

# CHILDREN'S INSTITUTE ANNUAL REPORT

2002-2003



# ABOUT THE CHILDREN'S INSTITUTE

## Mission

The Children's Institute contributes to policies that promote equity and well-being, and which fulfil the rights of all children in South Africa, by combining academic excellence and social responsibility.

## Our Agenda

### OUR OBJECTIVES

- Characterise the major challenges confronting children in South Africa
- Conduct policy research, analysis and commentary
- Provide evidence-based information and technical assistance to all involved in policy-making
- Undertake training and teaching
- Promote and impact on policy-making decisions that affect children
- Disseminate information and research findings to relevant parties

### OUR FUNCTIONS

#### Research:

- Defining research questions in specific child policy areas
- Conducting high quality policy research and clarification
- Stimulating interdisciplinary research
- Collating and analysing secondary research and data sets

#### Teaching:

- Conducting policy research training for graduate students from different disciplines
- Contributing child policy modules to existing programmes
- Delivering short courses or other appropriate training to child practitioners and policy-makers

#### Technical assistance and support:

- Providing technical assistance to policy-makers and practitioners
- Supporting players in the child policy arena with information, training and practice guidelines

#### Advocacy:

- Communication with decision-makers
- Producing publications directed at the policy, service provider, academic and popular fields
- Information dissemination
- Participating in and supporting social movements that prioritise and promote children's well-being
- Increasing the cadre of practitioners, scholars and researchers versed in evidence-based approaches to child-focused policies and practices

### GUIDING PRINCIPLES

- Pay special attention to children rendered vulnerable by inequity
- Be guided by the priority needs of children
- Promote children's participation in the work of the Institute
- Focus on policies with potential for national impact
- Focus on all phases of policy and implementation
- Promote locally appropriate models of policy and intervention
- Apply an evidence-based approach
- Apply advocacy strategies to promote informed policy decision-making
- Respect diversity
- Promote interdisciplinary practice
- Promote collaboration with relevant parties in the policy-making process
- Create a stimulating and supportive work environment
- Optimise the existing skills within the Institute

## MANAGEMENT AND GOVERNANCE

The Institute is administered through the Faculty of Health Sciences, University of Cape Town. A Director and Deputy Director lead its activities, which are supported by a university-wide management team, directly accountable to the Vice-Chancellor.

An international Board of Advisors supports the work of the Institute:

**Mrs. Graça Simbine Machel, Chairperson**

Mrs. Graça Machel serves as the President of the Organisation of Mozambican Children, Foundation for Community Development in Mozambique and is currently the Chancellor of the University of Cape Town.

**Prof. Harold Richman, Deputy Chairperson**

Prof. Harold Richman is the Hermon Dunlap Smith Professor Emeritus and the founding director of the Chapin Hall Center for Children at the University of Chicago.

**Prof. J. Lawrence Aber**

Prof. J. Lawrence Aber is a recognised expert in child development and social policy and currently the Director of the National Centre for Children in Poverty in the Mailman School of Public Health at the University of Columbia, New York.

**Ms. Nazeema Ahmed**

Ms. Ahmed is the Managing Director of the Parrafin Safety Association of South Africa.

**Dr. John R. Pinkerton**

Dr. John R. Pinkerton has a special interest in the application of research to policy and is the Head of the School of Social Work, Queen's University, Belfast, Northern Ireland.

**Dr. Jon E. Rohde**

Dr. Jon E. Rohde was formerly a Senior Health Advisor for the EQUITY Project in the Eastern Cape Province, after serving for 12 years in India as the country representative of UNICEF and the global advisor to Mr. James Grant.



# THE YEAR IN REVIEW

It has been a challenging year for the Children's Institute. Despite a national commitment to prioritise children's needs, children remain deeply affected by endemic poverty, by social and economic inequity, by an adverse physical environment, by diseases such as HIV/AIDS, tuberculosis, and by on-going trauma and violence. This situation is aggravated by a slow response from social services and the Treasury, which neither of which has given special attention to children as a priority area for intervention. Against this backdrop, several organisations and networks continue to advocate for children's political, social and economic rights, providing a platform for civil society's demands on the State.

In this setting the Institute's work to identify and analyse problems affecting children is targeted at informing and supporting the efforts of the wide range of duty bearers for children, resulting in recommendations for legislative, policy and programme interventions to improve children's circumstances. Harnessing the voices and opinions of the children has been a particular emphasis of the Institute's work.

## Our Mission and Activities

There have been several developments that have demanded a review of the activities that characterise the niche of the Institute in the national children's field. These include the emergence and growth of endeavours such as the Child and Family Development Programme in the Human Sciences Research Council (HSRC) and child research programmes at other national institutions and non-governmental organisations and alliances.

In 2004 South Africa will deliver its second report on progress with the country's compliance with requirements of the United Nations Convention on the Rights of the Child (CRC). Groups in both Government and civil society are poised to submit reports to the UN committee concerned with monitoring the CRC, and the Children's Institute will contribute by making its outputs available to any group requesting information generated by us. This will reaffirm our independence as an academic institution which strives to be relevant to the needs of society through our commitment to a 'children first' principle. We will embrace this principle by providing input into the reports of all groups, both State and civil society.

Through our programmes and projects, the Institute continues to search for new opportunities to act in the best interest of children. In the past year there has been much more convergence between the work of the programmes, with collaboration across the Institute in several areas.

Under the leadership of the Child Rights Programme, the Children's Institute team has undertaken a systematic and rigorous review of the three major bills<sup>1</sup> affecting children and currently under review, and has consulted widely in its efforts to bring a broad spectrum of national voices to bear on the legislative deliberations of decision-makers.

Other projects that have drawn on the capacities and experiences of staff across the Institute have been the child database project and collective contributions to define what constitutes basic services for children – in health and social welfare generally, and specifically for those affected by HIV/AIDS.

On completion of its projects, the Trauma and Violence Programme ceased to exist as a dedicated section of the Children's Institute. Instead, this issue will be addressed by other programmes and projects where relevant.

## Staffing and Governance

The Children's Institute team expanded and changed considerably during the year in review. Four staff members left the Institute to take up positions elsewhere, while 11 new staff members were recruited. Contract researchers were employed for variable periods during the year, and the Institute was pleased to host our first sabbatical researcher from UCT's School of Child and Adolescent Health.

