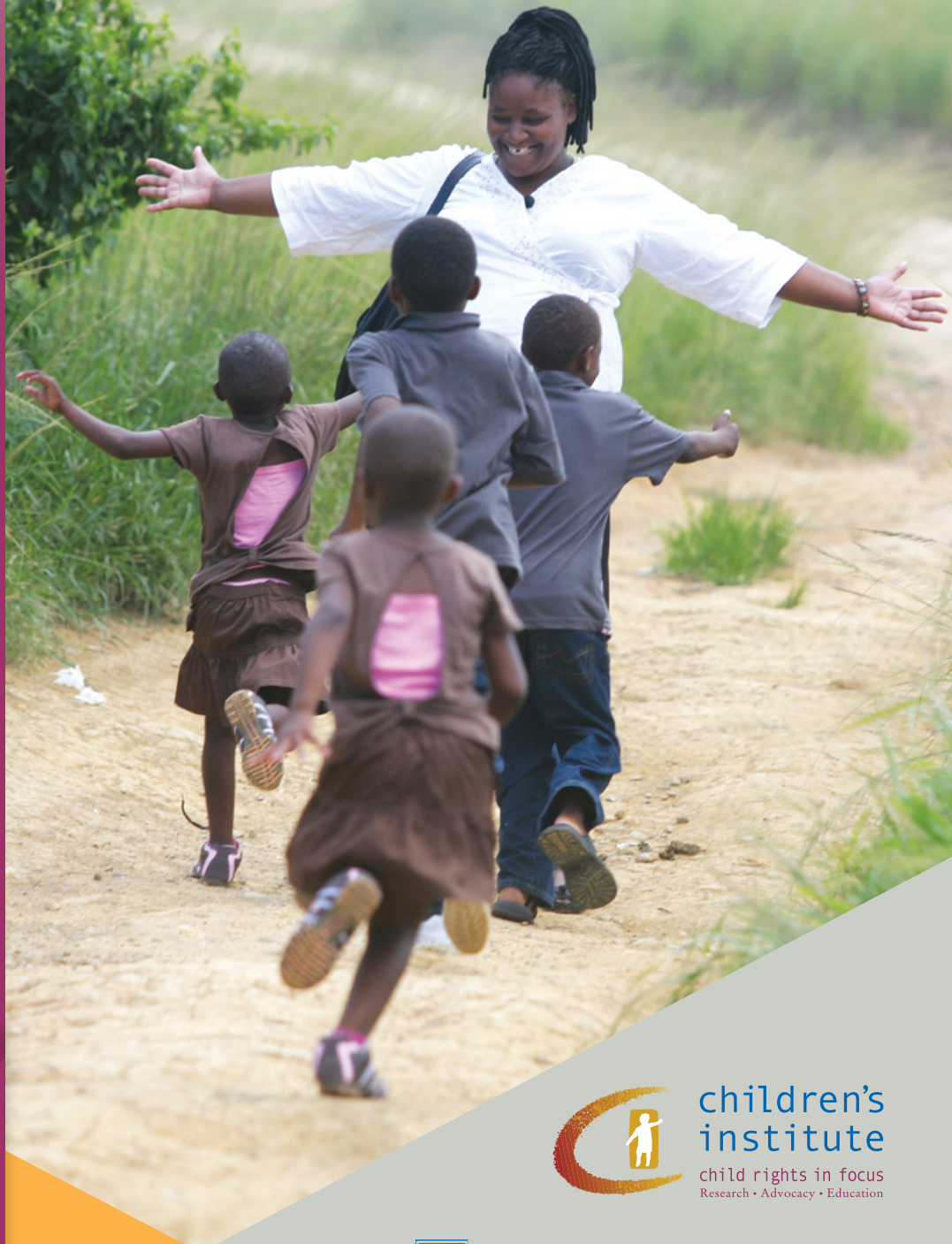


The Children's
Institute
**ANNUAL
REPORT**
2019



children's
institute
child rights in focus
Research • Advocacy • Education



UNIVERSITY OF CAPE TOWN
IYUNIVESITHI YASEKAPA • UNIVERSITEIT VAN KAAPSTAD

Cover photograph: Isibindi child and youth care workers work in the life space of children providing developmental care and support.
© National Association of Child Care Workers

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About the Children's Institute

The Children's Institute (CI) was established in 2001 as a multidisciplinary policy research unit in the Faculty of Health Sciences, University of Cape Town (UCT).

Our vision

We envision a society in which children are valued, nurtured and protected; their rights are realised; and where they are able to participate, develop and reach their full potential.



Our mission

We aim to contribute to policies, laws and interventions that promote equality and realise the rights and improve the conditions of all children in South Africa through research, advocacy, education and technical support.



Children's Institute at glance

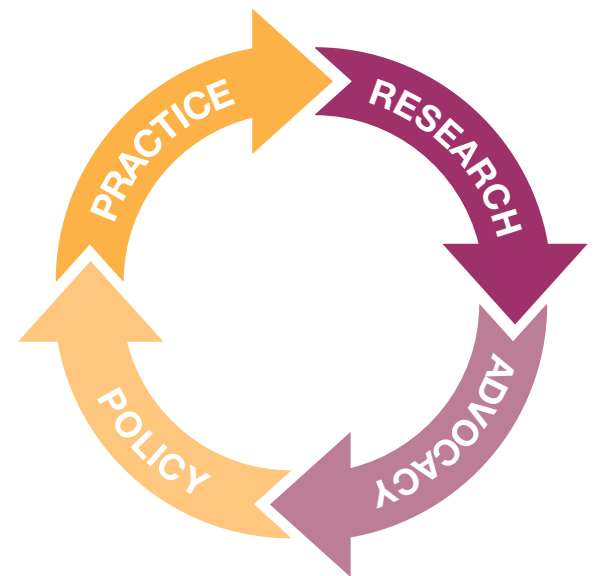
The CI's research and advocacy agendas are aligned with the major challenges facing children in South Africa, and currently focus on three main inter-related themes:

- ▶ Alleviating child poverty and deprivation through well-designed and inclusive social protection strategies – in the context of historical and structural inequality.
- ▶ Improving child protection systems by strengthening coordination, violence prevention and response strategies – in the context of widespread violence and abuse.
- ▶ Strengthening early childhood development through a comprehensive package of services and support for children and their caregivers – in a context where children have very different opportunities from the moment they are born.

The CI staff – with backgrounds in public health, sociology, law, politics, social work, psychology and communications – pool their skills to investigate the complex social issues affecting children. Research evidence is used strategically to contribute to laws, policies and programmes that realise children's rights and advance social justice. The CI has an annual budget of R11 million. It relies on external funding through research contracts and donations to continue its work.

