

AMECEA

JULY 2022



NUNS CHAMPIONING:
CATHOLIC CARE FOR CHILDREN



AMECEA
Association of Member Episcopal
Conferences in Eastern Africa



Association of Women
in Religious Institutes
of Malawi



Every child deserves a family

Catholic Care for Children (CCC) is a visionary initiative, led by Catholic sisters, to see children growing up in safe, nurturing families. Guided by the biblical mandate to care for the most vulnerable and animated by the principles of Catholic Social Teaching—especially the dignity of each person—CCC teams are reducing the need for institutional care by encouraging and facilitating family- and community-based care for children.

Editorial

The Power of Collaborative Ministry in Care for Children



Andrew Kaufa smm
Coordinator for AMECEA
Social Communications

The Chewa Proverb Anayamwila ku bere, which literary translates to ‘He/She was sucking it at the mother’s breast’, underscores the philosophy of the Catholic Care for Children (CCC) Movement that stipulates that the best environment for primary socialization and holistic growth of every child is the familial set up. The same is underscored in Saint Paul’s letter to the Christian community in the city of Ephesus where he reminded parents that their duty was not only to provide for their children’s food and shelter but also to “bring them up with the training and instruction of the Lord” (Eph. 6:4).

In this Magazine, AMECEA Secretariat brings together stories about the activities of Catholic nuns in eastern Africa, towards holistic care of the children who were abandoned, orphaned, have physical or mental disability, or whose mother are imprisoned. Specifically, they are about CCC activities in Kenya, Uganda and Zambia. Of course, we recognize also that the Association of Women Religious in Malawi (AWRIM) is a new entry to the movement. Thanks to the Gerald and Henrietta Rauenhurst (GHR) Foundation, we hope that soon we shall also capture many other success stories from the other countries in the region and beyond so that this becomes a platform for sharing Best Practices in Catholic Care for Children and for building synergies.

From the stories that are documented in this magazine, there are basically two key issues underline the movement, both of them calling for regional and national advocacy as a strategy. Firstly, we see in the stories the need to strengthen families in eastern Africa so that children do not end up in care institutions but grow up in the ideal environment, the family, where their dignity is respected as

human beings. The stories coming from AOSK and ZAS are quite inspirational not only to fellow nuns but also to Catholic Religious institutions and all pastoral agents working in family and child care apostolates.

Secondly, we learn from the stories that those children who end up in the institutions must in the shortest time possible be re-integrated into the family set up. The efforts made by the Sisters in Uganda and Zambia to ensure that care for children must be de-institutionalized are outstanding cases of the need for the Church and government to work together in setting up policies that are conducive to children in family set ups.

As a matter of fact, who is responsible for bringing up the children in this desired environment? Apparently, this task must involve all of us as stakeholders: the donor partners, social workers, NGOs, the Church’s family apostolates and government Ministries responsible for ensuring that the rights of children are respected. However, the role of the family and the local community is a condition sine qua non.

We congratulate the nuns in the member Conferences for championing this course in the region. And on our part as AMECEA Social Communications, we commit to playing our role of supporting their efforts. Aware of the strength of the pastoral departments and other relevant commissions in the dioceses and Bishops’ conferences, we appeal for strengthened collaboration in order to realize reform in the way care for children is being given in most cases. We would like to see to it that each and every child in the region grows up in the family where holistic Catholic care is guaranteed.

Rethinking Care for Children

A Message from AMECEA Secretary General



Rev. Fr. Anthony Makunde
Secretary General AMECEA

AMECEA appreciates the collaboration with the Sisters and GHR Foundation in the noble cause of rethinking on the Children's welfare and especially those who really need the support in their formative ages.

Through this programme the Charism of many religious sisters in the AMECEA region is boosted as they continue in their mission of evangelizing through charisms. Thanks to GHR Foundation AMECEA region, is part of the pioneers in the program of Catholic Care for the Children (CCC). The program is in accordance with the Catholic Social Teaching and the core values of the Catholic Church.

This responds very well to Pope Francis' call in *Amoris Laetitia*, where he enlists the purpose of the Church's pastoral care for families as being twofold: to enable families to be both domestic churches and a haven of evangelization in

society. Although, the Holy Father in this Exhortation, centers on parents as having the primary responsibility for the raising of their children, he points out how others are called to assist parents in this vital role: extended family members, the parish community, and the human community as a whole are all called to help parents do the best they can to raise their children to be good Catholics and good citizens (AL Chap.7 nos 263- 270) .

The Holy Father challenges us to know where our children are. He is not referring so much to knowing their physical location (at home, at school, at a friend's house), but where they are in their lives. What are their convictions, desires, hopes and dreams? Who or what is influencing them? What impact do smartphones, tablets, and other such devices have on them? It is in knowing where our children really are in their lives that parents will know what will help them and what may be dangers and obstacles for them. Only if we collaboratively devote time to our children, speaking of important things with simplicity and concern, and finding healthy ways for them to spend their time, will we be able to shield them from harm (AL. 259-261).

Following the principle that grace builds on nature, Pope Francis outlines the major areas where children need education in some way: the moral

and ethical life, sex education, and, finally, passing on the Catholic faith to them. Education in each area needs to be done in ways that are appropriate to the age, maturity, and abilities of the child. Children need to be taught good habits, as virtues grow and strengthen in us by repetition. This ought to be done as a collaborative effort between the family, church and society at large (AL Chap. 7 nos 271- 290).

As a complement to this call by pope Francis, The CCC programme is effectively being implemented in four of the AMECEA Countries, that is Kenya through AOSK (CCCK) Uganda through ARU (CCCU), Zambia through ZAS (CCCZ) and Malawi through ARWIM (CCCM). This is a great milestone in the AMECEA region as the Church and the entire people of God and all people of good will continue to face challenges of many children who lack proper care due to poverty, war, family instability and other factors.

Through this programme AMECEA has seen the need to continue building collaboration with the bishops, the national Conferences and the different Church actors to ensure that families are strengthened and that children are raised in families or family like setup and not in Child Care institutions (CCI's).

We believe in this approach and through continued and strengthened collaboration with all relevant stakeholders, we see more children being de-institutionalized through the initiative. Bravo to the Sisters and GHR Foundation for such great initiative.

CONTENTS

AMECEA

JULY 2022

3 Editorial

Messages

4 AMECEA

Rethinking Care for Children
By Rev. Fr. Anthony Makunde
Secretary General AMECEA

6 ZAS

Zambia Association of Sisterhood
By Jeremiah Banda
ZAS Programs Director
For Sr. Elizabeth Muleya-ZAS
Secretary General

7 AOSK

**Unity is Our Strength
Collaboration and Children
Care Reforms**
By Sr Pasilisa Namikoye LSOF
AOSK Secretary General

Features

7 CCC MOVEMENT

By Sr Pasilisa Namikoye LSOF
AOSK Secretary General

8 AOSK- CCK

By Sr Delvin Mukhwana
AOSK-CCK Manager

**14 Family strengthening
and preservation**
By Fr. Peter Banda, SJ

**16 Zambia: Catholic Care
for Children**
By Fr. Peter Banda, SJ

**20 Zambia: CCCZ helps
re-integrate a 6-year-old boy
into family**
By Mwenya Mukuka

**21 Zambia: Social Welfare
Applauds ZAS Child
Reintegration Program**
By Mwenya Mukuka

**22 AMECEA: Catholic Nuns Lobby
for Partnership to Strengthen
Holistic Care of Children**
By Sr. Jecinter Antoinette
Okoth, FSSA

24 Malawi: Catholic Child Care
By AWRIM

**25 UGANDA: Covid-19 Casts Dark
Clouds of Accelerated Child
Abuse, Affects Child Care
Institution**
By CCCU

**26 Catholic Care for Children
Uganda record Milestone
Achievement**
By Sr. Mary Lilly Driciru, MSMMC

**28 Success Stories of
Re-integration Process of
Children from Catholic Care
Institutions in Uganda (1)**
By Caroline Nansukusa

**30 Catholic Care for Children
Uganda Reviews Best Practices
Toolkit and Case Management
System**
By Caroline Nansukusa

**31 Catholic Care for Children
Success Stories in Child
integration (2)**
By Caroline Nansukusa

**33 Holistic Care of Vulnerable
Children calls for Partnership
and Collaboration, Highlights
Religious Women**
By Sr. Jecinter Antoinette
Okoth, FSSA

**34 KENYA: How Nuns Depending
on Well-wishers Enkindle Hope
to Orphaned and Destitute Girls**
By Sr. Jecinter Antoinette
Okoth, FSSA

**36 Child Care Reforms
The Journey of CCC Kenya**
By Sr Delvin Mukhwana

MESSAGE OF THE ZAMBIA ASSOCIATION OF SISTERHOODS ON CATHOLIC CARE FOR CHILDREN PROJECT



Sr Elizabeth giving her closing remarks during a workshop with the facility representatives

As Zambia Association of Sisterhoods (ZAS), our message is to embrace the global and national child care reforms that place emphasis on the promotion of family-based care and/ or family like environment as the best place to nurture the growth of children who are in Child Care Facilities (CCF).

Informed by research, it is clear that institutional care has devastating effects on the growth and wellbeing of a child psychologically, socially and culturally. Such children cannot fit and live a meaningful community life once they leave institutional care because they lack basic survival skills such as washing, sweeping, cooking and other such life skills. Mainly, they suffer from trauma and other negative effects of insti-

tutionalization. In addition, the growth rate of babies who grow up in an institution is retarded by three (3) months due to lack of play and early stimulation.

Going by the aforementioned, the call to transition from the current institutional care into family-based care is in the best interests of the child and could not have come at a better time. Further, there is need to transition the Child Care Facilities (CCF) to service providers that focus on family strengthening and family outreach. The transitioning of these CCF into provision of fixed and defined duration of stay for children in need of care will not in any way take away from the charism, but it will ensure that congregations will continue expressing their charisms by being service-providers that will focus on

family strengthening and preservation. Being the smallest social unit, the family is a cornerstone for bringing up children so that the values of “ubuntu” can be inculcated in them.

Changing the model of care is the way to go so that children can experience family values, be able to have a family tree and grow up in a community and society that is molding them to face the realities of life and build their resilience to life regardless of future challenges and other situations they might be faced with.

Jeremiah Banda
ZAS Programs Director
For Sr. Elizabeth Muleya-
ZAS Secretary General

Unity is Our Strength

Collaboration and Children Care Reforms



Sr Pasilisa Namikoye LSOF
AOSK Secretary General

Collaboration and partnerships are our strengths at CCCK and CCC as a whole. Since 2020, we have collaborated with many like-minded organizations among them AMECEA. As Association of Consecrated persons in AMECEA, we are proud and grateful for this partnership which has been of great help to us to champion the child care reforms as we strive

to respond better to signs of the times, guided by our specific charisms in the noble task of giving care to children and vulnerable adults.

The Associations of Religious Sisters in Kenya, promotes the CCC movement mission by ensuring that its works is feasible at national level but also regionally and globally. The coming in of AMECEA in particular has helped us enhance the visibility of CCC's work by supporting our communication desks. Through our collaboration in the past one year, CCCK and CCCU have developed their communication and advocacy strategies. In addition, CCCK has documented success stories as well as, trained and mentored CCI administrators in social communication. The same applies to CCCZ, and CCCU.

