



MEETING THE COSTS OF FAMILY CARE:

Household Economic Strengthening
to Prevent Children's Separation
and Support Reintegration

A RESOURCE GUIDE



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Introduction

This resource guide aims to assist program designers, funders, and implementers to select and incorporate appropriate and effective household economic strengthening (HES) measures into programs to preserve or reestablish family care for children. Poverty—not having enough of the essential requirements of life—is a structural driver of family and child vulnerability; it weakens families and increases the likelihood of children separating from them, although it is rarely the only contributing factor (Chaffin and Kalyanpur 2014, Delap 2013, EveryChild 2009, Laumann 2015). HES, which aims to stabilize or improve a family’s economic situation by increasing its assets, can play an essential role in expanding families’ capacity to provide for their children’s basic needs and education, as well as strengthen their social integration and improve their psychosocial well-being (Chaffin and Kalyanpur 2014, United Nations 2010).

PURPOSE OF THIS RESOURCE GUIDE

This document has been developed to provide guidance and information on useful resources for matching specific HES activities to the particular needs and capacities of individual families and to the differing contexts in which they live, addressing a gap that practitioners have identified in their knowledge and skill sets. Nonetheless, it does not directly address action in all areas related to supporting family reintegration and retention of children in family care (e.g., it does not address family tracing, mediation, and counseling).

This guide integrates some important realities:

- Those who intervene programmatically cannot “reintegrate” children into families. The process of reintegration is achieved by the children and families concerned (Bearup 2016). Likewise, practitioners do not prevent the separation of children from their families. This guide aims to help practitioners in their work to support families and children to accomplish reintegration and prevent unnecessary separation.
- Programmatic experience has shown that multidimensional, holistic action is needed to address family-child separation effectively and that interventions and interveners need to be coordinated through case management. HES, while often necessary, is not a sufficient measure to support successful family reintegration or prevention of family separation.

However, positive family relationships and having material requirements such as housing, nutrition, and access to education and health services are related to adequate household income and access to resources.

- While recognizing that children need family care, there are circumstances involving abuse or other severe threats in which it is not in the best interests of a child to return to or remain with their family. Programming to support family reintegration or prevention of separation must be informed by a case-by-case determination that this is in the best interests of the child and that any specific risks are identified and addressed. While going through this document, readers should understand that preventing the separation of children from their families refers to preventing unnecessary separation.

Practitioners suggest that, to be most useful, HES support should help a family address the ways its economic situation and context affects its integrity (i.e., staying together) (Laumann 2016–2018). This resource guide recognizes that there is no “one-size-fits-all” approach to HES and that effective interventions must not only match the capacities and circumstances of a family, but also be integrated effectively with other program elements (Chaffin and Kalyanpur 2014, United Nations 2010). As such, this resource guide is a toolbox for program designers and planners. It is also a resource that governments and donors can use for planning or when assessing proposed programming.

BACKGROUND TO THIS GUIDE

This guide was developed at the request of USAID’s Vulnerable Children Fund, otherwise known as the Displaced Children and Orphans Fund (DCOF), which saw the need to consolidate learning and practice on HES in order to improve the effectiveness of programming to support family integrity and the reintegration of separated children into family care. Children of particular concern to DCOF include those in institutional care, affected by war, on the street, or with disabilities, as well as children and families living in extreme poverty at high risk of separation. In 2014, DCOF tasked FHI 360’s Accelerating Strategies for Practical Innovation and Research in Economic Strengthening (ASPIRES) project with identifying evidence and presenting guidance on contextually appropriate economic interventions relevant to families at risk of separation and families with whom children can be reunited. The aim was to help fragile families overcome crises and ultimately develop sustainable livelihoods that support children’s well-being and development and help families remain together.

When DCOF requested this work, there was virtually no evidence base to guide HES to support the reintegration of children in family care. The evidence base related to identification and HES for households at risk of separation was also limited. However, there was a good deal of potentially useful information on these topics in the minds of practitioners, in project documentation, and in the growing evidence base on HES for vulnerable children and their families.

This guide combines program experience supporting family reintegration and preventing separation with learning about HES. It is based on identification and review of relevant existing information, as well as the purposeful generation of new information. The foundation for this guide includes an extensive literature review, participation in technical exchanges in the United States and Uganda, and a global survey of organizations with programs to support children's family reintegration and prevention of separation. It also builds on data and learning from in-depth interviews with practitioners and two mixed-methods action research projects that used a variety of HES measures to help families prevent children's separation and support children's family reintegration.

HOW THIS GUIDE IS ORGANIZED

This resource guide begins with an orientation to HES and how it has been used in broad programming for vulnerable children, as there is a much larger body of evidence on that topic than on programs focused specifically on children's reintegration and prevention of separation.¹ Next, it describes what is different about HES in vulnerable children programs versus HES in programs for reintegration and prevention of separation. The guide then presents considerations and processes for assessing risk of separation and individual families' characteristics, capacities, and needs. This is followed by discussion of the role of HES in reintegration and prevention of separation programming, and considerations for the design and implementation of HES in this type of programming and for matching HES to family needs and capacities. HES interventions frequently used in reintegration and prevention of separation programming are then presented, followed by reflection on monitoring and evaluation of HES components of reintegration and prevention of separation programs. Annex 1 provides a planning tool for helping practitioners think about appropriate HES for families. Annex 2 consists of examples of various programs that incorporate HES into their reintegration and prevention of separation programming. The guide includes information about and links to resources, lessons learned, and recommendations for good practices.

¹ Reintegration and prevention of separation programs often do not focus on collection and analysis of data related to HES, and the populations served are often too small to generate quantitative findings with statistical significance.

Household Economic Strengthening in the Broader Context of Vulnerable Children Programs

Before focusing on HES in the specific context of reintegration and prevention of separation, it is useful to consider how HES is understood and used in the broader context of vulnerable children programming, since families either reintegrating children or at risk of separation face similar economic vulnerabilities to those of other vulnerable families.

WHAT IS HOUSEHOLD ECONOMIC STRENGTHENING?

HES² is the process by which individuals and households improve their living conditions by participating in activities that increase physical, financial, human, or social assets or their capacity to obtain them (Evans et al. 2013). HES programming involves integrating individual-, family-, and community-level economic interventions into programs that address social problems where poverty is a critical contributing factor (Moret 2016). Often with a broad, and relatively short-term, focus on how families accumulate and spend money, HES aims to stabilize or improve a household's economic situation and avoid its slide into further poverty and potentially harmful economic coping practices. On its own, HES is generally not sufficient to transform poor people's—especially poor children's—lives (Evans et al. 2013, Moret 2016, PEPFAR 2012), and HES components in programs for vulnerable children are generally integrated into a broader approach. Practitioners suggest that focus and intentionality are important: to have the greatest effects on children, HES interventions should specifically aim to improve children's well-being and outcomes (Markel and Getliffe 2015 working draft, Rutherford, Carmichael, and Christopherson 2015).

WHAT SHOULD HES ACCOMPLISH FOR VULNERABLE CHILDREN AND FAMILIES?

