Towards Evidence-based Reform of Policy and Practice in Child Protection in Kenya

An overview of a systems approach to child protection from prevention to residential care.

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An overview of a systems approach to child protection from prevention to residential care

A study report on good practices, methodologies and strategies piloted and applied by the Children Community Safety Nets Project in the Kenya government institutional and field services from 2005 to 2011.

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We specifically extend our thanks and sincere gratitude to the Department of Children Services (DCS) being our official partner, which opened up its statutory institutions and field offices to our intervention and assisted us in many ways to ensure the efficiency of our project. We thank the DCS Director, Mr. Ahmed Hussein, the Head of Institutional Services Division, Mrs. Josephine Oguye, the Head of the Field Services Division, Mrs. Carren Ogoti. We cannot forget Mrs. Basigwa, former DCS Deputy Director who strongly supported our project in its first years. We thank too the Provincial Director of Children Services, Mrs. Catherine Maina and her Deputy, Mr. John King’ori.

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Administration team: Lina M. Mwangi, Annie Njoki.

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INTRODUCTION

The Italian support to Kenya is guided by the principles of the Paris Declaration of 2005 as well as the Kenya Joint Assistance Strategy adopted by 17 donor countries, including Italy. In this context, the Italian Cooperation has chosen - based on past and current experience and in consultation with the Italian NGOs present in Kenya – five policy sectors to focus on: water, urban and rural development, health, education and child protection.

Over the last 25 years, Kenya has benefited from 160 million Euro in grants and 50 million Euro in soft loan from Italy. At present, the Italian Cooperation funds over 60 projects in Kenya.

We can also say that the Italian Cooperation contributed to an effective support to the Government of Kenya in its efforts to develop key social sectors as well as to achieve the Millennium Development Goals. Moreover, most of the development initiatives are fully consistent with the principles of aid effectiveness, being implemented by the relevant line Ministries and using national management systems.

In the field of childhood protection, the Italian Cooperation is particularly active through its support to the Italian NGOs working in the field. In particular, the interventions aim at supporting the most vulnerable children and children at risk through the improvement of links and synergies between the institutions and structures working with children (socio-educational centers, non-governmental organizations).

In collaboration with CEFA and OVERSEAS, the Italian Cooperation has supported actions to protect the rights of minors, providing activities for capacity building of relevant government departments to ensure the effective implementation of existing legislation.

The Italian Cooperation demonstrates once again the commitment of the Government of Italy to assist in eradicating poverty in Kenya by supporting the economy of Kenya through the improvement of its macro-economic indicators as well as through direct assistance in implementing concrete and tangible activities. Our individual and collective involvement today will make a difference to this Country’s future, which depends on children, who are the citizens and workers of tomorrow.

This publication illustrates the results obtained by “The Children Community Safety Nets Project”, highlighting the success of this initiative supported by the Italian Cooperation in collaboration with local institutions.

Martino Melli
Director of the Italian Cooperation in Nairobi
FOREWORD

The Department of Children Services greatly appreciates the support and crucial role played by the Children Safety Nets Project in strengthening reforms of the National Child Protection System.

This publication well documents the transition the DCS is going through as it presents good practices, methodologies and strategies piloted and applied by the project in our institutional and field services all through our partnership from 2005 to date.

In particular, the CEFA project has been engaging in family tracing, reintegration and aftercare of separated children living in our institutions. This intervention has successfully helped us to decongest them through implementation of effective reintegration strategies. Shifting our concern from institutionalisation to community and family care, the project has also focused our attention on the psychosocial needs of children in need of care and protection. As a result, our institutional system has been re-structured to accommodate counselling and enhanced educational services within organized sections. Institutions have also been equipped with innovative tools to meet improved standards in child assessment, behaviour change, and in response to child developmental needs.

Our field services have also greatly benefited from the project through improved practices in child protection at district level within Nairobi Province and surrounding districts. A stronger and improved child protection system has been achieved by scaling down Area Advisory Councils at location level, training various partners, integrating and coordinating Volunteer Children Officers and Village Elders interventions. The establishment of protocols and good practices in child rescue, reintegration and aftercare, as well as the harmonization of stakeholders’ plans of action has also provided an improved formal background on which to operate.

As the project is winding up, we acknowledge and appreciate the rehabilitation and provision of physical infrastructures within our institutions. Moreover, we are grateful for the establishment of an improved child protection system in relation to operational structures and management. The capacity built on our staff both in terms of training and through actual provision of services remains an important asset for our Department and it is the groundwork on which sustainability of the project interventions is to be achieved in the long term.

As we express our gratefulness to the Italian Cooperation being the major project funding agency and to the CEFA and Overseas NGOs for its implementation, we wish to get future additional opportunities to continue our fruitful partnership and collaboration.

Ahmed Hussein
Director of the Department of Children Services
Ministry of Gender, Children and Social Development
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<td>Area Advisory Council</td>
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<tr>
<td>ACRWC</td>
<td>African Charter on the Right and Welfare of the Child</td>
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<td>CCI</td>
<td>Children Charitable Institutions</td>
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<td>CEFA</td>
<td>European Committee For Agricultural Training</td>
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<td>DCO</td>
<td>District Children Officer</td>
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<td>DCS</td>
<td>Department of Children Services</td>
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<td>DRS</td>
<td>Dagoretti Rehabilitation School</td>
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<td>GOK</td>
<td>Government of Kenya</td>
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<td>LAAC</td>
<td>Location Area Advisory Council</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>NCRC</td>
<td>Nairobi Children Rescue Centre</td>
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<td>Provincial Director of Children Services</td>
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<td>PET</td>
<td>Participatory Educational Theatre</td>
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<td>TCRC</td>
<td>Thika Children Rescue Centre</td>
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<td>UNCRC</td>
<td>UN Convention on the Rights of the Child</td>
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<td>VCOs</td>
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CHAPTER 1

THE CHILDREN SAFETY NETS PROJECT

1. PROJECT BACKGROUND

In Kenya, the past decade has seen major changes on how child welfare practitioners think about the needs of children and how they should be served. This evolution has resulted in refined definitions of best practice and a challenge to policy makers and practitioners to do a better job for children.

As in the eighties and nineties institutionalization was believed to be the best response to children in need, at the turn of the century, while the country struggled with rising numbers of street children, orphans and children at risk, mainstream organizations gradually began to reconsider institutionalization, and called for renewed attention to family and community child care, borrowing from the African tradition and practice. This was in response to the domestication of the UNCRC which Kenya signed on 26 January 1990 and ratified on 30 July of the same year. A decade later, Kenya ratified also the African Charter on the Right and Welfare of the Child on 25 July 2000. Accordingly, the Kenya government formulated a set of specific laws, regulations, policies and guidelines related to child protection issues. In particular, the landmark Children Act (2001)\(^1\) represented a shift towards gov-

\(^1\) Children Act, (2001)
ernment policies which promoted efforts to prioritize the safety of various categories of vulnerable children through a variety of services rather than focusing exclusively on children in justice. In this legislative context, custodial care of children in justice and in need of care and protection became also regulated (Children Act Part V; Part VII and National Standards, 2003). By recommending exiting of children from residential rehabilitation institutions after a maximum of three years the Children Act paved the way for deinstitutionalization, however, it stipulated no exit strategies thereof.

Meanwhile, as the legislative set up and the definition of best practices was evolving, the needs of families grew more complex and the child welfare system was stretched thin and not able to keep up with the multiple needs of children. It became clear to policy makers that more attention needed to be paid to the root causes of child abuse and neglect through active efforts aimed at prevention and intervention with children and families.

As a result, reforms slowly entangled the Department of Children Services (DCS) and its institutionalized child protection system.

2. THE CHILDREN SAFETY NETS PROJECT: a breakthrough in the government child protection system through a systems approach

How children, families, communities, formal and informal organizations and the state are assembled around child protection is fundamentally a question about whether the child protection system in place today in Kenya meets its goals. Here, the most important question is: Are children being protected in a manner consistent with their rights?

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For a wide variety of reasons, children are not sufficiently protected. Risk factors are present within the family setting or in the economic, social, and political dynamics of the communities in which families live, or are related to emergencies, both natural and man-made. Moreover, any or all of these risks may be combined.

Rather than targeting single issues (e.g. child abuse, street children, orphans, etc.) and replicating a fragmented child protection response, the project turned to what is referred to as a systems approach\(^3\) in order to establish and otherwise strengthen a comprehensive child protection system, having the hallmark of a holistic view of children, families, and communities, where prevention, early and intense intervention are points along the child protection service continuum. In spite of the project limitation, the key concept which anticipated wide results is that all change within a system framework is bi-directional, meaning that changes to any system, for whatever reason, will change the context and changes in the context will alter the system.

Holding these two basic principles, the project started off in 2005 and was named The Children Community Safety Nets. It targeted the Department of Children Services in the Ministry of Gender, Children and Social Development as the most critical system to work with in order to modify the wider child protection system. By being the actual implementing arm of the Kenya Government in child protection, the DCS has certain structures, functions, and capacities, among other components that have been assembled in relation to a set of child protection goals. Hence, the project opted for an intervention targeting the government child protection system functions (how the system works: policies, standards, regulations, and the mechanisms to facilitate coordination across service sectors) and its system structure (what the system does: e.g. services provision) both at institutional and field services level.

The project, regulated by a Memorandum of Understanding with the DCS, had as entry point the Nairobi Children’s Remand Home, followed by the Thika Children Rescue Centre and the Dagoretti Rehabilitation School, all government owned children’s institutions being part of the Kenya Juvenile Justice System.

In view of the fact that to effectively operate a child protection system requires also adequate capacity such as facilities, material resources, skilled personnel, and funding needed to operate it, the project targeted a few of these specific components. In particular, it prioritised capacity in decision making, given that at organizational level, structures and capacity for monitoring, management, and decision making are especially critical. Finally, since children are embedded in families or kin, which live in communities, which exist within a wider societal system, specific attention was paid to coordinating the interaction of these subsystems with the DCS such that the work of each could mutually reinforce the purpose, goals, and boundaries of related systems.

---


2.1 THE PROJECT OBJECTIVES

Overall objective

To promote the overall reform of the Kenya Government Institutional and Field Services Divisions by improving its child protection system and by building its capacity to enhance protection of Children in Justice.

Specific objectives

1. Develop quality institutional Remand, Rehabilitation and Rescue services for OVCs and child offenders held within the Juvenile Justice System in the Country.

2. Develop quality children field services by piloting community based preventive and early intervention programmes through coordination of safety nets for OVCs and their families within the Nairobi Districts of Kasarani and Embakasi, and by establishing reintegration and aftercare services for institutionalised children in Nairobi Province.

2.2 KEY POLICY TARGETS ON GOVERNMENT CHILD PROTECTION SYSTEM REFORMS

2.2.1. Deinstitutionalisation

De-institutionalising and transforming children’s services is a collection of activities, not just the removal of children from institutions. Rather it is a systematic, policy driven change which results in considerably less reliance on residential care and an increase in services aimed at keeping children within their families and communities.

De-institutionalisation is at the heart of developing modern and effective care services for children and families. If well undertaken, it will eventually lead to the resolution of the majority of children and family problems within the community, with only a small number of children needing substitute care, and very few requiring care in a residential setting. This has been one of the project targets, being operating in a system that relies on institutional care as the main form of substitute child-care and ‘out of home’ placement.
2.2.2 Devolution of child protective services

Facing the inadequacy and ineffectiveness of a government child protection system stuck at Provincial or District level with little human and financial resources to reach vulnerable children, the project focused on building an effective community-based child protection system, based at location level with clear roles and responsibilities, and good links with available resources. A system centred on prevention and able to offer integrated and child-friendly services to children in need. This implied that different relevant private and public actors pooled their resources in a common effort to protect and respond to children’s needs. To this purpose, the Area Advisory Councils were targeted for their devolution at location level so that local communities could be capable to take over child welfare at the community level, not to be any longer a politically driven issue. The establishment of the Location Area Advisory Councils was a positive step in this direction to provide qualified leadership and accountability. Currently, a process is in place for interventions to be developed and implemented at location level, and as a result, child protection is dealt with in a more proactive manner.

2.3 THE PROJECT STRATEGIC APPROACH

At institutions level, the intervention focuses on reforms of the government Juvenile Justice System through the establishment and running of counselling, educational and reintegration programmes for institutionalised child offenders and Orphans and Vulnerable Children (OVCs), with special attention to trauma, abuse recovery and behavioural change. The institutional framework has been modified to accommodate three new critical sections, namely counselling, education and reintegration sections. The capacity of the government institutions staff has been built by establishing quality management, monitoring and evaluation standards and by providing specialised training as well as expertise while working side by side. A key objective has been children’s deinstitutionalisation achieved by empowering natural families and local communities through the family conferencing model.

At field level, the intervention focuses on reforms of the government field children services through primary prevention and early intervention pilot programmes centred on Children Department field offices (District/Division Children Offices -DCOs). A key objective has been the technical empowerment of the selected DCOs offices for the establishment of effective coordination of child protection systems through scaling down of AACs to location level and by building child protective networks through mapping and engaging of non-State children services providers or State actors such as the Provincial Administration and the Police Department as well as local authorities such as the Nairobi City Council Education Department. The capacity of the DCOs has been strengthened by establishing quality management, monitoring and evaluation standards on critical areas of child protection such as promotion and protection of children rights, awareness creation to local communities, OVCs support and stakeholders networking. The DCOs human resources capacity has been improved through selection, training and management of Volunteer Children Officers.
2.4 THE PROJECT METHODOLOGY

1. The provision of services to improve living conditions of institutionalised children has been carried out through active collaboration between the project and the Children Department by creating in each institution three thematic sections of Counselling, Education and Reintegration. Their establishment and strengthening has been achieved through engaging the institutions management in selecting government staff to run them, implementation of training programmes, setting up of monitoring systems, experimentation and inter-exchange of best practices and policies in line with the international norms and standards. Team building carried out in each institution also allowed for conflict resolution and improved communication through the project period, as activities have been carried out jointly by the institutions and the project staff working as a team. While phasing out, the project staff has been shifting its role from implementation to monitoring of activities in the three sections to assure future sustainability.

2. The strengthening of government children field services within the Nairobi Districts of Kasarani and Embakasi was started by CEFA in 2007 through a project team operating from the DCO offices. Location Area Advisory Councils, being the basic system for child protection within communities, were targeted. In 2008 and 2009, the project focused in creating and strengthening 8 Location Area Advisory Councils and in training human resources operating in the government children welfare system. Emphasis has been given to implementation of preventive strategies to avert some of the prevailing conditions and attitudes that cause the increasing number of children being victims of violence and at risk of being institutionalised. On this, the Participatory Theatre has been experienced to be a powerful tool to reach, sensitise and create awareness to high numbers of people.

The capacity of local communities has been strengthened by networking and harmonizing child protection programmes to create children safety nets through community mobilization. A top down strategy has piloted communities’ involvement at grassroots levels, from the Location Area Advisory Councils to the creation of their sub-committees and scaling down intervention to sub-location, and from village to schools and neighbourhood level through village elders. By involving all stakeholders, community safety nets to identify, care and protect children victims of violence have been established, and implementation of legislation prohibiting of all forms of violence against children and fight impunity has been strengthened.
2.5 MAJOR PROJECT RESULTS

Results include establishment of the weekly case conference as the major forum for case management and of sustainable counselling, education and reintegration sections managed by government staff in the three institutions. Consequently, a direct outcome has been the sharp decline of the Institutions children population by 60% in the Nairobi Children Remand Home since 2005, 50% in the Thika Children Rescue Centre and 20% in the Dagoretti Rehabilitation School. In this last institution the rampant occurrence of escapism has almost come to an end. In the whole project period, traced families were 709 while 674 children were reintegrated back to their homes. Individual counselling played also a great role with the provision of 6,483 sessions (see Annex V for comprehensive quantitative results).

Child protection capacity of DCOs offices in the concerned areas has been greatly improved through the engagement of LAACs, VCOs and village elders. Inclusion of stakeholders mapping and coordination within the DCOs annual work plan has brought increased access to resources and harmonisation of programmes at local level. On primary prevention, the Participatory Educational Theatre (PET) methodology has involved about 15,000 school parents bringing a striking impact in improving the relationship between schools and local communities.

Development and testing of innovative models have established the effectiveness of a Cognitive-Emotive Behaviour Change Model for children under rehabilitation, the positive impact of the Family Units Model on institutionalised children under care and protection, and the 87% long term success rate of stable placement for children being reintegrated through the Family Group Decision Making Model.

A distinctive achievement is the inclusion of the above tested best practices, strategies and models in the government document of the Reforms of the Department of Children Services currently being drafted.

2.6 CHILDREN SUCCESS STORIES

Children success stories are the best demonstration of the project impact at individual level. They give evidence of the positive changes project activities triggered in the life of children and of their families. The followings are just few stories. Names and locations were changed to preserve children and families privacy and keep confidentiality.

**Michael’s story**

Michael is an 11 years old boy. He was born in South B-Mukuru slums out of wedlock and he lived with the mother until she died when he was one year of age.

He was then dropped at his father’s garage who meanwhile had married and whose wife didn’t know of his existence. So, he was handed over to a young man to raise him. Unfortunately, the boy was mistreated a lot, beaten and underfed by his caregiver. The child could spend nights outside for fear of beatings, but he liked school very much and all the same he could regularly attend classes, nobody knowing what he was going through.