Theory of change

We strive to get research into policy and practice. Rigorous research underpins our evidence base, which guides policy and law reform. This process of engagement includes focused presentations, submissions and dialogues to communicate recommendations to key decision-makers in government and civil society and informs public dialogue and debate through all forms of media engagement. We select appropriate advocacy strategies as determined by the issue and political context, ranging from technical support and capacity building through to civil society mobilisation and litigation. Shifts in policy and practice are then monitored, generating further research questions and advocacy opportunities that continue to drive the policy-research cycle.





Year in review



In a unanimous judgment, the Court agreed with the arguments put forward by CI and the other respondents that corporal punishment violates children's rights and that there are effective ways to discipline children without the use of physical force.

Since the establishment of the Children's Institute in 2001, we have successfully contributed to the reform of laws, policies, and service delivery models. Over the years, these reforms have resulted in positive changes for millions of children in the areas of social assistance, child protection services, early childhood development, and healthcare services. Nevertheless, one of the key lessons we have learnt is that advocating for policy reform and shifts in practices is a slow process and perseverance is critical in realising the rights of all children in South Africa.

For more than a decade, the CI had been advocating for an end to corporal punishment in the home. After a lengthy campaign, the Con-

stitutional Court of South Africa ruled that the common law defence of reasonable and moderate parental chastisement of children is unconstitutional. In a unanimous judgment, the Court agreed with the arguments put forward by CI and the other respondents that corporal punishment violates children's rights and that there are effective ways to discipline children without the use of physical force (read more on page 15). This is a monumental change to the law and the foundations have been laid to shift public discourse on the topic – but the ultimate goal is to shift parenting practices and how children are disciplined in the home.

Highlights

The *South African Child Gauge 2019* calls for the prioritisation of child and adolescent health to improve the health of children today, the adults they will become tomorrow, and the health and development of the next generation of children. The 2019 issue focussed on “**Child and Adolescent Health: Leave no one behind**” – and called for the prioritisation of child and adolescent health. The book describes a vision of a child-centred healthcare system that extends beyond the treatment of illness and injury, to promote children’s optimal health, nutrition and development. This includes engaging with children and families with the utmost care and respect and including them as active partners in healthcare and decision-making. Such a vision is crucial to inform the development of an essential package of healthcare services, and norms and standards for staff, medicines, equipment and infrastructure, to ensure that child and adolescent health receives an equitable share of resources (see page 10).

We also worked with the Department of Paediatrics and Child Health to draft a **submission on the National Health Insurance (NHI) Bill** calling for the specific needs of children to be prioritised in the design and implementation of the NHI system.

A new area of work is **birth registration**. Our analysis of existing nationally representative data found that an estimated 500,000 children do not have birth certificates and that most undocumented children in South Africa are entitled to South African citizenship. We used this evidence to draft an expert affidavit in a case on educational exclusions of undocumented children.¹ In interpreting the constitutional entitlement to education, and bearing in mind children’s other rights including best interests, dignity and equality, the Court found that the Department of Basic Education (DBE) was acting unconstitutionally in not permitting children to continue receiving education in public schools purely because they lack identification documents.

The Court ordered that all children without documentation, including illegal foreign children, be admitted to public schools. The evidence we provided on children without birth certificates paved the way for DBE’s response – that admitted to a larger number of unregistered children, pivotal to the case’s successful outcome. The judgment now provides essential jurisprudence to advocate against exclusions from other government services, such as grants and health services (see page 19).



“
an estimated 500,000 children do not have birth certificates and most undocumented children are entitled to South African citizenship.”

1 Centre for Child Law and others v Minister of Basic Education, Minister of Home Affairs and others. Case no: 2840/2017

Our work and reach

Violence against women and children continued to make the headlines during 2019. The brutal murder of Uyinene Mrwetyana, a student at the University of Cape Town, triggered country-wide protests against gender-based violence (GBV). The CI partnered with the Dullah Omar Institute, Centre for Child Law, South African Medical Research Council, Institute for Security Studies and the Perinatal Mental Health Project, and collectively published an open letter to the President. We called for a more radical approach to ending violence – with a recognition of the deep links between violence against women and children, and dedicated funding for programmes for evidence-based prevention and early intervention services. The calls for increased efforts by the government occurred whilst the Interim Steering Committee on Gender-based Violence and Femicide was drafting a [National Strategic Plan \(NSP\) to address GBV](#). We provided technical assistance to the interim steering committee in

the development of the NSP through our contributions to the Technical Task Team and drafting of the NSP. Our contribution ensured that children remained visible in the plan and that evidence-based prevention interventions span the life course – from birth to adulthood.

Finding solutions and tracking progress to prevent violence is key to ending violence against women and children. We partnered with the World Health Organization (WHO) on the [Global Status Report on Preventing Violence Against Children](#), where we served as national data coordinator and facilitated an in-country process of data collection across all government departments and targeted civil society organisations. The data collection culminated in a consensus meeting in September 2019, and the report is expected to be released in mid-2020. The report aims to identify gaps, enhance the implementation, and boost country efforts towards violence prevention.

■ COURT

Concourt rules spanking is unconstitutional

Unanimous judgment against common law defence



We also partnered with Kheth'Impilo to conduct a **process evaluation of the child protection component of the Global Fund's Young Women and Girls Programme** in ten districts in South Africa. The evaluation highlighted the importance of developing an evidence-based theory of change which explains the links between violence against women and children and HIV, and how the child protection component supports the HIV prevention goals at the start of the programme. Developing an understanding of how to respond to violence effectively in South Africa is critical to breaking the intergenerational cycle that drives violence.

Jelly Beanz and the CI hosted the **International Society for the Prevention of Child Abuse and Neglect Regional Conference** in August 2019 in Cape Town. The focus of the conference was on protecting Africa's children from trauma, as well as recovery from violence. Prof Mathews delivered the plenary address, which focused on the intergenerational transmission of trauma and need to intervene early to reduce the long-term negative psychosocial effects. The conference

brought together researchers and practitioners from across the region as well as some international guests.

From the early 2000s, the Foster Child Grant (FCG) has been used to support orphans, but the foster care system has been unable to cope with the increased demand. The **"Foster Care Crisis"** came to a head in November 2019, as the Department of Social Development (DSD) failed to meet the requirement of the North Gauteng High Court Order to develop and legislate a "comprehensive legal solution" before the extended deadline. Thousands of children were at risk of losing their grants. The CI in partnership with the Centre for Child Law strategised to ensure that children do not lose their FCGs. On 26 November 2019, the High Court granted a further extension of 12 months, with the requirement that the DSD report on progress every three months. The CI and our civil society partners will continue to monitor DSD's progress on this matter in 2020.

“
The President has recognised GBV as “a crisis that is tearing our society apart”



Staffing and governance

In the first half of 2019, we bade farewell to Aislinn Delany and Stephanie Röhrs as their contracts came to an end, while Jenna-Lee Marco returned from maternity leave and contributed to research projects on a part-time basis. During 2019 the CI embarked on an organisational development process to guide the CI in developing and implementing plans for *organisational transformation*. To this end a governing board task team worked with the CI’s director to appoint two consultants. The OD consultants worked with the CI on a process that focussed on deepening our awareness of organisational culture and diversity.