In programming for orphans and other vulnerable children supported under the U.S. Government's President's Emergency Plan for AIDS Relief (PEPFAR) framework, HES has, in recent years, been supported to reduce families' economic vulnerability and empower them to provide for their children's essential needs by improving their capacity to invest in the education, nutrition, and health of their children (PEPFAR 2012). Within the child protection field, through providing resources and building income-generating capacity, HES has been used to address particular child protection issues. These include early or forced marriage,

² While the term “household economic strengthening,” also referred to as “economic strengthening,” has its origins in HIV/AIDS response, activities included in the ES portfolio have been included in charitable and social welfare assistance efforts and integrated rural development, sustainable livelihoods development, and poverty alleviation programs at least since the 1960s. In the late 1990s, concerns that household economic status could affect HIV outcomes and that HIV could affect household economic status and children's well-being led to the inclusion of “economic strengthening” activities in PEPFAR's response portfolio (Markel and Getliffe 2015 working draft). This also includes, at the household and community level, support for education access and retention, psychosocial needs, health and nutrition, child protection and gender-based violence programming, and legal protection (PEPFAR 2012).

sexual violence and exploitation, child labor, reintegration of children associated with armed forces or groups, physical violence, school dropout, and inadequate care (Marcus and Page 2014, Women’s Refugee Commission et al. 2012). In the World Health Organization-coordinated INSPIRE framework aimed at ending violence against children (World Health Organization 2018), income and economic strengthening (IES) activities are proposed as a strategy to help reduce risk of violence and increase protective factors by increasing income and household resources. These improvements may help, for example, to reduce parent stress, improve access to education, improve health and nutrition, and facilitate alternatives to illegal or unsafe work.

Programs should offer families HES activities that are appropriate to household capacities and assets, vulnerabilities, and contexts (Evans et al. 2013, Woller 2011)

(see Box 1 for examples). As time, organizational capacity and other internal and external resources permit, HES interventions can be sequenced and evolve as family capacities and contexts change and develop.

COMMON HES ACTIVITIES USED IN VULNERABLE CHILDREN PROGRAMMING

HES components of vulnerable children and child protection programs often target parents or other caregivers to increase their capacity to care for their children. They generally include such approaches as:

- Consumption support through cash, food, or asset transfers to help families meet their basic needs;
- Savings support, particularly through group saving mechanisms, to help families manage cash flow, smooth consumption over periods of variable income, mitigate the effects of shocks, and generate investment capital at relatively low risk;

Box 1. Household factors to be considered in HES design for vulnerable children programming

Capacities	<ul style="list-style-type: none"> • Knowledge • Skills • Experience • Health status
Assets	<ul style="list-style-type: none"> • Human • Financial • Land/natural • Physical • Social • Political
Vulnerabilities	<ul style="list-style-type: none"> • Age profile • Dependency ratio • Disability • Discrimination based on gender or membership in a stigmatized group
Contexts	<ul style="list-style-type: none"> • Rural or urban • Conflict/crisis • Chronic disease • Access to markets (wage labor, vending, etc.) and value chains

- Microcredit loans for productive activities, to support enterprise development, or to smooth consumption;
- Financial capability training to improve family capacity to manage resources;
- Productive and enterprise skills training to prepare family members to start or improve microenterprises;
- Vocational skills training for older adolescents or adults to help them develop marketable skills;
- Provision of productive assets, such as equipment, tools, and seeds, and/or small grants for investment;
- Helping families connect to markets in new ways (for example, by growing in-demand crops or producing in-demand items, adding value to what they produce, and developing new engagement in a market system). (Evans et al. 2013, PEPFAR 2012, Mattingly 2015, Chaffin and Kalyanpur 2014)

Evidence supporting the links between HES activities, household economic indicators, and children's short- or long-term well-being in low- and middle-income countries is still sparse. The bulk of the evidence relates to consumption support, saving, and access to microcredit to support enterprise development or smooth consumption. Additional measures may also be appropriate for strengthening vulnerable families, but the evidence base about them in vulnerable children programming is limited. Specific HES activities and, where available, information about the related evidence base are described in more detail in the Common Program Interventions section of this resource guide.

HES interventions may be used individually or in combination with each other (e.g., providing financial literacy training or business skills training to a savings group or to microenterprise grant recipients). They may also be used in multidisciplinary programming (e.g., combining financial skills development with life skills capacity building for older adolescents or with parenting skills development for caregivers).

FRAMEWORKS FOR SEQUENCED APPROACHES

Two models that have influenced HES programming for vulnerable children in recent years include the livelihoods pathways model and the graduation approach.

Livelihoods pathways model

The [livelihoods pathways model](#) conceptualized and promoted by PEPFAR, its Livelihoods and Food Security Technical Assistance (LIFT) project, and other projects is a useful resource for considering how and why specific HES interventions might be appropriate to particular families or groups of families. It identifies categories of vulnerable households based on economic vulnerability and food security characteristics and, for each category, proposes

desired resilience and purchasing power outcomes, livelihood strategies, and related HES activities (Woller 2011, PEPFAR 2012, Evans et al. 2013). Strategies focus on livelihood provision for destitute households, livelihood protection and money management for households struggling to make ends meet, and livelihoods promotion for families ready to grow. It should be noted that not all of the strategies and related interventions referenced are appropriate for all households and that some interventions may be appropriate for households at different vulnerability levels than those envisioned in the model.

The livelihoods pathway model suggests that HES should focus on where households lie on the pathway. In addition, with appropriate assistance, households can progress along that pathway from food, income, and asset vulnerability to resilience by accessing HES support that is matched to their evolving needs and capacities and that involves increasing risk and returns as they progress. Although not always linear and in the direction of improvement, movement along the pathway can support improved social, health, and education outcomes.

The “classic” graduation approach and its evolution

Graduation approaches offer a more structured approach to sequencing. They involve a carefully sequenced and well-monitored set of integrated interventions aiming to push ultra-poor households out of food insecurity and extreme poverty and into sustainable livelihoods characterized by improved risk tolerance and unlikelihood of sliding backward into further poverty (de Montesquiou, Sheldon, and Hashemi 2018, Moret and Lorenzetti 2019a). Evaluation research on graduation programs indicates that they can have positive effects on employment, incomes, asset holding, savings and consumption, time spent working, hunger, stress, physical health, and psychosocial well-being (de Montesquiou, Sheldon, and Hashemi 2018).

The “classic” graduation model developed by BRAC (an international development organization) and promoted and researched by the Consultative Group to Assist the Poor (CGAP) and the Ford Foundation includes elements of social protection, livelihoods development, and financial inclusion, and embeds income generation in a comprehensive support program intended to help lift the ultra-poor out of extreme poverty. This comprehensive support program involves sequenced intervention steps, including consumption assistance, savings, technical skills training, and market assessment and asset transfer, which are supported throughout by mentoring (Figure 1). The basis of graduation criteria are indicators of economic resilience related, for example, to food security, income, savings, health, shelter, and positive behavior change (Moret and Lorenzetti 2019a). The total period of intervention in this approach may be two or three years. Even after graduating

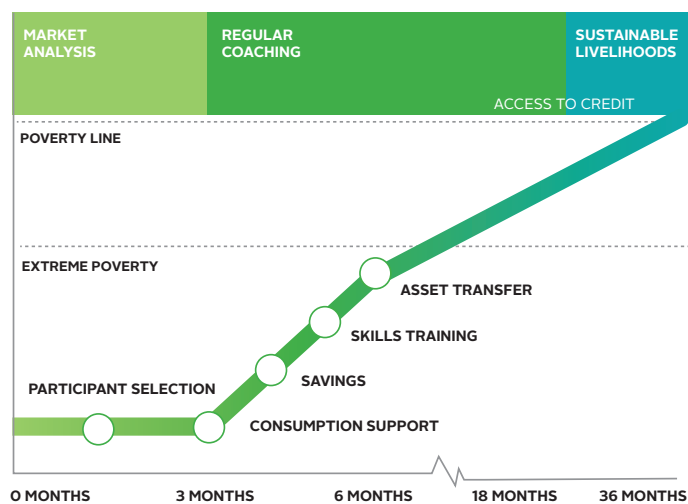
from a program, households may still require some sort of external assistance. Graduation programs often place emphasis on women's empowerment, but do not always have a focus on outcomes for children. As more programs have used this approach, they are making adaptations to fit their needs and contexts (e.g., not offering consumption support in certain contexts or including a heavier focus on children's outcomes), but the emphasis on structured, sequenced support remains consistent.

