Highlighting Positive Changes in the Lives of Orphans and Vulnerable Children in Ethiopia
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Faces of Positive Change

Highlighting Positive Changes in the Lives of Orphans and Vulnerable Children in Ethiopia

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Save the Children USA would like to extend its sincere gratitude to the President’s Emergency Fund for AIDS Relief (PEPFAR) and the United States Agency for International Development (USAID) for their generous funding which made the Positive Change: Children, Communities and Care (PC3) Program possible. We would also like to thank our many invaluable partners including: Tier I partners CARE, Family Health International, World Vision, and World Learning; the 35 national NGOs; and the more than 575 community-based organizations that were the heart and soul of this program. The staff and volunteers from every international, national and community-based partner organization have contributed endless hours of their own time motivated by their desire to improve the well-being of orphans and vulnerable children. This dedication has been the momentum behind every success of the PC3 Program.

We would like to thank Dr. Samson Radeny, Chief of Party for the PC3 Program for his vision behind the creation of this document and for his leadership and commitment to making positive change in the lives of children. Kelley Lynch managed to capture the true essence of the PC3 Program in her magnificent and touching photos and Kelley Bunkers brought all the pieces together to complete this book. Thanks to our team of reviewers who edited and made helpful suggestions: Carol Miller, Margaret Schuler, Gail Snetro and Kendra Blackett-Dibinga.

We thank the families and caregivers across Ethiopia who are making a difference in the lives of vulnerable children. And, last but certainly not least, we thank the 530,000 children for being a constant source of inspiration to us all and for graciously allowing us into your lives. Every one of you represents the face of positive change.
Foreword

The idea for this book came from discussions about the role of partnership, collaboration and taking actions to scale. One of the pillars of the Positive Change: Children, Communities and Care (PC3) Program has been the creation of partnerships and fostering a sense of unity within communities to address the needs of orphans and vulnerable children in Ethiopian communities. Bringing about positive change, in creative and sustainable ways, has been a cornerstone of the PC3 Program and partnership has been one of the main mechanisms utilized in this process. Considering that children, families and communities exist the world over and that the challenges faced by these groups are not unique to Ethiopia also provided motivation for documenting these stories. By sharing the positive changes that have occurred in the lives of Ethiopian children, families and communities, it is our hope that this book will be an inspiration to others around the world who are also confronting similar challenges. We believe that the contents of this book will transcend the boundaries, culture and languages of Ethiopia and provide hope to all of those who are working with and are committed to improving the lives of orphans and vulnerable children. The stories within these pages are about ordinary people doing extraordinary things; but things that all of us are able to do if given the appropriate tools and support.

This book is a celebration of three groups; children, families and communities whose participation in the PC3 program is creating significant changes in the lives of individuals and families across the country. The stories and photos contained in this book are examples of faces of positive change. Children, caregivers, teachers, community leaders, students, celebrities, doctors and others have all shown their commitment to improving the lives of orphans and vulnerable children, and have earned the title “Champions of Change.” The stories and photos within these pages are only a few examples of the thousands of champions that have stepped forward over the past five years to bring lasting positive change to the lives of vulnerable children.

This book is a tribute to all of those involved in the PC3 Program: the international partners who provided guidance, tools and insight; the 35 national organizations that have been mentors and advocates; and the 575 community-based organizations that have been champions of change for children. We hope that in documenting the stories of Ethiopia others will be inspired to bring about positive change in the lives of orphans and vulnerable children around the world.
Welcome to Adama Edir
Our Guest

You have seen we were on training in Campus Africa (this song).
I would like to

The best song (Queen) we sang
by the PCE Sangest

thank you
**Introduction**

Positive Change: Children, Communities and Care (PC3) Program

The Positive Change: Children, Communities and Care (PC3) Program is a five-year (2004-2009) integrated and comprehensive program designed to provide care and support to half a million orphans and vulnerable children (OVC) and their families throughout the country of Ethiopia. PC3 is currently the largest OVC program in Africa. The tiered approach implemented by the Program is unique as it reflects the principal strategy of building the institutional and technical capacity of grassroots organizations to provide sustainable, long-term safety nets to OVC and their families. The Program emphasizes community-based, results-oriented, and family-focused efforts which reduce the negative impact of HIV and AIDS on children, families and communities. PC3 is a consortium of international and local non-governmental organizations (NGOs) and community groups working in partnership to address the needs and unrealized rights of OVC, together with the Government of Ethiopia, private sector and the communities and families themselves. The Program is funded by the President’s Emergency Plan for AIDS Relief (PEPFAR) through the United States Agency for International Development (USAID). Save the Children USA is the lead agency and works in close collaboration with four international partners including CARE, Family Health International (FHI), World Learning (WL) and World Vision (WV), 35 national NGOs and 575 community-based organizations to deliver coordinated and comprehensive care and support services to 530,000 orphans and vulnerable children and their families in seven regions of Ethiopia, including Addis Ababa, Amhara, Afar, Benshangul-Gumuz, Dire Dawa, Oromia and Southern Nation Nationalities Peoples Region (SNNPR). The map below illustrates the regions in which PC3 is present.
The success of the Positive Change: Children, Communities and Care (PC3) Program can be witnessed in the faces of hundreds of thousands of children whose lives have been impacted through the various interventions and activities of this program. Changes in the lives of OVC and their caregivers have taken several forms and different dimensions including: access to education, better nutrition and health care; psychosocial support; training in life skills to help make transition to independent life easier; protection from abuse and exploitation; and promotion of child rights and children’s participation in decisions which affect their lives. The selected stories and photographs in this section reflect only a small part of the beneficial changes that have impacted children’s lives through the work of dedicated partners and volunteers who each tried, in different ways, to create an environment where children are encouraged and supported to reach their maximum potential.
Adera checks his box of goods before going out to work.
Shining Light into the Darkness

Ethiopia has the second highest number of child-headed households in all of Africa. A 2008 report\(^1\) estimated that there are 77,000 child-headed households across the country; the majority a result of parent death from HIV and AIDS.

Adera was born in Addis Ababa and completed elementary school there. When he was in 5\(^{th}\) grade, both of his parents died leaving him an orphan. He has four older siblings but they were not able to care for him so he went to live with his aunt. He stayed with his aunt through 6\(^{th}\) grade. She had three children of her own and struggled to take care of all of the children under her care. \textit{“She never said anything about it to me, but I could see how sad she always was, how she had to borrow money so that we could all live. I felt so bad about this and I thought it was better for me to disappear.”}

Adera decided to leave and started working at the central market as a day laborer—anything he could find such as loading and unloading shipments, carrying heavy cargo and other odd jobs. At night he slept in a rented room crowded with other children, covered in lice and fleas. After weeks of eating leftovers found in garbage cans, he became very sick and was diagnosed with anemia. After trying to make it work in Addis, he decided to leave the capital and headed to Akaka, a town 10 kilometers outside the city. He was able to find work as a shepherd and was given room and board as payment. That situation only lasted three months and once again he was on the move. He settled in Dukem but his situation continued to decline. He was begging in the streets when Kinfe from Gojo Berhan Organization found him.