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<sup>1</sup> Children's Bill, the National Health Bill and the Social Assistance Bill

# THE YEAR IN REVIEW

The team now comprises of 25 full-time employees and one part-time library assistant, a significant increase over the one-year period. This will place new demands on management to ensure not only appropriate human resource practices and the development of and support to staff as individuals, but also to build the team.

The departing staff included Teresa Guthrie, a stalwart social security researcher for many years; Zama Mvulane, the cornerstone of the Institute's advocacy efforts; Zareena Parker, a researcher in trauma and violence; and Lizette Philips, administrator and manager of infrastructure. They will all be missed for their contributions to the Institute's work, and for their passion for children.

The Board of Advisors, led by Mrs. Graça Machel and Prof. Harold Richman, and the Management Committee under the leadership of Prof. David Power, continue to be of tremendous support to the Institute in its second year of existence. We are pleased to welcome Adv. Tsiliso Thipanyane, head of the Research and Documentation Department of the South African Human Rights Commission and Prof. Jonathan Janssen, Dean of Education at the University of Pretoria, as new Board members for the coming year.

## Collaboration and Networking

Each programme has a number of institutes, organisations and individuals with which it collaborates and networks.

In general, the major organisations with which the whole Institute has links are the HSRC's Child and Family Development Programme; the Child Research Programme at the University of the Western Cape; the Alliance advocating for Children's Entitlement to Social Security (ACCESS) and the Child Research Programme at Parliament.

Internationally, there is great interest in our work from a variety of foundations and development agencies, and we remain part of a network of child research institutes from around the world.

## Finances

Atlantic Philanthropies (APS) remains our major core donor and although changes have taken place in the funding strategies of APS, they still have high regard for the Children's Institute and its work.

Project funders are listed in the section on *Grants and Funding* and although the total funds received from these sources have now exceeded the size of the core grant, securing unrestricted funding from diverse donors remains a priority.

## Future Plans

Our local, national and international links remain strong and we intend to secure even closer links with other departments at UCT. The distance between policy researchers and policy-makers in the coming year constitutes a challenge to balance research independence with societal relevance, and is shared by policy researchers across the globe. This issue will remain centre stage in the Institute's endeavours.

The Children's Institute will also continue to identify cross-cutting themes for activities directed at promoting child rights, while embarking at the same time on discrete projects which target specific problems. While each programme has developed plans for the short- and medium-term, defining projects within the Child Poverty Programme – in a setting where poverty is the underlying cause of the majority of children's vulnerability and where constraints to the achievement of socio-economic rights prevail – will be particularly interesting. Securing resources to ensure medium- and long-term sustainability is a concern, and some discussions held with both our current supporters and new donors will be followed up in the near future. While finances are a



necessary component of the resource base, the Institute however would not function without its superb human resources. Greater emphasis will be placed on growing and retaining the core of competent staff, while at the same time recruiting new staff with potential.

Finally, the Board plans to meet early in the new year and will also seek other opportunities to engage in our work. All the members of the Board of Advisors and the Management Committee have committed their continued and invaluable support for the Institute, and we are truly indebted to them.



## PROGRAMMES Child Health Services

While the programmes of the Institute are based on the agreed priorities, the multifaceted character of these priorities and the multidisciplinary nature of the work demand a great deal of collaboration between the programmes, as well as within the various projects.

In this report, projects are presented within the programme categories. This is arbitrary, and does not accurately reflect the extent of collaboration and cross-programme contributions.

### Child Health Services

Improving child health and child health status in South Africa remains one of the biggest challenges for us as a country. We are currently revisiting 25 years of having adopted and implemented the Primary Health Care approach. Nearly 10 years have also passed since our ratification of and commitment to the health obligations outlined in Article 24 of the UN CRC. At the same time we are in the process of evaluating the implementation of several policies and programmes that have been developed since the onset of democracy in 1994.

The key challenge remains the translation of political and programme imperatives into sustainable, good quality health services for children.

In this regard the Child Health Services Programme of the Children's Institute over the past year continued working on several policy development and programme evaluation activities, all of which are directed at the goal of improving policies, laws and practices that can ultimately improve the health status of children.

### PROJECTS

#### 1. The National School Health Policy

Over the last few years the Children's Institute has been supporting the national Department of Health in the development of a National School Health Policy. During the last six months of 2002, the Institute's role has been focusing on the development of implementation guidelines to accompany the policy, as well as developing estimates of what it would cost to be implemented.

This project was successfully completed after the policy was accepted by MINMEC, the highest decision-making structure in the Department of Health. MINMEC consists of the national and provincial Members of the Executive Committee (MECs) for Health, as well as the respective heads of health from the national and provincial governments.

The government in July 2003 officially launched the policy. The launch marked the end of an interesting and valuable learning process for the Institute. It provided the opportunity to be part of the full policy cycle – from the initial identification of the need for a School Health Policy, through to the development of implementation guidelines.

The work required for this process provided very valuable skills and insights in terms of policy development and gave the staff concerned a wide range of experiences that will enhance their ability to input on similar processes in future. It is also hoped that there would be an opportunity for the Institute to participate in an evaluation of the implementation of the School Health Policy.

This project was co-funded by USAID, via the Equity Project, and UNICEF.

#### 2. A National Chronic Disease Policy

For the past four years, the Child Health Services Programme manager served on a task team that made input into the development of a national service policy on non-communicable long-term health conditions in children. The current policy draft is at the moment being discussed by the various decision-making structures in the Department of Health.

In May 2003 a paediatrician with long-standing experience and special interest in children with long-term health conditions joined the Children's Institute for an eight-months sabbatical. His specific brief is the development of implementation guidelines that would accompany a policy on children with chronic diseases. This work will continue to the end of December 2003 and is supported by the Department of Health.

### **3. Evaluation of the Developmental Screening Programme in the Western Cape**

In December 1999 the Western Cape Province implemented a developmental screening programme for pre-school children. This initiative developed out of a national policy roundtable hosted by the Child Health Policy Institute (the predecessor of the Institute) in 1996.

The evaluation of the Developmental Screening Programme was thus a second opportunity for the Institute to be involved in all aspects of this particular policy cycle. In this instance involvement went further than the School Health Policy process, as Children's Institute staff served on a working group that guided the implementation of the Developmental Screening Programme. Subsequently the Institute was contracted to conduct an evaluation of the process of implementation, as well as the actual implementation one year later.

The evaluation has been completed and presented to the Western Cape Maternal, Child and Woman's Health Programme manager. The full report is undergoing final editing and will be officially released by the end of September 2003. The Health Systems Trust funded this project.

