

**Hope and Homes for Children
Partnership with Soroptimist International**

Project Sierra: A Family And A Future

Project Report: October – December 2008

Programme Overview: Young Mothers

Locations: Bo, Makeni and Freetown – working with 150 young mothers and their children – approximately 300 beneficiaries at any one time.

This project targets vulnerable single young mothers who are living alone. The scheme aims to reintegrate these young mothers with their families or empower them to be independent, active members of their community.

Update: Young Mothers

Bo

We are working with 93 young women in Bo.

Eighty-three of the young mothers are undertaking vocational training and the remaining 10 are continuing their education at schools in Bo.

The mothers who are training in catering and tailoring staged a “Mini-Exhibition” to showcase their work to family, staff and the general public. Some final year students have been honing their skills out in the community on internships. One mother was appointed as a representative; a ‘Headgirl’ to serve as a link between staff and her fellow trainees.

Our staff visited schools and learnt from teachers that the young women were very committed to their work and were making good progress. They visited beneficiaries and their caregivers at home to offer individual support to those who were experiencing difficulties.

A new group-counselling session is being held on Saturdays, targeting health issues, called ‘Women talk’. This provides space for frank discussion of health issues, including sexually transmitted infections and HIV/AIDS. It provides critical information and support for beneficiaries, as many have lived on the streets for at least a period of time and are particularly vulnerable. The sessions have proved popular and are helping to increase understanding of potential health risks and how to minimize them.

Makeni

There are 13 young mothers enrolled onto the project in Makeni.

All 13 have returned to school, with our support, which paid for their fees, uniforms, shoes, school bags, stationary and so on. All of them have chosen to start remedial classes on Saturdays as well, to help them catch up the schooling they missed when

they initially fell pregnant. Their parents are paying the fees for these extra classes and the fact that they are now giving their daughters such encouragement has started to make a real difference. After the Saturday classes, they pick their babies up from our day care centre and take part in counselling and interaction with other mothers and children.

Our staff gave medical care to all mothers and babies; treating malaria, typhoid, septic boils, pneumonia and colds. These girls would find it very hard to afford to get to and use the nearest hospital, so our medical assistance is really their main option if they fall ill.

The project gives provision for babies to be fed twice a day and each mother is offered a meal when they come from school to pick up their babies in the afternoon. The rising cost of food means that many of the families are now finding it hard to put enough food on the table everyday, so this provision is extremely important.

The team members have noticed that the community are more positive and supportive towards the young mothers now, actively offering to help them when in need. There has been a real improvement in relationships between the mothers and their families and neighbours, which affects their progress at school and their overall well being and that of their child.

Freetown

There are currently 50 beneficiaries on this programme, 9 of whom are continuing their education and the rest chose vocational training. Ten young mothers are in the later stages of training and are embarking on internships.

Individual counselling was given to those experiencing personal difficulties. One beneficiary gave up her training to provide for her elderly grandmother; we are working closely with her to provide the support she needs to be able to return to the project. Another was getting on badly with her parents, but with regular counselling, her home life has improved dramatically, as has her progress as a trainee.

This counselling combined with the regular group workshops (covering all aspects of healthcare and childcare) has been critical to the success of this project. Beneficiaries have become far more positive in their outlook; with regard to their parents, peers, school-life and critically, their children. In particular, the staff have noticed that mothers who previously tended not to take their babies with them, when out and about, have now started to carry them with them whilst going about their day-to-day activities.

Literacy and numeracy classes continue to help the overall learning process of trainees, allowing them to record simple but essential information about their work.

Programme Overview: Children Living Alone

Location: Freetown – the team will work with up to 50 children at any one time.

The project targets vulnerable children who are living on the streets of Freetown, with the aim of reunifying them with their family, extended family or wider family.

The project will help these children return home. However, reintegration into family and community life can be difficult and requires ongoing guidance and support. When

they join the project the children are counselled, given access to healthcare and provided with nutritious meals. Emergency placements are available when deemed necessary. Meanwhile, the staff work with the family and community to mediate in the child's safe return and assess whether the family requires extra support. Once the reunification has taken place, social workers monitor each child's progress and care.

Update: Children Living Alone

Mediation and counselling are continuing to improve relationships between children and in many cases reintegration into their families is taking place. The rapid economic downturn has affected the ability of the poorest families to provide for their children and therefore some have needed additional support.

The children are benefiting in other ways from the counselling and support they are given. Children who had resorted to stealing when in need have started to ask for help instead. Others have started to look out for and take good care of the other children and their mentoring is having a positive effect on those children.