The organization, \textit{Gojo Berhan} (Cottage Light), a partner in the PC3 Program, was founded six years ago by a group of 10 boys and 5 girls. The organization’s objective is to promote community awareness related to HIV and AIDS, gender-based violence and OVC along the high risk corridor of Ethiopia. The area is called the high-risk corridor as it is a major trucking route and has some of the highest incidences of HIV and AIDS in the country. As their current director says \textit{“we strive to shine a light into the darkness and break the silence about these taboo topics.”}

Once Adera was integrated into the program, he received life skills training including communication, decision-making skills and problem solving. With support from \textit{Gojo Berhan} he was able to continue his education and is currently in the 9\(^{th}\) grade. In the past year, he has also been reunited with his siblings and frequently sees them. Adera’s future plans include using his own personal experience to help other children without parental support. \textit{“I want to share my experience and give them the skills to be successful adults.”}

Genet is 35 years old. She is a single mother and lives with her 15-year-old foster child, Yalemwork, in Bahir Dar. Genet has known Yalemwork since birth as her family were close neighbours. Yalemwork was only six when she lost both her parents. At first, Yalemwork was taken into the home of a couple with other children, but that only lasted a short time because they were too poor to take care of her. At that point, Genet decided that she would become a foster parent for Yalemwork.

She could not imagine the little girl going to an orphanage. However, she also recognized that her own situation was quite difficult. As a bread seller, she barely earned enough for herself. Genet was committed to giving Yalemwork an education and spent what little she had on school fees, books and pens. What this sacrifice meant was that they could only afford to eat one meal a day. This was the situation for six years, until Genet had to consider removing Yalemwork from school for financial reasons. “I believe that education is important. It is a right of a child to be educated and it brings a sense of hope to a child’s future,” said Genet.

In 2005, the Community Core Group of her neighbourhood was in the process of identifying vulnerable children and families in the area. Both Genet and Yalemwork were registered as beneficiaries. This moment was life-changing for both of them. Yalemwork received school books, uniforms and bags and was able to stay in school. As an adolescent she is also eligible to receive life skills training and information on important issues like reproductive health, nutrition and HIV and AIDS prevention. Genet received wheat flour, oil and sugar on a monthly basis which meant that she and Yalemwork were able to eat three times a day for the first time in six years. Genet recently joined the Community Self-help Savings Group (CSSG) which allows its members to apply for loans from pooled savings.

Today, a child once on the verge of being sent to an orphanage is now completing 10th grade and talking about her future plans with enthusiasm. A foster mother who placed education before a full stomach is now also able to look towards the future and is excited about her plans to open up a small store: “The savings I can make will help me to guarantee the future of Yalemwork. This is the most important change for me. Before, I could not even plan for the day after tomorrow.”
Meet Belhu a fifteen-year old boy who dreams of being a pianist or a medical doctor. From the outside Belhu looks like an average Ethiopian teen-ager; but appearances hide the extraordinary challenges that have been part of Belhu’s short life.

His story begins at age three when his father left the family with no forewarning. To make ends meet and support the family, his mother worked in various odd jobs including selling Tela (a local beer) and engaging in commercial sex work. His mother died when Belhu was twelve years old. He had no siblings and at a very young age was forced to survive on his own. Belhu only knew that his mother passed away from tuberculosis (TB). What he did not know until later was that his mother, as a person living with HIV, had received various support from the Kebele Anti-AIDS club. Volunteers helped her during her last six months of being bed-ridden and then transferred her to the Mother Theresa Hospice for the last two months of her life.

On his own, Belhu was struggling. His mother’s painful death was a traumatizing experience, and he dropped out of school in 4th grade. His sadness and frustration only got worse as the Kebele was preparing to kick him out of his mother’s government-rented house for delinquency of payment. He was malnourished, thin and dressed in old, ratty clothes that were the only things he had left to call his own. At this desperate juncture, Belhu contemplated suicide. As if destined, during the lowest point of his young life, Belhu was introduced to the Community Core Group (CCG) in his area. That was two years ago.

Now, Belhu is a different person. As part of the support program for orphans and vulnerable children (OVC), he receives school materials and a uniform. His school fees are covered by the CCG. Food, medical support, counseling and close supervision are also are provided to him through the CCG and their local partners. He receives tutorial support and is involved in an income generating activity (IGA) selling Coca-Cola in his after school hours. In addition, he has a loving neighbor that now provides him with parental guidance, cooked food, and other support.

Belhu is now part of a world that he has so longed for and desired especially in those darkest and loneliest years. He is among the top ten students in his class and still participates in his IGA and saves 8 to 10 Birr (approximately $1) a day from his 15 Birr/day income. He is able to pay his rent with his income. Most importantly, according to this young survivor, is that he is now an active member of the community, participating in the Child Rights Club, Nature Club and choir. His dream is to be able to make others happy, through music or medicine, and give back a little of all that he has received.
Bringing Children Back from the Brink—Outreach Therapeutic Program

Bilal Jamal, Beheria Shukoor and their twins Sofia and Saifuddin at Kolfe health centre with Nurse Mohammad Muktar
Bilal Jamal, 43, and his wife Beheria, 25, are day laborers trying to provide a good life for their twins, Sofia and Saifuddin. Bilal suffers from a heart ailment and most of their very limited resources go towards his treatment. In June of last year, both of the children became severely ill and were taken to Yekatit 12 Hospital. Mohammad Muktar, 46 was the nurse who admitted the children. They were diagnosed with pneumonia and acute malnutrition. They were immediately referred to the Outreach Therapeutic Program, a critical component of the PC3 Program.

The children were provided with Plumpy Nut, a ready to use, highly nutritious food for severely malnourished children. After three months of treatment, the pneumonia was cured and both children were at standard height and weight. The family was provided follow-up and the twins are back on track towards healthy development.

One of the challenges of working with OVC in Ethiopia is the intense need for food as a result of consistent droughts (lack of food) and inflation. Thousands of children are affected. Ethiopia ranks first in the world for the number of children under the age of five diagnosed with chronic malnutrition. The issue of food security is tied to economic livelihoods and providing parents and caregivers an opportunity to become involved in income generating activities which give them the financial resources to provide food for their children. As Sofia and Saifuddin’s father, Bilal said, “Over time, I realized my children were getting thinner and thinner, but I didn’t know how to manage. I didn’t know where to go or what to do to earn money—or to help them.”

