Tanzania Tel: 255-22-2118740/3; Fax: 255-22-2118741

USAID/Tanzania:

Rene Berger (rberger@usaid.gov) John Dunlop (jdunlop@usaid.gov)

COUNTRY:

Tanzania

PROJECT:

Rapid Funding Envelope for HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Deloitte & Touche East Africa **Grantees:** Management Sciences for Health and up to three others to be determined

USAID FUNDING PERIOD:

June 2004-September 2005

USAID AMOUNT:

\$300,000

PURPOSE

The Rapid Funding Envelope (RFE) for HIV/AIDS is a new funding mechanism for HIV/AIDS projects in Tanzania. It provides support to not-forprofit civil society institutions, academic institutions, and partnerships on the Tanzanian mainland and Zanzibar for short-term projects of up to 12 months in duration.

The RFE was created in October 2002 by the Tanzania Commission for HIV/AIDS and nine bilateral donor agencies – the Canadian International Development Agency (CIDA), Ireland AID, the Swiss Agency for Development and Co-operation, the Embassy of Finland, the Royal Netherlands Embassy, the Royal Danish Embassy, the Royal Norwegian Embassy, USAID, and the U.S. Centers for Disease Control and Prevention (CDC).

The RFE has currently funded 23 projects focused on one or more of the following priority areas:

- Prevention
- Advocacy
- Care and support
- Impact mitigation
- Baseline and applied research
- Institutional strengthening including monitoring and evaluation

The RFE aims to support organizations undertaking projects focusing on orphans and vulnerable children, particularly in the area of helping orphans develop vocational skills relevant to their location. In addition, support to orphans will establish mechanisms to relieve the burden on children who are caring for sick relatives so they will have the time to acquire necessary livelihood skills. Through grants, the

RFE will assist 500 to 800 adolescent orphans and vulnerable children.

KEY ACCOMPLISHMENTS

Activities for orphans and vulnerable children are newly funded.

PRIORITY ACTIVITIES

- Increase the level of support and funding for impact mitigation projects, including life skills education and vocational training activities
- Reach a greater number of orphans and vulnerable children affected by HIV/AIDS through the RFE mechanism

CONTACT INFORMATION

Project: Rapid Funding Envelope for HIV/AIDS: Deloitte & Touche Tanzania Joe Eshun (jeshun@deloitte.co.tz) Tel: +255 22 2116006

Management Sciences for Health: Catherine Severo (csevero@msh.org) Tel: +255 22 2136415

USAID/ Tanzania: Lisbeth Loughran (lloughran@usaid.gov) Vicky Chuwa (vchuwa@usaid.gov)

COUNTRY:

Tanzania

PROJECT:

Supporting National Response for Children Affected by HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International (FHI)

Grantees: To be determined

\$200,000

USAID AMOUNT:

USAID FUNDING PERIOD:

January 2004-May 2005

PURPOSE

Technical support will be provided to government ministries and other stakeholders undertaking a participatory situation analysis focused on orphans and vulnerable children. FHI will assist with presenting results and discussing actions to be taken during a national consultation. FHI aims to facilitate the finalizing of a national policy on orphans and vulnerable children and advise on related programming, building on the findings of the joint national HIV/AIDS multisectoral review held in February 2004.

KEY ACCOMPLISHMENTS

The project is newly funded but will build on previous activities that included technical assistance for the review of the national HIV/AIDS situation and proposal development. As part of capacity building, two medical practitioners were sent to Mildmay, Uganda, to learn how to provide care and support to children infected with HIV/AIDS.

PRIORITY ACTIVITIES

In collaboration with national government and other stakeholders:

- Conduct participatory situation analysis
- Convene national consultation
- Support policy reform for children affected by HIV/AIDS
- Establish programming priorities

CONTACT INFORMATION

FHI/Tanzania:

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USAID/Tanzania:

Lisbeth Loughran (lloughran@usaid.gov) Vicky Chuwa, Vicky (vchuwa@usaid.gov)

COUNTRY:

Tanzania

PROJECT:

VSHP Tumaini (formerly Voluntary Sector Health Program)

IMPLEMENTING ORGANIZATIONS:

Under Voluntary Sector Health Program:

Primary: CARE/Tanzania

Grantees: Healthscope Tanzania, Ltd.; Johns Hopkins University Center for Communication

Programs

Under VSHP Tumaini: Primary: CARE/Tanzania

Grantees: Healthscope Tanzania Ltd.; Family Health International (FHI); Counsenuth; Heifer International; Muhimbili University College of

Science

USAID FUNDING PERIOD:

Voluntary Sector Health Program: July 2001-

January 2004

VSHP Tumaini: January 2004-December 2004

USAID AMOUNT:

\$17,000,000 (a portion supports children and

families affected by HIV/AIDS)

PURPOSE

The program, managed by CARE, is designed to strengthen public-private partnerships at the district level, provide grants to the voluntary sector, build capacity of both the local government and voluntary sectors, and conduct behavior change communication activities. These projects focus on increasing the use of family planning, maternal and child health services, and HIV/AIDS prevention methods.

As part of this integrated health activity, CARE supports NGOs that work with orphans and vulnerable children at the district level in five underserved rural regions. Activities include supporting communities to assist orphans and other vulnerable children with school fees, clothing, food, health, and social services. Community members define their needs and participate in developing activities that assist orphans and other vulnerable children in the community.

The program implementation period was extended to December 31, 2004, with a technical focus on home-based care as part of continuum of care and support for people living with HIV/AIDS.

KEY ACCOMPLISHMENTS

- VSHP has initiated support to 230 nonprofit CBOs, NGOs, and FBOs that implement HIV/AIDS, reproductive health, and mother and child health interventions in 30 districts. Activities include mobilizing communities and supporting community initiatives, providing information about HIV prevention and support, providing nutrition information, and advocating for other relevant activities.
- 81 subgrants have been disbursed to organizations providing support to 4,406 orphans and vulnerable children (2,246 girls and 2160 boys). This support includes nutrition, education, and psychosocial support. Subgrantees are learning to work with orphans and foster families to identify strategies to improve their quality of life.
- 30 partnership committees were established in 30 district councils. This involved helping local government and the voluntary sector develop working relationships. Voluntary organizations have developed skills in writing proposals.

Teams working jointly to develop and implement behavior change communication activities established 20 communication networks.

PRIORITY ACTIVITIES

- Document and disseminate VSHP process, outputs, lessons learned, information about how its partnerships evolved, and manuals and innovations arising from subgrantees' activities
- Strengthen the capacity of subgrantees in implementing quality interventions
- Strengthen the partnership between subgrantees and community (local) institutions by developing community-level feedback mechanisms to facilitate comprehensive district HIV/AIDS, mother-and-child health, and reproductive health plans

PROJECT MATERIALS AND TOOLS

- Guidelines for proposal design workshop
- Conceptual framework for breaking the HIV/AIDS cycle
- Toolkit in Kiswahili to be used by subgrantees at the community level to develop their communication strategy
- Checklist for minimum package of activities to make best practices operational in VSHP niche areas or core interventions by subgrantees
- Grants management system

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Facilitating partnerships between local government authorities and civil society organizations
- Capacity building of civil society organizations
- Leadership and management of VSHP
- Bottom-up planning to build social support for foster families
- Strategies to involve orphans

CONTACT INFORMATION

CARE/Tanzania: Dr. Binagwa, Team Leader (fbinagwa@care.or.tz) Tel: 255-22-2666775 Aida Swai (aswai@care.or.tz)

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COUNTRY:

Tanzania

PROJECT:

Zanzibar NGO Integrated Support and Partnership Program

IMPLEMENTING ORGANIZATIONS:

Primary: Africare/Tanzania

Grantees: Three to be determined

USAID FUNDING PERIOD:

October 2003-September 2005

USAID AMOUNT:

\$550,001

PURPOSE

The goal of the project is to help reduce HIV/AIDS prevalence and increase the provision of care and support for children who have been orphaned by HIV/AIDS. Volunteers conduct outreach activities that include the distribution of provisions to support household security (such as food supplements and educational grants for school fees and supplies), nurturing and spiritual counseling, and recreational activities for orphans and other vulnerable children and their caregivers. Three NGOs will receive subgrants to scale up their activities in support of orphans. The program expects to reach 800 orphans by the end of the project period.

KEY ACCOMPLISHMENTS

- Provided assistance to 224 orphans (87 boys and 137 girls)
- Recruited and trained volunteers from five NGOs/CBOs to provide support and care practices for orphans and vulnerable children
- On behalf of the Department of Social Welfare, used community volunteers to conduct surveys of targeted households where vulnerable children reside

PRIORITY ACTIVITIES

- Assessment of orphan numbers and their needs to effectively scale up care and support response
- Sponsor life skills and vocational training for orphans
- Income-generating activities training for caregivers of orphans
- Institute revolving funds for caregivers of orphans
- Monitoring and technical assistance for income-generation projects

PROJECT MATERIALS AND TOOLS

- IEC materials
- Initial inputs for income-generating activities and business training for caregivers

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

 Training for trainers in appropriate strategies for care and support of orphans and vulnerable children

- Education and counseling
- Basic health and hygiene practices
- Caregivers' peer education
- Business management/marketing
- Monitoring and evaluation

CONTACT INFORMATION

Africare/Tanzania: Cheryl Danley, Resident Representative (cdanley@africare.or.tz) P.O. Box 63187, Dar es Salaam, Tanzania

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COUNTRY:

Uganda

PROJECT:

The AIDS/HIV Integrated Model (AIM) District Program

IMPLEMENTING ORGANIZATIONS:

Primary: JSI Research and Training Institute **Grantees:** World Education and various national and local organizations

USAID FUNDING PERIOD:

May 2001-May 2006

USAID AMOUNT:

\$38,000,000 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

JSI, through the AIM District Program, builds the capacity of districts to expand critical HIV/AIDS and TB services for communities and families in 16 districts of Uganda. Working with and through district structures and a broad array of civil society organizations, AIM provides technical assistance, training, commodity support, and direct grants to build networks of prevention, care, and support services at district and subdistrict levels.

The Program's orphans and vulnerable children component focuses on expanding efforts to address the unique needs of children infected and affected by HIV/AIDS, as well as on the needs of their caregivers. The needs of orphans and vulnerable children vary by district, and each district is encouraged to develop innovative strategies to address the most urgent issues using existing social and community structures within the broader context of HIV/AIDS prevention, care, and support. Activities include grants to strengthen families and communities in supporting the needs of orphans through income-generating activities and training of community volunteers in psychosocial support. Other activities include improving school attendance and retention, addressing "whole life" needs of out-of-school

youth, and facilitating apprenticeship programs. In addition, for those children who are living with HIV/AIDS, appropriate clinical care is provided.

KEY ACCOMPLISHMENTS

- The program provided grants to 50 districtbased organizations, including NGOs, CBOs, and FBOs, and local district governments.
- The 50 grantees reach an average of 2,500 orphans and vulnerable children per quarter.
- Three national partners the Uganda Women's Effort to Save Orphans, the Straight Talk Foundation, and the National Community of Women Living with HIV/AIDS in Uganda have undergone organizational development and strengthening to ready them for providing technical assistance to their district constituents.
- Print messages and classroom instruction reach 300,000 orphans per quarter with information about basic life skills and HIV/STI prevention.

■ 58,000 orphans per quarter receive economic and psychosocial support through national-level interventions

PRIORITY ACTIVITIES

- Training workshops for CBOs and district officials in orphans and vulnerable children support package in seven districts (UWESO grant)
- Grants for vocational training skills and apprenticeships within communities
- School-based support for orphans and vulnerable children in eight districts
- Development and dissemination of 850 toolkits for orphans and vulnerable children programming
- At least 10 new grants awarded for support to orphans and vulnerable children
- Technical assistance and institutional support to grantees and district officials to improve quality of services to orphans and vulnerable children

PROJECT MATERIALS AND TOOLS

- AIM orphans and vulnerable children strategy paper
- District HIV/AIDS needs assessment reports
- Support materials for NGOs and CBOs working with orphans and vulnerable children (available September 2004)
- Referral network for HIV/AIDS services strategy

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Programming for initiatives related to orphans and vulnerable children
- Training in child-centered communication skills/approaches
- Networking, information sharing, and linkages with grassroots organizations assisting orphans and vulnerable children
- Training in participatory methodologies for orphans and vulnerable children activities
- Providing capacity building support to grassroots organizations in conceiving and writing proposals for activities related to orphans and vulnerable children
- Facilitating learning exchange visits

CONTACT INFORMATION

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USAID/Uganda:

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COUNTRY:

Uganda

PROJECT:

Community Resilience and Dialogue

IMPLEMENTING ORGANIZATIONS:

Primary: International Rescue Committee
Grantees: Voluntary Assocation for

International Service (AVSI); CARE; Catholic

Relief Services (CRS); Save the Children in Uganda

USAID FUNDING PERIOD:

September 2002-September 2007

USAID AMOUNT:

\$12,900,000 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The purpose of the project is to mitigate and reduce the human impact of conflict in Acholiland, Karamoja, West Nile, and Western Uganda while supporting the increased use and sustainability of social sector services.

KEY ACCOMPLISHMENTS

- Registered, fed, clothed, accommodated, medically screened, and provided psychosocial rehabilitation services to 4,838 conflict-affected persons, including orphans and vulnerable children
- Enrolled 2,985 persons, including orphans and vulnerable children, in formal/remedial educational, vocational, and apprenticeship programs
- Implemented economic development support activities for sustainable livelihoods for conflict-affected populations, including orphans and vulnerable children
- Trained 2,481 teachers, vocational instructors, and local artisans in psychosocial issues, child rights, and classroom management
- Sensitized 1,976 district, community, traditional, and religious leaders on psychosocial issues

- Provided technical capacity building to 1,554 local partner staff and volunteers, including district officials, community volunteers, and reception center staff
- Organized and facilitated training for 360 health professionals in institution-based care, treatment, and counseling
- Organized and facilitated training for 371 community caregivers in home-based HIV/AIDS care, treatment, and counseling
- Facilitated the development of communityand institutional-based HIV/AIDS caregiver support services, including post-test clubs, peer support networks, and psychosocial counseling for 653 persons living with HIV/AIDS
- Provided small loans, grants, and social marketing sales opportunities for incomegeneration activities to 405 persons living with HIV/AIDS, persons affected by HIV/AIDS, and orphans and vulnerable children
- Identified opportunities for partner services in the care and treatment of 2,038 persons living with HIV/AIDS and other target clients

PRIORITY ACTIVITIES

- Assist local government, religious and cultural leaders, and other NGOs to seek a permanent peaceful solution to the ongoing conflict in northern Uganda
- Target increased project assistance to camps for internally displaced persons in northern Uganda

PROJECT MATERIALS AND TOOLS

- Best practices reports
- Standards and vocational training skills manuals for ex-combatant reception center
- Lessons learned about implementing psychosocial and HIV/AIDS activities in conflict areas.

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in implementing multisector programs for orphans and vulnerable children in conflict-affected areas.

CONTACT INFORMATION

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COUNTRY:

Uganda

PROJECT:

POLICY II Project

IMPLEMENTING ORGANIZATIONS:

Primary: Futures Group

Grantees: Inter-Religious Council of Uganda and 30 partner faith-based community organizations; the Uganda Association of

Women Lawyers (FIDA); Ministry of Justice; the Uganda AIDS Commission; and a network of 40 organizations of people living with HIV/AIDS

USAID FUNDING PERIOD:

2003-2005

USAID AMOUNT:

\$378,000 + \$200,000 under track 2 of the President's Emergency Plan for AIDS Relief

PURPOSE

The POLICY II Project aims to build the institutional capability of the Inter-Religious Council of Uganda (IRCU) to administer a small-grants program patterned after USAID/Washington's Communities Organized in Response to HIV/AIDS Epidemic (CORE) Values Initiative. The Project will help strengthen the capacity of IRCU and CBOs/FBOs to help communities respond to the care and support needs of

persons living with and affected by HIV/AIDS, particularly children.

The Project will participate in activities involving persons affected and infected by HIV/AIDS by focusing on two major areas: 1) legal rights, including guidelines on will-writing and information on accessing legal services; and 2) training in advocacy skills.

KEY ACCOMPLISHMENTS

- The Project helped 30 FBOs in seven districts implement activities to benefit 4,159 orphans and other vulnerable children.
- The Project supported continued collaboration between a local legal expert and the USAID-funded ARCH project to collect and analyze information related to laws, policies, and institutional arrangements regarding orphans and other vulnerable children.

PRIORITY ACTIVITIES

- Include results of the legal policy analysis in Uganda's comprehensive national orphans and vulnerable children policy
- Provide, in English and four local languages, 40,000 persons living with HIV/AIDS information on legal rights and accessibility of services through a countrywide network of 40 organizations of people living with HIV/AIDS
- Provide 40,000 persons living with HIV/AIDS guidelines in English and four local languages on will-writing in order to protect property, disseminated through the 40organization network
- Provide advocacy skills to the leaders of the network organizations to enable them to advocate effectively for their rights and accessibility to services

PROJECT MATERIALS AND TOOLS

- Five-year HIV/AIDS strategic plan
- Management manuals in finance, administration, human resources, and grants management (in process)

- Report of findings on laws and policies related to orphans and vulnerable children (in process)
- Brochures and guidelines related to rights of persons living with HIV/AIDS and other legal issues

TECHNICAL ASSISTANCE

The Project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Strategic planning
- Developing processes and procedures to manage grants, including technical assistance to potential grantees, review and approval of applications, and monitoring and evaluation of funded activities
- Organization development, including production of management manuals
- Legal and policy analysis on orphans and vulnerable children issues
- Writing small grants applications

CONTACT INFORMATION

POLICY II Project:
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USAID/Uganda:

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COUNTRY:

Uganda

PROJECT:

Situation Analysis of Orphans in Uganda and Related Policy Guidance

IMPLEMENTING ORGANIZATIONS:

Primary: Center for International Health and Development, Boston University School of

Public Health

Grantees: Makerere University Department of

Social Work and Social Administration;

Makerere University Institute of Psychology; Makerere University Medical School; Regional Centre for Quality Health Care; Institute of Public Health (IPH), Makerere University; Women and Law in East Africa

USAID FUNDING PERIOD:

FY 2001-2004

USAID AMOUNT:

\$500,000

PURPOSE

The situation analysis of orphans in Uganda is a collaborative research effort led by the Center for International Health and Development at Boston University School of Public Health aimed at providing basic information on the situation of orphans and their caregivers in Uganda. Research on the situation analysis began in May 2001 and included an extensive literature review, a field survey of 326 selected orphan households in eight districts in Uganda, and national- and district-level interviews of representatives from the main institutions and government agencies working on issues affecting orphans in Uganda.

The stuation analysis has been used to guide the development of Uganda's National Strategic Program Plan of Interventions for Orphans and Other Vulnerable Children. Since spring 2003, the project has provided technical support to six Uganda research teams, each of which has undertaken applied research on an issue relating to the health and welfare of orphans in Uganda. These activities are part of a broader program that aims to provide the government of Uganda, the donor community, and other institutions with reliable data on orphans and their caregivers for the purpose of guiding national and

NGO policy on interventions to assist orphans and their families.

KEY ACCOMPLISHMENTS

- Carried out the situation analysis based on a comprehensive literature review and a field survey of 326 households in the eight districts of Apac, Katakwi, Kitgum, Masaka, Masindi, Mbarara, Mpigi, Kitgum, and Tororo, interviewing 310 orphans and 60 non-orphans in these households
- Produced a CD-ROM containing more than 600 pieces of literature reviewed by the research team
- Held a proposal writing and development workshop for eight Ugandan policy analytical and program evaluation teams in Jinja, February 6-15, 2002
- Produced the final report of findings,
 Situation Analysis of Orphans in Uganda:
 Orphans and Their Households Caring for the Future Today, in November 2002
- Commissioned six applied research studies of more than 1,000 households to examine health, psychosocial, legal, and welfare aspects of orphaning in Uganda

- Drafted the National Strategic Program
 Plan of Interventions for Orphans and Other
 Vulnerable Children in collaboration with
 the Ugandan Ministry of Gender, Labour
 and Social Development
- Commissioned a set of studies to address key gaps in the orphans and vulnerable children situation in Uganda

PRIORITY ACTIVITIES

- Complete a monograph that contains the key results of all six studies
- Assist and support the research teams in further data analysis
- Assist and support the research teams in the dissemination of their research results, especially as regards articles for submission to peer-reviewed journals
- Continue to disseminate results from Situation Analysis of Orphans in Uganda: Orphans and Their Households – Caring for the Future Today

PROJECT MATERIALS AND TOOLS

- Situation Analysis of Orphans in Uganda: Orphans and Their Households – Caring for the Future Today (PDF file available on CD-ROM and on the Boston University Center for International Health and Development Web site at http://www.bumc.bu.edu/ www/sph/cih/lmages/s_a_final.pdf)
- Household survey instruments (February 2002)
- Applied research study methodologies for examining the situation of orphans (February 2002)

- CD-ROM of more than 600 literature reviews compiled by the research team (November 2002)
- National Policy and Strategic Program Plan of Interventions for Orphans and Other Vulnerable Children in Uganda (December 2003)
- Matrix for estimating costs of interventions focusing on orphans and vulnerable children
- Four commissioned papers covering key gaps in the literature on the orphan situation (December 2003)
- Six policy analyses and program evaluation final reports (May 2004)
- Monograph Investigating the Well-Being of Orphans and Other Vulnerable Children (OVC) in Uganda (spring 2003)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Applied research study methodologies
- Study proposal development process
- Policy analyses methodology
- Program evaluation methodology
- Process for formulating national orphan and other vulnerable children policies and program plans
- Monitoring and evaluation methodologies for interventions focusing on care for orphans and vulnerable children

CONTACT INFORMATION

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COUNTRY:

Uganda

PROJECT:

TASO Five-Year Strategy

IMPLEMENTING ORGANIZATION:

The AIDS Support Organization (TASO)

USAID FUNDING PERIOD:

FY 2003-2007

USAID AMOUNT:

\$12,500,000

PURPOSE

The TASO Child Support Initiative aims to improve the quality of life of children affected by HIV/AIDS and to build their capacity to cope with the effects of HIV/AIDS by improving their literacy skills and helping them acquire skills that are essential for survival. In addition, the orphans and vulnerable children of TASO clients are provided with practical skills using an apprenticeship approach. Through partnerships with the private sector, TASO connects children to various trades for on-the-job training. Training areas include motor vehicle repair, tailoring, cooking, hairdressing, and bricklaying. It is anticipated that after completing the training the children will be able to find employment and support their younger siblings.

In the Entebbe, Jinja, and Masaka centers, 423 children are assisted directly. The children, who are among the most needy of TASO clients, receive support for primary, secondary, and vocational education expenses. The beneficiaries live within 75 kilometers of TASO service centers.

Succession planning and writing of memory books are two of the tools used by TASO to help children and parents confront and plan for death due to AIDS. Succession planning involves a participatory process at the family level through which parents are encouraged to reveal their HIV status to children, to discuss and write wills, to name heirs and guardians, and to discuss the plans and aspirations that parents wish to see their children accomplish in the future.

KEY ACCOMPLISHMENTS

- 423 children have received support (225 in primary school, 198 in secondary school and tertiary institutions).
- 236 parents/guardians and 187 children attended five joint workshops for TASO-supported children and their foster parents to discuss issues pertaining to school performance and welfare of children.
- Clients wrote 74 memory books.
- 27 teachers and non-teaching staff were trained in basic child counseling to be able to perceive the psychosocial needs of children and to offer appropriate assistance.
- 187 parents and guardians were trained in basic child counseling and child communication skills.
- 429 support visits were made to schools.
- 503 support visits were made to families.
- 129 families received income-generating activity funds. These were interest-free loans intended to increase the incomes of foster families to enable them to cope with their increased economic demands.
- 238 parents/guardians were trained in income-generating (i.e, micro-enterprise) management.
- 118 children were supported with training in apprenticeship skills.
- 117 children benefited from life skills workshops.
- 237 support visits were carried out to institutions.

PRIORITY ACTIVITIES

(USAID-funded activities in 2004 are limited to TASO Masaka and TASO Entebbe)

- Train 74 additional children under the apprenticeship scheme (skills training)
- Provide toolkits to children enrolled in apprenticeship programs
- Offer more life skills workshops
- Train additional teachers and non-teaching staff in the next phase of basic child counseling
- Make 108 support visits to institutions/workshops that support children
- Continue to visit schools and homes of supported children
- Provide parents and guardians of supported children with basic child counseling skills
- Train 81 clients in memory book writing
- Support 125 children in primary schools and 125 in secondary and tertiary institutions

PROJECT MATERIALS AND TOOLS

- Handbook on counseling HIV/AIDS-affected children
- Uganda Child Statute
- Memory book guidelines
- Income-generation activity management notes

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Counseling HIV/AIDS-affected children
- Training materials
- Integrating HIV/AIDS care and prevention in school settings
- Developing succession plans
- Developing NGO/private sector partnerships

- Building life skills
- Establishing and monitoring apprenticeship programs for vulnerable children

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COUNTRY:

Uganda

PROJECT:

Title II HIV/AIDS LIFE Initiative

IMPLEMENTING ORGANIZATIONS:

Primary: ACDI/VOCA

Grantees: Africare; Catholic Relief Services (CRS); The AIDS Support Organization (TASO);

World Vision/Uganda

USAID FUNDING PERIOD:

September 2001-August 2006

USAID AMOUNT:

\$33,000,000 in Title II food aid resources (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The project aims to alleviate the food insecurity of people living with HIV/AIDS and their family members through direct feeding and complementary programs. It is hoped that a secondary benefit will be the mitigation of devastating consequences of the effects of HIV/AIDS, including the sale of fixed assets for income and school absenteeism among girls.

Through the four implementing partners, the project serves the 10 districts of Jinja, Kampala, Luwero, Masaka, Mbale, Mbarara, Mpigi, Ntungamo, Tororo, and Wakiso. It directly targets 60,000 people -14,000 living

with HIV/AIDS and 46,000 immediate dependents, more than 80% of whom are children aged 0 to 16. Rigorous criteria were used in selecting the 60,000 beneficiaries to ensure that the most needy were targeted.

Food is distributed with the help of local village leaders and food distribution committees. Involving the community in this way has the inherent benefits of encouraging community members to participate in the response to HIV/AIDS, minimizing the stigma of those affected, and ensuring that those most in need are reached. Food is distributed only after intensive counseling and education that

focuses on the nutritional benefits of corn/soy blend, preparation guidelines, acceptability, and best hygiene practices. Community-based workshops are organized to inform residents about the project.

As a complementary pilot effort, ACDI/VOCA expects to integrate selected beneficiaries into income-generating activities such as improved agricultural practices. This pilot effort will, hopefully, show that these practices can offset the loss of a family's income due to illness or death.

The project improves the health and living standards of its beneficiaries through:

- Improved overall food security in beneficiary households
- Improved dietary diversity for people affected by HIV/AIDS
- Increased and consistent use of nonfood services offered by other implementing organizations
- Improved nutritional status among recipients, especially children infected and affected by HIV/AIDS
- Reduced stigma attached to HIV/AIDS through involvement of communities in food distribution and monitoring
- Integration of nutrition education into HIV/AIDS prevention and care activities

KEY ACCOMPLISHMENTS

 Served about 61,000 beneficiaries to date (10%, adult males; 21%, adult females; 34.5%, males under age 16; 35.5%, females under age 16)

- Developed and distributed booklet on incorporating corn/soy blend into traditional diets
- Completed several outputs, including logistical and food distribution manuals, recipe manual, nutritional banners, centralized database, and training on compliance with regulation 11
- Completed the baseline assessment in March 2002 and presented it to each consortium member and USAID/Uganda
- Completed the HIV/AIDS annual impact survey
- Achieved a decrease in school absenteeism among children in participating households from 52% to 37%

PRIORITY ACTIVITIES

- Train project staff in inventory and commodity management
- Finalize the monitoring and evaluation auidelines
- Conduct a baseline assessment
- Distribute food
- Integrate nutrition education into mainstream counseling and care activities

PROJECT MATERIALS AND TOOLS

- HIV/AIDS: A Guide for Nutrition, Care and Support
- Handbook on Nutritional Care and Support for Persons Living with HIV/AIDS and Other Household Members
- Monitoring and evaluation plan

Uganda

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COUNTRY:

Zambia

PROJECT:

Africa KidSAFE (Shelter, Advocacy, Food, and Education)

IMPLEMENTING ORGANIZATIONS:

Primary: Project Concern International (PCI) **Grantees:** Fountain of Hope; Jesus Cares Ministry; FLAME; Mthunzi; St Lawrence; Lazarus Project; Anglican Children Project; Zambia

Red Cross Society; Movement of Community Action for the Prevention & Protection of Young People Against Poverty, Destitution, Diseases and Exploitation (MAPODE); New Horizon

USAID FUNDING PERIOD:

August 2000-August 2005

USAID AMOUNT:

\$418,000

PURPOSE

KidSAFE provides a continuum of care for street children in Lusaka. Ongoing organizational capacity building by PCI has enabled local partner Fountain of Hope and nine other Zambian NGOs to expand the provision of shelter, food, education, emergency medical care, counseling, skills training, assistance with income generation, and outreach to the increasing number of street children. KidSAFE also provides support for tracing and reintegrating children with their families and referral and placement of children for whom reintegration is not possible.

The project objectives are to::

- Reduce the number of street children through family tracing and reintegration
- Prevent community-to-street drift of at-risk children by equipping caregivers with basic business skills and seed money for incomegenerating activities
- Build the capacity of local NGOs and CBOs to design, implement, evaluate, and sustain effective programs serving street chil-

dren and those at risk of ending up on the streets

 Meet the basic needs of street and out-ofschool children through service provision at KidSAFE centers

KEY ACCOMPLISHMENTS

- More than 4,200 children per day have access to food, education, counseling, health care, and recreational opportunities through Africa KidSAFE street children centers.
- Approximately 400 children are resident at the centers, awaiting reintegration with families or other placement.
- Income-generating activities are reaching 350 households through the caregivers' programs.
- Nearly 200 children have been reintegrated with their families.
- 50 youth and 12 trainers were trained in the development of street businesses.

- In collaboration with Street Kids International, 30 youth were trained in Theatre for Development and are incorporating HIV/AIDS education in a variety of media, including drama, dance, and poetry, for their peers.
- A partnership has been developed with the private sector to support feeding for approximately 300 children per day at two street children centers.

PRIORITY ACTIVITIES

- Strengthen the KidSAFE service-provider referral network and improve standards of service delivery
- Explore expansion of the KidSAFE network to other major urban centers of Zambia
- Develop adapted HIV/AIDS educational materials targeting street and out-of-school youth

PROJECT MATERIALS AND TOOLS

- Intake (data collection) form for street children contacted through outreach efforts
- Computerized database of street children
- Street Kids International street business toolkit and street health materials

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Organizational capacity assessment and capacity building
- Child-centered outreach and support services with street youth

- Social welfare, health, and education services for street youth
- Drop-in centers/shelters for street youth
- Data collection methods for street children
- Income-generation and skills training for mothers
- Community school development
- Partnership development and maintenance

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COUNTRY:

Zambia

PROJECT:

CHANGES Community Sensitization and Mobilization Campaign (CSMC) and School Health and Nutrition (SHN)

IMPLEMENTING ORGANIZATIONS:

Primary: Creative Associates Inc.

Grantees: Ministries of education, health, and

community development

USAID FUNDING PERIOD:

April 2001-July 2005

USAID AMOUNT:

\$8,978,316 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The CHANGES project has two main components, Community Sensitization and Mobilization Campaign (CSMC) and School Health and Nutrition, and two crosscutting themes, HIV/AIDS activities and the small grants mechanism.

CSMC is a government program being implemented under the Ministry of Education in nine districts in Southern province. The ultimate goal of CSMC is improved participation of orphans and vulnerable children, especially girls, in school. Specifically, that goal will be reached by achieving key objectives in the areas of education and HIV prevention:

- Sensitizing and mobilizing communities and schools to issues of access to education; designing and implementing interventions to combat the constraints to girls' education and education of other vulnerable children
- Sensitizing and mobilizing communities and schools to identify factors contributing to the proliferation of HIV/AIDS; developing and implementing strategies to eliminate HIV risks to their children, the schools, and the communities

The School Health and Nutrition component, which began in April 2002, has addressed orphans and vulnerable children through small grants given to schools and CBOs that help orphans and vulnerable children meet school requirements (e.g., pencils and exercise books) or provide feeding assistance.