When he reached 8 years of age he started running away from the caregiver’s home until he was
picked by police from Nairobi streets and taken to Nairobi Children Remand Home.

Here, the project provided for him counselling and psychosocial support. Through the educational programme, a trusting relationship was built and tracing was successfully done by identifying the biological father. Counseling services helped the father to understand the neglect and abuse the boy had undergone. He could realize the deep needs of his child as he was assisted in rebuilding a caring relationship with him.

To safely reintegrate the child and guarantee his proper protection, a safety network was provided. Hence, the child was linked to children protective resources in their area of abode by involving the local DCO, the area chief, the school Head teacher, the church pastor and some helpful neighbours. Also the stepmother and the father’s extended family played an essential role in the whole reintegration process.

Since reintegration back to his father, the boy has settled very well in the new home and in the community. Currently, he is performing very well in school.

**Mary’s story**

Mary was a Std. two girl who had been looking for her mother, longing to live with her as most children do at her age. Upon admission at the NCRH she claimed to have lost her way. The reality was that she had run away from home because her mother from Mathare slum had transferred her to the grandmother residing in Kibera. After tracing, the grandmother and an uncle visited the child in remand while the mother took some weeks to appear and accept to disclose her problems. She used to work most hours of the day and she had a new boyfriend who could not accept the child. Mary had just run away after visiting the mother, refusing to go back to the grandmother. Slowly, the project staff helped the mother to reconsider the
daughter needs of parental care and attachment. A Family Conference was held and relatives alongside with neighbours attended. Also two school teachers were present. There was a mutual understanding that the child had run away due to the forced separation from the mother and that their relationship needed to be improved. The mother accepted to live with the daughter and to provide for her emotional and attachment needs. She separated from the boyfriend who could not accept her past life and her child. A close by school providing psycho-social support was found in the area and he child soon enrolled stabilising quite well.

Tony’s story

Tony was 11 years old when he landed in the Nairobi Children’s Remand Home. He was from a single mother’s home and he claimed that he had runaway because of physical abuse. The provision of counselling services helped him to open up and later his home was traced at Kibera Slum. Social investigation showed that the boy had no previous case of disappearing from home.

The mother claimed that the boy was all through good and well behaved but conflict had arisen after he had set the rooftop of their house on fire. A bizarre behaviour, never displayed previously. He was punished with confidence that he would never repeat the same. However, the boy was very angry and he decided to go to his auntie’s place at Huruma getting lost on the way.

Investigations showed that the crisis between Tony and the mother had begun after she gave birth to her second born, suddenly withdrawing attention from the boy who for 10 years had been her only child and causing great anxiety in his sense of security. However, the mother had not understood that the new born could be a destabilizing factor for Tony.

The provision of counselling services to the mother helped her to become aware of the problem and to reconsider her attachment by giving more time to him and showing more attention. Through building safety nets for this family, the project involved other family members and the school administration in order to emotionally support the boy. The class teacher volunteered to act as a mentor and the school Head Master sponsored the boy to get lunch at school, since consistent food provision was also lacking. Hence, when the Family Conference (FGDM) was held, the boy was well received by the family and school administration and the mother’s involvement in decision making for her child became quite reliable. Follow up to monitor the boy’s progress has been very positive. He performs very well in his exams, besides actively participating in extracurricular activities. Tony has also adjusted well with his younger brother. Both the mother and the school administration have improved their collaboration and this has been very essential in strengthening Tony’s stability and permanency.
John’s story

John comes from Mukuru Kwa Ruben slum in Embakasi district, Nairobi, and he is now 15 years old. His parents separated in 2001. Since then he has lived with the mother who works in the Nairobi industrial area and with an older brother. The father passed away recently after a short illness.

In 2009, the boy was rescued by police being in the streets. He had run away from home due to lots of beatings by the mother and his brother. Brought to the Nairobi Children Remand Home, after a couple of weeks he could open up and the home tracing was done. The family was helped by the counsellor to understand the child and to get a deep insight on its violent mechanisms which were producing the unwanted effect of expelling him from home. Afterwards, the child was reintegrated through a family conference at the presence of some relatives, family friends and neighbours. The family meeting resolved that “kiboko siyo soluisho” and dialogue was chosen as the way to approach the boy.

Thanks to this intervention, the mother and the brother became very supportive and few months later John performed fairly well scoring 314 out of 500 marks in his KCPE exams, in spite of the disruption occurred.

He is currently a form II student in a secondary boarding school. He enjoys a good relationship with the mother and the brother with whom he talks out his mind freely. He is smart, hardworking and academically quite bright.

Ann’s story

Ann is now 15 years old. She had ended up in the Nairobi Children Remand Home when she was 10 due to difficult events which had deeply shaken her life. The mother had passed away two years earlier living her and other three smaller siblings with an abusive and neglectful father. In spite of their poverty, the maternal grandparents had come for rescue and brought all of them at their home in Ruai from Murang’a where they had been living. Then, Ann was enrolled in a boarding school to continue with her educa-
tion. However, due to the losses and mistreatment she had experienced, she was slow in adapting to the new environment and catching up with the rest of the class. As a result, she was harshly treated by the teaching staffs who could frequently beat her up without understanding the difficult life stage she was going through. Finally, she ran away until a Good Samaritan rescued her. Then, from Pangani police station in Nairobi she was taken to the Nairobi Children Remand Home as a care and protection case.

After the family tracing, counselling sessions were held for both the child and grandparents, which led them to understand the harshness of her situation and how to deal with it. Since then, the grandparents have been struggling to make ends meet and provide basic necessities and education to their children but with greater hope.

Ann was admitted in a different school and has been among the top pupils in her class for the last four years. She is friendly and hard working, and she has grown to understand that despite her shaky background, she can shape up her future.
CHAPTER 2

GOOD PRACTICES

THE INSTITUTIONS’ PROJECT PROGRAMME

1. THE KENYA JUVENILE JUSTICE SYSTEM REFORMS FRAMEWORK

The Children Safety Nets Project was first piloted in the Nairobi Children’s Remand Home from the year 2005 to 2008 with the aim to effect structural changes within the statutory institutions system, in line with the Department of Children Service’s National Reforms. By 21\textsuperscript{st} of July 2008 the program had rolled out to Thika Children Rescue Centre and a year later, on 19\textsuperscript{th} of May 2009, it had been extended to Dagoretti Girls Rehabilitation School. The project identified the above institutions as its entry point since they well represent the three categories of Statutory Institutions within the Kenya Juvenile Justice System, as table 1 shows.

Table 1: Project Institutions Profile

<table>
<thead>
<tr>
<th>Name of Institute</th>
<th>Category</th>
<th>Gender</th>
<th>Type of Case</th>
<th>Yearly average number of children</th>
<th>Age</th>
<th>Province</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dagoretti RS</td>
<td>Rehabilitation School</td>
<td>Girls</td>
<td>Conflict with the law</td>
<td>130</td>
<td>10-17</td>
<td>Nairobi</td>
</tr>
<tr>
<td>Nairobi Children Remand Home</td>
<td>Remand home</td>
<td>Boys/ Girls</td>
<td>Conflict with the law/Care &amp; Protection</td>
<td>430</td>
<td>6-17</td>
<td>Nairobi</td>
</tr>
<tr>
<td>Thika CRC</td>
<td>Rescue Centre</td>
<td>Boys</td>
<td>Rescue</td>
<td>110</td>
<td>7-17</td>
<td>Central</td>
</tr>
</tbody>
</table>
Working within the greater framework of the Government national reforms of Statutory Institutions, these institutions were specifically selected to allow for the establishment and testing of good practices in relation to their mandate as it is described here below.

**Remand Homes**

Children Remand Homes are established under section 50 of the Children Act (2001), for detention of children. The 5th schedule, sub-section 10(1) states that children who have not been released on bail shall be remanded at a children’s remand home in line with section 57 of the Act.

The Home admits child offenders, boys and girls aged 10-17 years, and whose cases are being processed by the Children’s or other Courts. For rescue purposes only, the institution admits children in need of care and protection, aged between 6 - 17 years and being in transit to other rescue institutions or due for family reintegration. During the project period, this category has been representing about 70% of all cases, against 30% of children in conflict with the law.

**Rehabilitation schools**

Rehabilitation Schools are established under Section 47 of the Children’s Act (2001) to provide rehabilitation of children in conflict with the law. In the DCS reforms, they are meant to spearhead the process of equipping a child in conflict with the law with the capacity to achieve behavioural change while realizing intellectual, social, moral and economic obligations. Section 53 makes provision for duration of stay up to three years.

**Rescue Centres**

The mandate of rescue centres is to temporarily provide safety, protection and care to Children in Need of Care and Protection, and facilitate timely referral and community/family reintegration appropriately. Under the current DCS reforms, the duration of placement in these Centres should not exceed 6 months, unless for very special cases, though the practice is still far to achieve this target.
1.1 INSTITUTIONAL COMPONENTS OF THE CHILDREN SAFETY NETS PROJECT

The project basically worked focusing on two major levels of intervention by establishing and institutionalising:

The three-section framework: a statutory institutions crosscutting system to respond to institutionalised children needs by setting up counselling, education and reintegration sections.

Specific institutional models: good practices to respond to the specific mandate of statutory institutions being Remand Homes, Rescue Centres and Rehabilitation Schools. The innovative models developed by the project are the Family Group Decision Making, the Reintegration Protocol, the Family Units and the Cognitive-Emotive Rehabilitation Programme.

Children participation was a critical component in the programme development. A survey done at the NCRH in 2006 (see Annex iv) informed most of the interventions established by the projects in institutions.

2. THE THREE SECTIONS FRAMEWORK

The programme within the three target Statutory Institutions has been mainly focused on the establishment and structuring of three sections, namely Counselling, Education and Reintegration. These sections work concurrently with each other through their respective teams, while activities are designed in a way that each independent section builds on to the other. According to this system, on admission a child has first to be taken through psycho-educational activities that facilitate feeling welcomed and at home within the Institution. Subsequently, the child undergoes thorough assessment through counselling session(s) that brings out information, needs or emotional blocks. With due confidentiality, counsellors and educators share the child’s assessment during the case conference facilitated once a week on a date appropriate to the Institution concerned.

The case conference arranges for family tracing to be done by the Reintegration team in collaboration with the field services (DCO). The environmental assessment subsequently outlined by the DCO through the Volunteer Children Officers provides information on the child’s family and community for a comprehensive report on child’s and family’s needs, risk factors and resources. The case conference then arranges for a sustainable exit plan including the reintegration strategy to be used.
2.1 Counselling Section

The theoretical approach used in the section refers mainly to the Humanistic Theory because of its belief in the potentials of every human being and its view of people as ‘good in nature’. Psychosocial stages of development help counsellors in identifying children emotional needs related to their upbringing, while the Behavioural approach is applied due to the belief that behaviour is learnt and hence it can be unlearnt by replacing the negative, self defeating habits with positive ones. Family counselling is also used for family members to reflect about underlying reasons causing their child’s current problems in light of the family situation and dynamics.

The section is also mandated with the responsibility to facilitate the institution case conference meant to gather information regarding the child and identify the way forward for each child through a case analysis.

In relation to the Counselling Section operational activities, the project has been focusing on two major areas:

1. actual counselling of children and their families
2. capacity building of staffs in counselling skills

Progressively, the approach shifted from direct involvement of project staffs in counselling to provision of technical support to government staffs within the counselling sections. To allow ownership of the programme, the project provided monthly basic counselling skills training for two and a half years to government staffs engaging in counselling. Monthly group supervision has also assisted the counselling team in each of the three Institutions. Weekly meetings have been in place to arrange routine opera-
tions. Government counsellors within the Institutions ensure that all children access counselling and, by the end of the project, they have been providing an average of 2 counselling sessions per day per counsellor.

2.2 Education Section

The concept of education borrowed heavily from Paulo Freire to go beyond the boundaries of the formal education system and include the educative relationship as a vital component of transformative education. In other words no one is ‘tabula rasa’ such as a blank sheet of paper. On the contrary, each one’s uniqueness can transform our lives as well as the lives of those we interact with. This approach to education is inclined towards mentorship or ‘walking the talk’. Educators ensure that their words portray their thinking, and their deeds portray people’s actions for the children to challenge their self-defeating habits.

In relation to operational activities, since 2006, the Education Section has engaged Institutions’ staffs and partner organizations in harmonizing educational activities within the NCRH. As a result, the education section has engaged its partner organizations in stakeholders meeting where educational activities are planned for and evaluated after every three months. The meeting has enabled Institutions to create harmony among its partners by involving each stakeholder in a forum to agree on a common quarterly theme, monthly objective and weekly slogans to be followed by all partners in their activities within the institution.

Activities are meant to educate children within the three Institutions and include discussion forums, theatre, talent shows, exchange programs and sports among others.

In order to build staffs capacity in the education section, the project facilitated quarterly training session on the above educational approach. Furthermore, members of the Education Section have since then been engaging children in educational activities by managing weekly awareness programs and workshops among other transformative programs for and with children.

2.3 Reintegration Section

In the project context, Reintegration means proper family re-unification based on the family and community resources. Since 2005, the project has drifted away from the traditional repatriation of children back to their families carried out by dropping children at their homes and has moved towards building capacity and protective structures in order to provide children with appropriate Family reintegration.

In fact, Reintegration is understood as a process that begins the day a child steps in the Institution and proceeds through the work of the Reintegration Section which streamlines the collaboration of the two other sections made of counsellors and educators, and under the leadership of the Institution Management builds a bridge with the Field Services at the DCO’s office to complete it.

The team is mandated with the responsibility to facilitate family re-unification by timely tracing the child’s family in collaboration with the concerned DCO office, provide information during the weekly case conference and proper referral so that the same DCO office may take over the case and complete it. Steps include also assessing the child and family needs, their strengths and the community resources which may be available. A successful reintegration depends on the kind of networks and communication facilitated during the entire process, by engaging both the Institution and the Field level.

3. SPECIFIC INSTITUTIONAL MODELS ESTABLISHED AS GOOD PRACTICES

3.1 THE NAIROBI CHILDREN REMAND HOME AND THE REINTEGRATION MODEL

During the project service provision in the Nairobi Children Remand Home since 2005, much effort has been put in the reintegration process, having been assessed to be its major gap in relation to its mandate, especially for children in need of care and protection. At the time of the project intake, the institution was just repatriating children by dropping them at home without any concurrent assessment or intervention, as opposed to reintegrating them in line with international standards. Consequently, relapse cases were quite frequent during the same period, while the average daily number of children in the institution was of about 150 while its capacity is of about 80.
The project defined four major challenges to be addressed and developed appropriate responses:

1. The absence of an appropriate exit plan for each child, an exercise needing adequate child and family risks and strengths assessment. This gap was handled by introducing a systematic child assessment carried out through the counselling and education section, as well as a family assessment carried out through family counselling provided at the institution and the enforcement of the Environmental Adjustment Report (see annex III)\(^5\) done at community level. The case conference was then introduced and it became the forum were cases were discussed and individual exit strategies were developed. By the end of the project, child assessment and the case conference, which result in the child individual exit plan, were autonomously carried out by the institution staff.

2. The absence of a suitable model, which could inform the child reintegration practice in line with international and local legislation and practice (UNCRC, ACRWC, Children Act)\(^6\) was immediately raised as a concern. Hence, the project responded by identifying and testing the Family Group Decision Making model, based on the family conferencing system.

3. Inadequate capacity by the government institution staff in terms of staffing and technical training. The project focused on recruiting personnel to support the reintegration process by targeting human resources available within communities such as Volunteer Children Officers, Village Elders and Location Area Advisory Councils. Specific technical training on reintegration

\(^5\) The official EAR used by the DCS was meant to be used only for assessment of child offenders’ families. The project modified it to make it users friendly and applicable to families of children under care and protection.

\(^6\) The UN Convention on the Rights of the Child (UNCRC) was signed by Kenya on 26 January 1990 and ratified on 30 July of the same year. A decade later, Kenya ratified also the African Charter on the Right and Welfare of the Child (ACRWC) on 25 July 2000. The above international legislation was locally domesticated by the Children Act (2001).
was provided to them as well as to the institution staff.

4. The absence of communication and collaboration between the Institutions and the Field services, which has been hindering the reintegration process and its sustainability. To bridge this critical gap, the project lobbied the DCS for a reintegration protocol to be developed and enforced. The protocol was drafted by the project in 2009, in collaboration with the Nairobi DCOs and Institutions managers. It has been tested in Nairobi province and its environs through the years 2010-11, allowing for its ongoing review and improvement.

The project development of two critical models, namely the Family Group Decision Making and the Reintegration Protocol, made reintegration to be a joint venture between the institutional and field services, with the critical involvement of the child’s family/community as well. Immediate results were confirmed at the Nairobi Children Remand Home by the substantial decrease of relapse cases and the decongestion of the institution which by the project end accommodated an average daily number of about 60 children against the 150 found at the project inception.

3.1.1 THE FAMILY GROUP DECISION MAKING CONFERENCE

PRINCIPLES

1. Every child has the right to be raised in an environment of safety and well being.
2. The safety and well being of the child can basically be assured through family and community participation in planning and decision making.
3. Families, being the experts on themselves, are central to all planning and decision making to reach a solution for their child’s problem.
4. Families have under-used strengths and resources to solve problems for their children.
5. A child belongs to the whole community. Local communities retain a traditional ownership over the child which is to be validated by circulating their under-used strengths and resources to solve problems for their children/families.