We are grateful for the partnership, and we pray that it continues so that we can jointly advocate for care reforms in our various countries for the care, and protection of the minors, and their caregivers. Together we ought to strengthen families and streamline the implementation of child safeguarding guidelines in the region.

It is also an avenue for AMECEA to push for care reforms in the other AMECEA countries where CCC is not present. This is very possible because if all AMECEA member Conferences embraced the CCC aspirations and used their pastoral and social development structures, many families would be strengthened to protect, love, and nurture their little ones. In this way, we shall reduce recourse to institutional care of children and realise family and community-based care.

CCC MOVEMENT

“It is only in a family or a family-like environment where a child as a human being can enjoy their God-given dignity and worth in the human community.”

CCC is a sister-led, charism-driven movement to ensure that children grow up in safe and loving

families. It's a movement that began in Uganda in 2015, Zambia 2017, Kenya 2018, Malawi, South Africa, Sri-lanka and

CCCI 2021 respectively.

CCC movement is cemented on three pillars namely:

1. We are rooted in the touchstones of the Catholic faith: We have the biblical mandates to care for children and other vulnerable persons. We are guided by the Principles of Catholic social teaching, espe-

cially those emphasizing the dignity of a human person, preferential option for the poor, and the right of each person to participate fully in family and community.

2. Informed by social sciences that are clear about the:

Importance of nurturing family bonds for holistic, healthy development across life span and risks associated with separation from family care, especially in institutional care settings.

3. Aligned with the United Nations Convention on the Rights of the Child that spells out:

The child's right to a family and the guidelines for alternative care of children who are separated from their families

Catholic Care for Children is committed to a continuum of care pertaining to the Best interests of the child:

- If families are in distress, provide support to prevent separation of children.
- If separation occurs, see that children are re-united with families or placed in permanent family like settings.
- If alternative residential care is necessary, ensure care is of the highest quality and shortest duration possible

CCC believes that it is only in a family or a family-like environment where a child as a human being can enjoy their God-given dignity and worth in the human community.

By Sr. Pasilisa Namikoye
AOSK Secretary General

AOSK- CCCK

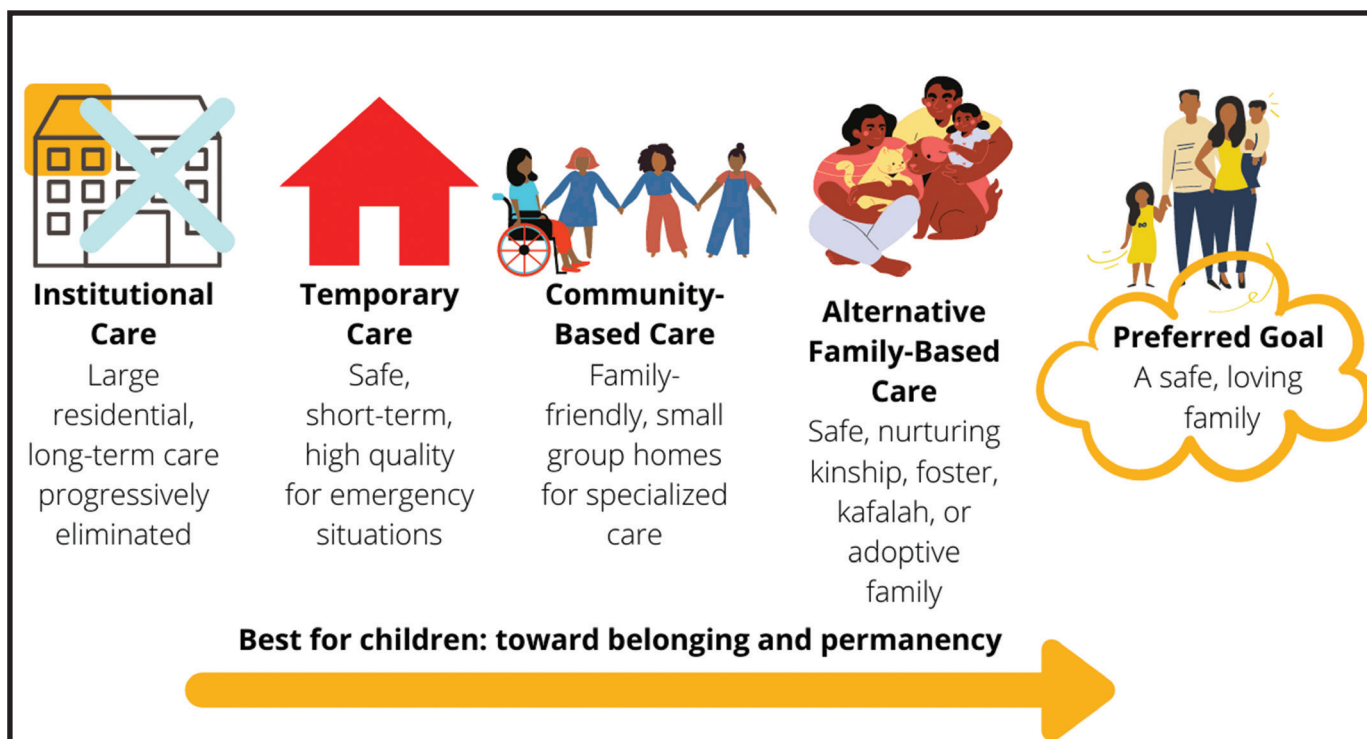
“AOSK-CCCK understands the importance of child space to participate in any decision concerning them. With this at heart, we have activities that targets children to ensure that they are also sensitized on their rights more specially to grow in the family”.

We are guided by the Principles of the Catholic social teaching, especially those emphasizing on the dignity of a human person, preferential option for the poor, and the right of each person to participate fully in family and community.

AOSK-CCCK was founded in May 2018 after the senior global program officers of GHR Foundation Mr. Dan Lueur and Dr. Kathleen Mahoney paid a visit to AOSK secretariat and had a lengthy conversation on care reforms with sisters in their mission of care for the children and vulnerable adults. GHR foundation in partnership with AOSK, have brought about drastic change by helping sisters respond better to their charism of care because majority of religious members of the Catholic church who for decades have been in the mission of caring for children and vulnerable adults is sisters.

With this partnership, AOSK through its Catholic Care for Children in Kenya (CCCK) initiative does consolidate efforts from all its member congregations, clergy and religious men who have a charism of care for the vulnerable children to champion for a continuum of care that holds dear to Holistic family and community based care for children.

We have also as CCCK created a synergy to scale up on care reforms by strategically creating a structure to offer quality, affordable and sustainable programs to our member congregations, and our religious men especially those with charitable children Institutions.



CCK is ensuring that all member congregations of AOSK have child protection policy in place for the purpose of safeguarding minors when it comes to violation of their rights and abuse that can occur. With this CCK supported 41 congregations to develop their child protection policy guidelines to ensure that all sisters adhere to the measures of safeguarding in all their apostolates, and also organized trainings to ensure that the sisters understand how to better safeguard children.

CCK has brought together the administrators of Catholic Charitable Care Institutions. They come together more often both online and onsite to learn how to transit from Institutional care to family and community based care, they also share challenges, state/situations of Catholic care institutions, and the way forward towards care reforms as a family/movement.

These meetings serve as platforms to enable sharing of fears, challenges and achievements. They also serve as a forum to mentor one another, in the promotion and realization of family and community based care. Members also discover other opportunities that exist beyond single institutions.

AOSK-CCK carried out a baseline survey and one of the findings was that most of the sisters serving as administrators in charitable care in-

CCK has brought together the administrators of Catholic Charitable Care Institutions. They come together more often both online and onsite to learn on how to change from Institutional care to family and community based as well as sharing of challenges

stitutions founded by congregations, or diocese had no professional skills in care and protection of children. We therefore embarked on training some in social work at the Catholic University of Eastern Africa, and some in integrative psycho-spiritual counselling, some were trained in Dis-

ability care, resource mobilization and donor transitioning among others. The communities have not been left behind, they are taught by our TOTs on positive parenting and re-embracing of family and community based care which is integral to the culture of Africans. This has helped sisters and community members to have a wider perspective of looking at care reforms, acquiring skills and knowledge that enhances their competences and confidence of doing what is acceptable with the wider society of care and protection of the minors.

It also has helped them to understand their role as agents of evangelization from a faith perspective and their role in strengthening family apostolate, as well as the need to incorporate science and academia to help facilitate and enable promotion of child development in a family environment, which is a universal right for all children.

Sensitization of sisters, communities has continued to take shape to ensure that no sister is left out in care reforms. This is because, all sisters in one way or another serve or come in contact with children. For example, a sister serving as catechist in any given parish, a sister nurse working in a hospital, a sister teacher working in a school or dormitory if it's a boarding school, a sister working as an animator of pontifical mis-

Sensitization of sisters, communities has continued to take shape to ensure that no sister is left out in care reforms. This is because, all sisters in one way or another serve or come in contact with children.

sionary children in the parish or diocese. All these sisters with or without their congregations having charitable Children Institutions, have to be part and parcel of care reforms, because they are the ones who refer these children for admission in care institutions. In addition they





visit and feed these children. With that in mind, CCCK ensured that, they were all sensitized on child safeguarding, positive parenting and legal frame work when it comes to child services. Sisters also serve in the communities and y have a

responsibility to help the communities unlearn the mind-set of child institutionalization, and to instead embrace family and community based care. So far, AOSK-CCCK has reached 3, 000 plus people from the communities including children.

So far AOSK-CCCK has reached 3, 000 plus people from the communities including children. The CCCK staff have CCI visits as one of the major activities and strategy to win and support the CCIs transit the children who are already in Charitable care Institutions,

The CCI visits are some of the major activities and strategy of the CCCK staff to win and support the CCIs transit the children who are already in Charitable care Institutions, and the donors or benefactors who support Institutionalization. The visits help in creating a rapport with the Institutions. They also help the CCCK, understand where they are in terms of care reforms, to supervise if they are operating within minimum standards of care, if they are registered by the government (have a certificate of registration/or the certificate is renewed), and more importantly, if they are re-integrating children in good time without prolonging their stay in the Institutions without good reasons. The visit also serves as an opportunity to share and learn with those working in that given institutions, and as well encourage them to embrace fully family and community based care.

Development of Database for CCIs: For the purpose of documentation and promoting best practices in the Charitable Children Institutions,

and assessing progress of reintegration of children from CCIs to families or alternative care, the CCK developed an online data base for all Institutions under catholic care, where they can have proper documentation of children information using a government approved case management tools that have been incorporated in the system. The system facilitates proper management of children's cases from admission to exit. It also helps the social workers and administrators to prepare individual child care plans to facilitate sustainable re-integration of children, monitor the progress of reintegration, planning for the Institutions' resources, and to mobilise for more resources.