A comprehensive approach to food security is how PC3 partners have tried to address the issue. It is clear that without the livelihood component, parents such as Bilal will be in a constant state of desperation with their children feeling the effects.
One Man Making a Difference

Abdo Hussein is the chairman of the Iddir, a local civic group that has been active in his community for 22 years. He is 49 years old and has been involved with the group for most of his adult life. Traditionally, Iddirs were created to provide human and financial support for weddings and funerals. Ten years ago, when HIV and AIDS started to drastically affect their community, Iddir members begun to think about what they could do to help, as they had become aware of two little boys who lost both their parents to AIDS. “We decided we needed to support them. Doing so dramatically changed our view of the epidemic and we realized that we needed to support families before parents die—not just at their funerals.”

The Iddir changed their by-laws and started collecting community contributions for orphans and those sick with HIV and AIDS. Today, Yaferal Fere is the lead Iddir in a group of seven Iddirs within the local Kebele. With help from HAPSCO, a PC3 Tier II partner, they are able to support 570 OVC in their community.

One of the main contributions of the Iddir has been the creation of a community kindergarten. The Iddir started a kindergarten based on a child’s right to education and parent’s need for childcare. The Yaferal Fere Kindergarten is much less expensive than other kindergartens in the area and all fees are waived for OVC. There are 50 children paying a reduced fee and 20 OVC who attend for free. PC3 provided support for materials, chairs, toys and play equipment. The community came together and helped construct the buildings. After the first year of implementation, the community is thinking about ways to open another kindergarten. Abdo Hussein sees this as a way to improve the future of his own community. “I want the children to be engineers, scientists and doctors. Sending children to school at an early age is the basis for their future education. It gives these children a good start.”
Abdo Hussein and OVC members of “Yaferal Fere” Kindergarten
Circus Ethiopia—Boys with hats routine: Seid Mohammed, 17 (in light blue and white) and Bereket Berhanu, 16 (in red shirt).
More than Just a Circus

“Circus Ethiopia” is a community-based organization which reaches out to a range of children, working hand in hand with the local Iddir to support OVC. Yimam, 14, and Sintayew Abate, 19, are both members of the Circus.

Yimam is a double orphan. He currently lives with his older brother who supports all four of his younger siblings by working in a bakery. His brother makes approximately $45 per month and that covers rent of the house and few other basic needs. His brother had to drop out of school in the 9th grade to start working in order to support his siblings and ensure that the other children in the family get an education. Yimam has been receiving support from Circus Ethiopia for three years. The organization provides him with a school uniform, school material and food rations; providing much needed assistance to supplement the meager income his brother brings home. He has also been able to participate in life skills training. With the support Yimam receives from the PC3 Program via Circus Ethiopia he is able to go to school and dream big for his future: “I want to be a doctor when I grow up.”

Sintayew is a double orphan. She lost both parents to AIDS when she was 15, losing first her mother and then her father. She has been a member of Circus Ethiopia for five years and has a special affinity for drama. She and her younger sister live alone in the house her parents left. They both continue to attend school. Under the PC3 Program, income generating centers have been opened in her community including a beauty salon where she is currently responsible for managing activities. The beauty salon also acts as a skill-building center. Sintayew learns valuable skills and techniques while also earning a small amount of money which helps support living costs for her and her sister. “I’m so glad to have had this opportunity. I am happy and I am proud of myself. My plan for the future is to open my own salon—and by working and earning as much as I can, to better our lives.”
**Survivor**

Tsedeale is sixteen years old and is currently in the fourth grade. She speaks so quietly you can hardly hear her. And when asked about what happened to her, she begins to cry.

A number of years ago Tsedeale, who had grown up in a rural area with her parents, was brought to the Dukem area to live with her aunt so she could go to school. There was no school in the rural area where her parents lived. Three years ago, when Tsedeale was 13 years old, this same aunt participated in her abduction by a much older man who raped her and took her away to be his second wife.

Asefu Woldemichael is a teacher at Dukem elementary school where Tsedeale was a student. She had heard about the tragic event from a friend of Tsedeale’s and immediately went to the police. Together they went to the man’s house where they found the perpetrators. The man who raped Tsedeale was sentenced to 15 years in jail: his friend got 10 years and Tsedeale’s aunt got 3 months.

Thanks to Asefu, Tsedeale was rescued and returned to school. Asefu, as it happens, had been trained in just about every core area PC3 supports. She had psychosocial support training, legal training, life skills training, health training and financial and income generating activities training. When Tsedeale needed help, Asefu knew what to do and was able to mobilize the community’s support. She first called on the linkages with the authorities and with legal services in the community, and later on networks with health-care providers to ensure that Tsedeale was neither pregnant nor infected with HIV.

With support from the PC3 program, Tsedeale continues to receive psychosocial support, help with education materials, uniforms, and sanitary materials. With words that speak volumes, the soft-spoken survivor says: “I want to be an educated person. I need to help my mother (still living in the rural area) and to be able to support myself.” Asefu listens to this and her eyes begin to tear up from what most likely is a combination of pride and relief that the girl she helped rescue is such a survivor.
Tsedale Kebede and teacher Asefu Woldemichael
Vice speaker of the Child Parliament, Aynalem Mathiwo, talks with a student group at her school.
Nothing for Us, Without Us

In an effort to promote the role, voice and participation of children in decisions which affect their lives, the PC3 Program provided critical start-up support for the Children’s Parliament in the city of Hawassa. Founded by an Ethiopian NGO, JECCDO, in the summer of 2008, the goal of the Children’s Parliament is to provide a structured forum for children, especially OVC, to voice their opinions and be agents of change in issues which affect their lives.

A committee made up of volunteers from the community, local government and key NGOs provide technical assistance in the area of management, leadership and capacity building to the children’s parliament members—all free of charge. There are eight committees which make up the Parliament including education, health, sanitation, sports, art and literature. The Convention on the Rights of the Child is their foundation and provides guidance in their work.

Getahun was elected by the children in his sub-city to become a member of the Children’s Parliament. He is a single orphan, having lost his father. He currently lives with his brother. His mother lives on the other side of town in a small mud house. Once elected to the Child Parliament, Getahun was elected by the other child Parliamentarians to be Speaker. Child participants in this important forum range in age from 12 to 16 years old. There are currently 85 children involved in the effort. They are orphans, children of the street, children with disabilities, as well as healthy children living in two parent households. Getahun mentions that before this effort, children were not participating; adults were doing everything on their behalf. Getahun sees himself and the other children of the Parliament as “being the future leaders of Ethiopia.” As he says in his very confident 15-year-old voice “All children are equal—no matter if they are orphaned or disabled or just ‘normal’—they are children. Any child should be able to participate and decide what is best for them on the issues that affect them. For there can be nothing for us without us.”