This approach allows plans for the child’s protection to be made by the family, together with their relatives, friends and other close supports. Together, these planners make up the “family group.”
OUTCOMES

These are the main outcomes which should happen:

- the family group is empowered on its responsibility to take care of the child’s protection;
- the family group is to produce a practical plan for the safety and wellbeing of their child who actually is in need of care and protection;
- partnerships and community support within and around the family group are strengthened.

What happens at a conference?

The conference typically has the following stages:

- opening
- information giving
- private family time
- finalizing the plan

Opening

Starting “in the culture of the family” is crucial if they are to “own” the conference. This may mean
having a senior family member greet each person arriving, start the meeting with an opening prayer, or just having people seat themselves in a way that feels right to them.

The meeting’s coordinator makes sure that everyone knows:

- each other’s name and their relationship to the abused persons,
- the purpose of the conference (e.g., “We are here to see if there is a way that Sally can live safely with her family.”), and
- the conference process and ground rules (e.g., confidentiality, no violence or interrupting).

**Information Giving**

Next, the coordinator moves the group into the information-giving stage in which:

- the referring social worker/counsellor sets forth the issues of concern to be addressed;
- other invited professionals (teachers, pastors, social workers…) give information on the issue addressed (e.g., alcoholism, abuse, traditional practices). They need to express themselves in a way that is both clear and respectful. They need to be ready to:
  - state directly concerns about the child’s safety and any “bottom lines” to which the final plan to be made by the family must adhere, without telling the family what to put in the plan. They are supposed to take their own decision on how to make the plan;
  - give enough information on the specific topic so that the family group understands the situation, while not revealing unnecessary details or legally confidential reports; and
  - express themselves in words that the family can understand and not feel intimidated by.

- family group members, neighbours and friends who are either attending contribute to the discussion.

**Private Family Time**

Once the family group has listened and discussed the information and has had the opportunity to share on the issue, they are ready to move into their private deliberations.

At this time all the professionals, including the coordinator, leave the room so that the family group can confer together. The coordinator and any other concerned authorities may remain nearby to provide information and support as required. In case this might be not pos-
sible, professionals can leave.

The aim of this stage is to provide the family group with the privacy to develop a plan of their own to address the concerns laid out during the information stage.

**Finalizing the Plan**

Once the family group has developed the plan, they ask the coordinator and, if still available, other external participants to return to the meeting room.

The coordinator reviews the plan with the family group to ensure that it:

- covers all areas of concern;
- is clear and very specific on what needs to be done and who is to do it;
- provides for monitors to check that the plan is being carried out and how to contact family members and professionals if it is not;
- establishes the means for evaluating the impact of the plan, and
- outlines contingency (or concurrent) plans so that people know what to do when steps are not carried out or when the family members’ lives change.

The written plan is then approved if it meets the following criteria:

- it protects the person/s for whom the conference was held, and
- it is realistic and in line with the family capacity.

To help everyone carry out the plan, the family group and the referring agency should receive a written copy of it. Usually plans include the very items that professionals would have wished for the family, together with alternatives that only the family group could have thought of.

It is advisable to include in the plan a date at which the coordinator is to reconvene the family group conference for a follow up meeting (usually after 2 months).

A reconvened conference provides an opportunity to make major changes to the plans or to address new issues.

Follow up visits by the referring agency should be regularly made to monitor the plan implementation and to provide the family with psychosocial support.

For further documentation visit

http://www.americanhumane.org/protecting-children/programs/family-group-decision-making
3.1.2 STRATEGIC CASEWORK PROTOCOL FOR FAMILY REINTEGRATION

STEPS AT INSTITUTION LEVEL

1. Child’s admission at the Institution and orientation

2. Child’s interview by Institution’s welfare staff/counsellor for classification:
   - need of care and protection
   - conflict with the law

3. The institution management appoints some staff to be members of the institution reintegration section and regularly chairs a case conference. The Case Conference refers cases for tracing to the Institution management which delegates the reintegration section for the actual tracing.

4. Ongoing child’s counseling is carried out by counselors while educational/rehabilitation activities are provided by the Institution to enhance child’s participation in the reintegration process. The child will be given the opportunity to participate and express needs, views, and feelings.

COLLABORATION STEPS BETWEEN INSTITUTIONS & THE DCO’S OFFICES

5. The Institution Manager informs the relevant DCO where the tracing is to be done, for the DCO to provide one person from the office to accompany for the tracing.
   - The DCO will be informed by the institution’s manager in good time: at least three days before the tracing by Remand Homes. Care Centers and Rehabilitation Schools should inform the DCO at least one week ahead.
   - The DCO will appoint one person (CO, VCO, LAAC member…) to work with the institution staff and to be attached to the case due for reintegration. The same person will later provide aftercare services to the child.

6. The child’s tracing is done by the Institutions staff together with the DCO’s staff. After tracing confirms the location of the child’s home, the case is finally referred to the DCO’s office. Parents/relatives/guardians who are found will be invited at the institution or DCO’s office for counseling sessions.
After tracing, the child will be returned to the institution and the case will be handed over to the DCO office to prepare the family for the child’s reintegration. The DCO’s office will lead and coordinate the reintegration process in collaboration with the institution.

A copy of the child’s Case Record Sheet will be provided by the Institution management and it will be entered in the DCO’s office Re-integration File.

Referral to upcountry DCOs/Chiefs/Stakeholders will be done for cases having been established to be not from Nairobi and environs. Referral to the relevant DCO will be done also when the case is established to be from another District/Division in Nairobi.

7. The DCO’s office compiles the Environmental Adjustment Report to have a family environmental assessment and to identify local resources in the child’s area of abode to support the reintegration.

8. Within seven days after the tracing is done, copy of the Environmental Adjustment Report is delivered by the DCO to the Institution management in person, through the Court officer or through e-mail. This will allow the Institution management to properly assess the case and arrange for the child’s reintegration during the case conference.

9. The child’s family interview/counseling sessions are held at the institution/DCO office for planning the child’s exit strategy. A Family meeting at the DCO’s office or a Family Conference (Family Group Decision Making) are agreed with the family and prepared.

- A child’s family interview/counseling session is held at the institution. It is followed by 1-2 other sessions for the family to understand the underlying issues which contributed to the child’s problems and to readjust for the reintegration.

- In agreement with the Institution management, the DCO office will also provide family interview/counseling sessions. When needed, the DCO will look for stakeholders within the area to provide families with counseling.

- The recommended exit strategy is a Family Meeting held at the DCO office of reference or a Family Conference (FGDM) at the family home. Holding the Family Meeting at the DCO’s office will be the minimum reintegration standard, unless otherwise agreed for special cases with the child’s family or decided by the case conference at the institution.
10. The Court Children Officer will be liaising with the institution for data collection and preparation of the Court report by attending the institution case conference, in order to obtain a repatriation or revocation order from the court as soon as possible.

11. The Institution Case Conference finalizes the case for exiting the child by identifying:
   - the child’s and family’s risks, need, resources
   - the exit procedures:
     - family reintegration through a family meeting at the DCOs office
     - family reintegration through Family Conference (FGDM)

   The case conference recommendations are communicated to the DCO and the Court Children officer.

12. After agreeing with the child’s family, the Institution Management will arrange with the DCO office the final reintegration steps: venue and date of the Family Conference or of the Family meeting at the DCOs office. To assure aftercare services, exiting the child by being picked from the Institution or the Court will be considered as an exception not the norm and it is discouraged.

**STEPS AT THE DCO’S OFFICE LEVEL**

13. The DCO will appoint the members of a reintegration/aftercare team to operate at location level from the DCOs office, which may include COs, VCOs, village elders, etc.
   - Selection criteria for members of the DCO reintegration team should be:
     (a) Good knowledge of geographical area.
     (b) Good knowledge of children/family issues & interest in children.
   - The DCO will keep an updated list of the team members so that they may be given capacity building and gain experience in handling cases.

14. The DCO’s office will have a box file for Reintegration and it will open a new case for each child to be reintegrated including the following documents:
   - The institution’s manager will hand over to the DCO:
     - Copy of the Case Record Sheet – long version
- Form for case referral to Field Offices (different according to the category of institutions)
- Copy of judicial order/revocation order/court committal if any
- Any other document which is applicable: e.g. certificate of release from Rehabilitation Schools, copy of Medical report if any

The DCO’s office will enter its own documentation:
- Environmental Adjustment Report
- Plan of treatment/care
- Written agreement (by the family)
- Disengagement and home visit forms when applicable

15. Planning of the Family Meeting at the DCO’s office or of the Family Conference (FGDM) is done in collaboration with the child’s family through the coordination of the DCO’s office. Planning will include:

- meeting and inviting the stakeholders of the case: teachers, pastors, chief, etc.
- contacting and inviting parents, relatives, neighbors, etc.
- organizing for the venue and the date of the conference/meeting

16. Immediate preparation of the DCO’s Family Meeting/Family Conference: two/three days before the conference/meeting, the DCO’s office reconfirms people’s attendance time and venue and will forward the final information to the institution’s manager.

17. DCO’s Family Meeting/Family Conference session

Staff who will attend the conference/meeting are:
- the conference/meeting coordinator
- the child’s welfare staff/counselor from the institution
- the DCO’s staff attached to the case

At the conference/meeting, the case will be fully handed over to DCO’s office.

N.B. At the end of the Family Meeting/Conference the child is left with his/her family.

18. The Institution management provides the DCO’s office with the final documentation (copy of the Court Repatriation Order). The DCO’s office will have a folder for After Care cases and all documentation collected during the child’s reintegration process will be transferred from the Reintegration to the Aftercare folder.
19. The DCO’s office will organize for the after care as per the following:

- A home visit to be done within one week from the Family Conference/Meeting.
- A care plan to be drawn by the staff attached to the case and entered into the aftercare file to regulate the follow up intervention.
- Follow up visits with the frequency established in the Individual Care/Treatment Plan:
  - High level risk: twice a month
  - Medium level risk: once a month
  - Low level risk: every three months
  - In case of need/emergency: accordingly

20. A Follow up DCO’s Family Meeting/Family Conference will be held not later than two months from the first conference by the DCO’s office through the staff attached to the case.

21. Plan of disengagement: the case will be progressively phased out by the DCO’s office after one to three years according to the care/treatment plan.

3.2 THIKA RESCUE CHILDREN CENTRE AND THE “FAMILY UNITS” MODEL

a response to finding the “right” out-of-home child care

It is recognised that sometimes children cannot be cared for in their family settings, thus some residential care is needed for a short term as an emergency measure.

Children who cannot be reunited with their biological families still have a right to grow up in a caring family environment. This applies in particular to children who have undergone traumatic experiences in their families such as abuse, abandonment, loss and separation.

As the project entered the Thika Children Rescue Centre in 2008, it soon realised that a major gap consisted in the institution setting which was reproducing the structure of a boarding school with inadequate attention to the critical children’s needs of secure attachment, belonging and supportive relationships to enable going through their previous traumatic life. Furthermore,
since it is well established that children who have spent a long time in institutions often have concomitant developmental delays or behavioural problems, the response was the establishment of small Family Units integrated as much as possible in the Institution to offer a family-like environment and simultaneously meet their special needs.

As the essential feature of family-based child care is the caring relationship between the child and the caregiver, since then, the TCRC has supported and encouraged the implementation of this model within its current structure to give children a sense of belonging, and to provide care and emotional security to children who have gone through abuse, neglect and rejection.

Creating a family environment

The concept of family is dynamic and ever-changing, encompassing diverse forms of family structure. TCRC uses the term “Family Unit” in a broad sense and tries to offer children a family-like environment that maintains some of the essential qualities of family.

TCRC Family Units are made of 8-10 male children of different age (7-17) grouped together in order to emphasise family relationships, both among children who live and share activities together as brothers, and between the child and at least one staff being the main caregiver, helping them to develop a sense of both identity and belonging. Two staffs are attached to each Family Unit as main caregivers.

The current ten Family Units present at TCRC form a community within the institution and a network of mutual support. Family units meet daily for bonding activities especially over lunch hour and twice a month for their formal meetings and activities respectively.

Since 2008, the program has helped children trust caregivers and has been facilitating children home reintegration. Children have since then become more responsible in their interactions, hygiene and sanitation standards have improved as well as discipline standards and caregivers/children relationships.

Offering a stable emotional relationship

The Family Unit attempts to offer each child a stable and emotional relationship needed for a healthy development. The caregiver takes responsibility for the child and actively shares in the child’s everyday life.
Time of sharing is identified at meals when children group together as a Family Unit at the same table. Caregivers are invited to join them and interact informally.

Children and caregivers of a Family Units perform activities together like cultivating a piece of land, cleaning the compound, bathing. A characteristic feature is the shoes keeping that the caregiver provides to the family unit children for the night. As children bring their shoes in the evening and pick them in the morning, monitoring and sharing is enhanced.

Twice a month they are allocated a specific time to share any relevant issue with their caregivers.

As a result, caregiver and child have developed a bond and identified key elements of a healthy family relationship such as love and acceptance, sensitivity, empathy and attachment.

Living together in small groups supported by caregivers helps children to take more responsibility for their own lives and develop social skills.

Additional assistance provided within TCRC includes professional counselling and psychosocial support for short term therapeutic input.

The tracing and reintegration process is also used to foster contact with the biological family in view of family reunion, guiding the reconstruction of the often inadequate relationship between the child and the biological parent(s) by encouraging networking with the local community.

**Way forward: Family Units as integral part of the institutional child care system**

All possible efforts need to be made to ensure that institutional care is provided in TCRC in the form of a small family-type home of a high standard to resemble the family environment and with stable and experienced staff providing a qualified service for assessment and care of each child. Ideally, this should take place jointly with child’s parent(s) and it should not last longer than 6 months, after which the child is supposed to be moved to a permanent family placement.

A Family Unit model can significantly support the well-being, growth and development of the child under residential care when the caregiver takes responsibility for a child and provides him with individual guidance and care until exit through family reintegration.

Activities carried out together by children and caregivers within Family Units should be as many as in a normal family setting. Staff, being the caregivers, have been trained and encouraged to create good enough bonding relationship with their Family Units and consider this as part of their routine duties.

Besides, the caregiver should assist the child in developing an Individual Care Plan, which guides his overall development and steers the out-of-home care process. The plan helps to set objectives for a child and is elaborated and further developed together with the child.
3.3 DAGORETTI REHABILITATION SCHOOL AND THE COGNITIVE-EMOTIVE REHABILITATION PROGRAMME

Children in correctional institutions generally have a deep sense of self-disempowerment. Child offenders and self destructive young people often blame others for their predicaments in life. On the contrary, accepting and then taking personal responsibility for our own lives is the way to a successful existence and it is the foundation of any rehabilitation program. As a matter of fact, by entering Dagoretti Rehabilitation School in 2009 we found that, contrary to its mandate, no specific rehabilitation programme was present there or in other government rehabilitation schools, and behaviour modification was expected to happen through provision of formal academic education, vocational training and discipline. An unrealistic belief since disruptive habits are often learnt behavioural patterns which have their own emotional and psychological rewards as part of their anatomy. These children could say: I feel good when I put someone else down. I feel good when I steal. I feel good when I am angry at someone. Most of these self-defeating beliefs are expressions of deeper feelings of powerlessness either as a result of past traumas caused by abuse, or as a result of poor intra and/or inter-personal skills.

This called for the development of a rehabilitation program able to strengthen children’s inner self to provoke change from within through self awareness and healthy self esteem. For this reason, using a participatory approach, the project and the institution staffs built up a rehabilitation manual, on the belief that self awareness is the foundation of personal growth and personal responsibility in behaviour modification.

Other behaviour change programmes are based on external reward systems and/or on information giving. However, they often achieve minimal results because they don’t access the child deeper personal resources and motivations. In a way, they dis-empower the individual by putting the centre of growth outside and the responsibility for change in the hands of others. On the contrary, by building this programme on self awareness, the centre of growth and maturity was shifted inside. In essence it says “My life is my responsibility. My success is primarily up to me, not others.”

The manual is designed to rehabilitate children who have deeply established dysfunctional behav-
jours by providing a 12 weeks package meant to facilitate a group and individual journey through building children

- **self-awareness** - knowing and understanding oneself: potential, feelings, emotions, habits, tendencies, strengths and weakness, e.g. understanding stress and negative emotions which may lead to destructive habits.

- **capacity to relate with others** - skills which empower the individual to build, repair and maintain healthy relationships with other people, e.g. learning how to communicate properly with others and to set proper boundaries in relationships.

- **decision-making ability** - as children and youth develop, they meet new challenges, e.g. facing dilemmas (crossroads) to make decisions. It is therefore necessary to equip them with skills of making effective decisions.

Participants are introduced to the importance of self awareness as a tool for self discovery and personal fulfilment. Self awareness makes participants start the journey of self actualization thus helping them realize their potentials. At this elementary level participants are provided with activities able to trigger the journey towards taking responsibility over their own lives. Children are empowered through life skills, peer education, positive values and by experiencing a healthy mentorship relationship with the institution staff.

The learning is both informative and experiential. Repetition is used as a main anchor, since learning new skills and effective skill-building requires time and repetition.

Government staff involved in the programme play the role of Mentors to support the rehabilitation process by understanding and journeying with children to rediscover themselves, others and life with its opportunities of making positive choices.
4. ENHANCING PHYSICAL INFRASTRUCTURE

To improve the physical environment and respond to institutionalised children needs, the project embarked in the rehabilitation of some institutions basic infrastructures.