Nine of the children have been on internships, where they were commended for their commitment and excellent conduct. Initially, businesses were reluctant to take them on, but have now reported that having spent time with them, they now realise: "that street children too have their dreams to be successful in life."

Children continuing education have had very positive feedback from their teachers, who appreciate the special circumstances and difficulties that the children face.

Literacy and numeracy classes given at the Centre have captured the interest of the children and the team have noticed how much the children look forward to them.

Programme Overview: Integrated Child and Family Support (ICFS)

Locations: Bo, Matru, Makeni, Kamakwie, Tambakha – approximately 200 families, with up to 1000 family members.

This project targets the most vulnerable children and their families within individual communities. The aim is to strengthen families that are at risk of breakdown due to extreme poverty, illness or death of a parent. Beneficiaries are identified by working with local community leaders and organisations. The support for each family is individually tailored to that family's needs. The overall aim of this project is to work with an individual family to enable them to become self-sufficient. As one family leaves the programme a new family joins it.

Update: Integrated Child and Family Support

Bo

We are working with 40 families and 148 children in Bo.

Our main activities were visits to schools, homes and communities, provision of medical assistance and psychosocial counselling. The team assessed the progress of families and there has been a marked improvement in the living conditions of many.

Three families are now at an advanced stage in our work with them and are expected to be able to exit the project very soon, as they are now largely self-sufficient. Other families were counselled through difficulties. The caregiver in one family passed away, so the family needed extra support. They decided together that their grandmother should become their caregiver and the team reported that the bonds between them have been very strong during this difficult time.

Health talks were given to communities focused on prevention of burns and lacerations. As a result, there have been fewer cases of burns needing treatment, especially amongst children.

The twelve (voluntary) members of the Community Child Rights Monitoring Group were singled out as playing a critical role in community mediation and advocacy. Our team continue to work closely with government ministries, other local NGOs, the police, local government and chieftdom authorities in all our work.

Makeni

We are working with 40 families in Makeni – made up of 60 parents and 127 children.

Twenty-one families are engaged in farming and they have cultivated groundnut and rice this season and the majority have achieved a good harvest so far.

Some families have progressed well in their use of grants for business start up. One beneficiary has graduated from a course in electrical engineering and has started working in Makeni Township. Community and home visits have proved vital to monitoring the use and development of grants, as some families require closer guidance and support to build up their small businesses.

Our staff intervened on behalf of two families living in a former camp for displaced people established during the war. The owner has sold the land, so the families were to be evicted. We bought each family a piece of land, and with the help of local people, they have started making building materials, already producing over a thousand mud blocks.

Children took end of term exams before Christmas and are doing well though some need more support. The team members have noticed a big improvement is in the children's relationships with caregivers. The Community Child Monitoring Group has also been effective in protecting children from abuse in the community.

Kamakwie

We are working with 40 families in Kamakwie, with 131 children within those families.

Home and community visitation is an ongoing activity that was particularly important during this quarter, as through these visits the team learned that some schools are having serious problems in keeping teaching staff. The team advised families on alternative schools the children should attend, particularly for those who are taking exams next May. Not all the schools have this problem and one of them has greatly improved with the completion of three new classrooms, easing chronic overcrowding.

The team identified families that will be able to exit the project in the next few months, as they have progressed well and are not far from self-sufficiency.

Tambakha

We are working with 40 parents and 120 children in Tambakha.

The families in Tambakha faced challenges this quarter because of the staffing problems in some schools, so again, children had to be diverted to other schools, to ensure their education was not derailed. On the positive side, a new secondary school was opened in nearby Fintonia, easing the burden on parents who had to find accommodation for their children attending school in Kamakwie.

The team are seeing very clearly the effects of their contact with families and communities and the psychosocial support given. There has been a marked improvement in the school performance of some children who struggled previously, partly because their individual difficulties at home had been addressed. Making these visits can be challenging, as Tambakha is an extremely remote area, but they are critical.

Mattru

We are working with 40 families and 144 children in Mattru.

The health of families in Mattru has improved, with children reporting only common ailments, which our nurse was able to treat. Regular visits and counselling has had an impact on family and community relationships and children have just taken their end of term exams. Our staff have met with their teachers and most of them are expected to have done well.

Oil palm seedlings were given to families engaged in farming, and their wider family members worked extremely hard to make sure the farm work was completed in time. The oil palm plantation is seen as something that will benefit the wider family for the long-term and that has had a positive effect on the way people are supporting each other.

**Hope and Homes for Children
28 February 2009**

Case studies

ICFS PROJECT – BO

Edith Kamara

When 45-year-old Edith Kamara came to the attention of HANCI -SL she was living in little more than a cubicle; a basic single roomed hut. Her depression and isolation were evident in her words; “I have no one to look up to, no friends, no family, no husband to call my own. Because I am poor and sick nobody knows I exist. I am only waiting for my death to be very fast.” Only after several counseling sessions did her full story emerge.