We then embarked on a process of reflecting on our organisational culture and envisioning what a transformed CI might “look like”, in line with the broader university’s transformation agenda. Towards the end of 2019, we were successful in recruiting three new staff members who joined the CI in 2020.

Closing remarks

The year has been a landmark moment for child rights in South Africa, with the Constitutional Court judgement to end corporal punishment in the home. We must celebrate this win and acknowledge that this could only be achieved through the collective efforts of partners in the sector.

The President has recognised GBV as “a crisis that is tearing our society apart”, and he announced a five-point emergency plan at a joint parliamentary sitting in September 2019. The plan has an explicit focus on ending violence towards women and girls. Yet it is of critical importance that it also addresses violence during childhood with a focus on both girls and boys – as this is an essential element in reducing GBV. It is therefore vital that we continue to engage in these processes and forge a closer relationship between the women’s and children’s sectors, as these two problems are inextricably linked and must be addressed jointly.

Prof Shanaaz Mathews,
Director, Children’s Institute



MONITORING CHILD RIGHTS

EARLY CHILDHOOD DEVELOPMENT

PROTECTING CHILDREN FROM VIOLENCE

REDUCING POVERTY & INEQUALITY



Monitoring child rights

South African Child Gauge 2019:

Child and adolescent health – Leave no one behind

CI continues to produce its annual flagship publication on the status of children in South Africa. The 2019 *South African Child Gauge* focused on **child and adolescent health** – reflecting on current and emerging challenges, and identifying opportunities to build a more resilient, responsive and child-centred health care system.

The book was edited by Maylene Shung-King (School of Public Health, UCT), Lori Lake (Children’s Institute), Michael Hendricks (Department of Paediatrics and Child Health, UCT) and David Sanders (School of Public Health, UWC) and brought together over 70 contributors including Minister of Health, Dr Zweli Mkhize, and the honourable First Lady, Dr Tshepo Motsepe.

A series of 11 chapters motivate for a life course approach and greater investment in early childhood and adolescence to disrupt the inter-generational cycles of violence, poverty and malnutrition. This includes putting children at the heart of the health care system; adopting a whole-of-society approach to address the social and environmental determinants of health; making children visible in data and decision-making; and prioritising the most vulnerable to ensure that no child is left behind.

The preliminary findings were presented at the national Child Health Priorities Conference, and the report was formally launched in Cape Town on International Human Rights Day. The launch generated significant media attention with 96 headlines across broadcast, print and online platforms – including a series of seven opinion editorials – with an estimated value of nearly R8.3 million.

We printed 2,000 hard copies of the book for free distribution to key recipients in government departments, academia, development and civil society organisations. The book poster and policy brief can be downloaded from <http://www.ci.uct.ac.za/cg-2019-child-and-adolescent-health>.

We are grateful to the Standard Bank Tutuwa Community Foundation, DSI-NRF Centre of Excellence in Human Development at Wits University, UNICEF South Africa, and the Desmond and Leah Tutu Legacy Foundation for their partnership and generous support of the Gauge project.



“ A call to make children visible in data and decision-making; and prioritising the most vulnerable to ensure that no child is left behind.



Children Count

Our **Children Count** project has run continuously for 13 years and is firmly established as one of the most reliable sources of statistical information on children in South Africa.

Children Count monitors trends in the child population through statistics drawn from national surveys and administrative data. Indicators are organised under categories or “domains” that link with rights frameworks: child demography (including orphaning, care and parental co-residence), poverty, education, health, nutrition, living environments and child protection.

Where the data allow, the statistics for each indicator can be broken down by province, area type, age group, sex, race or income quintile.

Through *Children Count* we can see that income poverty rates have fallen consistently since the early 2000s but levelled off in recent years, leaving large numbers of children in households with insufficient income to cover even their basic nutritional needs. Orphaning rates rose through the early 2000s but decreased sharply after 2009, due to antiretroviral roll-out and improved parental survival. Even so, there has not been an increase in the share of children who live with both their parents and most children in South Africa do not have a co-resident father.

There has been a marked improvement in access to early learning programmes, and the gap in access between rich and poor has narrowed.

The vast majority of school-aged children attend school even when it means walking long distances – yet school attendance does not necessarily translate into quality learning or post-school education or work opportunities: over a third of young people aged 16 – 24 are not in education or training and are also not employed. These and other indicators help with planning, advocacy and reporting to international rights bodies.

Selected *Children Count* indicators are published in the *Child Gauge* every year, and the full set is made available through our dedicated website (www.childrencount.uct.ac.za) where users can interact with the data to select years or specific comparisons and view different graphs and tables.

The screenshot displays the homepage of the Children Count website. At the top, there is a header with the Children Count logo and the title "Statistics on children in South Africa". Below this is a navigation menu with links to Home, Demography, Income poverty & grants, Housing & services, Education, Health, Nutrition, and Child abuse & protection. There are also links for Contributors & Contacts, Publications, and Children's Institute. A main section titled "Welcome to Children Count" provides an overview of the project and its data. A "New" banner highlights a "COVID-19 and children" special brief, which discusses the impact of social grants on children and families during the economic fallout of the pandemic.

Monitoring children’s participation in child protection

The **International and Canadian Child Rights Partnership (ICCRP)** was established to explore and better understand the connections between children’s rights to participation and protection within national and international child protection efforts. Phase III commenced in 2019, where we analysed the data and presented the findings together with our **Child and Youth Advisory Committees (CYAC)**. The year’s highlight was bringing most of the international CYACs together for the first time in South Africa. Seven young people and two of the academics came to Durban in July to attend both the *22nd NACCW Biennial Conference / 4th CYC-Net World Conference*, and the *9th NACCW Youth Leadership Conference*. The team facilitated workshops at both conferences and worked on a dissemination strategy.

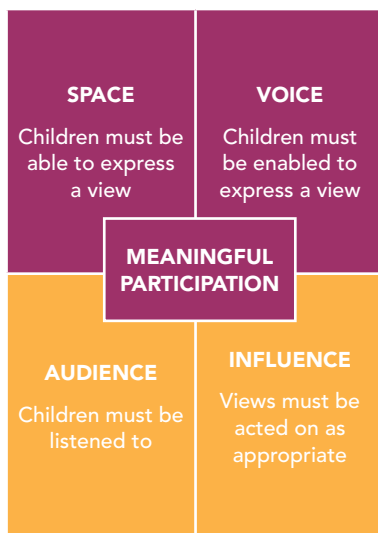
Findings from the study: Using Lundy’s (2007) model to analyse data from three sites - Children’s Rights Council of Volta Redonda (Brazil), the Isibindi Youth Forum (South Africa), and the New Brunswick Youth Voice Committee (Canada) - we found several comparable experiences. Adults viewed children’s participation as having an intrinsic developmental value, helping them to learn to express themselves and learn about democracy, whereas children and young people are adamant that their right to be heard is only fulfilled if they have influence over current pertinent decisions. They have access to dedicated spaces for their participation supported by adults. However, they rarely attract an audience of key decision-makers and therefore lack genuine influence.