### **4. The Children's Budget Book Project**

The Children's Budget Book Project of the Institute for Democracy in South Africa (IDASA) has for the past few years undertaken to track commitment to children within the various governmental departments by analysing the extent to which such commitments have been followed through in the budgetary allocations to child-specific activities.

The Children's Institute has been contracted by IDASA to write the chapter on "Children's Right to Health" for the 2003/2004 Children's Budget Book. By examining a few key programmes as case examples, the chapter explores how commitments made to implement children's right to health have been followed through. It further explores the implementation and budgetary allocation to such programmes as a measure of Government's commitment to children's health rights.

The book is scheduled for release in early 2004 and funded by IDASA.

## **Plans**

The majority of the 2002/2003 Child Health Services Programme activities came to a conclusion towards the end of June 2003. This provided the programme with an opportunity to develop a new strategic direction around a different focus area. The new programme direction has been informed by the following:

- 1) Critical care health services for children have been identified by critical care service providers as an area requiring urgent attention, given the large numbers of potentially avoidable deaths in children, the large numbers of children subjected to trauma and violence, as well as an increasing number of children with HIV-infection.
- 2) Furthermore, health impact assessment as a different approach to policy development is becoming a growing discipline internationally. This would entail the assessment of the impact of any new policy or programme on child health and service outcomes.
- 3) An urgent need to examine health system barriers to the implementation of key child health interventions, given a number of recent evaluations that have shown that child health service interventions are floundering in many areas of the country.



## PROGRAMMES Child Health Services

The Child Health Services Programme has therefore decided to use critical care as a lens to examine ways in which to strengthen the overall health system for children, and to conduct the required activities within a health impact assessment framework. Activities will be aimed at exploring the policy, service delivery and research needs and possibilities in this area. The programme currently awaits the outcome of a proposal submitted in June 2003 to the Alliance for Health Policy and Systems Research, World Health Organisation, Geneva.



## Child Rights

South Africa embraced democracy in 1994 with a Bill of Rights entrenching everyone's fundamental rights and freedoms. Keeping in mind a past where children were deprived of basic rights such as health care, water, sanitation, food and education; and were detained without trial and tortured; the drafters of the Constitution included a children's rights clause in the Bill of Rights to ensure that children are protected and prioritised in the new democracy.

Section 28 has been interpreted by child rights advocates to mean that there is a basic package of services to which all children are entitled, and that Government must prioritise the provision of these services.

South Africa has an above average child illness and death rate, particularly in the rural areas where the majority of poor children live. Many children suffer from hunger and many are unable to attend schools simply because they are poor. While we have an economy that can provide better services for children, children's needs are not receiving the priority that they are entitled to.

To realise children's socio-economic rights, a children's first approach needs to be followed when policy and law is reformed and programmes are designed and implemented. However, competing priorities facing Government, and a lack of understanding how to put the principle of 'children first' into practice, have resulted in many children's basic needs not being provided for.

The Child Rights Programme contributes to promoting a children's first approach in South Africa through child rights research and advocacy. During 2002/2003 we focused primarily on policy and law reform that impacts on children's socio-economic rights and initiated a project aimed at promoting better understanding of children's rights and how to put them into practice in policy and law reform, budgeting and service delivery. The programme aims are:

1. Promoting socio-economic law reform debate and decision-making that is informed by child rights, evidence and consultation with the children's sector.
2. Promoting discussion, understanding and implementation of the constitutional obligation to prioritise the delivery of a basic package of socio-economic services for children.

The Open Society Foundation of South Africa funds the programme's core activities. The Joseph Rowntree Charitable Trust funds specific social security policy and law reform advocacy and communication activities for ACCESS.

## PROJECTS AND PLANS

### 1. Law reform research and advocacy

This project is focused on three key laws that are scheduled for approval by Cabinet in 2003 and passed by Parliament in 2003 and 2004:

- Children's Bill
- National Health Bill
- Social Assistance Bill

The project aims to:

- 1) Promote the incorporation and expansion of children's constitutional rights in the three laws.
- 2) Characterise the major challenges facing children and propose legislative provisions that can be incorporated into the three bills to help address these challenges.
- 3) Promote the participation of the children's sector in the law-making processes.
- 4) Promote the use of evidence in the decision-making processes.

The Children's Institute is working with existing alliance structures such as ACCESS and SASPCAN<sup>2</sup> and other umbrella organisations within the sector to ensure a collaborative approach to promote the three bills.

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<sup>2</sup> South African Society for the Prevention of Child Abuse and Neglect

## PROGRAMMES Child Rights

### *Children's Bill*

After five years of research and consultation, the South African Law Commission (SALC) in January 2003 handed over a draft Children's Bill to the Department of Social Development. The new bill will replace the 1983 Child Care Act and it has the potential to take South Africa many steps forward in the struggle to realise children's rights. The law reform process will potentially enter the parliamentary process in late 2003.

In December 2002 the key Children's Institute and ACESS recommendations were incorporated into the SALC's report and draft bill. Early in 2003, a planning workshop and national children's sector workshop were held to promote informed debate and provide opportunities for the children's sector to adopt a collaborative and strategic approach to advocacy around the bill. These workshops also led to the establishment of a national Working Group to steer civil society's response to the bill. The Children's Institute, together with SASPCAN, is performing the secretariat function for the Working Group, which consists of representatives of key national child sector umbrella bodies and organisations.

### *National Health Bill*

This long awaited bill<sup>3</sup> will replace the National Health Act of 1973 and will provide a new framework for the provision of health care services in South Africa. The bill provides a golden opportunity to entrench the gains made in child health services since 1994 and to legislate for the further protection and promotion of children's right to health care. The Children's Institute is raising awareness of the importance of this bill for children and advocates for a law that prioritises children's health care.

As a result of our submission to the Department in 2001, the preamble of the draft bill was amended to include a reference to children's right to basic health care. This signaled a shift towards a bill that recognises children as a vulnerable group. However, the bill is overall simply a regulatory framework that does not take an innovative human rights approach to health provision.

A submission will be made to Parliament in August 2003 and, where our recommendations are not taken into account, we will advocate for these to be taken up in the Children's Bill.

### *Social Assistance Bill*

The Social Assistance Act (1992) is the legislation that regulates the payment of cash grants. Amendment to this Act has reform implications for the child support grant (CSG), foster child grant and the care dependency grant.