AOSK-CCK understands the importance of children participating in any decision concerning them. With this at heart, there are activities that target children to ensure that they are sensitized on their rights but even more to help them grow in a family unit. Some of these activities target children from care institutions as well as children from the communities because some of them are at risk of being separated from their parents or families. In addition these activities are held to enable children learn and know that the best place to grow up is in the families.

Care reforms should not be something to be feared. As a practitioner with CCK, I have come to concur with the researchers who say that most of the children in our communities are admitted in charitable care Institutions because of poverty. From my experience, I believe that this is true with few of them being admitted due to orphan hood, and another fraction because of abuse and violation of their rights. Also it is evident that most children are left in CCIs for longer period of time because most of the CCI administrators, board of trustees and management, think that for a child to be helped, they have to finish primary education or secondary education while still in CCI which does harm to them.

With a lot of sensitization and trainings that is carried out with CCK, we have seen sisters, the clergy and community members change their mind and heart when it comes to care reforms. Religious men and women from the conversations that we have had with them, now feel strongly about this issue and, as agents of evangelization, have been reminded of their responsibilities and roles in strengthening families and

protecting minors as it is a pastoral issue of concern in today's world.

It has been heart-warming when I see religious men and women who have founded or are running Charitable Care Institutions because of their charisms tell me that they strongly feel the need to help children re-join their families, and to re-purpose their institutions into other services that will still focus on strengthening the families and safeguarding the children.

I have had an opportunity to traverse more than 100 Catholic CCI, and the changes is evident, starting from change of attitude and desire to reach to the communities and help in un-learning the culture of Institutional care, to that of family and community-based care. In reality, it's a journey or process that needs determination, patience, courage and prayer, because a lot still has to be done to ensure that a child is not harmed in the process as well as ensure that the child's best interests are taken into consideration.

It is very possible to have children grow up in families or a family-like environment, because "sisters began, they are doing it, and they will continue to do it". It is a journey that needs all of us, I call upon all well-wishers and people of good will to support religious men and women to achieve this good works that they are doing. The support is not only in terms of financial resources, but even to just tell a friend, your family members, and your community that care reforms for children is for all of us and their acceptance and prayer also counts a thousand times. In humility, I pray and request those who will read this story, to help us support those transiting children from care institutions back to families, and to help strengthen families for all children to have an opportunity to grow up in safe, loving and nurturing families anywhere in the world. It is doable and we can do it together.

**By Sr Delvin Mukhwana
AOSK-CCK Manager.**

Going through abuse?

**Call a child helpline
or talk to a trusted
adult now!**

Catholic Care for the Children(CCC) Project



AMECEA
Association of Member Episcopal
Conferences in Eastern Africa





Family strengthening and preservation

“With known causes of family disintegration namely, poverty, death of a parent or both, child abuse and many others, CCCZ projects aim at showing that a family is the best place to nurture a child’s growth”.

By Fr. Peter Banda, SJ

Catholic Care for Children in Zambia (CCCZ) project, under the Zambia Association of Sisterhoods (ZAS), has had a significant impact since its inception in 2015, mainly on families that have disintegrated due to various life challenging situations with focus on children. With known causes of family disintegration namely, poverty, death of a parent or both, child abuse and many others, CCCZ projects aim at showing that a family is the best place to nurture a child’s growth. Thus, to ensure that the dignity of the family, especially that of children is respected and sanctified, the project aims at reintegrating or unifying children into families and providing support to ensure that the child has a conducive home environment, that is, access to a good shelter, good food,

health, and education. In this view, CCCZ has reintegrated or reunified a substantial number of children into their family or family-like environment.

CCCZ projects uses Child Care Facilities (CCF) to carry out its process of reintegration. The effort of the association to transform the lives of these children takes effect in these CCFs with an engagement of families to take responsibility through family counselling sessions aimed at restoring self-esteem and ability to care for the children. Therefore, CCCZ projects orient, inform and educate communities about the good of having a united family. Although the process of reintegration or reunification of children from the streets to a child care facility can be tedious, the results overwhelm the challenges. Subsequently, there have been many successful stories that have accelerated the efforts of the project.

CHILDREN’S FUTURE SECURED

In 2019, an unfortunate incident happened on the Copperbelt in Lufwanyama area. Lightning struck a mother and father of four children leaving both dead. All the four children were present and saw what transpired. The eldest child of the four children managed to cover the parents’ bodies and gathered the siblings together to safety. This incidence was traumatic to the children such that even today, the eldest child hates the rainy season, more especially during lightning as she recalls the death of both her parents.

When you think of losing both parents at once, what



comes to mind is loss of parental care and economic and social support. In this situation, the parents of the four children were the sole children's providers. This means that hope is gone amid trauma. The growth and well-being of children to live a meaningful community life is in a state of turmoil. However, with projects such as Catholic Care for Children, the future of such children has been secured as the project will continue to offer support to them until they grow up and find some means of earning a living.

In order to reinstate the normal state of the four children, CCCZ project provided the platform to support and care for the children through counseling. The four children were brought to a Child Care Facility where they received all the necessary support to help them recover from the loss of parents. Thus, this process began the reintegration program. However, this incident proved to be difficult because of the death of both parents. It is also important to note that the incident happened by lightning during the rainy season. This means that the rainy season is not the favorite season for the children because it will always remind them of the death of their parents. Still, CCCZ would ensure that cases like this are possible for a child whose hope is lost to be brought back to the family or to a family-like environment to live a meaningful and normal life.

THE PROCESS OF REINTEGRATION

Fortunately, the management of the CCCZ managed to locate the uncle of the four children. Once the process of reintegration commenced, there was constant communication between CCCZ management and the uncle of the children. Two factors needed to play rightly here for this process to succeed. First, the management needed to think of ways of making the children fit back into society. Second, there was need to check the status of the uncle, that is, economically, psychologically, socially and culturally. These factors helped to determine whether the uncle was fit to take care of the children once the process of reintegration took effect.

As the management was succeeding in helping the

children recover from their trauma, they embarked on the process of empowering the uncle in all areas which would make him ready to be the appropriate foster parent of the children. At the helm of all these supporting programs, the management empowered the uncle with funding to begin poultry farming. As was expected, the four children did not recover at the same time. So, the management decided to take the process in two phases. Out of the four children, two have been taken out of the facility and reintegrated with the uncle. The other two are still being helped to recover.

All the four children are in school. The two with the uncle are fitting well in society under his care and the other two are in the process of being reintegrated so that they can all be together once again. For those that have been reintegrated with the uncle, the project is still taking care of their education and health needs.

FOCUS ON FAMILY STRENGTHENING

Through various processes and different sources of support like GHR, CRS and others, ZAS has continued to orient and train all the 41 childcare facilities under the Catholic umbrella body. However, the project is adapting to new world reforms which are today calling on a change to the current model of care. So instead of institutional care, the emphasis is now on family-based care or family like kind of care that will see children growing up in communities already that would nurture their growth.

In order to adequately address the process of reintegration and produce more results, there is need to transition the Child Care Facilities (CCF) to service providers that focus on family strengthening and family outreach. The transitioning of these CCF into provision of fixed and defined duration of stay for children in need of care will not in any way take away from the charism, but that Congregations will continue expressing their charisms by being service providers that will focus on family strengthening and preservations. A family being the smallest social unit, it is the corner stone for bringing up children in society so that the values of "ubuntu" can be inculcated.

Sr Catherine during an integration program.



ZAMBIA: CATHOLIC CARE FOR CHILDREN PROJECT

The following interview is based on the history, objectives, current status and progress of Catholic Care for Children Zambia (CCCZ) projects. The interviewees are Mr. Jeremiah Banda, Programs Director, Sr. Catherine Mporoko-so, Projects Coordinator, and Mr. Samuel Daka, Monitoring and Evaluating officer.

Edited by Fr. Peter Banda, SJ

MR. JEREMIAH BANDA, CAN YOU EXPLAIN THE HISTORY OF AND WHAT INSPIRED THE CCCZ PROJECT IN ZAMBIA?

I came in at the time when the Catholic Care for Children project was being initiated. That was in 2015. I started with what we call the formative research to understand why parents, and other people place children in childcare facilities commonly known as orphanages. The research, which took us almost one year and three months, found out that factors necessitating placement of children in the childcare facilities were poverty, inability for families to provide basic necessities for their children, abuse, and neglect among others.

The research informed what we called the first phase of the Catholic Care for Children project, which borders around building the capacity of child care facilities known as catholic affiliated childcare facilities. This capacity is tailored around the global and national childcare reforms.

WHAT WAS THE MOST IMPORTANT AGENDA OR OBJECTIVE ABOUT BEGINNING THIS PROJECT IN ZAMBIA?

The world is changing now and the way we handled children years back is quite different from how they are handled today. We need to change the perception of the general community because I think of late, it's like society has taken out the pride of raising children. We are placing the responsibility of grooming and bringing up our children to individual parents, who can inculcate issues of culture, skills and childhood development, and family tree. We have run away from the extended family system. Hence, I think one objective of this project is to see how we can revive and promote the extended family system and issues to do with family preservation. We know that in Africa, there is no orphan.

It is also important to note that the major factor of placing children in orphanages is not because they are really orphans, but because of the inability by their fami-

lies to care for them. The perception is that when your child is in a childcare facility, he or she is going to receive the best education. This is one factor that is making many families place their children in the childcare facilities. But now, with the GHR project, we are able to support these children even from their home environment.

CATHOLIC CARE FOR CHILDREN IN ZAMBIA PROJECT FULLY TRANSITIONED TO ZAMBIA ASSOCIATION OF SISTERHOODS (ZAS). WHY WAS THIS IMPORTANT?

I think first of all, as a church, we take the image of a family. When you think of the future of the children and the leadership that we may need in the next generation, with these children not being cared for, we are going to have a gap in terms of who can drive the agenda of the country. The emphasis is that family is the best place to nurture a child. This is what inspired the Zambia Association of Sisterhoods, and many other Catholic affiliated residential childcare facilities, that women religious run. The Zambia Association of Sisterhoods places much emphasis on making sure that we contribute to the dignity of this child who really needs the support of everyone.

At international level is the Catholic Care for Children International, which sits actually within the union in a UISG, who are there also to provide leadership at a higher level. Basically, at this level, this platform is aimed at bringing all the major superiors at the higher level. That's how we have strengthened our networking and our collaboration making sure that we are a strong movement that is promoting the transitioning of some of these child care facilities into transit homes or taking care of children for a fixed duration of time and making sure that we direct our support to families.

SR CATHERINE MPOROKOSO

WHERE IS THE PROJECT NOW SINCE THE TIME OF ITS INCEPTION AS EXPLAINED BY MR. BANDA?

The CCCZ Project, with the funding of GHR is now in Phase 11 going into Phase 111. Phase 11 was mainly to pilot reintegration and ran from 2019 to 2022. As earlier stated, we focus on the goal and also respond to the UN Convention on the rights of a child of 1989, which states that "the Child, for full and harmonious development of his/her personality should grow up in the family environment, in the atmosphere of love, happiness and understanding".