In South Africa, laws and policies promote participation and over the last two decades, structures or processes have emerged that give children and young people an opportunity to engage in inter-generational dialogue – for example, the school governing boards. However, cultural practices define how people engage within shared spaces and respect for age is a fundamental barrier, so although youth are present, they are rarely heard.

The National Association of Child Care Workers established the Isibindi Youth Forums to give youth a voice in their Safe Park programmes, but the experience has proved broadly transformational. The child and youth care workers explain that their training enables them to interact with children and young people as equals. This experience of intergenerational dialogue within the Safe Parks helps improve service delivery and challenges social norms in more private spaces. The same professionals provide community-based family support services. Traditionally, children were excluded but are now invited to family meetings. Children now have an opportunity to influence decisions about family support services, and report that their elders are more open to including them in other decisions about their wellbeing and the family.

For published papers and resource materials see: <https://www.ryerson.ca/international-canadian-child-rights-partnership/>

Conditions for meaningful participation (Lundy, 2007)



Early childhood development



Early Childhood Review

Drawing on the Children Count project, which always provides age breakdowns of statistics on children, we developed a set of indicators we developed a set of indicators about young children and these evolved into a dedicated publication, the **South African Early Childhood Review (ECR)**, produced in partnership with Ilifa Labantwana, Innovation Edge, Grow Great and the Department for Planning, Monitoring and Evaluation. First published in 2016 and again in 2017, the third issue was launched in November 2019.

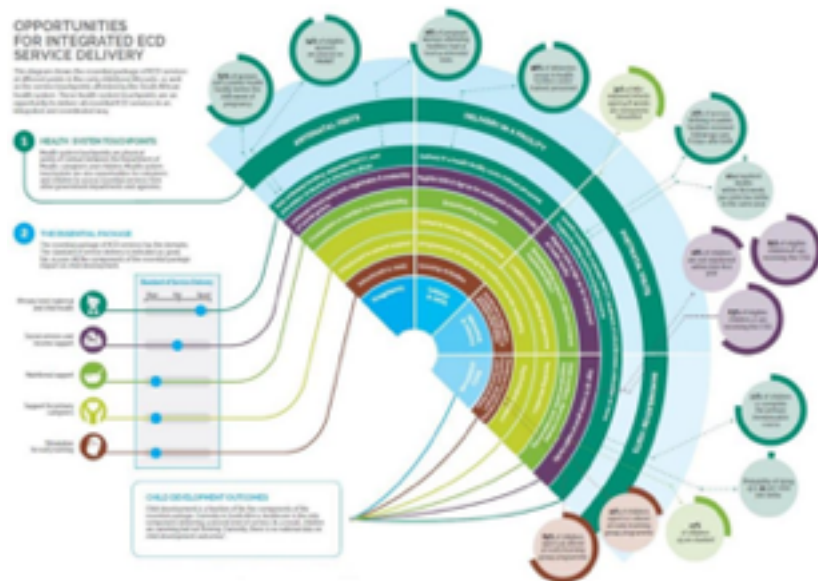
The ECR presents information on progress towards universal access to an essential package of early childhood services, like those outlined in the National Integrated Early Childhood Development Policy. The essential package consists of five domains, each with a range of services that every child should benefit from: maternal and child health, nutritional support, primary caregiver support, social services, and early learning. The ECR provides data and commentary on carefully selected indicators on the status of children under the age of six, as well as service delivery progress across these domains. It also highlights information gaps and makes suggestions to improve data systems.

The 2019 issue focused specifically on opportunities for integrated ECD service delivery. For

example, the health system provides important touchpoints: Antenatal visits provide an opportunity to check the nutritional status and mental health of the expectant mother; children's birth registrations could be completed in maternity facilities; high immunisation rates mean that the vast majority of children are seen by clinics – a great opportunity for nutritional supplementation and assisting with social grant registrations. By placing the young child at the centre of the picture, the ECR motivates for a holistic approach to screening, service delivery and referral, which in turn requires better collaboration across departments.



SOUTH AFRICAN
EARLY CHILDHOOD
REVIEW 2019





One in three parents prioritised their children's education, while others prioritised the attainment of practical or socio-emotional skills. The most common barriers to preschool and school attendance were poverty, ignorance of the importance of early education, and a lack of documentation. Poor children and those with disabilities were noted as most excluded from early schooling.

Takalani Sesame study: The educational and socio-emotional needs of young children in South Africa

Sesame Workshop International commissioned the Children's Institute to undertake research to inform the further development and implementation of the Takalani Sesame media and educational programmes in South Africa. The study explored the educational and socio-emotional needs of young children, aged 3 – 8 years, in the Free State, Gauteng and Eastern Cape. Interviews focussing on children's development were conducted with primary caregivers¹, early childhood development (ECD) practitioners and other stakeholders and explored issues of diversity and inclusion.

We found that parenting challenges were common and included parent-child conflict that arises due to children's knowledge of their rights. Discipline issues, single parenting and the gendered nature of parenting styles were key themes that emerged. Parents were concerned that they could no longer use corporal punishment as a form of discipline, and a primary fear was the 'bad' or 'unsafe' environments in their communities.

Parents appeared to struggle with understanding their children's emotions and behaviour. Managing children's 'bad' behaviour was an area of

concern. Stakeholders suggested parenting programmes as an important mechanism to assist parents.

Diversity issues were noted to impact on young children's well-being. Young children living in difficult circumstances, such as child-headed households, were considered to experience the greatest impact, followed by disability, nationality and religion. Disability and chronic illnesses were a source of mockery, bullying and stigma.

The study highlighted that basic healthcare, schooling and social services are available in most sites, yet these services are often inaccessible and understaffed. Social work services were difficult to reach and slow to respond.

Lessons drawn from this research have prompted Takalani Sesame to strengthen their focus on supporting healthy and respectful adult-child relationships; balance life-skills development and educational attainment; promote access to early learning programmes; promote inclusion and service access for children with disabilities; provide information to support positive parenting and promote acceptance and tolerance of differences. We will continue conversations with the programme into 2020 to integrate lessons learnt.

¹ The terms 'parents' and/or 'caregivers' are used interchangeably to describe the individuals who perform the primary caregiving and parenting role, including both biological and social 'parents'.