4.1 Nairobi Children Remand Home

- Rehabilitation of two blocks of internal toilets
- Drilling of a borehole and provision of safe water
- Improvement of the external play ground

4.2 Dagoretti Rehabilitation School

- Rehabilitation of central ablution block including 9 toilets and 9 showers
- Rehabilitation of a classroom and full equipment of a fashion and design workshop

4.3 Thika Children Rescue Centre

- Rehabilitation of playground
- Building of 6 external pit latrines
- Painting of external walls with child friendly pictures

Dagoretti Rehabilitation School: Ablution Block before and after rehabilitation.
CHAPTER THREE
GOOD PRACTICES

THE PROJECT FIELD PROGRAMME

1. THE CHILD PROTECTION FIELD SERVICES REFORMS FRAMEWORK

The pilot field project started in the year 2008 and it was designed to support reforms of child protection services run by the Department of Children Services through strengthening its field offices at district level (DCO) and by enhancing community based intervention programmes in two select districts of Nairobi, namely Kasarani and Embakasi.

Kasarani is a residential area in the Eastern part of Nairobi, about 10 km from the city centre along Thika Road. It includes important hot spots for child protection such as Kariobangi location, the slums of Korogocho, and Githurai 44.

Embakasi is a suburb of Nairobi. It is located east of the central business district. As a residential estate it houses mostly lower middle income citizens. However, many low income informal settlements are present in the area such as Mukuru Kwa Njenga and Soweto. Hot spots for child protection are Dandora (with the Nairobi dumping site) and Kayole. It also contains the suburbs of South B and South C as well as Nairobi’s Industrial Area and Export Processing Zones.
The rationale of the intervention originated from the first phase of the project implemented at institutions level (NCRH) which had identified the following challenges in need of being addressed:

- As confirmed by the 2009 Census\textsuperscript{7} the two districts with their 1,451,399 of inhabitants are the most populated in the whole country and in Nairobi: EMBAKASI having 925,775 inhabitants and KASARANI having 525,624. Half of them being under 18 years of age.

- Low capacity of the District Area Advisory Council (AAC) and Volunteer Children Officer (VCO) programme to enhance the human resource ability of the District Children Office outreach service delivery.

- Inadequate decentralized preventive activities to intervene on the large number of children at risk being admitted at the Nairobi Children Remand Home (2005 -2008) originating from the two mentioned sub-urban areas and representing 30% of its total population.

- Weak Communication and Policy guidelines on Child Reintegration and After Care between Institutions and Field Services (District Children Office).

- Inadequate coordination of child protection services by Civil Society Organizations and State actors, leading to duplication of programmes and competition, uneven distribution and meagre rationalisation of resources.

To respond to the above challenges, the project developed a preventive model to enhance synergistic pooling of skills, resources, information and partnerships/networks among stakeholders aimed at strengthening ownership and harmonization of children services by all.

The programme has carried out numerous activities at various levels:

- infrastructure development of DCOs Offices;

- provision of technical assistance to DCOs offices for stakeholders mapping, networking and collaboration;

- documentation development at the DCOs offices on specific child protection areas to streamline interventions and rationalize data and record collection

- skills capacity building of VCOs, LAACs, Village Elders, GOK Staff and Teachers;

- collaborative set up and inception of various structures under the AAC and DCO systems;

- community mobilization through participatory education theatre (PET).

- school-community networking.

\textsuperscript{7} 2009 POPULATION & HOUSING CENSUS RESULTS, Ministry of State for Planning, National Development and Vision 2030, 31st August, 2010
Overall, the project has managed to impact the primary beneficiaries with improved child care, decentralization of child service provision at District and Location level, consolidation at the DCOs office of prevention and early intervention strategies, such as rescue operations being practiced by state and non-state actors.

The need based applied methodology was meant to facilitate the DCOs office staff capacity to achieve operations effectiveness, streamlining of rescue operations and of the VCOs system, synergy of stakeholders’ interventions, continuous monitoring and evaluation, and interventions ownership and sustainability.

2. FIELD COMPONENTS OF THE CHILDREN SAFETY NETS PROJECT

The project basically worked focusing on the following three major levels of intervention:

1. District Child Protection System
2. Stakeholders networks
3. Awareness Creation

These intervention areas are not distinct of each other, though aiming at different targets groups. In fact, the Community Safety Nets concept is based on the principle that vulnerable children need to be held within their community, their family being supported to retain them. The collective community social capital may be sufficient to respond to various children needs, provided that there is proper community leadership, coordination and support to address their arising issues. Hence, interventions by external stakeholders in child protection need to be entrenched and owned by the community to avoid being viewed as stakeholders’ owned agendas.

2.1 DISTRICT CHILD PROTECTION SYSTEM

The experience of working from 2005 to 2008 at the NCRH had shown that for effective protection interventions and reintegration process to have an impact, there was need to strengthen reforms of the Child Protection System at the district level in order to address gaps as to why it was not functional.

Furthermore, at the field project inception in 2008, the district appeared to be the geographical focus of the Department of Children Services in service provision to vulnerable children. This called for a specific interven-
tion which identified the District Children Office as the key partner in the Child Protection System being driven by the government.

The recognition of the legal mandate of government stakeholders was upheld while at the same time recognizing the complimentary role played by non-state Actors for the collective ownership and improvement of the same system. The guiding principle was that no stakeholder has sufficient capacity to handle alone the multi-faceted child protection endeavour.

This multi-sectoral prospective made the project to enhance collaboration of state and non-state Actors to establish collective response mechanisms for protection related activities, based on the critical principle that child care and protection is a shared responsibility of all stakeholders working in the community. To achieve this result, the project identified the Area Advisory Council structure as the most suitable and it focused on its devolution to location level by establishing, training, monitoring and evaluating Location Area Advisory Councils. Chart 1 outlines the operation level of the project in the broad context of the child protection system.

Chart 1: Child Protection System Decentralization at Location level
The Participatory Action Research methodology was applied by the project team with the aim of improving strategies, practices, and knowledge of the environment within which the project was operating. Experiences, challenges and lessons learnt in the actual implementation of activities were used as a decision making tool to design the appropriate intervention/response. Being based at the District Children Office the project team could review its structures, policies and procedures. Information collected and analysed could continuously be reviewed to influence the subsequent engagement with other stakeholders.

Interventions to strengthen the District Child Protection System looked at the District Children Office as its focal point. Hence, the project developed its 3-year programme as it follows:

Year 1
- Devolvement of the Area Advisory Council.
- Enhancement of the Office sitting Space and infrastructure.
- Strengthening the Volunteer Children Officers System.

Year 2 and 3
- Review of Reintegration and After Care Protocol.
- Engagement of Stakeholders - Village Elders.
- Mapping of Service Providers.
- Document Development and Dissemination.
- Technical Assistance on Stakeholders’ Mobilization and Activities.

2.1.1 DISTRICT CHILDREN OFFICE (DCO)

This is the focal point of all activities undertaken for child care and protection within the district. The office has 4 key roles to play in child protection: implementing and supervising application of legislation and policies, primary prevention through awareness creation, early interventions, and coordination by facilitating partnerships and networks.

The guiding instrument utilised by the project team was the DCO annual work plan that would follow the National Council of Children Services annual plan of action.
The project team engaged the office both at Operational and Structural levels.

A) OPERATIONAL LEVEL

This level included the DCO routine day to day activities that were implemented collaboratively with the project team.

The methodology used in this collaboration exercise were formal and informal consultations, planning and coordination of joint activities, presence of a project staff at the DCO’s office, sharing of office space, utilization of each other’s personnel in areas like inspection of CCIs and participation in the formal monthly meeting.

Under this component the project managed to have an impact on the following areas of service delivery.

a) Rescue operations

Through operations monitoring and evaluation, the project team established that there was no standard rescue protocol formulated to be used by the DCO. There was a general understanding that some stakeholders could undertake it, but the point of convergence and recognition of the DCO as the focal coordination point for whatever rescue activity, was neither understood nor acknowledged.

Working in consultation with the DCOs, VCOs and other stakeholders, the project developed a rescue operation protocol, which is outlined in chart 2. The protocol dissemination was localized in the Nairobi Province, Kiambu and Ngong DCOs offices, and for the LAACs, VCOs and relevant district stakeholders such as the Provincial Administration and Police.
Chart 2: Rescue Procedures Protocol

As the chart outlines, during rescue operations, the DCO has to be contacted immediately after the child is removed from the abusive situation to provide for directions, referrals and assume responsibility of the case.

Fully streamlining of rescue operations by the DCO is yet to be realized due to different approaches in use by stakeholders. A critical issue refers to the incurring of expenses, especially by the VCOs and Village Elders when doing actual rescue.

b) Reintegration and After Care

In its first and second year of implementation, the project led the trial phase of joint implementation of the reintegration protocol. The aim was to bridge the gap and develop good practices that would ensure working collaboration between the Institutional and the Field Services being under two different Divisions of the DCS.
During this period the project would do Tracing, Environmental Assessment Report, link Families with Institutions (Family Counselling and Bonding Session with Child), plan the Family Conference with the family through the FGDM model and coordinate it.

In the third year, the focus shifted to strengthen the DCO capacity to handle the reintegration process and to streamline the aftercare procedures by handing over cases of children being in the process or already reintegrated to the DCO offices.

As part of the Department of Children Services reforms, the active involvement of the DCO’s offices has been identified as an integral part of the reintegration process. To ensure this, the project undertook to build the capacity of GOK staff by facilitating workshops between Institutions and Field services, capacity building and on the job skills transfer to VCOs through joint reintegration activities, increasing the number of contact persons to follow up cases through LAACs and other stakeholders, and establishment/training of additional support structures like the thematic committee in each LAAC and/or village elders.

For the reintegration process to flow smoothly and have increased impact, clear communication channels among the GOK staff, networking with stakeholders, continuous mapping and involvement of VCOs/Village Elders have been promoted as key components.

c) Mapping

This activity has been undertaken by the project with the Location Area Advisory Councils to identify children service providers within their communities. The aim was to have a partners’ database with a description of their services and reliable contacts that will be continuously updated by the LAACs. Both Kasarani and Embakasi District could be provided with a directory including most of the community service
providers engaging in child protection.

This database has been utilized in rescue interventions and for referral of reintegrated children cases. It also provides figures and facts to parties like the Provincial Administration to identify suitable partners for their programmes.

In addition, mapping aims at linking up reintegrated children and their families to resources within their communities. This has been very instrumental in safeguarding the retention of reunited children at home. In each of the DCO offices, there is a directory with profiles of service providers operating in the 8 Locations where the project piloted the devolvement of the LAAC.

d) Review and development of technical tools and procedures

As part of the technical assistance to enhance service delivery, this activity has been continuous throughout the project life. Reviewing the service delivery, it was realized that existing procedures needed to be domesticated to reflect the situation on the ground.

The consultative approach in service delivery advanced by some stakeholders could not be functional due to the available guidelines, in some cases not existing at all. An example is the reintegration process, being a critical component of service delivery and a good practice in diversion of children, yet lacking adequate procedures and related documentation.

The domestication of the VCO Manual appeared as well to be inadequate in relation to the situation in the community. Consequently, inadequacy of clear and practical guidelines had led to VCO misconduct and corruption issues.

Some of the technical procedures developed:

- Reintegration protocol
- Rescue Operation Guidelines
- VCOs Case Record Book.
- VCO Organizational Structure
- Guidelines for Thematic Committees at AAC and LAAC levels

B) STRUCTURAL LEVEL

These are the formal and non – formal support mechanisms established to strengthen the DCO offices in outreach service delivery.
a) Volunteer Children Officer (VCO) System

The VCO system is made up of individuals drawn from the community who voluntarily offer services under the DCO office to enhance child care and protection.

VCOs are a critical link between the DCO and LAACs as well as with the Community. They are the representatives of the DCO at the locations. In many instances they have been the operational arm of the DCO in many activities such as rescue operations, reintegration and aftercare. Without their engagement, service delivery by the DCO would be limited in scope and impact.

In its second year of operations, the project team being a member of the District Area Advisory Council took part in the mobilization and recruitment process of VCOs. Out of this process, each location got one or more VCOs who were taken through an Induction Workshop to be equipped with the necessary basic information on the VCOs system of work.

To streamline their interventions, an Operational Structure (see annex I) was developed in a participatory manner between the DCO offices and CEFA. This has proved to be a realistic and focussed document that safeguards the welfare of the VCOs, checks against corruption, sets limitations on what they can and not do and defines their daily conduct. This document has been forwarded to the DCS as the project lobbies for its adoption, being a workable tool which may greatly impact the sustainability of the VCOs system nationally. To improve data collection and communication the VCOs case record book was developed (see Annex II).

Further, for a period of 9 months (May 2010 – Jan 2011), the project facilitated the DCO’s Office to hold consultative VCOs monthly meetings on a pilot basis.

These meetings are a forum for

- ongoing monitoring and evaluation of the VCOs;
- documentation of cases dealt with as recorded in the case record sheets, pointing out the referral and disposal methodology used;
- updating on cases under reintegration and follow up;
- updating on LAAC activities, and
- addressing arising issues at personal or group level such as need for capacity building.

b) Enhancing Physical Infrastructure of the DCO Office

Through the procurement and fabrication of two (2) 20 feet containers into an office both Embakasi
and Kasarani DCO had their physical space enhanced. Later on, since the new Kasarani Office block was built during the second year of the project, the container was transferred to Embakasi. Also storage cabinets, office desks and chairs were provided.

This has led to respect of clients’ privacy, officers morale uplifted, larger and healthier work stations, increased document storage capacity and facility for holding meetings of up to 20 people. To be able to operate, the project team was provided with an equipped work station in each DCO office.

2.2 STAKEHOLDERS NETWORKS

2.2.1 Area Advisory Council (AAC)

The formal community based child protection system in Kenya is represented by the Area Advisory Council (a devolved structure of the National Council of Children Services), which has representatives drawn from key GOK line ministries and Civil Society stakeholders.

By its composition, it is a structure which operates under a legal statute and plays a complementary role with the NCCS to facilitate the implementation of its resolutions and policies on child care and protection.

By operating within the framework of the district child protection system, the project has focused its intervention on the AAC strengthening by scaling it down from district to location level. It has also improved its role of coordinating service delivery, and guiding recruitment and reporting of VCOs.

2.2.2 Devolvement of District AAC into Location AACs

One of the gaps identified in the project initial stages was that AACs were not in touch with children issues on the ground due to their composition, roles and functions. Working collaboratively with the
DCO, the scaling down of AAC to location level was achieved through community mobilization and a recruitment process done in the 1\textsuperscript{st} quarter of the project first year. As a result, the Embakasi and Kasarani District AACs were devolved in 8 selected Locations, namely Kariobangi, Ruaraka, Kasarani, Githurai, Kayole, Mukuru kwa Njenga, Ruai and Njiru.

An Induction Workshop was held to equip members with the necessary basic information on the LAAC structure, functions and roles.

Being an approach that utilizes volunteerism as its foundation, it was not easy to make LAACs become functional as issues like payment of allowances, over-steeping of its mandate, case and activity documentation among others kept recurring.

To address these issues, interventions were designed to provide

- periodic capacity building sessions;
- alignment of LAAC activities to the DCO work plan;
- presence of DCO officers in LAAC meetings and activities;
- half year (semester) planning and evaluations, and
- establishment of thematic committees.

In the last 3 years, LAACs have engaged in many activities within their locations, such as awareness creation, coordination of stakeholders, organization of events, strengthening of rescue and aftercare interventions, while going through the different stages of any group life cycle. A great challenge is raised by the fact that community dynamics, related to local politics, invested interests and conflicts, affect them deeply. As a result, out of the initial eight LAACs formed, one has been fully reconstituted, while the other seven have had incorporation of additional stakeholders to address emerging needs or to replace members who had pulled out.

When properly functioning, LAACs become the best anchors of all community based programmes due to their training, closeness with the local environment and minimal costs of running activities. If well supported, activities planned and implemented by LAACs have greater chances of sustainability than the district AAC, highly affected by frequent transfers of GOK officers.
2.2.3 Networking Forums

The experience in the community mobilization and formation of LAACs pointed to segmentation of locations into stakeholders’ regions with unnecessary competition, duplication of interventions, withholding information and suspicion. To address these challenges the project was in the forefront to lobby for the establishment of networking forums under the coordination of the DCO’s office.

The project persistent focus on child protection services coordination led to holding networking meetings at district level that have, over time, achieved improved collaboration, some level of harmonization of work plans and joint implementation of activities. In collaboration with concerned stakeholders, different children service providers were brought together to share experiences, work plans, challenges and seek ways of collaboration to avoid duplication of activities.

The highlight of the stakeholders’ networking was the formation of thematic committees along areas/issues addressed. As much as this was short-lived, the future of programme implementation lies in networking and collaboration. The DCO has a critical role to play in supporting Civil Society Organizations to join hands with the public sector and harmonize service delivery in line with the NCCS annual plan of action.

2.2.4 Village Elders

They are a community based structure established under the Office of the President, Ministry of State for Provincial Administration and Internal Security. Being community members they are either selected or elected to represent villages or zones within a location. They offer voluntary services being based at the location Provincial Administration offices, under the Chief’s and Assistant Chief’s office. Many of them act as community representatives in the provincial administration local committees such as the Development Committee, Peace Committee, and Environmental Committee among others. The main component of their work is advising, leadership, administrative support and case arbitration.