The children's sector has through ACESS organised itself around core messages regarding social security policy and law reform for children. The Children's Institute co-ordinates ACESS's social security policy and law reform activities related to the Social Assistance Bill and the Children's Bill. Networking and collaboration with partner organisations in the mainstream social security policy and law reform arena has strengthened common goals and also ensured that children's issues are taken up by partner organisations.

The extension of the CSG to age 14 is largely attributable to work done by all ACESS members, each playing a different role in the advocacy campaign. The Children's Institute contribution included poverty monitoring, research and reporting by the Social Security (Child Poverty) Programme; legal research, and advocacy and communication activities conducted on behalf of ACESS.

The February 2003 draft of the Social Assistance Bill contained some Children's Institute and ACESS recommendations after we attended a workshop with the departmental drafters, where a joint submission from the civil society representatives at the workshop was submitted.

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<sup>3</sup> Published in December 2002

A monitoring and research project, Case Alert, has been initiated to monitor and report on problems experienced with the extension of the CSG (using the incremental phased-in approach based on age). Case Alert contains case studies of caregivers who are experiencing problems accessing the CSG. Case studies are recorded as caregivers report problems to a hotline, while they are also referred to an appropriate legal aid service in their area. Case Alert is widely distributed to government decision-makers and service providers, the media and ACCESS members. Evidence from Case Alert was presented to Parliament, where two community-based individuals also testified to problems being experienced with the extension of the CSG.

A submission on the Report of the Taylor Committee was made to Parliament after a pre-hearings workshop was conducted to train community-based ACCESS members on the parliamentary process and on how to make submissions. Three ACCESS members made submissions at the hearings.

A monthly Social Security Policy and Law Update is published to keep ACCESS members and the children's sector informed of new policy and law reform developments to enable them to influence the process. Future plans include a workshop on social security for children living without adults, a submission on the Social Assistance Bill to Parliament in September, CSG extension monitoring, reporting and advocacy, means-test research and advocacy, and a workshop on social security supporting extended family models of care.

## **2. Project 28: Prioritising children's socio-economic rights**

Project 28, named after the children's clause in the Bill of Rights, is aimed at promoting discussion, understanding and implementation of the constitutional obligation to prioritise the delivery of a basic package of socio-economic services to children. Phase one begins in August 2003 and is dedicated at producing a literature review, articles aimed at legal peer-reviewed journals and dialogue forums to stimulate debate in legal circles.

Phase two will take the foundation arguments and build them into practical tools and information for government decision-makers, service providers and children's sector organisations. Phase three will take the form of various workshops, seminars and training courses.

## **3. Management of ACCESS**

The Children's Institute is one of the three founding steering committee members that since 2001 led ACCESS in its campaigns. This involves the management of the Alliance and its staff, providing strategic direction for the Alliance, and contributing to ACCESS's various projects.

During 2002, a national co-ordinator and other staff were appointed and a national office established to co-ordinate ACCESS's activities. Provincial workshops were held in seven provinces, members received grants awareness training and gave input into the various social security policy and law reform processes underway. ACCESS now has 400 member organisations and its five discrete projects each require dedicated staff and working groups. A national workshop was held in June and attended by 300 ACCESS members from across the country, whose energy and dedication was encouraging.

Four new steering committee members have been elected and the Alliance is growing in strength and its ability to influence policy and law reform processes to the benefit of children. The coming year will be crucial for ACCESS, as important policy and law reform processes will reach the final decision-making stage.



## Child Poverty

Poverty, unemployment and inequality in South Africa continue to worsen with many families and children living in extremely difficult circumstances, requiring assistance from the State and society to survive and develop. Various studies have found childhood poverty rates to be as high as between 60 - 70%, with 30% of children residing in households with food insecurity. Children with chronic health conditions, children in need of alternative care and other groups of vulnerable children are in desperate need of social support.

Not only is there a dire need for the provision of social security but there are also the State's obligations to ensure children's basic rights and standards of living.

Being aware that social security interventions are merely one avenue of poverty alleviation within a broader economic and development paradigm, the Institute decided that it was necessary for the programme to widen its scope. The programme foresees the inclusion and characterisation of children's experiences of poverty, and the monitoring and assessment of a range of poverty alleviation programmes influencing children's well-being, as some of its objectives.

As a result, the programme has adopted the name Child Poverty. Within this context, the goal of the Child Poverty Programme is to reduce poverty among children and their families, and to ensure a minimum standard of living for children, thereby enhancing their socio-economic rights.

## PROJECTS AND PLANS

### **1. Developing new assessment procedures for eligibility to social assistance for children with chronic health conditions**

A review of procedures for assessing eligibility for social assistance was deemed necessary to improve access to social assistance for children with chronic health conditions. Therefore, the programme undertook a review of existing international assessment tools, as well as an exploratory analysis of their applicability to the South African situation. This has provided invaluable information to guide the second phase, which involved the design of a new practice tool for use in South Africa.

In late 2002 the national Department of Social Development commissioned the development of a new practice tool to assess the social assistance eligibility of children and adults with disabilities. The Children's Institute, together with other academics, researchers and service providers, has been a key collaborator in the development of a child-oriented tool. The tool has been piloted and completion of the project is expected towards the end of 2003.

### **2. A database of indicators of child well-being**

Attempts to monitor the impact of poverty on children identified a lack of specific indicators in the routine information system. Following discussions with a wide range of interested parties, the Child Poverty Programme undertook to continue with the collation and recording of statistics regarding the situation of children in South Africa.

A software package and training provided by UNICEF are being used for this purpose. A database administrator and researcher have been recruited for this project, and are involved in the systematic identification, collection and recording of data on the status of children and families in South Africa. The database contains data from a range of sectors and a training workshop on its use and administration will be conducted for government officials, academics, researchers and NGO representatives in the children's sector in October 2003.

This project is funded by UNICEF.

### **3. A rapid assessment of the situation of children in South Africa**

Save the Children (Sweden and UK) commissioned the Child Poverty Programme to provide a rapid assessment of the situation of children in South Africa, with a focus on the violation and non-fulfilment of their rights. The project included collecting and reporting the opinions of key role players in the South African child rights arena. Participants included international donor agencies, government officials and statutory bodies, as well as non-governmental organisations.

The project report provides a synopsis of the situation for children in South Africa, identifies the main challenges and difficulties that children contend with, and highlights gaps in available information and areas requiring further research. It furthermore identifies the main role players involved in the implementation of children's rights in South Africa, as well as gaps in the activities of these role players.