Protecting children from violence



Protecting children from violence in the home

Litigation and evidence-based decision making

The Children's Institute and civil society partners have been campaigning to end corporal punishment at home for almost two decades. On 18 September 2019, Chief Justice Mogoeng Mogoeng announced the Constitutional Court's decision on corporal punishment in the home.¹ In a unanimous judgment, the court declared the common law defence of "reasonable and moderate chastisement" invalid and unconstitutional. This means that the law no longer protects parents who use force, even a light smack, or the threat of force, to discipline a child.

In addition to the legal arguments made during the hearing, the Children's Institute and other experts submitted evidence showing that corporal punishment is:

- ▶ inherently degrading,
- ▶ ineffective,
- ▶ can lead to more severe forms of abuse,
- ▶ has negative long-term effects on individuals, and
- ▶ stimulates an intergenerational cycle of violence.

The court was also presented with evidence that showed that building the capacity of parents to use positive, non-violent discipline improves the quality of the parent-child relationship and can reduce other forms of violence, including intimate partner violence.

The court concluded that corporal punishment is a violation of the best interest principle and children's rights to dignity, equality and freedom from violence. Because parents can use positive, non-violent forms of discipline to raise their children, it is not justifiable to hit children.

Media advocacy to promote accurate reporting and shift public discourse

Reporters often have extremely short deadlines, do not know where to find accurate information or expert commentary, and editors are often wary of reporting on sensitive issues for fear of breaking the law and being sued. In response to these challenges, we developed:

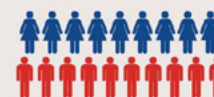


50%

of learners reported physical punishment at school

School Violence in South Africa (Burton et al., 2012)

HOME



30%

of parents said they had smacked their child in past week or past month

Corporal Punishment of Children: A South African National Survey (Dawes et al., 2005)

¹ Freedom of Religion South Africa v Minister of Justice and Constitutional Development and Others [2019] ZACC 34 at para 74

“

the workshop provided a safe space for journalists to ask the less obvious and difficult questions, and have some in-depth discussions about reporting on children that isn't always possible on deadline

An online repository on violence against children (VAC)

We designed an online repository to make evidence on VAC accessible to journalists. It includes easily accessible materials developed for reporters based on academic research and published work by the CI and other experts for use by investigative journalists and those wanting more detailed information.

<http://www.ci.uct.ac.za/reporters-resources-VAC>

Training for the media

In partnership with Media Monitoring Africa (MMA), we developed a one-day training course for reporters covering ethical guidelines and evidence on different aspects of violence against children. Thirty-three journalists, producers and editors participated in two workshops in Cape Town and Durban. The first workshop took place just before Child Protection Week and focused on corporal punishment, whilst the second addressed child murder. Feedback and reflections from participants were extremely positive:

“At Cape Town TV, we cover a range of issues with a special focus on violence affecting women and children, and the workshop provided an opportunity to not only learn about ethical reporting practices but also gave insight on the legal framework around reporting on children. The workshop also provided an important overview on corporal punishment during an important period when the legislation on this was in the process of being amended, allowing us to report accurately and ethically on the issue going forward...most importantly, the workshop provided a safe space for journalists to ask the less obvious and difficult questions, and have some in-depth discussions about reporting on children that isn't always possible on deadline or in general. I think journalists, and especially younger, less experienced journalists, would benefit greatly from more workshops like these in the future.”
(Lenina Rasool, TV producer.)



Journalist, Producers and Editors attending the Media Workshop in Cape Town

Reducing poverty and inequality



Improving birth registration

All children in South Africa are entitled to a name and nationality from birth. The state confers this through issuing birth certificates and, for children who are citizens, a South African identity number. We estimate that at least 500 000 children in South Africa do not have birth certificates and that around 80% of these are South African.

The state requires births to be registered within 30 days, but it is difficult for some families to complete birth registration within this time. Late birth registration becomes much more difficult, especially after a year, as it requires additional supporting documents and an interview process before finalisation. Approximately 200 000 late birth registrations are recorded by the Department of Home Affairs each year. However, there are many more children who should be accessing late birth registration but struggle to do so.

Birth certificates are the gateway to a range of other services that are critical for children to reach their developmental potential. As the state digitalises its administrative systems, the 13 -digit ID number is becoming a prerequisite for accessing government programmes and services such as grants, schooling and health care.

What is CI's contribution

- ▶ Estimating the number and profile of children who are excluded;
- ▶ Providing legal services to unregistered children and their caregivers;
- ▶ Analysing and describing the obstacles to late birth registration based on our clients' experiences;
- ▶ Assisting caregivers to access social grants for their children when birth registration is delayed, by using a little-known regulation that allows for this (Reg 11(1) of the Social Assistance Act);
- ▶ Communicating the evidence to government, the courts and civil society at strategic moments, e.g. via expert affidavits in public interest cases; in submissions when the law is being reformed; in other publications and the media;
- ▶ Advocating for the necessary reforms to the law and services, including through litigation where necessary.



Tess Peacock and Aphiwe Nobhala interviewing a family in Qunu, Eastern Cape, March 2019



Mbonisi Nyathi providing legal services to a caregiver in Qunu, Eastern Cape, March 2019

“
1 million children
within the
public-school
system were
undocumented

Activities and progress during 2019

We quantified and analysed the profile of children without birth certificates and brought this evidence to the attention of the High Court through an expert affidavit in the “Phakamisa” case. The case, brought by the Centre for Child Law and a school governing body, challenged the Department of Basic Education’s (DBE) school funding policy, which excluded learners for whom ID numbers were not provided. Our expert affidavit prompted the DBE to file their own administrative data with the Court, revealing that approximately 1 million children within the public-school system were undocumented, of whom 80% were South African. The DBE’s justification for its exclusionary policy failed to meet the high standard required for the exclusion of so many children, contributing to the Court finding the policy to be unconstitutional, and ordering the DBE to admit and fund all unregistered children.

In early 2019, we ran a law clinic for paralegals and teachers in the rural Eastern Cape and enrolled 50 cases of unregistered children from the villages surrounding Mthatha. Over the course of the year, we provided legal services to the caregivers who struggled to register their children, while also recording the processes and systemic barriers encountered along the way. The barriers were particularly intractable in the case of orphaned and abandoned children living with relatives, children in the care of unmarried fathers, and children of mothers without their own IDs or birth certificates. We established a working relationship with the local Home Affairs offices and entered a process of meaningful engagement to find solutions.

Towards the end of 2019, we secured additional funding to expand the legal services project beyond the Eastern Cape to sites in the Western Cape and Gauteng.

Child Support Grant: Expansion and inclusion

By the end of 2019, the Child Support Grant (CSG) reached 12.7 million of the 20 million children in South Africa. Despite this widespread access to the CSG, 59% of children (11.7 million) continue to live below the upper bound-poverty line, 33% of children (6.4 million) live below the food poverty line, and a quarter of all children under five are stunted. A further challenge is that approximately 1.8 million eligible children are excluded from the grant despite being eligible, with systemic barriers to birth certificates and identity documents being a substantive factor.