Due to their diverse involvement in their community they are a resource in terms of understanding the political, economic, socio-cultural, environmental, land and legal issues of their area of residence. Also they possess a good knowledge of the community dynamics. According to the project team experience, majority of community members in Nairobi suburban areas still utilize the Chief’s or Assistant Chief’s offices due to their geographical proximity in the determination of children
cases. Village elders being present most of the time at these offices, become involved in children related cases relying on their experience and knowledge as a source of information.

Out of this realization they were mobilized through the DCO and DC offices. The aim was to impart some level of specialized skills in areas like rescue, legal issues and reintegration. Restrictions, related to their intervention in child protection as per the Children’s Act and the role of the Provincial Administration, were also part of training. Along the project period they became a key partner in enhancing child protection, prevention and follow up of reintegrated children.

2.2.5 School Community Networking Programme

The programme was implemented in 21 city primary schools within Kasarani and Embakasi districts. Its rationale acknowledged that schools were having many needs and experiencing minimal resource disbursement to respond to them. It also appeared that they were having challenges in meeting basic requirement to achieve Universal Free Education (UFE) such as infrastructure, adequate academic performance, children’s behavioural change and community engagement.

Hence, the project highlighted the benefits of collaboration and interaction that yields a strong community-school relationship by focusing school management committees in meeting children and school needs far beyond the notion of simple parents’ involvement in activities. The programme utilized the district mapping data to identify local partners to be brought on board to support the school.

To this end, School Management Committees have been trained in needs analysis, planning, resources’ mobilization and fundraising, writing concept papers and proposals, and in identification of possible partners to bridge gaps facing the schools.

2.3 AWARENESS CREATION

This activity included an ongoing engagement with different beneficiaries and stakeholders to enhance their understanding and acknowledgement of child protection issues and to pursue their direct commitment by using various approaches, like

- Consultative Meetings / Forums
- Participatory Monitoring and Evaluation
- Group Facilitation
- One on One Discussion
- Use of Participatory Educational Theatre (PET)

Twenty one Public Primary Schools were targeted in Kasarani and Embakasi low income areas after having been identified as being in particular need in relation to child protection. To clearly identify and confirm the student population needs, at the project inception the project team conducted a qualitative survey in the same schools. The following main risk factors affecting pupils were explored:

**Table 2: risk factors affecting primary school pupils**

<table>
<thead>
<tr>
<th>Being Orphaned</th>
<th>Being in foster care</th>
<th>Affected by HIV/AIDS</th>
<th>Domestic violence</th>
<th>Being with risky behavior</th>
<th>Extreme poverty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being Refugee</td>
<td>Harmful cultural practices</td>
<td>Disability</td>
<td>Early pregnancies</td>
<td>Child labour</td>
<td></td>
</tr>
</tbody>
</table>

Assuming that vulnerability occurs when the child is affected by at least one of the above risk factors, the total number of vulnerable children in the target schools amounted to 18,258 out of a total student population of 23,360.

% of vulnerable children in the schools = 78%.

% of children who are not vulnerable = 22%

In relation to this, the average Teacher /Student ration was found to be {1:52}

The Parents’ Capacity was also explored to identify the unused resources of the community as it was found that

- Parents also have intellectual & skill capacity shown by their educational levels since 85% of them have primary school education, meaning that they have the capacity to understand the need for education.
- Most of the parents are in the low income bracket but they also have skill most of them being artisans.
The School-Community Gap was finally investigated to identify the critical issues to be addressed.

Table 3: School-community challenges and strengths

<table>
<thead>
<tr>
<th>The Schools</th>
<th>The Gap</th>
<th>The Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strained human resources</td>
<td>No sense of ownership on both sides</td>
<td>Has some intellectual capacity</td>
</tr>
<tr>
<td>Strained physical resources</td>
<td>Negative perceptions of each other</td>
<td>Has numerical advantage</td>
</tr>
<tr>
<td>Poor dilapidated systems</td>
<td>Poor relationship</td>
<td>Has some level of artisan skills.</td>
</tr>
<tr>
<td>Unable to meet all the needs of the children.</td>
<td>Not much awareness of the need for each other</td>
<td>Has some systems that are working e.g. police, hospitals, chiefs</td>
</tr>
<tr>
<td></td>
<td>Unrealistic expectations by misunderstanding roles &amp; goal</td>
<td>Has organizations working in the community e.g. CBO’s, NGO’s, FBO’s, CCI’s &amp; well wishers</td>
</tr>
<tr>
<td>Suspension &amp; mistrust</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

It appears that the schools within the target area have been operating with very strained resources at all levels. The current capacity of the schools teaching staff is very strained and in danger of burn out. Many of the schools are overcrowded thus their physical resources are also strained e.g. toilets, water supplies, books and other materials. Realistically the schools cannot adequately meet the current needs of their children.

Additional findings revealed that

- The perception of the relationship between the schools and the surrounding community is one of passive hostility and un-involvement.
- There is un-harnessed capacity within the surrounding communities. This is evidenced by the fact that the parents have some levels of skills, education, financial capacity and even the numbers of stakeholders is quite high.
- Many of the schools with feeding programs seem to have a lower dropout rate in comparison to the dropout rates in other schools.

To respond to some of the above challenges, in 2008 the project targeted the Guidance and Counsel-
ling School Department by providing skills counselling training to teachers. In 2009 it focused on Peer
Education by training teachers on how to establish or strengthen peer educators clubs in their schools.
In 2010 the focus shifted to the school-community relationship. The school awareness programme
was developed during the whole project period through the Participatory Educational Theatre.

2.3.1 Participatory Educational Theatre (PET)

Theatre in Kenya is considered to be an important tool for promoting freedom of expression.
Many people find themselves, through this interactive and entertaining communication medium,
responding positively to exploring the issues that affect them without feeling inferior about their
problems. Community performances are usually conducted after thorough groundwork and the artists perform plays that deal with the problems of that particular community. It is an effective medium because it draws from the experience of local communities and offers the community alternative perspectives, along with paradigms that mirror their own worldview.

In particular, the Participatory Educational Theatre (PET) is a methodology which uses an interactive and participatory approach to allow the audience to probe, reflect and respond to issues which concern them. A PET project aims to communicate first to people through their emotions, and then allows the participants to reflect on the dilemma posed, and examine their feelings and responses objectively. The participants are expected to make some adjustments in their life based on the learning they get from the play and the ensuing discussion.

The aim is to bring about change in the target community’s perception of the world and themselves as individuals within it. By changing perceptions we do not simply mean raising awareness, but allowing the community to examine their attitudes towards the unresolved dilemmas and contradictions presented in the drama which reflects their lives.

Two main stages of a PET Performance:

- The scene is set by the actors/educators through short episodes of scripted theatre. Each episode brings a dilemma to the audience without providing for the answer.
- Through the role of the facilitator, the audience is engaged and invited to directly participate to help solve the dilemmas presented in the various scenes.

The project carried out one awareness campaign for each project year (2008-2010) using the PET methodology. The scripts were drafted by the project staff relying on direct experience and information acquired on the job focusing on thematic areas recognized as critical in child protection. A theatre group was hired to perform the play. The project team provided for the facilitation with the audience
The three plays are summarised here below:

**2008: Mbegu Vuruga/ Spoiler Seed**

The play narrates the story of a child girl called CHUKI “Hated” who was born in a family where the father was eagerly expecting for a baby boy and had build a belief and culture of accepting nothing else. When a baby girl was born the rejection started by naming her CHUKI. The story follows a pattern of growing issues which affect the girl’s cognitive, emotional and health development.

**2009: Dalili**

The play narrates the story of a family where parents have a communication breakdown, express hostility at each other, use abusive language towards their children, physical fights are common, infidelity and shaming are rampant. At the end, parents realize how their past life experiences and unhealed wounds are shaping their current lifestyle and parenting approaches.

**2010: Jukumu**

The play focused on raising awareness of school parents and local communities on children’s needs and rights by bridging the gap between the school and the local community. The play was called “JUKUMU” (Swahili word for “responsibility”). Its main objective was to raise awareness on how parents, teachers and community can join hands and responsibility in managing their school.

Thanks to the facilitation that took place during the play performance, people tended to associate their problems with those of the cast, and were thus able to talk about their issues through the medium of the cast, thereby discovering solutions to the problems they faced. Generally speaking, the more participatory the theatre was, and especially if it involved the community intimately, the more effective it was likely to be.
The plays facilitated participatory approach and opportunities for:

1. Community members to interrogate both characters and situations within the drama;
2. Audience empowerment, by allowing the participants to intervene and determine the narrative sequence of the drama;
3. Involvement of the participants in the contradictions and paradoxes raised by the drama; and,
4. Improvisational role-playing to allow participants to put themselves in the position of the characters in the drama.

Some Comments by the participants:

“This play is an exact picture of what goes on in our school. Right after the play a drunk man has come to demand money from the wife. She had taken that money to bring it here to clear feeding programme balance. Other parents had to restrain him as he wanted to fight the wife here in public and further in the school compound where there were a few pupils who could be knowing their children”
Head Teacher of M.M.Chandaria Primary School.- Mr. Vitalis Opiyo

“Whatever you are doing is our real life situation, did the head teacher from our school tell you what has been happening in our homes? Because I cannot understand how you are so accurate about my family situation.”
A question by one of the parents of Mukuru kwa Njenga Primary School

“The play is very relevant to the issues of families and the surrounding society next to my school, thank you”, Head Teacher of Baba Dogo Primary School- Mrs.Rose Apondi

“This play to me had a very high impact on the parents in our school please bring it again. They are usually a noisy group but today, we could communicate.” Deputy Head teacher Kayole One primary school.

Achievements

- More than 15,000 school parents attended the play performances.
- The plays were a wakeup call for parents to change their perception. They saw themselves and their community through the play and could resolve to change from expecting outsiders to assist to action planning towards their issues.
- Whatever the environment, parents and teachers realized that they have something to offer to their children and to the school.
- Positive change of attitude by the school administration since many had been viewing the surrounding community negatively.
- Hostility towards school administration by the school management committees has been reduced significantly. Meetings are more sober, money not being the only issue of focus.
- Renewed positive energy from parents towards their children and the schools’ challenges after viewing the play.
CHAPTER FOUR

CHALLENGES AND RECOMMENDATIONS

1. IDENTIFIED CHALLENGES

Challenges represent gaps the project experienced during the project duration. They are subdivided according to the Institutions and Field project programmes so to be structured in a simple and effective way. They are presented to inform policy making and reforms in the child protection system.

1.1 INSTITUTIONS PROGRAMME

- Official duties by staff in the institution have been a challenge to promote effective implementation of the sections activities, e.g. limited time for counselling due to section members multiple roles within the institution.
- Lack of professionally trained staff fully dedicated to the sections activities.
- The gap between the Institution and Field Services in Nairobi has been only partially bridged in relation to the agreed protocol on case referral system through DCO’s offices, e.g. communication gaps.
- Department of Children Services inadequate and delayed funds, hence hampering the reintegration programme sustainability.

- Limited collaboration from some parents, hence complicating the needed reintegration process which requires family counselling.

- Reintegration criteria may prioritise achieved academics or training results above personal readiness.

- The Court release system has slowed down reintegration.

- The hierarchal government management structure makes each component of the programme to heavily rely for sustainability on individual managers.

1.2 FIELD PROGRAMME

a. DCOs

- At the point of project inception, it was established that the District Children offices were operating under the goodwill and attitude of the district head. This made implementation difficult as the programme had to be suited to accommodate a person rather than the implementation matrix to address children needs in the community.

b. LAACS

- Inadequate external (DO, DCO) and internal (Chief, VCO, Interim Chair) leadership has affected the LAACs stability and functioning.

- There have been abrupt variations in attendance and commitment by LAACs members due to internal and external factors such as community dynamics.

- VCOs internal conflicts had negative influence in the LAACs, bringing internal division, disengagement of members and freezing of activities.

- LAAC inadequate documentation: e.g. aftercare, rescue.

- Inadequate harmonization of LAAC work plans with the DCO’s work plan has limited effective collaboration. Furthermore, some stakeholders needed to be streamlined by the DCOs to harmonise their intervention with the District programme.

- LAACs meeting hours were late in the evening, affecting GOK staff attendance.

c. VCOs

- Lack of DCS funding for specific VCOs activities: transport, air time.
There have been cases of VCOs misconduct such as abuse of position, not upholding to their code of conduct and impersonation. The challenge still affects the new VCOs.

d. Reintegration and Aftercare

- The process of re-integration is challenged by inadequate resources and collaboration between institutions and field services.

- A number of children are released directly from institutions and the Nairobi Children Court to their parents hampering any intervention in their family and community to address the root causes of their admission in the institution. Hence, the release is not focused on the best interest of the child.

- The coordination of aftercare services (children reintegrated from institutions) by the DCO’s office is still to be included as a structured office activity.

e. Rescue

Lack of official NCCS polices and inadequate guidelines from the DCS on rescue procedures leading to

- Lack of proper coordination of the rescue process by different stakeholders. e.g. Provincial Administration, police, etc.

- Lack of proper referral procedures.

- Mishandling of children cases at police level.

- Lack of resources to meet incidental costs involved: medical, communication and transport.

- People doing rescue (e.g. VCOs, LAAC members) facing problems due to lack of identification and security.

- Inadequate staffing in terms of numbers and specialised capacity by DCO’s offices, Provincial Admin, and Police compared to the increase of the case load.

- Lack of child protection units in most Police stations.

f. Resources

- Several activities being supported by the project are being facilitated through financial resources which might be difficult for the DCO’s to continue unless funded by the DCS, e.g. VCO monthly meeting, LAAC capacity buildings, etc.
2. PROJECT RECOMMENDATIONS

As CEFA is phasing out, several recommendations are made in order to have a smooth, effective and sustainable transition. Furthermore, they are presented to inform policy making and reforms in the child protection system.

2.1 RECOMMENDATION FOR THE NCCS

- The NCCS to establish mechanism to enforce coordination of state and non state actors in child protection from national to location level by having its annual work plan as the major reference plan outline.

- The NCCS to develop a policy on AACs to transform them into a more action oriented body when they are devolved at location level (LAACs), e.g. for early intervention in rescue, rather than maintaining just a policy making and overseeing role. Besides, the existing policy should be enforced, including the harmonization of AACs work plans and the undertaking of suitable M&E.

- The NCCS to look into the possibility of upgrading the AAC structure into a child protection development agency able to fund projects modelled like the Social Development and Constituency Aids Committees.

- The NCCS to develop realistic guidelines to promote resource mobilization and to provide transparency and accountability regulations on the use of funds, e.g. the NCCS to review institutional recognition of AACs to enable them to function as a body allowed operating a bank account.

- The NCCS to review and develop a Manual for LAACs to specify ways of mobilization, selection criteria of LAACs members, Resource Management and Reporting Structures.

- The NCCS to address the disconnection between the Kenya Police Act, Administration Police Act, Chief’s Act and Children’s Act to promote sensitization on Child Rights, Child Protection, Rescue Procedures and the AACS structures. Child protection should be an integral part of the Chiefs’ and Police Training Curriculum.

2.2 RECOMMENDATION FOR THE DEPARTMENT OF CHILDREN SERVICES

- The DCS to increase staff in Institutions and DCOs offices to ensure implementation of basic service delivery and testing of best practices

- The DCS to publish and disseminate its drafted Reforms Document to provide for an official reference to allow for reforms implementation and for them to be factored in the departmental
budget for allocation of the required funds. Funding priorities are to ensure sustainability of the reintegration process in linking institutions and the field services, the devolution of AACs at location level (LAACs) and the operational activities and training of VCOs.

- The DCS to hire specifically qualified counsellors to enhance and improve counselling service delivery both in institutions and in the field offices to cater for emotional support to children and families.

- Within Institutions, counselling, education and reintegration programmes to be fully included in the staff performance contracts, comprising also new staff responsibilities according to the category of the institution (e.g. Family Units activities being specific to Rescue Centres, Rehabilitation Programme being specific to Rehabilitation schools, etc).

- Institutions to be provided with a common tool for data collection from the counselling, education, and reintegration sections (e.g. number of counselling sections provided). Monthly returns by institutions to the DCS to formally include those data. The same to be done for DCOs offices so that data on reintegration and aftercare are formalised as part of their monthly returns.

- Coordination and networking of stakeholders need to be enforced at different levels by the Department of Children Services to avoid PDCS and DCOs offices being bypassed by stakeholders who do not involve them in their activities.

- The DCS to direct all children services providers to work in reference with the PDCS and DCOs Offices.

- Children Services providers to be licensed by the DCS to enable them to operate.

- The DCS should thoroughly evaluate the VCOs system to streamline their recruitment, suspension and dismissal. A M&E system on their activities and performance should be in place for the DCOs to be able to monitor and coordinate them. The AAC should fully engage in this exercise. Suspended or dismissed VCOs should not engage in child protection and face the law in case they do.

- Rescue procedures to be officially established and agreed upon between DCS and Kenya Police, DCS and Provincial Administration through formal MOUs.

- Diversion programmes and CPUs to be revived and strengthened.

### 2.3 RECOMMENDATION FOR THE PDCS NAIROBI

- At Provincial level, the PDCS should hold regular Stakeholders Forum to lay the working modality for stakeholders networking in Nairobi. The Provincial Annual Work Plan should be the reference plan for stakeholders to harmonize their programs and activities. Thematic areas meetings clustering concerned organizations should be proposed in order to deal with areas of major concern or where duplication may occur, for stakeholders to agree on a common
schedule of work: e.g. various trainings to be harmonized on thematic areas of training (who is going to do what), target population for what concern category of trainees, their locations and drawing of a common calendar. Stakeholders should include Police, City Council, Provincial Administration and major NGOs/Organizations operating at Provincial level.