KEY ACCOMPLISHMENTS

- 594 provincial, district, and zonal government officials trained and capacity built for action in the campaign
- 3,997 local leaders, school/parents association members, and teachers trained and capacity built for action in the campaign
- 237,189 schoolchildren sensitized and mobilized to take action concerning HIV/AIDS and education for orphans and vulnerable children, especially girls
- Continuing development of an instrument to assist in collecting data on orphans and vulnerable children in 20 schools
- Training of 35 pupils as HIV/AIDS peer educators in schools
- Training of 20 teachers in peer education and management of anti-AIDS clubs

PRIORITY ACTIVITIES

- Scale up both the CSMC and School Health and Nutrition components
- Conduct a situation analysis in target schools on orphans and vulnerable children
- Strengthen linkages between health workers, schools, and communities

PROJECT MATERIALS AND TOOLS

- Numerous IEC (flip charts, brochures, calendars, and posters)
- Tablet pole to determine bilharzia (schistosomiasis) treatment dosage
- Bilharzia (schistosomiasis) questionnaire
- School health and nutrition data management forms
- Teacher training manuals
- Drug administration manual
- Management manual
- Monitoring checklist
- Revised counseling manual
- Locally produced HIV/AIDS readers and teachers guide

TECHNICAL ASSISTANCE

The project can provide expertise for other projects in the following areas:

- Community mobilization and sensitization
- School health and nutrition, especially for orphans and other vulnerable children
- General design and development of programs for school health and nutrition
 Participatory research
- Theater development
- Multisector collaboration in development work
- Training in gender and HIV/AIDS issues

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COUNTRY:

Zambia

PROJECT:

Psychosocial Support for Children Living With HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International (FHI) **Grantees:** Family Support Unit of the University
Teaching Hospital; Arthur Davison Children's

Hospital; the Mosi O Tunya Family Support Center of Livingstone General Hospital

USAID FUNDING PERIOD:

October 2002-September 2004

USAID AMOUNT:

\$330,000

PURPOSE

The psychosocial support project is aimed at improving the physical and emotional wellbeing of children living with HIV/AIDS and their parents and guardians. The project uses a family-centered approach and emphasizes provision of physical and emotional care and support for these children along the continuum of HIV/AIDS care and support to their parents and guardians. The interventions targeting children include provision of recreation and play therapy, counseling, academic support for children admitted to hospital, clinical reviews, and referral to other services. Parents and avardians are provided psychosocial counseling and IEC services to increase their awareness of HIV/AIDS prevention, care, and support. Other major project components are mobilization of home-based care programs to integrate and strengthen their skills and knowledge of providing care and support for children living with HIV/AIDS.

During the first year, the project initially implemented by the Family Support Unit at University Teaching Hospital was extended to two communities (Kanyama and Ng'ombe) through local health centers in Lusaka. The project is now scaled up on a pilot basis at two additional sites in other cities (Arthur Davison Children's Hospital in Copperbelt province and Mosi O Tunya Family Support Center at Livingstone General hospital in

Southern province) to determine if the model can be replicated by other provincial hospitals.

KEY ACCOMPLISHMENTS

- Conducted a formative assessment on care practices for children living with HIV/AIDS at the University Teaching Hospital and in the community
- Reached 11,152 children and 8,364 parents and guardians through different project activities
- Brought together children from all walks of life in Kids Club activities to mingle and play, resulting in reduced stigma and isolation of children living with HIV/AIDS

PRIORITY ACTIVITIES

- Increase provision of family-centered care for children living with HIV/AIDS
- Expand activities to reduce stigma and isolation for children living with HIV/AIDS
- Improve referrals available to services for HIV/AIDS care, including home-based care

PROJECT MATERIALS AND TOOLS

- Health education materials on management of common conditions affecting children living with HIV/AIDS
- Videos to sensitize community members on importance of psychosocial support for children living with HIV/AIDS
- Training materials for psychosocial counseling for HIV/AIDS
- Case management monitoring forms

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

 Training in psychosocial counseling and child counseling

- Design and development of care and support programs for children living with HIV/AIDS
- Development of learning materials for care and support for children living with HIV/AIDS

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COUNTRY:

Zambia

PROJECT:

Scale-Up of Community and Home-Based Care and Support Services for People Living With HIV/AIDS, TB Patients, and Orphans and Vulnerable Children (funded through Pact Community REACH)

IMPLEMENTING ORGANIZATIONS:

Primary: Project Concern International (PCI) **Grantees:** Bwafwano Home-Based Care Organization and JHPIEGO

USAID FUNDING PERIOD:

July 2002-July 2005

USAID AMOUNT:

\$350,000

PURPOSE

The objectives of the project are to:

- Scale up Bwafwano's successful care and support services for persons living with HIV/AIDS, TB patients, and orphans and vulnerable children
- Build the capacity of other communitybased home-based care organizations in

Zambia to successfully replicate the Bwafwano model

Develop a quality training system and standardized tools and materials, working with the national AIDS commission and leading home-based care organizations in Zambia, that will facilitate the scale-up of community- and home-based care services by Bwafwano and the other partner CBOs,

and to make these available through the national AIDS commission to home-based care programs nationally

To achieve these objectives, PCI provides technical support, financial support, and other capacity building to strengthen and scale up the care and support services being offered by the Bwafwano Community Home-Based Care Organization in the Chipata and Ngwerere catchment areas. Training packages for home-based caregivers and home-based care supervisors have been developed and are being used throughout the country.

With technical support from the Futures Group, operations research is assessing the impact of interventions and various household characteristics on the well-being of orphans and vulnerable children.

KEY ACCOMPLISHMENTS

- 125 new and established home-based caregivers and home-based care supervisors have been trained.
- 1,373 orphans and vulnerable children are registered and provided with a range of care and support services, including psychosocial and medical care, nutritional support, schooling, and income-generating opportunities.
- 1,556 people living with HIV/AIDS and 188 TB patients have been registered and provided with a range of care and support services, including medical care, psychosocial support, nutritional support, palliative care through home visits, and income-generating opportunities.
- Five newer community-based, home-based care organizations have been selected and linked with PCI and Bwafwano in mentoring relationships.

PRIORITY ACTIVITIES

- Finalize a caregivers training package, including trainers guide, reference materials, and caregiver checklists for orphans and vulnerable children
- Complete operations research data entry and analysis

PROJECT MATERIALS AND TOOLS

- Training-of-trainers home-based care module
- Home-based caregiver reference materials

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Home-based care for persons living with HIV/AIDS and orphans and vulnerable children
- Capacity building for local home-based care organizations
- Training of caregivers of orphans and vulnerable children

CONTACT INFORMATION

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COUNTRY:

Zambia

USAID FUNDING PERIOD:

January 2000-September 2004

PROJECT:

Strengthening Community Partnerships for the Empowerment of Orphans and Vulnerable Children (SCOPE-OVC)

USAID AMOUNT:

\$5,056,207

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: CARE International/Zambia and

numerous CBOs/NGOs/FBOs

PURPOSE

SCOPE works in 12 districts to mitigate the impact of HIV/AIDS by strengthening the capacities of communities to address the needs of orphans and other vulnerable children. With technical support and guidance from FHI, the project aims to:

- Strengthen district and community committees that address the needs of orphans and other vulnerable children
- Expand the effectiveness and efficiency of local CBOs and FBOs, government ministries, and private sector groups
- Mobilize, increase the scale of, and strengthen community-led responses and programs
- Provide technical assistance to communities and organizations in areas such as HIV

prevention, succession planning, community mobilization, and evaluation

The project works to establish a process of community consultation, involvement, and commitment whereby the local agenda drives the process by providing ongoing assistance for interventions. This multisector approach to community mobilization includes an initiative to address household economic security at a community implementation level and small grants in order to target the priority needs of orphans and vulnerable children and their families and support community efforts to mitigate the effects of HIV.

KEY ACCOMPLISHMENTS

■ More than 135,000 orphans and vulnerable children received services during 2003.

- Between October 2003 and March 2004, the project reached 81,709 orphans and vulnerable children.
- 1,200 district directories of existing orphans and vulnerable children stakeholders were compiled and distributed, with 379 stakeholders profiled.
- 12 district committees were established or strengthened and are now able to assess needs, develop action plans, mobilize resources, coordinate implementation, and monitor the progress of planned activities to improve care for orphans and vulnerable children.
- Linkages between the orphan and vulnerable children committees and district development committees were strengthened in order to ensure sustainability beyond the project time frame.
- 130 community committees for orphans and vulnerable children have been formed or strengthened, and have identified problems faced by orphans and vulnerable children, prioritized the needs, and identified possible solutions to these problems.
- Since project inception, 131 grants worth \$887,882 have been disbursed (28% to FBOs) to build the capacities of organizations and communities that support orphans and vulnerable children.
- 1,564 primary and secondary school pupils received educational support.
- 835 caregivers/guardians and 111 traditional leaders received psychosocial support training.
- Three workshops were held for 79 media personnel to orient the media network to issues that affect children.

- 61 people were trained as trainers in informal savings and lending schemes.
- Linkages to service providers for microfinance and business development were strengthened, resulting in community access to training and loans.
- As a result of sensitization meetings on child abuse, communities have formed support groups to report cases of child abuse and counsel or refer children who have been abused. There has been an increase in the number of reports on children being sexually abused.
- The SCOPE-OVC Project Final Review was undertaken by FHI and the report was disseminated at a stakeholders meeting attended by close to 100 people.

PRIORITY ACTIVITIES

Strengthen phaseout activities, which include:

- Strengthening coordination and resource mobilization efforts of district and community orphans and vulnerable children's committees
- Continuing implementation of psychosocial support strategies through training of guardians, community leaders, and traditional leaders
- Documenting and disseminating lessons learned through dissemination forums;
- Stakeholder meetings; national, regional, and international conferences; orphans and vulnerable children media networks; toolkits; and newsletters
- Improving quality of education by enhancing skills of community school teachers and provision of teaching and learning materials

- Increasing access to education by linking children to bursary schemes for primary and secondary school education
- Improving management of community schools by strengthening resource mobilization efforts of parent committees
- Strengthen household economics through training in informal savings and lending schemes and strengthening linkages with appropriate service providers for agricultural input, support, training in business development, and marketing

PROJECT MATERIALS AND TOOLS

- Training guidelines on community/resource mobilization
- Psychosocial support strategy paper and training materials
- Microfinance strategy paper
- Project brochure
- Project quarterly newsletters
- Revised external grants manual
- Internal grants manual
- Guidelines on organizational assessments/ development
- Psychosocial support survey for orphans and vulnerable children (quantitative and qualitative reports)
- Community school appraisal checklist
- Head of household survey report
- Voices from the Communities book

- Telling Our Stories, a tool to help children cope with loss and grief
- Psychosocial support training manual for traditional and community leaders

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Training in community/resource mobilization
- Organizational assessments/development
- Grants management
- Microfinance and income generation
- Psychosocial support for orphans and vulnerable children
- Networking and strengthening partnerships
- Monitoring and evaluation
- Information dissemination through the media and discussion forums
- Formation and capacity building of district and community committees for orphans and vulnerable children

CONTACT INFORMATION

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COUNTRY:

Zambia

PROJECT:

Zambia's Interactive Radio Instruction Program for Out-of-School Children and Orphans

IMPLEMENTING ORGANIZATION:

Education Development Center

USAID FUNDING PERIOD:

March 2000-September 2004

USAID AMOUNT:

\$2,400,000

PURPOSE

The Interactive Radio Instruction (IRI) Program for Out-of-School Children and Orphans is a collaborative effort among communities, churches, NGOs/CBOs, the Ministry of Education, Peace Corps, and the Education Development Center (EDC). The Educational Broadcast Services (EBS) division of the Ministry of Education develops and broadcasts the radio programs and develops supplementary materials. The Ministry trains mentors and provides supervision and monitoring at participating learning centers. The EDC is complementing these efforts with provincial outreach coordinators who work closely with relevant Ministry personnel under the supervision of the provincial education officer. They visit centers and communities to collect data, monitor progress, coach and supervise mentors, and encourage communities and NGOs to support mentors and centers.

EBS has produced 855 programs for grades one through five, which, in addition to language and mathematics, include science, social studies, and life skills beginning at grade two. In addition, the original grade one series was revised in 2003 and replaced with 165 completely new programs, 15 of which are designed for mentor training through radio.

Under USAID's Associate Award, EDC has continued its assistance to EBS in the production of radio programs and print materials, while programs for grades one through four are being revised. EDC has provided training workshops for the IRI writers and technicians to improve the production capacity of EBS. EDC has also established a system of gathering data more accurately and in a timely fashion. In addition, EDC has developed partnerships with six community radio stations in four provinces for the purpose of encouraging communities to support and promote education for all, particularly vulnerable children.

KEY ACCOMPLISHMENTS

■ EBS registered 516 centers with 22,763 learners in 2003.

- 855 30-minute programs for grades one through five have been written, recorded, and broadcast.
- 165 programs, including 15 mentor training programs for a new grade one series, incorporating the new "breakthrough to literacy" policy are being piloted in 2004.
- An evaluation of grade one learners showed that learners are learning basic literacy and numeracy skills.
- EDC engaged 11 provincial outreach coordinators to support Ministry of Education staff at provincial and district levels.
- Peace Corps recruited 32 volunteers to assist in building the capacity of communities in rural areas to support the program.

PRIORITY ACTIVITIES

- Review and revise programs for grades one through four
- Improve the production capacity at EBS
- Develop systems to support the program through partnerships with community radio stations, churches, NGOs, etc.
- Evaluate the program impact by testing a sample of learners
- Upgrade the monitoring and evaluation system

PROJECT MATERIALS AND TOOLS

- Scripts
- Mentors guide
- Recorded programs
- Evaluation data
- Community radio station promotional programs

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children on the use of interactive radio instruction and distance learning initiatives.

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COUNTRY:

Zimbabwe

PROJECT:

Linkages for the Economic Advancement of the Disadvantaged (LEAD)

IMPLEMENTING ORGANIZATIONS:

Primary: Development Alternatives, Inc. Grantee: International Capital Corporation

USAID FUNDING PERIOD:

March 2001-March 2006

USAID AMOUNT:

\$12,500,000 (about \$2,500,000 – \$500,000 per annum – includes support of children and families affected by HIV/AIDS)

PURPOSE

The project uses a range of food security, crisis mitigation, and economic strengthening interventions to help vulnerable populations cope with the adverse economic effects of HIV/AIDS and other crises (e.g., economic and political). Primary interventions are in the areas of microfinance, market linkages, agricultural recovery, and microbusiness services for disadvantaged groups.

KEY ACCOMPLISHMENTS

Because the Zimbabwe economy has deteriorated, the program has increasingly focused on food security linked to income-earning opportunities and includes the following accomplishments:

- 22,000 food-insecure households have received seed loan packs for drought-tolerant crops such as black-eyed beans, white sorghum, and finger millet in 18 of the country's 55 districts, thus improving both food security and income potential.
- To date, LEAD has established 19,120 nutrition gardens (out of a target of 20,000) using low-cost drip irrigation for growing vegetables to enhance food security and

introduce cash income from selling surplus. An additional 4,000 nutrition gardens are to be established before June 2004 through funding leveraged from partnering with four other international NGOs.

- LEAD has promoted food security and income-generating opportunities by brokering linkage agreements between private sector buyers and 11,000 smallholder farmers. Crops and produce include paprika, Michigan pea beans, groundnuts, tomatoes, chilies, and honey.
- LEAD has supported the leading microfinance institution to expand into rural areas. The loan portfolio currently includes 21,000 micro-entrepreneurs and farmers who have borrowed working capital for their business and farms and have received microbusiness skills training. Furthermore, with LEAD assistance, the village banks have surpassed their membership target of 6,500 by 1,729 and are an important source of credit and savings for the poor farmers.
- Through working with 52,767 households affected by HIV/AIDS and households with orphans and vulnerable children. LEAD reached and helped 241,480 orphans and

other vulnerable children. Targeted and non-targeted interventions improved diets by providing more nutritious food and improved access to medicine and education by providing additional income. This was achieved between October 2002 and September 2003.

- In FY 2003, 3,417 orphans and vulnerable children were beneficiaries in the LEAD legal services voucher program.
- Through six business opportunity centers spread across the country, LEAD has provided information on business opportunities and HIV/AIDS, business skills training, and Internet access to more than 5,400 feepaying customers.

PRIORITY ACTIVITIES

- Market linkages design and manage commercial out-grower schemes linked to commercial buyers; provide needed agronomic business training and access to input credit through guarantee schemes
- Support micro-finance Help selected village banks and microfinance institutions expand their membership through the introduction of new products, improved marketing techniques, and better management and use of information systems
- Promote drought-tolerant crops Enhance food security and create the potential for earning additional income
- Promote household gardens Provide better diets and potential income from vegetable growing using low-cost drip irrigation, a technology that offers labor savings for HIV-affected households and involves children in growing and tending of gardens

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Helping NGOs move toward a private sector outlook
- Building up the capacity of NGO staff through management support and training
- Establishing market linkages between smallholder growers and commercial buyers
- Providing technical assistance and guidance for transforming NGO microfinance institutions into commercial banks
- Providing technical support to three village banks and their umbrella body
- Promoting drought-tolerant crops to enhance seed and food security and create the potential for earning additional income by linking growers with better markets
- Promoting household nutrition gardens using low-cost drip irrigation to improve diets and create potential income from growing crops
- Providing a wide range of agronomic training in garden layout, irrigation, natural pesticides, natural fertilizer, and other low-cost practices that improve soil fertility and enhance yields
- Providing legal services for AIDS-affected families through a system that is empowering to rural women and the orphans they care for
- Providing business training and communication services for youth and rural microentrepreneurs

CONTACT INFORMATION

Development Alternatives, Inc./Zimbabwe:

Paul Bundick (paul_bundick@dai.com)
Glenrose Poyah (glenrose_poyah@dai.com)

USAID/Zimbabwe:

Sarah Bishop (sabishop@usaid.gov) Peter Halpert (phalpert@usaid.gov)

COUNTRY:

Zimbabwe

PROJECT:

The STRIVE Project (Support to Replicable, Innovative Community/Village-Level Efforts to Support Children in Zimbabwe)

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services

(CRS)/Zimbabwe

Grantees: Africare; Archdiocese of Bulawayo;

Batsiranai; Bethany; Bekezela; Catholic

Development Commission of Chinhoyi; Child

Protection Society; Farm Orphan Support Trust; Intermediate Technology Development Group; Salvation Army Masiye Camp; Diocese of Mutare Community Care Program; Rural Unity for Development Organisation; SAVE the Children UK; Scripture Union; Tsungirirai; Uzumba Orphan Trust

USAID FUNDING PERIOD:

December 2001-June 2004

USAID AMOUNT:

\$2,635,840

PURPOSE

The STRIVE project's overall goal is to improve care and support services for orphans and vulnerable children in Zimbabwe. STRIVE's objectives are to:

- Support and develop appropriate, effective, and sustainable community-based approaches to supporting children affected by HIV/AIDS through participatory learning and action
- Improve the organizational capacity of at least eight local organizations to deliver high-quality care, support, and prevention activities for children affected by AIDS and their families
- Increase access to quality education for children affected by AIDS, with a special focus on girls

By enabling STRIVE partners to carry out innovative interventions, STRIVE identifies lessons learned based upon the outcomes, cost effectiveness, reliability, and quality of services for children. A rigorous operations research component documents and disseminates not only sound practices but also the different activity combinations that have the greatest effect on the well-being of children affected by HIV/AIDS. STRIVE interventions aim to improve:

- Psychosocial status of orphaned and vulnerable children
- Nutritional status and food security
- Economic independence
- Access to quality education

KEY ACCOMPLISHMENTS

- Reached 128,851 children through both focused direct interventions and indirect assistance via block grants as of December 2003
- Disbursed US\$1,059,070 (ZW\$1,808,243,699) from October 2002 to September 2003
- Developed OVC Monitoring and Evaluation Guide: A Resource Tool For Communityand Faith-Based Organizations Working to Mitigate the Effects of HIV/AIDS on Children
- Conducted capacity assessments of eight partner organizations and pre-award surveys for other partners
- Conducted mid-term review exercise in May 2003 and published findings
- Conducted a special research study on the coping strategies of vulnerable children in Zimbabwe
- Participated in the development of the Zimbabwe National Plan of Action for Orphans and Vulnerable Children as a member of the working party of officials

PRIORITY ACTIVITIES

- Identify and document lessons learned and sound practices, including effective models of care and support for orphans and vulnerable children
- Conduct special studies on children affected by HIV/AIDS
- Facilitate a national orphans and vulnerable children forum to share findings from the STRIVE project operations research
- Assist in Zimbabwe's efforts to meet the 2005 UNGASS goals by "re-visioning" STRIVE

- in support of the recently developed Zimbabwe National Action Plan for Orphans and Vulnerable children
- Form strategic partnerships in program implementation with other organizations for maximum reach and impact of interventions

PROJECT MATERIALS AND TOOLS

The CRS/Zimbabwe technical proposal and the documents listed below are available on request from the USAID/Zimbabwe and CRS/Zimbabwe offices:

- STRIVE operations research strategy/ agenda
- Orphans and Vulnerable Children Monitoring and Evaluation Guide: A Resource Tool For Community and Faith Based Organizations Working to Mitigate the Effects of HIV/AIDS on Children
- Orphans and vulnerable children care and support tool, which eliminates doublecounting of children and assesses the depth of services provided
- Cost-effectiveness analysis tool for project activities
- Sound practices/lesson learned report
- Report of the mid-term review of the STRIVE Project, 2003

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Supporting community initiatives to assist orphans and vulnerable children and their families
- Supporting community mobilization activities that help communities develop and "own" orphan programs
- Assessing and building the capacity of community-based groups
- Supporting psychosocial activities for orphans and vulnerable children within communities, with an emphasis on stigma reduction
- Enhancing food security (access, availability, and use)
- Providing education assistance (direct assistance and block grants/resource exchange)

- Developing monitoring and evaluation tools and systems
- Training in how to avoid double-counting of project beneficiaries
- Developing operations research strategies for orphans and vulnerable children projects

CONTACT INFORMATION

Catholic Relief Services/Zimbabwe:
Dr. Kirk Felsman (kfelsman@crszim.org.zw)
STRIVE Project Director
103 Livingstone Avenue
P.O. Box CY 1111,
Harare, Zimbabwe

USAID/Zimbabwe:
Peter Halpert (phalpert@usaid.gov)
Tonya Himelfarb (thimelfarb@usaid.gov)

COUNTRIES:

Multiple

PROJECT:

Africa Education Initiative (AEI)

IMPLEMENTING ORGANIZATIONS:

1.) Textbooks and other learning materials component:

Primary: Hampton University

Grantees: Elizabeth City State University; Albany State University; Dillard University; Alabama A&M University; St. Augustine's

College.

2.) The Ambassadors' Girls Scholarship Program: To be determined

3.) Teacher training component: **Primary**: International Foundation for Education and Self-Help

USAID FUNDING PERIOD:

FY 2002-2007

USAID AMOUNT:

\$200,000,000

PURPOSE

The Africa Education Initiative (AEI) is designed to increase access to quality basic educational opportunities and increase the number of teachers in Africa, especially at the primary school level. This multiyear initiative will provide 250,000 scholarships for African girls; train 420,000 teachers; produce 4.5 million locally developed textbooks (and other learning materials); and increase the role of parents in their children's education by working to make school systems more transparent and more open to reforms from parents.

Each of these objectives will also include a provision to ensure that HIV/AIDS mitigation and prevention efforts are incorporated. To implement AEI, USAID will work closely with host-country ministries of education, institutes of higher education, local and international NGOs, and the private sector. To meet the Initiative's goals, USAID will encourage new partnerships to include foundations, faithbased groups, and other education stakeholders. The Initiative began in 2002 and has developed a partnership with the Historically

Black Colleges and Universities (HBCU) consortium, which will collaborate with African educational institutions to develop, publish, and distribute high-quality textbooks and learning materials.

KEY ACCOMPLISHMENTS

To date, AEI has benefited 9,600 new teachers through an improved preservice training system. Almost 88,000 experienced teachers have had their skills upgraded though in-service training programs. Textbooks and other learning materials in language arts and science have been printed and sent to Guinea (500,000) and Senegal (270,000). The Girls Scholarship Program has awarded 5,428 scholarships.

PRIORITY ACTIVITIES

- Provide scholarships for 250,000 girls in sub-Saharan Africa
- Partner African institutions with HBCUs in the United States to provide 4.5 million text-

books and other learning tools for children in Africa

- Train more than 160,000 new teachers
- Provide in-service training for more than 260,000 existing teachers
- Address HIV/AIDS issues through education

Involve parents and communities in education

CONTACT INFORMATION

USAID/Washington: Dr. Sarah Moten (smoten@usaid.gov) Charles Feezel (cfeezel@usaid.gov)

COUNTRIES:

Multiple East, Central, and Southern African countries

PROJECT:

African Network for the Care of Children Affected by HIV/AIDS (ANECCA)

IMPLEMENTING ORGANIZATION:

Regional Centre for Quality of Health Care, Makerere University, Kampala, Uganda

USAID FUNDING PERIOD:

FY 2000-2004

USAID AMOUNT:

\$250,000

PURPOSE

The project's purpose is to build African capacity for the care of children infected and affected by HIV/AIDS.

 Produced guidelines for health workers on counseling HIV-infected mothers on infant feeding to prevent mother-to-child HIV transmission

KEY ACCOMPLISHMENTS

- Provided technical assistance for training health workers in comprehensive care of HIV- infected children
- Provided training in antiretroviral therapy for HIV-infected children
- Provided technical assistance in coordinating the development of evidence-based guidelines for clinical care and training
- Published handbook on critical issues in pediatric HIV/AIDS care in Africa

PRIORITY ACTIVITIES

- Advocate for improved access to antiretroviral therapy and psychosocial support for children living with HIV/AIDS
- Provide training for antiretroviral therapy for HIV-infected children
- Establish appropriate linkages with organizations working in PMTCT to improve followup care for HIV-exposed infants
- Provide technical assistance for developing models of pediatric care with integrated psychosocial support

PROJECT MATERIALS AND TOOLS

- Job aid on counseling mothers for infant feeding to prevent mother-to-child HIV transmission
- Handbook on pediatric AIDS in Africa
- Statement on the importance of early diagnosis and *Pneumocystis carinii* pneumonia prophylaxis for HIV-exposed infants

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Development of clinical care and counseling guidelines
- Training in pediatric AIDS care
- Mentoring

CONTACT INFORMATION

Regional Centre for Quality of Health Care: Dr. Denis Tindyebwa, HIV/AIDS Advisor (dtindyebwa@rcqhc.org)

USAID/REDSO:

Mary Pat Kieffer (mkieffer@usaid.gov)

COUNTRIES:

Malawi, Zambia, Zimbabwe

PROJECT:

Consortium for Southern Africa Food Security Emergency (C-SAFE)

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services (CRS)

Grantees: World Vision, CARE

USAID FUNDING PERIOD:

October 2002-September 2005

USAID AMOUNT:

Approximately \$125,000,000 for year two (October 2003-September 2004), including the value of commodities and ocean and inland freight costs

PURPOSE

C-SAFE's goal is to improve household food security in targeted communities in Malawi, Zambia, and Zimbabwe. The strategic objectives are to:

- Improve/maintain the health and nutritional status of vulnerable communities and households
- Increase productive assets among vulnerable communities and households

 Increase resilience to food security shocks among vulnerable communities and households

Activities under the third objective remain unfunded, as do several activities under the second.

C-SAFE provides nutritional support (food aid) through ongoing service providers targeting children under 5 years of age, children and adults affected and infected by HIV/AIDS, and households affected by chronic illnesses. C-SAFE partner agencies have applied other donor funding to augment the food aid inter-

vention with activities to improve capacity and facilitate service delivery to children and their parents/caregivers. These activities include:

- Training for home-based caregivers in nutrition, home nursing, psychosocial support, palliative care, TB treatment support, and identification of children at risk
- Support for clinics and health care centers serving underweight and malnourished under-5-year-olds through supplementary feeding programs

At the partner level, orphans and vulnerable children programming linked to or using C-SAFE food support focuses on providing psychosocial support via playgroups, training youth caregivers, and improving school retention and educational outcomes.

KEY ACCOMPLISHMENTS

C-SAFE became fully operational in May 2003 when the first commodities arrived. Using the peak figures from first six months of the current fiscal year (October 2003-March 2004) as a guide, the approximate number of orphans receiving food per month through C-SAFE's member agencies has been established as:

- Malawi 4,063
- Zambia 24,195
- Zimbabwe 35,330

While these children were identified as requiring food support through a variety of mechanisms, C-SAFE's approach has been to deliver a household ration to protect the health and nutritional status of beneficiaries. The figures above indicate the number of children identified as primary beneficiaries but does not

reflect the number of food aid recipients (secondary beneficiaries) at household level.

C-SAFE is also providing support to clinics and health care centers serving underweight and malnourished under-five-year-olds through supplementary feeding programs. At the partner level, OVC programming linked with C-SAFE food support focuses on providing psychosocial support via play groups, training for youth caregivers and improved school retention and educational outcomes.

PRIORITY ACTIVITIES

- Seek funding to implement efforts for building community resilience to food security shocks, a critical component of C-SAFE's "developmental relief" approach
- Harmonize project targeting practices
- Draw lessons learned from past and current HIV/AIDS programming (including orphanspecific programs)
- Help disseminate these lessons and put them into practice by consortium members

PROJECT MATERIALS AND TOOLS

All of the materials used in the field by the project are hard-copy versions only. The home-based care training modules and guidance and the orphans and vulnerable children guidance may be available in electronic versions from the headquarters of the member private voluntary organizations. Requests for these items should be made to Kate Greenaway (Kate_Greenaway@c-safe.org).

CONTACT INFORMATION

World Vision International:
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Catholic Relief Services:
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CARE:

Sylvester Kalonge (skalonge@caremalawi.org)

C-Safe, South Africa: Kate Greenaway (Kate Greenaway@c-safe.org) USAID/Washington:
Judy Canahuati (jcanahuati@usaid.gov)
Leslie Petersen (lpetersen@usaid.gov)

COUNTRIES:

Angola, Benin, Botswana, Burkina Faso, Burundi, Cape Verde, Cameroon, Central African Republic, Chad, Congo-Brazzaville, Democratic Republic of the Congo, Equatorial Guinea, Eritrea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Ivory Coast, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mauritius, Mozambique, Namibia, Niger, Nigeria, Rwanda, Sao Tome & Principe, Senegal, Sierra Leone, South Africa, Swaziland, Tanzania, Togo, Uganda, Zambia, Zimbabwe

PROJECT:

Education for Development and Democracy Initiative (EDDI)

IMPLEMENTING ORGANIZATIONS:

EDDI is directed by the National Security Council, administratively housed at USAID and administered through an interagency working group that includes the State Department, Peace Corps, General Services Administration, Department of the Interior, associated government agencies of the Environmental Protection Agency, and the Departments of Education, Agriculture, and Transportation, as well as over 230 U.S. and 350 African implementing partners (NGOs, higher education institutions, small businesses, etc).

USAID FUNDING PERIOD:

FY 1998-2004

USAID AMOUNT:

\$138,000,000

PURPOSE

EDDI is an African-led commitment from the U.S. government to strengthen the educational systems and democratization process of sub-Saharan Africa through linkages with the United States. EDDI's goal is to integrate African countries into the global community of free market democracies through targeted and innovative approaches to education and citizen involvement. The Initiative follows a policy of inclusion to ensure that girls with special needs, including orphans due to HIV/AIDS, are supported through scholarships.

Strategies include:

- 1.) Creating an enabling environment by:
- Securing a commitment to cooperation from government agencies and African policymakers
- Relying on existing U.S. government structures, such as those within the General Services Administration, the Department of Interior, USAID overseas missions, and U.S. embassies, to support project implementation and management

- 2.) Following a set of EDDI steering principles and cross-cutting themes, including a focus on:
- Gender
- Capacity building
- Economic development
- Workforce development
- HIV/AIDS mitigation through education
- Public-private sector partnership
- 3.) Achieving a set of intermediate results, including:
- Developing and disseminating knowledge and guidance
- Increasing access to education
- Increasing access to democracy
- Increasing access to technology

KEY ACCOMPLISHMENTS

- Awarded over 270 projects in 43 countries
- Included implementing partners and benefiting institutions in 35 U.S. states
- Built capacity and expanded the number of historically disadvantaged institutions in the United States that can deliver programs in Africa
- Upgraded technology capacity and use in hundreds of African institutions
- Leveraged an additional \$35 million from outside sources

- Established a model for interagency cooperation
- Benefited over 6 million economically and educationally disadvantaged students, teachers, physically challenged persons, women, minorities, entrepreneurs, and children affected by HIV/AIDS and other particularly vulnerable groups
- Awarded EDDI scholarships in 38 African countries to more than 20,000 at-risk girls and women

PRIORITY ACTIVITIES

- International studies partnerships to facilitate exchanges between students and educators in Africa and the United States
- University partnerships to establish workforce development systems and strengthen technology links, information resources, curriculum reform, marketable skills, joint research, and teacher training
- Community resource centers to serve as community technology and resource hubs
- The Ambassadors' Girls Scholarship Program to help economically and socially disadvantaged girls and women to finish primary, secondary, or tertiary/vocational school
- Technology partnerships to enhance African institutions' capacity to bridge the digital divide
- Economic entrepreneurial training to provide skills training and capacity building to entrepreneurs, training institutions, and small businesses
- Democracy and governance partnerships to improve the capacity for government

institutions, higher education institutions, government officials and leaders, and citizens to participate in active democracies

CONTACT INFORMATION

The Education for Development and Democracy Initiative:

Dr. Sarah E. Moten, Coordinator Tel: 202-712-5220; Fax: 202-216-3381 Web site: http://www.eddionline.org 1300 Pennsylvania, Avenue, NW Washington, DC 20523-4600

USAID/Washington: Charles Feezel (cfeezel@usaid.gov)

COUNTRIES:

Botswana, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia, Zimbabwe

PROJECT:

Food and Nutrition Technical Assistance (FANTA)

IMPLEMENTING ORGANIZATIONS:

Primary: Academy for Educational

Development (AED)

Grantees: Regional Centre for Quality of

Health Care (RCQHC), Kampala;

Commonwealth Regional Health Community Secretariat (CRHCS), Arusha, Tanzania

USAID FUNDING PERIOD:

October 1999-September 2008

USAID AMOUNT:

Bureau for Global Health, Office of HIV/AIDS: \$375,000

Regional Economic Development Services
Office for Eastern and Southern Africa

(REDSO/ESA): \$505,000 Country missions: \$1,050,000

Bureau for Democracy, Conflict and Humanitarian Assistance, Food for Peace

program: \$75,000

PURPOSE

The project supports integrated food security and nutrition programming to improve the health and well-being of women and children. As part of this work, FANTA provides technical support to improve food security and nutrition interventions aimed at mitigating the effects of HIV/AIDS on individuals, households, and communities. The project's primary countries are Kenya, Rwanda, Uganda, and Zambia. Through regional work in eastern and southern Africa, the project's activities have also included Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Tanzania, and Zimbabwe.