Eighth-grader Aynalem is also a member of the Children’s Parliament. She is an A+ student and is very versed in the language of child rights. She joined the Children’s Parliament because she believes that children have a right to address the discrimination they face within society by raising awareness and speaking for themselves. She believes in the power of mass media in helping get the message across to the adults of her community. Aynalem also believes that children can be active participants in decisions which affect them and that social services should be inclusive when dealing with issues of OVC. As she clearly points out, “People—parents, teachers, others in the society—need to know that children should be treated well. They should not kick them, insult them, or harm their self-esteem. They should love and protect them—and help them by advising them.”
The concept or definition of family is not always static and does not necessarily fit into the traditional definition of two-parent. Family within the Positive Change: Children, Communities and Care (PC3) Program covers a wide spectrum including: child-headed households where children have and play adult roles and responsibilities, homes where grandmothers are raising grandchildren, and situations where unrelated foster mothers create a home for children in need of parental love and protection. The definition of family; what it is and what role it plays in the lives of children is dynamic and is clearly demonstrated by the selected stories and photos within this section. Supporting families, both traditional and non-traditional through training in livelihoods, creation of community savings groups, refurbishment of homes and provision of community support groups are ways in which the PC3 Program has supported families to help their own children.
Bezaye Yilma, 15, is a first year student at a technical college studying to be a secretary. She works in a grain store after school every day where she threshes grain by hand for export. She makes approximately $9 per month.

Her mother, Haimanot Mekonnen, 34, has four children ages 10-18; two boys ages 10 and 11 and two girls ages 15 and 18. Her husband deserted the family eight years ago. Haimanot makes and sells kolo near their home. She earns between 10 and 25 Birr per day (approximately $1-$2). Before her husband left the family, she had never worked outside the home and only has a minimal education. After the husband left, she started doing odd jobs to try to get enough money to feed her family. It was a constant struggle. Her oldest daughter had to quit school in 8th grade to begin working to help augment the family income, as Haimanot had become sick with what doctors believed was typhus and malaria.

When Bezaye was in 8th grade her family was in a critical state; her mother was bedridden and was quickly deteriorating due to starvation. The four children struggled to eat one meal a day. At that desperate juncture, Bezaye remembered that her history teacher, Tekabe Hailemariam, was a member of the community Iddir. She told him her story. The community-based association, Atekaly Idaroch, supplied Bezaye and her siblings with education materials, school uniforms, blankets and food. After three years of support, Bezaye was able to go to college. The community group also involved Haimanot to join a credit and savings group, set up by PC3. She took a no-interest loan of approximately $100 and started to work fattening poultry and sheep. Tekabe also advocated for the family to be provided with subsidized housing from the Iddir. Today they make their home in a small Kebele house they are able to rent for very little money and Haimanot dreams of expanding her business to include a local café.

Tekabe explains the work of PC3 and their partners: “This is the best work the project has done. Through this project, five lives were saved in this one family.”

It is indeed the work of PC3 but more importantly, it is the dedication and compassion of one man, Tekabe Hailemariam, who took it upon himself to help a family in his community.
Haimanot Mekonnen, 34, and her daughter Bezaye Yilma (in red), 15.
Throughout Ethiopia, particularly in urban areas, orphans and vulnerable children are heavily impacted by the HIV and AIDS pandemic. OVC care and support has now become an integral part of most HIV and AIDS projects as the coping mechanisms of the community are being exhausted by the growing number of affected and infected populations.

Kolfe Keranio is a sub-city of Addis Ababa and is recognized as the most destitute of the ten sub-cities of the capital. Since March 2007, PC3 has been providing nutritional food support for children in Kolfe through its programs in four health facilities: Alert Hospital, Woreda 24, Kolfe Health Center and Missionaries of Charity orphanage.

Kolfe Health Center services about three Kebeles (approximately 120,000 people) and began providing Plumpy Nut, a ready-to-use therapeutic food through partnership with the Clinton Foundation, about 17 months ago at its community-based therapeutic care (CTC) program for children who showed signs of severe acute malnutrition. Since the launch of this CTC program in March 2007, about 160 children have benefited from Plumpy Nut. Four-year old Melkamu Medikissa, is one such beneficiary, who, in the midst of the food crisis and living on the edge of poverty, has successfully conquered malnutrition, with the help of PC3 partners

The Medikissa Family
The Medikissa family his made up of four members: mother (35), a daughter (16), a son (10) and Melkamu (4) the focus of our visit. He was first met by Ambezu, a community health volunteer, about a year ago during one of her house-to-house visits, at which time Melkamu was screened for malnutrition and subsequently diagnosed with it. Since then, he completed a full round of treatment (9 months of Plumpy Nut), and today, Melkamu’s condition is stable and he has a healthy MUAC (middle upper arm circumference) of 12.5 cm.

Melkamu’s mother was 16 when she left her family in rural Ambo, a small town about 130 km west of Addis Ababa. She arrived in the capital in search of educational opportunities. She entered grade 7, but failed, at which time the extended family where she was living kicked her out and forced to find work on her own. Shortly thereafter, she met and married her husband, who died three years ago.

Today, as a single mother of three, Melkamu’s mother does odd jobs for money: washing clothes and preparing food for others each week. From this, she is able to earn about 90 Birr ($9) per month. Her home, a very small, one-room hut that she has lived in for 16 years, is subsidized by the government, making the rent 3 Birr ($0.30) per month. And through the PC3 Program, every month the Kolfe Health Center provides the family with 15 kg of wheat and 1 litre of cooking oil.

Melkamu is one of 6,897 children assisted by the PC3 Program in one sub-city: one child in thousands that has travelled the road to recovery. One family who is able to see hope on the horizon.
It is all a Memory Now

Merima is a 40-year-old mother of three boys. Today she talks of her old life and cannot hold back the tears. Five years ago, she was so sick that she was bedridden for two years. Her boys, then 13, 11 and 5 were responsible not only for themselves but for their incapacitated mother. None of the boys could study as they had to find menial labor shining shoes or doing odd jobs to help buy food for the family. Even the littlest one had household responsibilities and saw his childhood disappear at an early age.

However, Merima takes a breath, wipes the tears and reminds the listener that this is not a story of defeat but one of triumph. She is telling us the story herself. She is now healthy and can be a mother to her boys. And with the help of the Ahadu Community Self-help Savings Group (CSSG), she can support her family. Merima received $100 initial capital to start her own small business doing embroidery and handicrafts. Today, all her children are in school, and her small house is filled with laughing children.

