



Children play during the “Lowani” or “Everyone Welcome” class at the Bauleni Special Needs School in Lusaka. Photo by John Healey for CRS

overview

CATHOLICS CARE FOR CHILDREN (CCC)

BACKGROUND



Residential Child Care Facilities have increased in Zambia over the last few years, with the Ministry of Community Development and Social Services (MCDSS) recording 178 known child homes caring for over 8,000 children. Approximately 20% of the known residential care facilities in Zambia are Catholic-run, caring for 1,700+ children. Given the effects of institutionalization on a child, the family, and the community, the need to respond to children without “appropriate care” continues to rise.

PHASE I

With the support of GHR Foundation, CRS conducted a mixed-methods study to understand the factors affecting children’s placement in Catholic affiliated residential care facilities in Zambia and generate reliable evidence to inform policy and programming to promote safe and protective family and family-like care. The study results have shaped MCDSS strategic priorities and approach to strengthening Zambia’s alternative care system and CCC programming.

KEY FINDINGS

Based on the facility profiles, the top five reasons a child is placed in a Catholic-affiliated residential care facility are:

- ①  Poverty: food insecurity
- ②  Death of a parent
- ③  Child with disability or chronic illness
- ④  Abuse, maltreatment, or neglect
- ⑤  Household member with disability or chronic illness

QUICK FACTS

Funder	GHR Foundation as part of the Children in Families Initiative (CIF)
Project location	Lusaka District
Number of people served	200
Timeframe	2014-2022
Partners	Ministry of Community Development and Social Services, UNICEF, Christian Alliance for Children Everywhere, ZAS, CMMB, Save the Children

PHASE II

PROJECT GOAL

To improve the well-being of children by providing and promoting positive and long-term family or family-like care and protection.

PROJECT OBJECTIVES

- Strengthen the capacity of ZAS to implement the CCC II project activities and successfully manage its GHR award.
- Strengthen the planning capacities and coordination of the CIF+ pilot project.



Girls sing and dance at the City of Hope orphanage in Lusaka. Photo by John Healey for CRS

CHILDREN IN FAMILIES+ CONSORTIUM

To promote focused action with institutions and communities, CRS is carrying out the following priority actions as a member of the Children in Families+ (CIF+) consortium:



Building capacity of partners



Engaging key actors in advocacy initiatives



Implementing essential training

CRS is supporting the Ministry of Community Development and Social Services (MCDSS) as it leads the CIF+ consortium to promote collaboration and coordination among key actors seeking to strengthen the national alternative care system.

CONSORTIUM PARTNERS

- Ministry of Community Development and Social Services (MCDSS)
- UNICEF
- Christian Alliance for Children in Zambia (CACZ)
- Zambian Association of Sisters (ZAS)
- Catholic Medical Mission Board (CMMB)
- Save the Children

PROJECT HIGHLIGHT



DEVELOPING AN ONLINE, REAL-TIME MONITORING PLATFORM TO REINTEGRATE CHILDREN INTO THEIR FAMILIES

CIF+ is piloting a holistic, coordinated effort to target “hot spot” compounds of Lusaka to reintegrate 200 children currently living in residential care facilities into their birth or extended families.

The consortium is testing innovations focused on providing MCDSS with evidence-based data to inform the development of a replicable, scalable proof of concept model for more effective case management in response to children currently living in residential care. This includes CRS’ support to MCDSS to strengthen case management, coordination, and data capturing through the development of an online CIF+ monitoring dashboard.

The online platform will support real-time communication and tracking of cases as partners provide interventions. It will provide a child-centered integrated case management model with the capacity to track cases and referrals across partners based on the needs of the child and family against the menu of services provided by each implementing partner.

With support from CRS, MCDSS is facilitating an adaptive, locally-led, and data driven approach to improve Zambia’s alternative care system and promote the successful reintegration of children to healthy and protective family-based care.