- The Nairobi PDCS needs to facilitate
  
  - the enforcement and supervision of the reintegration protocol to be implemented by the Nairobi DCOs in order to strengthen linkages between them and statutory institutions;
  - improved collaboration between Nairobi DCOs offices and statutory institutions for timely reintegration to avoid delays which may force exiting children from institutions without proper family preparation;
  - Children reintegration from statutory institution to be done as much as possible through the DCO’s offices;
  - inclusion of institutions managers during DCOs meetings at the PDCS office for reintegration procedures to be implemented, and
  - additional training and Monitoring and Evaluation (M&E) for field and institutions officers.

- The Nairobi PDCS to facilitate communication between statutory institutions and the Children Court by
  
  - requesting the Nairobi Children’s Court Magistrate to have mentions done at the Institutions (e.g. NCRH and NCRC) rather than in Court;
  - ensuring that children are not released to the caregiver directly from Court or the Institution but through the DCO’s offices as a minimum reintegration standard for provision of monitoring and aftercare services, and
  - requesting the creation in Nairobi of Child Protection Committees at Court level (see Nakuru experience) to enable the Judiciary to improve its effectiveness on children’s cases and to respond appropriately. This approach may reduce delay by the court process in releasing children.

- The Nairobi PDCS office needs to have aftercare as one of the priority services to be provided by DCOs.

- Data collection, documentation and filing system for reintegration and aftercare to be streamlined at the D.C.O’s offices.
The Nairobi PDCS to support the new Njiru DCO’s office with infrastructure and equipment to be able to operate and pick up with programmes.

2.4 RECOMMENDATIONS FOR THE NAIROBI DCOs

2.4.1 Recommendation related to the DCOs office

- The DCO offices to cover a stronger leadership role in Children Services delivery. The followings are the areas needing critical leadership:
  - LAAC Operations – Area, Duties, Resource Mobilization etc.
  - Stakeholders’ coordination and harmonization of activities.
  - Coordination of the Reintegration Process and provision of After Care services.
  - Rescue operations.
  - Promote Mapping of Children’s Services Providers in the Districts to produce a District Directory to be distributed among stakeholders and to be used at Provincial Level to compile a Provincial Directory.
  - Database for different children’s categories.

- Monthly meetings among DCO’s officers to happen regularly for coordination, planning and evaluation to strengthen the team work.

- The DCO’s officers to be able to allocate a structured time to coordinate VCOs (monthly) and LAACs (quarterly), considering them as critical human resources attached to their office for service delivery.

- DCO’s office to prioritize documentation, especially on rescue, reintegration, aftercare and mapping.

2.5 RECOMMENDATIONS FOR SPECIFIC PROGRAMME AREAS

2.5.1 NETWORKING

- The AACs should be given a specific coordination role in child protection by assisting stakeholders to form thematic teams or clusters as per their operational areas through the AACs subcommittees so that the DCO’s annual work plan and the stakeholders’ plan of actions may be harmonized and become complementary. The DCO office should facilitate this working partnership.
The DCO’s office to hold more consultative forums with the Provincial Administration (chiefs and ass. chiefs) under the leadership and organization of the District Commissioners to underscore the importance of administrative leadership from the Provincial Administration on child protection, especially in relation to rescue and LAACs.

The DCO’s office to spearhead mobilization of resources by stakeholders to be involved and to support activities that have a financial implication like

- the VCO’s monthly meeting;
- training for capacity building (e.g. LAACs), and
- Children Charitable Institutions for cases referral.

Stakeholders mapping in DCOs offices needs to be continuously updated through VCOs assisted by LAACs.

The DCO offices need to formalize collaboration with local stakeholders to provide for specific services such as medical and legal assistance, temporary shelter, and counselling.

### 2.5.2 VOLUNTEER CHILDREN OFFICERS

- DCOs to take charge of closely supervising, monitoring and coordinating VCOs in their District by systematically holding monthly coordination and planning meetings with them at their offices.

- The VCOs code of conduct to be enforced: e.g. the DCO office to summon and streamline the conduct of self-directed VCOs to develop proper compliance of their role and operational limits. Suspend and recommend for dismissal VCOs who do not comply with their code of conduct.

- VCOs to systematically report and provide documentation on their activities to their DCOs of reference.

- To adopt the VCOs Organizational Structure tested by the project. Being a workable methodology, it may greatly impact the VCOs system nationally.

- Additional training to be provided to VCOs on critical issues such leadership, resource management and documentation.

- VCOs expenses met in the implementation of these and other duties need to be budgeted for and regularly provided.
2.5.3 AREA ADVISORY COUNCILS

- The DCO office to meet with the District and Location AACs and share the priorities of their respective work plans so to harmonize them. This will also enhance coordination of AAC activities by the DCO, since the AAC work plans will be reflecting the NCCS targets and thus become a feeder to DCO’s work plan.

- The DCO’s office to meet quarterly with the District and Location AACs for effective planning, coordination and evaluation. Operational meetings to be held any time according to the needs, in particular by AAC subcommittees. The DCOs to clarify with AACs the office availability to avoid unrealistic expectations.

- The DCO’s office to focus on LAACs Internal Leadership, Communication Structure, Planning and Follow up of Activities, and Group Cohesion (Team Building, Trust and Reporting Format).

- The DCO to promote strong linkages between District AAC and LAACs by establishing and training AAC sub-committees able to oversee all LAACs and with the role of providing capacity building, operation monitoring and evaluation.

- the DCO to maintain the engagement of the DC or DO to bring on board chiefs and their assistants in relation to AACs.

2.5.4 REINTEGRATION AND AFTERCARE

- The DCS through the Institutional and Field Services Divisions needs to enforce official laid down procedures to link the institutions with the field services and enhance sustainability of the project reintegration and after care programmes.

- The DCS to spearhead reintegration of institutionalised children as much as possible through their respective District Children Officer’s office, as a minimum standard reintegration procedure.

- The NRB PDCS to strengthen the reporting capacity of Children Officers to the NRB Children’s Court.

- The NRB PDCS to ensure that the C.O. attending the Children Court is present at the weekly case conference in statutory institutions for appropriate reporting on cases to Court.

- The DCS, NRB PDCS and Institutions Managers to properly guide stakeholders willing to engage in reintegration activities from Government statutory institutions by referring them to best practices acquired during this project.

- All DCOs offices should have a reintegration and aftercare team with full involvement of VCOs to support for related activities.
- Clear communication channels to be set between DCOs and statutory institutions for documentation flow (e.g. EAR, case record sheets, etc.).

- The DCS and the NRB PDCS to strengthen the reintegration process by the Field Services Division by providing clear guidelines and streamline its coordination between Institutional and Field Services.

- The coordination of aftercare services by the DCO’s office to be structured and documented in collaboration with VCOs and LAACs to become part of the office routine work. The development of a simple reporting tool such as a summary chart could be enough.

- Inclusion of the Provincial Administration through village elders in the reintegration process and general child protection: tracing, placement and follow up.

2.5.5 NAIROBI CHILDREN’S COURT

- Children Court magistrates to visit the Nairobi Children Remand Home and the Nairobi Children Rescue Centre for familiarization.

- To have children’s mentions done at the above Institutions rather than in Court (see Rift Valley experience).

- Children Court magistrates to be made aware of the reintegration protocol set by the Department of Children Services for children to be reintegrated in Nairobi Province.

- Due to the nature of cases present in the above institutions, to enforce a reintegration system that allows all institutionalised children to be repatriated through their respective District Children Officer’s office as a minimum standard repatriation procedure. Children being picked from Court or from Institutions with no preparation and aftercare provision should be avoided.

- To support the creation in Nairobi Province of Child Protection Committees (see Nakuru experience) at Court level to enable the Judiciary to improve its effectiveness on children’s cases and to respond appropriately.

2.5.6 RESCUE

- The NCCS to provide clear policy on rescue procedure and the DCS to identify workable guidelines on rescue activities to ease the child rescue efforts by the DCO’s offices.

- Coordination of rescue services by various stakeholders (Police, Provincial Administration, VCOs, etc.) to be fully provided by the DCOs to be the focal office for any rescue exercise done within their district.

- VCOs to collaborate with community members (LAACs members) when doing actual rescue.
### General Guidelines
- VCOs shall be expected to engage in activities as assigned by DCO Office such as doing rescue operation, home visits, attending meetings, workshops, Court, writing reports, etc.
- VCO Services shall be provided free of charge since the VCO position does NOT have monthly salary or any other allowances payable either by the Central Government or the Department of Children's Services
- VCOs are NOT to operate on 8 working hours schedule
- Any activities in Official VCO Capacity outside the location shall have to be authorized by the DCO Office
- VCOs shall NOT use any DCO Office or GOK Official Stationery unless expressly authorized to do so.
- VCOs shall NOT act as "Unofficial Assistants" in Chief or Assistant Chief Offices since they directly operate under their DCO of reference
- In any given situation VCOs shall abide to their Code of Conduct
- VCOs dismissal shall be granted through an official notice letter by the DCO Office for any serious misconduct in performing their duties or for any given unlawful behaviors they may incur.

### Objective Area

<table>
<thead>
<tr>
<th>LOCATIONAL COMMUNITY</th>
<th>DCO OFFICE</th>
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<tbody>
<tr>
<td><strong>Daily Presence</strong></td>
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<tr>
<td>A VCO shall be expected to be present at the VCO desk in the Chief’s Office for a few hours per day. The VCO will operate exclusively in regard of children’s issues; hence, the reference person remains the DCO.</td>
<td>VCOs presence at DCO office shall be informed by specific planning Coordinated by the DCO office, but not on daily basis</td>
</tr>
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</table>
| VCOs shall serve as the Focal Person for the LAAC members in Case of Interventions. VCOs shall advise but NOT handle the following cases:-
  - Maintenance
  - Custody
  - Adoption
  - Guardianship
  - Access
  They shall NOT engage in
  - Reintegration outside their location
  - Activities not planned with the DCOs office: e.g. Self Initiated Home Visits
  - The VCO Case Intervention shall be Needs Based and informed by the Each case’s circumstances | VCOs shall work in reference to the DCO’s office in all cases.
  - In some situations VCOs shall be requested to assist in Case interventions by the DCO Office
  - VCOs shall be requested to assist the DCO in Case Documentation |
| **Intervention in Cases** |            |
| VCOs shall be Members of the DCOs Reintegration and After Care Team.
  Reintegration shall be done as per the laid down Reintegration Protocol/Procedures.
  In particular, VCOs shall be involved in Tracing, Preparation and participation at the Family Conference, Assist in writing EAR and Follow up reports.
  VCOs shall undertake After Care activities as per the Child Risk Levels.
  VCOs shall network with stakeholders to support the child’s Reintegration. | VCOs shall be involved in reintegration procedures under the guidance of the DCO Office as per the laid regulations |
| **Reintegration** |            |
| VCO shall be the Secretary of the local LAAC by undertaking all secretarial duties attached to the position.
  VCO shall support the LAAC leadership held by the Chief or Assistant Chief.
  VCO shall undertake compilation and presentation of LAAC Periodic reports using tools and forums provided. | VCOs shall provide the DCO with periodic reports on activities done
  - VCOs shall be the Link between the DCO Office and the LAAC |
| **LAAC** |            |
| All Rescue Cases shall be Promptly Reported to the DCO Office under these Criteria:-
  - Weekdays (Working Day) not later than 24 Hours
  - Weekends - Earliest Working Day
  - In Life Threatening Situations: contact any of the Officers in DCO office.
  Interventions shall be as per the laid down Rescue Protocol/Procedures | In some situations VCOs shall be requested to assist in rescue operations by the DCO Office
  - VCOs shall at times be requested to assist in Rescue Case Documentation |
<table>
<thead>
<tr>
<th>DOCUMENTATION</th>
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<tbody>
<tr>
<td>- All interventions shall be reported to the DCO office using the provided tools and forms.</td>
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<tr>
<td>The followings are the VCOs documentation duties:</td>
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<tr>
<td>- VCOs interventions shall be entered in the Registry Book.</td>
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<tr>
<td>- VCOs shall provide monthly returns of the Register Book before 5th of every month.</td>
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<td>- VCOs shall regularly update Reintegration and After Care Files in DCO Offices.</td>
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<tr>
<td>- All children cases dealt by the VCOs shall be entered into the VCO Case Record Sheet, which will be handed over to the DCO by the 25 of the month.</td>
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<tr>
<td>- VCOs will assist in collection of Data to map identified Stakeholders in their location.</td>
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**ANNEX II: VCOs CASE RECORD SHEET**

**MINISTRY OF GENDER, CHILDREN AND SOCIAL DEVELOPMENT**  
**DISTRICT CHILDREN OFFICE - EMBAKASI**

<table>
<thead>
<tr>
<th>VCO CASE RECORD SHEET</th>
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<tbody>
<tr>
<td><strong>CATEGORY OF CASE:</strong></td>
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<tr>
<td><strong>DATE:</strong></td>
</tr>
<tr>
<td><strong>DCO OFFICE CASE REGISTER NO.</strong> (IF APPLICABLE)</td>
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<table>
<thead>
<tr>
<th>PERSONAL DETAILS OF THE CHILD</th>
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<tr>
<td><strong>NAME OF CHILD</strong></td>
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<tr>
<th>SCHOOL DETAILS</th>
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<tr>
<td><strong>NAME OF SCHOOL</strong></td>
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<thead>
<tr>
<th>PARENTS / GUARDIAN PARTICULARS</th>
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<tbody>
<tr>
<td><strong>NAME OF FATHER</strong></td>
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<td>---------------------</td>
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<tr>
<td><strong>NAME OF MOTHER</strong></td>
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<thead>
<tr>
<th>CONTACT PERSON(S) DETAILS (This can an Individual(s)/Community Organization who is Involved in the Case)</th>
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<tbody>
<tr>
<td><strong>NAME</strong></td>
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<table>
<thead>
<tr>
<th>OTHER SIBLINGS DETAILS</th>
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<tbody>
<tr>
<td><strong>NAME OF CHILD</strong></td>
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<table>
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<tr>
<th>CASE REFERRED BY - SOURCE OF INFORMATION</th>
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<tr>
<td><strong>NAME</strong></td>
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<tr>
<th>NEEDS OF THE CHILD</th>
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<tbody>
<tr>
<td>CASE HISTORY (Include also the Family Background - State Whether Separated, Widowed, Single Parent, and Family Economic Status)</td>
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<tr>
<th>RISKS OF THE CHILD</th>
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<tr>
<td>CASE HISTORY (Include also the Family Background - State Whether Separated, Widowed, Single Parent, and Family Economic Status)</td>
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<tr>
<th>RECOMMENDATIONS (BASED ON SMART METHODOLOGY)</th>
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<tr>
<th>MODE OF CASE DISPOSAL (STATE HOW CASE WAS DISCHARGED, TERMINATED OR CLOSED)</th>
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<table>
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<tr>
<th>REFERRAL (IF APPLICABLE)</th>
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</thead>
<tbody>
<tr>
<td><strong>DCO OFFICE</strong> (NAME OF OFFICER WHO RECEIVED CASE)</td>
</tr>
<tr>
<td><strong>NAME OF SERVICE PROVIDER IN THE COMMUNITY TO WHOM REFERRAL IS MADE</strong></td>
</tr>
<tr>
<td><strong>CONTACT</strong></td>
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<tr>
<th>PREPARED BY:</th>
<th><strong>DATE:</strong></th>
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<tr>
<td>LOCATION:</td>
<td><strong>CONTACT:</strong></td>
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ANNEX III: ENVIRONMENTAL ADJUSTMENT REPORT

<table>
<thead>
<tr>
<th>Case N. ..........</th>
<th>Name of the Institution (where the child currently resides)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of the Child: ......................................</td>
<td>Name of Institution’s Manager: ..................................</td>
</tr>
<tr>
<td>Date of Birth ............... M ( ) F ( )</td>
<td>Tel. contact:</td>
</tr>
<tr>
<td>Name of Institution (where the child currently resides)</td>
<td></td>
</tr>
<tr>
<td>Name of Institution’s Manager: ..................................</td>
<td></td>
</tr>
<tr>
<td>Tel. contact:</td>
<td></td>
</tr>
<tr>
<td>Committal Date in the Institution / /</td>
<td></td>
</tr>
<tr>
<td>Expiration Date of Committal / /</td>
<td></td>
</tr>
<tr>
<td>Area where the child is to be reintegrated</td>
<td>Name of officer in charge of the reintegration process:</td>
</tr>
<tr>
<td>Province ...............District ...............</td>
<td>.................................................................</td>
</tr>
<tr>
<td>Division ...............Location ...............</td>
<td>Tel. contact:</td>
</tr>
<tr>
<td>Village .........................</td>
<td></td>
</tr>
</tbody>
</table>

(1) Parents/Guardians to whom the child is to be Released

<table>
<thead>
<tr>
<th>Name</th>
<th>Relation to the child</th>
<th>Age</th>
<th>ID Number</th>
<th>Tel. contact</th>
<th>Place of residence</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(2) Whether or Not the Family/Guardians is Ready to Accept the child

a. Very keen to Accept ( )  
   b. Ready to accept ( )  
   c. Not Ready to Accept, but There is a Possibility to Accept ( )  
   d. Refuse to Accept ( )

Reasons:

(3) Whether or not the Parents/Guardians are Ready to visit the Institution to prepare for reintegration

a. Ready to visit ( )  
   b. Not ready to visit ( )  
   c. pending ( )

Reasons for b) or c)

(4) Family History

(5) Current family conditions, relationships, attitudes (e.g. marital status; relationships among caregivers, between caregivers and the child, between child and siblings, within the extended family; presence of family secrets, willingness to care for the child...)