The main objectives of FANTA's HIV/AIDS activities are to:

- Strengthen nutritional care and support for people living with HIV/AIDS and for others affected by the pandemic
- Strengthen programs and other efforts aimed at supporting the capacities of individuals, households, and communities to address the food security impacts of HIV/AIDS
- Promote and support the effective application of food security interventions, including the use of food and food aid, to mitigate the impact of HIV/AIDS on individuals, households, and communities

KEY ACCOMPLISHMENTS

- In collaboration with RCQHC and other AED projects, FANTA developed and disseminated Nutrition and HIV/AIDS: A Training Manual (2003).
- FANTA, in collaboration with regional partners, supported regional workshops to assist country teams with the development and application of national guidelines for HIV/AIDS nutritional care and support.
- FANTA supported national stakeholders in Uganda in developing Nutritional Care and Support for People Living with HIV/AIDS in Uganda: Guidelines for Service Providers (2004) and Improving the Quality of Life through Nutrition: A Guide for Feeding People Living with HIV/AIDS (Uganda, 2004).
- FANTA developed and disseminated Food and Nutrition Implications of Antiretroviral Therapy in Resource-Limited Settings (2003), which provides information about the interactions between ART and nutrition and guidance about program management of these interactions to ensure effective therapy.
- HIV/AIDS: A Guide for Nutrition, Care and Support was developed and disseminated to a range of private and voluntary organizations, government agencies, donors, AIDS service organizations, CBOs, and others involved in HIV/AIDS care and support. This document provides guidance to help program managers make informed recommendations about food management and nutrition issues for households with members living with HIV/AIDS.
- FANTA provided technical support to improve programming and monitoring and evaluation of Title II HIV/AIDS programs in Malawi, Uganda, Rwanda, Kenya, and

Zambia. These programs target households affected by HIV/AIDS with supplementary food assistance combined with a range of health, nutrition, and educational services. FANTA's technical assistance has led to improved monitoring and evaluation systems and program refinements.

PRIORITY ACTIVITIES

- Develop a programming guide for uses of food to support HIV/AIDS mitigation in highprevalence countries
- In collaboration with a regional partner and other AED projects, develop counseling materials on nutrition and HIV/AIDS for use in programs and services in Uganda and for adaptation to other countries in the region
- Produce, in collaboration with regional partners in eastern and southern Africa, a nutrition and HIV training manual for nurses and midwives, which will include sessions on nutrition and HIV in young children and adolescents, infant feeding, and PMTCT
- Adapt existing training materials, such as *Nutrition and HIV/AIDS: A Training Manual*, for the Rwandan context
- Develop materials and training information to support the management of ART-nutrition interactions in ART services in the East and Southern Africa regions, with a focus on Kenya, Rwanda, and Zambia
- Adapt existing nutritional care and support counseling materials for use at the community level by community-based volunteers, caregivers, and family members of people living with HIV/AIDS in Zambia
- Determine the appropriateness of using the "community therapeutic care" (CTC)

approach to provide care and support to severely malnourished people living with HIV/AIDS, including infants and children

Produce and disseminate the revised version of HIV/AIDS: A Guide for Nutrition, Care and Support to support programs and services in planning food management and nutritional responses to HIV/AIDS

PROJECT MATERIALS AND TOOLS

The following items are available to be shared with other projects:

- Nutritional Care and Support for People Living with HIV/AIDS in Uganda: Guidelines for Service Providers (2004)
- Improving the Quality of Life through Nutrition: A Guide for Feeding People Living with HIV/AIDS (Uganda, 2004)
- Nutrition and HIV/AIDS: A Training Manual (2003)
- Food and Nutrition Implications of Antiretroviral Therapy in Resource-Limited Settings (2003)
- Handbook: Developing and Applying National Guidelines on Nutrition and HIV/AIDS (2003)
- HIV/AIDS Mitigation: Using What we Already Know (2002)
- HIV/AIDS: A Guide for Nutrition, Care and Support (2001)
- Potential Uses of Food Aid to Support HIV/AIDS Mitigation Activities in Sub-Saharan Africa (2000)

■ The Potential Role of Food Aid for AIDS Mitigation in East Africa: Stakeholder Views (2000)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- HIV/AIDS mitigation
- HIV/AIDS nutritional care and support
- National guideline development
- Food security
- Monitoring and evaluation
- Agriculture and nutrition linkages
- Use of food aid to support HIV/AIDS program objectives, including mitigation, care and support, and food for education

CONTACT INFORMATION

Academy for Educational Development: 1825 Connecticut Avenue, NW Washington, DC 20009
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USAID/REDSO/ESA:

Janet Hayman (jhayman@usaid.gov)

COUNTRIES:

Burundi, Mauritania, Rwanda, Sierra Leone, Uganda, Zimbabwe

PROJECT:

HIV/AIDS and School Feeding Pilot Project

IMPLEMENTING ORGANIZATIONS:

Primary: World Food Program

Grantee: World Vision

USAID FUNDING PERIOD:

FY 2004-2005

USAID AMOUNT:

\$250,000

PURPOSE

The World Food Program (WFP) and World Vision have formed a partnership to pilot an HIV/AIDS and school feeding project. This joint programming aims to benefit orphans and other children affected by HIV/AIDS as well as their families and/or caregivers. WFP provides food assistance that is linked with complementary activities implemented by World Vision to mitigate the impact of HIV/AIDS. School feeding activities are implemented in the context of programs focused on children affected by HIV/AIDS in high-impact countries. The objectives of the pilot project are to:

- Develop a partnership of equals
- Build on comparative advantages
- Focus on complementary activities
- Apply lessons learned from pilot project
- Provide feedback to improve strategic partnerships

KEY ACCOMPLISHMENTS

Strategic discussions between the two organizations resulted in the development of the guiding principle of the partnership, protocols for engagement at the field level, and country-level terms of references for the field missions.

- Five country missions have taken place in Mauritania, Sierra Leone, Burundi, Rwanda, and Uganda.
- Each country completed an analysis of the current partnership by examining strengths and weaknesses of current programming, documenting lessons learned, and highlighting benefits of the partnership itself. The teams then identified areas of potential collaboration and defined initial activities and lines of work. The project documentation is currently being elaborated.

PRIORITY ACTIVITIES

- Conduct field missions to Zimbabwe to support joint programming exercise
- Secure additional resources and fund raising for new activities
- Hold joint meeting in Africa region to monitor progress, gather lessons learned, and share experiences (November/December)
- Provide additional program support from headquarters and regional offices

PROJECT MATERIALS AND TOOLS

Documentation available at www.wfp.org:

- Widening the Window of Hope: Using Food Aid to Improve Access to Education for Orphans and Other Vulnerable Children in Sub-Saharan Africa
- Getting Started: HIV/AIDS Education in School Feeding Programs

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

 Materials on school-based interventions and orphans and vulnerable children Linkages to field-based operations focusing on food-assisted interventions for children and families affected by HIV/AIDS

CONTACT INFORMATION

Project:

Robin Jackson (Robin.Jackson@wfp.org)
Katherine Finberg
(Katherine.Reed-Finberg@wfp.org) or
Gernot Ritthaler (Gernot.Ritthaler@wfp.org)

USAID/Washington:
Julie Chitty (jchitty@usaid.gov)
Judy Canahuati (jcanahuati@usaid.gov)

COUNTRIES:

Kenya, South Africa

PROJECT:

Local Links for OVC Support

IMPLEMENTING ORGANIZATIONS:

Primary: CARE

Grantees: South Africa – Church of the Province of Southern Africa); Teba

Development; others to be confirmed Kenya – Kenya AIDS NGO Consortium

USAID FUNDING PERIOD:

FY 2004-2007

USAID AMOUNT:

\$5,225,197

PURPOSE

The Local Links for OVC Support project builds and strengthens the capacity of families and communities to provide quality care and support to orphans and vulnerable children. Based on an assessment of need and urgency, it targets defined geographic areas in Kenya and South Africa. Local Links builds upon CARE's existing in-country presence and network of partners including FBOs, CBOs, NGOs, and local government institutions. It features the replication and scaling up of "best practices" for care and support of orphans and vulnerable children. Project activities are multisectoral and coordinated

with other programs and activities in the HIV/AIDS arena.

The Local Links project strengthens the capacity of families to cope with their problems; mobilizes and strengthens community-based responses; works to ensure that governments develop appropriate policies, including legal and programmatic frameworks and essential services for the most vulnerable children; and features strong partnerships with in-country organizations. Community ownership of interventions is of paramount importance.

The project's three strategic objectives are to:

- Strengthen the economic coping mechanisms of families and communities
- Strengthen the capacity of local organizations to meet the needs and protect the rights of orphans and vulnerable children
- Reduce stigma (Kenya) and improve advocacy efforts (South Africa) on behalf of orphans and vulnerable children

In Kenya, Local Links is based in Kibera, a disadvantaged slum community in Nairobi with a population of over 500,000 people. In South Africa, it is based in selected rural districts of some of the country's poorest provinces (initially Free State and Limpopo, with later expansion to Eastern Cape).

KEY ACCOMPLISHMENTS

Work has just commenced.

PRIORITY ACTIVITIES

- Develop programs and services in business development, microfinance, and village savings and loan associations
- Conduct institutional assessments and develop and implement information sharing, networking, and training programs for orphan and vulnerable children organizations and service providers that respond to local priorities
- Kenya Develop training and community outreach activities to reduce stigma
- South Africa Develop advocacy action plans, training, and a communication strategy

PROJECT MATERIALS AND TOOLS

- Livelihood assessment training manuals
- Capacity assessment tools for civil society organizations
- Service provider scorecard assessment tools

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Community mobilization
- Economic safety nets with a focus on voluntary savings schemes
- Promoting livelihood security for vulnerable groups
- Peer education and behavior change communication

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COUNTRIES:

Multiple Southern Africa countries

PROJECT:

Orphan Researcher Meeting

IMPLEMENTING ORGANIZATION:

Health Economics and HIV/AIDS Research Division (HEARD), University of KwaZulu-Natal

USAID FUNDING PERIOD:

FY 2003-2004

USAID AMOUNT:

\$27,852

PURPOSE

The purpose of the project is to bring together representatives from research teams in southern Africa that have recently completed or are involved in research on the welfare of orphans and vulnerable children in the context of the HIV/AIDS pandemic. The purpose of the meeting will be to:

- Identify current forms of research
- Identify gaps in research
- Identify difficulties and solutions (including methodological innovations) to research design and implementation
- Identify challenges for scientific research in this field
- Establish a foundation that includes lessons learned and guidelines for research design and implementation and that identifies gaps in the research
- Produce a document for dissemination to research and intervention agencies

The meeting will be an exploratory intervention intended to draw out and synthesize many of the issues, challenges, and problems for research, and will include critical issues that need to be addressed by state welfare agencies. The meeting is not intended to be comprehensive or to cover all the issues associated with research on orphans and vulnerable children but rather will provide an initial platform from which to develop knowledge on pertinent issues and a network of research work in Africa.

KEY ACCOMPLISHMENTS

HEARD, in partnership with the Boston University's Center for International Health, is currently completing the protocol for a fiveyear orphan welfare research project.

PRIORITY ACTIVITIES

- Hold the two-day meeting
- Prepare a report for dissemination to other researchers and agencies

 Discuss the options for using this platform for further activities, depending on the workshop's results

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COUNTRIES:

Ethiopia, Mozambique

PROJECT:

SCALE-UP HOPE Program (International Save the Children Alliance Expanded-Unified Partnership With the Hope for African Children Initiative)

IMPLEMENTING ORGANIZATIONS:

Primary: Save the Children USA (on behalf of the SC Alliance)

Grantees: Save the Children Norway; Save the Children UK; Hope for African Children (HACI) Partners (CARE, Plan International, World Vision, World Conference on Religion and Peace, Society for Women and AIDS in Africa); HACI grantees in Ethiopia and Mozambique.

USAID FUNDING PERIOD:

February 2004-February 2007

USAID AMOUNT:

\$5.900,000

PURPOSE

The SCALE-UP HOPE Program will take community response programming for orphans and other vulnerable children to greater scale in Ethiopia and Mozambique through community mobilization and capacity building activities. The program's approach is shaped by proven community mobilization and capacity building methodologies (e.g., the STEPs Program in Malawi, formerly known as COPE) and stresses leveraging and expanding local capacity to sustainably address the challenges faced by orphans and other vulnerable children.

Central to the SCALE-UP HOPE Program strategy is a commitment to comprehensive care, support, and prevention interventions through child-centered programs that promote and protect the rights of the child while simultaneously meeting their immediate needs. The SCALE-UP HOPE Program aims to benefit

about 48,000 children affected by HIV/AIDS in five regions of Ethiopia and just over 41,000 children in at least four provinces of Mozambique over the three-year life of the program. The program will scale up access to education, livelihoods, and psychosocial support for a defined set of children in the initial targeted regions and provinces. As the program succeeds in reaching an increased number of orphans and vulnerable children, it will expand coverage to include more children affected by HIV/AIDS in the target areas.

KEY ACCOMPLISHMENTS

Project is newly funded.

PRIORITY ACTIVITIES

 Training and support in community mobilization strategies to facilitate a comprehensive community-wide response

- Strengthen the institutional capacity of existing community groups to plan, implement, and monitor and evaluate programs through training, mentoring, and support
- Provide subgrants and support to local groups to sustain and expand the provision of HIV/AIDS prevention, care, and support services
- Facilitate strong networks and coordination of essential services in collaboration with local government structures

PROJECT MATERIALS AND TOOLS

- Community Action Cycle (CAC) methodologies (currently available)
- STEPs (Scaling-Up HIV/AIDS Interventions Through Expanded Partnerships) manual Community Mobilization Handbook for HIV/AIDS Prevention, Care and Impact Mitigation (currently available)
- Criteria for identifying orphans and vulnerable children and HIV/AIDS-affected households community guide (available September 2004)
- Adapted survey instruments for monitoring orphans and vulnerable children and HIV/AIDS-affected households targeted by SCALE-UP HOPE and other organizations assisting them

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

 Community mobilization – CAC cycle, STEPs manual

- Networking HACI technical exchange networks (TENs)
- Monitoring and evaluation Criteria for selecting and monitoring orphans and vulnerable children programs

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COUNTRIES:

Botswana, Lesotho, Swaziland

PROJECT:

Southern Africa Regional HIV/AIDS (RHAP), U.S. Ambassador's Initiative Program

IMPLEMENTING ORGANIZATIONS:

Primary: Futures Group

Grantees: Centre for Development and Population Activities (CEDPA); Research Triangle Institute (RTI)

USAID FUNDING PERIOD:

October 2002-December 2003

USAID AMOUNT:

\$375,000

PURPOSE

Through USAID's Regional HIV/AIDS Program of Southern Africa (RHAP), the POLICY Project is working with the Southern African Development Commission (SADC) and individual countries in an effort to improve HIV/AIDS policies in the region. Using a coordinated strategy for dealing with HIV/AIDS, POLICY in particular supports and provides assistance in the areas of regional policy activities, networking and information sharing, and improved consistency and comparability of data. Since RHAP's inception in 2000, POLICY has collaborated closely with U.S. embassies to provide technical assistance for planning and implementing the U.S. Ambassador's Initiative Program in Botswana, Lesotho, and Swaziland. Through a series of capacity- and skill-building workshops and disbursement of small grants, institutions in the three countries are able to advocate and/or increase their involvement in HIV/AIDS activities, develop local partnerships, and facilitate the development of HIV/AIDS activities. Program implementation is determined by the U.S. ambassadors and staff in each country and guided by each country's current HIV/AIDS strategic plans, activities, and/or identified priority areas.

The Ambassador's Initiative Program is part of RHAP, which was launched in February 2000 and covers 10 countries in Southern Africa. RHAP's key focus areas are cross-border activities, regional policy activities, networking and information sharing, and improved consistency and comparability of data. RHAP builds on the strength of its partnerships with USAID bilateral missions and U.S. embassies and works in collaboration with host-country governments, local NGOs, and existing in-country HIV/AIDS programs.

Under RHAP, the Regional Psychosocial Support Initiative (REPSSI) based in Botswana is carrying out a project that will enhance the capacity of 10 participating NGOs/CBOs to deliver effective psychosocial support, community mobilization, and life skills programs to children.

Additionally, the "Unity for Change" initiative implemented in Lesotho by the POLICY Project and five community support groups addresses

community care and support interventions for orphans and their families.

KEY ACCOMPLISHMENTS

While the organizations that have received grants address a range of issues – including advocacy, stigma, care and support, and capacity building – several organizations have sought to improve the lives of children infected or affected by HIV/AIDS. Accomplishments include the following:

- Save the Children (Swaziland) has sensitized rural-based primary school children on HIV/AIDS and children's issues from the child rights point of view. Students, including those affected by HIV/AIDS, and teachers have received life skills training.
- The Lesotho Preschool and Day Care Association has assisted with the formulation of policies on training preschool teachers on integrating HIV/AIDS education into the preschool setting and providing counseling for parents and teachers.
- The Lesotho Red Cross Association has provided training for youth and parent peer educators to become HIV/AIDS advocates. Since their training, these advocates have been promoting "living safely" and "healthy schools" in their respective communities. As part of their advocacy campaigns, they have been providing life skills to orphans and other vulnerable children, mentored and supported these children, and kept track of their progress.

PRIORITY ACTIVITIES

 Complete funded work, submit final project report, and disseminate reports

- Review and incorporate lessons learned from the first two funding rounds in an ongoing program
- Prepare and execute an ongoing program that will include capacity for population- or issue-specific funding cycles, including orphans and vulnerable children
- Make reports and lessons learned available on the RHAP Web site

PROJECT MATERIALS AND TOOLS

- Final reports and project needs assessments
- Final report/evaluation forms
- PowerPoint presentation and other information available on the RHAP Web site

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Linking stigma and discrimination with prevention and care for orphans and vulnerable children
- Indicator development and monitoring and evaluation for orphans and vulnerable children issues and activities
- Grants program management and mentoring
- Social mobilization around orphans and vulnerable children issues
- Policy dialogue and advocacy
- Materials development

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COUNTRIES:

Cameroon, Ethiopia, Ghana, Kenya, Malawi, Mozambique, Senegal, Uganda, Zambia

PROJECT:

Strengthening and Scaling Up The Hope for African Children Initiative (HACI)

IMPLEMENTING ORGANIZATIONS:

Primary: CARE

Grantees: Plan International; Save the Children; the Society of Women and AIDS in Africa; World Conference on Religion and Peace; World Vision; Network of African People Living with HIV/AIDS

USAID FUNDING PERIOD:

April 2004-March 2007

USAID AMOUNT:

\$15,000,000

PURPOSE

The Hope for African Children Initiative (HACI) is a community-based pan-African effort. Established in the summer of 2000, HACI is a partnership bringing together seven organizations that share an international focus and work to increase the capacity of local communities to provide prevention, care, and support services to African children and their families affected by AIDS.

HACI is based on three fundamental principles – it is child-focused, community-based, and committed to ensure program integration. The Initiative focuses on a holistic approach by addressing the entire child-focused prevention-care-mitigation cycle with mutually reinforcing program strategies. Moreover, it scales up successful practices and interventions that reduce the impact of HIV/AIDS on orphans and vulnerable children, their families, and communities.

Through the Initiative, partner organizations:

- Facilitate expansion of African services and organizations working locally to address AIDS-related challenges
- Provide financial, material, and technical resources to such caregivers, enabling them to better coordinate efforts and provide additional services
- Support local activists in efforts to engage government, civil society, and private sector leaders, and to leverage political and other commitments to address the pandemic

Specific strategic objectives for USAID-funded components are to:

 Strengthen the capacity of local partner NGOs/CBOs/FBOs to deliver effective services to African children affected by HIV/AIDS and their families

- Build, strengthen, and scale up service delivery for country- and community-level programming and implementation mechanisms
- Implement advocacy and communication strategies in order to reduce stigma and discrimination for children affected by HIV/AIDS and their families
- Document, develop, and disseminate best practices and lessons learned through technical exchange networks (TENs)

KEY ACCOMPLISHMENTS

Work under the USAID grant has just commenced. However, newly funded efforts will build on well-established partnerships, strategies, and projects. Since HACI has been established, 171,943 orphans and vulnerable children have directly benefited from HACI-supported programs, while nearly 488,031 others have benefited indirectly across the nine countries.

PRIORITY ACTIVITIES

- Increase country-level program impact by consolidating and scaling up program activities for improved service delivery in four countries and initiate pilots and research in the other countries
- Document and disseminate lessons learned and best practices and develop information sharing and networking mechanisms in key technical areas such as economic and livelihood security, access to education, and psychosocial support
- Assess capacities of NGOs and CBOs

 Increase advocacy activities across Africa, especially with faith-based communities and networks of people living with HIV/AIDS

PROJECT MATERIALS AND TOOLS

A monitoring and evaluation tool

TECHNICAL ASSISTANCE

- CBO capacity development, including training, monitoring and evaluation, and community mobilization
- Needs assessment and situation analysis
- Advocacy
- Strategy development on livelihood and economic security issues for children and families affected by HIV/AIDS
- Strategy development on access to education and psychosocial support for orphans and vulnerable children

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COUNTRIES:

Mozambique, Uganda, Zambia

PROJECT:

Sustainable Income and Housing for Orphans and Vulnerable Children in Africa

IMPLEMENTING ORGANIZATIONS:

Primary: Opportunity International-US

Grantee: Habitat for Humanity

USAID FUNDING PERIOD: February 2004-February 2009

USAID AMOUNT:

\$5,090,089

PURPOSE

The project's purpose is to address the basic income and shelter needs of orphans and vulnerable children and the communities that care for them.

KEY ACCOMPLISHMENTS

Activities were recently funded.

PRIORITY ACTIVITIES

 Rapidly expand the provision of microfinance services (loans, savings, and insurance) to a much larger number of families who are taking in and caring for orphans and vulnerable children. The business loans will help these families maintain or increase their income; the savings services will enable them to mitigate the impact of the loss of family members; and the death benefits insurance products will protect families from the loss of breadwinners and funeral costs.

 Provide clients and family members with access to HIV/AIDS prevention and care resources and services in weekly meetings.

Regional

- Accelerate the pace of building and improving homes in communities heavily impacted by HIV/AIDS (thereby enabling families to continue to take in and care for orphans and vulnerable children) and also target orphan-headed families as recipients for homes.
- Begin a youth apprenticeship program in Uganda that will link older orphans with mentors who will teach them a trade. At the culmination of the apprenticeship program, the youth will be able to qualify for an Opportunity International loan to start a business.

PROJECT MATERIALS AND TOOLS

Youth apprenticeship program manual

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

■ Microfinance methodologies

- Linking HIV/AIDS programs with microfinance and housing services
- Youth apprenticeships for orphans and vulnerable children
- HIV/AIDS insurance products

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Education Activities in Sub-Saharan Africa



MCEF/HQ02-036

Education Activities in Sub-Saharan Africa

Ongoing and planned USAID education activities in Africa that support access to education for underserved populations, especially girls, orphans, and other vulnerable children

USAID has supported systemic reform of basic education in Africa since 1989, and gains in enrollment, educational quality, and efficiency have been achieved in all program countries. USAID missions work with host ministries of education (MOEs) and nongovernmental organizations (NGOs) to design programs that improve access for the most disadvantaged children, especially the rural poor, girls, and historically underserved populations. Matrix A below lists USAID programs supporting access to education. Examples of these programs' activities include support for:

- Schools in northern Namibia that were neglected during apartheid
- Radio education in Zambia to reach outof-school youth
- Communities in Malawi in identifying and supporting HIV-affected youth in order to keep them in school
- A pilot project in a disadvantaged province in South Africa to strengthen and link math and science programs in primary and high schools

Many of the regions and populations targeted by USAID education programs are also areas dramatically affected by the AIDS epidemic. HIV/AIDS undermines quality basic education through the loss of teachers and managers. It also increasingly undermines children's participation in education, as more and more children are unable to enter school or are forced to drop out due to lack of family support or resources. Matrix B below displays USAID mission support for education management, the foundation for providing relevant education in the midst of the HIV/AIDS epidemic. Examples of these activities include:

- In Kenya, Malawi, and Zambia Strategic planning for a coordinated MOE response to HIV/AIDS
- In Namibia Assessments of the impact of HIV/AIDS on the education sector
- In Kenya Exploring the possibility of providing HIV/AIDS voluntary counseling and testing (VCT) and care and support services for the teaching force
- In South Africa Integrating HIV/AIDS training for communities and school governing bodies; forming linkages among NGOs concerned with nutrition, care of orphans, and VCT; building networks of caregivers; and empowering and assisting teachers and parents to support vulnerable children

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Country	Activity Description	Coverage	Partners
Benin	School sanitation and environment improve- ments program increases children's and par- ents' knowledge of hygiene, sanitation, and disease prevention, and improves the sani- tary environment in primary schools.	- tricts and 969	 Medical Care Development International (MCDI), MOE, Ministry of Health (MOH), local NGOs
	Support to local NGOs for capacity building of parent-teacher associations (PTAs) and greater community involvement in schools to increase access	 1,200 PTAs, representing nearly 40% of primary schools 	
	Support to the Network for the Promotion of Girls' Education to increase girls' access to education	 13 subprefectures with the lowest enrollment rates 	 MOE, local NGOs, World Education, Songhai NGO
	Innovative delivery of technical skills education to out-of-school youth	■ Countrywide	
Ethiopia	Community Schools Grant Program increases children's access to quality education, with particular focus on girls.	■ 1,600 schools	■ MOE, Learning World
Ghana	■ Community mobilization program promotes girls' participation in schools as well as greater community participation.	■ 440 schools	 Ministry of Education and Youth Services (MOEYS), Catholic Relief Services (CRS), Education Development Center (EDC)
	Improved learning environment and teaching in disadvantaged areas	■ 368 schools, 106,000 pupils	 MOEYS, Academy for Educational Development (AED), CRS
	 Capacity building and provision of incentive grants to district education officers to enable them to plan, implement, monitor, and evaluate district-specific school improvement activities 	Countrywide program reaching 110 districts, 1,650 schools, and 442,000 pupils	■ MOEYS, AED, CRS

Country	Activity Description	Coverage	Partners
Ghana (cont.)	 HIV/AIDS prevention activities in senior and junior secondary schools 	 527 students trained as peer counselors; 10,080 students trained in HIV/AIDS prevention methods 	■ World Education
	 Capacity building of staff, com- munity members, and girls, and consciousness raising of the media to promote girls' educa- tion 	4,725 girls club members trained; 70 girls education subcommittees formed and 746 members trained	
	 Addressing issues of self-esteem, self-efficacy, and problem-solving skills for girls 	722 Sara club facilitators trained; 2,100 Sara kits dis- tributed to 30 districts; and 86 Sara clubs formed with a total membership of 2,580 girls	,
Guinea	 Community schools established and communities mobilized to expand access for children, espe- cially girls, in underserved areas 	■ 904 community schools	 World Education, Save the Children, Africare
Malawi	Community mobilization activity to improve education quality through community participation in school monitoring and man- agement; addressing barriers to the education of orphans and other vulnerable children	■ 33 districts; 2,450,000 people	 MOE, Creative Centre for Community Mobilisation
	 QUEST program helping commu- nities establish community schools to expand access for children, especially girls, in underserved areas 	 33 community schools established serving approximately 16,500 stu- dents 	■ MOE, Save the Children
	Support for MOE primary curricu- lum reform process to ensure rele- vance to all, with emphasis on vulnerable children	 When complete, all 3.2 million primary school stu- dents in Malawi 	 MOE, U.K. Department for International Development (DfID), Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ)
	 Development and implementa- tion of life skills for HIV/AIDS edu- cation curriculum for primary teacher training colleges empha- sizing gender equity and rights of children 	 Approximately 3,000 teacher trainees per year at six primary teacher training colleges 	 MOE, Malawi Institute of Education, Africa Education Initiative

Country	Activity Description	Coverage	Partners
Namibia	 Educational quality improvements made in disadvantaged primary schools 	40% of the most disadvantaged stu- dent population.	■ MOE, AED
	Small grants funds provided to community groups to establish support centers for orphans and vulnerable children at different schools in northern Namibia and to initiate income-generation activities to raise funds for continued support of these centers	More than 75 centers established at different schools in the six neglected northern regions reaching more than 10,000 orphans and vulnerable children	■ MOE, AED, Rossing Foundation
	Scholarships provided to girls to continue their education and to receive mentor- ing and guidance from partner organiza- tions through funding from the Education for Democracy and Development Initiative (EDDI)	More than 500 girls from primary, secondary, and tertiary institutions	■ Forum of African Women in Education - Namibia; Evangelical Lutheran Church AIDS Program; Girl Child Organization of Namibia
	 Assistance to orphans and vulnerable children, their caretakers, and communi- ties, including access to education and provision of psychosocial support 	25% of the most needy and disad- vantaged orphans and vulnerable children in the Khomas, Erongo, and Oshana regions	■ Family Health International, Catholic AIDS Action, AIDS Law Unit of the Legal Assistance Centre, Philippi Trust of Namibia, Lifeline/Childline of Namibia
	 Participatory drama for building life survival skills (e.g., sexual abuse, violence, and neglect) among third-grade students 	 25% of the most needy third-grade students in the Khomas region 	
Nigeria	 Mobilizing community participation through PTAs 	327 primary schools (90,000 students); 194 PTAs; 1,600 PTA members mobilized 60,000 parents and other community members	■ EDC, World Education, MOE
	 Interactive radio instruction (IRI) program production and broadcasts to schools 	2 targeted states (Lagos and Kano)	
	 Developing vocational training curricula that incorporate HIV/AIDS awareness and conflict mitigation components 		
	 Critical instruction for trainers and trainees in HIV/AIDS awareness and prevention 	2,685 trainers and trainees	

Country	Activity Description	Coverage	Partners
Senegal	 Promoting retention of disadvantaged girls through the Ambassador's Girls Scholarship Program 	■ 320 high school (10th, 11th, and 12th grades) girls per year from 11 regions	MOE, Winrock International, Peace Corps
	■ Community mobilization program through school management committees, classroom rehabilitation, and construction of latrines to promote access and retention of girls and children from remote areas in basic middle schools	Three regions and 30 middle schools; 25,000 new children (50% girls) enrolled	 MOE, AED, Tostan, Research Triangle Institute (RTI), MCDI
South Africa	■ Training and support for teachers (in-service and preservice) and school governing bodies in South Africa's four most disadvantaged provinces	Approximately 1,000 schools in KwaZulu-Natal, Eastern Cape, Northern Cape, and Limpopo provinces	 Department of Education (DOE), RTI, South African NGOs
	Pilot project for math and science linking primary and high school programs in the disadvantaged Northern Cape province	 30 high schools and 82 primary schools in Northern Cape province 	■ DOE, RTI, South African NGOs
	Support for disadvantaged South African girls to pay school fees and receive mentor- ing and other support services	■ 45 girls	South Africa Girl Child Alliance, Peace Corps
Zambia	Program for the Advancement of Girls' Education addresses equity in girls' access to education.	■ Piloted in 42 schools reaching more than 10,500 students	 MOE, United Nations Children's Fund (UNICEF)
	 Community mobilization to identify orphans and vulnerable children and ensure they have access to education and other forms of support 		 MOE, Creative Associates International, UNICEF
	 Distance education program for out-of- school children, especially targeting orphans and vulnerable children 	 613 IRI centers; 29,723 learners (15,000 boys and 14,723 girls) 	■ MOE, Environmental Baseline Studies, EDC

Matrix B: USAID Education-Funded Activities Focused on HIV/AIDS, Enabling the Delivery of Education to All Children, Including Orphans and Other Vulnerable Children

USAID		
Country Mission	Activity Description	Partners
Ethiopia	Supports mobile task team (MTT) technical assistance (TA) in development of proposals for USAID and MOE strategic and implementation planning process for impact of HIV/AIDS on education sector and design of review and process to sup- port development	■ MOE, Health Economics and HIV/ AIDS Research Division, University of Natal (HEARD)/MTT
	 Supports MTT TA in National Teaching Commission policy and response planning within national HIV/AIDS planning frame- work 	■ MOE, HEARD/MTT
Ghana	 Supports MTT TA in MOE strategic and implementation plan- ning process for impact of HIV/AIDS on education sector 	■ MOE, HEARD/MTT
	Builds capacity of Ghanaian NGOs and the Ghana Education Service to address the impact of HIV/AIDS in edu- cation sector through peer education, school-level support, and mobilizing parents through PTAs and school manage- ment committees	 MOE, Ghana Education Service, World Education
	■ Funds HIV/AIDS technical adviser to MOE	■ MOE
	 Provides access for MOE and its education sector partners to MTT modular skills training and capacity-building workshops to help mitigate and manage HIV/AIDS impact 	■ MOE, HEARD/MTT
	 Supports MTT TA in investigation of pilot development of District Education Management and Monitoring Information System (DEMMIS) 	■ MOE, HEARD/MTT
	Supports MOE/MOH research to assess HIV/AIDS impact on teaching force; weighs risk to teachers relative to other risk groups and work force sectors	■ MOE, HEARD/MTT
Guinea	 Supports MTT TA in MOE strategic and implementation plan- ning process for impact of HIV/AIDS on education sector 	■ MOE, HEARD/MTT
	 Supports MTT TA in providing three-country study tour for Guinea MOE to review and learn from comparative experience 	■ MOE, HEARD/MTT
Kenya	 Supports initiation of MTTTA in MOE strategic and implementation planning process for impact of HIV/AIDS on education sector and design of review and process to support development 	■ MOE, HEARD/MTT
	 Supports MTT TA in National Teaching Commission policy and response planning within national HIV/AIDS planning framework 	 MOE, United Nations Educational, Scientific and Cultural Organization (UNESCO), Inter- Agency Task Team (IATT), HEARD/MTT