Most of the women caring for OVC in Merima’s village of Gulele are members of CSSGs. The CSSG methodology, introduced by PC3 partner, CARE International, has helped more than 5,000 women across Ethiopia. CSSGs have allowed women to take out small loans and invest in business projects in order to earn a decent and respectable living. Each group has 10-20 members who are caregivers of one or more OVC. Each member agrees to save a fixed amount of money every week in the group’s cash box. Members borrow to start or expand small business initiatives aimed at providing a secure livelihood. The members pay back their loans with very small interest making more money available for other members. This money is also able to serve as collateral for these women from micro-finance lenders; almost all of whom would have rejected these women as high-risk clients. With the expansion of the CSSG methodology, communities are able to build reliable and easily accessible source of community managed financial services and better help OVC; one mother at a time.
Yadawerk Demeka, 32 of ‘Wetet Yinurew’ (‘let it have a result’ or ‘results focused’) community savings group.

The women (and chairman) of ‘Wetet Yinurew’ community savings group.
Team Spirit

Wetet Yinurew is a Community Self-help Savings group (CSSG) located in Debre Zeit, an hour outside of Addis Ababa. The group is made up of 23 women and one man, their chairman, Fromsa Yirda. Most in the group are single mothers living in extreme poverty and are primary caregivers of their own children, grandchildren and/or orphans. The lives of many of them have been touched by HIV and AIDS.

Two years ago, the initial members of the group received training from the PC3 Program. After the initial training, they were responsible for training 18 community-based trainers; two from each of the nine Kebeles in the area. The community-based trainers were encouraged to organize groups from their neighborhoods with a focus on saving money. The idea of community savings is that members contribute a certain amount each month and the money is then available to members to conduct business or support household expenses. Each of the members received a savings book, a registration book and training. In the first phase there were 12 groups. Now there are 20 groups with a total of 354 members who have collectively saved approximately $5,200. In terms of individual savings, each member contributes 5 Birr (approximately 50 cents) every 15 days to the group fund. Members can then borrow from the group’s capital fund when needed. Loans must be repaid within three months at a monthly interest rate of 3%.

Yadawerk Demeka, 32, is a member of a community savings group. She was working as a day laborer washing clothes or selling the traditional staple, injera. Seven months ago, she took a loan of 400 Birr (approximately $40). With the money she started a roadside vegetable stand. She has already repaid the loan and is able to support all three of her children (grades 3-10) and their education as well as her bedridden mother with her new income.

Elfenesh Tadessa, 35, also a CCG member is the mother of seven children. After her husband died, her relatives tried to grab her property. She appealed to the court and at first lost the land, but fortunately won it back in a subsequent hearing. When she was finally awarded the land, she borrowed 400 Birr ($40) from the savings groups to build a house on the property. Now she owns her own home and is freed of the monthly rent payments that daunted her before.

Community savings group chairman, Fromsa Yirda, says: “As you can see in this group there is the social aspect, the team spirit, the love for each other and thinking together. These are the result of PC3. Through PC3 we learned how to save and use money, how to revolve it and how to spend it.”
Aster, Adugna (right) and Haptamu (left) outside their newly reconstructed house
Aster, Adugna and Haptamu Get a New Home

Four years ago, after the death of her father from AIDS, 17-year-old Aster became the head of her household and the primary caregiver of her two twin siblings, Adugna and Haptamu.

Before her father died, they lived in a rented house. One month after his death, they did not have the money to cover the rent and were quickly running out of food. They knew of a community organization, Tesfa (a Tier II partner of CARE), and went to them for help. Tesfa provided monthly food rations, via their collaboration with the World Food Program, and a small amount of cash to assist with household and educational costs. They also advocated for the children at the Kebele, a local government office, to get some sort of secure housing.

Things were going well until two years ago when their house caught fire and Adugna was severely burned. As Aster says, “We were so sad and desperate. We had no hope.”

Once again, Tesfa came to their assistance and provided them with needed support. They took their case to the Kebele and Adugna was able to be treated free of charge. The local community, organized by Tesfa and the Kebele, also came together and helped the children rebuild their home. Today, all three children are now back in school and delighted that they are able to focus on studying rather than finding work and worrying about where their next meal will come from.

When asked what the support from Tesfa means to her and her siblings, Aster replied; “It has meant that I will be able to work and be a better person in the future. I am now confident that I will be successful in my life. I want to be an English teacher—and to help others who are like we used to be.”
Faces of Positive Change: Communities

The frequently heard saying “it takes a village to raise a child” has proven true in the case of Ethiopia. Communities across the country have come together to create positive changes in the lives of children. Communities of schools, Parent-Teacher Associations, Iddirs, non-governmental organizations, and the private sector have all made commitments, in different ways, to positively impact the lives of orphans and vulnerable children within their communities. Through joint efforts, creation of partnerships, and bringing together different sectors of a community, these groups have assisted children and their caregivers with educational support, food and nutrition, necessary medication and treatment, training, support and advocacy, among others. The PC3 Program has provided essential capacity building, technical assistance and skills training to local community groups so that they could provide essential services and support to vulnerable children. The selected stories and photos in this section highlight this commitment and show that it does take a village to bring about positive change in the lives of children.
A Community Connected

“The reason we work so hard to support orphans and vulnerable children in our school is because we are deeply connected with them ... they consider us their guardians and there is no way we can ignore them” Aynalem Walelign, school teacher.

More than 300 schools have participated in the PC3 Program, but Hibret Primary School stands out above the rest. Hibret Primary has a student population of 4,063 students; by far the largest in its geographical area. A significant number of students are OVC. Though the school is situated in a seemingly green and fertile landscape, most households are poor and economically vulnerable largely due to food insecurity. The average number of children in a household is estimated to be between 5 and 7. The growing economic challenges coupled with effects of HIV and AIDS have contributed to increased vulnerability for children in this area.

Hibret Primary was first identified by PC3 partner, World Learning, in 2006. Upon recruitment, two teachers and a member of the parent-teacher association (PTA) were trained on the core concepts and practical aspects of care and support for OVC. The initial training focused more on community mobilization and was followed by a host of other trainings tailored to develop capacity of the teachers to effectively deliver a comprehensive package of care and support services to OVC. One of the immediate assignments the three trained teachers had was to conduct orientation sessions for the entire staff and form a core group of 16 members involving teachers and selected members of the PTA to oversee program implementation.

Armed with the skills and tools to intervene on behalf of OVC in their schools, the three trained teachers and their dedicated director called a PTA meeting and formed sub-committees. An annual plan of action complete with budget and deliverables was drafted. The core group met on a regular basis to ensure that plans were implemented as expected. Sub-committee members briefed the core group at each meeting of the progress they were making to establish the structures required to roll out all program activities. The school started to provide a package of coordinated care (psychosocial support, health care, food and nutrition, education, shelter and care, protection, and economic strengthening) services as commonly referred to within the PC3 program.