(6) Means of Livelihood (kind of job, monthly income, resources available...)
(7) House Conditions (presence of basic facilities, size, physical status, hygiene...),

Relevant Information about Family/Guardians/Other Relatives

Are the following risk factors/problems found among them? Parent criminal activity/incarceration ( ) Domestic violence ( ) Marital conflict ( ) Prostitution ( ) Alcohol/drug addiction ( ) Neglect/ failure to protect ( ) Inconsistency in discipline ( ) Violent punitive discipline ( ) Inadequate acceptance of child ( ) Inadequate caretaker’s perception of the child’s needs ( ) Blaming of the child and refusal to accept identified family needs ( ) Refusal of parental responsibility ( ) History of abuse: (specify) emotional ( ) physical ( ) sexual ( ) Others .........................

Specify the person/people names having the above problems, their relationship with the child, other information.

Child’s life History & child’s peer relationship before being committed to the Institution

Motivation/Causes of child’s difficult behavior or delinquency (if applicable)

Prospect to Education or Employment once reintegrated

Community Environment

Community Feelings about the Child/Family

Community resources available to respond to the child’s needs after release (by NGOs, FBOs, CBOs,...)

Name of the organization:

Service to be provided............................................Contact person: Name tel.:

Compensation to Victims/Victim’s of the Child’s criminal behavior (if applicable)

<table>
<thead>
<tr>
<th>Name of an appropriate contact person</th>
<th>Relation to the child</th>
<th>Age</th>
<th>ID Number</th>
<th>Tel. contact</th>
<th>Place of residence</th>
<th>Reason why the person is appropriate</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Other Relevant Information

Remarks of Investigator
(1) Whether or not Environmental Adjustment is Completed?  a. Completed (  )  b. Under Process (  )  c. Undoable (  )

(2) Other Remarks :

(3 ) How often was home visit carried out to prepare this report? (n. of home visits):

FINAL REMARKS
(1) What family risk factors/problems should be dealt with for environmental adjustment?

(2) What adjustment practices have been done to fix the risk factors/problems?

(3) What problems remain to be solved? What is the needed course of actions? How long do you estimate it will take to accomplish the adjustment?

(4) Will a Family Conference for reintegration be held?                Yes ( )         No ( )

Location of the family conference .................date (to be agreed with the child’s family and the institution management)...........

Name and position of Investigator  .................................................................

Tel. contact .........................  SIGNATURE  .................................. DATE...........
CHILDREN’S RIGHTS SURVEY AT THE NAIROBI CHILDREN REMAND HOME  
JUNE- AUGUST 2006

QUESTIONNAIRE FINDINGS SUMMARY

The questionnaire has been subdivided according the four major children rights found in the UN Charter on the Right of the Child (1989): right to development, participation, survival and protection. The final part includes a list of specific needs identified by the children.

Collection of data was done through focus groups of children (7-17yrs old) subdivided by age and gender who had been admitted at the Nairobi Children Remand Home.

<table>
<thead>
<tr>
<th>DEVELOPMENTAL RIGHT</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think about the NCRH?</td>
<td>an alternative home/ a substitute home for children.</td>
</tr>
<tr>
<td>-a place for children awaiting judgment. E.g. those who have stolen.</td>
<td>-a place for correcting children who have done wrong.</td>
</tr>
<tr>
<td>-a place where children are taken care of and disciplined.</td>
<td>-it is a jail that is more like a home.</td>
</tr>
<tr>
<td>-a safety custody for children awaiting repatriation, tracing and reintegration</td>
<td>-there is no freedom of speaking with the opposite sex since other children report to the management.</td>
</tr>
<tr>
<td>-a place where lost and found children and bad behaved children are kept</td>
<td>-it is a place where orphans and small children are kept before taking them home.</td>
</tr>
<tr>
<td>-a place for children with capital offence.</td>
<td>-a place where children with petty cases are kept.</td>
</tr>
<tr>
<td>-an option for cells.</td>
<td>-it is like a home, but I am not allowed to visit my home.</td>
</tr>
<tr>
<td>-a children’s jail.</td>
<td>-a remand for children awaiting Court’s ruling.</td>
</tr>
<tr>
<td>-a place where children who are lost and found are assisted.</td>
<td>-a place where children in conflict with law are kept.</td>
</tr>
<tr>
<td>-a place for behavior change</td>
<td>-a place for children and thieves.</td>
</tr>
<tr>
<td>-a restricted place where children are not allowed to loiter around.</td>
<td></td>
</tr>
<tr>
<td>-a school for children who refuse school at home; they come here to go to school.</td>
<td></td>
</tr>
<tr>
<td>-a place where children eat and sleep well until they go back home.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What do you think about educational activities in the NCRH?</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic</td>
<td>there are no sufficient exercise books.</td>
</tr>
<tr>
<td>-we have opportunity to read story books.</td>
<td>-it is not applicable because this is a temporary place for children.</td>
</tr>
<tr>
<td>-There are few teachers and children are mixed in one class regardless of their age and class, including those who never went to school.</td>
<td>-we have other responsibilities which keep us off from studies.</td>
</tr>
<tr>
<td>-poor, since all children are put together in one class and taught as of the same level.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Recreational</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>-maintenance of sports facilities is poor.</td>
<td>-the big boys do not allow the small boys play football, so we end up walking around as they play.</td>
</tr>
<tr>
<td>-we have some old playing cards in the dormitory.</td>
<td></td>
</tr>
<tr>
<td>-the big boys switch on provocative music channels in</td>
<td></td>
</tr>
</tbody>
</table>
the evenings.
- football game is enjoyable.
- Saturday's and Sunday's we watch movies. We do not watch the daily educative programmes which come past 7:00 p.m. because we are locked in early.
- when big girls switch on stomp and other songs to relax, the small girls report us for watching obscene music.

- Insufficient game equipment for the evenings.
- the big girls put on the dirty T.V music and prefer T.V more than the creative games.
- girls play only once a week for one hour only, while boys play everyday of the week. Girls are added if the team is not enough.

<table>
<thead>
<tr>
<th>How is the relationship between you and staff working at the NCRH?</th>
</tr>
</thead>
<tbody>
<tr>
<td>- there is no personal relationship but only working relationship when we are told to work (chopping firewood, cleaning or cooking) or go to class.</td>
</tr>
<tr>
<td>- relationship depends on the child’s behavior.</td>
</tr>
<tr>
<td>- it is good since they teach us good things e.g. cleaning, learning, washing clothes.</td>
</tr>
<tr>
<td>- they teach us not to use abusive language or fighting.</td>
</tr>
<tr>
<td>- they are good since they protect us, they shield us.</td>
</tr>
<tr>
<td>- they provide us with tooth paste, slippers and clothes.</td>
</tr>
<tr>
<td>- we are helped in preparing food, so they are good.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>How is the relationship between you and staff working at the NCRH?</th>
</tr>
</thead>
<tbody>
<tr>
<td>- our relationship is both good and bad, because teachers are lenient while others beat us and tell us to work well without showing us how to do it especially in the morning.</td>
</tr>
<tr>
<td>- we fear some of them because they are rude, so we keep our problems, and choose who to talk to since some of them are kind and approachable.</td>
</tr>
<tr>
<td>- some misconceive us; they see us talk to boys and label us.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHILD PARTICIPATION RIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>At admission how were you introduced to the life of the NCRH?</td>
</tr>
<tr>
<td>- I was asked my name, my type of case, where I come from, X (a child at the remand) was called to give me uniform, and then I joined the rest in the dining hall.</td>
</tr>
<tr>
<td>- I was told this is a remand and not a school.</td>
</tr>
<tr>
<td>- I was told to read the rules by other boys and told not to “Kaushia walimu” bring trouble to teachers.</td>
</tr>
<tr>
<td>- I was told to take shower, and wait until morning to have porridge, and then I was introduced by morning daily routine.</td>
</tr>
<tr>
<td>- One of the teachers told me that I need to be taken to Industrial Area.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHILD PARTICIPATION RIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you feel like your life story is listened to?</td>
</tr>
<tr>
<td>- I was told by the teacher that I will be taken back home</td>
</tr>
<tr>
<td>- I was told that this is not a school, but a children’s jail; here children help one another and there should be no fighting.</td>
</tr>
<tr>
<td>- I was introduced by a leader who told me not to fight not to use abusive language, to have respect and to be clean.</td>
</tr>
<tr>
<td>- I was told by other boys that this is a school.</td>
</tr>
<tr>
<td>- behave well to live well</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHILD PARTICIPATION RIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you feel like your life story is listened to?</td>
</tr>
<tr>
<td>- yes, I have hopes that one day I shall be taken home.</td>
</tr>
<tr>
<td>- Yes, because I was told that my issues shall be discussed with my parents.</td>
</tr>
<tr>
<td>Yes, I had given up hope and was sad but I was told I shall be taken home.</td>
</tr>
<tr>
<td>- Yes, we are helped to remain calm awaiting repatriation</td>
</tr>
<tr>
<td>- when am wronged and I report am listened to and action is taken.</td>
</tr>
<tr>
<td>- Yes, when we are sick we are freed from duties and</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHILD PARTICIPATION RIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you feel like your life story is listened to?</td>
</tr>
<tr>
<td>- some listen while some do not. Those who listen allow us to call home, while others tell us they did not bring us here.</td>
</tr>
<tr>
<td>- some do not understand me, when I am sick I am forced to dig or do other duties.</td>
</tr>
<tr>
<td>- No, we have many duties to attend to hence no time to talk and be listened.</td>
</tr>
<tr>
<td>- No, sometimes our stories are not listened to because even after saying our truth no action is taken.</td>
</tr>
</tbody>
</table>

69
asked to wait for the Doctor.

**According to you, are the staffs aware of your needs?**

| Yes, since our basic needs are met (several children repeated the same statement) | -No, since when I came I was told that slippers are only for girls. |
| Yes, since we are allowed freedom in playing games and watching T.V. | -No, there are some teachers who do not understand when I do not know a way to do things. So they slap us. |
| There is one madam who beats us when we express our needs; the rest listen and provide what we need. Yes, we are taught what is good and right. We are not beaten unless we have done something wrong. Yes, one madam told me not to worry about anything and to ask for anything I need including medicine. | -the leaders we have in the dormitory do not give us oil for the face, but no teacher is ready to listen to our complaints. |

**Do you feel like your religious beliefs are well addressed?**

| Yes, we pray every day. At home we go to church on Sunday only. Yes, as a Christian I am happy with what is offered. | -Yes, we have pastors and priests from time to time visiting including Sundays. |
| -As Muslims we are not given an opportunity to pray in our own place of worship. |

**How have you been involved in the NCRH activities?**

| -cooking for the children | -bathing spreading the bed. |
| -cleaning the veranda | -cleaning the sewerage and if one refuses is beaten by the teacher. |
| -cutting firewood (chopping) | -washing utensils in shifts. |
| -slashing | -I have been ready to participate in any activity whenever asked to by any teacher. |
| -fetching water | -cleaning the washrooms and toilets |
| -playing | -sweeping the compound |
| -cultivating | -soughing maize and beans for cooking. |
| -cleaning the dining | -washing our clothes |
| -weeding | -feeding the rabbits |
| -weeding the garden | -feeding and carrying maize stocks for the cow |
| -weeding the garden | -while I am free I get into the class and read books. |
| -weeding the garden | -by participating in recreational activities like watching TV. |

**SURVIVAL RIGHT**

**How is your health and hygiene taken care of?**

<p>| -it is good because there is a nurse around to treat us. - disinfectant for the toilet is provided - bathing soaps are provided - we eat well, we do not get sick - we are able to wash our clothes - we clean the dormitory - we brush our teeth. - we use clean utensils | -we are treated when sick, our names are written on the sick book before receiving treatment. - it is good to be provided with antiseptic soap since there are people with skin conditions and they can infect others -some children use tooth brushes to brush their hair. - there are no enough tissues paper for toilet use - we need gloves to clean toilets to avoid diseases though we have soap to clean. |</p>
<table>
<thead>
<tr>
<th>How is your clothing?</th>
<th>How are your meals?</th>
</tr>
</thead>
</table>
| - we are provided with slippers, tooth brushes and utensils  
- only new comers are given pants, it does not matter how long one has to live here; one has to ask for another one when the other one is torn.  
- we need more under wears, because here you have to use one underwear until it tears.  
- some uniform have no buttons, some are torn while others are oversize to fit. | - the food is good since the staff oversee the cooking  
- the food is balanced i.e. one day we eat ndengu while on other days we have beans. I eat and get satisfied  
- big boys at the kitchen are tricky and serve us with the not well cooked food while they eat the well cooked one.  
- children who are allergic to beans have no alternative because such cases are not taken care of  
- we would like to eat chicken and chapatti once in a while.  
- it is good for small children be directed to clean hands before meals  
- the porridge is too diluted; sometimes it does not have enough sugar. |

<table>
<thead>
<tr>
<th>What can you say about the infrastructures available to you at the NCRH?</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Dormitory?</td>
<td>Toilet?</td>
</tr>
</tbody>
</table>
| - there are sufficient beds and beddings, however, there are no mosquito nets, we are bitten by mosquitoes.  
- we have blankets  
- those who wet the bed sleep 2 in one bed so that they do not wet all the mattresses.  
- when the lights go off some girls beat others, pinch others and use dirty language.  
- the dormitory is small since when we are many we sleep even three in one bed.  
- mixing big girls with small girls is not good since some big girls introduce lesbianism to the small ones. | - the water comes only in the morning, so even if there was water, they would not flash.  
- when the water finishes the toilets are dirty  
- they are decorated with feaces.  
- toilet paper is not enough. We are given five pieces in a roll once a week.  
- there is need to buy different brooms and brushes for the toilets since we use the same brooms for the Kitchen and drainage near the sink. |
| Kitchen? | Dining hall? |
| - it is tiny, it needs expansion  
- the fellow boys are good cooks but hide food.  
- the drinking water is not clean since the drums are not covered  
- the water is not boiled and we can get water-born diseases. | - there is improvement since now we eat on the table while initially we did it on the floor.  
- we are supposed to eat in the dining but we eat under the shelter outside the dining.  
- it is a good place since the tables and floor are cleaned after meals. |

<table>
<thead>
<tr>
<th>PROTECTION RIGHT</th>
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</thead>
<tbody>
<tr>
<td>Do you feel like you are treated equally?</td>
</tr>
</tbody>
</table>
| - teachers treat us equally without discrimination  
- work allocation is balanced between girls and boys.  
- the uniform makes us equal  
- the health clinic treats us equal | - No, some are given extra items e.g tissue papers and soap  
- No, since the girls are provided with mosquito nets while we are not  
- No, the girls dormitory have curtains while ours don’t.  
- No, at times the boys are served with two mugs of |
the dormitories are well maintained for boys and girls.
- the food we eat is the same for everybody
- bathing water is the same for everyone
- we get the same treatment e.g. watching T.V and playing together

<table>
<thead>
<tr>
<th>How has the Court responded to your cases?</th>
</tr>
</thead>
<tbody>
<tr>
<td>- they respond well since they release children to go back home.</td>
</tr>
<tr>
<td>- I was happy because they gave me the repatriation order</td>
</tr>
<tr>
<td>- at Children’s Court, magistrate always listens to us and responds appropriately</td>
</tr>
<tr>
<td>- there is delay of hearing children cases</td>
</tr>
<tr>
<td>- the judge looked serious and scary, but the second time I went she looked friendly.</td>
</tr>
<tr>
<td>- treatment we get in court is good because we are provided with tea by an NGO, however, no lunch is offered.</td>
</tr>
</tbody>
</table>

| - the Court does not recognize the children’s act, since the act states that if a child has no capital offence should not take more than three months, but some cases take more than six months. |
| - we are thrown from one place to the other. We are told that the lawyer is sick, has broken his legs, is in another court room or is two months pregnant; |
| - the government lawyers are not serious about children issues and one cannot fight with the government. |
| - sometimes we are put to wait for so long for the bus to bring us back after our cases. |
| - Not well, because they have kept on pushing on the dates of our cases whenever there is no complainant. |
| - Not well, child offenders are put together with adults and all receive same judgment |

<table>
<thead>
<tr>
<th>About your security, do you feel protected at the NCRH?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual abuse?</td>
</tr>
<tr>
<td>- big boys and girls who caress each other in front of us teach us bad things about sex</td>
</tr>
<tr>
<td>- dormitories are separated so there is no occasion to mix up with boys even though there are some girls with boy friends.</td>
</tr>
<tr>
<td>- partners raise awareness on abstinence at remand</td>
</tr>
<tr>
<td>- counseling sessions raise awareness</td>
</tr>
<tr>
<td>- separate dormitories help.</td>
</tr>
<tr>
<td>- nobody is allowed to relate with the opposite sex</td>
</tr>
<tr>
<td>- there have been cases of sodomy by bigger boys with smaller ones</td>
</tr>
<tr>
<td>- there is some lesbianism</td>
</tr>
<tr>
<td>we live in peace like siblings</td>
</tr>
<tr>
<td>- there are some boys who like fighting others.</td>
</tr>
<tr>
<td>- I was beaten by a girl because I refused to share my food portion during lunch and supper</td>
</tr>
<tr>
<td>- I was beaten by the staff because I forgot the pullover before I could explain myself</td>
</tr>
<tr>
<td>- abusive language is not allowed because it could lead to fight between the children</td>
</tr>
<tr>
<td>- the leader of the Dormitory do not change duties, but we do not say anything because he might change his attitude towards us hence, we may be beaten by the teacher to a point of having marks on the body.</td>
</tr>
<tr>
<td>- the first day I came I was physically abused by another girl who threatened me.</td>
</tr>
<tr>
<td>- any abuse will depend with how one behaves.</td>
</tr>
<tr>
<td>- there is no security from the dormitory prefects who keep on violating other children’s rights e.g. tissues and soaps are not equally provided (five pieces of tissue and one shared soap per dorm)</td>
</tr>
</tbody>
</table>
## Children Needs at the NCRH

### General Response

Needs are listed in order of priority

1. Medical clinic should be operational throughout the day; it should also be equipped with specialized machine.
2. Mosquito nets to be provided.
3. T.V. in the dormitory or Radio to follow the news update should be provided.
4. Mwiko/ cooking stick should be provided in the Kitchen.
5. Gumboots for going to the shamba.
6. Toilet for the teachers.
7. Swings.
8. More classes.
9. Suitable academic programmes be provided.
10. Pad to be increased from one packet for two to one packet for one person.
11. Breakfast to be changed e.g. from porridge to tea.
12. Mattresses and beds to be changed e.g. provide new ones.
13. Drinking water to be treated or boiled.
14. Soap to be given one piece per person.