Matrix B: USAID Education-Funded Activities Focused on HIV/AIDS, Enabling the Delivery of Education to All Children, Including Orphans and Other Vulnerable Children

USAID Country		
Mission	Activity Description	Partners
Malawi	Supports MTT TA in assessment of impact of HIV/AIDS on education sector, including pilot development of DEMMIS in seven districts to measure impact, and support for school management	MOE, University of Sussex, HEARD/MTT
	 Supports assessment of impact of HIV/AIDS on education sector, including a behavior surveillance survey of teachers and the addition of HIV/AIDS-related data to education management information system (EMIS) 	■ MOE
	 Supports strategic and implementation planning for mitigating impact of HIV/AIDS on education sector 	■ MOE, DfID, HEARD/MTT
	■ Funds HIV/AIDS adviser to MOE	■ MOE, HEARD/MTT
	 Has full-time HIV/AIDS education adviser on the education team at USAID mission 	■ MOE
	Provision of access for MOE and its education sector partners to MTT modular skills training and capacity-building workshops to help mitigate and manage HIV/AIDS impact, including teacher demand and supply modeling and scenario development	■ MOE, HEARD/MTT
	Provides TA in the development of sexual/reproductive health and life skills curriculum and teaching materials	MOE, Malawi Institute of Education
Namibia	 Supports MTT TA in MOE strategic and implementation planning process for impact of HIV/AIDS on education sector and devel- opment and publication of national sector plan for education 	■ MOE, HEARD/MTT
	 Supports decentralization of MOE planning and implementation process to the regional level through workshops and training 	■ MOE, HEARD/MTT
	 Provides assistance for development of HIV/AIDS Management Unit in the MOE and investigation of pilot development of DEM- MIS 	■ MOE, HEARD/MTT
	■ Cosponsors education sector HIV/AIDS impact assessment	■ MOE, DflD
	 Provides assistance for development of national policy on orphans and vulnerable children 	■ MOE, HEARD/MTT
	Provides access for MOE and its education sector partners to MTT modular skills training and capacity-building workshops to help mitigate and manage HIV/AIDS impact, including teacher demand and supply modeling and scenario development	■ MOE, HEARD/MTT
	 Supports MTT TA in development of HIV/AIDS-linked materials and research agenda 	■ MOE, HEARD/MTT

Matrix B: USAID Education-Funded Activities Focused on HIV/AIDS, Enabling the Delivery of Education to All Children, Including Orphans and Other Vulnerable Children

USAID Country		
Mission	Activity Description	Partners
South Africa	 Funds HIV/AIDS human resource development specialist to DOE 	■ DOE, RTI
	 Supports assessment of impact of HIV/AIDS on education sector focusing on the disadvantaged provinces of Limpopo, KwaZulu-Natal, and Eastern Cape 	■ DOE, HEARD/MTT
	Supports MTT TA in the provincial DOE strategic and implementation planning process for impact of HIV/AIDS on education sector	■ Provincial DOEs, HEARD/MTT
	 Supports MTT TA to undertake national teacher attrition and mortality study and model demand (enrollment trends) and supply (teacher and resource provision) 	 DOE, HEARD/MTT, Human Science Research Council of South Africa, Education Labour Relations Council, South African Democratic Teachers' Union
	Provides a three-week annual winter course on mitigating the impact of HIV/AIDS on education systems for participants from approximately 16 African countries	■ HEARD/MTT
	Supports TA to undertake KwaZulu-Natal provincial teacher attrition and mortality study and model demand (enrollment trends) and supply (teacher and resource provision), including mapping of HIV prevalence "hot spots" and district disparities and 100-school random sample survey	■ DOE, DfID, HEARD/MTT
	 Supports MTT collaboration in HIV/AIDS interventions in DfID development projects in Eastern Cape's Mbewu District 	■ DOE, DfID, HEARD/MTT
	Supports the creation of HIV/AIDS awareness among young children through the creation of an HIV-posi- tive Muppet (Kami) and supports South African Sesame Street television and radio programming	■ Takalani Sesame Street, DOE
	Supports training in HIV/AIDS awareness for communities and school governing bodies; creates linkages with NGOs concerned with nutrition, care of orphans, and VCT; develops HIV/AIDS support groups; builds networks of caregivers; and empowers and assists teachers and parents to support vulnerable children	■ RTI, DOE, Valley Trust
	Supports HIV/AIDS activities in seven South African universities; activities include awareness, outreach, VCT, peer education and training, training of student counselors, and outreach to surrounding primary school teachers, students, and communities	University of Zululand, University of Venda, Eastern Cape Technikon, Border Technikon, Peninsula Technikon, University of Western Cape, University of the North West, United Negro College Fund Special Programs, DramAide

Matrix B: USAID Education-Funded Activities Focused on HIV/AIDS, Enabling the Delivery of Education to All Children, Including Orphans and Other Vulnerable Children

USAID Country Mission	Activity Description	Partners
Uganda	Supports MTT TA in MOE strategic and implementation planning process for impact of HIV/AIDS on education sector and work- shop process review, prioritization, and costing of national sec- tor plan for education	■ MOE, HEARD/MTT
	Supports development of HIV/AIDS-related EMIS and investigation of pilot development of DEMMIS, including cleaning, trend analysis, and mapping of last three years of education data by district	■ MOE, HEARD/MTT
	 Supports MTT A in developing generic district implementation model for investigation and piloting 	MOE, DfID, Ireland Aid, HEARD/MTT
	■ Supports MOE in IATT East African/Mombasa workshop to develop country planning frameworks and priorities	■ MOE, HEARD/MTT
Washington DC	 Supports MTT TA in Southern Africa Development Community (SADC) regional strategic and implementation planning process for impact of HIV/AIDS on education sector 	■ SADC
	Supports MIT TA in IATT East African/Mombasa workshop to develop country planning frameworks and priorities	■ HEARD/MTT, DfID, UNESCO, Joint United Nations Program on HIV/AIDS (UNAIDS), World Bank, IATT
	Supports MTT TA in providing SADC regional modular training and skills training workshops for SADC country MOEs to build capacity and share experience	■ SADC, MOEs, HEARD/MTT
	Supports MTT TA in training and development of West African Technical Resource Network to provide regional strategic and implementation planning support to manage and mitigate the impact of HIV/AIDS on education sector	 West African MOEs, HEARD/MTT, UNESCO, other development agencies
	Supports MTT TA in MOE strategic and implementation planning process for impact of HIV/AIDS on education sector and devel- opment, costing, and publication of national sector plan for education.	■ MOE, HEARD/MTT
	 Supports policy audit and assessment of HIV/AIDS impact on education sector 	■ MOE
	Supports development of HIV/AIDS-related EMIS and investigation of pilot development of DEMMIS	■ MOE, DfID, HEARD/MTT
	Supports MOE in IATT East African/Mombasa workshop to develop country planning frameworks and priorities	■ MOE, HEARD/MTT

Asia and the Near East



COUNTRY:

Cambodia

PROJECT:

Assessing the Social and Economic Impact of HIV/AIDS on Orphans and Vulnerable Children in Cambodia

IMPLEMENTING ORGANIZATION:

Futures Groupl

USAID FUNDING PERIOD:

May 2003-May 2004

USAID AMOUNT:

\$150,000

PURPOSE

The POLICY Project is completing a study that focuses on the social and economic impact of HIV/AIDS on affected families with a special emphasis on the impact on children. Households in which one or more adult is living with HIV/AIDS were interviewed. The study attempts to measure a comprehensive list of variables including financial well-being, stigma and discrimination, coping mechanisms, succession planning, and exposure to mitigation interventions. For children and adolescents aged 6 to 18, the study assesses emotional well-being, school attendance, employment status, food intake, health status, and overall quality of life. For adolescents, two additional variables are being measured – risk behaviors and exposure to interventions specifically targeting adolescents.

This study was conducted in 1,000 households in rural and urban areas of three provinces in Cambodia. It used a case-comparison design to compare findings between families affected by HIV/AIDS and their nearest neighbors.

Findings from the study survey will be used to improve policymakers' understanding of the impact of HIV/AIDS illness and death on children. The study report will inform policymakers and donors about the needs of families affected by HIV/AIDS and outline recommen-

dations for possible mitigation strategies. The research and policy objectives will be achieved by working directly with groups that represent people living with AIDS and other groups that directly serve children affected by HIV/AIDS. A national workshop, held in collaboration with CARE, will take place in August 2004 to translate the findings from this research into programs and policies.

KEY ACCOMPLISHMENTS

The project is in its final stage. To date, the data collection and cleaning has been completed and preliminary data analysis has been conducted. POLICY is currently working with CARE and other partners in Cambodia to plan a dissemination workshop in August.

PRIORITY ACTIVITIES

- Finalize data analysis
- Plan for dissemination workshop
- Present the findings related to socioeconomic status and quality of life at the International AIDS Conference in Bangkok
- Complete and disseminate the research results

- Work with policymakers and program planners to translate findings into policies and programs
- Prepare for a second round of data collection, funding permitted

PROJECT MATERIALS AND TOOLS

- Survey instruments
- Research protocol
- Brochure summarizing study
- Literature review
- Report of study findings (in preparation) will be available via e-mail from Steven Forsythe (s.forsythe@tfgi.com)

TECHNICAL ASSISTANCE

The project can provide research expertise to other projects for orphans and vulnerable children in the following areas:

- Social and economic aspects of HIV/AIDSrelated illness on families
- Impact of adult illness and death on children
- Needs and coping mechanisms of people living with AIDS

CONTACT INFORMATION

POLICY Project:

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COUNTRY:

Cambodia

PROJECT:

Children Affected by HIV/AIDS in Cambodia

IMPLEMENTING ORGANIZATIONS:

Primary: International HIV/AIDS Alliance **Grantee**: Khmer HIV/AIDS NGO Alliance

(KHANA)

USAID FUNDING PERIOD:

October 2001-June 2004

USAID AMOUNT:

\$3,390,000 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

The International HIV/AIDS Alliance works with KHANA, a local NGO support organization, to mobilize and strengthen the capacity of NGOs and CBOs. The partners aim to:

- Improve the quality of information and access to services for orphans, vulnerable children, and young people
- Expand community support for orphans, vulnerable children, and young people

- Reduce stigmatization of orphans, vulnerable children, and young people affected by HIV/AIDS
- Enhance local institutional capacity to meet the needs of highly vulnerable children, orphans, and young people

Specifically, this involves:

- Ongoing mobilization of existing CBOs, FBOs, and NGOs to integrate child and youth-focused work into their programs. This includes working with monks in pagodas who take care of orphans and children living with HIV
- Scaling up the provision of support to orphans and other vulnerable children, through, for example, providing food aid, negotiating waivers on school fees for orphans, and providing school clothes and materials
- Continuing to provide financial and technical support to partner organizations to implement child and youth-focused programs
- Documenting lessons learned nationally, regionally, and internationally in order to support and enhance community-level initiatives that focus on orphans, vulnerable children, and youth
- Supporting the development of national strategies for providing care and support to children affected by HIV/AIDS through ongoing consultation with the government and other local stakeholders
- Advocating on children's issues with both NGOs and the government
- Developing tools to increase the involvement and participation of children

KEY ACCOMPLISHMENTS

- Reached 5,749 children with direct program services
- Involved 24 KHANA partner NGOs in addressing the needs of orphans and vulnerable children
- Disbursed 31 grants to support orphans and vulnerable children
- Provided training to improve the integration of services for vulnerable children into ongoing HIV/AIDS care and support activities and workshops
- Implemented the third Cambodian Youth Camp, attended by more than 200 young people
- Produced a set of printed resources in Khmer to support communities and local organizations in their efforts to assist children affected by AIDS
- Provided nutritional support and food supplements to children in families affected by HIV through the World Food Program

PRIORITY ACTIVITIES

- Organize the fourth Cambodian Youth Camp to promote reproductive health, HIV/AIDS and STI prevention, and the participation of children living on the streets and children affected by HIV/AIDS
- Provide education, training, and support for outreach workers to encourage the incorporation of strategies such as succession planning, support for older caregivers, community support initiatives, and microcredit programs into the work of organizations in the home care network

- Increase support for children affected by AIDS by negotiating school fee waivers and providing books, uniforms, and satchels
- Advocate in support of policy dialogues on youth and HIV/AIDS
- Support sabay-sabay (happy-happy) play/education days for orphans and vulnerable children in pagodas and temples
- Strengthen psychosocial support for children through, for example, succession planning and by developing memory books and organizing events for orphans and vulnerable children, such as a retreat at Sihanoukville where children have a chance to relax and enjoy themselves
- Organize youth forums
- Initiate focused prevention work with youth who sell sex
- Address issues of child protection and child rights and build the capacity of local NGOs in these areas

PROJECT MATERIALS AND TOOLS

The following are available in both English and Khmer from the KHANA office upon request (unless indicated otherwise):

- Evaluation of the joint MOH/NGO Home Care Program (2000) (available from the Alliance Web site: www.aidsalliance.org or by e-mail: publications@aidsalliance.org)
- Appraisal of the needs and resources of children affected by AIDS (2000) (available from the Alliance Web site: www.aidsalliance.org or by e-mail from publications@aidsalliance.org)

- Khmer-language adaptations of Stepping Stones (2002) and Choices (2003), two participatory training manuals to help facilitate group discussions on gender, sexuality, and HIV/AIDS
- Appraisal of the informal entertainment sector (2001)
- Issues paper on linking HIV and TB (2002)
- Exploratory study on the role of traditional healers in HIV/AIDS care and prevention (2001)
- Appraisal on male-to-male sexual behavior in Cambodia (2003)
- Appraisal on access to treatment (2003) (English)
- Integrating HIV & AIDS Into Community Development (2004) (English)
- KHANA annual report 2002 (English)
- See also related material available from the HIV/AIDS Alliance's Web site, www.aidsalliance.org

TECHNICAL ASSISTANCE

The project can provide expertise for other projects working with orphans and vulnerable children in the following areas:

- Sharing the results of the children affected by AIDS appraisal
- Integrating prevention and care in HIV/AIDS work
- Providing home care and home support visits

- Strengthening prevention for HIV/AIDS among vulnerable youth
- Peer education among children and youth
- Integrating support for children in home and community-based care programs
- Developing program indicators for supporting projects with vulnerable children
- Developing tools and strategies for enabling children to speak out and increase their participation in projects.

CONTACT INFORMATION

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COUNTRY:

Cambodia

PROJECT:

Children in Distress (component of Methagoruna Thmei Community Caring and Prevention Project)

IMPLEMENTING ORGANIZATION:

Care International/Cambodia

USAID FUNDING PERIOD:

January 2002-September 2005

USAID AMOUNT:

\$600,000 per year

PURPOSE

This project aims to improve the physical and emotional well-being of orphans and other vulnerable children, including those affected by AIDS. Children in HIV/AIDS-affected communities in Cambodian-Thai areas are provided integrated prevention, care, and support services. Care and support activities for orphans and vulnerable children focus on five major aspects:

 Succession planning includes counseling parents in selecting an appropriate guardian to care for their children before the parent dies; in preparing wills with village and religious leaders as witnesses to protect children's property; and in making memory books and bags for children to keep photographs and other remembrances of their parents. Potential foster parents within the community are identified, but the need for caretakers is greater than the number of families willing to take in orphans and vulnerable children. For children with nowhere to go, CARE rehabilitates government-operated children's homes and provides technical assistance for improving the care provided to the chil-

dren. Youth advocate volunteers provide support to households affected by HIV/AIDS through regular visits and organizing psychosocial support for vulnerable households.

- Educational and vocational training enables orphans and vulnerable children to attend school for free, as mandated by the Royal Government of Cambodia, and provides basic school materials. CARE, with assistance from the provincial education office, helps children overcome barriers that prevent them from attending school. The project establishes vocational training facilities so that children who are unable to attend school can learn marketable skills. Adolescents are also linked to other livelihood options supported by CARE, such as revolving loans.
- Psychosocial support visits include an initial assessment of the needs of orphans and vulnerable children and then regular follow-up based on household-specific issues. Teams are composed of social workers from the provincial social affairs office, CARE staff, and youth volunteers. Teams provide emotional, material, and referral support.
- Therapeutic playgroups offer activities such as games, lessons about respect and compassion, and basic skills in hygiene and nutrition. Parents and village leaders participate in these activities. Youth volunteers also produce plays and puppet shows with stories that promote empathy for vulnerable community members. Painting, traditional games, and sports are all included in playgroup activities. Adolescent orphans and vulnerable children participate in youth group activities, which include peerled life skills education.

Care and support for children and adolescents living with HIV/AIDS is provided through the program and through links to two local NGOs that provide medical care and antiretroviral therapy (ART) to children. Home care teams work together with families to help manage the drugs.

KEY ACCOMPLISHMENTS

- Assisted more than 5,000 children in the past year
- Provided grants to five local NGOs to provide care and support to people living with AIDS and orphans and vulnerable children
- Facilitated orphan support in eight Buddhist pagodas
- Helped more than 200 children with HIV/AIDS receive ART
- Enrolled more than 1,000 children in school.
- Established strong partnerships with community leaders and local government authorities (CARE was recognized by the Ministry of Social Affairs for its long-standing commitment to assisting vulnerable children in Cambodia)
- Integrated home care and prevention activities with activities for orphans and vulnerable children

PRIORITY ACTIVITIES

- Implement recommendations from the recent needs assessment for orphans and vulnerable children in the catchment area
- Continue to expand partnership base with religious and community organizations

- Facilitate greater community-based responses to orphans and vulnerable children
- Improve staff/partner counseling skills
- Expand youth leadership in activities for orphans and vulnerable children

PROJECT MATERIALS AND TOOLS

- Tools for household-level orphans and vulnerable children needs assessments
- Training curricula for youth advocates
- Memory bags for succession planning
- Contents for home-based care structures and kits

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Linking care to prevention
- Developing community mobilization strategies
- Conducting village mapping
- Establishing therapeutic playgroups
- Supporting children on ART
- Conducting needs assessments

CONTACT INFORMATION

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COUNTRY:

Cambodia

PROJECT:

Community-Based Care and Support for Orphans and Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Homeland

USAID FUNDING PERIOD:

October 2002-September 2004

USAID AMOUNT:

\$101,175

PURPOSE

The project works to improve the quality of life for children orphaned by their parents' chronic illnesses, including AIDS, by strengthening family and community mechanisms for care and support of orphans. Homeland has implemented a program to build the capacity of families to care and cope through community mobilization, advocacy, and networking. The project works with families while the parents of the children are alive and continues to provide assistance and support after the parents

have died. Staff counseling helps parents plan for the future of their children. Homeland works in close collaboration with foster/extended families, education departments, school, teachers and district social departments.

KEY ACCOMPLISHENTS

- Homeland has supported 429 children to continue school this year and also provided regular psychosocial support to 133 children affected by the death of one of their parents from AIDS or by the illness of both parents.
- The integration of home-based care has improved the skills of affected families and people living with HIV/AIDS to prevent dehydration from diarrhea and to control fever by sponging. Home visits of the home care team have also strengthened communication among patients, members of families, and people in the communities. Homeland helped 42 people living with HIV/AIDS get drugs for prevention of opportunistic infections, and trained 101 members of families caring for people living with HIV/AIDS.
- Orphans, vulnerable children, and people living with AIDS received home visits and referrals to local health centers through collaboration and coordination with village health volunteers. Training in self-care has been conducted for project staff, caregivers, and people living with AIDS.
- A women's cooperative, which includes both HIV-positive and HIV-negative women, continued to operate a cloth and mat weaving project. The products have proved popular among local people and at markets. Each member of this group has received \$30 per month from selling their

products. The venue not only increases integration among HIV-positive and HIV-negative women, but also helps HIV-positive widows regain their confidence and increases their ability to earn an income to support their children. Day care for young children is organized as part of the weaving project.

- Communities have been mobilized to form orphans and vulnerable children committees to increase awareness and support for orphans and vulnerable children, including monitoring and prevention of child trafficking in the communities.
- In addition to negotiation and facilitation to help orphans and vulnerable children remain in school, the project has formed integrated (HIV-positive and HIV-negative) playgroups with children in the community. This has helped increase knowledge about HIV/AIDS among children and promoted integration through fun activities. Twenty-five student volunteers help other children learn about HIV/AIDS and health education in two schools attended by 1,200 children from the community. Life skills sessions have been conducted for more than 1,000 orphans and vulnerable children in the target areas.
- After skills training, older children were supported to form occupational groups and have been able to earn income from hairdressing, motorbike repair, sewing, and home gardening.

PRIORITY ACTIVITIES

 Increase the capabilities of families to care for themselves and improve their abilities to earn income

- Promote understanding, reduce stigma, and integrate HIV-positive and HIV-negative people, including children, in the communities
- Increase community involvement in the care and support for orphans and vulnerable children and in preventing trafficking in children
- Strengthening network linkage in communities to support and make timely referrals of people living with HIV/AIDS to health services and regular checkups before they become very sick

PROJECT MATERIALS AND TOOLS

- Series of self-care publications developed by FHI/Cambodia including What should I do if I think I have AIDS?, Living with hope and staying healthy, Living peacefully with AIDS, and Health care for HIV-positive women
- Family history book
- Social and physical support criteria for orphans and other vulnerable children and people living with HIV/AIDS

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Facilitating reintegration of children with foster/extended families and follow-up
- Analyzing family situations to identify suitability for vocational training skills or other work opportunities

CONTACT INFORMATION

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COUNTRY:

Cambodia

PROJECT:

Community-Based Care for Orphans, Children, and Families Affected by AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: KHEMARA

PURPOSE

The goal of the project is to improve the quality of life for orphans, vulnerable children, and persons living with HIV/AIDS.

KEY ACCOMPLISHMENTS

- Conducted community needs assessment
- Facilitated the creation of community networks comprising local authorities, temple monks, and teachers
- Held workshops on children's rights attended by 153 community members in the district
- Assisted with referrals for orphans and vulnerable children and HIV-positive women to receive care and treatment from other agencies
- Helped persons living with HIV/AIDS form a support group

PRIORITY ACTIVITIES

 Increase HIV/AIDS awareness in the community to reduce discrimination against orphans, vulnerable children, and persons living with HIV/AIDS

USAID FUNDING PERIOD:

April 2004-September 2005

USAID AMOUNT:

\$36,309

- Increase knowledge and skills of staff, community assistants, and community networks on self-care for persons living with HIV/AIDS
- Support affected families in analyzing their living situation and identifying ways to send the children to school

CONTACT INFORMATION

Khemara:

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COUNTRY:

Cambodia

PROJECT:

Community Support for Persons Living With HIV/AIDS and Their Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Catholic Relief Services (CRS)

USAID FUNDING PERIOD:

November 2002-September 2005

USAID AMOUNT:

\$299,278 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

Support for orphans and vulnerable children is part of the community-based primary health care and HIV/AIDS program in Sampov Loun and Bavel districts of Battambang province. The community-based primary health care model emphasizes the importance of community involvement in the prevention of HIV/AIDS and the care for persons living with HIV/AIDS, including orphans and vulnerable children. Activities funded by USAID include setting up a VCT center, improving management and treatment of opportunistic infections, preventing MTCT, providing home care for people living with AIDS, and providing care and support for orphans and vulnerable children.

The project aims to work with community organizations and structures to enable them to increase the community's tolerance of, solidarity with, and support for people living with AIDS and their families. In addition to raising community awareness about how important it is for orphans and vulnerable children to attend school and obtain an education for their future, CRS works with communities to understand the needs of children and to develop support mechanisms both within and outside communities.

KEY ACCOMPLISHMENTS

 Improved assessments: Community-based home care volunteers identify people with chronic illnesses, including people living with AIDS and those affected by HIV/AIDS, and assess their needs and the needs of their families, including orphans and vulnerable children.

- Increased participation: Community members provide food and labor (e.g., carrying water and cleaning homes) for people living with AIDS and their families.
- Reduced stigma: Project staff and community volunteers support orphan adoption by families in the community for children whose parents died of AIDS. Adopting families receive support and monitoring visits.
- Increased access to education: Vulnerable children are being supported with school materials and clothing to attend school.

PRIORITY ACTIVITIES

- Increase the capacity of community structures and community-based home care teams to meet the increasing needs
- Provide counseling, care, support, and treatment for people living with AIDS at the health center, in communities, and at the referral hospital

CONTACT INFORMATION

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COUNTRY:

Cambodia

PROJECT:

Counseling Center for HIV-Positive Women

and Their Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT
Grantee: Nyemo

USAID FUNDING PERIOD:

October 2002-September 2004

USAID AMOUNT:

\$94,937

PURPOSE

The project assists vulnerable women, including those infected and affected by HIV/AIDS and their children, to break out of the cycle of poverty by providing immediate care and long-term vocational training to increase their income-generating capabilities.

The Nyemo Center assists women referred by the sociomedical network, listens to their stories, and helps them analyze their situation and develop a suitable plan and reintegration program.

Women are treated at the Center if they have medical conditions, and referrals are made for those who wish to have an HIV test. Follow-up psychosocial support is provided to orphans and vulnerable children and women through both the counseling center and the foster family program.

Various skills training (in such areas as silk weaving, tailoring, toy making, cooking, and catering) and literacy educational sessions are provided by the Center to increase individuals' opportunities and self-confidence so they will be able to meet their needs over the long term.

Nyemo contributes to building the capacity of the staff from the Ministry of Social Affairs, Labor, Vocation, and Youth through training in care and support for orphans and vulnerable children and vulnerable women. The project also shares lessons learned and success stories of women's self-help vocational training groups and supports pilot projects of the Ministry.

KEY ACCOMPLISHMENTS

- Provided care and support to as many as 350 orphans and vulnerable children and their families each quarter
- Served 200 women and 60 orphans and vulnerable children as "day" beneficiaries
- Helped beneficiaries form a social network and encouraged them to establish a women's support group

PRIORITY ACTIVITIES

- Strengthen community integration and support mechanisms and networks for vulnerable women and for orphans and vulnerable children
- Help the vocational training component of the project expand its markets and sales outlets

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Operating a vocational training center
- Assisting with job placement
- Developing income-generating activities

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COUNTRY:

Cambodia

PROJECT:

Family and Community-Based Care and Support for Orphans and Vulnerable Children

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Kien Kes Health Education Network

USAID FUNDING PERIOD:

October 2002-September 2004

USAID AMOUNT:

\$52,781

PURPOSE

The goal of the project is to ensure that children and their family members affected by AIDS and other chronic diseases receive sup-

port and assistance from the community in which they live and that the community does not discriminate against people living with HIV/AIDS.

The Kien Kes Health Education Network is a local Cambodian organization that helps mitigate the effects of HIV/AIDS on communities. Led by the abbot of a local Buddhist temple (Kien Kes), the network includes representatives from the military and the police, the elderly population, local teachers, and other community members. The temple and volunteers provide care for orphans, facilitate reintegration of orphans into the community, and spread messages of compassion and nondiscrimination for people living with HIV/AIDS. FHI provides capacity-building support to the volunteers in both project management and HIV/AIDS prevention, care, and support activities, including counseling for children.

KEY ACCOMPLISMENTS

- Strengthened network of 30 temples to replicate the Kien Kes model to reduce discrimination and provide emotional support to children and persons living with HIV/AIDS through dharma in the target areas of the 30 temples
- Provided material support to help 490 orphans and vulnerable children remain in school and negotiated for orphans to be exempt from school fees
- With the help of monks and volunteers, provided spiritual and material support for 530 orphans and vulnerable children to remain with extended families in the community
- Provided shelter at Kien Kes temple for 15 orphans while it identified foster families
- Provided referrals for people living with HIV/AIDS for treatment at local health centers

- Helped 35 patients gain access to VCT services and 30 patients gain access to TB/HIV screening and INH prophylaxis
- Provided hospice care to eight AIDS patients who wanted to remain in the calm environment of the temple and to some whose families were too distressed to care for them
- Helped families and children increase their food and income sources by providing seeds, chickens, and pigs to families caring for orphans and vulnerable children
- Made arrangements for vocational training for older orphans and vulnerable children

PRIORITY ACTIVITIES

- Advocate to create a supportive environment for people living with HIV/AIDS and orphans and vulnerable children
- Advocate to prevent trafficking in children
- Increase the ability of families, orphans, and vulnerable children to care for themselves
- Increase the capacity of children, people living with HIV/AIDS, and family members to earn their living by joining vocational training center activities and receiving money from small income-generation activities

PROJECT MATERIALS AND TOOLS

- Self-care series for persons living with HIV/AIDS
- Risk card set about how HIV/AIDS is and is not transmitted and how to prevent HIV/AIDS

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Advocacy and community mobilization
- Networking and forming linkages among religious entities

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COUNTRY:

Cambodia

PROJECT:

Reducing the Impact of HIV/AIDS on Orphans and Vulnerable Children and Older Caregivers

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: HelpAge International (HAI)

USAID FUNDING PERIOD:

December 2003-September 2005

USAID AMOUNT:

\$49,860

PURPOSE

The goal of the project is to reduce the impact of HIV/AIDS on orphans and vulnerable children and their older caregivers by strengthening community awareness on HIV/AIDS, individual coping mechanisms, and community support. The project works with older people to increase their capacity to take care of themselves, their children, and grandchildren, especially concerning emotional support and improvement of their livelihood situation.

An HAI study in Cambodia found that in the poorest families affected by HIV/AIDS, the older caregivers take responsible for both chil-

dren and adults affected by HIV/AIDS. Few children in these families attend school, and many are malnourished and likely to live in temporary or broken shelters. The study concluded that older caregivers and their HIV/AIDS-affected children and grandchildren lack opportunities to develop sustainable livelihood strategies to meet their most basic needs.

KEY ACCOMPLISHMENTS

- Supported older people to create older people associations (OPAs). These associations have their own committees that run small income-generation activities, such as rice banks and savings schemes, and provide seeds for home gardens. The OPAs donate their income to support older people and their grandchildren as needed.
- Worked with older people to produce materials that promote the role of older caregivers and positive coping strategies for caring for their grandchildren. A radio spot has been developed to promote these role models in the communities where HAI works.

PRIORITY ACTIVITIES

- Increase the capacity of and use OPAs to reduce discrimination against older people and their families affected by HIV/AIDS
- Support families with older people to identify strategies to improve their livelihood and support their grandchildren to go to school
- Produce educational items for older people who cannot read or see small pictures to increase their skills to take care of their health and the health of their grandchildren and sick children
- Increase the capacity of OPA members to provide basic home-based care for people living with HIV/AIDS

TECHNICAL ASSISTANCE

The project can provide expertise in creating and strengthening associations for older people to other projects for orphans and vulnerable children.

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COUNTRY:

India

PROJECT:

ASHA (Hope)-Hyderabad

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Freedom Foundation, Hyderabad

USAID FUNDING PERIOD:

December 2003-June 2005

USAID AMOUNT:

\$48,885

PURPOSE

The main focus of the project is to initiate responses from the community to provide comprehensive HIV/AIDS prevention, care, and support services to children and their families living in the slums in Hyderabad.

Strategies include:

- Developing capacity of project management staff
- Mobilizing the community to identify and in turn support the needs of children and their respective families
- Equipping the community to extend homebased care to children and their families who are affected by AIDS
- Using a behavioral change communication model to increase knowledge of HIV and build the capacity of the whole community
- Reducing stigma and discrimination
- Creating linkages with community agencies or individuals

KEY ACCOMPLISHMENTS

- Project staff recruited
- Training needs assessment conducted
- Capacity building workshops conducted

PRIORITY ACTIVITIES

- Conduct a needs assessment in the project area
- Develop a behavior change communication strategy and materials
- Educate families on home-based care for people living with HIV/AIDS, including children
- Create an enabling environment within the community through sensitization

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in community mobilization for providing care and support for children and adults affected by AIDS and in networking and creating linkages to help children infected and affected by HIV/AIDS.

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COUNTRY:

India

PROJECT:

Assisting Children Affected by HIV/AIDS -Community-Based Prevention and Care Services for Vulnerable Children and Adolescents

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Society for Development Research and Training (SFDRT)

USAID FUNDING PERIOD:

April 2000-December 2002 (Phase I) January 2003-April 2004 (Phase II)

USAID AMOUNT:

\$66,651 (Phase I) \$51,160 (Phase II)

PURPOSE

The project aims to assist children of CSWs, HIV-infected children, children of HIV-infected parents, and other vulnerable adolescents in the Kan Doctor Thottam brothel of Pondicherry. The project intends to reach these children directly as well as indirectly through interventions with CSWs. SFDRT has developed linkages with other CBOs, children's homes, and orphanages to provide assistance for access to care for children infected with or affected by HIV.