The core group quickly learned that a lot more needed to be done to restore hope in most of the children. They also learned that some of the kids who had dropped out of their school did so in large part because of their own HIV status or that of their caregivers. Therefore, a new objective was included; re-enrollment of kids who dropped out and plans to support the improvement of academic performance. The core group mobilized the school community to donate clothes and food for the most vulnerable kids – some
who skipped school because they were too hungry to attend. Fellow students donated their extra clothes, books and pens to support the OVC. In their first year, the school provided support to more than 400 OVC in their community.

The school has been successful in raising awareness about the challenges facing orphans and other vulnerable children and advocating for action by school and local communities. As a result of their advocacy, responses to the OVC needs have been overwhelming. The actions of the school have contributed to stigma reduction and increasing acceptance of OVC and their households. In addition, more than 15,000 Birr (approximately $1,500) has been raised to support OVC.

With an initial cash support of 5,000 Birr (approximately $500) the school started on a path towards shaping the future of the OVC in this school. Rather than use this initial funding to provide direct services, the core group used a bit of wisdom to invest it in order to ensure a sustainable flow of income to support the children on the long term. They asked the school to allocate a two-acre plot of land to cultivate vegetables, corn and sugarcane. The school’s positive response provided a remarkable opportunity for the core group to start earning significant income to support the children. The first sugarcane harvest brought in 6,000 Birr (approximately $600) and new mango trees and other fruits and vegetables which can be sold for profit have been planted. The team members continue to dream big and be proactive in their desire to make OVC in their community strong, enabled, and educated citizens.
Ten Cents a Month is Making a Difference

*Edget Fere* is a savings and credit cooperative with 150 members that was established six years ago in Addis Ababa. Members come from many walks of life including the unemployed, housewives, merchants, and students. From the beginning the co-op has provided savings and credit services for its members. Three years ago, with assistance from PC3, they decided to branch out and start to work together as a group to support OVC and their caregivers. Members now make their usual credit and saving contributions and have also decided to each contribute one Birr/month (approximately 10 cents) to support OVC in the community. The members have become a Core Community Group and facilitate the provision of key services to OVC in the community with financial assistance from PC3 and technical support from Tier II partner, *Mekdem*.

In practice it works quite simply. First, the criteria are set: for a child to get services, they should be a single or double orphan or a vulnerable child. When one of the members hears about a child in the community who is in need, a volunteer will do a home visit and assess the need. The case is discussed among key group members and a decision is made regarding what the CCG can do to assist the child. The CCG does not always provide direct support so that is also why a service mapping exercise is completed to identify other support services within the community. The system builds on community linkages and established support systems. For example, an orphan has a school uniform but needs shoes in order to attend school. A volunteer/core group member approaches a local shoe factory and talks about the work the CCG is doing in the community supporting OVC and how many people are giving their own time and money to make things better. The member then asks the shoe factory to consider contributing to the community by donating a pair of shoes for the orphan.

One member of the group describes what drives her to volunteer and assist OVC: “When we first started this CSSG we were vulnerable ourselves. As group members, we took loans and improved ourselves so that now many of us are successful in our businesses. Now we want to turn around and help to support the rest of the community. That’s why we are so enthusiastic about helping OVC and their caregivers—we changed our lives and now we want to help others change theirs.”

Member Rahel Shibabew, 18, a former OVC herself, is now an active member of the CCG. She says that she is driven to help others like her knowing how much the CCG supported her during her difficult time. She is currently a teacher and feels confident that her life has turned around and she wants to do the same for others.
PC3 works with several community-based structures to establish sustainable support systems for orphans and vulnerable children who are impacted by HIV and AIDS in Ethiopia. One of the strategies the program uses is capacity building for existing groups in order to develop skills in community organization and community action. Karagutu Primary School is located in Amhara Regional State and serves 975 children. This is their success story.

Like others, the school received training in community organization, resource mobilization and management, and in specific aspects of care and support for OVC such as psychosocial support, life skills, child protection and assessment and provision of child needs. The school received a small amount of financial support from the PC3 program to present the trainings—12,000 Birr ($1280)—and to begin mobilization of the PTA to oversee the support services. The core group consists of both teachers and parents and has sub-committees that take responsibility for providing various services to needy children. This is all done under the supervision of the school’s director, who commented: “The teachers and parents were so eager to be part of the solution to the problem of orphans in our community. In this village we are all affected by HIV and AIDS and we are unhappy when our children cannot attend school because they lack fees and other materials. That is why this program has the support of the community.”

Apart from delivering education, psychosocial support and other services, the school has implemented successful business enterprises that generate funds to support needy OVC in the school. Some of the enterprises include sheep fattening, gardening and shop-keeping. Since inception of the small business enterprises, the school has registered a net profit of over 4,000 Birr ($425) per year. Furthermore, the school has been successful in mobilizing additional income from the local community. In 2007, more than $1,100 was raised to support OVC. The income generated is used to provide various kinds of support such as purchase of school uniforms and materials, food support and medical care, and shelter refurbishment. The teachers provide psychosocial support to needy children and offer tutorial services to those whose class performance fall below average. The OVC don’t pay tuition or other fees charged by the school, and when they graduate or transfer to other schools, the core group advocates for school fees waivers for them. They also stay in touch with the children to ensure they are well and healthy.

Through these efforts, the school has changed the lives of over 500 OVC in the past two years and created a sustainable mechanism for providing care to many others in the future. The school is a model community program that is replicable to other communities. The school is visited by other schools and curious visitors from other programs who are keen to learn from their experience and is a good example of how small initiatives can make a big difference in the lives of OVC.
The PC3 team visited the home of one of the beneficiaries of the program who was full of praise for the school’s OVC program: “My parents died and I had to drop out of school because there was no money to feed us. I have two younger brothers. I went to the streets to beg so we could have something to eat. One day a member of the community core group found me on the streets and asked why I was there and not in school. After telling my story she took me to the school and I was registered as project beneficiary. I received school books and uniforms and started again in Grade 6. My life has changed so much. I am in Grade 8 now and my dream is to become a singer.”