### Specific Response

<table>
<thead>
<tr>
<th>BOYS</th>
<th>GIRLS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Indoor games for evening activities in the dormitory should be provided.</td>
<td>1. Courses to be provided e.g. computer classes, dress making etc.</td>
</tr>
<tr>
<td>2. Flushing toilets.</td>
<td>2. The remand Kitchen should have enough water supply, with direct pipes from the water tank connected to it.</td>
</tr>
<tr>
<td>3. Extend the compound.</td>
<td>3. Tissue papers should be increased from five pieces per week to fifteen pieces per day.</td>
</tr>
<tr>
<td>4. Add more workers/teachers (they have heavy work load).</td>
<td>4. Pants to be increased from one to two per person.</td>
</tr>
<tr>
<td>5. Hand gloves to be provided for washing the toilets.</td>
<td>5. Hand gloves to be provided for washing the toilets.</td>
</tr>
</tbody>
</table>

### What do you miss at the NCRH?

- Our siblings other family members and friends.
- Eating special food stuff eg chicken, chips, chapati and fruits.
- To be out of the remand to “Kenya”
- Going to school and education.

- Freedom in general.
- Night prayers.
- CD player and music.
- Watching T.V at night.
**What would you change at the NCRH if you were in the management position today?**

<table>
<thead>
<tr>
<th>Changes Suggested</th>
<th>Changes Suggested</th>
</tr>
</thead>
<tbody>
<tr>
<td>-I would have the staff to work a full day shift each.</td>
<td>-I would provide children with new mattresses</td>
</tr>
<tr>
<td>-I would employ staff whose precise work would be counseling children according to their cases</td>
<td>-I would increase the number of teachers</td>
</tr>
<tr>
<td>-I would be neutral. I would not give preference to the girls, since the boys are blamed more.</td>
<td>-I would get some moment/time to talk to children</td>
</tr>
<tr>
<td>-follow the timetable strictly.</td>
<td>-I would give new clothes to children when they are reintegrated to their homes</td>
</tr>
<tr>
<td>-I would put things in order e.g. the swings</td>
<td>-I would repair the broken windows</td>
</tr>
<tr>
<td>-I would repair the benches and add more</td>
<td>-I would repair bathrooms to have showers</td>
</tr>
<tr>
<td>-I would repair the T.V. since you have to hit it to have some sound come from it.</td>
<td>-I would treat people equally</td>
</tr>
<tr>
<td>-I would trace the children’s home</td>
<td>-children would be putting on socks and shoes</td>
</tr>
<tr>
<td>-I would change the children’s diet</td>
<td>-children would be putting on ordinary clothes.</td>
</tr>
<tr>
<td>-I would get someone to wash the children’s clothes and blankets</td>
<td>-I would allow the children to go to play on Saturdays and Sundays.</td>
</tr>
<tr>
<td>-I would provide children with mosquito nets.</td>
<td>-I would buy a coat, whistle and a spotlight for the watchman.</td>
</tr>
<tr>
<td>-I would take children for outings e.g. to the animal orphanage</td>
<td>-I would fix tournaments between the homes on monthly basis.</td>
</tr>
<tr>
<td>-I would repair the showers.</td>
<td>-I would repatriate the children</td>
</tr>
<tr>
<td>-I would be asking children what they would like to eat</td>
<td>-I would bring instruments for music for the children</td>
</tr>
<tr>
<td>-I would be asking the children about their well being</td>
<td>-I would repair the children’s toilets</td>
</tr>
<tr>
<td>-I would ask one of the staff to be closer to the children and teach them on behaviour</td>
<td>-I would get someone to clean the children’s dormitory</td>
</tr>
<tr>
<td>-I would improve the class rooms and let children visit their parents and be brought back</td>
<td>-I would advertise the children in conflict with law on T.V so that the cases may not be delayed</td>
</tr>
<tr>
<td>-I would equip the dormitories two blankets for each child</td>
<td>-I would bring a teacher to train children on computers</td>
</tr>
<tr>
<td>-I would buy to children tea and bread for breakfast</td>
<td>-I would reinforce follow up for children who are in conflict with law after they are released.</td>
</tr>
<tr>
<td>-I would pay attention on clothes cleanliness</td>
<td>-I would put drinking water in dormitories and in a safe place</td>
</tr>
<tr>
<td>-I would ensure that each child has more than one pant and pullover</td>
<td>-I would buy T-shirts for children</td>
</tr>
<tr>
<td>-I would buy soap for each child to prevent transmission of skin diseases</td>
<td>-I would buy new troughs in the wash room</td>
</tr>
<tr>
<td>-I would repair the dining windows</td>
<td>-I would repair the toilets flash</td>
</tr>
<tr>
<td>-I would separate the dining hall</td>
<td>-I would put speakers in the dormitory so that children have music throughout</td>
</tr>
<tr>
<td>-I would expand the internal compound and construct a high wall.</td>
<td>-I would change rule, No. 13 which says that every child must participate in all activities</td>
</tr>
<tr>
<td>-I would change rule, No. 13 which says that every child must participate in all activities</td>
<td>-I would buy sofa sets for children</td>
</tr>
<tr>
<td>-I would buy new troughs in the wash room</td>
<td>-the Kitchen to be cleaner</td>
</tr>
<tr>
<td>-the Kitchen to be cleaner</td>
<td>-I would change bed time from 6:30 p.m. to 7:30 p.m.</td>
</tr>
<tr>
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<td>-I would repair the children’s toilets</td>
</tr>
<tr>
<td>-I would repair the toilets flash</td>
<td>-children would be putting on socks and shoes</td>
</tr>
<tr>
<td>-I would reinforce follow up for children who are in conflict with law after they are released.</td>
<td>-children would be putting on ordinary clothes.</td>
</tr>
<tr>
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<td>-I would reinforce follow up for children who are in conflict with law after they are released.</td>
<td>-children would be putting on ordinary clothes.</td>
</tr>
</tbody>
</table>

**What is your feeling about partner NGOs involved in the activities at NCRH?**

<table>
<thead>
<tr>
<th>Feelings</th>
<th>Feelings</th>
</tr>
</thead>
<tbody>
<tr>
<td>-it is good since they helped in fixing the doors of the toilets, and the shade</td>
<td>-they are good, they teach us how to write play scripts</td>
</tr>
</tbody>
</table>
-in general they are good.
- involvement of the partners has facilitated on extracurricular activities.
- they have helped in the running of the dispensary
- they come together to share with children during special occasions
- they provide counseling to us
- they create awareness on social issues.
- some partners prepare birthday celebration, so partners are good.
- they facilitate recreational activities.
- partners educate children on good morals e.g. children should not watch dirty movies or engage in sex.
- partners help in bringing educative movies.

| -they remove our stress through counseling. |
| -they give us spiritual nourishment. |
| -they provide information on abstinence. |
| -they teach us not to engage in sex, not to be cheated by being offered mandazi. Etc. |
| -partners should help the children to visit their families, parents and other siblings, once in a while and especially those who do not know their whereabouts. |
| -they bring visitors who interact with us for a short while. |
| -they improve the well being of the children e.g. they provide slippers. |
## ANNEX V

### PROJECT QUANTITATIVE RESULTS FROM MAY 2005 TO DECEMBER 2010

#### QUANTITATIVE SUMMARY RESULTS MATRIX

<table>
<thead>
<tr>
<th>ACTIVITY RESULTS in Nairobi Children Remand Home, Dagoretti Rehabilitation School and Thika Children Rescue Centre</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Creation and strengthening of counselling section</strong></td>
<td></td>
</tr>
<tr>
<td>Nº of government staff actively operating in the counselling section (average)</td>
<td>12</td>
</tr>
<tr>
<td>Nº of individual counselling sessions provided</td>
<td>7,021</td>
</tr>
<tr>
<td>Nº of group counselling sessions provided</td>
<td>678</td>
</tr>
<tr>
<td>Nº of children who attended group counselling</td>
<td>17,278</td>
</tr>
<tr>
<td><strong>2. Creation and strengthening of education section</strong></td>
<td></td>
</tr>
<tr>
<td>Nº of government staff actively operating in the education section (average)</td>
<td>16</td>
</tr>
<tr>
<td>Nº of children who participated in educational activities</td>
<td>6,934</td>
</tr>
<tr>
<td>Nº of workshop/training for children</td>
<td>45</td>
</tr>
<tr>
<td>Nº of participants (average)</td>
<td>1,100</td>
</tr>
<tr>
<td>Nº of rehabilitation programme sessions for children</td>
<td>28</td>
</tr>
<tr>
<td>Nº of participants (DRS)</td>
<td>138</td>
</tr>
<tr>
<td>Peer education residential workshops</td>
<td>2</td>
</tr>
<tr>
<td>Nº of participants</td>
<td>50</td>
</tr>
<tr>
<td><strong>3. Creation and strengthening of reintegration section</strong></td>
<td></td>
</tr>
<tr>
<td>Nº of government staff actively operating in the reintegration section</td>
<td>15</td>
</tr>
<tr>
<td>Nº of traced families both upcountry and in Nairobi</td>
<td>674</td>
</tr>
<tr>
<td>Nº of children reintegrated with their parents/extended family</td>
<td>709</td>
</tr>
<tr>
<td>Nº of follow ups done</td>
<td>2,337</td>
</tr>
<tr>
<td><strong>4. Strengthening capacity of government staff</strong></td>
<td></td>
</tr>
<tr>
<td>Nº of specialised counselling training workshops for institutions staff</td>
<td>21</td>
</tr>
<tr>
<td>Nº of participants per workshop (average)</td>
<td>23</td>
</tr>
<tr>
<td>Nº of general counselling training workshop for institutions staff</td>
<td>27</td>
</tr>
<tr>
<td>Nº of participants per workshop (average)</td>
<td>25</td>
</tr>
<tr>
<td>Nº of supervision sessions for counsellors</td>
<td>27</td>
</tr>
<tr>
<td>Nº of participants per session (average)</td>
<td>13</td>
</tr>
<tr>
<td>Nº of educators’ training workshops for institutions staff</td>
<td>7</td>
</tr>
<tr>
<td>Nº of participants per workshop (average)</td>
<td>20</td>
</tr>
<tr>
<td>Nº of reintegration training for institution staff and children officers</td>
<td>12</td>
</tr>
<tr>
<td>Nº of participants</td>
<td>135</td>
</tr>
<tr>
<td>Nº of team building workshops for staff</td>
<td>15</td>
</tr>
<tr>
<td>Nº of participants (average per institution)</td>
<td>35</td>
</tr>
<tr>
<td>Nº of rehabilitation programme training workshops for institutions staff</td>
<td>3</td>
</tr>
<tr>
<td>Nº of participants per workshop (average)</td>
<td>22</td>
</tr>
<tr>
<td>Nº of training for DCS staff</td>
<td>7</td>
</tr>
<tr>
<td>Nº of participants</td>
<td>128</td>
</tr>
<tr>
<td>Nº of training for school teachers on psychosocial support to OVCs</td>
<td>30</td>
</tr>
<tr>
<td>Nº of participants</td>
<td>763</td>
</tr>
<tr>
<td>Nº of training for school parents</td>
<td>14</td>
</tr>
<tr>
<td>Nº of participants</td>
<td>634</td>
</tr>
</tbody>
</table>

### MAJOR EDUCATIONAL ACTIVITIES IN INSTITUTIONS

- Exchange programs with University students, Religious institutions, neighbouring and partner organizations
Children outings to National Parks, partner organizations and institutions
Celebrations of the Day of the African Child
Awareness workshops on issues related to child development, abuse and trafficking, first aid, hygiene, behaviour change, child rights and responsibility, etc.
Quarterly stakeholders meetings to plan for activities
Educational tours (Nairobi International Show, Meteorological Department, Wilson Airport….)
Talent shows, Music talent exploration, sport and prize giving days
Psychosocial activities: football, party games, basketball, etc.
Agriculture activities: agro-forestry, farming, rearing of animals e.g. cow, dogs and rabbits
Peer educators’ activities

<table>
<thead>
<tr>
<th>ACTIVITY RESULTS IN THE FIELD PROGRAMME</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Strengthening the capacity of DCO’s offices</td>
<td></td>
</tr>
<tr>
<td>N° of coordination meetings held monthly with DCO’s in the districts</td>
<td>22</td>
</tr>
<tr>
<td>N° of VCO Monthly coordination meetings held with DCO’s in the districts</td>
<td>12</td>
</tr>
<tr>
<td>N° of VCOs capacity building workshops held</td>
<td>8</td>
</tr>
<tr>
<td>N° of participants</td>
<td>114</td>
</tr>
<tr>
<td>N° of LAAC trained in the thematic groups for sub-committee formation.</td>
<td>13</td>
</tr>
<tr>
<td>N° of participants</td>
<td>210</td>
</tr>
<tr>
<td>N° of LAACs Monitoring and Evaluation sessions with the DCO’s Office</td>
<td>15</td>
</tr>
<tr>
<td>N° of LAACs Capacity Building Sessions to strengthen their capacity</td>
<td>33</td>
</tr>
<tr>
<td>N° of participants</td>
<td>435</td>
</tr>
<tr>
<td>N° of LAACs Leaders and DCOs Office Quarterly Consultative Meetings</td>
<td>3</td>
</tr>
<tr>
<td>N° of participants</td>
<td>34</td>
</tr>
<tr>
<td>N° of Semester Evaluation Consultative meetings held</td>
<td>2</td>
</tr>
<tr>
<td>N° of DCOs and Institutions Managers workshop on reintegration</td>
<td>3</td>
</tr>
<tr>
<td>N° of participants</td>
<td>92</td>
</tr>
<tr>
<td>2. Awareness creation and mobilization on child protection in Kasarani and Embakasi</td>
<td></td>
</tr>
<tr>
<td>N° of workshops held for Village Elders</td>
<td>6</td>
</tr>
<tr>
<td>N° of participants</td>
<td>145</td>
</tr>
<tr>
<td>N° of Child Protection Consultative Meetings between DCO’S and DC’S Office on Involvement of Chiefs and Assistant Chiefs</td>
<td>2</td>
</tr>
<tr>
<td>N° of participants</td>
<td>52</td>
</tr>
<tr>
<td>N° of Reintegrated Children and Parents Meetings</td>
<td>10</td>
</tr>
<tr>
<td>N° of participants</td>
<td>180</td>
</tr>
<tr>
<td>3 School Programme Networking Programme</td>
<td></td>
</tr>
<tr>
<td>N° of capacity building meetings done in 21 schools for School Management Committees (SMCs)</td>
<td>84</td>
</tr>
<tr>
<td>N° of participants</td>
<td>315</td>
</tr>
<tr>
<td>N° of workshops held for Head Teachers and School Management Committees</td>
<td>10</td>
</tr>
<tr>
<td>N° of participants</td>
<td>161</td>
</tr>
<tr>
<td>Participatory Educational Theatre performances</td>
<td>32</td>
</tr>
<tr>
<td>N° of participants</td>
<td>15,285</td>
</tr>
<tr>
<td>4. Collaboration with stakeholders</td>
<td></td>
</tr>
<tr>
<td>N° of stakeholders having actively collaborated with the project</td>
<td>241</td>
</tr>
</tbody>
</table>
THE CHILDREN SAFETY NETS TEAM

From left lower row, sitting: Lenny Okwoyo, Marysusan Wairimu, Martin Mugo, Giulia Montanari, John Kia-rie, Joshua K. Osika, Paola Panzeri, Jacinta Othoo, Emily Kabuga
Absent: Judy Mburu, Bernard Chege, Lina M. Mwangi, Ann Njoki, Laura Cunico

CEFA - The Seed of Solidarity is an independent Italian NGO engaged in international cooperation, which promotes solidarity, peace, justice and human rights principles.

Overseas is an NGO founded in Italy in 1971. Its main goal is to promote global development in the south of the world through direct support of local NGOs and community based organizations engaged in community development and training of local volunteers.

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