Article 20 also states that "children deprived of a family environment should have the right to alternative care – kinship, foster and adoption". Zambia is a signatory to this. Through the Ministry of Community Development and Social Services, we came up with the minimum standard of care, the reintegration guidelines and alternative care. With this background, CCCZ continues to work with the 36 Catholic affiliated residual child care

facilities which are clustered as follows; girls at risk, street connected children, children with different types of disabilities, Orphaned and Vulnerable Children.

From the 36 CARCCFs, we are working with two pilot facilities, that is St Martins Children's Home and Lubasi Children's Home, and from inception till now, we have reintegrated 62 children back into their families. The pilot facilities are supported by ZAS- CCCZ. This includes the payments of the two social workers who are currently working at the facilities among other support. ZAS conducts ¼ visits to these facilities to monitor and evaluate its progress. ZAS also provides the strengthening package for the families through GHR funding.

THE PROJECT OF REINTEGRATION AND REUNIFICATION EFFORTS OF PLACING CHILDREN IN FAMILIES IS A CHALLENGING ONE. WHAT IS CURRENTLY HELPING THIS EFFORT IN VARIOUS COMMUNITIES TO YIELD FRUITS?

Our efforts are aimed at addressing factors leading to separation of children from the family. We are part of the CCCI movement where different countries are voicing the importance of changing the model of care from institutional to family-centered care. Lessons learnt from phase 11 project point out that there is a genuine impact of the project. We have seen improved care from the facilities which are now able to follow procedures laid down in the minimum standards of care. There is a reduction in the number of admissions in the facilities and an improvement in case management.

One facility is completely closed but the sisters have continued to provide the care in the families. There is also good relationship between the facilities and the district social welfare office even at the provincial level. All the facilities have all the forms needed including the Committal orders.

We work with different partners to help reintegrate the children within Lusaka district. They are Catholic Medical Commission Board (CMMB), Alliances for Children Everywhere in Zambia (ACE), Save the Children, UNICEF, Catholic Relief Service (CRS), and MCDSS. Here each partner plays a role in the reintegration progress. The partners are all sponsored by GHR

MR. SAMUEL DAKA

THE GOAL OF THE PROJECT IS TO IMPROVE THE WELL-BEING OF CHILDREN IN ZAMBIA, BY PROVIDING AND PROMOTING LONG TERM AND POSITIVE FAMILY OR FAMILY LIKE CARE AND PROTECTION. CAN YOU EXPLAIN HOW THIS HAS BEEN IMPLEMENTED NATIONWIDE?

Nationwide, we have to factor in our partners who are doing their part in terms of providing family or family-like care for the children who are in these facilities. They come together to try and promote this goal by providing a part of the service that will be required to ensure that

When we see that the child is ready to be taken back to the family, he or she is reunified after about three months, we look for signs that the child is settling down with the family.

a child grows up in a family and has been provided with family or family like care. But the association takes up one of the services that is psychosocial as well as trauma counseling. We are doing this through the partner called SHARPS Zambia. But on our own, we counsel children who have gone through trauma together in groups after which we identify individual children who need to be counseled further.

When we see that the child is ready to be taken back to the family, he or she is reunified after about three months, we look for signs that the child is settling down with the family.

Reintegration starts at the point when the child is separated from the family or is admitted in a facility through early planning.

By end of last year, the collaborative group for the consortium had taken back about 81 children to their families through tracing. Lubasi Home in Livingstone in the Diocese of Livingstone is a good example of the success of the program. By the end of 2021, 62 children from the home had gone back to their families from the two pilot facilities. Of course, the process has not been without challenges. First, we were looking at starting with facilities which had no proper systems. And then, there were the government policies and guidelines. Finally, we are looking at 38 to 40 facilities looking after between 1500 - 1700 children countrywide.

THERE ARE SOME SUCCESSFUL STORIES FROM THE PROJECT. ACCORDING TO THE NATIONWIDE ASSESSMENT OF RESIDENTIAL CARE FACILITIES

IN ZAMBIA SURVEY REPORT (SEPTEMBER 2016), THERE ARE 6,413 CHILDREN LIVING IN 189 CCFs NATIONWIDE. I AM SURE THIS NUMBER HAS GONE UP SINCE 2016. IN LUSAKA, 81 CHILDREN WERE REINTEGRATED BACK TO THEIR FAMILIES. WHAT PICTURE DOES THIS PAINT WITH REGARDS TO THE REINTEGRATION PROGRAM?

81 looks like a small number of children to have transitioned into families. However, looking at the process, it is a big number. Let me hasten to mention here that the 81 children are in just Lusaka province alone. And, of course, there are the 62 from the two pilot facilities. I think this is proof that the process can be a success. All we need to do is find resources. We also need to go to the communities to trace the relevant families. However, some of them are not willing to take back the children, some because they lack the capacity to do so hence the need of giving them some form of economic activity. This is promising since it means that if we collaborate, we can actually take back many children to their families.

YOU ARE ADDRESSING CAUSES FOR SEPARATION WHICH INCLUDE POVERTY, DEATH OF A PARENT AND ABUSE ESPECIALLY FOR A GIRL CHILD. MOST OF THE CHILDREN WHO ENCOUNTER THESE CHALLENGES END UP ON THE STREET AND REINTEGRATING THEM MAY BE A BIG CHALLENGE. HOW HAVE YOU INVOLVED THE COMMUNITY IN CREATING ENVIRONMENTS THAT ASSURE PROTECTION OF CHILDREN IN SCHOOLS, ORPHANAGES, FAMILIES AND IN SOCIAL CENTERS?

I mentioned that this is a process that needs follow-up and certain things are dealt with by the guidelines. Family tracing and family assessment involves the family where the child is supposed to go as well as the surrounding community. This presents the opportunity to talk to community leaders. For the Catholic Church, there is an opportunity to talk to the priests in the region. We try to have an audience with what we can call the gatekeepers, and use the entry point of the Christian communities.

WHEN THE CHILD IS TAKEN BACK, HOW IS THE ACCEPTANCE IN THE COMMUNITY? HOW DOES HE/SHE FARE IN THE COMMUNITY?

Sometimes, such a child may be very used to a routine. Therefore, when they go to a place where there is no order in doing things, they struggle... Communities actually help in making sure this child adapts to that environment. Also, one looks at the availability of a school where the child is being taken back so that schooling is not interrupted. A health clinic should also be within the vicinity so that the child can continue to receive health services. There is also what we call post placement monitoring. Taking a child back to the family is more than

physical placement. One has to visit the home and check how he or she is adapting in the community.

Improving the wellbeing of children takes a holistic view meaning that the community, parents, individuals and project implementers must be involved. With specific examples, can you share some stories of how the community has responded to the pleas of CCCZ?

There was a case in Lufwanyama where a child needed to go back to the grandmother because the parents were not paying school fees. First, the community had to accept it and then the local leadership had to facilitate the process by offering the family land on which the grandmother could build a house with resources from the CCCI facility. Also for consideration was land for the family to farm so as to continue to earn a living.

In Kaoma, children from Kaoma Cheshire home were all taken back to their families. When we went back to see how the children were actually faring, we were surprised to see that even the neighbours came., “When this child went away, she could only speak Lozi. When she came back she was speaking multiple languages,” they exclaimed. And over time, the community helped that child to adjust and one could see how she was actually fitting in.

In Lusaka, we’ve been doing community sensitization on radios like Komboni radio and Radio Maria. So, between these sensitizations, you hear people suggesting that there are actually other hotspots in some areas like Obama, Misisi, Kanyama, Matero where you can find needy children. People from the community offer suggestions and ask us to do something. And this year, working with the government, we may actually help these children

DEALING WITH CHILDREN IS A SENSITIVE ISSUE THAT REQUIRES DILIGENCE AND PATIENCE. THERE IS ALSO THE COMMUNITY STUBBORNNESS IN DEALING WITH THE ISSUES OF CHILDREN IN FAMILIES. WHAT CHALLENGES HAVE YOU FACED SINCE THE PROJECT OF REINTEGRATION AND REUNIFICATION STARTED? (MR. BANDA)

The first challenge I’d bring forth is the aspect of inadequate documentation at the time of admitting a child into a childcare facility. By law all these children are supposed to be placed into a childcare facility by a social worker. And so, the social worker is the initial contact of that child before being placed in a childcare facility. Lack of documentation leads to failure of tracing the family of the children. This makes it harder to plan for a child.

The other challenge relates to financing of these projects according to government policies and guidelines. Yet the government does not fund a single activity. So, it’s like the agenda of the national childcare reforms is driven by the Church and the NGOs or civil society. We don’t see government really taking a keen interest in the matter and providing the leadership needed or even the



Sr Catherine Mporokoso.

resources for that matter.

Another challenge is poverty. Many of these families live in a single room that is shared by the parents and their five or six children. Poverty makes it difficult for these families to provide for themselves. And yet, this is where we want to place the CCCI children.

At community level, the greatest challenge is that of perception. Because the community feels that when we talk of placing the children back into their families, we are being unfair, and we are depriving their children access to good shelter, good food, good health and even a good education. They still feel that children are better off in a childcare facility.

In summary, first both the religious and the laity must encourage one another and ensure that our children are nurtured well and grow up in a home and family environment, because it is the best place to nurture a child’s growth. Secondly, we would like to thank the GHR foundation for the support that they continue to give to the association. This support is really going a long way in transforming the lives of many children. I think going forward as an association, we would like to commit ourselves to continue devoting our efforts and our energy to transforming the lives of children who have been taken to childcare facilities as well as engaging families to prepare them to take the responsibility of bringing up their children. Finally, we would like to also commit to giving the children the natural love that is needed in a family, rather than the artificial love that we see being provided by some caregivers who are employees interested only in their salaries.

ZAMBIA

CCCZ Helps Re-integrate a 6-Year-Old Boy into Family

By Mwenya Mukuka



The day he was born is the day his mother died... and the beginning of a long stay in a children's home.

Now six years later, Stephen Bwacha has been reintegrated with his maternal grandmother after spending the first years of his life in a child care facility, thanks to Catholic Care for Children in Zambia (CCCZ). This institution is St. Martins Children's Home in Lufwanyama District, Ndola Diocese, where Stephen was admitted when he was only a few hours old after his mother died during delivery.

Catholic Care for Children in Zambia (CCCZ) project Coordinator Sr. Cecilia Nakambo who has confirmed the development says of him: "Stephen was admitted into the facility when he was few hours old because his mother died at delivery. The return of Stephen back to his family was long awaited by his grandmother who from the start didn't want to be separated from him but

due to lack of proper income on her part, Stephen was taken into the facility," she said.

Stephen's grandmother now makes her livelihood from making and selling foodstuffs such as Chikanda and Maheu beverage. She has rented a piece of land where she farms. She is also a fish monger.

Sr. Nakambo said that the Child Care facility still supports Stephen with school needs and packed food every day.

There is also a recommendation that Stephen visits his friends at the facility at least once a month.

Other re-integrated children are Joseph Mulenga, 8 and Given Simutenda, 7.

Given was admitted into the child care facility because his mother is mentally ill. The young sister of his grandmother is now taking care of him.

Joseph, was reunified with this grandmother in November 2019 and is now living with his aunt.