### **4. Other activities**

Monitoring is a major activity in support of the implementation of policy. Therefore, the process of monitoring the existing social security system examines the administration, up-take rates and budget allocation related to benefits for children and their families. Reports have been produced regularly for use by Government, other academic departments and civil society alliances and organisations. Strong links with ACESS have resulted in substantial progress in increased access to child support grants for children living in poverty.



## HIV/AIDS

The HIV/AIDS pandemic is one of the greatest threats to the realisation of child rights in South Africa. The country currently has more people infected with HIV than any other country in Africa<sup>4</sup>, with the highest rates of infection among women. The HIV/AIDS pandemic has been described as a series of 'waves':

- The first wave – the incidence of new infections - peaked in South Africa in 1998, at around 930 000 new infections per year.
- The second wave – the total number of people infected – is expected to peak at around 7 – 8 million people in 2006.
- The number of AIDS-related deaths in South Africa will peak around 2010, with the number of deaths exceeding 800 000 per year, resulting in the final wave – the children who have been orphaned.

With the pandemic in South Africa close to its peak in terms of HIV/AIDS prevalence, we are currently faced with what could arguably be another wave – one that precedes the peak in the number of orphans. This wave encompasses the many children who are living with and frequently caring for terminally ill adults, often at the expense of their own needs<sup>5</sup>.

An estimated 3.2 million women of child-bearing age were living with HIV/AIDS in July 2002. As a result, between 1 Jan. - 31 Dec. 2002, 89 000 children (around 7% of the total number of children born during this period) were infected with HIV, either at birth or through breastfeeding, and 150 000 children lost their mother to AIDS. As of July 2002, an estimated total of 885 000 children in South Africa had lost a mother, and, without the effective implementation of any major new health interventions, this figure is expected to double by 2010<sup>6</sup>.

In March 2003, the HIV/AIDS Programme revisited past programme activities, reflected on the expertise and interests within the team, identified research gaps in the field, and considered the current political and legislative contexts to determine the programme objectives for the next two years. It was decided to focus activities on promoting and facilitating an appropriate policy, programming and funding response to children affected by adult morbidity and mortality in the context of HIV/AIDS in South Africa.

## PROJECTS AND PLANS

### **1. Research to inform the drafting of recommendations for health and social services to address the needs of children experiencing orphanhood in South Africa**

In 2001 the Children's Institute was commissioned by the national Department of Health to conduct research to inform an appropriate and co-ordinated national response to children experiencing orphanhood (i.e. children who have been orphaned or who are living in the care of a terminally ill caregiver).

The report and recommendations that were presented to the Departments of Health, Social Development and Education in January 2003 were a culmination of 16 months of research, policy and legislative review and consultation. The recommendations are grounded within existing legislation, policy and programmes and a number of follow-on key activities are planned, including the drafting of position papers on main areas of concern and relevance to programmes, and current policy reform processes.

This project is jointly funded by the national Department of Health, IBIS Regional Civil Society Programme and the Rockefeller Brothers Fund.

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<sup>4</sup> Bradshaw, D., Johnson, L., Schneider, H., Bourne, D., & Dorrington, R. (2002). Orphans of the HIV/AIDS Epidemic: The time is to act now: Medical Research Council Policy Brief, No 2.

<sup>5</sup> Giese, S., Meintjes, H., Croke, R., & Chamberlain, R. (2003). Health and Social Services to Address the needs of Orphans and Other Vulnerable Children in the Context of HIV/AIDS: Research report and recommendations. National Department of Health and Children's Institute, Cape Town.

<sup>6</sup> Dorrington, R., Bradshaw, D., & Budlender, D. (2002). HIV/AIDS Profile In The Provinces Of South Africa: Indicators For 2002. Cape Town: Centre for Actuarial Research, University of Cape Town.

## **2. Strengthening schools as nodes of care and support for vulnerable children**

Given the scale of the challenges we face in the context of HIV/AIDS, the reality of resource limitations, the urgency of need, and the infrastructure that exists in South Africa, there is a need to think beyond the immediate and obvious functions of services to explore the roles that service providers can fulfil to identify and support vulnerable children. On the basis of our earlier research<sup>7</sup>, we argue that schools in particular are ideally placed to function as nodes of care and support for children.

With the current emphasis on prevention programmes within schools, there has been no clear guidance in terms of the education sector's role in the social support of HIV-affected learners. The aim of this project is to promote the extended role of schools as vehicles through which the health and social needs of vulnerable children can be met. However, we recognise the limited – but important – role that educators themselves can play in this regard. Hence it is argued that emphasis should be placed on schools as nodes of service delivery through collaborative partnerships with other service providers, including social workers, health workers, and the non-governmental sector.

As a first step towards realising this goal, the Children's Institute, in collaboration with the Child Youth and Family Development Programme (HSRC) facilitated a workshop in July 2003 to inform the drafting of a position paper. Several activities are planned to take forward the recommendations that emerged from the workshop.

This project is jointly funded by IBIS Regional Civil Society Programme and the Rockefeller Brothers Fund.

## **3. Critiquing the use of the foster care grant as a response to the poverty-related needs of orphans**

The national Department of Social Development has on several occasions stated its intention to utilise the formal foster care system to support caregivers of children who have been orphaned. In practice, the vast majority of the caregivers who apply to be foster parents do so – understandably – to access the foster care grant to help them provide for the children in their care. However, our research suggests that, while the grant does benefit the few recipients who manage to access it, processing procedures and its application on such a large, targeted scale raise questions about its feasibility, equity and potential unintended consequences.

The aim of this project is thus to produce a position paper which critiques the social, logistical and financial implications of the application of the foster care system as a national response to the needs of orphans in the context of widespread poverty and HIV/AIDS-related illness and death.

## **4. Critiquing the media representation of children affected by HIV/AIDS**

There is a danger that the dominant rhetoric regarding the impact of HIV/AIDS on children (and of the experiences of the popularly termed 'AIDS orphans' in particular) not only fuels groundless assertions that label these children inappropriately but also stands to misinform responses by support agencies. The uncritical reproduction of these discourses serves to further increase children's vulnerability through marginalisation and a poor understanding of children's lives and needs. There is therefore a need to unpack the prevailing discourses regarding the implications of HIV/AIDS for children to encourage a nuanced and appropriate public service response to children living in the context of the AIDS pandemic.