Learning about sequenced approaches in vulnerable children programming from research and practice

A growing body of work suggests that implementing HES interventions in combination with each other or with other non-economic family support measures may lead to program efficiencies and greater effects (Moret and Lorenzetti 2019a). For example, consumption support alone may be useful, but it may not alleviate all of the multiple and interrelated risks faced by vulnerable families and children. Combining consumption support with links to services and strengthening caregiver capacity for the care and treatment of children, on the other hand, can lead to greater improvement in children's outcomes (Roelen et al. 2017). A program in Uganda found that participation in child protection, HES, and family strengthening interventions was associated with the greatest reductions in multi-dimensional vulnerability and that participating in more HES interventions contributed to greater reductions in economic vulnerability. While economic strengthening was critical for graduation out of vulnerability, resilience over time required complementary interventions (AVSI Foundation 2016). Sequenced but overlapping interventions may offer opportunities for these interventions to reinforce each other, as may undergirding them with structured support through case management, group participation or coaching. Using HES platforms as a way to connect families to other interventions, for example, by linking financial literacy or parenting skills training to savings groups, can also promote program efficiencies in terms of budget, mobilizing participation, and time spent by participants on attending program activities.

Governments, nongovernment actors, and researchers are increasingly interested in connecting and seeking synergies between social protection systems and programs and micro-level strategies associated with HES, including sequenced approaches such as the graduation approach (Sabates-Wheeler and Devereaux 2013, Samson 2015, de Montesquiou, Sheldon, and Hashemi 2018).

Figure 1. The graduation approach model (The Consultative Group to Assist the Poor 2013)



To date, there is limited evidence on what sequence of activities best supports HES outcomes in programs for vulnerable children (Moret and Lorenzetti 2019a). ASPIRES interviews with practitioners from six projects focused on orphans and other vulnerable children in Ethiopia, Nigeria, Rwanda, and Uganda found that respondents did not have strong opinions on the ideal sequencing of HES interventions, although they thought that financial literacy training was needed to ensure success in business and should precede business skills training (Moret and Lorenzetti 2019b). HES interventions offered by these projects included consumption support (generally only for the most vulnerable), saving groups and links with the formal financial sector, financial literacy capacity building, training and other support to develop and implement income-generating activities (IGAs), agricultural production and marketing skills, and strategies and skills building for youth, such as training and apprenticeships in production and vocational skills.

The practitioners identified synergies between program components, suggesting that “resiliency” interventions such as HES (for example, farmer field schools, financial and market literacy, and village savings and loan associations [VSLAs]), education interventions, and “sensitization” interventions (e.g., those related to sanitation, health, and child protection), implemented in combination with each other generated positive outcomes for children (Cannon et al. 2017, Moret and Lorenzetti 2019b). Working with local government, establishing participant linkages to community structures, and building social capital were important to sustain gains and prevent backsliding (Moret and Lorenzetti 2019c).

Evidence on sustaining outcomes of HES interventions over time in vulnerable children programming is limited, and most vulnerable children programs are unable to track outcomes after interventions and programs are completed. Post-intervention studies of household outcomes from integrated programs in Uganda and Rwanda found that household characteristics associated with improved outcomes over time included participating in a non-farm enterprise, having increased livestock holdings, having diverse sources of income, and having a highly skilled job such as mechanic or hairdresser (Epstein and Collins 2012).

AVOIDING RISKS TO CHILDREN IN HES PROGRAMMING

HES interventions may pose some risks to children if not sensitively designed and implemented. Practitioners should think about the potential for and monitoring of risks. For example, if a family has more money available for productive use, children may spend more time working in their parents’ enterprise or providing child care for younger siblings and less time on learning and play; they may also become engaged in harmful work (Chaffin 2011, Chaffin, Rhodes, and Carmichael 2013, Roelen et al. 2017, Roelen 2015). Similarly, promoting enterprise development without considering children’s needs may lead families to trade investment in children’s development with investment in production, to the detriment of children. Involving caregivers in cash-for-work or food-for work programs may lead to children’s presence at work sites or children being left unattended (Roelen et al. 2017).

Box 2. Good practices for implementing HES interventions from six vulnerable children projects in Africa

- » Build trust at the community level. Engaging with different levels of government prior to project launch and facilitate regular interaction between project participants and case workers to help with this.
- » Provide services in a way that addresses the unique and interconnected needs of individual households, and encourage households to participate in interventions that fit their needs.
- » Provide HES and other interventions concurrently.
- » Equip households with the ability to understand their capacity for risk.
- » Emphasize linkages to local community structures and resources and build participant capacities to access them.
- » Increase access to HES, especially for the most vulnerable households. Invest more in HES components to increase participation in these activities and include financial literacy activities.
- » Consider expanding reach to very vulnerable households through subsidies, interest-free loans, or grants.
- » Use locally specific benchmarks of progress focused on evidence-based sources of resilience.
- » Set modest benchmarks for graduation from program support, including the ability to cover costs of basic needs, knowledge, and having connections to seek help when necessary after graduation. (Moret and Lorenzetti 2019a, b, c, d)

HOW HES IN VULNERABLE CHILDREN PROGRAMS MAY DIFFER FROM HES IN PROGRAMS FOR REINTEGRATION AND PREVENTION OF SEPARATION

Families targeted by programs aiming to return children to family care and prevent separation share many vulnerabilities with families targeted by broader vulnerable children programs. Experience and evidence from vulnerable children programs can provide useful ideas and insights for designers and practitioners of reintegration and prevention of separation programs. At the same time, differences in focus and contexts of the two types of program mean that practitioners of reintegration and prevention of separation programs should not assume that the HES design of a vulnerable children program will be appropriate for their program. Table 1 highlights some of these differences.

Table 1. Some differences in focus and context of vulnerable children programs and reintegration and prevention of separation programs

Vulnerable Children Programs	Reintegration and Prevention of Separation Programs
Often operate at large scale, with larger and geographically concentrated target population, so can offer group-based interventions	Often focused on a smaller subset of the population, and targeted families may be geographically dispersed, so group-based interventions may not always be appropriate
May offer HES to as many families as are interested, but may not expect to reach all families with HES	Need to assess HES needs of each family and plan to address those needs
May offer a fixed or variable set of interventions to families	May offer a fixed or variable set of interventions to families, but more tailoring and some “one-off” responses may be needed
May not do close, family-level monitoring of HES interventions and how families make use of and benefit from them	May monitor HES interventions closely and adapt them as needed
May not plan to serve households that are incapable of economic activity, or may not have the capacity to do so	Need to be able to take steps so that families do not separate for financial reasons

Resources

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Identifying Families and Children at Risk of Separation for Program Inclusion

Programming to prevent the separation of children and to reunify and reintegrate children and their families may involve multiple levels of assessment of risk and vulnerability to determine whether and where intervention is needed and for whom. Individuals, families, communities, and larger populations face continuous stressors and sometimes sudden, unanticipated adverse events, or shocks that may push them toward negative outcomes, including family-child separation (Moret 2016, Woller 2011, Child Protection Working Group 2014).

In the general discourse on vulnerability, risk refers to the likelihood of experiencing shocks and stressors, and resilience refers to the capacity to withstand or recover from them. Vulnerability is a predictive concept (Moret 2016) that refers to susceptibility to, or likelihood of, a negative outcome to the experience of stressors and shocks. Vulnerability assessment may consider the likelihood and degree of exposure, as well as susceptibility, to stressors and shocks. Vulnerability to family-child separation can be thought of as the likelihood of separation (or re-separation), given the existence of ongoing stressors, the possibility of sudden shocks that can drive separation, and the presence of assets or protective factors that make families resilient.