ZAMBIA: Social Welfare Applauds ZAS Child Reintegration Program

By Mwenya Mukuka

The Social Welfare Department in Lufwanyama district located in Diocese of Ndola has described the work relationship with Zambia Association of Sisterhoods (ZAS) in the reintegration program of children from childcare facilities as the best way to go.

District Social Welfare Officer Musiyaike Kaingu said in an interview that her office worked well with ZAS on the first phase of the program which ended on 31st March 2022.

Mrs. Kaingu said the Department of Social Welfare together with Catholic Care for Children in Zambia, co-ordinated well in making sure that the reintegrated children settled well in families.

She also noted the limited human resource at her office as a challenge in the collection of information for the reintegration process.

It was also learnt that some houses for families where some children are being reintegrated are in a deplorable state.

Mrs. Kaingu advised that the next phase of the project should improve on the empowerment of families that are welcoming children.

She said the empowerment should start before the child was taken back to the family adding that her office should be involved at all levels in the process.

Meanwhile, Sr. Petronella Lubanga, the Director of St. Martin's Children's Home which is managed by the Sisters of St. John the Baptist, has appreciated the financial support the Catholic Care for Children in Zambia through ZAS has rendered in the reintegration process.

Sr. Lubanga said without such support, it could not have been easy to reintegrate children into the families. She added that families have been helped with finances to start small businesses.

"Such a program is commendable as the family is now able to feed the child. With that, the child will be prevented from missing the Orphanage. ZAS has really helped, and we have done a great job by taking the children back to society with their support. Family reintegration is in the best interest of a child," said Sr. Lubanga.

She further said that people should know that reintegration is a process and is the best thing for a child saying taking care of a child should be holistic.

"For the best interest of the child, we look forward to working with ZAS on the next phase," she concluded.

AMECEA: Catholic Nuns Lobby for Partnership to Strengthen Holistic Care of Children



“Catholic Care for Children welcomes partnerships within church communities and beyond to help realize the best possible outcomes for children and their families.”

By Sr. Jecinter Antoinette Okoth, FSSA

Associations of Catholic nuns from eastern Africa have called on members of the Association of Member Episcopal Conferences in Eastern Africa (AMECEA) to collaborate with them in strengthening holistic care of vulnerable children in the society.

This call was made by Sr. Delvin Mukhwana, the Project Manager of the Catholic Care for Children in Kenya (CCKK) who was addressing National Coordinators of

various departments including Social Communications, Pastoral and promotion of Integral Human Development (PIHD) at a three-day conference held at the Tanzania Episcopal Conference (TEC) Secretariat in Kurasini in Dar-es-Salaam, Tanzania on Tuesday, March 22

Sr. Mukhwana stressed that collaboration would yield many fruits in the life of vulnerable children. “Catholic Care for Children welcomes partnerships within church communities and beyond to help realize the best possible outcomes for children and their families,” Sr. Mukhwana, who was speaking on behalf of other project managers from the region, said adding that collaboration is key and would help vulnerable children to develop a sense of belonging in the society.

CCC IS BUILDING CAPACITY

Sr. Mukhwana who is a member of the Daughters of the Heart of Mary (DHM) congregation, told the more than 50 participants, that care for children is a sister-led project and also a “charism-driven movement that aims to ensure that children grow up in safe and loving families.”

She said that through the International Union of Superiors General (IUSG), national associations of Religious and other appropriate groups, “CCC is building capacity to express a charism of care for children in today’s world (so as) to reduce recourse to institutional care but rather encourage family and community-based care for children.”

Currently, CCCs are in four countries within the AMECEA region namely Uganda, Zambia, Kenya and Malawi and are managed by religious congregations under their umbrella bodies namely the Zambia Association of Sisterhoods (ZAS), the Association of the Religious in Uganda (ARU), the Association of Sisterhoods of Kenya (AOSK) and the Association of Religious Institutes of Malawi (ARIMA). These associations manage various Child Care Institutions (CCIs).

ROOTED IN THE CATHOLIC SOCIAL TEACHING

Speaking about pillars of the CCCs, Sr. Mukhwana said the project is “rooted in the touchstones of the Catholic faith, especially the Biblical mandate, the principles of Catholic Social Teaching which emphasizes the dignity of each person and the right of each person to participate fully in family and community.”

Additionally, she continued, the project is “Informed by social sciences that are clear about the importance of

nurturing family bonds for holistic, healthy development across life spans and is also aligned with the United Nations Convention on the rights of the child that spells out a child’s right in a family and gives guidelines for alternative care of children who are separated from their families.”

AMECEA Child Safeguarding Officer Mr. George Thuku acknowledged that in the AMECEA region “the Church strives to adhere to Pope Francis’ declaration of



Sr. Delvin Mukhwana, the Project Manager of the Catholic Care for Children in Kenya.

zero tolerance to child abuse”. He added that “seven out of eight conferences in the region have safeguarding policies and child safeguarding offices and desks already.”

Mr. Thuku further said that there are gaps in the CCC International initiative in regard to safeguarding children and vulnerable adults. One of these gaps, he added, is “in-action relating to incidents of abuse where abuses are not detected, are covered up or nothing is done about them.”

Furthermore, he noted, that there is “low collaboration and coordination with the Pontifical Missionary Societies (PMS), Pontifical Missionary Childhood (PMC) and safeguarding officers, government actors and National Conferences and other commissions/departments in regard to action to be taken.”

He challenged the participants to think about the role of the church in addressing the plight of perpetrators of abuse, to look at abuse as a sin against God and against the law and finally, to look at abuse as a moral issue and criminal matter.

Malawi

Catholic Child Care – AWRIM

The Association of Women in Religious Institutes of Malawi (AWRIM- Malawi) was instituted to unite, coordinate and empower the congregations and sisters to fully live their prophetic roles by providing religious formation and skill-building interventions.

The association is committed to holistic formation of its members and to witnessing to the gospel values. AWRIM apostolate is realized through member congregation's involvement at all levels of mission work, in pastoral matters, education, health care, social work, agriculture, family life and other pastoral and religious initiatives.

The Catholic Child Care movement does not bring completely new things to AWRIM since the charism of child care is already within the association

through member congregations which are directly or indirectly involved in child care. CCC also aligns well with AWRIM Strategic goals which are:

- To ensure Consecrated Women are transformed into missionary disciples and the prophetic voice of Jesus Christ and stewards of God's creation.
- Improved socio-economic status of Sisters, Church members, marginalized people and society at large.
- Improved and strengthened governance and management capacity, policies, structures and systems at all levels
- AWRIM is sustainable and self-reliant through diversified, efficient and effective strategies and use of resources at all levels.

AWRIM's interest and commitment to the Catholic Child Care Movement therefore simply complements its strategic objectives of improving the lives of people of any category including children.

Already, Catholic Child Care movement is taking shape. A baseline assessment produced valuable findings and there were several lessons learnt during the exercise. It was clearly noted that family-based child care is most favoured by the government, the church, the society and most other groups. The exercise also showed some good

policies in favour of the child such as the Child Care Protection and Justice Act 2010.

The study found out that children find themselves in institutional houses due to several reasons such as poverty, loss of parents, broken families, abusive environment, abandonment and HIV among others. This in turn leads to the establishment of baby homes, orphanages, special needs and children's home, rescue centre, small homes with boarding facilities for challenged children and rehabilitation centres.

These institutions offer different services such as education, health care and nutrition, family counseling and psychosocial support, coordination of alternative care, rehabilitation for children with special needs and family empowerment to mention a few.

The study also revealed challenges such as lack of registration of the Centres due to Government delay in gazetting relevant laws and policies, limited awareness of the reintegration process, financial constraints, unqualified staff versus efficient delivery of childcare, poor infrastructure, lack of sustainability structures for resource mobilization and inadequate monitoring of care centre activities.

The Catholic Care for Children movement has been welcomed by the church in Malawi. The Catholic bishops and AWRIM leaders support the process of re-integrating children from institutional homes to families. They believe the family, regarded as the domestic church, is the best institution for children to learn how to pray. It is also a school for developing cultural values like respect, acceptable manners and life skills. This is where a child is nurtured, cared for and loved. Both ECM and AWRIM leaders pledge to support the movement.

Finally, AWRIM needs to come up with a comprehensive proposal on institutional strengthening which will address issues of advocacy, capacity building, direct financial support and sustainability. The association will work with the Episcopal Conference of Malawi to engage the government on registration of care centres as a top priority.

“The Catholic bishops and AWRIM leaders support the process of re-integrating children from institutional homes to families. They believe the family, regarded as the domestic church, is the best institution for children to learn how to pray”.

UGANDA: Covid-19 Casts Dark Clouds of Accelerated Child Abuse, Affects Child Care Institution



A ten-year-old girl, one of the beneficiaries of Catholic Care for Children Uganda (CCCU), was recently assaulted, and raped by a twenty-year-old man commonly known as Brick Baker. According to the Administrator of Child Care Institution (CCI) Sr. Boniconsili Atuhaire, OLGC, of Nyakibale Unit –Rukungiri District, the little girl fell prey to the attacker when she went to collect broom shrubs from the valley at her home after leaving the CCI.

The victim was helped by the information and knowledge she acquired about child rights and protection delivered by the CCI. It helped her to report this case to the caregivers who rushed her to the hospital, where she was treated. She is still undergoing counseling sessions due to the trauma and stigma she has experienced.

A team of Social Workers and Counselors from the CCI is accompanying her. Her case is still in court.

The little girl's ordeal brings to the fore one of the challenges that children face today especially those brought about by the exposes given the endless lockdown occasioned by Covid-19 and which kept children at homebound for prolonged periods of time. It also exposes challenges of the transition process of shifting

children from Child Care Institutions to home or family-like environment.

According to an unverified source most children (68% of boys and 59% of girls) have experienced physical violence, while one in three girls and one in six boys suffer sexual abuse. The scars can last a lifetime and often result in mental health issues and psychological distress in adulthood. Abusers of children include parents, teachers, friends and neighbours of children. This means children are not safe in homes, schools, roads, markets or at water sources "Effective child protection needs strong laws and policies. In Uganda, there are many positive steps taken, but these are on paper. For example, there is a national strategy to end violence against children in school. In addition, child marriages, corporal punishment and other forms of abuse are illegal. Yet in reality, these laws are rarely enforced or resourced. Perpetrators often go unpunished" the source said.

Save the Children advocates for greater resourcing to implement and enforce these laws which should also be localized and child-friendly and more accessible to communities.

Catholic Care for Children Uganda record Milestone Achievement

“The gaps called for CHILD CARE REFORM. Sisters in Uganda then took Care Reform action (laws, policies, guidelines and the regulatory framework with regard to deinstitutionalization), which was a ‘shock’ to some of the Sisters. Some residential child care institutions had been in existence for more than 30 years, some having more than 100 children. Others feared that their charism of care for children would be compromised. However, the fears were contained when the Association of Religious in Uganda spearheaded the move towards Care Reform”

By Sr. Mary Lilly Driciru, MSMMC

Catholic Care for Children Uganda (CCCU) has recorded a reduction in the number of children from child care institutions to living in families from 1,207 to 311. The results of a midterm evaluation of the Catholic Care for Children in Uganda that was conducted in 2020, by an External Evaluator has revealed. The gradual change was noted from 2016-2020.