As a contribution to this process, the Children's Institute in collaboration with the Centre for Social Science Research, UCT, are conducting a study to consider the extent to which South African print media representations of children affected by HIV/AIDS appropriately reflect the experiences of such children.

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<sup>7</sup> Giese, S., Meintjes, H., Croke, R., & Chamberlain, R. (2003). Health and Social Services to Address the needs of Orphans and Other Vulnerable Children in the Context of HIV/AIDS: Research report and recommendations. National Department of Health and Children's Institute, Cape Town.



The project aims to encourage sensitive and accurate reporting about children affected by HIV/AIDS by the print (and other) media and to consider ways in which researchers could support journalists in this task. Its overall purpose is to contribute to public awareness and appropriate responses to children in the context of the HIV/AIDS pandemic. The project will also contribute to the development of a training module for journalists, as part of a training course being developed by the Media Monitoring Project and the Institute for the Advancement of Journalism.

### **5. Informing policy and legislative reform and implementation**

One of the core and ongoing functions of the HIV/AIDS Programme is to create and utilise opportunities to inform policy and legislative reform and implementation. The programme has in particular taken a lead role in informing the provisions for children affected by HIV/AIDS in the draft Children's Bill. One component of this is to promote and facilitate the participation of children in the final stages of the drafting of the Bill and its implementation.

This project is funded by IBIS Regional Civil Society Programme.

### **6. Other activities**

In addition to the key projects described above, the HIV/AIDS Programme engages in a range of other activities towards the realisation of the aims and objectives of the Institute. These include:

- Trying to ensure that children's issues are adequately and appropriately addressed by various national and international agendas.
- Providing technical support to the Children's HIV/AIDS Network (CHAiN) and its member organisations through participation in the management of the network and capacity-building workshops with service providers.
- Collecting and collating relevant literature towards the development of an HIV/AIDS Resource Centre for the Institute.
- Organising monthly seminars around key issues of interest or concern.



## Advocacy, Communication and Knowledge Management

It is essential for academic institutions such as the Children's Institute to ensure that research findings and recommendations for policy and law reform reach stakeholders, such as decision- and policy-makers, service providers, other academic institutions, civil society, the media and those affected by the policies. Therefore, close co-operation is maintained between the various programmes and the communication and knowledge management divisions to ensure that research findings are not only packaged and distributed in accessible and user-friendly ways but also to enable the internal flow of information and communication.

### Advocacy Activities

All the Institute's programmes engage in advocacy activities to some extent. The strategic distribution of research results, communication with relevant decision-makers, submissions to Parliament, popular and peer-review journal articles, conference presentations and media liaison all serve as advocacy tools.

Programmes are assisted with advocacy strategies and campaigns, communication with relevant decision-makers, political situational analysis, media liaison and translating recommendations into policy and law mechanisms.

### Interaction with Parliament and Government

Members of Parliament are not always in a position to access the wealth of information generated by academic institutions and civil society organisations. In addition, civil society organisations often need assistance and support when interacting with Parliament and its processes.

Advocacy activities include communicating evidence-based information on children to key parliamentary committees. Children's Institute products are further distributed to key persons in Parliament and Government as a matter of priority, while civil society organisations are informed on how and when they can participate in parliamentary processes.

### Links with advocacy networks

The Institute has an important role to play in providing an evidence base for both policy-makers and institutions of civil society. By serving in executive positions on advocacy networks such as ACCESS and CHAiN, our staff members not only provide research-based contributions at network forums but also guide and nurture the development of such networks. The Child Rights Programme has been instrumental in maintaining the drive behind civil society input on the Children's Bill and the Social Assistance Bill.

### Support for advocacy campaigns

All the programmes provide support for national advocacy campaigns. These include the campaigns promoting children's access to economic and social security; for a basic income grant; for a comprehensive Children's Act to replace the current Child Care Act; and the inclusion of children's guaranteed access to proper health services in the draft National Health Bill. When working in partnership, the Institute also provides some support, particularly media liaison, to organisations and service providers in the children's sector.

## Communication and Knowledge Management Activities

To ensure that the Children's Institute reach key stakeholders and maximise and capitalise on knowledge within the Institute, the communication and knowledge management divisions guide the Institute and its programmes on the use of appropriate communication and knowledge management strategies, tools and systems. At the same time the communication and knowledge management divisions work closely together to ensure effective internal communication between programmes and to maximise the use of knowledge management tools such as the website, stakeholder database, knowledge centre database and the newly developed intranet.

The main goal of the communication division is to develop the Institute's image and market its work through products, the media and consultation with staff and stakeholders. On the other hand knowledge management focuses on the development of systems by using appropriate technology to enhance information management (e.g. knowledge centre database), information communication (e.g. listserves, websites, electronic calendars) and information dissemination (e.g. stakeholders database). Information technology thus provides the framework for developing these knowledge management solutions.

These are significant services in an Institute that relies on an effective communication and dissemination system to link the academy to the policy milieu. The intranet is the vehicle used for knowledge management and comprises links to various knowledge management solutions based on the needs of programmes and staff. In offering these solutions we draw on the capacities of a Communication Manager, Knowledge/IT Manager, Information Officer, IT officer, Database Administrator and Part-time Library Assistant.

Because the support services of the communication and knowledge management divisions interact closely, communication and knowledge management activities are discussed collectively in this report.

### **Design, establishment and maintenance of essential communications and knowledge management systems, tools and procedures**

*The website (<http://web.uct.ac.za/depts/ci/>)*

The Children's Institute website has been launched in the latter part of 2002 and has been growing to contain the Institute's publications and products in electronic format. Hard copies of products can also be ordered by visiting the website, while each programme has its own web page with updated information on programme and project developments.

Since an independent communication division was established in April 2003, the website is still being development to contain other useful information for stakeholders, such as links to websites of other child sector organisations, research updates, background documents and updates on developments in the current child policy and law reform processes, with the aim to facilitate public participation.

*Stakeholder database*

The stakeholder database is in the process of being re-developed to provide an effective channel for the communication outputs of the Institute, while it at the same time caters for the individual programmes' needs. The new, enhanced database will enable the Children's Institute to identify and target stakeholders according to specific groupings, or according to fields of interest.

*Product mainstreaming and dissemination procedures*

With a notable increase in the volume of Children's Institute products, it has become necessary to systemise both the production and dissemination of communication outputs such as research reports, executive summaries, booklets, media alerts, etc. Within these procedures fall guidelines that are being developed on writing for and the branding of the Institute products, as well as interaction with various groups of influential stakeholders such as parliamentarians and the media. Close co-operation between the communication and knowledge management divisions also led to the establishment of a centralised product distribution system and programmes are guided on distribution policies and procedures.