The strategies are to:

- Provide prevention and care services to vulnerable children and adolescents
- Mobilize and build the capacity of communities to support children affected by AIDS and vulnerable adolescents, especially girls
- Advocate and network to improve access to services

 Build the capacity of the organization and staff to ensure effective program management and implementation

KEY ACCOMPLISHMENTS

- 293 orphans and vulnerable children have received medical care, psychosocial support, nutritional supplements, educational, recreation, and vocational support.
- 64 children of CSWs from the Kan Doctor Thottam area have benefited from the project's day care center for children.
- 33 children were referred for vocational trainings and placed in suitable jobs.
- 20 foster mothers have been trained and 14 children have received foster care services.
- Eight community workers were trained to carry out community-based interventions.
- 25 children have benefited from the night shelter services since January 2003.
- 170 children have been enrolled in school from the inception of the program.
- 53 children benefited from remedial classes during the second phase of the project.
- 81 children have received nonformal training.
- 32 children benefited from life skills education sessions.
- 16 meetings with the support groups for orphans and vulnerable children and five meetings with the Project Steering Committee were organized between January 2003 and April 2004.

A forum of 25 children was established as an independent registered forum. It will function as an employment information center with updates of job opportunities and external news.

PRIORITY ACTIVITIES

- Strengthen self-help groups, youth groups, children's forums, steering committees, and support groups for children affected by HIV/AIDS so that they can carry forward these community initiatives on their own
- For sustainability, link the children's day care center and night shelter with government support during the next phase
- Strengthen community involvement, especially to operate the day care activities at the Kan Doctor Thottam brothel
- Through the children's forum, create more children's groups and disseminate life skills education

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Addressing issues and concerns of children of CSWs, especially in the context of HIV/AIDS prevention and care
- Mobilizing the community to provide prevention and care services for orphans and vulnerable children
- Encouraging organized participation of children

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COUNTRY:

India

PROJECT:

BRIDGES

Subgrantees: Young Women's Christian Association (YWCA), Salem; Vanchit Vikas, Pune

USAID FUNDING PERIOD:

December 2003-September 2005

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Project Concern International (PCI)

USAID AMOUNT:

\$ 210,606

PURPOSE

The project's goal is to ensure access to community-based care and support services for children infected and affected by HIV/AIDS in selected communities of Pune and Salem through the following strategies:

- Building the organizational and technical capacity of partners for effective project implementation
- Mobilizing communities to create an enabling environment for care and support
- Providing community-based care and support to children affected by HIV/AIDS
- Establish linkages and networks to initiate a comprehensive response

KEY ACCOMPLISHMENTS

Project staff recruited

- Training needs assessment conducted
- Mapping of community resources conducted

PRIORITY ACTIVITIES

- Conduct mass awareness programs on HIV/AIDS in the communities
- Sensitization and community mobilization of stakeholders
- Identification and training of community care animators
- Home-based care and support services for persons living with HIV/AIDS and their children
- Training of care providers and medical caregivers on how to care for children and adults infected and affected by HIV/AIDS

 Life skills education and educational support to children affected by HIV/AIDS

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- HIV/AIDS prevention for youth and children
- Monitoring and evaluation of intervention with children
- Institutional capacity assessment and building
- Economic support services for adults living with HIV/AIDS
- Child development monitoring tool
- Life skills education

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COUNTRY:

India

PROJECT:

Caring Community for Children Affected by

AIDS in Manipur

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Catholic Relief Services (CRS), India Subgrantee: Diocesan Social Service Society,

Chandel

USAID FUNDING PERIOD:

August 2003-January 2005

USAID AMOUNT:

\$98,982

PURPOSE

Through community mobilization and capacity building, the project works with communities to address the needs of children and women affected by AIDS and provide home-based care to children affected by AIDS.

KEY ACCOMPLISHMENTS

- 190 children received home-based care.
- 230 community members were trained in home-based care.

- 120 community leaders were sensitized to support project activities.
- Behavior change communication activities reached 900 community members.
- 25 peer educators were trained in homebased care of children affected by AIDS and behavior change communication activities.
- 300 women members of a self-help group were oriented to the needs of children affected by AIDS.
- Linkages were established with six existing health and education institutions.

PRIORITY ACTIVITIES

- Mobilize local FBOs to support the needs of children affected by AIDS
- Conduct advocacy with district authorities and institutions to support health, education, and recreation needs of children affected by AIDS
- Strengthen the capacity of self-help group members to care for children affected by AIDS
- Conduct community meetings to address stigma and discrimination with the involvement of persons living with HIV/AIDS

PROJECT MATERIALS AND TOOLS

- Behavior change communication materials
- Lessons learned document

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in community mobilization and mobilizing self-help groups.

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COUNTRY:

India

PROJECT:

Cheyuthu (Helping Hand)

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: Catholic Relief Services; St.Ann's Educational Society; The Congregation of

the Missionary Sisters of the Immaculate; Nrityanjali Academy

USAID FUNDING PERIOD:

August 2003-February 2005

USAID AMOUNT:

\$278,626

PURPOSE

The goal of the project is to build capacity of communities to implement integrated HIV/AIDS prevention, care, and support activities for children in three high-prevalence locations of Andhra Pradesh. The project has a target of reaching 2,200 infected and affected children and 11,000 other children through community-based activities in three locations of Andhra Pradesh.

Strategies include:

- Building capacity of staff for effective program implementation
- Mobilizing communities to meet the needs of children and their families
- Behavior change communication to increase knowledge of HIV/AIDS, decrease stigma, and address discrimination
- Providing home-based care through building capacities of children affected by AIDS and their families
- Advocacy for meeting the needs of children affected by AIDS, including nutrition, education, and health
- Mobilizing health and social networks and facilities to respond to the needs of children affected by AIDS

KEY ACCOMPLISHMENTS

- The first round of project staff capacity building on behavior change communication and counseling was completed.
- Needs assessments were completed at the three project locations.
- 729 infected and affected children (390 boys and 339 girls aged 0 to 19 years) have been served through the project's community-based care component.
- 699 children have received health care, supplementary nutrition, psychosocial support (through individual and group counseling), and educational support.
- 119 children have been referred to VCT centers for HIV testing.
- 1,035 children have used the project's community-level recreational facilities.
- 146 family members (one member per family) have been trained as care providers to the infected or affected child/children and provided with home-based care kits.
- 79 non-paid peer educators (51 boys and 38 girls aged 13 to 18) are working for the project.

- 69 non-paid lay counselors, identified and trained from the community, are working for the project.
- 14 self-help groups comprising approximately 150 women from affected/infected and other families have been formed to enhance family incomes. In addition, the groups address issues of stigma and discrimination and provide psychosocial support to the members.
- Referral linkages for health, education, and nutrition have been established with 25 government and 14 private facilities, an indication that the project is using the available local infrastructure effectively.
- 60 health care providers have been trained to provide care to children and adults living with HIV/AIDS.
- 40 mass awareness campaigns were conducted involving general community members, youth members, women's groups, and community leaders to address stigma and discrimination.
- District-level project advisory committees have been formed at three locations, involving community leaders, government officials, people living with HIV/AIDS, philanthropists, etc.

PRIORITY ACTIVITIES

- Adopt/develop behavior change communication strategy and material
- Adopt home-based care module (from the earlier project) for infected and affected children
- Second round of capacity building for the project staff

 Vocational training for children older than 18

PROJECT MATERIALS AND TOOLS

Needs assessment report

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in:

- Establishing and operating a communitybased care model for infected or affected children
- Setting up a food/nutrition distribution system
- Developing a behavior change communication strategy and materials
- Developing community mobilization strategies and approaches
- Establishing effective networks and linkages
- Planning project implementation
- Initiating and maintaining self-help groups
- Recruiting and retaining child peer educators
- Addressing stigma and discrimination
- Monitoring and evaluation

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COUNTRY:

India

PROJECT:

Dancing Feat

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: Committed Communities

Development Trust; Shiamak Davar Institute

for the Performing Arts

USAID FUNDING PERIOD:

November 2001-February 2003 (Phase I)

March 2003-May 2004 (Phase II)

USAID AMOUNT:

\$70,432 (Phase I) \$93,169 (Phase II)

PURPOSE

The goal of the project is to enhance the ability of high-risk and vulnerable children in Mumbai to respond effectively to situations that place them at risk for HIV infection by combining dance with counseling and life skills education, using child-friendly approaches.

KEY ACCOMPLISHMENTS

 817 children participated in 1,093 dance sessions, 442 group counseling sessions, and 623 life skills sessions.

- Viable partnerships have been built with eight NGOs and the government.
- Two public dance performances reached 1,600 community members.
- The peer group dancers performed at the MTV AIDS Summit on November 15 (telecast December 1, 2003) before a live audience of 35,000 persons, with the show seen in 80 million homes. The same group performed at the Bandra Festival in Mumbai on November 23, 2003, before an audience of more than 1,000.

■ 19 child representatives regularly attend management meetings, contribute to project progress, and provide feedback.

PRIORITY ACTIVITIES

- Strengthen the counseling component of the program by conducting group counseling sessions and regular one-to-one counseling for children
- Develop an operational strategy for life skills education and carry out weekly life skills education sessions for children
- Develop a promotional video for the project
- Carry out capacity-building activities for NGO staff and the project team through ongoing training in program and technical areas such as communication, counseling, and life skills education
- Form partnerships with additional NGOs and strengthen existing partnerships through regular meetings and communication with NGO partners
- Disseminate lessons learned from the project for possible replication

PROJECT MATERIALS AND TOOLS

- Operational strategy for life skills education for vulnerable children
- Protocols for individual and group counseling and case conferencing
- Report on the dance therapy workshop conducted by Tripura Kashyap, a renowned Indian dance and movement therapist
- Promotional video of the project

 Documented experiences and lessons learned from the project

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Psychosocial issues related to vulnerability of children to HIV/AIDS
- Child-friendly approaches and tools for addressing children's vulnerability
- Dance as a means for facilitating therapeutic intervention
- Life skills education activities with vulnerable children
- Counseling children in high-risk situations

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COUNTRY:

India

PROJECT:

HIV/AIDS Intervention Among Substance-Using Street Children in Delhi

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International (FHI)/IMPACT

Grantee: Society for Service to Urban Poverty (SHARAN)

USAID FUNDING PERIOD:

August 2002-February 2004 (Phase I) March 2004-August 2005 (Phase II)

USAID AMOUNT:

\$113,441 (Phase I) \$118,426 (Phase II)

PURPOSE

The goal of the project is to reduce HIV/STI risks among substance-using street children in Delhi. Many of these children are from HIV/AIDS-affected families.

The key strategies of the project include:

- Organizational and staff capacity building for effective program implementation
- Behavior change communication to improve health and awareness on STI/HIV
- Reduce substance use and HIV risks through detoxification
- Provision of short-term rehabilitation services for children after detoxification

KEY ACCOMPLISHMENTS

■ 652 orphans and vulnerable children were reached (as of April 2004).

- 501 children have received medical care in Delhi.
- 501 children have received nutritional support at the day care and detoxification center in Delhi.
- 395 children received nonformal educational support at Delhi.
- 106 children underwent detoxification.

PRIORITY ACTIVITIES

The program foresees assisting substanceusing children, especially those who use hardcore drugs, by:

- Providing services to 1,000 children who are drug-dependent in three areas of Delhi
- Establishing a drop-in-center for 500 children
- Providing detoxification to 250 children

- Providing a two-month rehabilitation course to 100 children
- Developing standard protocols for detoxification of children
- Developing a training manual for NGO staff on early detection and management of substance use by children

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training staff of children's organizations to deal with substance use by children
- Child detoxification
- Counseling children who are drugdependent

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COUNTRY:

India

PROJECT:

HIV/AIDS Intervention Among Substance-Using Street Children in Mumbai

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Society for Undertaking Poor People's Onus for Rehabilitation (SUPPORT)

USAID FUNDING PERIOD:

March 2004-August 2005

USAID AMOUNT:

\$47,823 (Phase I) \$115,318 (Phase II)

PURPOSE

The goal of the project is to reduce risks of STI/HIV among substance-using children in Mumbai. Many of these children are from HIV/AIDS-affected families.

The key strategies of the project include:

■ Staff capacity building

- Outreach services to improve knowledge and awareness, with special attention to substance-using girls
- Detoxification of substance-using children
- Provision of short-term rehabilitation services
- Advocacy for enabling environment

KEY ACCOMPLISHMENTS

The key accomplishments of the first phase, as of April 2004, are:

- Outreach activities that reached 2,394 children
- Attendance of 229 orphans and vulnerable children at day care centers
- Detoxification of 160 children
- Rehabilitation of 82 children

PRIORITY ACTIVITIES

The project aims to reach substance-using street children in Mumbai through the following activities:

- Behavior change communication activities for 1,500 substance-using street children
- Drop-in center services for 500 children
- Comprehensive medical checkups for 200 children
- Detoxification of 160 children
- Short-term rehabilitation services for 70 children
- Sensitization of police and NGO staff

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training staff of children's organizations to deal with substance use by children
- Child detoxification
- Rehabilitation of substance-using children

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COUNTRY:

India

PROJECT:

HIV/AIDS Prevention for Street and Slum Children in Delhi

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Salaam Baalak Trust (SBT)

USAID FUNDING PERIOD:

August 1999-June 2002 (Phase I) September 2002-February 2004 (Phase II) March 2004-August 2005 (Phase III)

USAID AMOUNT:

\$105,537 (Phase I) \$73,434 (Phase II) \$75,000 (Phase III)

PURPOSE

The project works to reduce the risk of HIV/AIDS exposure and infection among street children, working children, and slum dwellers, especially girls. Many of these children are from families affected by HIV/AIDS.

Strategies include:

- Building life skills among street and working children with particular emphasis on health promotion and preventing HIV/AIDS
- Promoting access to health services
- Strengthening family reunification through counseling and support to children, families, and the wider community
- Providing vocational training and job placements for children
- Strengthening the capacity of staff through training and capacity building

The project provides care and support to vulnerable children through life skills education, counseling, health services, vocational training, reunification of children with family members, income generation and job placements for older children, boarding facilities, and recreation and games. The project advocates

for children's rights by networking with other NGOs and CBOs and with police officials.

KEY ACCOMPLISHMENTS

- 10,533 street and working children at the railway station and other contact points have received information about life skills education; health; sex and sexuality; and prevention of drug abuse, STIs, and HIV/AIDS.
- 5,174 children were provided with medical care and 1,723 cases were referred to hospitals for treatment.
- As part of an education program, 197 children have enrolled in schools, 2,447 children are participating in nonformal education classes, and 199 children are studying in the SBT-operated national open school center.
- 1,756 children have received interpersonal counseling, of whom 40 received special counseling by mental health professionals.
- 83 staff members, including 20 peer educators/field assistants, have been trained in various issues related to HIV/AIDS, including prevention strategies and the care and support needs of children.

- 234 girls have used the facilities of the girls shelter.
- 119 girls have been reunited with their families, both in and out of Delhi.
- Approximately 120 children have been referred to VCT centers.

PRIORITY ACTIVITIES

- Direct an annual theatre presentation by street children as an advocacy tool in Delhi city schools
- Provide clinical care services through health camps, health awareness programs, and referrals for VCT services
- Strengthen psychosocial support services to traumatized and disabled children, including referral services for detoxification, through the Mental Health Core Group
- Reunification of children with their families and sensitization of families and wider communities on issues faced by street children through a photo-documentary prepared by SBT

PROJECT MATERIALS AND TOOLS

- Resource directory on child-friendly services available in Delhi
- Education materials on HIV/AIDS preventions developed by street children
- Strategies for increasing participation of children in HIV/AIDS prevention programs

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training of NGO staff in HIV/AIDS and related issues among street and working children
- Operating a peer education program for street children
- Capacity building of staff regarding the Juvenile Justice Act
- Sensitization and awareness programs on street children issues through the use of various media such as street plays, rallies, and mass health awareness programs in communities

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COUNTRY:

India

PROJECT:

Project Motukkal, a Community-Based Care and Support Project for Children Affected by HIV/AIDS in Namakkal Union in Tamilnadu

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: Community Health Education Society (CHES); Women's Organization in Rural Development (WORD)

USAID FUNDING PERIOD:

December 2003-May 2005

USAID AMOUNT:

\$83,947

PURPOSE

The project aims to minimize the impact of HIV/AIDS on children and their families in Namakkal Union through community-based prevention and care activities.

KEY ACCOMPLISHMENTS

- 85 children affected by AIDS were reached through home-based care.
- 342 children received clinical care.
- 70 children were given nutritional support through partners.
- 10 children affected by AIDS and 27 parents received psychosocial support.
- Four women's self-help groups have been formed in four zones.
- Six children's clubs have been formed.

PRIORITY ACTIVITIES

- Registering new children affected by AIDS into the home-based care program
- Providing child counseling
- Offering medical and nursing care

- Providing referral services
- Networking and linking with partner organizations
- Increasing vocational training
- Conducting activities
- Introducing life skills education to the community

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in community mobilization on HIV/AIDS issues through self-help groups.

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COUNTRY:

India

PROJECT:

Providing Community-Based Care and Support to Infected and Affected Children in Parts of Delhi and Andhra Pradesh

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantees: Catholic Relief Services (CRS); Women's Action Group/Chelsea; St. Paul's Trust

USAID FUNDING PERIOD:

August 2002-January 2004. Extended to May 2004 for finalizing the second phase proposal.

USAID AMOUNT:

\$285,507

PURPOSE

The goal of the project is to improve the well-being of children infected and affected by HIV/AIDS in the target area by providing comprehensive care and support programs in an enabling environment. The project has a target of reaching out to 1,250 infected and affected children in two locations in India.

Project strategies include:

- Providing community-based care and support through social workers and peer educators
- Providing community-based medical care and treatment for infected and affected children through clinics

- Increasing community sensitization, mobilization, and participation of key stakeholders in project activities to create an enabling environment
- Generating optimal use of services (institutional facilities) through established referrals and linkages for medical care, incomegenerating projects, and education
- Enhancing the capacity of implementing partners and local NGOs and providing them with technical support

KEY ACCOMPLISHMENTS

1,165 infected and affected children (571 girls and 594 boys, 24% aged 0-4; 34% aged 5-9; 29% aged 10-14, and 13% aged 15-19)

have been served through the communitybased care component of the project.

- All 1,165 children have received health care at some point of time.
- 1,098 children have received supplementary nutrition (one meal per day local food equivalent).
- 1,104 children have received psychosocial support through individual and group counselling.
- 427 children have used recreational facilities provided at drop-in centers.
- 730 children have received educational support (e.g., tuition fees, books, and uniforms).
- 211 children have been referred to VCT centers for HIV testing.
- Seven boys and 35 girls older than 14 years have received vocational training through linkages with agencies offering such training.
- One member per family has been trained as a care provider for the infected or affected child or children.
- 66 non-paid peer educators (33 boys, 33 girls), aged 15 to 19, are actively working in the project.
- 13 self-help groups (comprising 130 women from affected and infected families) have been formed and are proving to be an important means of building self-confidence, self-support, and social momentum to mobilize communities to provide care and support of infected and affected children.

- Referral linkages for health, education, and vocational training have been established with 24 government and 26 private facilities, indicating effective utilization of locally available resources.
- 62 children have been admitted to orphanages and boarding schools.
- A "lessons learned" study was conducted after one year of project implementation; the results were shared through a nationallevel dissemination meeting.

PRIORITY ACTIVITIES

- Gradual withdrawal of nutritional supplements
- Practice and review of newly developed behaviour change communication materials (posters and flash cards)
- Training of caregivers in homes and communities on the use of the home-based care manual
- Introduction of life skills education for children aged 8 to 18 years
- Strengthening of the educational and counselling component of the project
- Further strengthening of the networking and referral system with the existing infrastructures to ensure continuation of care and support activities for the infected and affected children with minimal external support beyond the second phase of the project

PROJECT MATERIALS AND TOOLS

- Baseline survey report
- Project management and information system
- Project behavior change communication strategy
- Behavior change communication tools (posters and flash cards)
- Lessons learned document (to be finalized)
- Home-based care manual (to be finalized)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Establishing and operating a communitybased care model for infected or affected children
- Setting up a food/nutrition distribution system
- Developing a behavior change communication strategy and materials
- Developing community mobilization strategies and approaches
- Establishing effective networks and linkages
- Planning project implementation
- Initiating and maintaining self-help groups
- Recruitment and sustenance of child peer educators
- Addressing stigma and discrimination
- Monitoring and evaluation

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COUNTRY:

India

PROJECT:

PRUNAJEEVA ("Full Life")

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: World Vision

USAID FUNDING PERIOD:

May 2003-November 2004

USAID AMOUNT:

\$162,526

PURPOSE

The goal of the project is to initiate community responses for the physical and psychosocial well-being of persons living with HIV/AIDS, including children affected by AIDS, in specific areas of Guntur and Vijayawada districts in Andhra Pradesh. The project uses broad community-based approaches to address issues of stigma and discrimination by reaching out to all households, including those with children infected and affected by HIV/AIDS. To ensure effective implementation and sustainability, entry points are being identified and linkages built using existing community structures and resources.

Key strategies of the project include:

- Community mobilization and participation in project planning and implementation to build the capacities of families and caregivers
- Development and implementation of a behavior change communication strategy
- Provision of child-focused services to meet the needs of children affected by HIV/AIDS
- Networking and sensitization of stakeholders to create an enabling environment and promote greater involvement of persons living with HIV/AIDS

KEY ACCOMPLISHMENTS

- 708 orphans and other vulnerable children, including children living with HIV/AIDS (350 boys and 358 girls), have been receiving various services under the project.
- 46 community initiatives to meet the needs of orphans and vulnerable children were supported.
- 36 sensitization events were organized.
- Six FBOs organized and networked to provide services to families with orphans and vulnerable children.

PRIORITY ACTIVITIES

- Conduct situation assessment
- Train families on home-based care of children affected by AIDS

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- HIV prevention interventions
- Community mobilization
- HIV/AIDS care and support

■ Home- and community-based care

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COUNTRY:

India

Grantee: Young Women's Christian Association (YWCA), New Delhi

PROJECT:

Reducing the Vulnerability of Adolescents to HIV/AIDS in the Slums of Delhi

USAID FUNDING PERIOD:

September 2002-September 2005

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

USAID AMOUNT:

\$155,130

PURPOSE

The project aims to reduce the vulnerability of adolescents, especially girls, to HIV/AIDS by involving parents, families, and community members. The project is based in Najafgarh on the outskirts of Delhi, a semi-urban township with a high migrant population.

Working through a YWCA-based center and six community-based centers, the project has the following strategies:

 Developing community-based mechanisms to reduce exposure to high-risk behavior among adolescents and younger children

- Empowering adolescents by improving literacy and providing them training in life and livelihood skills to promote their overall development
- Addressing the needs of younger children through education, recreation, and nutrition
- Reducing the risk of sexual and other forms of exploitation of adolescent girls through awareness programs and counseling services

KEY ACCOMPLISHMENTS

- 558 orphans and vulnerable children were reached through care and support services.
- Approximately 470 adolescents and children (5 to 10 years old) receive nutritional supplements and medical care every month.
- The YWCA-based center and six community-based centers provide a safe space for approximately 300 adolescents (especially girls) per month.
- 200 adolescents receive life skills education every month.
- 134 adolescents and children had been admitted to schools as of April 2004.
- 50 children had been enrolled in the National Open School as of April 2004.
- 240 children and adolescents (130 boys and 110 girls) are receiving remedial education classes while continuing their school education.
- 283 adolescents and children (154 girls and 129 boys) are receiving nonformal education following the National Council for Education, Research, and Training syllabus.
- 34 boys and 87 girls have received vocational training in cutting, tailoring, and electrical work.
- 30 members of the adolescent group (Yuva Sabha) have received training on adolescent health, HIV/AIDS, and sex and sexuality issues.
- 15 CHVs have received basic training on first aid, sanitation, reproductive health, and community referral services.

PRIORITY ACTIVITIES

- Expand services to reach 750 adolescents and children during the current project phase
- Strengthen the counseling component using the FHI counseling protocol for testing and disclosure of HIV status to children
- Provide 400 adolescents with life skills education
- Staff capacity building activities for life skills education, behavior change communication, child participatory methodologies, and technical issues related to HIV/AIDS
- Ensure sustainability of the project by strengthening the capacity of 30 CHVs and 75 Yuva Sabha peer group members
- Develop an action plan to operationalize the behavior change communication framework for orphans and vulnerable children in order to reduce their HIV risk

PROJECT MATERIALS AND TOOLS

- Family life education training manual covering such topics as marriage, family planning, conception, and parenthood
- Vocational training course material and syllabus on cutting, tailoring, dress designing, and fabric painting

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Implementation of life skill education
- Implementation of family life education

- Low-cost nutrition programs
- Vocational training
- Training of peer educators on HIV/AIDS
- Community mobilization
- Networking with other faith-based organizations

CONTACT INFORMATION

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COUNTRY:

India

PROJECT:

Reducing the Vulnerability to HIV/AIDS of Children and Women Victims of Commercial Sexual Exploitation and Trafficking (VOCSET)

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Prerana

USAID FUNDING PERIOD:

April 2000-August 2002 (Phase I) September 2002-February 2004 (Phase II)

USAID AMOUNT:

\$62,065 (Phase I) \$61,108 (Phase II)

PURPOSE

The project aims to protect children in Falkland Road Mumbai and Turbhe-Vashi (Navi Mumbai) townships who are vulnerable to HIV/AIDS. The project's target populations include children orphaned by AIDS, children of HIV-positive mothers, and children who are vulnerable to sexual exploitation. The primary goals are to reduce the vulnerability to HIV/AIDS of children who are susceptible to commercial sexual exploitation; to ensure the well-being of children affected by HIV/AIDS using a rights-based approach; and to provide care and support.

Key project strategies include:

- Delinking children from brothels (but not from their mothers)
- Operating night-care centers for children affected by HIV/AIDS
- Eliminating second-generation trafficking
- Increasing human, civil, and health rights awareness among vulnerable women

- Creating self-help groups among vulnerable women and helping them network with other groups
- Ensuring the educational rights of children through maximum school enrollment and sustained formal education
- Establishing self-help networks of children

Night-care centers established under the project offer safe sleeping space; food; health checkups, referrals, and follow-ups; comprehensive educational support; psychosocial support; life skills education; and recreational opportunities.

KEY ACCOMPLISHMENTS

- As of April 30, 2003, 613 orphans and vulnerable children had received care and support through health, educational, and nutritional services; psychosocial counseling; life skills training; and night shelters at two locations in Mumbai.
- 103 children, aged 6 to 18, have been receiving life skills education.
- 119 children have been placed in boarding schools and vocational training centers to prevent them from being exploited in the sex trade.
- Five self-help groups, with some members living with HIV/AIDS, have been formed to encourage women to develop habits of thrift and credit.

PRIORITY ACTIVITIES

Expand ongoing efforts to place children in foster homes and institutions of residential care (by the end of the second phase of the project, five more children are expect-

- ed to have been placed in institutions, for a total of 42 placements)
- Focus on skills development of women living with HIV/AIDS and simultaneously continue efforts to reduce vulnerability to HIV/AIDS by offering women in sex trade alternative means of generating income
- In the project's third phase, strengthen children's collectives and facilitate peer groups to address HIV/AIDS issues, with special emphasis on care and support and addressing stigma and discrimination

PROJECT MATERIALS AND TOOLS

- Child participatory methodologies for organizations working with orphans and vulnerable children
- Life skills education approach for children of victims of commercial sexual exploitation and children exploited through the sex trade
- Manual on how to establish and operate night-care centers for children in brothel areas
- Manual on how to operate educational development programs for children in brothel areas
- Manual on how to manage institutional placement programs for children in brothel areas
- Manual on children's rights and child protection for children in brothel areas
- Lessons learned document disseminated at a workshop in Mumbai on March 18, 2004

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Methodologies for forming self-help groups of women living with HIV/AIDS, especially victims of commercial sexual exploitation
- Networking
- Development of program modules for victims of sexual exploitation
- Training in how to work with state agencies
- Orientation on interface between field programs and legal framework

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COUNTRY:

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PROJECT:

Sishu Adhikar Raksha (Protection of Rights of Children) Project

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Social Educational and Economic

Development Society (SEEDS)

USAID FUNDING PERIOD:

March 2003-August 2004

USAID AMOUNT:

\$95,773

PURPOSE

The goal of the project is to ensure the availability of care and support services for children infected and affected by HIV/AIDS in three selected zones of Guntur district in Andhra Pradesh.

The project strategies include:

■ Behavior change communication

- Community organization and mobilization
- Meeting the needs of children by providing and improving their access to services
- Capacity building for caregivers, families and people living with HIV/AIDS
- Networking with government and private institutions

KEY ACCOMPLISHMENTS

- 96 infected children and 978 affected children from 538 families were identified.
- 131 children were referred to a VCT center, with their parents/caregivers receiving preand post-test counseling.
- 911 children were referred for medical care.
- Behavior change communication reached 300 children affected by HIV/AIDS, 330 families, and 7,129 community members.
- 538 parents received counseling support.
- 157 children aged 14 to 18+ were identified as potential peer educators; 45 received peer educator training.
- 130 health providers were oriented on providing clinical care for children affected and infected by HIV/AIDS.
- 201 schoolteachers were sensitized.
- 63 caregivers were trained and provided with home-based care kits.
- 23 community-based day care centers are functioning and serving the needs of 575 children affected by HIV/AIDS.
- 45 children are receiving life skills education.
- 255 children were supported for education needs.
- 48 caretakers were trained in entrepreneurship development.

PRIORITY ACTIVITIES

- Training in entrepreneurship development linked with vocational and skill upgrading, along with linkages to appropriate livelihoods for peer educators, parents, and caregivers of orphans and vulnerable children
- Sensitizing policymakers, community leaders, religious leaders, and civil society organizations

PROJECT MATERIALS AND TOOLS

- Home-based care kit
- Exhibition kits in Telugu
- Home-based care kit booklet in Telugu
- Training material (in Telugu) for health care service providers

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Techniques and methods of community mobilization, organization, participation
- Home-based care in resource-poor rural and urban settings
- Training in entrepreneurship development and appropriate livelihood development
- Life skills education
- Child participatory methods

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COUNTRY:

India

PROJECT:

Street and Working Children Affected by AIDS Project

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Project Concern International (PCI)

USAID FUNDING PERIOD:

March 2000-June 2002 (Phase I) July 2002-January 2004 (Phase II) February 2004-July 2005 (Phase III)

USAID AMOUNT:

\$126,640 (Phase I) \$196,247 (Phase II) \$206,777 (Phase III)

PURPOSE

The project aims to reduce the vulnerability of street and working children and their families to HIV/AIDS and STIs. Many of these children are from families affected by HIV/AIDS.

KEY ACCOMPLISHMENTS

- 3,027 street and working children have received services.
- 175 children have been provided with a safe space through the short-stay home.
- 94 peer educators have been identified and trained and actively contribute to the project.
- 1,174 children have been provided with basic numeric and literacy skills through nonformal education classes.

- 44 children have been enrolled in schools for formal education.
- 328 children have received vocational training.
- 25 children have entered apprenticeship programs for job placement.
- 1,116 children were counseled on HIV/AIDS, other STIs, and issues related to sex and sexuality.
- 1,200 children received life skills education in 68 sessions.
- 3,937 children have received treatment for general ailments at health camps.
- 396 children received dental care and treatment at six dental camps.

- 150 children receive daily nutrition supplements.
- 16 children have been reunited with their families.
- One theater group was formed to spread information about HIV/AIDS, child rights, and leprosy.

PRIORITY ACTIVITIES

- Focus on reuniting children with their families
- Provide services to children living with HIV and community members through mobile van services
- Evaluate the impact of the program using the child development and monitoring tool
- Ensure the sustainability of the program by involving peer educators and community members and through income-generation programs

PROJECT MATERIALS AND TOOLS

- Child development and monitoring tool
- Guidelines for rapid test for HIV

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- HIV/AIDS prevention for street youth
- Institutional capacity assessment and building
- Economic support services for street youth
- Social welfare services for street youth

- Child development monitoring tool
- Family life/life skills education

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COUNTRY:

India

PROJECT:

Strengthening Community Support for Vulnerable Children and Mothers in Mumbai

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Committed Communities

Development Trust

USAID FUNDING PERIOD:

December 1999-August 2002 (Phase I) September 2002-February 2004 (Phase II)

USAID AMOUNT:

\$85,924 (Phase I) \$82,761 (Phase II)

PURPOSE

The project aims to provide comprehensive care to vulnerable and infected or affected children and their mothers through night shelters, day care centers, and crisis intervention centers. The overall project goal is to protect and nurture children in vulnerable situations to facilitate their growth so toward becoming healthy and contributing members of society.

Strategies for the current phase include:

- Strengthening community outreach activities by developing and sustaining relationships with allied systems and resources, thereby creating an enabling environment for vulnerable and at-risk children
- Providing night shelter in order to make a safe place available for protecting vulnerable children against sexual exploitation and trafficking in red light areas
- Providing temporary care and support to vulnerable children and their mothers in crisis situations
- Networking with organizations working on similar or related issues for referral services, advocacy, and policy development
- Documenting and disseminating key lessons and experiences

Building the capacity of the project team, collaborating NGOs, and the community to respond to the needs of the at-risk children

KEY ACCOMPLISHMENTS

- 1,691 orphans and vulnerable children (1052 girls and 639 boys) received care and support services.
- 109 children (32 boys and 77 girls) are enrolled in formal school, with educational support provided.
- 181 girls have been enrolled at the night shelter.
- 390 girls in crisis situations were referred to the night shelter by other organization and provided with short-term stay facilities.
- 599 children have accessed medical care facilities for general health checkups and to attend various health camps.
- 695 children have attended life skills education sessions.