CONSIDERING THE SCOPE AND FOCUS OF PROGRAMS

Program size, funding availability, organizational capacity, local context, and assessment of cost-efficiency may play key roles in informing a program's screening process and determining which families are screened into or out of programs. Practitioners should consider whether they have the capacity to identify and support all families at risk of separation (e.g., within a geographic area or in relation to all types of separation), or whether they should focus more narrowly. They should also give thought to whether specifically targeting program support to families at risk of separation could lead those families to be stigmatized or cause conflict in the community (Mattingly 2015). Screening processes should avoid raising any expectations among families and communities that cannot be met.

USING DATA TO INFORM PROGRAM LOCATION, FOCUS, DESIGN, AND IDENTIFICATION OF PARTICIPANTS

Data collected at multiple levels may inform programming for the prevention of separation. Population-level assessments and various types of administrative data, where available, may highlight regions and population segments where poverty is high and child well-being and protection indicators are poor, and where “push” factors (e.g., poor living conditions and poor service access) and “pull” factors (e.g., the existence of child care institutions catering to children with caregivers or child labor markets) exist (Moret 2016, 2014a, Child Protection Working Group 2014, Interagency Working Group on Separated and Unaccompanied Children 2013, Moret 2014b).



Box 3. ChildFund's Deinstitutionalization of Orphans and Vulnerable Children in Uganda (DOVCU) project

ChildFund's DOVCU project supported child care reform in Uganda with its aim to reduce unnecessary separation of children from families and place children outside family care in nurturing families. To define its geographic implementation area, it used a government study to identify districts with large numbers of residential child care institutions. In conjunction with the government, DOVCU assessed institutions in these districts for compliance with standards and reviewed data of children in the institutions, which informed the project about children's areas of origin. In turn, this helped DOVCU identify subcounties and parishes that were the largest suppliers of children to child care institutions, facilitating the selection of priority areas for the prevention component of the project. DOVCU then worked with community leaders to conduct community meetings in 360 villages using a participatory rural appraisal approach to prioritize community-specific push-and-pull risk factors for family separation. Participants were asked to reflect on families in their communities who had experienced separation or were identified with various risk factors and to provide information either in the group or confidentially. DOVCU developed a scoring system for this information and used it to classify families by risk level. Families classified as medium or high risk were selected for further assessment by the program using a Family Status Vulnerability Index Tool adapted from the Ugandan OVC Vulnerability Index Tool and the Child Status Vulnerability Index Tool. [DOVCU's final report](#) describes the process. (Mutenyo et al. 2019, ChildFund International 2018b)



Data collected from separated or unaccompanied children may help to identify patterns that point to separation “hot spots” or household-level risk factors (Moret 2016). Areas with a high concentration of residential care facilities are likely to have a higher percentage of children who have separated from their families. Many surveys of children living in residential facilities (e.g., orphanages, children's institutions, and children's homes) have found that the large majority have one or both parents living (Williamson and Greenberg 2010).

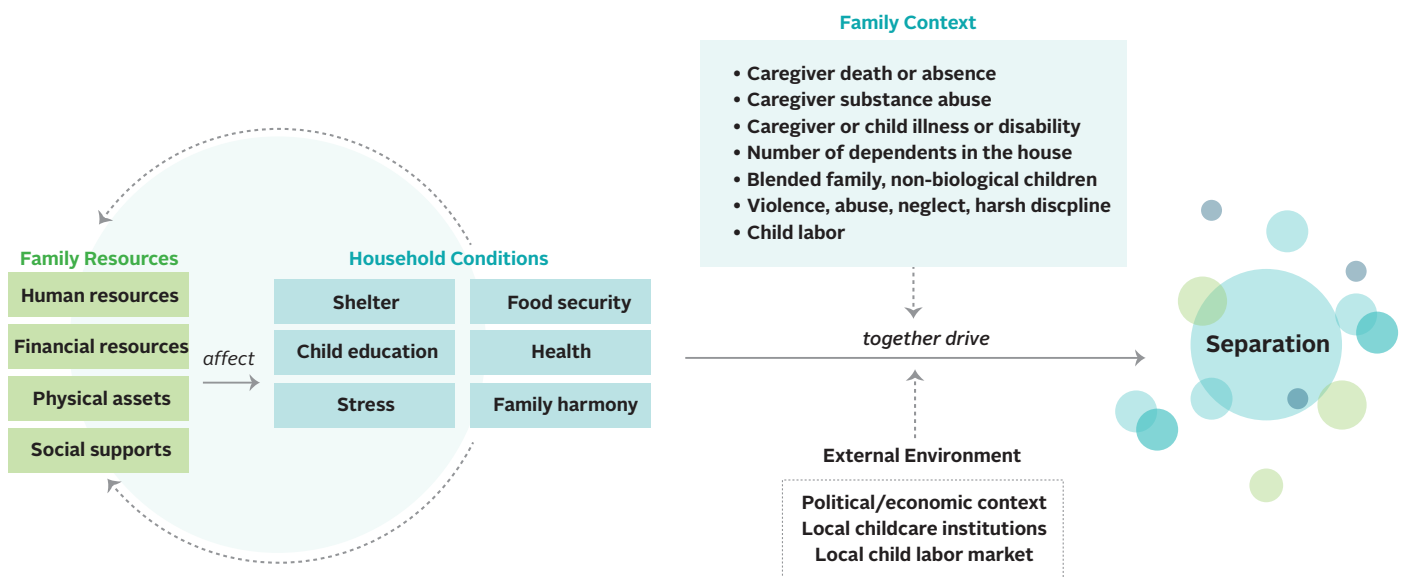
Assessments that use qualitative methods at the community level draw on participatory rapid appraisal methods and can help inform program targeting and design. They do so by providing locally contextualized information about factors that appear to contribute to separation; indicators of child, family, and community vulnerability and resilience; who should be included in programming; and ways that children, families, and communities can be supported. Participatory approaches can provide some transparency with respect to identifying a pool of possible program participants and can help to facilitate community buy-in to projects; however, they require good facilitation to stay focused and are probably most appropriate in contexts where community members trust each other and the likelihood of misuse of the process is low (Moret 2016).

FOCUSING ON FAMILIES—WHAT DRIVES FAMILY-CHILD SEPARATION?

Families often experience diverse and multiple drivers of separation, and these factors often build on, reinforce, or influence each other. While poverty underlies many drivers, experience suggests that specific manifestations of poverty (e.g., lack of basic material needs and services), along with social factors (e.g., family breakdown, family conflict, death of a parent, remarriage, and parent or child behavior), are key drivers that can impel separation (Delap 2013, EveryChild 2009, Sofovik, Kragulj, and Pop 2012, Laumann 2016-2018).

The concept map in Figure 2 shows one way of thinking about the relationship pathways between assets or resources available to families, basic conditions for healthy and stable home life, characteristics of the external environment, and specific characteristics of families that are relevant to actual or potential family-child separation (Namey, Laumann, and Brown 2019). Human, financial, natural, physical, contextual, social, and political resources may affect the quality of, and be affected by, basic living conditions. Further, those resources and living conditions are experienced within the context of environmental factors, family member characteristics, and group dynamics in the household, and together they contribute to a family's risk of or resilience to separation. By recognizing and then working with specific areas of vulnerability and strength, practitioners can help families improve their abilities to care for their children.