She had lived in a family home, built by her father, with her husband John and their three children. After the death of her father, who had been a kind and positive influence, her family quarreled with her husband and physically abused her children. Edith confronted her family only to receive accusations and insults. Her love and loyalty for her husband led to a quarrel with her elder brother’s wife leaving Edith seriously beaten. It was then that Edith decided to leave the family house and they moved into the single roomed hut.

To help keep his family, Manka looked after some land where he did some gardening but he had no income. When things became even harder, he abandoned his family leaving Edith pregnant with their fourth child. The stress of her desperate situation as a single parent contributed to a stroke affecting her right arm and leg. After this illness which left Edith unable to walk or work, the responsibility for managing the home rested entirely with the eldest daughter Boima, then thirteen years old. With no word or contact from their father, Boima, begged, laboured and struggled, working locally in exchange for food or tips to feed her siblings and to pay for her mother’s treatment. It was impossible for her to go to her mother’s relatives to ask for help.

As a result Boima dropped out of school. In an attempt to ensure her siblings’ survival they were handed over to neighbours who instead used for them child labour. It was at this stage that HANCI-SL became aware of Edith’s situation and she joined the project in Bo. She received food, clothing, medical support, a programme of counseling and was also linked up with Handicap International for physiotherapy.

The local community participated in counseling workshops to help them accept Edith and her children. The children returned to live with their mother and they were provided with the materials they needed to return to school. Meanwhile Edith received specific counseling regarding her relationship with her family. With her agreement the family was contacted and they started a parallel process towards reconciliation. During these months efforts were made to contact her husband to encourage him to come home to take care of his wife and children. When he returned a small business grant enabled him to do this. When soon after, the roof blew off their cubicle and the community was asked to temporarily accommodate Edith, her husband and children, they were again in a vulnerable and difficult situation.

Following negotiations with the community, Edith’s elder brother agreed to give them a piece of land in the family compound. Here, the family and the local community helped Edith and her husband to build a two-bedroom dwelling. With her husband back and successfully running a small business, the children in school and the family living in a safe home close to her family relatives, Edith now feels confident and secure. As well as the health of her children and the companionship of her husband, she is recognized and respected by her neighbours and community members.

During the social workers' last visit Edith commented that she is alive because God sent HANCI-SL to rescue her and that she is what she is today because of people she did not know. With a broad smile on her face, she looked straight into the eyes of the coordinator and said thanks to her and kindly asked her to pass the smile onto all those who have helped her.

INTEGRATED CHILD AND FAMILY SUPPORT PROJECT – MAKENI

Sanoh Sesay

Sanoh Sesay, is 45 years old. Widowed during the war she, alone, now cares for her three grandchildren. Lois aged 8 and Boima aged 5 were orphaned as a result of their father dying during the war and their mother later dying of typhoid. Their cousin Safia is aged 7. Her parents were traders selling local produce, such as rice and palm oil. Her father died in a road accident and her mother died of cholera.

After the death of both sets of parents Sanoh willingly shouldered the responsibilities of caring for her grandchildren in the absence of any other relatives.

They live in a community within Makeni in a rented house with two rooms. After the death of her husband Sanoh, considering her age, decided not to remarry (the average life expectancy in Sierra Leone is 44 for women – UN). She started selling pepper, palm oil and locally made soap. In spite of her resourcefulness, there was only enough money for one meal a day for the children. Their poor living standards generated contempt within the community and late payment of their rent lead to further humiliation and abuse.

A local counselor brought Sanoh's situation to the attention of HANCI-SL. They joined the Integrated Child and Family Support Project in March 2007 and began an induction programme.

Support from HANCI-SL continues in various forms including the children's education. In addition to their school fees, Lois, Boima and Safia have received uniform, school stationery, school bags and a pair of shoes each. The family now benefit from free medical treatment at the HANCI-SL health centre including payment for any necessary hospital treatment.

In October 2007, Sanoh was given a small business grant. Since then she has developed her trading enterprise, selling produce like palm oil, kola nut, pepper and firewood. The growth of the business has enabled Sanoh to open a Tele Center where she sells mobile phone top-up cards and customers can recharge their phones at competitive rates. Being part of the developing communications infrastructure has given Sanoh a role in her community and a sense of pride. The family is now able to regularly pay their rent, and no longer fear intimidation from their landlord, and counseling has helped them to be reintegrated into their community.

Through HANCI-SL's intervention the family are well, the children are being educated and their grandmother can independently provide them with all their basic needs.