PRIORITY ACTIVITIES

 Develop rehabilitation options for older children, especially boys

- Facilitate the development of incomegenerating schemes for women
- Provide vocational training options for children
- Develop a best practice model for a comprehensive urban care and support program
- Develop a nonformal education module that incorporates specific topics of interest to women
- Organize workshops with other NGOs on child rights and institutional care for children infected and affected by HIV
- Develop more awareness among girls regarding issues such as sexual abuse, growing up, and life skills
- Provide life skills training for children, women, and project staff
- Help women and children access better health services and teach them better ways to prevent HIV/STIs

PROJECT MATERIALS AND TOOLS

- Training kit on sexual health from other organizations
- Module for training in sexuality
- Counseling guidelines for women and children
- Guidelines for counseling girls in the special juvenile home
- A child care manual for child care functionaries (in preparation)

- Memory books for children prepared by their mothers
- Nutrition chart and nutrition education handbook
- Psychological testing kits for children, including the Draw A Man Test, the Wechsler Intelligence Scale for Children (Indian adaptation), the Vineland Social Maturity Scale, and the Children's Adaptation Test (Indian adaptation)

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Assessing the needs of children in vulnerable situations and organizations concerned with child care
- Training child care workers and functionaries
- Monitoring and evaluation of programs for at-risk children
- Training of community workers/volunteers in home-based care
- Development of information, education, and communication materials
- Counseling children and families affected and infected by HIV/AIDS
- Organizing workshops on issues related to child rights

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COUNTRY:

India

PROJECT:

Thooli ("cradle") – Care of Children Infected and Affected by, and Vulnerable to, AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Community Health Education

Society (CHES)

USAID FUNDING PERIOD:

March 2000-July 2002 (Phase I) August 2002-January 2004 (Phase II) February 2004-July 2005 (Phase II extension)

USAID AMOUNT:

\$90,881 (Phase I) \$87,008 (Phase II)

\$155,947 (Phase II extension)

PURPOSE

The project in the extension phase is to create an enabling environment in about 35 selected slums of Chennai to address the needs of children affected by AIDS and their families through a combination of direct community interventions, partnerships, and networks and by increasing the capacity of organizations to undertake care and support activities for these children.

KEY ACCOMPLISHMENTS

- 16,178 community members reached
- 14 local NGOs and 55 CBOs supported in their work with children affected by AIDS

- 2,367 children reached through six children's clubs
- 151 families provided with homebased care
- 354 children affected by AIDS reached through care and support services
- 1,296 children provided with clinical care
- 648 children provided with nutrition support
- 53 children affected by AIDS provided care at the short-stay home
- 280 caregivers trained for homebased care

PRIORITY ACTIVITIES

- Reach out to 1,000 children affected by AIDS and 1,500 persons living with HIV/AIDS
- Sensitize stakeholders through meetings
- Initiate succession planning for children
- Extend legal support for parents living with HIV to write wills and protect property
- Adapt behavior change communication strategies and frameworks
- Provide age-appropriate vocational skills training to children older than 14 years

PROJECT MATERIALS AND TOOLS

- "Nurtured Hope," a training module for caregivers, on the care of children infected and affected by, and vulnerable, to AIDS (English and Tamil)
- "In vivo," a training manual (in draft form) for doctors on care of children infected and affected by AIDS
- Resource directory on services for orphans and vulnerable children in Chennai city
- "Our Daily Activities at CHES Shelter," a 20minute video on compact disc
- Annual report of CHES for 2002-2003
- Case studies of children supported by the project
- 30-minute documentary (draft form) on foster care

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Training NGOs on successful running of projects for orphans and vulnerable children
- Capacity building of NGO staff on pediatric HIV care
- Training for caregivers on care of orphans and vulnerable children
- Training for medical practitioners on the care of orphans and vulnerable children

CONTACT INFORMATION

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COUNTRY:

India

USAID FUNDING PERIOD: April 2003-October 2004

PROJECT:

WIN CHILD

USAID AMOUNT:

\$91,708

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International

(FHI)/IMPACT

Grantee: Women's Initiatives (WINS)

PURPOSE

The goal of the project is to mitigate physical, psychological, and social stress among identified children infected and affected by HIV in selected households of Chittoor district in Andhra Pradesh. The project aims to provide home-based care to 500 children infected and affected by HIV and their parents.

Project strategies include:

- Capacity building of organization and staff
- Capacity building of the forum of persons living with HIV/AIDS, families, and caregivers
- Engaging communities in improving access to services for children affected by AIDS
- Promoting behavior change communication to increase knowledge of HIV/AIDS
- Promoting the rights of infected and affected children and mobilizing the community to help in this effort

KEY ACCOMPLISHMENTS

601 children, including 177 children of persons living with HIV/AIDS with both parents alive, 349 children of persons living with HIV/AIDS with one parent alive, and 75

children with neither parent alive, received care and support services.

- 353 children received a clinical checkup.
- A small savings and thrift activity was strengthened.
- 67 children were admitted to local schools.
- 206 children have been receiving nutrition supplements since June 2003.
- 94 children have been receiving nonformal education and remedial education support.

PRIORITY ACTIVITIES

- Provide home-based care training for staff
- Train families and caregivers on aspects of home-based care
- Develop a community-based approach to care
- Impart life skills education to children affected by AIDS
- Network with NGOs
- Provide psychosocial support to children affected by AIDS

PROJECT MATERIALS AND TOOLS

- Behavior change communication materials and experience with street plays for creating awareness within the community
- Primary school education tools
- Advocacy documents and reports of success stories in fighting stigma and discrimination against children affected by AIDS

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in training on integrating prevention interventions and home-based care and training in ethics and rights relating to children and adults infected and affected by HIV/AIDS.

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Europe and Eurasia



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This photo is intended for illustrative purposes only and does not represent a child affected by AIDS.

Russia

COUNTRY:

Russia

PROJECT:

Assistance to Russian Orphans (ARO)

IMPLEMENTING ORGANIZATIONS:

Primary: International Research & Exchanges Board (IREX, a U.S. nonprofit organization) **Grantee:** National Society for the Prevention of Cruelty to Children (NSPCC, a Russian

NGO)

USAID FUNDING PERIOD:

October 2002-October 2006

USAID AMOUNT:

\$9,610,000 (\$1,600,000 supports children and families affected by HIV/AIDS)

PURPOSE

The second phase of the Assistance to Russian Orphans (ARO-2) builds on the work and achievements of ARO-1, which operated in Russia from 1999 to 2002 and was the first large program to involve NGOs in preventing child abandonment. The priority regions for ARO-2 will be Magadan and Tomsk oblasts, and Khabarovsk krai. The program is also active in other selected regions of the Russian Federation.

ARO-2 seeks to achieve the following objectives:

- Irreversible positive changes in the sphere of child abandonment prevention
- Creation of sustainable mechanisms to overcome the negative situation
- Increased understanding among the general public that the problem of child abandonment can be overcome only with the help of society as a whole

The ARO-2 program strategy is focused on increasing the number of innovative projects

at the local, regional, and federal levels based on sustainable partnerships between NGOs and governmental organizations. The ARO-2 implementation strategy includes:

- Regional seminars to develop new initiatives and innovative projects and bring together key stakeholders such as governmental organizations, NGOs, policymakers, mass media, and business and other professionals to involve them in finding solutions for problems linked to child abandonment
- Grant support and technical assistance for innovative regional projects, dissemination of information on effective practices, and increased mass media attention to child abandonment problems and successful solutions
- Training for specialists
- Public education campaigns to raise public awareness and change public attitudes regarding child abandonment problems and their solutions

Russia

KEY ACCOMPLISHMENTS

- 1,403 children remained in families as a result of family preservation and reunification interventions, and more than 10,000 of the most vulnerable children and 7,000 families, including short- and long-term foster families, guardianship families, adopting families, and respite families, received comprehensive psychological and social assistance services.
- 144 projects were implemented by 84 NGOs and their partners in the government sector in 26 regions of Russia, including Vladimirskaya, Novgorodskaya, Tomskaya, Permskaya, Nizhegorodskaya, Tyumenskaya, Rostovskaya, Irkutskaya, Volgogradskaya, Pskovskaya, Novosibirskaya, and Magadanskaya oblasts, Khabarovskiy, Altayskiy, Krasnodarskiy, and Primorskiy krais, and the republics of Kareliya and Buryatiya. The amount provided in grants to NGOs totaled \$2,637,926.
- 143 innovative child welfare models were developed and implemented Russia-wide. These included services to families in crisis and foster families (e.g., regional foster care model in Primorskiy krai); support programs for children with special needs (e.g., regional system of early intervention in Novgorod oblast); services for deaf children, children with autism, and children with other disabilities; and social hostels for older orphans and children at risk.
- 104 foster families were created.
- 90 children aged 14 to 16, including children with severe intellectual deficiencies, were placed into respite families.
- 233 adopting, guardianship, and foster families received comprehensive support services, including family preservation and

- secondary abandonment prevention services.
- 472 children in institutional care (orphanages and similar institutions) were provided with mentoring and social adaptation services through joint activities with "family" children.

PRIORITY ACTIVITIES

- Develop public initiatives and innovative projects to assist children and families at risk
- Disseminate innovative child welfare practices
- Develop policy dialogue on child welfare reform
- Increase public awareness efforts regarding the socio-psychological roots and causes of child abandonment, existing types of assistance to children and families at risk, and the importance of public initiatives and citizen involvement to solve these problems

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Training competent social work staff
- Networking with local and governmental authorities
- Abandonment prevention and counseling within high-risk families

Russia

CONTACT INFORMATION

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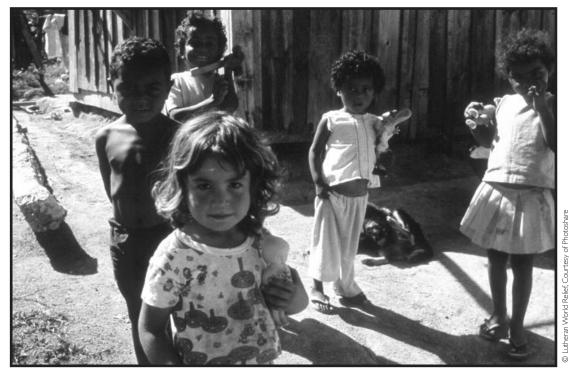
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Latin America and the Caribbean



Brazil

COUNTRY:

Brazil

PROJECT:

POMMAR At-Risk Youth Project

IMPLEMENTING ORGANIZATION:

Partners of the Americas

USAID FUNDING PERIOD:

September 1994-September 2004

USAID AMOUNT:

\$11,473,627 over a 10-year period (a portion supports children and families affected by HIV/AIDS)

PURPOSE

POMMAR (Prevention for At-Risk Boys and Girls) assists children and young people aged 0 to 21 in urban areas of Salvador, Recife, and Fortaleza in Northeastern Brazil and in the Brasilia, the nation's capital. The Project's trafficking-in-persons component further targets an additional seven municipalities (Pacaraima-RR; Manaus-AM; Rio Branco-AC; Corumbá-MS; São Paulo; Feira de Santa-BA; Campina Grande-PB).

The program promotes the protection and holistic development of at-risk children and youth to become healthy and productive citizens by:

- Increasing the educational and vocational preparation of children and youth
- Engaging society in decreasing violence, especially sexual, against children and youth, as well as combating the trafficking of persons
- Preventing and eradicating the worst forms of child labor in urban areas
- Strengthening HIV/AIDS prevention (ages 13 to 21) and community-based care (ages 0 to 12)

POMMAR provides direct financial and technical support to local organizations (primarily NGOs) and multisector service networks, funds practical research, and disseminates replicable approaches. This support seeks to:

- Strengthen educational services provided by NGOs that enhance and complement formal educational, with a special emphasis on arts education and cultural expression, as well as market-oriented vocational training for older youth
- Promote democratic participation of youth in civic activities, enabling them to exercise their rights, develop civic skills, and take control of their lives by learning to define coherent objectives and life goals
- Provide counseling, legal, and protective services for child and adolescent victims of sexual violence (abuse and commercial sexual exploitation/child prostitution) and trafficking for the purpose of sexual exploitation
- Promote advocacy, coalition building, and public awareness campaigns that target social values and behaviors related to violence, abuse, and commercial sexual exploitation of children and adolescents

Brazil

Implement services and monitor public policies to prevent and eradicate child labor practices in urban areas

Provide health information and services to youth aged 13 to 21 with emphasis on the prevention of HIV/AIDS as well as teenage pregnancy prevention

Provide community-based care and assistance to children aged 0 to 12 living with HIV/AIDS and/or directly affected by the HIV/AIDS pandemic

Objectives in community-based care include:

- Supporting entities that assist children living with HIV/AIDS to provide services consistent with current legislation and standards for public health and child rights
- Improving the quality of services in community care facilities
- Promoting debate and exchange of successful practices among service providers and public policymakers locally and with other regions of the country
- Strengthening indicators for monitoring and evaluation

KEY ACCOMPLISHMENTS

- POMMAR-supported projects directly reached 15,516 children and youth.
- POMMAR-supported projects indirectly reached 17,760 familiy members.
- Approximately 670 organizations were engaged in networks reaching 3,946 children and youth.
- 36 NGOs received funding in 2003 to implement a total of 43 service projects.

- Of the 15,516 children and youth served by the 33 POMMAR projects, 12,646 (82%) benefited from formative educational activities.
- Children/youth served by the program had a 95% school enrollment rate; the percentage passing rate is pending the termination of the academic year.
- 66% of total beneficiaries in five institutions supported providing education and employment skills (111 of 167 youth enrolled in vocational training) successfully concluded their courses and received certificates.
- 1,147 people (839 adults and 308 youth) took part in capacity building to combat sexual violence against children and youth.
- In seven HIV/AIDS care projects, 661 children living with HIV/AIDS were reached in day programs, shelters, and hospital-based care programs. Services included counseling and nutritional support.

 Complete HIV/AIDS care data for 2003 will be presented in the comprehensive data collection report.
- 314 families of assisted children living with HIV/AIDS received care and orientation, including orientation in prevention.
- Training of 964 health professionals and volunteers improved services to children living with HIV/AIDS and made them more people-oriented and humane.
- Support groups were created to provide mutual help for families living with HIV/AIDS. Aided by trained professionals, parents or responsible adults are exchanging information about caring for children afflicted with HIV/AIDS and their experiences.

Brazil

Three adapted recreation facilities were developed for children living with HIV/AIDS in the cities of Fortaleza (two facilities) and Salvador (one).

PROJECT MATERIALS AND TOOLS

- Manual/video on the STI/HIV/AIDS prevention project for teens and street children (Fortaleza, Ceará State)
- Two publications on sexual abuse and exploitation (Facing Exploitation, 1998) and arts education (Every Color Needs Light, 2001)
- Book/CD on the "Song in Every Corner" (Canto em Cada Canto) choir project for at-risk children, enhancing self-esteem and education through choirs and music education (Fortaleza, Ceará State)
- Teaching and management manual/institutional video on the "Arts Workshop" (Tapera das Artes) music and theater project for at-risk children, enhancing selfesteem and education through music education and theater (Fortaleza, Ceará State)
- "Vida que te Quero Viva!", which addresses projects supported through POMMAR in Fortaleza, Recife, and Salvador and the experience of home-based care for children living with HIV/AIDS

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- HIV/AIDS prevention and communitybased care
- Education
- Arts education
- Vocational training
- Sexual abuse and exploitation
- Child labor eradication
- Trafficking in persons
- Citizen participation for youth

CONTACT INFORMATION

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COUNTRY:

Dominican Republic

PROJECT:

CONECTA

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International **Grantees:** Abt Associates, Inc.; ALEPH;

Esperanza Internacional; PROINFANCIA; IDEV;

Centro de Promoción y Solidaridad Humana (CEPROSH); Fundacion Génesis

USAID FUNDING PERIOD:

October 2002-September 2007

USAID AMOUNT:

\$34,940,288 (a portion supports children and families affected by HIV/AIDS)

PURPOSE

CONECTA's purpose is to strengthen HIV/AIDS programming, reproductive health, safe motherhood, and child survival services within the framework of the Dominican Republic's new social security system. CONECTA works through existing private and public facilities to encourage a continuum of care among public, private, and community health and psychosocial support services. In its first year of operation a key emphasis of CONECTA has been the establishment, strengthening, and networking of services that will improve living conditions and stability for children and their families who are affected by HIV/AIDS.

KEY ACCOMPLISHMENTS

- Conducted community assessments in intervention areas that identified CBOs, churches, neighborhood organizations, schools, health centers, and NGOs interested in supporting activities for orphans and vulnerable children and their families
- Established microloan and income-generation activities for persons living with HIV/AIDS and their families

- Developed advocacy kits and a campaign addressing stigma and discrimination faced by persons living with HIV/AIDS and their families
- Designed and implemented training workshops for orphans and vulnerable children and their caregivers
- Established agreements with selected health centers to provide medical services to orphans and vulnerable children
- Established home visiting and recreational programs for orphans and vulnerable children

PRIORITY ACTIVITIES

- Increase coordination and collaboration with local medical services
- Increase access to HIV testing, treatment, and prophylaxis for opportunistic infections for children
- Expand income-generating activities

- Develop a replicable model of a high-quality, accessible home-based care support system for orphans and vulnerable children
- Provide emotional and social support to orphans and vulnerable children and their families
- Provide legal assistance to families in order to provide birth certificates for undeclared children and other legal support

PROJECT MATERIALS AND TOOLS

(All materials are in Spanish and available through the CONECTA office in Santo Domingo.)

- Community orphans and vulnerable children assessment tool
- Media kit on stigma and discrimination faced by orphans and vulnerable children
- Orphans and vulnerable children and their caretakers workshop manual

TECHNICAL ASSISTANCE

The project can provide expertise for other orphans and vulnerable children projects in the following areas:

- Community mobilization
- Linking care and prevention
- Home-based care
- Child survival
- Establishment of support networks of people living with HIV/AIDS
- Advocacy

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CONECTA

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COUNTRY:

Dominican Republic

PROJECT:

The Global Orphan Project/Promundo

IMPLEMENTING ORGANIZATION:

John Snow International (JSI)

USAID FUNDING PERIOD:

July 2001-June 2004

USAID AMOUNT:

\$915,000

PURPOSE

The project is intended to carry out a situation analysis leading to a multisector strategy that is designed to assist children affected by HIV/AIDS, including HIV-positive children. The project protocol progresses through three phases:

- Phase 1: Situation Analysis/Quantification
- Phase 2: Community Mobilization
- Phase 3: Direct Services Benefiting
 Vulnerable Children and Families Living with
 HIV/AIDS

Based on situation analysis results, community mobilization workshops are conducted nationwide with the involvement of the private, public, and social sectors. Three innovative pilot activities are under way using community and social mobilization models:

- Family and community groups unite and identify the needs and provide care and support for vulnerable children.
- Pilot activities are testing techniques of family case management, microcredit, and micro-enterprise.
- Communities support activities for vulnerable children that involve networks of people living with AIDS, parochial systems, public and private pediatric clinics, NGOs,

FBOs, and special needs education programs.

Relationships with the private sector through the "Dominican Private Sector in Solidarity with Vulnerable Children" initiative allow Promundo to leverage additional resources for children.

The Global Orphan Project/Promundo collaborates with key government agencies, NGOs, foundations, private sector, and donors. A comprehensive analysis of current Dominican Republic public policies and laws affecting vulnerable children is ongoing. This analysis pertains to the protection of orphans, adoptions, social security for disabled adults, inheritance, and support to extended families providing assistance to vulnerable children. Special programs are identified that have the potential for improving the health, education, protection, and overall quality of life of children affected by HIV/AIDS.

KEY ACCOMPLISHMENTS

■ Through pilot activities, over 1,000 vulnerable children were identified and directly benefited during 2004. Over 2,100 direct services (medical, psychological, educational, legal, food, clothing, etc.) were delivered to vulnerable children during this project. At the present level, 10 to 20 additional vulnerable children are identified and helped each week with direct services. An additional 1,000 families affected by AIDS (including 2,000 children affected by

AIDS) benefit from micro-enterprise and microcredit programs during 2004. An additional 4,000 mothers and their children enrolled in the PMTCT program will benefit from community-support models implemented during 2004. All of the 58,000 children affected by AIDS benefited from stigma reduction campaigns using mass media and billboards and through school theater strategies.

- In FY 2004, the Global Orphan
 Project/Promundo provided guidance,
 technical assistance, and education
 regarding vulnerable children issues to
 more than 150 national, international,
 private sector, and local organizations
 operating in the Dominican Republic
 across the private, public, university,
 and social sectors.
- The "Dominican Republic Snapshot" estimation study and geographic information systems mapping for all regions and provinces were completed.
- Policy and legal analyses identifying several important gaps in legal coverage for children affected by AIDS, especially those without birth certificates, were completed.
- Seven innovative community awards were granted for implementation in 2003-2004. These covered nine geographic locations across the country in both rural and urban locations. All community grants identified vulnerable children, conducted home visits, and provided direct services as necessary. Groups working with Promundo form a "Circle of Solidarity Network" helping vulnerable children.
- Project collaboration with the private sector, government agencies, NGOs, the Coalition Against AIDS, FBOs, and legal authorities was established for social mobi-

- lization. Contributions from the private sector for orphans and vulnerable children totaled over \$71,500 during 2003-2004.
- Five community mobilization and dissemination workshops were completed in collaboration with the Presidential Commission on AIDS.

PROJECT MATERIALS AND TOOLS

- Global Orphan Project/Promundo "Three-Stage Risk of Displacement Model"
- Global Orphan Project/Promundo "Community Mobilization Model for Child and Youth Programs"
- Pilot activities and community grants award model
- Orphanage, child service, and pediatric center site interview protocol
- "Logistics 2010" software and training program for PMTCT community logistics support

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Haiti

COUNTRY:

Haiti

PROJECT:

Care and Support Activities for Orphans and Other Vulnerable Children and Persons Living With HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International/IMPACT

Grantee: Maison Arc-en-Ciel

USAID FUNDING PERIOD:

April 2002-March 2005

USAID AMOUNT:

\$120,149

PURPOSE

Maison Arc-en-Ciel offers comprehensive support and care to children who are infected or affected by HIV/AIDS and their families in the Port-au-Prince metropolitan area. The centrally located community center offers a comprehensive package of psychosocial support, medical services, and training. At the center, mothers and other family caretakers learn how to provide home-based care to children and other family members living with HIV/AIDS. Part-time health professionals are available to attend to cases. Psychosocial services provided at the center include individual and family counseling, recreation, and succession planning. The center also facilitates access to schooling, food, and microfinance services.

Families are linked to Maison Arc-en-Ciel's community center through referrals from HIV VCT and PMTCT centers as well as through faith- and community-based programs.

KEY ACCOMPLISHMENTS

Established a community center in Port-au-Prince

- Developed a community mobilization manual and educational materials
- Created and reinforced family support groups
- Hosted community-based meetings with local delegates who serve as neighborhood health promoters
- Conducted sensitization workshops throughout the community
- Served through the community center approximately 300 children from lowincome families living with or affected by HIV/AIDS
- Expanded community sensitization program through videos, pamphlets, posters, and peer educators to promote hope for children living with HIV/AIDS

PRIORITY ACTIVITIES

 Develop home-based care training curriculum

Haiti

- Recruit and train home-based care volunteers
- Expand community training center facilities
- Pilot microloan program with technical assistance from local microfinance organization

PROJECT MATERIALS AND TOOLS

The following materials are available by contacting Maison Arc-en-Ciel:

- Community mobilization manual and materials (French and Haitian Creole)
- Video, posters, pamphlets on children living with HIV/AIDS (Haitian Creole)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Developing training materials
- Developing educational materials
- Undertaking community mobilization

CONTACT INFORMATION

Tel: 509-246-5596/513-7596

Family Health International/Haiti: Dr. Jean-Robert Brutus, Country Director (jean-robertbrutus@yahoo.com)

Maison Arc-en-Ciel: Ms. Danielle Pénette, General Director Laboule 12, Port-au-Prince, Haïti

Family Health International/Virginia: Ms. Gretchen Bachman (gbachman@fhi.org) Tel: 703-516-9779; Fax: 703-516-9781

USAID/Washington: Kate Crawford (kacrawford@usaid.gov)

USAID/Haiti: Chris Barratt (cbarratt@usaid.gov)

Global



Global

PROJECT:

Child Survival Technical Support Project Plus (CSTS)

IMPLEMENTING ORGANIZATION:

Macro International, Inc.

USAID FUNDING PERIOD:

October 1998-September 2003 (extension pending)

USAID AMOUNT:

\$8,004,285 (increase pending; a portion supports activities related to children and families affected by HIV/AIDS)

PURPOSE

The Project assists the Office of Health, Infectious Disease and Nutrition of USAID's Bureau for Global Health (BGH) by strengthening the ability of grantees to achieve sustainable service delivery in child survival and health programs. Working with PVOs and their local partners at the community, country, and regional levels, the Project helps PVOs identify and access timely and relevant resources to build technical and organizational capacity; facilitate networking; strengthen competence in project management and monitoring and evaluation; disseminate state-of-the-art materials on child survival interventions; and assess the use of program data.

KEY ACCOMPLISHMENTS

- Developed and pilot-tested the KPC 2000+, a data collection tool developed to address orphan enumeration, orphan care and support, and community attitudes regarding children affected by AIDS and people living with HIV/AIDS
- Produced reference materials for child survival grantees that include information on mother-to-child HIV transmission, assistance to children affected by AIDS, and homeand community-based care

 Conducted annual reviews of applications for BGH-funded child survival and health grants, including applications for programs that affect orphans and vulnerable children

In January 2003, CSTS launched the HIV/AIDS Virtual Resource Center (VRC) for PVOs and NGOs. The VRC was developed by CSTS in collaboration with the CORE HIV/AIDS Working Group and is available at the Web site http://www.childsurvival.com/vrc. The VRC provides PVOs and NGOs with quick access to such resources as:

- Links to technical guidelines and other state-of-the-art materials and tools
- Information on international HIV/AIDS indicators
- Actual HIV/AIDS data
- Information on upcoming conferences, meetings, and workshops
- Funding information
- Information on agencies that can provide HIV/AIDS technical assistance
- UNAIDS best practices

PRIORITY ACTIVITIES

- Update the technical reference material described in the project profile
- Train PVOs in the use of the KPC 2000+
- Produce a state-of-the-art paper titled Challenges for Private Voluntary Organizations in Addressing the Needs of Children Affected by HIV/AIDS

PROJECT MATERIALS AND TOOLS

- KPC 2000+, a comprehensive child survival knowledge, practice, and coverage survey tool (http://www.childsurvival.com/kpc2000/kp
- Technical reference material (http://www.coregroup.org/resources/ref-
- HIV/AIDS Virtual Resource Center for PVOs and NGOs available at http://www.childsurvival.com/vrc

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Use of the KPC 2000+ data collection tool
- Development and use of technical reference materials
- Reviewing applications for funding

CONTACT INFORMATION

Macro International:

Michel Pacque, Senior Child Survival Specialist (michel.c.pacque@orcmacro.com)

Tel: 301-572-0457

Leo Ryan, Project Director

(leo.j.ryan@macroint.com)

Tel: 301-572-0219

USAID/Washington:

Susan Youll (Syoull@usaid.gov)

Tel: 202-712-1444

PROJECT:

c2000.cfm)

erence.cfm)

Communities Responding to the HIV/AIDS Epidemic (CORE) Initiative

IMPLEMENTING ORGANIZATIONS:

Primary: CARE International

Grantees: World Council of Churches;

International Center for Research on Women;

International HIV/AIDS Alliance; Johns
Hopkins Bloomberg School of Public Health

Center for Communication Programs; Ponleur

Komar, Cambodia; local African and Southeast Asian CBOs and FBOs through the Small Grants Program

USAID FUNDING PERIOD:

January 2003-January 2008

USAID AMOUNT:

\$20,000,000 (a portion supports children and

families affected by HIV/AIDS)

PURPOSE

The mission of the CORE Initiative is to support an inspired, effective, and inclusive response to the causes and consequences of HIV/AIDS by strengthening the capacity of CBOs and FBOs worldwide. The main approach is to leverage existing efforts while catalyzing and encouraging new efforts through diverse and innovative partnerships in the areas of community-based prevention, stigma reduction, and care and support to people living with HIV/AIDS and their families,

particularly care and support for orphans and vulnerable children.

The Small Grants Program provides resources and organizational and technical capacity-building support to CBOs and FBOs in sub-Saharan Africa and Southeast Asia. Local organizations that demonstrate the ability to apply good practices and to implement activities that have been shown to achieve results in the fight against HIV/AIDS are funded and supported. Many of these activities focus on children and families affected by HIV/AIDS.

KEY ACCOMPLISHMENTS

To date, the CORE Initiative has completed the following:

- The Small Grants Program is in various stages in 10 countries, six in Africa and four in Asia. The grantees through the Program receive a maximum \$5,000 in support and are assisted with project management, implementation, capacity-building support, and technical assistance.
- In Uganda and Rwanda, funds have been received under track 1.5 of the President's Emergency Plan for AIDS Relief to focus on implementation and scale-up of orphans and vulnerable children programming. In Uganda, funds will also focus on capacitybuilding for the national response to orphans and vulnerable children.
- In Cambodia, CORE Initiative partner Ponleur Komar reaches more than 3,500 children in 29 villages in Bakan district with care, support, prevention, and mitigation services by building the capacity and commitment of the local community to provide locally appropriate care to children and families affected by HIV/AIDS.

PRIORITY ACTIVITIES

In Uganda, the CORE Initiative will support the capacity-building component of the national strategy for orphans and vulnerable children in partnership with the Ministry of Gender, Labor, and Social Development. A partnership with the Hope for African Children Initiative (HACI) will promote the scale-up of successful practices and interventions that involve orphans and vulnerable children and their communities. Implementation, including grants to local community-based implementing partners, began in July 2004. Also in Uganda, the implementing partner Lott Carey International will work through FBOs to expand and replicate income-generating programs to support children and families affected by HIV/AIDS.

Through a partnership with CARE/Rwanda, the Initiative is scaling up programs that focus on child-headed households, children, and families affected by HIV/AIDS to reduce community stigma and discrimination and increase the care, treatment, and support available for orphans, vulnerable children, women, and people living with AIDS.

In the coming year, five small-grants projects in Mozambique and seven in Lesotho, to name a few, will focus on stigma reduction, psychosocial support, and livelihood security for children and families affected by HIV/AIDS.

TECHNICAL ASSISTANCE

The Initiative provides expertise to other projects for orphans and vulnerable children in the following areas:

- Capacity building for local implementing partners
- Faith-based initiatives
- Community mobilization

Global

- Participatory monitoring and evaluation
- Behavior change communication and networking and exchange to support community level programming

CONTACT INFORMATION

Communities Responding to the HIV/AIDS Epidemic (CORE) Initiative 888 17th Street, NW Suite 310 Washington, DC 20008 (202) 861-2673

Fax: (202) 861-0398 info@coreinitiative.org

Kristin Kalla, Director kkalla@coreinitiative.org

Patricia Mechael, Project Manager pmechael@coreinitiative.org

CORE Initiative Web site: www.coreinitiative.org

USAID/Washington: Kate Crawford (kcrawford@usaid.gov) Jason Heffner (jheffner@afr-sd.org)

PROJECT:

Community REACH (Rapid and Effective Action Combating HIV/AIDS)

IMPLEMENTING ORGANIZATIONS:

Primary: Pact

Grantees: Futures Group and other non-

governmental organizations

USAID FUNDING PERIOD:

Primary: September 2001-September 2006 **Grantees:** September 2001-September 2011

USAID AMOUNT:

\$40,000,000 (ceiling for five-year leader cooperative agreement; a portion supports activities for orphans and vulnerable children)
\$80,000,000 (ceiling for associate cooperative agreements)

\$360,000 (FY2002, USAID/Washington) \$800,000 (FY2003, USAID/Washington) \$400,000 (FY2004, USAID/Washington)

PURPOSE

Pact's Community REACH Leader Award is a five-year program designed to facilitate the efficient flow of grant funds to organizations playing a role in the fight against HIV/AIDS, including PVOs, regional and local NGOs, universities, and FBOs. The program's activities will contribute to USAID's goal of "increased use of improved, effective, and sustainable responses to reduce HIV transmission and to mitigate the impact of the HIV/AIDS pandemic." In addition, under the Associate Award mechanism, USAID missions and bureaus may make additional funding available to Community REACH to develop NGO grantmaking programs during the next 10 years.