Figure 2. Concept map of common factors contributing to family-child separation



RISK AND PROTECTIVE FACTORS ASSOCIATED WITH CHILD-FAMILY SEPARATION

While poverty is often a contributing factor to child-family separation and is a frequently cited reason for children to be in residential care (Williamson and Greenberg 2010) or living on the street (de Benítez 2011), most children in poor families do not separate from them. Poverty is rarely the only factor driving families apart. Risk factors identified by the literature and child protection practitioners as drivers of separation are similar to risk factors for abuse and neglect (Delap 2013, Moret 2016, EveryChild 2009, Smart 2017, Laumann 2015). Families often experience multiple risk factors; in a review of case files in Bosnia and Herzegovina, Hope and Homes for Children (HHC) found that children experienced between one and 12 risk factors, with the greatest number experiencing five to six (Sofovik, Kragulj, and Pop 2012). Most families with separation risk factors do not separate, and most do not neglect or abuse their children. Understanding and identifying risk factors in a given context can help identify families likely to benefit from preventive support and guide the nature of that support. Table 2 presents risk factors thought to be associated with family-child separation. Box 4 presents findings from ASPIRES research in Uganda with respect to perceived reasons why children and families separate and the household characteristics associated with separation.

Table 2. Risk factors associated with family-child separation

<p>Family characteristics</p>	<ul style="list-style-type: none"> • Death of parent(s)/breadwinner • Single-parent household • Elderly caregiver • Migrant parent(s) • Large family size (more than three children) • Reconstituted household/separation/divorce • Unwanted pregnancies/pregnancies outside marriage that are stigmatized • Disability of a child or other household member • Illness/mental illness/HIV and/or AIDS in household • Death of a child • Abandonment
<p>Availability of basic needs</p>	<ul style="list-style-type: none"> • Poverty • Lack of access to (quality) education • Inadequate shelter/insecure housing
<p>Behavioral characteristics</p>	<ul style="list-style-type: none"> • Violence • Abuse or neglect of children in household • Caregivers face challenges in managing children's behavior • Parent abuse of drugs or alcohol • Incarcerated parent • Child in conflict with law • High parental stress
<p>Context characteristics</p>	<ul style="list-style-type: none"> • No extended support available • Educational opportunities away from home • Work opportunities for children • Engaged in harmful forms of work • Children affected by harmful traditional practices • Armed conflict • Climate change • Presence of/recruitment by residential child care institutions • Lack of diversion alternatives to detention for children in conflict with the law

(Delap 2013, EveryChild 2009, Laumann 2015, Moret 2016, 4Children 2015)

Box 4. Learning about family-child separation in Uganda

In its quantitative and qualitative research with the ESFAM and FARE projects in Uganda, ASPIRES investigated perceptions of reasons for family-child separation and household characteristics associated with separation. It found that caregivers associated with the two projects most frequently identified failure to meet basic needs, harsh discipline, and child behavior as drivers of separation. Children most frequently mentioned harsh discipline and child behavior.

Most Commonly Cited Reasons for Family-Child Separation (from Caregiver/Child Perspective)	Example
Harsh disciplinary practices	When their parents overly hit or beat them with a stick, this makes them withdraw and feel unloved hence leaving home. (Integrating family caregiver, Gulu, Uganda)
Inability to provide children's basic needs	The first major reason is the inability to cater for children's needs. A child can run away from home if you don't have money to buy beddings like a blanket. In addition, lack of food in the home can also make a child to run to the streets. (At-risk family caregiver, Kamuli, Uganda)
Child behavior	Some children do not listen to their parents. She may tell you not to go for late night clubbing and you insist and go and end up being arrested for being a thief when walking at night. (Reintegrating family caregiver, Wakiso, Uganda)

ASPIRES also compared families participating in the project that had experienced a separation to those that had not on a number of household characteristics at baseline (e.g., gender of household head, composition of household, ability to pay for basic needs, and educational status). A few characteristics had statistically significant differences between households that did experience a separation, though they were different in different contexts. In an urban context, the conditions associated with increased risk of separation were low level of educational attainment by the head of household, low level of regular school attendance by children in the household, inadequate family shelter, and absence of caregiver social support. In the more rural context, the conditions associated with increased risk of separation were inability to pay for food over the past three months and having a male-headed household.

Understanding protective factors that might mitigate risk factors can also be useful in the process of identifying families at risk of separation and contribute to determining how families should be supported. Table 3 presents factors identified as protective of children and capacities that support parent and child resilience.

Table 3. Protective factors and capacity for resilience

<p>Capacities associated with family-child separation</p>	<ul style="list-style-type: none"> • Adequate livelihood • Diversity of livelihood strategies • Availability of and access to concrete support in time of need, for example, material, psychosocial, childcare and other support from a friend or neighbor within the community) • Availability of alternative caregivers from the extended family • Succession plan • Access to education
<p>Caregiver resilience capacities</p>	<ul style="list-style-type: none"> • Knowledge of parenting skills and child development • Ability to care for disabilities and chronic illness • Mental health • Coping strategies, problem solving skills • Sense of belonging and community acceptance, mutually supportive caring relationships, social connections • Ability to identify and access outside resources and services when needed • Faith • Flexibility • Humor • Communication skills
<p>Child resilience capacities</p>	<ul style="list-style-type: none"> • Ability to regulate emotion and action • Ability to proactively respond to challenging circumstances and plan for life in ways that prevent or mitigate adversity • Social relationships and ability to connect and interact effectively with others • A good relationship with a least one caregiver • Positive relationships with a case worker or other adult • Positive parenting

(U.S. Department of Health and Human Services 2013, Child Welfare Information Gateway 2014, Child Protection Working Group 2014, Smart 2017, 4Children 2015)

ASSESSING RISK OF SEPARATION IN FAMILIES

Assessing family risk of separation is a somewhat subjective exercise, as risk factors are numerous and vary from one context to another, families are diverse, actual separation incidence is low, and there are no validated tools for measuring risk of or vulnerability to separation. Pathways to separation are diverse, and there are no standards for weighting domains or creating cut-off scores for different levels of vulnerability (Moret 2016). Given these constraints, practitioners should be prepared to put time and effort into identifying and understanding risk factors related to separation for the locations and particular contexts of interest if a contextual analysis does not already exist. Assessments should include family-level and child-level information and consider both push and pull factors locally relevant locally to separation.

Risk of separation assessments described by practitioners interviewed by ASPIRES included many of the risk factors identified above. Assessment methods included pre-screening by local officials based on recommended criteria, followed by a brief household assessment identifying “red flag” characteristics globally and/or locally associated with children separating from families. Community-level referrals were then made based on locally determined criteria, a detailed household assessment was conducted, and government referral was made based on one or more specific complaints (Moret 2016, Laumann 2016-2018). Depending on the context, using a red-flag approach to screen and identify families for program inclusion may be more cost- and time-efficient than using a more broadly focused vulnerability assessment tool as a screening device, although more detailed assessment will be needed after a family is selected to participate in a program (Moret 2016, 2018).





Box 5. Identification of families for screening in AVSI Foundation's Family Resilience (FARE) project, Uganda

In Uganda, in the absence of data on the incidence of family-child separation, AVSI Foundation's FARE project selected subcounties for its prevention of separation programming using data provided by project partners and a government rehabilitation center that suggested which areas had higher levels of family-child separation than others. It then worked with district and subcounty leadership, government community development officers, police, and partners to select parishes in which to work. To identify families at risk of separation, FARE asked community-level government representatives to identify families for screening, using vulnerability criteria provided by the project.