### *Product Lists*

A comprehensive list of Children's Institute products, such as submissions, research reports, fact sheets, media releases, and popular and peer-review journal articles have been established and is being maintained. These products have been made available in electronic format on the website and those still in print can be ordered in hard copy format. (SEE 2002-2003 PUBLICATIONS FOR THE LATEST LIST OF PRODUCTS)

### *Knowledge Centre*

The Knowledge Centre houses a collection of resource materials used by staff, ranging from publications such as books, conference and workshop proceedings to policy law submission and research reviews. Because researchers require immediate access to their own resource collections, some materials are kept in their workspace, while other are physically housed in one place. We thus have a central hub of resource materials and satellite resource locations. The knowledge centre database is a catalogue of all the Institute's resource materials and reflects where resources are located.

The knowledge management division has embarked on an inventory of all Children's Institute-owned products and publications. These items number approximately 500, will be held in the product and publication electronic/hard copy libraries and holdings will be organised into a user-friendly thesaurus. Although this initial phase is labour intensive, the resulting resource will make our research and other work accessible to a much wider audience.

### *The Intranet*

As the staff complement of the Institute grows, the need for good communication becomes paramount to allow for the exchange of ideas and the sharing of knowledge resources, whether from internal or external sources. An intranet is now being developed, which will make various knowledge management resources and communication tools available to staff at the click of a button.

### *Communication and Knowledge Management Forum*

A regular forum to discuss and workshop communication and knowledge management systems, policies and procedures has been established by the communication and knowledge management team. All staff members will be involved in giving input at this regular forum, which will also serve as a think-tank around innovative communication strategies.

### *Further Initiatives*

Though some components of the communication and knowledge management divisions are currently funded, large-scale support is required to sustain quality, effectiveness and access. At the same time support will be sought to engage in more co-ordinated marketing and branding initiatives.



## TRAINING AND EDUCATION

One of the core mandates of the Institute is education and training.

All the programmes make formal contributions to accredited under- and post-graduate programmes at the University of Cape Town and other institutions of higher learning. Contributions include the Child Health Service Programme's delivery of the organisation and management module of the MPhil in the Maternal and Child Health Programme, convened by the Child Health Unit at UCT, as well as a short course in health advocacy and policy development at the Public Health Programme, University of the Western Cape.

Staff members of the Child Poverty Programme have participated in the teaching and training of post- and under-graduate UCT students in programmes in the Faculty of Health Sciences and the Faculty of Humanities. Discussions are also underway with the UCT Department of Social Development to develop a module on social security benefits for families and children, which would have components relevant to both the under-graduate and postgraduate programmes.

In addition, programmes also contribute to the training of practitioners in the field through non-formal channels like mentoring, workshops and training around areas like legislative review, policy development and advocacy.

In the coming year, the programmes will place greater emphasis on developing training modules, the contents of which traverse the breadth of the Institute's work.



## GRANTS AND FINANCES

At the inception of the Children's Institute, Atlantic Philanthropies awarded a grant of 2,3 million Euros for the establishment and operations of the Institute over a five year period (2001-2005). During the year under review, an amount of R4,419,510.00 was received as part payment against this award.

In addition the following grants were received for specific projects:

(\*Note that some grants were allocated during the previous financial year, but were available for and spent against, in the period under review.)

PROJECT	FUNDER	GRANT PERIOD	AMOUNT
*Health and social services for orphans and other vulnerable children in the context of HIV/AIDS	Department of Health	1 Sept 2001 – 31 August 2002	572,350.88
	Rockefeller Brothers Fund	14 May 2002 – 31 May 2003	244,790.00
* Monitoring and supporting children who have been orphaned or who are at risk of being orphaned	Save the Children UK	27 March 2002 – 30 Sept 2002	110,330.00
*National School Health Policy and implementation guidelines	USAID	March 2001 – June 2003	156,741.89
*Developmental Screening Programme evaluation	Health Systems Trust	1 March – 31 December 2002	108,190.00
Children's Budget Book	IDASA	31 March – 5 August 2003	65,208.00
Child well-being database	UNICEF	31 March – 30 November 2003	332,000.00
Developmental screening tool	HSRC	March 2003 – June 2003	60,412.00
Rapid analysis of child well-being	Save the Children Sweden	17 March 2003 – 30 April 2003	68,970.00
Child Rights Programme	Open Society Foundation	1 January 2003 – 31 December 2003	1,165,230.00
*Child Rights Programme for ACCESS	Joseph Rowntree Charitable Trust	1 May 2002 – 31 July 2003	667,810.00
HIV/AIDS Programme:  Strengthening schools as nodes of care and support for vulnerable children	IBIS-Regional Civil Society Programme	1 May – 31 December 2003	250,000.00
Children's participation in the Children's Bill			
Strengthening schools as nodes of care and support for vulnerable children	Rockefeller Brothers Fund	21 July 2003 – 1 July 2004	294,059.10
Disseminating and facilitating implementation of recommendations for health and social services			

The **total amount** for the period in project grants: R4,076,091.87

Amount in **new grants** for the period: R2,235,879.10

## Recognition of Our Supporters

The Children's Institute gratefully acknowledges the support of the following:

Our funders, without whose generosity our work would not have been possible;

The executive of the University of Cape Town;

The Faculty of Health Sciences and its administrative and support staff;

And the Child Health Unit in the School of Child and Adolescent Health for providing accommodation.

Our international Board of Advisors and the founding members of our Management Committee have guided us greatly and remain committed to advise on our progress and mobilise external support for our work.

The Institute would not have been viable without the collaborative relationships we share with our many networking partners in the policy field, in Government, and in civil society organisations and alliances. In particular, we acknowledge the children whose voices and circumstances have informed our work, and who give us the inspiration to continue.

We also thank our own children, our families and partners for their unstinting understanding and support for us and for the work that we do.