The high rates of poverty and stunting could be substantially reduced by increasing the monthly value of the CSG and ensuring that all eligible children can access the grant.

Increasing the value of the CSG

The CSG remains the lowest social grant in SA at R430 in October 2019. With a value below the food poverty line of R561/capita, it is not enough to provide for basic nutrition. During 2019 we continued to produce evidence demonstrating

the need to increase the value of the CSG. This was published in the 2019 South African Child Gauge, on the Children Count website (www.childrencount.uct.ac.za) and in the 2019 Early Childhood Review (ECR).

Our contribution to the Budget Justice Coalition's (BJC) submissions to Parliament's Finance Committees in February and October 2019 highlighted the low value of the CSG and alerted Parliament to the recommendations of the United Nations (UN) and African Union (AU) Human Rights Monitoring bodies calling for an increase to the CSG amount. For copies of the submissions see <https://budgetjusticesa.org/advocacy/>.

Ensuring children without birth certificates can access the CSG

Regulation 11(1) of the Social Assistance Act allows children without birth certificates to access social grants using alternative identifying documents such as the child's Road to Health Card. However, it is implemented with reluctance by officials, and the CSG is paid only for 3 months. As a result, while it is estimated there are **500 000 children in SA without birth certificates**, only 3 000 per year are able to access the CSG using Regulation 11(1).

Together with our partner, the Legal Resources Centre, we successfully drew attention to and changed some of the systemic barriers preventing access to grants for children without birth certificates. We provided legal services to families in the rural villages surrounding Mthatha in the Eastern Cape; documented the barriers they

experienced; and communicated this evidence to the local and national South African Social Security Agency (SASSA) offices. Through this project, we assisted individual children to access grants, prevented their grants from being terminated after three months, or obtained reinstatement and back-pay if they were terminated.

On a systemic level, we challenged the requirement that applicants must submit proof to SASSA that they had successfully 'lodged' a birth certificate application. Our evidence showed that relatives caring for unregistered abandoned or orphaned children, and unmarried fathers, are unable to meet this requirement. SASSA Head Office responded to our letters of demand by issuing a practice note to all SASSA offices, clarifying that:

(a) proof of application to Home Affairs is not a requirement at the grant application stage; it is only a requirement to prevent the grant being terminated after three months, and

(b) proof of a 'visit' to Home Affairs, for example, a Home Affairs referral letter to social workers, is sufficient proof to prevent the grant being terminated after three months – i.e. the applicant does not have to prove that they have successfully lodged a birth certificate application.

SASSA Head Office also agreed to revise other aspects of its Regulation 11(1) protocol in 2020, given that our cases had demonstrated many challenges.



1.8 million eligible children are excluded from the child support grant

Child Support Grant Top-Up for orphans in the care of relatives

The CI has been advocating for a legal solution to the long-standing crisis in the foster care system. The solution should ensure that: (a) orphans in the care of relatives can access an adequate social grant directly from South African Social Security Agency (SASSA), without the involvement of social workers or the courts (i.e. the CSG Top-Up instead of the Foster Care Grant), and (b) social workers and courts are freed up to focus on prevention and protection services for all children in need.

This requires amendments to two laws: The Social Assistance Act, which regulates social grants, and the Children's Act, which regulates foster care placements.

Advocating for Parliamentary oversight

In the second half of 2019, together with our partner, the Centre for Child Law (CCL), we undertook parliamentary and media advocacy to activate a Parliamentary oversight process. Our advocacy informed and pressurised the Portfolio Committee on Social Development, which in turn held the Minister accountable to a regular reporting schedule on her progress in reducing the foster care backlog and tabling the two amendment bills.

Social Assistance Amendment Bill

Fully engaged on the urgency of the issue, the Portfolio Committee adopted a tight programme to pass the Social Assistance Amendment Bill to enable the introduction of the CSG Top-Up as a replacement for the use of the Foster Care Grant (FCG) for orphans in the care of relatives. In late 2019, the CI and partners made written submissions supporting the CSG Top-Up and providing evidence on the foster care crisis and how the CSG Top-Up could contribute to the solution.

While the bill was being considered in Parliament, the Directorate for Social Security began drafting the regulations that would specify which orphans are eligible and what proof relatives would need to provide to qualify for the top-up. We engaged on the early drafts via written commentary and presented our evidence at an inter-departmental team meeting (SASSA, Department of Social Development (DSD) and Department of Home Affairs (DHA)).

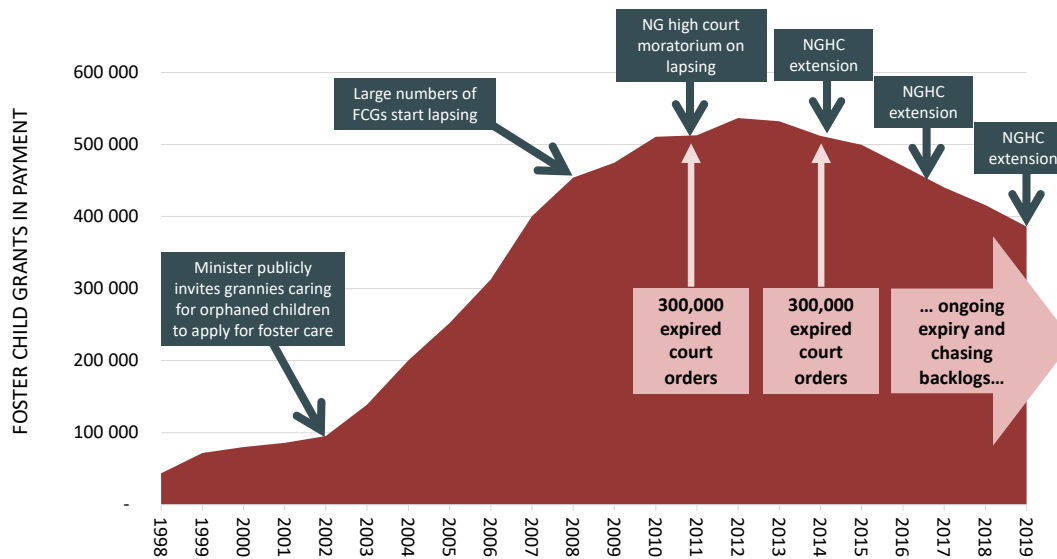
Children's Amendment Bill

Since 2014, when the Department started drafting the Children's Amendment Bill, the CI has been engaging with the clauses affecting kinship care and foster care as well as keeping a network of children's sector organisations informed about the bill's progress and opportunities for participation.