**PC3 Building Capacity and Skills of Local Community-Based Organizations**

An important component of the PC3 Program is capacity building and training of local community groups. PC3 Tier II partners provided technical assistance and skills building to more than 575 community-based groups over the lifespan of the program. An important skill transferred to Tier III partners was the service mapping tool. Yetebaberut Sertegnoch *Iddir* is one of the Tier III partners that has successfully learned and then conducted service mapping. The CCG of this *Iddir* first identified a central area in their *Kebele* and started plotting various geographical landmarks like roads, walk paths, rivers and buildings. Once these were plotted, the team observed and confirmed the location and availability of services in that geographical area. During their walks, they raised the curiosity of locals who questioned their actions. Members of the team mentioned that it provided a wonderful opportunity to inform community members about the work the *Iddir* was doing for OVC. The completed map included essential information about health facilities, pharmacies, schools, police stations, government offices, factories, churches, mosques and hotels. Equally as important as the map, was the face to face time and relationship with service providers that was strengthened during the service mapping process.
Bringing Play Back to Children

*Iddirs* have a long history in Ethiopia as community associations whose members contribute monthly to build up joint—and lendable—capital to pay for expensive events like funerals and weddings. In response to the growing HIV and AIDS crisis affecting their communities, several years ago many *Iddirs* expanded their mandate to include local development activities—especially working with OVC. This commitment has made them one of the largest Tier III groups working within the PC3 Program.

One of the impressive characteristics of the *Iddir* is that all positions are volunteer. They are democratic organizations. An individual can serve three years as head of the *Iddir* before having to stand again for election. Tekabe Hailemariam, 55, is one of those volunteers. He is the chairman of the *Atekaly Idiroch*—an umbrella organization of 130 *Iddirs*. They receive information, training and capacity building and then share it with the other Iddir leaders who then pass it to their individual members. This domino process has created awareness and has helped mobilize communities to solve their own problems by acting on its own behalf. The *Iddirs* have become more proactive and no longer look towards other organizations or institutions to solve local issues.

The *Iddirs* began collaborating with a PC3 Tier II organization, *Mekdem*, in 2004. *Mekdem* focused on providing technical assistance to build the capacity of *Atekaly Idiroch* members in responding to OVC issues in their communities. Training included planning, monitoring and evaluation, financial resource development and record keeping. They helped to strengthen—and build—their capacity to do more. They received training in how to handle and work to support these kids, good governance, reporting, planning, monitoring and evaluation and record keeping.
The *Iddirs* currently provide orphans and vulnerable children with school uniforms, tuition fees, education material support, clothing, food support, health services, life skills training, psychosocial support, legal protection, vocational training and assistance with income generating activities for caregivers; all elements of the coordinated care approach promoted by Save the Children and the PC3 Program. The *Iddir* has constructed a playground outside their office and set up a mini library, table tennis, drawing materials, musical instruments, dance and art clubs, and a football team. On weekends, there are hundreds of children taking advantage of the space. To secure future activities of the *Iddir*, several initiatives have been developed. As another *Iddir* leader, Tamrat Asfaw, 62, said: “*While previously our income generating activities were individual in nature, now we are bringing them together into three areas: wood working, metal working and a beauty salon. The municipality has given us the plot of land adjacent to this building on which to construct a building to house these training/income generating centers.*”

With assistance from PC3 via *Mekdem*, local communities are creating local responses to support OVC.
“A child without parents is like a vine without a stem. We need love from you and a feeling of hope. We are not orphans because of our own actions. What if your own beloved son or daughter became an orphan due to one thing or another?”
**Fekir Behiwot** is a community-based organization (CBO) located in Hawassa. It is also a Tier III partner within the PC3 Project. The organization was established in 2005 by seven adolescent orphans. They established *Fekir Behiwot* because they felt that they knew, first-hand, what kind of support OVC needed. Fekir Behiwot currently has 330 child members, the majority of whom are 15 years of age and under. PC3 Tier I and Tier II organizations provided training and technical assistance in the area of organizational management and service delivery. Fekir Behiwot has an exemplary team of dedicated and compassionate people doing as much as they can to provide support to OVC. The most amazing thing in this case is that it is children who are providing support to other children.

The organization’s mission is to enable orphans and vulnerable children to jointly overcome social, economic and psychological problems and support them today so that they can learn how to stand on their own feet and solve their own problems tomorrow. *Fekir Behiwot* does this by providing a coordinated care approach of seven key services developed by PC3 for OVC and their caregivers. As an income generating activity, the organization has opened a café and all proceeds go to support the organization and its members.

Abraham Mahari, 20, was one of the seven founding members of the organization. He lost both parents when he was 12 years old. He managed to win a scholarship to study to be an electrician and recently graduated. Asaye Abera, 20, is also one of the founding members. He is a first year engineering student and described his reason for wanting to start *Fekir Behiwot*: “One day in class we were talking about HIV and AIDS. Some of the students pointed at me, saying ‘his mother and father died of HIV and AIDS.’ I felt so upset. But this is what happened to children who lost their parents—we were ostracized. And that made us feel sad—and angry. Thanks to the work of organizations like ours, things are changing. The situation for orphans is much better now.”

The intimate knowledge that young people like Abraham, Asaye, Berhanu, Terekegne, Terekegne and Negash have about the difficulties faced by OVC has helped them create powerful responses. Discrimination, stigmatization, socialization, and the need for educational, medical, and legal assistance are all daily challenges faced by OVC in Ethiopia. Having lived through these issues themselves, the founding members of *Fekir Behiwot* are devoted to providing support and services to other children like themselves. They dream of a world where orphans are not only accepted but are loved for whom they are and not judged for what they have lived through.
Public-Private Partnerships

Ethiopia has the highest rate of chronic malnutrition in children under five years old in the world. As part of the PC3 Program, Save the Children, USA is leading an initiative to provide nutritional and medical care and support to acutely malnourished children and pregnant and lactating women in three high HIV prevalence regions of the country. The initiative aims to reach the majority of HIV infected and affected acutely malnourished infants and children through a community-based approach. Working through local communities and public health facilities, the program builds capacity of caregivers and health care workers to assess and treat malnutrition through the community-based therapeutic care (CTC) approach using internationally accepted protocols. Kolfe community is one of the 10 sub-cities in Addis Ababa, and is an excellent example of how public-private partnerships can support a network of community health facilities and be an effective vehicle for improving case detection and treatment of malnutrition in children impacted by HIV and AIDS. The sub-city has a total population of 450,000. PC3 has supported more than 8,000 OVC in this area.

Recognizing the important link between HIV status in children and the need for adequate food, PC3 has collaborated with the Ministry of Health at the regional level to equip 31 health centers and hospitals in the poorest areas of Addis Ababa with skills to identify and treat malnourished children, including the provision of therapeutic food. The program currently uses Plumpy Nut (a ready-to-use therapeutic food- RUTF) provided by the Clinton Foundation, for children who show signs of severe acute malnutrition. In some cases, the children are linked to supplementary feeding programs such as the UN World Food Program while sustainable food security measures are being planned. To increase early detection and treatment of malnourished children, PC3 partners work with local partner organizations to mobilize the local community core group to conduct outreach programs in the poorest Kebeles surrounding the five health centers in the area. The community core group members, all volunteers, receive three days of training in how to identify severe acute malnutrition, how to educate care givers about preparing nutritious foods from the local market, and how to refer cases to the closest health center or hospital.