Project staff members then screened the households identified using an adapted version of the Ministry of Gender, Labor and Social Development's Household Vulnerability Prioritization Tool (HVPT); a "red flag"-style tool used in broader vulnerable child programming. The HVPT includes questions about vulnerability in the domains of economic capacity; food security and nutrition; health, water, sanitation, and shelter; education; psychosocial support; and basic child care and protection. With ASPIRES, FARE modified this tool by adding content to the child protection section related to child abuse and neglect and children not living with their families. Households that were vulnerable in the child protection domain and at least one of the first four domains, which were likely to capture economic vulnerability, were screened into the program. FARE easily reached its target for enrollment of at-risk households and felt that the tool accurately identified very economically vulnerable households demonstrating separation risk factors; however, the number of potentially eligible households was larger than the project had planned and had the resources to include. (AVSI Foundation 2019)



Box 6. Hope and Homes for Children (HHC) referral and screening, Bosnia and Herzegovina

In Bosnia and Herzegovina, families thought to be at risk of separation are referred to HHC by municipal centers for social work, schools, health centers, and other governmental and nongovernmental organizations. A multidisciplinary team assesses referred families against a set of criteria it developed by examining causes of institutionalization of children in the country. The criteria include families experiencing poverty, families experiencing unemployment, families with three or more children, families with an insecure housing situation, families where parents and/or children have health problems or special needs, single-parent families, families in which a child was neglected or abused, and families with children already placed in an institution. After accepting families into the ACTIVE Family Support program, Hope and Hopes for Children conducts a comprehensive assessment of the family and its situation, strengths, potential, and needs. (Sofovik, Kragulj, and Pop 2012)



Resources

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Assessing the Needs and Capacities of Individual Families

Practitioners addressing reintegration and prevention of separation use a variety of assessment approaches to assess the characteristics, capacities, and needs of individual families to select appropriate interventions and for case planning and monitoring (Moret 2016). Household-specific assessments can help to clarify the breadth and severity of their vulnerabilities, as well as their strengths and capacities. It may help practitioners identify which families are likely, for reasons of capacity and interest, to be able to make good use of particular program interventions that the organization or its partners offer.

ASSESSMENT APPROACHES AND TOOLS

The approaches and tools used in assessing families at risk of separation or reunifying with children often reflect the particular problems practitioners aim to solve (Moret 2016). For example, a reintegration program might focus assessment of the family on identification of specific issues or needs that led to the initial separation. A program for the prevention of separation seeking to reach a large number of families quickly might emphasize assessing family vulnerability to shocks and stressors prevalent within a particular geographic area so that shared vulnerabilities can be addressed in cost- and time-efficient ways.

Content

Many practitioners use a multidimensional tool or set of tools to interview household members about family composition, living conditions, household economy (e.g., income and its sources, and assets), social relations, parenting capacity and behavior, child protection, physical and mental health, and education to inform their assessment of family vulnerability, needs, and capacities. Assessment tools may be quantitative or qualitative, or a mix of the two. Rapid quantitative tools (e.g., [AVSI Foundation's FARE project's Household Vulnerability Assessment Tool](#)) may be used to gather information in a standardized way so that households may be classified in various ways, compared, and tracked over time using common metrics. Qualitative tools may be focused on immediately identifying specific needs and actionable solutions and understanding past behavior, as reported by [Hope and Homes for Children in Bosnia and Herzegovina](#). Child-specific tools, such as the [Child Status Index](#) (O'Donnell et al. 2013) or [tools to track children's time use](#) (Diener, Moret, and Rutherford 2013), may be used to set a baseline for, and monitor and track progress in the well-being of, individual reunified children or other children in a participating household and can increase the inclusion of children's perspectives in the assessment (Corcoran and Wakia 2016).

Assessment may also include developing an understanding of resources that may be available within the immediate and extended family or the broader community. At the community level, these might include programs enabling access to resources or services, labor that may be available through community schemes or volunteer programs, knowledge, and skills that might assist the family, and private sector resources through donations, sponsorship, or linkages to employment.

Process and frequency

Assessment of families is often done through a combination of interview and observation. In some programs, assessment interviews are conducted by social workers or other professionals; in others, trained paraprofessionals or enumerators may gather assessment data, which is later reviewed and followed up by professionals. Assessment data generally become a part of a family's case file and inform discussions with families about care plans and support needed.

Periodic assessment of families is common to these programs. It can help to focus delivery of services, measure the effects of services, and address changing needs and care planning over time. It may assist practitioners to classify information about vulnerability in a systematic way so that change within and across families in aggregate can be monitored over time to assess the effectiveness of the program or intervention (Mattingly 2015).

The frequency of assessment may be informed by a number of considerations, including the timeframe in which practitioners expect to see measurable change in the indicators assessed, caseload and staff capacity for follow-up, family willingness and availability to participate in repeated assessments, the intended purposes of repeat assessment, the complexity/size of the tool, and the time needed to complete and analyze it. Practitioners typically seek to assess families at six-month or annual intervals, although this is not always logistically possible.

Developing care plans

Household assessments serve as the basis to discuss with a family the kinds of support it needs; some of these discussions may involve local practitioners or other stakeholders, including local or regional government actors. The needs identified in the assessment indicate the kinds of actions that should go into the family's care plan, which is tailored to its need, contexts, and capacities. The plan may draw on multiple sources of support and may seek to leverage synergies among its different domains. Care plans should identify immediate, medium-term, and long-term actions that should take place to address the needs identified in the assessment, who is responsible for the actions, and when each action should take place. They should also describe how the plan will be monitored and give some indication of steps to take if an action cannot be carried out or if the plan fails. Case workers may follow up actions in the plan in meetings or visits with the family or phone calls, review the plan with the family on a quarterly basis to see progress against the plan's goals and objectives, and determine whether changes are needed. (Child Protection Working Group 2014)



Box 7. Case study and family care plan example from Save the Children

The Inter Agency Guidelines for Case Management and Child Protection summarizes a [Save the Children case](#) and provides a care plan example for a family in which the father is stressed and unemployed, the mother has a mental illness but is improving with medication, a younger child is hurt, and the older children have left school to care for the mother and younger child.

In close coordination with the government caseworker, the care team decides to closely monitor the care provided to the children while supporting the family to provide care and mobilize the community to be on stand-by to provide interim care, if needed. Other actions in the care plan include:

- » Advocate to shelter agency for provision of a better shelter (within one week)
- » Advocate to agencies for the father to find employment (within one week)
- » Enroll the father in counseling and parenting classes – direct service (within one week)
- » Refer baby to early childhood development program – direct service (within one month)
- » Plan with family and community to manage the household chores so children can return to school (within one month)
- » Closely follow up mother’s condition with the health agency (fortnightly)

(Child Protection Working Group 2014, p. 61)



Use of assessment data for monitoring and evaluation

Some programs also use assessment data for monitoring and evaluation of program outcomes and effectiveness. Data used in this way are typically standardized and quantified so they can be aggregated and analyzed; depending on program size, geographic coverage, and organizational capacity, this can require a major effort in terms of indicator design, logistics of data collection, data cleaning, and statistical analysis. Programs may choose to analyze data for all participating families or for a sample of them.



Box 8. Family assessments in the FARE and ESFAM projects, Uganda

In Uganda, AVSI Foundation's FARE project, with a caseload of 650 at-risk and reintegrating families, contributed to ASPIRES Family Care's Research agenda. To streamline costs and workload, ASPIRES and AVSI Foundation agreed that they would both use FARE assessment data for monitoring and evaluation purposes. The project collected family assessment data at baseline (before beginning most project interventions), after about eight months of implementation, and near the end of the project (after 12–15 months of implementation) to support family development plans and feed into program monitoring and evaluation. Data collection tools included a version of Uganda's Household Vulnerability Assessment Tool adapted and expanded for the project and the Child and Caregiver Integration Status Tools developed for the project by ASPIRES and Retrak.