Community REACH grant awards start at \$100,000 for periods of up to three years in (1) primary prevention and education, (2) voluntary counseling and testing, and (3) care and support for those living with and affected by HIV/AIDS. The project focuses on grants supporting activities that have a direct impact on specific areas, such as:

- Expanding behavior change interventions to prevent and mitigate the impact of HIV/AIDS
- Preventing and managing sexually transmitted infections

- Preventing and managing tuberculosis and other opportunistic diseases related to HIV/AIDS
- Reducing mother-to-child transmission of HIV/AIDS
- Increasing the capacity of public and private sector organizations, particularly at the home and community levels, to support persons living with HIV/AIDS and their caregivers, families, and survivors
- Caring for children infected or affected by HIV/AIDS
- Increasing the quality, availability, and use of evaluation and surveillance information

KEY ACCOMPLISHMENTS

- Grant awards for orphans and vulnerable children-focused activities: Four grants were awarded in June 2002 to support orphans and other vulnerable children activities. In addition, Community REACH's monitoring and evaluation team has designed a research protocol for orphans and vulnerable children research at two sites. Descriptions of the four projects supported by these grants – Hiwot HIV/AIDS Prevention Care and Support Organization (Ethiopia), International Community for the Relief of Starvation and Suffering (Kenya), CARE (Rwanda), and Project Concern International (PCI) (Zambia) – are presented in the Africa section of this document.
- Orphans and vulnerable children research: Community REACH is undertaking research to determine the effectiveness of selected interventions targeting orphans and vulnerable children aged 6 to 19. This research is being carried out in collaboration with two

- of its grantees, CARE/Rwanda and PCI/Zambia, over a two-year period from June 2003 to May 2005. A secondary project objective is to build the capacity of CARE/Rwanda and PCI/Zambia in the areas of monitoring, evaluation, and research.
- Development of orphans and vulnerable children costing guidelines: The Community REACH project supports FHI/IMPACT in the development of costing guidelines by providing feedback on the development of guidelines and cost-capturing tools for orphans and vulnerable children interventions. Community REACH staff pilot-tested the guidelines in February 2004 in Zambia with Community REACH grantee PCI. A final version of the guidelines should be available in July 2004.
- Improving support for orphans and vulnerable children through focused study and research: In May 2004, Community REACH awarded four grants to NGOs in India, South Africa, Tanzania, and Uganda. Funded activities will focus on improving support to orphans and vulnerable children through focused study and research that may include orphan migration, older caregivers, care and support services, and foster care for orphans.

PRIORITY ACTIVITIES

 Award NGO research grants, provide technical assistance, and provide monitoring and evaluation support

PROJECT MATERIALS AND TOOLS

- Related Web sites: www.pactworld.org/reach
- Survival is the First Freedom: Applying Democracy and Governance Approaches to HIV/AIDS Work. Toolkit and facilitator's guide (AIDS Corps, Pact's HIV/AIDS Initiative)

TECHNICAL ASSISTANCE

The project can provide expertise to projects for other orphans and vulnerable children in the following areas:

- Grants management
- Institutional capacity building

- Development of and training on multisector initiatives
- Technical assistance in monitoring and evaluation and program effectiveness research

CONTACT INFORMATION

Pact Community REACH: Polly Mott, Program Director (reachgrants@pacthq.org) Tel: 202-466-5666 1200 18th Street, NW Suite 350 Washington, DC 20036

USAID/Washington: Ron MacInnis (rmacinnis@usaid.gov)

PROJECT:

Global Technical Support to Mobilize, Enhance, and Scale Up Comprehensive Community Responses for Orphans and Vulnerable Children Affected by HIV/AIDS

IMPLEMENTING ORGANIZATIONS:

Primary: International HIV/AIDS Alliance **Grantees:** Alliance partners and other

organizations

USAID FUNDING PERIOD:

October 2001-June 2004

USAID AMOUNT:

FY 2002: \$340,000 FY 2003: \$250,000 FY 2004: \$295,000

PURPOSE

Through this work, the International HIV/AIDS Alliance aims to provide high-quality technical support to partners and other organizations supporting orphans and vulnerable children living in a world with HIV/AIDS. To this end, Alliance staff work with a broad range of partners, sharing lessons within and across regions about care and support for children affected by the epidemic.

The Alliance's work aims to:

- Provide technical support in response to country and regional program priorities through research and by identifying technical support methods, tools, and techniques
- Contribute to identifying and strengthening other technical support resource providers for Alliance and field partners, including individuals, organizations, and networks

- Identify and share relevant information and resources
- Research and develop appropriate interregional technical support products
- Influence developments in global HIV/AIDS policy that support child-centered HIV/AIDS programming to complement USAID-supported (but not USAID-funded) activities
- Assist in raising funds for specific technical support projects and activities
- Raise awareness of the role played by older people in care and support of orphans and vulnerable children

A major component of the activity continues to be the "Building Blocks" project launched by the Alliance with the support of the USAID Africa Bureau and the Swedish International Development Agency in 2001. Building Blocks has two elements:

- "Building Blocks" Africa-wide briefing notes: This set of seven short, practical briefing notes is intended to increase the effectiveness of communities and local organizations to support orphans and vulnerable children. They are primarily for use by practitioners at the subnational level in sub-Saharan Africa and are available in English, French, and Portuguese. They cover seven topics, the original six of health and nutrition, education, psychosocial support, social inclusion, and economic strengthening, plus an overview, and a new briefing note on older caregivers developed in collaboration with HelpAge International.
- "Building Blocks in Practice": These are tools to improve the development of community-based care and support for orphans and vulnerable children. They are based on the techniques of "participatory learn-

ing in action." The tools support all seven of the topics covered in the briefing notes.

KEY ACCOMPLISHMENTS

- Developed and field-tested "Building Blocks in Practice"
- Collaborated with HelpAge International to hold a regional meeting on supporting older caregivers of orphans and vulnerable children, which led to the development of the new "Building Blocks" briefing note on older caregivers
- Published the report *Forgotten Families* with HelpAge International.
- Developed the resource A Parrot on Your Shoulder: A Guide for People Starting to Work With Orphans and Vulnerable Children, one of a series of resources that the Alliance is developing to encourage child participation in HIV/AIDS programming
- With Family Health International, initiated the development of an orphans and vulnerable children toolkit, an electronic annotated bibliographic database (Web site and CD-ROM) of resources on children and HIV/AIDS modeled after the Alliance's successful NGO support toolkit and now in its final stages
- Produced a Web site article on children's participation in HIV/AIDS programming (see www.aidsalliance.org)

PRIORITY ACTIVITIES

 Launch and continue development of the orphans and vulnerable children toolkit CD-ROM and online database

- Direct technical support for providing antiretroviral medications to children in resource-poor settings
- Campaign for child-friendly antiretroviral formulations
- Develop materials to support younger children (under age 5) in families affected by HIV/AIDS
- Adapt training on succession planning and "memory book" approaches for Asian, Francophone, and possibly Portuguesespeaking users
- Develop another Asian guide on involving older people in care for orphans and vulnerable children.
- Develop practical guides for an Asian audience (printed in Thai, Khmer, and Hindi, with an English edition available in electronic format) on health and nutrition; livelihoods and economic strengthening, education and training, care and psychosocial support; social inclusion and protection, plus an overview

PROJECT MATERIALS AND TOOLS

The following materials are available electronically through the Alliance's Web site (www.aidsalliance.org). Alternatively, hard copies can be ordered by e-mail (publications@aidsalliance.org). Building Blocks materials are available on the Web site www.aidsalliance.org/building_blocks.htm.

 Building Blocks Africa-wide briefing notes, available in English, French, and Portuguese

- Expanding Community-Based Support for Orphans and Vulnerable Children
- Children's Participation in HIV/AIDS Programming (article)
- Forgotten Families Older People As Carers
 For Orphans And Vulnerable Children
 (International HIV/AIDS Alliance and
 HelpAge International)

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in training and networking in the following areas:

- Community mobilization
- Positive involvement of people living with HIV
- Care and support
- Organizational and institutional development
- Targeted prevention
- Monitoring and evaluation

CONTACT INFORMATION

International HIV/AIDS Alliance: Kate Harrison, Program Officer: Children Tel: +44-1273-718956, Fax: +44-1273-718901 kharrison@aidsalliance.org www.aidsalliance.org

USAID/Washington:
Ron MacInnis (rmacInnis@usaid.gov)
Victor Barbiero (vbarbiero@usaid.gov)

PROJECT:

Horizons

IMPLEMENTING ORGANIZATIONS:

Primary: Population Council

Grantees: International Center for Research on Women; International HIV/AIDS Alliance;

PATH; Tulane University; Family Health International (FHI); Johns Hopkins University

USAID FUNDING PERIOD:

August 1997 - July 2007

USAID AMOUNT:

\$65,000,000 (ceiling for five-year cooperative agreement; a portion supports children and

families affected by HIV/AIDS)

PURPOSE

Horizons is a team of U.S.-based and international organizations working to prevent the spread of HIV/AIDS and to mitigate its impact on individuals and communities by designing, implementing, and evaluating innovative service delivery strategies. Horizons implements field-based applied operations research in developing countries. The program identifies effective HIV/AIDS interventions and policies; tests prevention, care, support, and service delivery strategies; and disseminates and promotes use of findings. A major goal is to identify and develop successful projects that can be replicated and scaled up, where relevant. Horizons also focuses on capacity building by providing support and training to colleagues in developing nations. The program helps local organizations conduct operations research and develop mechanisms to disseminate and use best practices that emerge from operations research.

KEY ACCOMPLISHMENTS

Three operations research studies on children affected by HIV/AIDS have been completed to date, and more are underway. Descriptions of the three completed studies follow:

Uganda: Study on the impact of succession planning and orphan support on orphans and vulnerable children. This quasi-experimental study compared the effects of two different intervention approaches, succession planning and orphan support, on orphans and vulnerable children and on family members to a comparison group not exposed to either program. Data were collected annually over a two-year period, at baseline and on two rounds after the interventions were underway. This study yielded findings on the strengths and limitations of both approaches. Horizons collaborated on this study with Plan/Uganda and Makerere University.

■ Zambia: Study on mobilizing young people for the care and support of people living with HIV and AIDS. This quasi-experimental study compared outcomes of two different youth HIV/AIDS training programs, one of which included a care and support component. Recognition of the additional needs of orphans and vulnerable children led to the expansion of the training to identify and provide support for orphans and vulnerable children, including liaison with schools and health facilities and organizing recreational activities. The trained youth caregivers included males and females aged 13 to 25, many of whom were themselves orphans. Despite initial concerns about gender roles, similar numbers of male and female caregivers reported that they had provided counseling, housework, clinic referrals, school consultations, and bathing, and recreational activities. The

study demonstrated that young people can be a valuable resource in the care of orphans and other vulnerable children affected by HIV/AIDS. The study was conducted in collaboration with Care International and Family Health Trust.

■ South Africa: Study of challenges faced by households in caring for orphans and vulnerable children. Horizons provided technical assistance in research methods and monitoring and evaluation to the Nelson Mandela Children's Fund to address the socioeconomic needs of orphans and vulnerable children in eight rural study sites in South Africa. A household survey was conducted among 29,000 members of nearly 5,000 households to identify ways to strengthen the socioeconomic capacity of households to care for and support for orphans and vulnerable children. Survey responses indicated the widespread extent of poverty and vulnerability, especially among households headed by females, elderly people, and children. The study identified possible responses needed from NGOs, CBOs, communities, and governments.

PRIORITY ACTIVITIES

Follow through on new and ongoing operations research studies of programmatic relevance to children affected by HIV/AIDS, including:

Rwanda: Operations research to determine the impact of a home visitation and mentoring program on child-headed households, with a focus on psychosocial effects on youth. Horizons will be collaborating with World Vision and the Rwanda School of Public Health. Status: Baseline data collection underway.

- Zimbabwe: Study of psychosocial issues affecting adolescent orphans and vulnerable children and the influence of existing programs and community efforts to address these effects. Status: Data collection completed, analysis underway.
- Global: Horizons, USAID, FHI, and UNICEF are developing a practical guidance tool aimed at navigating the ethical dilemmas faced by HIV/AIDS researchers and program managers working with children and adolescents. Status: First draft completed.
- Zambia: Building on an earlier study that focused on training and mobilizing young people to provide care and support to people living with HIV/AIDS and vulnerable children in their households, Horizons and partners are implementing a program to mobilize local resources and promote local management of the initiative. A particular focus is to further strengthen local partnerships and expand network linkages in order to promote community ownership and sustainability. Status: Underway.
- Uganda: Operations research on bringing HIV/AIDS and agriculture sectors together in a participatory process to enhance food security and nutrition in AIDS-affected households (adults and children). Status: Baseline data collection underway.

PROJECT MATERIALS AND TOOLS

Selected research instruments are available through AIDSQuest, an HIV/AIDS survey library, on the Horizons Web site: http://www.pop-council.org/horizons/AIDSquest/index.html.

TECHNICAL ASSISTANCE

The project can provide expertise to other projects for orphans and vulnerable children in the following areas:

- Sample instruments for research
- Feedback on study designs

CONTACT INFORMATION

Horizons: Andy Fisher, Project Director (afisher@pcdc.org) Katie Schenk (kschenk@pcdc.org)
Web site: http://www.popcouncil.org/horizons

USAID/Washington: Glenn Post (gpost@usaid.gov)

PROJECT:

Implementing AIDS Prevention and Care (IMPACT)

IMPLEMENTING ORGANIZATION:

Family Health International (FHI)

USAID FUNDING PERIOD:

2001-2004

USAID AMOUNT:

\$1,650,000

PURPOSE

FHI/IMPACT provides technical and programmatic assistance to global and regional initiatives, government ministries, PVOs, NGOs, FBOs and CBOs to design and implement strategic responses, mobilize communities, and leverage resources benefiting the well-being of orphans and other vulnerable children and their families. This includes the integration of services for children within comprehensive HIV/AIDS prevention, care, support, and treatment programs such as home-based care and prevention of mother-to-child-transmission. FHI/IMPACT provides technical support that promotes a continuum of prevention and care for orphans, other vulnerable children, and families within four linked domains - clinical care (medical and nursing), psychosocial support, socioeconomic support, and the protection of human rights. FHI/IMPACT works with partners to see that these four domains are implemented in a mutually reinforcing manner, thus providing for all needs of children and families.

Undertaken in collaboration with other organizations, the following activities strengthen the linkages between programs for orphans and other vulnerable children and HIV/AIDS programs and are also used to document and exchange skills and experiences:

- Technical and coordination support in close collaboration with key partners, including UNICEF, to carry out a series of regional workshops in Africa to build the capacity of national stakeholders to scale up their responses through five globally agreed upon areas participatory situation analysis, national coordinating mechanisms, strategic action plans, policy and legislation, and monitoring and evaluation.
- Technical support to address children within the continuum of HIV/AIDS prevention, care, support, and treatment activities, and assist children living with HIV/AIDS and other life-threatening illnesses. One such activity is the development of a palliative care curriculum for children with HIV and other life-threatening illnesses in collabora-

tion with the Foundation for Hospices in sub-Saharan Africa.

- Development of a database of tools for those working in orphans and vulnerable children programming in partnership with the International HIV/AIDS Alliance. The database consists of various training manuals and guides covering specific technical areas related to orphans and vulnerable children programming and monitoring and evaluation; activity documents; summary reports and articles; and examples of grant-reporting forms. More information is available at <www.ovcsupport.net>.
- Collaboration with the Regional Psychosocial Support Initiative (REPSSI) to strengthen psychosocial support for orphans and vulnerable children.
- Organizational exchanges to share experiences and strengths.
- Collaboration with the Community REACH project to design and field-test costing methodologies for orphans and vulnerable children programs.

KEY ACCOMPLISHMENTS

Working closely with UNICEF, USAID, UNAIDS, and Save the Children, FHI cosponsored three regional workshops that encouraged the creation and strengthening of regional and national strategies in support of orphans and other vulnerable children throughout Africa. The three conferences were Strengthening National Responses: Southern Africa Workshop on Orphans and Vulnerable Children (Maseru, Lesotho November 2003); the Eastern Africa Regional OVC Skills Building Workshop (Kampala, Uganda April 2004); and the

Western and Central Africa OVC Regional Skills Building Workshop (Dakar, Senegal July, 2004).

FHI staff were key contributors to the following meetings:

- Partners meeting, Geneva, Switzerland, October 2003
- USAID technical consultation on orphans and vulnerable children, November 2003
- The President's Emergency Plan for AIDS Relief field meeting, Johannesburg, June 2004
- USAID "state of the art" (SOTA) meeting, June 2004
- National Institute of Mental Health psychosocial support research consultation, May 2004
- Tanzania strategic forum on economic and livelihood strengthening of households and communities to support orphans and vulnerable children and their caregivers

PRIORITY ACTIVITIES

The following program tools are in production and are expected to be available by the end of 2004:

- Ethical Guidelines for Information Gathering from Children and Adolescents:

 Participatory Situation Analysis Guide
- Orphans and other vulnerable children program-level monitoring and evaluating guidebook

 Costing tools for orphans and vulnerable children projects

PROJECT MATERIALS AND TOOLS

- Orphans and Vulnerable Children HIV/AIDS Prevention and Care in Resource-Constrained Settings: A Handbook for the Design and Management of Programs
- First and Second National Conferences on Orphans and Other Vulnerable Children, Namibia, Summary Report (2001 and 2002)
- Food Insecurity, HIV/AIDS and Children (Zambia, 2002)
- Quantitative and qualitative orphans and vulnerable children monitoring and evaluation instruments
- Reports on the three regional OVC workshops and conferences
- Review of measuring the costs of community-based orphans and vulnerable children programs report
- Voluntary Counseling and Testing Counseling Training Manual
- Voluntary counseling and testing quality assurance tools

- Evaluating Programs for HIV/AIDS
 Prevention and Care in Developing
 Countries: A Handbook for Program
 Managers and Decision Makers
- Strategic framework for orphans and vulnerable children, preventing mother-tochild transmission, HIV care and support, tuberculosis, and voluntary counseling and testing for HIV
- Behavioral Surveillance Surveys: Guidelines for Repeated Behavioral Surveys in Populations at Risk of HIV
- Meeting behavioral data collection needs
- Low-prevalence strategy
- State-of-the-art technical summaries for HIV/AIDS prevention

CONTACT INFORMATION

Family Health International/Virginia: Suzi Peel (speel@fhi.org) Tel: +1 703-516-9779; Fax: +1 703-516-9781 Web site: http://www.fhi.org

USAID/Washington: Kate Crawford (kacrawford@usaid.gov)

PROJECT:

Peace Corps Program-Related Work With HIV Orphans and Vulnerable Children

IMPLEMENTING ORGANIZATION:

Peace Corps

USAID FUNDING PERIOD:

Ongoing

USAID AMOUNT:

\$1,100,000 from Displaced Children and Orphans Fund (DCOF), FY 1993-2004 \$2,900,000 from USAID Bureau for Global Health, Office of HIV/AIDS (includes \$500,000 in FY2003)

\$50,000 from USAID/Jamaica for Eastern Caribbean

\$50,000 from USAID/Guyana for Peace Corps/Guyana

(portions of above funding support children and families affected by HIV/AIDS)

PURPOSE

The Peace Corps has received funds for training its volunteers and host-country counterparts in HIV/AIDS prevention and education at all Peace Corps posts in Africa and at most of its other posts worldwide. Peace Corps volunteers attempt to involve communities in establishing long-term means for addressing the needs of vulnerable youth and to involve community leaders in identifying measures to assist at-risk youth and in mobilizing local resources to support those measures. Peace Corps volunteers implement programming for at-risk youth in four basic ways:

- Directly engaging at-risk youth
- Developing skills for youth service providers and trainers
- Strengthening the capacities of youth service institutions
- Promoting a supportive environment for marginalized youth within families and communities

Youth development efforts in Peace Corps projects reach in-school and out-of-school youth and cross over to all sectors. Out-of-school youth include children affected by HIV/AIDS, street children, and children with dis-

abilities. Peace Corps posts conducting activities for orphans and vulnerable children in FY 2003 included:

- Africa: Benin, Burkina Faso, Cameroon, the Gambia, Guinea, Kenya, Lesotho, Madagascar, Malawi, Namibia, South Africa, Tanzania, Uganda
- Eastern Europe/Eurasia: Bulgaria, Moldova, Romania, Turkmenistan, Ukraine, Uzbekistan
- Asia and Pacific: Nepal, Samoa, Tonga, Vanuatu
- Latin America/Caribbean: Eastern
 Caribbean, Guyana, Jamaica, Nicaragua,
 Paraguay, Suriname

Small-project assistance community grant activities in FY 2003 supported refurbishments to orphanages, clinics, classrooms, and equipment for treating orphans and vulnerable children with handicaps, as well as health education events. This past year saw growth in activity centers for job and employment skills training for children affected by HIV/AIDS. Also included were local training-of-trainers workshops for youth health educators and peer counselors.

KEY ACCOMPLISHMENTS

- 54% of posts in Africa and 30% of posts in the Europe, Mediterranean, Asia, Inter-America, and Pacific regions have reported working with orphans and other vulnerable children.
- 25,276 orphans and other vulnerable children have received support in peer education training, HIV/AIDS prevention education, leadership and empowerment of girls, community gardening, and vocational skills. The actual number of orphans and vulnerable children reached may be higher, because some posts did not provide this information.
- Small-project assistance community grants in 26 Peace Corps posts directly benefited 7,190 at-risk youth, orphans, and handicapped youth, and enabled another 3,490 youth to receive capacity-building training, including peer counseling skills, through 58 separate activities.
- Support was provided to 320 community organizations and 2,640 service providers for local community organizations incorporating HIV/AIDS messages, income generation, home-based care options for people living with HIV/AIDS, and AIDS awareness campaigns.
- Training was given to 5,700 adults (service providers, project managers, and community and religious leaders) who directly or indirectly work with orphans and vulnerable children. Training included integration of HIV/AIDS activities into programs, project design and evaluation training, awareness and peer education, young women's leadership training, and HIV/AIDS prevention in the classroom through teaching English as a foreign language.

The use of the Peace Corps Life Skills Manual increased greatly, with posts reporting that volunteers find the interactive activities useful and engaging.

PRIORITY ACTIVITIES

- Focus on community-level activities that establish orphan care facilities, promote foster care, assist linkages to extended families, and introduce income-generation possibilities
- Incorporate programming and training about work with orphans and vulnerable children into HIV/AIDS workshops and postproject plans as appropriate
- Expand scope and level of HIV/AIDS-related activities through other Peace Corps project areas, such as agriculture, income generation, environment, and community health support mechanisms
- Expand the use of the Life Skills Manual in non-health sectors, building on recent successes in Malawi, Senegal, and Zambia

PROJECT MATERIALS AND TOOLS

- Life Skills Manual (available online in English, Spanish, French, Swahili, Russian, and Haitian Creole
- HIV/AIDS: Integrating Prevention Into Your Sector (idea book)
- Beyond the Classroom: Empowering Girls (idea book)
- Working with Youth: Approaches for Volunteers, a manual for fieldworkers
- HIV/AIDS fact sheets (two- to three-page documents giving an overview of the most

important issues surrounding such HIV/AIDS topics as basic facts, gender, the Uganda model, mother-to-child transmission, nutrition, social marketing, stigma and discrimination, and voluntary counseling and testing)

gram managers or through Peace Corps agency partners.

routed through in-country Peace Corps pro-

TECHNICAL ASSISTANCE

The project can provide expertise to other orphans and vulnerable children projects in training sessions for staff, volunteers, and local host-country national counterparts and in organizing and facilitating training at the community, regional, and national levels. Requests for a training workshop or to participate in planned training events should be

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USAID/Washington:

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PROJECT:

POLICY Project

IMPLEMENTING ORGANIZATIONS:

Primary: Futures Group

Grantees: Centre for Development and Population Activities (CEDPA); Research

Triangle Institute (RTI)

USAID FUNDING PERIOD:

July 2000-July 2005

USAID AMOUNT (Global/regional/country-specific activities focusing on children affected by HIV/AIDS):

Total obligations to date: \$660,000 Office of HIV/AIDS (OHA) core funds:

\$100,000 (FY 2002)

OHA core agreement (Uganda orphans and vulnerable children): \$360,000 (FY 2002 funds) Africa Bureau: \$100,000 (FY2003); \$50,000 (FY

2001 funds)

Kenya orphans and vulnerable children field

support: \$100,000 (FY 2001 funds)

PURPOSE

The primary mission of the POLICY Project is to develop policies and plans that promote and sustain access to high-quality family planning and health services. The Project implements activities in 30 countries throughout USAID's Africa, Asia/Near East, Eastern Europe/Eurasia, and Latin America/Caribbean regions. As part of its mission, the Project works to increase high-level support for effective HIV/AIDS policies, programs, and services, including strategic planning and financing of HIV/AIDS services. The project achieves these objectives in

part by acquiring accurate, up-to-date information on the spectrum of HIV/AIDS issues, which include the effects of HIV/AIDS on orphans and vulnerable children and their subsequent needs. The Project gathers and disseminates data on the projections of the number of orphans and vulnerable children and the effect of HIV/AIDS on their nutrition, health, and school attendance. Such information supports advocacy efforts to reform policies and build public support for programs to benefit orphans and vulnerable children. The Project also provides technical assistance to

government and civil society organizations in developing policies and plans to address a range of HIV/AIDS issues, including orphans and vulnerable children.

KEY ACCOMPLISHMENTS

In the past year, the POLICY Project assisted government ministries and 30 FBOs through policy development activities, dissemination of information on orphans and vulnerable children policy gaps, updates of models that estimate the number of orphans and vulnerable children, and implementation of a small grants program.

During the year, the Project:

- Assisted Nigeria's Federal Ministry of Women's Affairs and Youth Development and other collaborating agencies in drafting and revising Nigeria's plan of action on orphans and vulnerable children. In collaboration with other agencies, the Project organized and facilitated the stakeholders' meeting to adopt the plan.
- Reviewed and finalized Kenya's Orphans and Vulnerable Children Program Guidelines in collaboration with Kenya's orphans and vulnerable children task force. The guidelines were developed to assist in programming and enhance coordination of multisector approaches to orphans and vulnerable children interventions.
- Assisted the Interreligious Council of Uganda in planning, implementing, and monitoring a small grants program to strengthen the role of FBOs in meeting the needs of orphans and vulnerable children.
- In conjunction with the ARCH project and Uganda's Ministry of Gender, Labour and Social Development, conducted an indepth analysis of laws, policies, and institutional arrangements identified in Uganda's

- orphans and vulnerable children situation analysis. The study made recommendations for legislative and policy changes, including restructuring of the National Children's Council. These recommendations were incorporated into a draft national orphans and vulnerable children policy.
- Developed a paper reviewing policy gaps in addressing issues that affect orphans and vulnerable children.
- Updated the AIDS Impact Model to calculate maternal, paternal, dual, and total orphans due to AIDS and non-AIDS causes and provide options for displaying results by age. The GOALS Model has been used in Kenya, Lesotho, and South Africa to estimate the costs of a fully funded orphans and vulnerable children program. The Project also initiated background research on studies related to the impact of HIV/AIDS on orphans and vulnerable children.

PRIORITY ACTIVITIES

- In collaboration with Kenya's National AIDS Control Council, UNICEF/Kenya, the Ministry of Home Affairs, and the Orphans and Vulnerable Children Task Force, carry out a participatory orphans and vulnerable children situation analysis in Kenya
- In collaboration with the Ugandan government and other collaborating agencies, analyze laws, policies, and institutional frameworks that exist and that can be strengthened with regard to orphans and vulnerable children and their caregivers in order to make recommendations for a stronger legal policy framework for this population in Uganda
- Develop an operational plan for addressing orphans and vulnerable children issues in selected countries in Africa, using a paper

on orphans and vulnerable children policy gaps

- Prepare desk reviews compiling all currently available information on orphans and vulnerable children in African countries and including narrative descriptions of the situation in each country and matrices that indicate the number of children receiving specific types of support from specific organizations
- Conduct a socioeconomic study of the impact of orphans and vulnerable children in Cambodia

PROJECT MATERIALS AND TOOLS

The following documents and software are available on the POLICY Project Web site (www.policyproject.com):

- Policies for Orphans and Vulnerable
 Children: A Framework for Moving Forward
 (available in English and French)
- Spectrum, a computer model containing modules for a range of projections and cost comparisons.

TECHNICAL ASSISTANCE

The POLICY Project can provide expertise to other projects in the following areas:

- Linking stigma and discrimination with HIV prevention and care for orphans and vulnerable children
- Developing monitoring and evaluation systems and indicators for orphans and vulnerable children issues and activities
- Data analysis, modeling, and projections
- Policy development, policy dialogue, and advocacy
- Capacity building

CONTACT INFORMATION

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PROJECT:

Population, Health and Nutrition Information (PHNI) Project

IMPLEMENTING ORGANIZATIONS:

Primary: Jorge Scientific Corporation **Grantees:** Futures Group; John Snow Inc.

USAID FUNDING PERIOD:

June 2003-May 2005

USAID AMOUNT:

\$337,895 (Global/regional activities focusing on children affected by HIV/AIDS)

PURPOSE

The PHNI Project provides analysis, data management, information technology, and communication services to USAID's Bureau for Global Health and other USAID offices and development partners. The Project's mission is to provide information on health situations and trends, program needs, activities, outcomes, and costs, so that policymakers and program managers can make informed decisions about global health issues. For orphans and vulnerable children, PHNI reports on trends in the numbers of orphans and programmatic approaches to addressing the needs of orphans. The project also publishes guidance for conducting orphan and vulnerable children situation analyses and conducts research on orphan demographics.

KEY ACCOMPLISHMENTS

The Project produced and disseminated:

- Conducting a Situation Analysis of Orphans and Vulnerable Children Affected by HIV/AIDS (February 2004)
- Sub-National Distribution and Situation of Orphans: An Analysis of the President's Emergency Plan for AIDS Relief Focus Countries (March 2004)
- The President's Emergency Plan for AIDS Relief: U.S. Five-Year Global HIV/AIDS Strategy (February 2004)

The Project also completed an analysis of secondary data relevant to the health and demographics of orphans and vulnerable children in the 14 countries prioritized in the President's Emergency Plan for AIDS Relief.

PRIORITY ACTIVITIES

- Publish and distribute Children on the Brink 2004
- Publish and distribute *USAID Project Profiles:* Children Affected by HIV/AIDS (4th edition)

PROJECT MATERIALS AND TOOLS

- Conducting a Situation Analysis of Orphans and Vulnerable Children Affected by HIV/AIDS (February 2004)
- Sub-National Distribution and Situation of Orphans: An Analysis of the President's Emergency Plan for AIDS Relief Focus Countries (March 2004)
- The President's Emergency Plan for AIDS Relief: U.S. Five-Year Global HIV/AIDS Strategy (February 2004)
- USAID Project Profiles: Children Affected by HIV/AIDS (4th edition, October 2004)

Global

TECHNICAL ASSISTANCE

The project can provide expertise to other projects in the following areas:

- Document development and dissemination
- Research and analysis
- Web site design, maintenance, and content management
- Database and application development
- Workshop and meeting planning and implementation

CONTACT INFORMATION

PHNI Project:

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USAID/Washington:

Victor Barbiero (vbarbiero@usaid.gov); Celeste Carr (ccarr@usaid.gov)

PROJECT:

Support to Orphans and Vulnerable Children Affected by HIV

IMPLEMENTING ORGANIZATIONS:

Primary: Catholic Relief Services
Grantees: Ruche of Port Au Prince, Ruche of
Les Cayes, Ruche of Je re Mie (Haiti);
Archdiocese of Mombasa (Kenya); CARITAS

Rwanda (Rwanda); Diocese of Songea,

Diocese of Njombe, Diocese of Dar es Salaam - PASADA (Tanzania); Diocese of Ndola, Diocese of Mongu, Diocese of Solwezi (Zambia)

USAID FUNDING PERIOD:

February 2004-February 2009

USAID AMOUNT:

\$6,950,882.87

PURPOSE

To improve the quality of life for 57,000 orphans and vulnerable children affected by HIV/AIDS in Haiti, Kenya, Rwanda, Tanzania, and Zambia

KEY ACCOMPLISHMENTS

Project recently began.

PRIORITY ACTIVITIES

- Baseline assessments
- Recruitment of staff
- Capacity building of CBOs

■ Monitoring systems in place

TECHNICAL ASSISTANCE

- Monitoring and evaluation
- Home-based care initiatives
- Vocational training

CONTACT INFORMATION

Project:

Leela Mulukutla (leelam@crsmumbai.org)

USAID/Washington:

Victor Barbiero (vbarbiero@usaid.gov)

PROJECT:

Synergy

IMPLEMENTING ORGANIZATION:

Social & Scientific Systems, Inc.

USAID FUNDING PERIOD:

1999-2005

USAID AMOUNT:

\$690,000

PURPOSE

The Synergy Project is a performance-based contract that achieves results by helping USAID missions and bureaus design, document, and learn from international HIV/AIDS programs implemented by USAID cooperating agencies and other partners. Specifically, Synergy provides state-of-the-art tools, materials, and technical support to missions and bureaus; enhances and facilitates management of USAID HIV/AIDS procurements as a portfolio for the Office of HIV/AIDS of USAID's Bureau for Global Health; and increases the efficiency and cost-effectiveness of international HIV/AIDS programs. For orphans and vulnerable children, Synergy monitors, documents, and reports on trends in the numbers of orphans and program approaches, and facilitates and documents strategic responses.

KEY ACCOMPLISHMENTS

- Published *Children on the Brink 2000: An Executive Summary*
- Published Children on the Brink 2002
- Launched and managed the Children Affected by AIDS (CABA) ListServ
- Published two congressional reports on orphans and vulnerable children and mother-to-child transmission
- Organized town hall meeting on education and children affected by HIV/AIDS
- Supported town hall meeting on orphans and vulnerable children in India

- Disseminated the report Orphans and Vulnerable Children in India: Understanding the Context and the Response
- Published USAID Project Profiles: Children Affected by HIV/AIDS, 1st, 2nd, and 3rd editions
- Published report A Family Is for a Lifetime

PRIORITY ACTIVITIES

 Manage the Children Affected by HIV/AIDS (CABA) Listserv

PROJECT MATERIALS AND TOOLS

- Programmatic and financial database
- Children Affected by HIV/AIDS (CABA) Listserv
- Documents: Children on the Brink 2002; USAID Project Profiles: Children Affected by HIV/AIDS, 3rd edition; A Family Is for a Lifetime

TECHNICAL ASSISTANCE

The project can provide expertise to other orphans and vulnerable children projects in the following areas:

- Listserv and Web site implementation and management
- Document development and dissemination
- Information dissemination

Global

- Assessment and quantification
- Strategic planning
- Program design
- Performance monitoring, evaluation, strategic information
- Workshop and meeting planning and implementation

CONTACT INFORMATION

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PROJECT:

YouthNet

IMPLEMENTING ORGANIZATIONS:

Primary: Family Health International (FHI)
Grantees: CARE USA; Deloitte Touche
Tohmatsu Emerging Markets, Ltd.; Research
Triangle Institute International; Margaret

Sanger Center International

USAID FUNDING PERIOD:

2002-2004

USAID AMOUNT:

\$200,000

PURPOSE

YouthNet is a USAID-funded global project awarded to Family Health International (FHI) in October 2001 to improve reproductive health and prevent the spread of HIV/AIDS among young people aged 10 to 24. It is a collaboration with young people but also includes the energy, insight, and experience of parents, schoolteachers, employers, policymakers, the media, health professionals, NGOs, religious and community leaders, and youth networks.