In early 2019, the draft bill was approved by Cabinet. However, it did not contain the amendment required to reduce the pressure on the foster care system. Together with CCL, we hosted a caucus for civil society partners to strategise on this gap as well as other amendments affecting the child protection system as a whole. This caucus resulted in a joint letter by 22 civil society organisations (CSOs) to the newly appointed Minister, drawing attention to the areas of concern in the draft bill and asking

for more consultation. While the Minister replied formally that further consultation would only happen via the Parliamentary process, Department officials met informally with some of the 22 CSOs to discuss some of the problematic amendments.

Later in the year, we hosted a workshop of civil society organisations and provincial government officials to test, via role play, the proposed law reform in both bills against real-life case studies. The role plays illustrated the pivotal role that a CSG Top-Up could play in influencing social worker and court decisions, but that an amendment to the Children's Act was still necessary to clarify which children can be placed in foster care. Without this amendment, there was a risk of inequality, with some orphans accessing the FCG of R1 000 and others the CSG Top-Up of R650.



Sources: 1998-2007: National Treasury Intergovernmental Fiscal Review; financial year-end figures
2008-2019: South African Social Security Agency SOCPEN monthly reports; financial year-end
Compiled by Katharine Hall, Children's Institute, UCT



Teaching and learning

Child rights education: Building leadership for child health

Children in South Africa continue to die of preventable causes such as HIV, diarrhoea, respiratory infections and injuries. Much of the burden is rooted in the broader social determinants of health as poverty, hunger, violence and inadequate housing, water and sanitation continue to compromise children's health, survival and development. These problems are compounded by poor access to and quality of health care services.

National Health Insurance offers an important opportunity to promote universal health care and reduce inequalities between public and private, urban and rural health care. It also aims to strengthen the primary health care system by introducing district clinical specialist teams to provide leadership for child health at district level.

UCT's Postgraduate Diploma in Community and General Paediatrics aims to support these efforts by developing a cohort of paediatricians who can advocate for child health, forge inter-sectoral partnerships, enhance the quality of care and develop innovative health systems responses to address the specific burden of childhood illness within their catchment area. Since it was launched in 2015, the PG Dip has educated 33 public health paediatricians and medical officers. A further 16 are enrolled for the 2020 intake.

The Children's Institute convenes the Child Rights and Advocacy module which uses children's rights as a tool to interrogate current practice and enhance the quality of care. There is a strong emphasis on child participation. We draw on the work of RX Radio – a radio station by and for children at Red Cross Children's Hospital – to make children visible and promote their participation in health care and decision-making: A process that disrupts the dominant medical discourse where "doctor knows best" and "children are best seen and not heard".

This engagement with the views of children and caregivers has a profound impact on how paediatricians see and respond to their patients: *"It's like the sunglasses were taken off my head. This course opened my eyes, broadened my knowledge and understanding, and made things seem brighter and clearer...it made me realise the possibilities for change."* [Doctor, Greys Hospital, KZN]

"It's like the sunglasses were taken off my head. This course opened my eyes, broadened my knowledge and understanding, and made things seem brighter and clearer...it made me realise the possibilities for change."

[Doctor, Greys Hospital, KZN]

Improving pain management at Madwaleni District Hospital

In 2019, one of our students from Madwaleni District Hospital in the Eastern Cape recognised that many children were experiencing unnecessary pain and distress during medical procedures. Most of the children were too young to articulate their feelings in words. Instead, they expressed their fear, pain and distress through nonverbal cues such as crying, kicking and being difficult to console. Poor management of painful procedures is a violation of children's best interests and their right to the highest attainable standard of health, as well as their rights to dignity, physical and psychological integrity, and protection from all forms of torture, inhuman or degrading treatment.

The doctor used her advocacy project to develop a protocol for the management of painful procedures to relieve unnecessary pain and distress, and ensure children have access to adequate support, sedation and pain relief. She drew on best practice guidelines and adapted these for use in a rural setting. She then used an RX Radio podcast to raise awareness of children's experiences of procedural pain and what staff can do to make pain easier (for example, telling children the truth, talking them through painful procedures, and having their caregiver present).

Madwaleni's Pain Protocol

Updated April 2019

Consider Who May Feel Pain:

- ❑ No child should have to endure a painful procedure without adequate pain relief
- ❑ For young children, look for non-verbal clues – for example quivering chin, clenched jaw, kicking legs, rigid movements, crying and difficulty in reassuring and consoling child, and take the caregiver's opinion seriously
- ❑ For older children – give them a chance to speak, listen to what they have to say and respect their opinions

Non-Pharmacological Methods of Pain Management:

- ❑ Explain the procedure to the child and caregiver
- ❑ Encourage the caregiver to stay with the child
- ❑ Offer the child age- and maturity-appropriate choices
- ❑ Use distraction techniques – singing, videos etc
- ❑ Soothe with breastmilk for <6 months old
- ❑ Avoid unnecessary painful procedures

Pharmacological Methods of Pain Management:

- ❑ 2 hours before procedure:
 - paracetamol 20mg/kg PO
- ❑ 30 mins before procedure (to be administered by doctor or professional nurse):
 - ibuprofen 10mg/kg PO
 - ketamine 6mg/kg PO
 - midazolam 0,25mg/kg PO } Mix into sweet drink
- ❑ Monitoring and recovery – Monitor O₂ sats and level of consciousness until fully awake



Partnerships



A foundational goal of the CI is to foster inter-disciplinary research across the university and with other academic and research bodies in South Africa and beyond. To achieve this goal, we promote building and maintaining multidisciplinary partnerships and collaborations to strengthen our work and reach.

National partnerships

We continued to work closely with the Centre for Child Law and Legal Resources Centre on our legal projects in the areas of the Children's Amendment Bill, the foster care crisis and late birth registration. The **corporal punishment constitutional court case** was an excellent example of building partnerships to amplify our voice. This consisted of a successful partnership between the CI, Peace Centre, Sonke Gender Justice, Centre for Child Law, Save the Children SA, The Parent Centre, Global Initiative to End All Forms of Corporal Punishment, Department of Social Development, and South African Council of Churches, which ensured that we were able

to share the advocacy messaging and achieve a monumental outcome for child rights in South Africa.

We solidified our partnership with the Perinatal Mental Health Project at the University of Cape Town to adapt and pilot the **Nyamekela4Care training programme** as a component of the Multidisciplinary Teams Project to strengthen the management of child protection cases at pilot sites in the Western Cape. We have also continued our relationship with the SA Medical Research Council through the implementation of the third **National Homicide Study**, with Prof Mathews as a co-investigator. Data collection

started in late 2019. Through the [Child Death Review project](#), we have continued an important partnership with the Department of Health, SAPS, the National Prosecuting Authority and

the Department of Social Development – with the Department of Health taking the lead on the expansion of the project in the Province.