Although the caseload was large and the time for data collection was short, FARE opted to have social workers from its implementing partners Retrak, Companionship of Works Association (COWA) and Fruits of Charity Foundation (FCF) conduct and document assessment interviews because it was felt that their professional skills would elicit better-quality information, and their involvement in assessment was important for care planning. Given the large number of families involved, staffing constraints, and challenges with family availability, this decision slowed data collection. For some families, it was difficult to obtain complete data. FARE was unable to collect midline data for some families, because the time and effort involved took staff away from other activities supporting families; however, it had better success at the end of the project as activities were winding down.

In contrast, ChildFund's Economic Strengthening to Keep and Reintegrate Children into Families (ESFAM) project, which also contributed to ASPIRES Family Care's Research agenda and had a caseload of 700 families, had very few social worker staff members, and most activities were implemented by community-based volunteer parasocial workers and economic strengthening facilitators. It hired and trained enumerators to collect data at the same intervals using its similar FamilyStatus Vulnerability Index Tool and the same child and caregiver tools, with fewer households missed. Data forms were returned to ESFAM field staff for review and follow-up after data entry. ESFAM's data collection process for assessment was faster, but there were fewer qualified staff to review and evaluate the information collected and they were unable to discuss it (and clarify responses) with families at the point of data collection. ESFAM social workers and parasocial workers used the FSVI information and other tools to continue to assess and facilitate discussion and care planning with families. For both projects, the number of families the project teams needed to assess in a short period of time in order to accommodate ASPIRES' research needs was very challenging. In turn, this affected the timely development of care plans.



ASSESSING AND MONITORING FAMILIES' ECONOMIC CAPACITY

Contextualized assessment of a family's economic capacities, resources, and assets can help practitioners understand the family's current ability to meet its basic needs, its weaknesses, and its likelihood of responding to shocks with negative coping behavior, such as selling off productive assets, taking high-interest loans, engaging in illegal business, and/or separation (Moret 2016). Assessing economic vulnerability can contribute to overall vulnerability assessment. It can also suggest the type of HES support most appropriate for the family, for example, by locating its position along the [livelihoods pathway](#) and exploring how family members envision needs, stressors, capacities, and opportunities. Assessment may provide information that suggests or verifies a family's eligibility for social protection support. A [child-sensitive approach in economic analysis](#) (i.e., one that seeks to maximize benefits and minimize harms to children) provides important information that can assist practitioners in making realistic intervention decisions that address children's needs, increase positive outcomes, and reduce risks to them (Martin-Simpson, Verjee, and Paruzzolo 2017). Information gathered using a child-sensitive approach can relate to children's key deprivations, needs, risks, and opportunities; children's aspirations, intra-household factors relating to power, decision making, and access to resources; extra-household factors and norms such as safety, gender norms, and cultural views about children; existing policies and services; geographic location in relation to markets and services; and seasonal variations in climate, health conditions, or resource access.

Among different programs, the detail and complexity of economic assessment in programming for reintegration and prevention of separation varies. Indicators used in these programs often relate to such topics as income, expenditures, employment status of family members, savings, access to benefits and resources, financial or other support from family, ability to pay for basic needs, assets, food security and nutrition, shelter, and access to health care and education services. A review of quantitative tools used by programs for prevention of separation, reintegration, and vulnerable children (Moret 2016) found that these tools could determine a general level of deprivation at the households level but did not identify context-specific assets required for economic resilience. They also paid little attention to how households coped with shocks, which limited the tools' ability to inform the design of HES interventions. Table 4 provides examples of indicators relevant to economic vulnerability and capacity.

Table 4. Examples of types of indicators relevant to assessment of economic vulnerability and capacity

Family characteristics	<ul style="list-style-type: none"> • Health status of family members • Labor capacity and task allocation • Child care capacity • Ability to take on new ideas/ways of doing things
Income and expenses	<ul style="list-style-type: none"> • Income level, sources, stability • Expenditures • Employment status of family members • Ability to pay for basic needs
Assets	<ul style="list-style-type: none"> • Current savings • Household assets • Productive assets • Access to state or local benefits and resources • Presence or availability of financial or other support from extended family • Income-generating opportunities
Food security and nutrition	<ul style="list-style-type: none"> • Meals consumed per day • Type of nutrition consumed per day • Reliability of food/nutrition access
Shelter and sanitation	<ul style="list-style-type: none"> • Nature and quality of shelter/shelter construction • Toilet quality and access • Waste disposal arrangements
Utilization of health and education services	<ul style="list-style-type: none"> • Proximity and nature of nearby health services • Type of education services accessed • Number/percentage of household's children regularly attending school

Sofovik, Kragulj, and Pop 2012, Moret 2016, Martin-Simpson, Verjee, and Paruzzolo 2017, AVSI Foundation 2019)

Challenges in and limitations of economic classification of households

Drawing on a pathways approach, some programs in Africa have used quantitative scores to establish economic vulnerability categories, for example, by dividing targeted households into quartiles or other score ranges and assigning a vulnerability category to those groups. In principle, this could allow programs to target households with HES interventions appropriate to their economic vulnerability levels. However, it is difficult to know if score-based placement into economic vulnerability categories accurately aligns household characteristics with those vulnerability categories, since the approaches used to determine those categories tend to be subjective (Moret 2018).

In addition, while these score-based classifications are useful in allowing the aggregation of program participant data and assessment of change in economic indicators over time, they should be used cautiously in planning HES interventions for families, given the diversity of their risk factors and capacities. The number, diversity, and context specificity of paths that can lead to negative economic outcomes for families suggests that strictly linking particular interventions to an economic vulnerability score may be less productive than using it as a reference that can inform, but not determine, HES interventions for individual families (Moret 2018).



Box 9. Good practices in assessing family characteristics, capacities, and needs

- » Include economic status in a multi-dimensional assessment that includes standard child well-being and protection indicators. Ensure that risk factors associated with separation are assessed.
- » Connect assessment to government strategies and standards to ensure relevance and facilitate linkages.
- » Ensure that the assessment tool is relevant to the local context, including risk factors for separation and assets needed for resilience. Include community input in developing assessment tools.
- » Ensure that children's knowledge and views are included in assessment.
- » If categorizing families by economic vulnerability level, try to ground categories in objective, empirical criteria and ensure that assessment aligns with these categories.
- » Ensure that interventions offered to families are relevant to family interests and capacities.

Resources

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Annex 11.2 Family Assessment Form and Annex 11.6 Risk and Protective Factors Tool. In Sofovik, Bisera, Julia Kragulj and Delia Pop. Preventing the Separation of Children from Their Families in Bosnia and Herzegovina: Review of Hope and Homes for Children ACTIVE Family Support Programme in Bosnia and Herzegovina 2003 – 2010. Hope and Homes for Children. Accessed at <https://bettercarenetwork.org/sites/default/files/attachments/Preventing%20Separation%20Bosnia.pdf>.

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MEASURE Evaluation Child Status Index webpage: <https://www.measureevaluation.org/resources/tools/ovc/child-status-index>



The Role of HES in Programming to Reintegrate Children and Prevent Family-Child Separation

A primary role of practitioners is to support and facilitate action by family members (Bearup 2015). It is important that practitioners proactively work with families to address multiple types of vulnerability; engage family members in decisions about how to address their vulnerabilities, build on their strengths, and take ownership of solutions; facilitate synergies between different interventions to address vulnerabilities; and build families' resilience and self-reliance over time. Accompaniment (i.e., the physical or metaphorical presence of a practitioner as a supported person takes action or goes through change), counseling, and feedback are important parts of this process (Laumann 2016-2018). Reintegration/prevention programs should use a holistic set of interventions that link psychosocial, behavior change, skill-building, and HES support at the child, caregiver, and community levels, as appropriate (Mattingly 2015). Practitioners should recognize that family agency and the connections between actions can lead to heterogeneous outcomes of interventions and varying timelines for results.