According to CCCU National Director Sr. Euphrasia Masika, DST, her team set out to achieve the set goal, “to strengthen religious institutes in the expression of their charisms, with Religious becoming champions of childcare reform and improving outcomes for children living outside of family care, Orphans and Vulnerable Children.”

Out of the 117 institutes registered under the umbrella of the Association of Religious in Uganda (ARU), the charisms of 17 institutes are directly in line with care for orphans and vulnerable children. The 17 institutes have 44 child care institutions /programs under the following categories of children; double or single orphaned from zero to 18 years, disabled children especially those neglected or rejected by their families, physically and mentally challenged children, the visually impaired, dumb and deaf children, children of imprisoned women.



Over time, there were no formal structures to manage the above-mentioned conditions. In 2015, a dream happened when a conversation was held between the then Secretary General of the Association of the Religious in Uganda, Sr. Margaret Kubanze and Kathleen Mahoney from GHR Foundation in the USA. The vision was that sisters would become Champions of Child Protection and Care Reforms in Uganda. The program is Sister-led and charism-driven movement to ensure children grow up in safe, loving families.

Sisters in turn responded by compliance with Legal and Policy Frameworks: At the international level,



the sisters had to embrace the UN Universal Declaration of Human Rights 1948, the UN Convention of the Rights of the Child and the African Charter on the Rights and welfare of the Child, 1990. While at National level, the following documents were key; The Constitution of the Republic of Uganda, 1995, Article 34, The Children (Amendment) Act, 2016 (CAP 59), The National Alternative Care Framework (2012) and Approved Home Rule (2013).

A baseline survey, conducted in 2015, identified some gaps among them; each Religious institute taking care of vulnerable children in its own way, sisters running child care institutions with minimal standards, sisters' need for adequate knowledge /skills in social work and child protection to take care of vulnerable children, minimal response to the emerging legal frameworks in the child protection and safeguarding sector and sharp increase in the number of orphanages from about 36 to 600 in twenty years.

Hence, the gaps called for CHILD CARE REFORM. Sisters in Uganda then took Care Reform action (laws, policies, guidelines and the regulatory framework with regard to deinstitutionalization), which was a 'shock' to some of the Sisters. Some residential child care institutions had been in existence for more than 30 years, some having more than 100 children. Others feared that their charism of care for children would be compromised. However, the fears were contained when the Association of Religious in Uganda spearheaded the move to-

wards Care Reform: They created an office whose staff would run the program for Catholic Care for Children in Uganda and ensure that sisters complied with the government and international laws and policies. Key Stakeholders (Superiors General and Bishops) were involved. After communicating to the sisters about the need for Care Reform, they participated and facilitated the development of the Child Protection Policy to guide the implementation phase.

CCCU then embarked on rigorous sensitization of the staff in the Child Care institutions to understand the legal framework and its implications on non-compli-

ance. Capacity-building with short-term courses, where sisters trained in Child Protection & Safeguarding, was undertaken. Long term training of Sisters (86) in Social Work, Child Protection, Case Management, Counseling, Physiotherapy...) at the level of Diploma, Bachelors and Masters Degrees were also offered. Child Care institutions obtained Certificates of Registration. Collaboration with Government Officers from Ministry of Gender, Labour and Social Development for Implementation of Care Reforms, and Community Assessment visits before re-unification of a child with a family. Sisters followed up resettled children to assess their status and give advice accordingly.

The program was not without challenges. These included fear of the unknown (what would the future be like), fear for loss of mission in line with the charism of Child Care, fixed mindset; Some stakeholders (staff of the Child Care institutions, parents /guardians not willing to accept their children being away from them) were still locked in the old mindset that institutional care was the best because children were well looked after, donors /and founders of the Child Care institutions were attached to the original design of care that was institutional in nature.; loss of jobs: Most staff in child care institutions expressed fear for loss of jobs; transfer of trained Religious staff. However, the team of CCCU set out to resolve the challenges marking a milestone achievement in championing the cause of Child Protection and Safeguarding. A mission we are all invited to support.

Success Stories of Re-integration Process of Children from Catholic Care Institutions in Uganda (1)

“Twenty-three-year-old Jude Kakuuma was raised in St. Mugagga Boys Home and spent all his childhood and early adulthood there. On March 21, 2021, he was disengaged and supported for independent living. The CCI supported Jude to take a three-year course in Carpentry and Joinery. But his passion was elsewhere.... In the catering”.

By ARU-CCCU CMO-Caroline Nansukusa

Catholic Care for Children Uganda (CCCU) in partnership with GHR Foundation and the Association of the Religious in Uganda (ARU) has supported two Catholic Care Institutions (CCIs) as a pilot to generate evidence to scale out to other CCIs under the child reintegration project.

This project was undertaken with the purpose of reducing the number of children in institutions by supporting resettlement of at least 75% of the children into families. As by April 12, 2021, 60% of the children had been resettled and given packages to help them start a better life either with their parents or relatives or as independent youth.

The project however does not assume that the children from the pilot institutions, namely St. Mugagga Boy's and Kinyarugonjo Children's Home, who have been reintegrated can stand on their own immediately. Hence the need for post resettlement follow-ups and extra training in hard and soft life-skills such as Financial Literacy. This is only possible if the children have enough and extra support from willing 'good Samaritans' to support their re-integration into independent liv-



ing. This is well illustrated by the CCI experience with a young man named Jude.

Twenty-three-year-old Jude Kakuuma was raised in St. Mugagga Boys Home and spent all his childhood and early adulthood there. On March 21, 2021, he was disengaged and supported for independent living. The CCI supported Jude to take a three-year course in Carpentry and Joinery. But his passion was elsewhere.... In the catering.

JUDE'S JOURNEY TOWARDS INDEPENDENT LIVING

CCI Staff at St. Mugagga say that after he completed the Carpentry and Joinery course, Jude felt that he had outgrown the CCI and wanted to live independently. He started looking for job opportunities and would go to the neighbouring Police Barracks where he would get casual jobs. Meanwhile, he increasingly expressed a passion for catering. In early 2020, CCI linked him to a restaurant in

friends are female. It would seem that, since he lived in the CCI for a long time, he missed female counterparts in his life and he could be compensating for it," one colleague observed.

Jude's tasks include cooking, serving, attending to visitors at the front desk and purchasing food. He is paid a modest salary and gets his lunch and sometimes supper at the restaurant. He is therefore able to save most of his earnings.

JUDE'S LIFE OUTSIDE ST. MUGAGGA BOY'S HOME

When on March 21, 2021, Jude walked out of the CCI home, he was supported with six months' rent with the assumption that he would be able to pay his rent thereafter. He was able to get a two-room house in Walukuba near Jinja Town, a walking distance from his work place. He says he is steadily adapting to life outside St. Mugagga.

SOCIAL LIFE AND FRIENDS

Jude is gentle, reserved, friendly to those he is close to and relates well with customers and his work colleagues, his employer at Enkabi Restaurant says. On Sundays, he goes for prayers at Rubaga Cathedral (close to St. Mugagga Boys' Home) after which he visits his friends who he made while still at the CCI, at the Police Barracks also located near the Cathedral. These were also his OGs at St. Gonzaga Primary School.

At his residence, he has a neighbor who he refers to as his friend. The two get along well. Life outside the institution he grew up in is not without its challenges for Jude. Chief among these is how to handle his finances including shopping, budgeting and saving.

Currently, Jude does not have a national ID meaning he cannot open a bank account or register a SIM card so as to acquire a mobile phone. Another challenge is emotional management.

Despite these challenges, the future is bright for Jude. However, for him to successfully integrate in the 'normal world,' Jude still needs support in financial literacy to help him manage his finances especially if he is to attain his dream of opening a restaurant. CCI will support him get information needed for him to acquire a national Identification card. This will then open the door for him to open a bank account and acquire a mobile phone where he can engage in mobile banking.



Jinja City and although he did not study catering, he was learning on the job and chasing his dream. "My dream is to run a restaurant business one day," he said. This dream was briefly disrupted by the Covid-19 pandemic lockdown. However, when the lockdown was eased, he reported back to duty.

A follow-up visit by a team from CCI found that he was doing very well. "He blends well with the employer and with fellow workers especially women. Most of his

Catholic Care for Children Uganda Reviews Best Practices Toolkit and Case Management System

By Caroline Nansukusa

Catholic Care for Children Uganda (CCCU) has held a meeting with stakeholders to review and support the Association of Religious in Uganda Best Practices Assessment Toolkit and Case Management System which was upgraded on March 30, 2021. This was necessitated by the fact that the first separated systems served their purpose and had gaps which have now been resolved through the updating and integration exercise.

The end users of the case management system, mainly the case managers, affirmed that the program software is user friendly.

The Director of CCCU Sr. Euphrasia Masika, DST, in a welcome note said, "The reviewed system merged the dual system (case management and data management tools). The loophole in the first system included challeng-

from sad family or community to a secure and happy family or community. Where Catholic Care for Children Institutions (CCCI) stop, the family or community ought to proceed.

The reviewed system offers record security and helps to track records to help users to make informed decisions and to profile details. Basing on the check list, summary scores determine case closure, referral and/or graduation. Thus, it provides detailed information. In order to create a lasting impact and expertise in using the software, CCCU Office planned for a four-day workshop for the implementers of the program (CCCI Administrators and Social Workers) so that they get the gist of it.

Mr. John Mugisha the Chief Guest of the day who came from Alternative Care Unit of the Ministry of Gender, Labour and Social Development (MoGLSD), promised to help scale up the best practice tool and give maximum support to CCCU. "It is our work and we ought to offer free services where there is need," he said.

Sr. Anna-Maria Nankusu RSCJ the Chairperson ARU/President of the Conference of Institutes of Consecrated Life and Societies of Apostolic Life in Uganda (CICLSALU), thanked CCCU for giving priority to the child in their services and thanked Government for the usual collaboration through the line Ministry.

"Children matter to us. Our Society of the Sacred Heart of Jesus was founded in 1800, during the revolutionary war in France and our founder St. Madelene Sophie Barat said that for the sake of saving one child, she would start the Society..." Sr. Anna-Maria encouraged CCCU team never to tire of serving children

The consultative review meeting attracted a cross-section of stakeholders from Makerere University, Monitoring and Evaluation Team, Administrators of the Catholic Care for Children Institutions (CCCI) and the ARU Administrative and executive team.



es of tracking details. We thank GHR, ARU-CCCU for the idea of a system to support record keeping. It caters for the domains and focus areas like child admission, placement, governance, management structure, financial management, human resource, record keeping and the like."

According to the case management team, it is all about the child and the surrounding environment whereby case management is continuous and could take up to three years to be processed. The ideal management moves

Catholic Care for Children Success Stories in Child integration (2)

“His dream has always been to start and run a video library. When the CCI got financial support from ARU-CCCU, Brian was one of the beneficiaries. The social worker engaged him on what he believed would change his life and he opted for setting a video library”.