Regional and international partnerships

Our relationship with Prof Ria Reis at Leiden University has resulted in a four-year multi-country partnership on a [“First 1,000 Days” research project](#). The project aims to develop an in-depth understanding of what would be acceptable, feasible and sustainable strategies to integrate maternal group care into health systems for antenatal and postnatal care during the First 1,000 Days. This project will run from early 2020 until 2023.

Our relationship with Prof Kay Tisdall at [Edinburgh University](#) has resulted in a [Global Challenges Research Fund multi-year grant](#): supporting early learning programmes in fragile contexts. The study has a strong emphasis on participation and community engagement, with the Vrygrond community identified as the study site.

We also secured a GCRF grant in partnership with Queens University Belfast (QuB), through our relationship with Prof John Pinkerton. This project will explore the potential of formal youth mentoring as an effective, scalable approach to interrupting the intergenerational transmission of poverty for socially marginalised young people, in particular youth living in and leaving alternative care. We hosted the Queen’s team in September 2019 and started the data collection process.

We collaborated with the [African Child Policy Forum](#), a pan-African think-tank on child policy based in Addis Ababa, to consider strategies to strengthen child rights accountability mechanisms on the continent. We hosted a one-day validation workshop of a small group of experts at the CI, bringing together a group of child rights experts from across the region to consider a framework to monitor child rights implementation at a national level. Katharine Hall, a senior researcher, continued to serve on the standing committee of the [International Society for Child Indicators \(ISCI\)](#) and was invited as a guest lecturer to convene a short master’s degree programme at Goethe University in Frankfurt in early 2019.

Our relationship with the [International Canadian Child Rights Partnership](#) has been deepened, and the partnership has expanded. Recent additions include the Global Partnership to End Violence, the Violence Lab in the University of Edinburgh, World Vision International, Save the Children International, and over 50 leading academics and NGOs working with children. A seven-year funding proposal has been submitted to the Social Sciences Research Council of Canada to continue work in the area.



Finances

The Children's Institute is a **soft-funded unit** within the University of Cape Town. Staff salaries, operational and project costs are almost entirely covered through external grants and donations. UCT's Faculty of Health Sciences contributes to the Director's salary from its general operating budget, and a small amount of income is generated from teaching and publications.

We pay a levy to the university, which in turn supports the CI by providing access to its academic and administrative infrastructure, and through the allocation of office space. CI also makes contributions to the Faculty of Health Sciences finance hub to cover our share of financial support and purchasing services. Within the CI, a **finance committee** meets every month to monitor income, expenditure and cost recovery.

Income

Total income for the financial year 1 January – 31 December 2019 was R10.4 million. Of this, R9.6 million (93%) came from grants and commissioned research projects.

UCT contributes a third of the Director's salary and makes further financial contributions through transfers for teaching and secondment, publications and other occasional allocations.

A total of R473,800 was received through the university in 2019, amounting to 5% of all income. A further 3% (R267,326) was generated from interest on investments.

As a soft-funded unit that must continuously work to ensure sustained funding, we have been fortunate to benefit from core grants since our inception; first from Atlantic Philanthropies and then from the ELMA Foundation. The most recent three-year core grant from the ELMA Foundation concludes at the end of 2021. We were fortunate to enter into a three-year core funding agreement with the Constitutionalism Fund, from 2019 to 2021. The Raith Foundation also continued to support our advocacy initiatives and engaged scholarship on strengthening the child protection system and social assistance reform.

We secured substantial contracts for two evaluations (for Sesame Workshop and The Global Fund through Kheth'Impilo) and diversified the funding for our annual publication, the *South African Child Gauge*, with the inclusion of a grant from the Desmond and Leah Tutu Foundation – alongside our long-standing partners, the NRF/DST Centre of Excellence in Human Development at Wits University, the Standard Bank Tutuwa Community Foundation and UNICEF South Africa.

Expenditure

Expenditure for the year was R10.15 million. Staffing costs, including contributions to faculty finance salaries, accounted for 67% of the expenditure. Project activity costs accounted for 24% of expenditure – this was higher than usual due to the two large evaluation consultancies which required primary research that was heavy on direct costs, and for which funding was specifically secured.

Balances

The opening balances in January 2019 stood at R5 million, of which just under R3.8 million was held in CI reserves and unrestricted funds, while R1.2 million was in project balances for funded projects continuing into 2019. Another R10.4 million was raised during the year.

Expenditure was R10.15 million. Cost recovery improved from previous years, with 96% of all salary and operational expenses being cost recovered.

Reserves are important because the funds are unrestricted and can be used to ensure the CI's sustainability in times of financial pressure. The opening balance of CI reserves in January 2019 was just under R3.78 million, and this value remained stable over the year, with a balance of R3.77 million at year-end.

R1.5 million in project funds was carried forward to 2020 for continuing projects.

OPENING BALANCES 2019	
Project funds and reserves as at 1 January 2019	R5 072 733
INCOME BY FUNDING SOURCE	
Income from grants and contracts 2019	R9 634 846
Constitutionalism Fund	R1 666 666
The Raith Foundation	R1 386 179
Sesame Workshop International	R1 385 858
The Elma Foundation	R1 000 000
Kheth'Impilo	R800 000
NRF/DST CoE in Human Development (Wits)	R600 000
UNICEF South Africa	R589 393
Standard Bank Tutuwa Foundation	R500 000
World Childhoods Foundation	R463 861
The Desmond & Leah Tutu Legacy Foundation	R450 000
DG Murray Trust	R362 368
African Child Policy Forum	R210 828
Centre of Excellence in Food Security (UWC)	R156 000
Queens University Belfast (QUB)	R63 694
Other Sources of Income 2019	R778 126
Interest on investment	R267 326
University support, teaching & publications	R473 800
Child Rights Short Course	R37 000
TOTAL GRANTS & OTHER INCOME SOURCES 2019	R10 412 972
EXPENDITURE	
Organisational budget	
Personnel	R6 776 390
Regular operating expenses	R138 782
IT equipment & maintenance	R13 798
Organisational development	R293 897
Communication products	R22 967
Travel, fundraising & networking	R24 925
Contingency	R7 272
Direct project activity costs	R2 455 749
UCT Levies	R420 953
TOTAL EXPENDITURE	R10 154 734



Meet our team

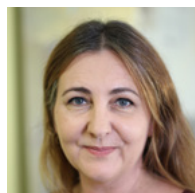
DIRECTOR



Shanaaz Mathews

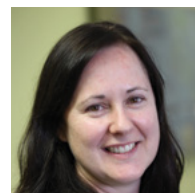
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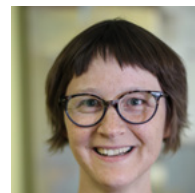
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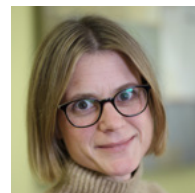
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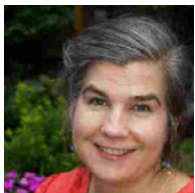
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