In the past two years, approximately 3,500 children suffering from malnutrition were admitted to the program. Most children admitted to the program begin to show signs of recovery within a week of initiating treatment with Plumpy Nut. Within eight weeks most of them attain the expected 80% weight gain and are ready to be discharged. Community awareness of malnutrition has increased tremendously with many caregivers showing appropriate initiative and taking their children to the health center for treatment once they see the signs. An additional benefit of the program has been an increase in detecting pediatric HIV and AIDS cases and providing treatment as a significant proportion of severely malnourished children tend to be HIV positive.
A Champion On and Off the Track

One of the ways that PC3 Program partners have raised public awareness of and compassion for issues related to orphans and vulnerable children is by utilizing well-known public figures in education campaigns. One of the greatest and most recognized figures, within Ethiopia as well as internationally, is Olympic track and field champion, Haile Gebreselassie. He is a holder of 24 world records and has won numerous Olympic and World Championship Titles. Haile was born in the province of Arsi in Central Ethiopia. He is one of eleven children. Haile recounts that as a child he had to run 10 kilometers a day each way to school. At age 16, without any formal training, he entered the Addis Ababa marathon, and finished in two hours and 42 seconds.

Haile joined hands with Save the Children, USAID, CARE and other partners when the PC3 Program was initially launched in 2004. Haile is a champion of orphans and vulnerable children and has dedicated significant time and resources to educating others about the issues. He has encouraged all Ethiopians to get involved and has led by example. One of his greatest accomplishments is founding the Great Ethiopian Run. It was established in 2001 and the Run brings together 30,000 people from the world for the purpose of publicizing important health and social messages to the public.

Haile’s gentle manner with children has made him a favorite and he is constantly surrounded by large groups of young adoring fans wherever he goes. He is frequently referred to as the “Ambassador for Orphans and Vulnerable Children.” His upbeat message and commitment to being a champion of change has made him a hero both on and off the track.
Lessons We Can Learn From These Stories

The stories contained within this book will hopefully motivate us all to do as much as we can to be agents of positive change in the lives of vulnerable children. The stories demonstrate that anyone can make a difference in the lives of children if they are provided with the appropriate tools, skills, knowledge and support. The stories show us that no obstacle is insurmountable when people come together with a common vision; positive lasting change can be achieved. In addition to the inspirational aspect of these stories, there are also important lessons to learn for those who are currently working with children or want to begin the process of creating services and support for orphans and vulnerable children.

Key lessons highlighted in the stories include:

- Orphans and vulnerable children have incredible resilience and coping mechanisms. With appropriate support, skills and guidance, child-headed households are a viable and cost-effective way of keeping families together and children within communities. Support services and mentoring are key components of any program targeting child-headed households. “Adera” is a perfect example of how children who are faced with unbelievable hardship cannot only survive but thrive when supported by community. “Fekir Behiwot” is another example of how children have gone beyond any expectations adults might have and become agents of change in their own lives and the lives of other children.

- Children frequently know what is in their best interest and when given the opportunity, they can eloquently share their insight on issues affecting their lives. The members of the Children’s Parliament demonstrated this capacity. When adults tune their ears to listen to the voices of children, important lessons can be learned. Incorporating the opinions and participation of children into program design, implementation and evaluation is an essential component of any program working with children.

- Schools are focal points of any community and provide not only education, but protection and psychosocial support. The story of Tsedale reminded us that classrooms and teachers are much more than learning centers. Schools can be the focal point and gathering place of a community and frequently provide a safe haven for children suffering abuse and exploitation. Schools should be included as a key partner in any OVC programs and should be considered as more than just an educational environment.

- Strengthening families is an essential way to improve the lives of OVC. Providing educational support, medical treatment, food and shelter are all ways in which families may be assisted. In addition to meeting the basic needs of families, we have also learned that providing caregivers with small loans to begin their own livelihood initiatives has a huge impact on families. With very little investment, significant results can occur. The
The domino effect of giving a woman the opportunity to make a decent living and provide for her children has benefits that go way beyond the obvious. With increased self-esteem, the members of Wetet Yinurew and Ahadu Community Self-help Savings Groups have been able to create positive change in their own lives and especially in the lives of their children. Livelihood and community savings groups are essential elements of any comprehensive care package.

- Strengthening and building capacity of local community-groups with capacity-building is an excellent way to improve ownership and buy-in, encourage locally-inspired responses, and promote program sustainability. The impact made by Iddirs, Core Community Groups (CCG) and other community-based groups has been profound, as demonstrated in the stories of Atekaly Iddir, Karagutu Primary School, and Yetebaberut Sertegnoch Iddir. With training in key areas, local groups have created and sustained responses to meet the needs of OVC in their communities. Utilizing national NGOs as mentors and incorporating the experience and expertise of international organizations in the tiered approach, has created sustainable changes in the lives of children. Capacity building which utilizes a tiered approach has been demonstrated to be not only successful, but increases reach of program ideas and services, utilizes program resources in a cost-effective manner, and promotes local ownership of OVC responses.

- An essential part of the success of the PC3 Program is the use of volunteers, especially at the community level. Thousands of volunteers across the country were involved in efforts related to OVC including but not limited to service provision, fundraising, advocacy, and training. An important lesson learned by program partners was that keeping volunteers motivated was a priority for Tier III partners. Developing different activities, awards, or recognition of the value of volunteers needs to be incorporated into program strategies and must be done on a regular basis in order to retain volunteers. If volunteer appreciation is done correctly, it is an excellent way to retain volunteers. Incorporating volunteers into program implementation is cost-effective and can be sustainable.

- Finally, identifying champions of change who will be leaders who advocate on behalf of orphans and vulnerable children is an important tool for increasing public awareness. Haile Gebreselassie is a perfect example of how local celebrities can be agents of change; provide an example and inspire others to do the same. Haile has been the “Ambassador for Orphans and Vulnerable Children” and has brought the issue to the forefront utilizing his status and reputation as an Olympian. Finding and collaborating local heroes who can show commitment and leadership is an excellent way to promote public awareness and involvement in OVC issues.

*The Faces of Positive Change* is a book about ordinary people doing extraordinary things. The lessons we can learn from them are numerous. We hope that others will learn from the Ethiopian experience and improve the lives of vulnerable children in all corners of the world.
For more information about the Positive Change: Children, Communities and Care Program or the stories contained in this booklet contact:

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