YouthNet's orphans and vulnerable children activities focus on:

Identifying and documenting programs and recommendations for orphans and vulnerable children projects involving adolescents affected by HIV/AIDS in HIV prevention, care, and support, and reproductive health Considering the situation and particular needs of adolescents affected by HIV/AIDS in research implementation efforts

KEY ACCOMPLISHMENTS

Key accomplishments included identifying reproductive health and HIV prevention, care, and support programs that involve adolescents affected by HIV/AIDS and preparing detailed descriptions of these programs.

PRIORITY ACTIVITIES

- Continue to carry out analyses to identify orphans and vulnerable children programs that involve adolescents who are affected by HIV/AIDS in reproductive health and HIV prevention, care, and support
- Prepare and disseminate a paper describing these programs

- Develop and promote guidelines for responding to the needs and involvement of adolescents affected by HIV/AIDS in reproductive health and HIV prevention, care, and support programs in orphans and vulnerable children projects, based on lessons learned and an assessment of approaches, reach, existing tools, and needs of youth-serving organizations
- Provide technical support to orphans and vulnerable children programs that wish to apply these guidelines
- Consider the specific needs of orphans and vulnerable children when developing other program and research agendas (e.g., youth participation, sexual coercion, family life education, youth-friendly services) in order to raise the visibility of the needs of different segments of the orphan and vulnerable adolescent population
- Work with international and national groups (including policymakers, service providers, and youth-serving organizations) that support and/or provide health and social services for orphans and vulnerable children in order to develop appropriate interventions for adolescents affected by HIV/AIDS by addressing such issues as risk identification, risk stratification, and planning according to a comprehensive framework that transfers lessons learned from different program areas

PROJECT MATERIALS AND TOOLS

Before the end of 2004 YouthNet will publish an issues paper addressing issues specific to children and youth affected by HIV/AIDS. This will be followed by the development of guidelines for responding to the needs and involvement of adolescents affected by HIV/AIDS in reproductive health and HIV prevention, care, and support in orphan and vulnerable chil-

dren programs. It will also identify and disseminate relevant tools produced by other programs.

TECHNICAL ASSISTANCE

YouthNet can provide support in strategic planning, program implementation, research, monitoring and evaluation, and expanding the breadth of orphans and vulnerable children work by linking it to global youth-serving networks (such as the World Association of Girl Guides and Girl Scouts, the YMCA, and the YWCA), global media (such as MTV), knowledge management programs, and the private sector through of social franchising techniques.

Areas of specific youth expertise include youth-adult partnerships, youth participation and leadership, and delivery of youth-friendly services. Through its short-term technical assistance program, YouthNet can provide technical support to USAID missions, cooperating agencies, implementing agencies, and governments.

CONTACT INFORMATION

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USAID/Washington:

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Appendix: Previously Funded Projects for Children Affected by HIV/AIDS

Country	Description With Key Accomplishments
Project Implementers Academy for Educational Development; Brazilian NGOs Casa de Passagem, Comitê para Democratização da Informática de Pernambuco, Porto Digital, and LTNet-Brasil USAID Funding Period Nov 2002-Apr 2004 USAID Amount \$400,000	 This employability and training pilot project enrolled 50 disadvantaged youth from communities and poor families. Accomplishments: Prepared educational training content that included core technology themes, Portuguese, mathematics, English, creativity, citizenship, health, employability skills, ethics, and etiquette Developed a learning approach that enabled the participants to take charge of much of their learning program and to simulate their future workplace environment Created a training facility and installed computers and peripherals
Cambodia Project Implementers FHI/IMPACT; Friends USAID Funding Period Aug 1999-Jun 2002 USAID Amount \$256,050	The project worked with street children by linking with existing services providing provided support for children affected by AIDS and encouraged increased capacity where gaps in care and support existed. Various care and support services were provided to 1,000 children per day. Accomplishments: General counseling and pre-HIV testing/counseling services Care referrals for children and HIV-affected family members Placement services for orphaned children and children from HIV/AIDS-affected households
Cambodia Project Implementers FHI/IMPACT; Partners in Compassion; Takeo USAID Funding Period Feb-Sep 2002 USAID Amount \$5,478	The project, a collaboration between Christians and Buddhists, focused on decreasing discrimination against persons living with HIV/AIDS and increasing the ability of families to care for and support children affected by AIDS. A clinic based at the Takeo temple managed by Christian volunteers provided clinical care and services to people living with AIDS. Volunteers visited families and children who were unable to access the clinic. Accomplishments: 127 children affected by AIDS received educational materials and clothes to enable them to attend school. 60 Buddhist monks were trained to disseminate information about HIV/AIDS and to encourage the community to support and care for those infected and affected.

Country	Description With Key Accomplishments
Cambodia Project Implementers FHI/IMPACT; Médècins du Monde USAID Funding Period Oct 1999-Apr 2002 USAID Amount \$103,827	The project's primary focus was on HIV prevention, but it also assisted incarcerated children and street children affected by HIV/AIDS. Accomplishments: Vocational training Literacy courses for 100 youths Remodeled/refurbished buildings to use as youth centers
Ethiopia Project Implementers Pact USAID Funding Period Jul 1995-Sep 2002 USAID Amount \$2,000,000	This capacity-building project for NGOs included a series of training and technical assistance projects, small grants, and network support that facilitated coordination among 19 NGOs assisting orphans and vulnerable children. Accomplishments: Reached more than 33,000 children Operated 135 alternative education centers Increased annual budgets of NGOs by 121 percent
Ghana Project Implementers FHI/IMPACT; Queen Mothers USAID Funding Period Mar 2001-Jun 2002 USAID Amount \$95,937 (a portion supported activities related to orphans and vulnerable children)	 The project provided technical support to more than 70 "Queen Mothers" (traditional female leaders/opinion leaders and mothers) to increase their long-standing capacity to care for and support children and families in need in the HIV/AIDS context. Accomplishments: The Ghana AIDS Commission and other NGOs increased their assistance to orphans and other vulnerable children. A resource center was founded to provide counseling services and to host activities such as vocational training for the children and their families. HIV/AIDS education was incorporated into traditional puberty rights for young girls.

Country Description With Key Accomplishments			
Ghana Project Implementers FHI/IMPACT USAID Funding Period Mar-Apr 2002 USAID Amount \$8,080	The project carried out a situation analysis on the status of care for children made vulnerable by HIV/AIDS and subsequently produced the report Status of Care for Children That Are Orphaned and/or Vulnerable Due to HIV and AIDS in Ghana.		
Haiti Project Implementers CARE; FHI/IMPACT; CRS USAID Funding Period Jan-Oct 2001 USAID Amount \$200,000	The project helped communities understand the economic and psychosocial problems of orphans and other vulnerable children and implement sustainable responses. The project built on the existing work of CARE/Haiti and its partners and was designed in collaboration with the Ministries of Public Health and Social Affairs. Accomplishments: Links were established with microcredit and microfinance groups to expand access to these services. CARE assisted with improving access to education and addressing the specific HIV prevention needs of orphans and vulnerable children. A situation analysis on orphans and vulnerable children was completed in June 2000. Support groups were established in project areas. 109 children were placed in host families by the end of the project.		
Kenya Project Implementers ICROSS; St. Mary's Hospital USAID Funding Period Dec 2001-Sep 2003 USAID Amount \$112,910 (ICROSS \$78,443; St. Mary's Hospital \$34,467)	The project integrated psychosocial support for orphans and other vulnerable children in home-based care programs. Assistance included helping children care for ailing parents, grief management counseling, and visiting the children to check on their well-being and help them cope with the impact of parental sickness and loss. Accomplishments: Assessed the needs of orphans and other vulnerable children Formed six community support groups for orphans and vulnerable children Trained 373 community health workers constituting 21 homecare teams Enrolled 2,290 patients and reached 6,337 vulnerable children Used results of the assessments in the project redesign		

Country	Description With Key Accomplishments	
Kenya Project Implementers Society for Women and AIDS in Kenya; Kenya Rural Enterprises Program USAID Funding Period Aug 1999-Sep 2003 USAID Amount \$512,407	This project provided psychosocial and financial support to orphans and vulnerable children through children's clubs, training, and community activities in project areas in Western Province, Kenya. Accomplishments: Mobilized about 2,000 people, 200 of whom were HIV-positive parents of about 1,200 children Established 10 post-test support groups Assisted HIV-positive parents to write memory books covering issues of succession and will writing Linked the post-test support group members to microcredit facilities, including training in income-generating activities	
Kenya Project Implementers ICROSS; FHI/IMPACT USAID Funding Period Oct 2000-Sep 2002 USAID Amount \$197,531	The project responded in a social development context to the needs of orphans and other vulnerable children with specific reference to psychological and physical health, education, and land rights. Accomplishments: 79 community health workers and 25 supervisors were trained and subsequently provided home-based care and support in three areas of Western Province (Bungoma, Nzoia, and Webuye). A full-time medical officer monitored and provided technical assistance to the community health workers.	
Malawi Project Implementers Save the Children; Community Options for Protection and Empowerment (COPE) project USAID Funding Period Sep 1997-2002 USAID Amount \$1,619,459	 The project worked with local residents to form or reconstitute and mobilize 374 village AIDS committees and numerous district and subdistrict committees. Through these structures, the project facilitated sustainable community action to prevent the spread of HIV and mitigate the impact of HIV/AIDS. Accomplishments: The project delivered seedlings and other planting materials to more than 100 village AIDS committees to establish nurseries. 15,221 orphans and other vulnerable children in four districts received care and support. The project offered 1,639 children clothing, food donations, and school fee assistance. 40.2 hectares of communal vegetable gardens were established amd benefited more than 6,000 vulnerable households per year. 249 youth clubs involving 7,000 youth were established. Local fund raising increased. 	

Country	Description With Key Accomplishments
Namibia Project Implementers FHI/IMPACT; Namibian Resource Consultants USAID Funding Period Sep 2002-Feb 2003 USAID Amount \$28,901	The project goal was to improve the ability of program managers to assess the performance, quality, and outcomes of training, services, and supervision of programs for orphans and other vulnerable children. The project worked with three Namibian NGOs to develop and pilot a generic assessment/monitoring tool for use by other NGOs, CBOs, and other groups addressing the needs of orphans and vulnerable children. The project developed and piloted a national monitoring and evaluation toolkit with Namibian NGOs
Nepal Project Implementers Save the Children/US; Nepal Red Cross Society; Nepal National Social Welfare Association USAID Funding Period Jun 2001-Jun 2003 USAID Amount \$200,000	The project focused on mitigating the impact of HIV/AIDS on affected children, their families, and the community. It supported the development of appropriate care and support systems in Kanchanpur district of Nepal that could be used as models to initiate care and support systems in other districts. Accomplishments: Six AIDS coordination committees were formed and mobilized. An STI/HIV/AIDS counseling center was established. 175 female community health volunteers and 26 caretakers of HIV/AIDS-affected families received training in homebased care and counseling. Female community health volunteers organized 481 meetings for 163 groups of mothers in the project area. The meetings focused on HIV/AIDS prevention education, the rights of HIV/AIDS-affected people, and the importance of care and support.
Nigeria Project Implementers CEDPA/ENABLE USAID Funding Period Aug 1999-Dec 2002 USAID Amount \$900,000	 The project goal was to improve the quality of life for children aged 0 to 15 who had lost one or both parents to AIDS. Accomplishments: 10 program implementation committees were organized. 1,000 orphans and vulnerable children aged 0 to 15 received health care, education, and vocational training. 46 older siblings and 78 caregivers received vocational training. 521 households with orphans and vulnerable children received care and support through income-generating activities, microcredit, and advocacy and social mobilization training. The project offered training, capacity-building assistance, increased access to small loans, and assistance with incomegenerating activities to 34 CBOs.

Country	Description With Key Accomplishments		
Romania Project Implementers Baylor University USAID Funding Period Mar 2001-Mar 200 USAID Amount \$125,000	 Baylor College partnered with a Romanian NGO to bring state-of-the-art comprehensive care and treatment to HIV-infected children. Accomplishments: The Romanian-American Children's Center, an outpatient care and treatment facility, served 627 children living with HIV. All staff at the center received comprehensive training in HIV/AIDS. 10 Romanian physicians received short-term HIV/AIDS training in the United States at Baylor College of Medicine. Demographic, medical, and social information on 762 HIV-infected children was collected and compiled in a database that can track specific indicators. A home and palliative care program for HIV-infected children and families was initiated. 		
Romania Project Implementers Holf International Children's Services USAID Funding Period Oct 1998-Sep 2002 USAID Amount \$1,063,000	A fully integrated system of services for HIV-positive and HIV-affected children and their families was designed, implemented, managed, and evaluated. Accomplishments: 376 HIV-affected children were provided with counseling, social services, clothing, and food donations. 233 families with HIV-positive children benefited from financial support. Nine abandoned HIV-positive children were placed in long-term foster care at the end of the first quarter of 2002.		
South Africa Project Implementers AIDS Consortium USAID Funding Period Mar 2002-Aug 2003 USAID Amount \$109,000	The project aimed to support local livelihoods and promote economic sustainability by training unemployed Servcon clients in six localities to help families affected by HIV initiate local development projects, form cooperatives, and gain access to social and socioeconomic services. Accomplishments: Trained more than 70 local development fieldworkers in different localities in Gauteng and Mpumalanga Gained participation of more than 560 families living with HIV in projects to improve household income Visited 560 families through home-based care visits and support		

Country	Description With Key Accomplishments		
South Africa Project Implementers World Vision/South Africa USAID Funding Period Jan 2000-Jul 2003 USAID Amount \$344,618	 The project goal was to strengthen the capacity of vulnerable individuals, households, and communities to respond to the economic, social, and health impacts of HIV/AIDS. Accomplishments: Trained 387 clients in business management throughout Okhahlamba Municipality, 74 percent of whom are still in business Trained 80 home-based caregivers operating throughout Okhahlamba Municipality Involved 30 orphaned youth from orphan-headed households in food security issues in pilot sites Provided child rights framework to 32 members of orphan committees for their use in addressing orphan issues in their communities Designed and disseminated effective messages about VCT, nutrition, home-based care, and orphans and vulnerable children issues 		
South Africa Project Implementers FHI/IMPACT; HOPE Worldwide USAID Funding Period Oct 1999-Jun 2002 USAID Amount \$600,000	The project linked prevention of HIV with care and support services, community mobilization, and referral networks to provide a continuum of care after VCT. Accomplishments: Established support groups for children within the adult support groups (some support groups included only after-school activities) Trained clinic staff members in home-based care, social auxiliary work, psychosocial support for children, and community mobilization tools Facilitated welfare grants to clients Trained 13 lay counselors for PMTCT/VCT services and provided them with supplies and supervision		
Uganda Project Implementers Population Council; Horizons USAID Funding Period Aug 1999-Jan 2003 USAID Amount \$190,000	This project was an operations research activity that tested the effect of succession planning and an orphan support program. Three rounds of surveys were undertaken and analyzed. The results are available on the Web site: http://www.popcouncil.org/horizons/ressum/orphans/orphanssum.html. Findings: Baseline data demonstrated a need and interest in the program elements of both orphan support and succession planning. Qualitative findings and the ongoing impact analysis indicated that succession planning is an effective approach for engaging HIV-positive parents in planning for their children.		

Country	Description With Key Accomplishments	
Uganda Project Implementers Save the Children/UK; Ministry of Labor and Social Affairs USAID Funding Period 1992-1997	The project carried out a program that reunited 1,700 institutionalized children and closed 30 substandard institutions, thus improving the level of care in the remaining orphanages. With technical assistance, the government was able to support decentralization of service delivery and strengthen policies favoring family and community-based care for orphans. Save the Children/UK continues to work with the government on child protection and rights issues.	
Zambia Project Implementers The Salvation Army Chikankata Health Services; The Salvation Army World Services Office USAID Funding Period Oct 2000-Sep 2003 USAID Amount \$538,744 (for a comprehensive community health program; approximately \$20,000 per year supports orphans and vulnerable children activities; UNICEF provides additional funds)	 The purpose of the program was to provide support to five communities as they worked to meet the needs of the ever-increasing number of orphans and vulnerable children. Accomplishments: Supported 1,890 orphans and vulnerable children (320 in Chaanga, 290 in Malala, 250 in Mukela, 420 in Nameembo, and 610 in Ngangula) and their families Provided counseling to 1,890 orphans and vulnerable children once each quarter Provided at least one training session related to child welfare and legal issues to 1,890 orphans and vulnerable children and their families Provided parenting skills training to 50% of the orphans and vulnerable children Involved five communities in income-generating activities in which some of the profit is earmarked for orphans and vulnerable children and their families Provided quarterly home-care visits and training to 20% of the orphans and vulnerable children and their families 	
Zambia Project Implementers Population Council; Horizons USAID Funding Period Jan 2000-Dec 2001 USAID Amount \$167,548	 This project was an investigative study to determine whether young people who provide care and support to persons living with HIV/AIDS are more likely to practice safer sex behavior and whether provision of care and support by young people can reduce stigma and discrimination against orphans and vulnerable children and HIV-infected people. Study results are available on the Web site: http://www.popcouncil.org/horizons. Accomplishments: 300 club members were trained in care and support issues, HIV/AIDS stigma, and the rights of children. 30 clubs provided care and support to people living with HIV/AIDS and were linked to adult caregiver groups, clinic programs, or both. More than 100 orphans and vulnerable children were supported to continue school through advocacy activities by club members. 30 clubs in two districts provided care and support to an average of five people living with HIV/AIDS and five orphans and vulnerable children with HIV/AIDS/chronic illness per month. 60 clubs involving 10 to 20 orphans and vulnerable children each initiated activities. More than 50 orphans and vulnerable children in one district were linked to financial and material support for schooling. 	

Country	Description With Key Accomplishments		
Zambia Project Implementers PCI USAID Funding Period Jan 1998-Dec 1999	The project's goal was to identify low-cost sustainable approaches to strengthen the capacity of government organizations, NGOs, CBOs, communities, and families to mitigate the impact of HIV/AIDS on orphans and other vulnerable children. Four strategies were implemented to address this goal – community mobilization; improvement of health service delivery; advocacy for improving child welfare polices and regulations; and information sharing, networking, and capacity building.		
USAID Amount \$1,716,087	 Accomplishments: 14 communities with a total population of more than 100,000 mobilized to respond to the needs of more than 5,000 orphans with local resources. 14 community-based committees for orphans and vulnerable children organized to plan interventions. Five district-based committees for orphans and vulnerable children organized to perform advocacy activities, mobilize resources, and support community committees. 1,000 children enrolled in seven new community schools. 1,000 children gained greater access to counseling, health, education, and other support services. 		
Zimbabwe Project Implementers Pact USAID Funding Period Jul 2000-Sep 2002 USAID Amount \$300,000	The orphan control and care program strengthened the capacity of six NGOs to facilitate and replicate community-driven and community-sustained programs that integrated HIV prevention with care for orphans and other vulnerable children. Accomplishments: Training in psychosocial support, life skills, and succession planning Community grants for school fees and health care for orphans and vulnerable children Creation of a network of NGOs focused on orphans and vulnerable children		
Regional Project Implementers Regional Urban Development Office USAID Funding Period 2001-2002 USAID Amount \$100,000	 This project used Regional Urban Development Office funds to: Document effective urban strategies to alleviate the hardships faced by orphans and vulnerable children Develop assessment methods to help municipalities restructure their service delivery strategies to improve the standard of living for people affected by HIV/AIDS Design, cosponsor, and implement three or more demonstration projects in urban settings to improve local government responses to orphans and vulnerable children and people living with HIV/AIDS Accomplishments: Inventory of local government/urban actions to address HIV/AIDS Three pilot housing projects in South Africa for orphans and vulnerable children 		

Country	Description With Key Accomplishments
Global Project Implementers Orphans and Vulnerable Children Task Force USAID Funding Period Jun 2001-May 2002 USAID Amount \$20,000	The Orphans and Vulnerable Children Task Force was formed to bring together individuals and representatives from organizations working to meet the needs of orphans and other vulnerable children throughout the world. Objectives of the ongoing task force include advocacy, communications, and forums for programs to exchange practices and materials, identify program gaps and research needs, increase collaboration, and raise the visibility of the needs of orphans and vulnerable children. Eighty NGOs, agencies, donors, and individuals currently participate in task force activities.
Global Project Implementers CORE; POLICY Project USAID Funding Period Apr 2001-Dec 2002 USAID Amount \$200,000	Empowerment grants of up to \$5,000 were awarded to CBOs and FBOs to carry out innovative local HIV/AIDS programs. More than \$200,000 in grants was allocated to 45 organizations from 29 countries. Six of these organizations specifically addressed the needs of children infected or affected by HIV/AIDS through a variety of activities, including: Working with Buddhist monks to reduce stigma associated with orphans due to AIDS and other affected children through awarenessraising activities in schools Supporting infected children who wished to attend school Conducting community training and youth rallies Providing care and support services for people living with HIV/AIDS Establishing an adoption system for orphans Providing education assistance and materials Offering services in nutrition, health, shelter, child protection, incomegeneration, and home-based care and counseling

Index: Project Profiles by Country and Primary Implementing Organization

AFRICA

Burkina Faso

Supporting Nongovernmental Organization HIV/AIDS Service Expansion and Promoting Effective Responses to Address the Needs of Orphans and Vulnerable Children Affected by HIV/AIDS (International HIV/AIDS Alliance), 22

Ethiopia

Capacity Building for HIV/AIDS Prevention, Care, and Support (FHI/IMPACT), 25

Improved Family Health and Maintaining Human Dignity of the Poorest *(Catholic Relief Services)*, **27**

Pact Community REACH (Rapid and Effective Action Against HIV/AIDS) (Pact), 29

Ghana

POLICY Project Ghana (Futures Group), 31

Kenya

COGRI Lea Toto Community-Based Project for the Care of HIV-Positive Orphans (Children of God Relief Institute [COGRI]), 33

Community-Based Program for HIV/AIDS Prevention, Care and Support (COPHIA) (Pathfinder International), 34

Leadership and Investment in Fighting an Epidemic (LIFE) (Catholic Relief Services), 37

Pact Community REACH (Rapid and Effective Action Against HIV/AIDS) (Pact), 38

Speak for the Child (Academy for Educational Development), 40

Teso Child Survival Project (World Vision International), 42

Malawi

Child Survival Program (World Relief), 44

Home-Based Care for Chronically Sick People and Care for Orphans and Other Vulnerable Children (FHI/IMPACT), 45

Safety Net (Catholic Relief Services), 47

Mozambique

Maputo Corridor AIDS Prevention Project, KUHLUVUKA-Corridor of Hope (Foundation for Community Development), 49

RITA (Reduced Impact and Transmission of HIV/AIDS) (World Vision International), 51

Mozambique, cont.

Strengthening Community Responses to Orphans and Vulnerable Children (International HIV/AIDS Alliance), 52

Technical Support to Accelerate the Planning for and Expansion of Orphan and Vulnerable Children Support Services to Mozambique (*To be determined*), *53*

Tshembeka Mobilizing for Care (World Relief), 55

Namibia

Assistance to Government Ministries for National Plan of Action for Children (FHI/IMPACT), 57

Human Rights and Legal Support for Orphans and Vulnerable Children and People Living With HIV/AIDS (FHI/IMPACT), 58

Psychosocial Support Training for Orphans and Other Vulnerable Children (FHI/IMPACT), 60

School Program for the Prevention of Violence, Sexual Abuse, and HIV/AIDS (FHI/IMPACT), 62

Schooled for Success: Promoting Full School Participation by Orphans and Other Vulnerable Children (FHI/IMPACT), 63

Nigeria

Orphans and Vulnerable Children Project Implementation (FHI/IMPACT), 66

POLICY Project (Futures Group), 68

Rivers State Enhanced Care of Orphans (Centre for Development and Population Activities), 69

Vulnerable Children's Project (Centre for Development and Population Activities), 71

Rwanda

Mobilizing for Life (World Relief), 73

Pact Community REACH (Rapid and Effective Action Combating HIV/AIDS) (Pact), 74

Safety Net and Leadership Initiative for Fighting Epidemics (LIFE) Food Programs (Catholic Relief Services), 76

South Africa

Abaqulusi Child Survival Program (Salvation Army World Service Office), 78

Goelama Program – A strategic response to improving the well-being of orphans and vulnera ble children in Limpopo, KwaZulu Natal, and Mpumalanga provinces of South Africa (The Nelson Mandela's Children Fund), 79

Ndwedwe District Child Survival Project (Medical Care Development International), 81

Nurturing Orphans of AIDS for Humanity (NOAH) (Pact), 83

SIYAWELA II Project-Replication of Comprehensive Community Child Care Responses (HOPE Worldwide International), 84

Technical Assistance to USAID/South Africa-Funded Initiatives for Orphans and Other Vulnerable Children (Family Health International), 86

Tanzania

Organizational Capacity Building (Social Action Trust Fund), 88

Rapid Funding Envelope for HIV/AIDS (Deloitte & Touche East Africa), 89

Supporting National Response for Children Affected by HIV/AIDS *(Family Health International)*, *91*

VSHP Tumaini (formerly Voluntary Sector Health Program) (CARE/Tanzania), 92

Zanzibar NGO Integrated Support and Partnership Program (Africare/Tanzania), 94

Uganda

The AIDS/HIV Integrated Model (AIM) District Program (JSI Research and Training Institute), 96

Community Resilience and Dialogue (International Rescue Committee), 98

POLICY II Project (Futures Group), 99

Situation Analysis of Orphans in Uganda (Center for International Health and Development, Boston University School of Public Health), 101

TASO Five-Year Strategy (The AIDS Support Organization [TASO]), 103

Title II HIV/AIDS LIFE Initiative (ACDI/VOCA), 105

Zambia

Africa KidSAFE (Shelter, Advocacy, Food, and Education) (Project Concern International), 108

CHANGES Community Sensitization and Mobilization Campaign (CSMC) and School Health and Nutrition (SHN) (Creative Associates Inc.), 110

Psychosocial Support for Children Living With HIV/AIDS (Family Health International), 112

Scale-Up of Community and Home-Based Care and Support Services for People Living With HIV/AIDS, TB Patients, and Orphans and Vulnerable Children (funded through Pact Community REACH) (*Project Concern International*), 113

Strengthening Community Partnerships for the Empowerment of Orphans and Vulnerable Children (SCOPE-OVC) (FHI/IMPACT), 115

Zambia's Interactive Radio Instruction Program for Out-of-School Children and Orphans (Education Development Center), 118

Zimbabwe

Linkages for the Economic Advancement of the Disadvantaged (LEAD) (Development Alternatives, Inc.), 120

The STRIVE Project (Support to Replicable, Innovative Community/Village-Level Efforts to Support Children in Zimbabwe) (Catholic Relief Services/Zimbabwe), 122

Africa Regional

- Africa Education Initiative Multiple (Hampton University; International Foundation for Education and Self-Help), 125
- African Network for the Care of Children Affected by HIV/AIDS (ANECCA) Multiple East, Central, and Southern African countries (Regional Centre for Quality of Health Care, Makerere University, Kampala, Uganda), 126
- Consortium for Southern Africa Food Security Emergency (C-SAFE) Malawi, Zambia, Zimbabwe (Catholic Relief Services), 127
- Education for Development and Democracy Initiative (EDDI) 43 countries (inter-U.S. government agency working group), 129
- Food and Nutrition Technical Assistance (FANTA) Botswana, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia, Zimbabwe (Academy for Educational Development), 131
- HIV/AIDS and School Feeding Pilot Project Burundi, Mauritania, Rwanda, Sierra Leone, Uganda, Zimbabwe (World Food Program), 134
- Local Links for OVC Support Kenya, South Africa (CARE), 135
- Orphan Researcher Meeting Multiple Southern Africa countries (Health Economics and HIV/AIDS Research Division (HEARD), University of KwaZulu-Natal, 137
- SCALE-UP HOPE Program (International Save the Children Alliance Expanded-Unified Partnership With the Hope for African Children Initiative) -Ethiopia, Mozambique (Save the Children USA), 138
- Southern Africa Regional HIV/AIDS (RHAP), U.S. Ambassador's Initiative Program Botswana, Lesotho, Swaziland (Futures Group), 140
- Strengthening and Scaling Up The Hope for African Children Initiative (HACI) Cameroon, Ethiopia, Ghana, Kenya, Malawi, Mozambique, Senegal, Uganda, Zambia (CARE), 142
- Sustainable Income and Housing for Orphans and Vulnerable Children in Africa Mozambique, Uganda, Zambia (Opportunity International-US), 144

ASIA and the NEAR EAST

Cambodia

- Assessing the Social and Economic Impact of HIV/AIDS on Orphans and Vulnerable Children in Cambodia (Futures Group), 158
- Children Affected by HIV/AIDS in Cambodia (International HIV/AIDS Alliance), 159
- Children in Distress (component of Methagoruna Thmei Community Caring and Prevention Project) (Care International/Cambodia), 162
- Community-Based Care and Support for Orphans and Vulnerable Children (FHI/IMPACT), 164
- Community-Based Care for Orphans, Children, and Families Affected by AIDS (FHI/IMPACT), 167
- Community Support for Persons Living With HIV/AIDS and Their Children (FHI/IMPACT), 168

Cambodia, cont.

Counseling Center for HIV-Positive Women and Their Children (FHI/IMPACT), 169

Family and Community-Based Care and Support for Orphans and Vulnerable Children (FHI/IMPACT), 170

Reducing the Impact of HIV/AIDS on Orphans and Vulnerable Children and Older Caregivers (FHI/IMPACT), 172

India (Note: FHI/IMPACT is primary implementing organization for all projects.)

ASHA (Hope)-Hyderabad, 174

Assisting Children Affected by HIV/AIDS – Community-Based Prevention and Care Services for Vulnerable Children and Adolescents, 175

BRIDGES, 177

Caring Community for Children Affected by AIDS in Manipur, 178

Cheyuthu (Helping Hand), 180

Dancing Feat, 182

HIV/AIDS Intervention Among Substance-Using Street Children in Delhi, 184

HIV/AIDS Intervention Among Substance-Using Street Children in Mumbai, 185

HIV/AIDS Prevention for Street and Slum Children in Delhi, 187

Project Motukkal, a Community-Based Care and Support Project for Children Affected by HIV/AIDS in Namakkal Union in Tamilnadu, 189

Providing Community-Based Care and Support to Infected and Affected Children in Parts of Delhi and Andhra Pradesh, 190

PRUNAJEEVA ("Full Life"), 193

Reducing the Vulnerability of Adolescents to HIV/AIDS in the Slums of Delhi, 194

Reducing the Vulnerability to HIV/AIDS of Children and Women Victims of Commercial Sexual Exploitation and Trafficking (VOCSET), 196

Sishu Adhikar Raksha (Protection of Rights of Children) Project, 198

Street and Working Children Affected by AIDS Project, 200

Strengthening Community Support for Vulnerable Children and Mothers in Mumbai, 202

Thooli ("cradle") – Care of Children Infected and Affected by, and Vulnerable to, AIDS, **204** WIN CHILD, **206**

EUROPE and EURASIA

Russia

Assistance to Russian Orphans (International Research & Exchanges Board [IREX]), 210

LATIN AMERICA and the CARIBBEAN

Brazil

POMMAR At-Risk Youth Project (Partners of the Americas), 214

Dominican Republic

CONECTA (Family Health International), 217

The Global Orphan Project/Promundo (John Snow International [JSI]), 219

Haiti

Care and Support Activities for Orphans and Other Vulnerable Children and Persons Living With HIV/AIDS (FHI/IMPACT), **221**

GLOBAL

Child Survival Technical Support Project Plus (Macro International, Inc.), 224

Communities Responding to the HIV/AIDS Epidemic (CORE) Initiative (CARE International), 225

Community REACH (Rapid and Effective Action Combating HIV/AIDS) (Pact), 227

Global Technical Support to Mobilize, Enhance, and Scale Up Comprehensive Community Responses for Orphans and Vulnerable Children Affected by HIV/AIDS *(International HIV/AIDS Alliance)*, 229

Horizons (Population Council), 232

Implementing AIDS Prevention and Care (IMPACT) (Family Health International), 234

Peace Corps Program-Related Work With HIV Orphans and Vulnerable Children (Peace Corps), 237

POLICY Project (Futures Group), 239

Population, Health and Nutrition Information (PHNI) Project (Jorge Scientific Corporation), 242

Support to Orphans and Vulnerable Children Affected by HIV (Catholic Relief Services), 243

Synergy (Social & Scientific Systems, Inc.), 244

YouthNet (Family Health International), 245

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