By Caroline Nansukusa

Brian Baruha, aged 22, was disengaged from St. Mugagga Child Care Institute (CCI) in 2018, and was reunited with his father and an elder brother. As a young adult whose living environment has completely changed, he has experienced coping challenges. He has made several attempts to become independent and at one time secured a job at a steel rolling mill near Jinja-Kayunga Road. His role was to mobilize scrap, a duty he said was so demanding and physically put his health at risk. He later decided to quit the job. However, he departed with a number of bad habits including smoking opium.

He co-habited with a girlfriend who learnt about St. Mugagga CCI social worker as Brian's guardian. The lady called the social worker and informed him about Brian who badly needed help. Brian went ahead to break his relationship with the girlfriend on a purported account that she was not developmental. “This lady was draining me financially,” he said. The CCI staff gave a positive response and started engaging him.

Brian, who lives in Buyikwe District, originally hails from Kigezi region. He, as well as his brother and father reside in the same trading centre but do not live together. Brian meets with all of them on a daily basis. He eats lunch at the father's workplace and residence. The father is employed in a piggery project. The elder brother was once under the care of St. Mugagga boys' home but eventually got employed as a welder in Jinja town.



SUPPORT FROM ARU-CCCU-GHR-CCI:

Much as Brian had left St. Mugagga, the social worker kept on visiting him to offer psycho-social support and at times, he himself would also come to the CCI (as a walk-in) for more counseling and guidance. His dream has always been to start and run a video library. When the CCI got financial support from ARU-CCCU, Brian was one of the beneficiaries. The social worker engaged him on what he believed would change his life and he opted for setting a video library. He was tasked to look for a busy place

where he could set up his business and he zeroed in on Naminya trading center.

With support from St. Mugagga Boys' Home, Brian was able to set up a video library on February 16, 2021. The CCI bought him a desktop computer, a CPU, a duplicator, speaker, 3 plastic chairs, table/counter, empty CDs and supported him with a three-month rent package amounting to UGX 300,000. In addition, the CCI also paid the carpenter who installed stands where CDs and movies are hang. Brian already had the computer skills having gone to St. Charles Lwanga Kitabi (Bushenyi).

Brian currently dubs audio-visuals and films and sells CDs. He duplicates music at UGX 200 and film/video at



The visiting team in a discussion with car-givers in the dining whose constriction was sponsored by CCCU through St. Mugagga CCI.

UGX 1000. A recorded CD is sold at UGX 1500. According to Brian, Saturdays and Sundays are his best business days for making more sales. On such days, he makes an average of UGX 10,000. Brian reported that he saves UGX 2,000 daily. He also recently joined a cash round group comprised of eight members.

Like in any other business, Brian cannot escape challenges. His biggest challenge currently is unreliable electricity. Sometimes, it goes off yet his machines depend heavily on power. Furthermore, sometimes fellow tenants fail to contribute to their shared electric bills. He has a vulnerable and ailing father. To cut down costs, Brian lives in the video library but is planning to have a residential space separate from the business premise. Besides, the trading centre where his business is located is not very vibrant.

With unlimited plans, Brian dreams of starting an



A beneficiary, Jimmy Mukisa visiting his poultry.

eatery joint in the very trading centre where the video library is situated. He has hopes that his elder brother (a welder) would provide him with a roasting stove and with his savings, he will be able to kick off with the business. He considers that this business will enable him complement his income from the video library. In three months, Brian plans to shift his business to a more vibrant trading centre.

To reinforce his plans and mitigate risks, Brian's elder brother would be brought on board in as far as aiding him to successfully live an independent life. This is because his brother has moved on very well much as they were once in the CCI together.

As his business grows, he needs to acquire a smart phone since this can help him download songs, videos that he may not have on the computer. Alternatively, he can acquire a MIFI for internet connectivity to the computer. This case may close since Brian has been outside St. Mugagga CCI for more than three years and he can now be left to continue living an independent life.

At least ARU-CCCU has supported 31 families for successful re-integration and some for independent living. Similarly, though some cases are supported, there are many more that received resettlement support such as chicks, cattle, and goats among others. As Association of the Religious in Uganda (ARU) with the program Catholic Care for Children in Uganda, (CCCU) the team will be delighted with many more partners who have interest in seeing children enjoy a family or family-like environment with holistic development.

Families and family-like environment have been supported to enhance the resettlement of the needy. Mukisa's grandmother was supported with 80 chicks and the project is progressing well. The care-giver has plans of expanding the project.

Holistic Care of Vulnerable Children calls for Partnership and Collaboration, Highlights Religious Women

By Sr. Jecinter Antoinette Okoth, FSSA

Collaboration and teamwork is key and essential in strengthening holistic care of vulnerable children in the society. As association of Catholic nuns from Eastern Africa countries put it, unity is strength and power.

At a conference in Tanzania, Dar es Salaam, that brought together National coordinators from various departments within the Association of Member Episcopal Conferences in Eastern Africa (AMECEA) region including Communication, Pastoral and Promotion of Integral Human Department (PIHD), Religious nuns expounded on the significance of collaboration in caring for the vulnerable through care reforms stressing it will yield much fruits in the life of children.

Sharing with participants on behalf of other project managers from the region about reintegration of children for holistic family and community based care, Sr. Delvin Mukhwana the Project Manager of the Catholic Care for Children in Kenya (CCCK) said that the CCCs welcome partnerships within church communities and beyond to help realize the best possible outcomes for children and their families and through collaboration vulnerable children have a sense of belonging in the society.

Sr. Mukhwana a member of the Daughters of the Heart of Mary (DHM) congregation narrated that through the International Union of Superiors General (IUSG), national associations of Religious, and other appropriate groups, “CCC is building capacity to express a charism of care for children in today’s world (so as) to reduce recourse to institutional care, and encourage family- and community-based care for children.”

Currently within the AMECEA region, CCCs are in four countries: Uganda, Zambia, Kenya and Malawi and are managed by Religious congregations under their umbrella bodies: Zambia Association of Sisterhoods (ZAS), Association of the Religious in Uganda (ARU), Association of Sisterhoods in Kenya (AOSK) and Association of Religious Institutes of Malawi (ARIMA). The association runs various Child Care Institutions (CCIs).

Sr. Mukhwana said, the project is “Rooted in touch-

stones of the Catholic faith, especially the Biblical mandate, the principles of Catholic Social Teaching which emphasizes on the dignity of each person and the right of each person to participate fully in family and community.”

Additionally she continued, the project is “Informed by social sciences that are clear about the importance of nurturing family bonds for holistic, healthy development across life span and is also aligned with the United Nations Convention on the rights of the child that spells out the child’s right to a family and guidelines for alternative care of children who are separated from their families.”

The Catholic nuns are not only lobbying for collaboration from Church organization but from other actors within the society as well.

“We expect a lot of collaboration and partnership starting with our government, by ensuring that, we as stakeholders are considered in government programs that support initiative of community welfare programs, as well as re-integration program with presidential bursary support to the children being re-integrated back to families and communities,” the Kenyan nun said adding that there is need for the government to further support children living with disabilities together with their guardians to attain sustainable re-integration.

For the Church right from Small Christian Communities (SCCs) to parish level, Sr. Mukhwana encouraged partnership by Christians fostering, adopting and being guardians of the children who have no loving and caring families after they have been rehabilitated from care institutions.

“For all pastoral agents including the clergy and Religious men and women, let us support family and community best care by use of our pulpits, and other social functions where we have the opportunity to evangelize our followers,” she said and concluded, “Let us all be part and parcel of strengthening families and not rob children their right of a loving and nurturing families, by taking Institutional care as our first priority, but instead have families and communities as our first families.”



KENYA: How Nuns Depending on Well-wishers Enkindle Hope to Orphaned and Destitute Girls

“The nuns opted to care for girls specifically following the charism of their Congregation which focuses on empowerment of women and the girl child. Whenever they encounter a needy orphaned boy child, they recommend to other children’s homes that care for the boys or for both girls and boys”.

By Sr. Jecinter Antoinette Okoth, FSSA

Ten years down the line, the congregation of Franciscan Sisters of the Immaculate are glad that a number of orphaned girls have the opportunity to access basic needs and education through the

support of well-wishers and the surrounding community so as to realize their full potential in life.

At Amani Na Wema Children’s Home (loosely translated as Peace and Goodness Children’s Home) located

northwest of the central business district of Nairobi, professed Religious women and novices who are in their formation to Religious life care for 60 orphaned girls to ensure they access food, shelter, healthcare, clothing and education and are eventually reintegrated back to their families.

During a field visit by the Catholic Care for Children in Kenya (CCCK) which is a program of the Association of Sisterhoods in Kenya (AOSK), in collaboration with the Association of Member Episcopal Conferences in Eastern Africa (AMECEA), it was noted that the Sisters have nearly an empty orphanage after Covid-19 broke out and the government placed stringent safety measures to help contain the spread of Coronavirus.

TRUSTING IN DIVINE PROVIDENCE

In an interview with AMECEA online on how the nuns manage to care for the orphaned girls without a permanent source of sustainable income, the Religious women responded that they trust in Divine providence, well-wishers and the surrounding community who have been supportive since the establishment of the home.

“Since most of our children are from the slums around, we normally visit their families and the surrounding community, letting them know about our apostolate and what we do. We also pray with the Christians in Small Christian Communities (SCCs). Through these acts, the community got to know us, what we are doing, our needs and they began finding out more on how they could be supportive to us,” Sr. Caroline Chebichi, a social worker at the home said.

The nun added, “We also offer Catechism classes in the parish; we teach Sunday school children and our own girls are part of these programs including the Pontifical Mission Societies (PMS). They also attend Sunday Mass in the parish.”

At Amani Na Wema, admission is done after a thorough evaluation in the families of the orphaned girls to ensure that any child admitted is actually needy. There are 30 children in primary school and 30 in secondary.

According to Sr. Chebichi who has worked in the home for nearly six years, the nuns have been receiving weekly donations of foodstuffs and other items not only from the community around but also from the parish where they belong and other surrounding parishes.

Besides, the nun explained, “When the children have closed schools and are back in their families and during the time of reintegration, parishioners and other volunteers come in intervals to clean the rooms and the children’s clothes.”

The nuns opted to care for girls specifically following the charism of their Congregation which focuses on empowerment of women and the girl child. Whenever they

encounter a needy orphaned boy child, they recommend to other children’s homes that care for the boys or for both girls and boys.

Explaining how the Covid-19 pandemic has impacted their apostolate, the nuns disclosed the difficulties the girls experienced back in their families because of the long stay at home and lack of basic needs such as food.

“When we follow up our children who are currently at home, most of them have not been accepted in their families for having stayed away for so long,” Sr. Chebichi stated and continued, “Some of them come back to the children’s home to express their challenges, while others call to ask if they could be allowed back because the situation in the families is not favourable.”

Recalling some of challenges the children have encountered, Sr. Chebichi explained painfully, “One wanted to commit suicide because she wasn’t accepted in the family and most of the time she was feeling out of place when with other children. Others escape from their homes and come back to the children’s home asking us for help.”