# STAFF

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**Visiting academics**  
**Dr. Anthony Westwood**  
On sabbatical from School of Child and  
Adolescent Health, UCT





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Mvulane Z 8 June 2003  
Workshop for ACESS members from community-based organisations

Health and social services to meet the needs of orphans and other vulnerable children in the context of HIV/AIDS – research report and recommendations

Giese S 7 July 2003

Presented at a meeting of the social cluster, Pretoria

Health and social services to meet the needs of orphans and other vulnerable children in the context of HIV/AIDS – research report and recommendations

Giese S 29 May 2003  
Presented at a meeting of the Provincial Health Restructuring Committee

Maximising opportunities within existing services for the identification, care and support of orphans and other vulnerable children in the contexts of HIV/AIDS and poverty

Giese S  
Presented at the South African National HIV/AIDS Conference, Durban, South Africa, 4 – 6 August 2003

Primary prevention and the draft Children's Bill

Proudlock P March 2003  
Presentation at the CI National Workshop on the draft Children's Bill

Promoting a comprehensive approach to social security

Proudlock P, Martin P  
Presentation at the ACESS National Conference, 12 - 13 June 2003

Rapid appraisal of primary level health care services for HIV+ children at public sector clinics in South Africa

Giese S March 2003  
Presented at the international Public Health Association of South Africa conference in Cape Town

Role of education in the care and support of vulnerable children in the context of HIV/AIDS in South Africa

Giese S  
Presented at an Education Policy Round Table, Cape Town, 28 - 29 July 2003

Social Security Policy and Law Reform

Proudlock P, Rosa S 8 June 2003  
Workshop for ACESS members from community-based organisations

Social Security Reform for Children

Rosa S 24 June 2003  
Presentation to Soul City

The law reform process and the draft Children's Bill

Proudlock P March 2003  
Presentation at the CI national workshop on the draft Children's Bill

The role of health services in addressing the needs of children experiencing orphanhood

Giese S 20 August 2003  
Presented at Red Cross Children's Hospital, Cape Town

Widening the Reach of Social Assistance

Rosa S, Proudlock P  
Presentation at ACESS National Conference, 12 – 13 June 2003

A summary of the issues raised at the National Children's Forum on HIV/AIDS

Giese S June 2002  
Presented at the Nelson Mandela Children's Fund Conference: *A call to co-ordinated action for children affected by HIV/AIDS*

An education coalition against HIV/AIDS – addressing the needs of vulnerable children

Giese S June 2002  
Presented at the National HIV and Education Conference: *An education coalition against HIV/AIDS*

Children's voices in the PMTCT campaign

Giese S May 2002  
Presentation at a Treatment Action Campaign rally at St George's Cathedral, Cape Town

Current available grants for children

Mvulane Z  
Presentations at four ACESS provincial workshops on grants awareness and empowerment training, Nov and Dec 2002

Identifying, monitoring and supporting vulnerable children - preliminary research findings

Giese S, June 2002  
Presented at the Nelson Mandela Children's Fund Conference: *A call to co-ordinated action for children affected by HIV/AIDS*

Social Security Policy and Law Reform

Rosa S  
Presentations at three ACESS provincial workshops on grants awareness and empowerment training, Nov and Dec 2002

#### **RESEARCH REPORTS**

Child Sexual Abuse in Atlantis

Parker Z, Dawes, A July 2003

Conceptual framework for the identification, support and monitoring of orphans and other vulnerable children

Wilson T, Giese S, Meintjes H, Croke R, Chamberlain R 2003  
CI and Save the Children (UK), Pretoria

Health and social services to address the needs of orphans and other vulnerable children in the context of HIV/AIDS – research report and recommendations

Giese S, Meintjes H, Croke R, Chamberlain R 2003  
CI and national Department of Health, Pretoria



Youth violence prevention and peace education programmes in South Africa: A preliminary investigation of programme design and evaluation practices  
Farr V, Dawes A, Parker Z July 2003

Assessing the impact of the Child Support Grant on the well-being of children in South Africa: A summary of available evidence  
Guthrie T July 2002

Assessment for child custody  
Brandt R, Swartz LS, Africa A, Dawes A (in preparation)  
In Tredoux C, Chohen A, Foster D, Wassenaar D (Eds) *Psychology for Lawyers*  
Junta/UCT Press, Cape Town

Criteria used by family counsellors in custody cases: A psychological viewpoint  
Africa A, Dawes A, Swartz LS, Brandt, R 2003  
In S. Burman (Ed) *The fate of the child: Legal decisions on children in the new South Africa*  
Juta, Cape Town

Interpersonal youth violence prevention  
Parker, Z, Dawes, A, Farr, V (in press)  
In Van Niekerk, A, Stevens, G (Eds.) *Crime, Violence And Injury Review*  
Medical Research Council, Tygerberg, South Africa

A survey of mental health practitioners' reports of child custody decision-making practices  
Swartz LS, Dawes A, Africa A, de Bruin GP (in preparation)

A thematic content analysis of psychologists' custody reports  
Brandt R, Africa A, Dawes A, Swartz, LS (in press)  
In *South African Journal of Psychology*

Rapid appraisal of primary level health care services for HIV-positive children at public sector clinics in South Africa  
Giese S, Hussey G, 2002  
Health Systems Trust, Durban

The National Children's Forum on HIV/AIDS  
Giese S, Meintjes H, Proudlock P 2002

#### **TRAINING TOOLS**

Current available grants for children  
Mvulane Z Nov 2002  
Prepared for ACESS Provincial workshops and grants awareness training

Family social security benefits in South Africa – training module  
Guthrie T 2002

Social security for children in South Africa – lecture  
Guthrie T, Berry L 2001/2  
Prepared for under- and post-graduate students in Medicine, Physiotherapy, Social Work, Law and Occupational therapy

#### **WORKING PAPERS**

A comprehensive social security system for children in South Africa: A framework  
Guthrie T June 2002

Analysis of Government's expenditure and uptake rates of grants for children: SOCPEN April to Dec 2001  
Guthrie T Feb 2002

Childhood poverty in South Africa: A review of evidence  
Guthrie T Feb 2002

#### **WORKSHOP REPORTS/ WORKSHOPS CONVENED**

Child well-being and poverty indicators in South Africa: Creating the real picture  
Report of the Cape Town workshop and the establishment of a child research network  
Jointly hosted with IDASA, UWC and the national Department of Social Development Feb 2003

Children's Bill: Initiating a national civil society response  
Proudlock P, Bower C, Mvulane Z, Philips L Jan 2003

Children's Bill: Promoting informed debate in the sector  
Proudlock P, Bower C, Mvulane Z, Philips L March 2003

Training and mock parliament workshop for community-based organisations (ACCESS members) in preparation for parliamentary hearings on social security policy reform  
Proudlock P, Mvulane Z, Rosa S, Mpokotho C, Myburgh E June 2003