GRATEFUL TO THE COMMUNITY

As a remedy to these challenges, the nuns who work entirely on their own in the home without any employed person, have been calling the guardians of those children who escape from home to understand the problem. Then,

Besides the donations of food, clothing and other basic items from the surrounding community, Amani Na Wema Children’s Home has sponsors from Italy and Spain who mainly support basic education of girls.

they offer advice and request the guardians to accept the children back home.

“Where counselling is required, we engage professional counsellors who come to attend to those who are to be counseled,” Sr. Chebichi disclosed.

Besides the donations of food, clothing and other basic items from the surrounding community, Amani Na Wema Children’s Home has sponsors from Italy and Spain who mainly support basic education of girls.

“We also ask for bursaries to subsidize their education; parishioners also support us by regularly having a special collection in the church,” the nun added.

She continued, “We are very grateful to the community around us. We really feel part of them they have accepted us, they have embraced what we are doing, and through them we get professionals and other volunteers who have been of great support to us.”

Child Care Reforms The Journey of CCC Kenya

By Sr Delphine Mukwana DHM



Reintegration ceremony at Kwetu Children's Home in Nairobi allied to AOSK-CCC Kenya.

“I have had an opportunity to traverse in more than 100 Catholic CCIs in Kenya, and the change is evident, starting from change of attitude and desire to reach to the communities and help in unlearning the culture of Institutional care, to that of family and community-based care”.

It all started in May 2018 after the visit of two GHR Senior Global Program Officers Mr. Dan Lueur and Dr Kathleen Mahoney to the Association of Sisters in Kenya (AOSK) Secretariat, at the meeting the two had a lengthy conversation with the Sisters on reforms in the mission of the care of children and vulnerable adults. The GHR Foundation expressed an interest in partnering with AOSK, something that has brought about drastic change by helping the sisters respond better to their charism as the majority of women Religious congregations in the Catholic Church have for decades already been involved in this mission in one way or the other.

With this partnership, AOSK through its Catholic Care

for Children in Kenya (CCCK) initiative consolidates efforts from all its member Congregations, clergy and men Religious who have a charism of care for vulnerable children to champion a continuum of care that holds dear to holistic family and community-based care for children. As CCCK, AOSK has created a synergy to scale up on care reforms by strategically creating a structure to offer quality, affordable and sustainable programs to our member congregations, and our religious men especially those with charitable children's institutions.

CCCK is ensuring that all member congregations of AOSK have a child protection policy in place for the purpose of safeguarding minors when it comes to violation of their rights and any abuse that might occur. With this, CCCK supported 41 congregations to develop their child protection policy guidelines to ensure that all sisters adhered to the measures of safeguarding children's interests in all their apostolates, and also organized trainings to ensure that the sisters understood how to better protect children.

THE CATHOLIC CARE FOR CHILDREN MOVEMENT

CCC is a Sister led, charism-driven movement that ensures that children grow up in safe and loving families. It's a movement that begun in Uganda in 2015, Zambia 2017,

Kenya 2018, Malawi, South Africa, Sri-lanka and CCCI 2021 respectively. CCC movement is cemented on 3 pillars namely:

a) The movement is rooted in the touchstones of the Catholic faith in that the Catholic nuns have the biblical mandates to care for children and other vulnerable persons. As such, they are guided by the Principles of Catholic social teaching, especially those emphasizing the dignity of a human person, preferential option for the poor, and the right of each person to participate fully in family and community.

b) It is informed by social sciences that are clear about the importance of nurturing family bonds for holistic, healthy development across life spans and is cognizant of the risks associated with separation from family care, especially in institutional care settings.



c) It is aligned with the United Nations Convention on the Rights of the Child that spells out the child's right to a family and the guidelines for alternative care of children who are separated from their families

The Catholic Care for Children movement is committed to a continuum of care pertaining to the best interests of the child. If families are in distress, the Sisters must provide support to prevent separation of children. If separation occurs, the Sisters have the obligation to see to it that children are re-united with families or placed in permanent family like settings. If alternative residential care is necessary, they must ensure that the care provided is of the highest quality and in the shortest duration possible.

The bottom line is the movement's conviction that it is only in a family or a family-like environment that a child as a human being can enjoy their God-given dignity and worth in the human community.

THE SUCCESS STORY OF AOSK-CCC KENYA

The CCC Kenya success story can be summarised under three main achievements as follows.

a) It has managed to bring together the administrators of the Catholic charitable care institutions

The aim of bringing them together is for them to learn how to transit from institutional care to family and community-based care; to share the challenges they face; and together to find the way towards care reforms. Their coming together serves as a platform for sharing about their fears, challenges and achievements but also to mentor one another on how best to promote the family and community-based care.

b) It has trained Sisters about this new approach

In the first place, CCCCK carried out a baseline survey. One of the findings of the survey was that most of the Sisters serving as administrators in charitable care institutions founded by the Congregations, or diocese had no professional skills in the care and protection of children. AOSK-CCCCK thus embarked on training some of them in social work in collaboration with the Catholic University of Eastern Africa (CUEA). The training content included integrative psycho-spiritual counselling, basics on the care of children with disabilities, resource mobilization and donor transitioning among others.

c) It has also trained the local communities about the approach so that, they are not left behind

The objective of CCCCK is to ensure that members of the local community are taught about positive parenting and re-embracing of family and community-based care from the African cultural point of view. This has helped the Sisters and local community members to have a wider perspective of looking at care reforms, acquiring skills and knowledge that enhances their competences and confidence of doing what is acceptable with the wider society of care and protection of minors. In addition, CCCCK also helps the care-givers to understand their work from the faith perspective and their role in strengthening the family apostolate. So far, AOSK-CCCCK has reached out to more than 3,000 people from the communities including children.

d) It has sensitized all the Sisters working as pastoral agents in the parishes.

The idea is that no sister is left out in the care reforms. This is because all Sisters, in one way or another, serve or come in contact with children. For example, there are many Catholic nuns serving as catechist in any given parish; Sister nurses are working in Catholic hospitals; Sister teachers are working in Catholic schools or managing dormitories in boarding schools; nuns are also working as animators of Pontifical Missionary Children in the parishes or dioceses. With all this, CCCCK ensured that all nuns were sensitized on child safeguarding, positive parenting and the existing legal frame work when it comes to care for children.



Sr Delphine Mukwana DHM, the author, visiting a family during the Child Participation day of an African child.

e) It has a database for all Children Care institutions

For the purpose of documentation and promoting best practices in the charitable children's institutions and assessing progress of reintegration of children from CCIs to families or alternative care, CCCK developed an online data base for all Institutions under Catholic care, where they can have proper documentation of children information using government approved case management tools that have been incorporated in the system. This facilitates proper management of children's cases from admission to exit. It also helps the social workers and administrators prepare individual child care plans to facilitate sustainable re-integration of children, monitor the progress of reintegration, planning for the Institutions resources, and to mobilise for resources.

f) It has promoted the participation of the child

AOSK-CCCK understands the importance of child space to participate in any decision concerning them. With this at heart, we have activities that targets children to ensure that they are also sensitized on their rights more so to grow up in the family. Some of these activities target children from care institutions as well as children from the communities because some of them are at risk of being separated from their parents or families. These activities are held to enable children learn and know that the best place to grow up is in the families.

MY TESTIMONY AS CCCK MANAGER

As a practitioner with CCCK, I have come to concur with the researchers who say that most of the children in our communities are admitted in charitable care Institutions because of poverty. Based on my personal experience, I can say that it is true with few of them being admitted due to orphanhood, and perhaps another fraction because of abuse and violation of their rights. Also, it is evident that most children are left in CCIs for longer period of time because most of the CCI administrators, board of trusts and management, think that for a child to be helped, they have to finish primary education on secondary education while still in CCI which does harm to children.

With a lot of sensitization and trainings we have seen Sisters, the clergy and community members change their mind and heart when it comes to care reforms. Religious men and women with the conversations we have had with

them, they strongly feel, as agents of evangelization they have been reminded of their responsibilities and roles to strengthen the families and protect the minors as it is a pastoral issue of concern in our today's world.

It has been heart-warming when I see Religious men and women who have founded or are running Charitable Care Institutions because of their charisms tell me that, they strongly feel the need of time to help children from their families, and to re-purpose their institutions into other services that will still focus on strengthening the families and safeguarding the children.

I have had an opportunity to traverse in more than 100 Catholic CCIs in Kenya, and the changes is evident, starting from change of attitude and desire to reach to the communities and help in unlearning the culture of Institutional care, to that of family and community-based care.

In conclusion, let me underscore that care reform is a journey that needs determination, patience, courage and prayer, because a lot has to be done to ensure that a child is not harmed in the process and that the child's best interest is taken into consideration Nevertheless, Sisters began, they are doing it, and they will continue to do it. I call upon all well-wishers and people of good will to support the Religious men and women to achieve this good work that they are doing.

Support is not only financial resources but even to just tell a friend, a family member or the community about care reforms. In humility I pray and request those who will read this story to help us support those transiting children from care institutions back to families, and to help strengthen families for all children to have an opportunity to grow up in safe, loving and nurturing family in where in the world. It is doable and we can do it together.

Every child deserves a family

Catholic Care for Children (CCC) is a visionary initiative, led by Catholic sisters, to see children growing up in safe, nurturing families. Guided by the biblical mandate to care for the most vulnerable and animated by the principles of Catholic Social Teaching—especially the dignity of each person—CCC teams are reducing the need for institutional care by encouraging and facilitating family- and community-based care for children.

CCC began in Uganda in 2016 after the government enacted legislation favoring family- and community-based care. The goal was to remedy the alarming increase in the number of children being cared for in institutions due to poverty, disability, and lack of social support. Catholic sisters and brothers ably read the signs of the times. With support from GHR Foundation, the Association of Religious in Uganda (ARU) launched Catholic Care for Children in Uganda to help the Catholic community pivot from institutional care toward family- and community-based care for children and persons with disabilities. The transition was no easy feat.

The new care model required dozens of sisters and other staff to become degreed in social work; 44 care institutions to begin record keeping and case management for residents; hundreds of stakeholders to be persuaded of the importance of family care; and thousands of families traced, reconnected with their children, and supported throughout the process. The efforts paid off. By 2020 the census of children's and babies' homes in Uganda declined by 75 percent, from 1,207 to 331, and four children's homes had fully transitioned to community-based programming. Catholic sisters, drawing on their charism (spirit) of care, had emerged as leaders in childcare reform.

For Catholic sisters, the charism of care remains constant; the means of expressing it evolves. As one Ugandan sister notes, CCC is a “way of expressing our charism—what moves us to do what we do, the way we do it, the attitude we use to do it, the energy we put in. We built on that strength to ensure that this expression of charism is now combined with skills and professionalism.”

SUCCESS INSPIRES REPLICATION

Already active in national care reform, Catholic sisters in Zambia took inspiration from CCC in Uganda and, in 2017, launched Catholic Care for Children in Zambia through the Zambia Association of Sisterhoods. Then, in 2019, the Association of Sisterhoods of Kenya picked up the baton and established Catholic Care for Children in Kenya. As in Uganda, CCC teams in Zambia and Kenya are engaged with church leaders, government representatives, and civil authorities to ensure broad-based participation and support.



**“From the way children
are treated society can be
judged”**

+ Francisus