“Economic strengthening provides an important foundation and enables conditions for addressing risk factors associated with children when working with extremely poor households. But our research suggests that we can’t assume that household economic strengthening will on its own positively impact risk factors related to family separation, as results were much more significant when adding the sensitization component.” Trickle Up Burkina Faso (Laumann 2016–2018)

In reintegration and prevention of separation programming, as in other programming for vulnerable children, HES activities are often intended to address multiple areas of well-being. These areas include basic needs such as shelter, food, and health care, as well as education, child protection, caregiving, supportive relationships, and psychosocial well-being. As much as possible, HES should aim to help families in crisis create and maintain a stable and appropriate family environment so that they can stay together. It should also help families develop sustainable and dignified livelihoods that are at an acceptable local standard and that can further their development in multiple ways. Family members should clearly understand this aim; practitioners highlight the importance of caregivers' understanding of the relationship between HES support and keeping children in family care.

There is a relation between the economic support provided and the family’s ability to keep their children at home only if the family understands the intrinsic value of the support...[and] that they received the support exactly in order to keep their children at home.” HHC Romania (Laumann 2016-2018)

More broadly, HES support can provide an emotional or psychological boost that can stimulate confidence and help family members think about the future with more hope and ambition. It may contribute to an individual or family's social integration by facilitating their ability to participate in community life and setting them on par with other families in their communities (Laumann 2016-2018).

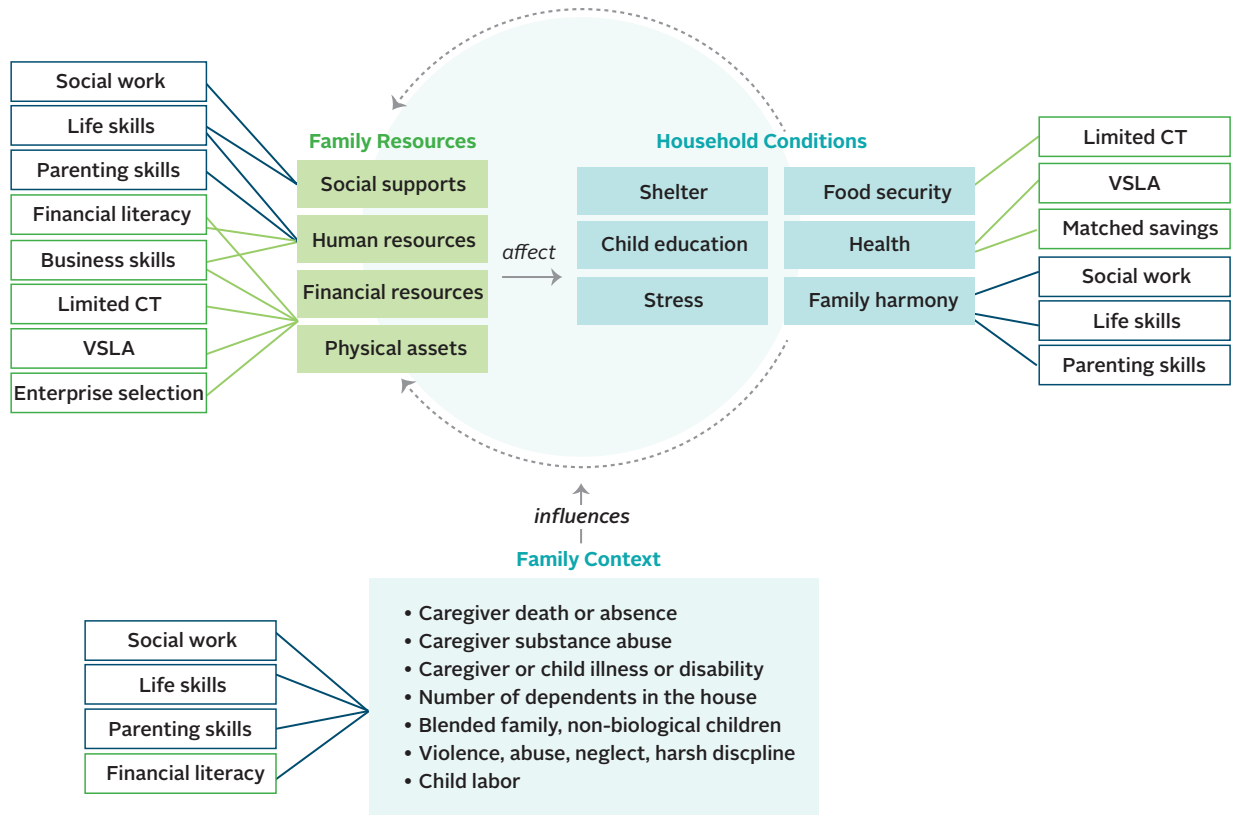
... Our relationship is now better because we are no longer constrained by money problems. I am no longer worried as before, so I do not take out my stress on the children by shouting at them. I talk to them if they have done something wrong. Caregiver, FARE, Kampala, Uganda

HES interventions in reintegration and prevention of separation programming

As indicated above, practitioners recommend that HES interventions address the particular drivers of separation that families are experiencing. HES interventions can facilitate family access to basic needs, for example, by directly providing physical goods and services, providing financial support so that families can pay for goods and services, or linking families to resources and services. They can facilitate access to education, training in business and financial management skills, and the development of vocational or productive skills among caregivers and older adolescents or the creation of opportunities that can lead to work and income. They can also provide productive assets that can be used in generating income, in kind or via loans or grants (Chaffin and Kalyanpur 2014, Mattingly 2015, Laumann, Namey, and Okumu 2017, Delap and Wedge 2016). Figure 3 shows the concept map presented in Figure 3, with illustrative interventions mapped onto elements of the map they may address.

Figure 3. Concept map of drivers of family-child separation with illustrative family social strengthening (blue) and economic strengthening (green) intervention points indicated

Illustrative activities to strengthen family resilience



Good practices for HES identified by practitioners include reinforcing (but not duplicating) social protection support, facilitating access, if needed, to education and health services, and being clear and honest with participants about what the implementing organization will and will not do. Other good practices are developing partnerships to fill organizational capacity gaps in HES by linking with government programs and aligning with government strategies, working with outside technical providers, and collaborating with the private sector (Laumann 2016–2018).

Resources

Delap, Emily and Joanna Wedge. 2016. Interagency Guidelines on Children’s Reintegration. Inter-Agency Group on Children’s Reintegration. Accessed at <https://bettercarenetwork.org/library/principles-of-good-care-practices/leaving-alternative-care-and-reintegration/guidelines-on-childrens-reintegration>.

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Box 10. Good practices in focusing HES on reintegration and the prevention of family separation

- » Align HES with national poverty alleviation and child protection and social welfare strategies, and link families to national, regional, and local programs where feasible and appropriate.
- » Develop clear criteria for assistance in community-based programs, drawing on local, community-endorsed indicators of vulnerability.
- » Engage family members as active participants in planning and implementing actions to address risk of separation or facilitate children's reintegration, including decision making about HES.
- » Ensure HES interventions are relevant and appropriate to the family and local context. Aim to help families reach the local standard of living rather than exceed it.
- » Ensure caregiver awareness that the ultimate aim of HES in programming for reintegration and prevention of separation is to improve children's well-being and keep children in families; when possible, it should move toward helping families establish sustainable incomes and livelihoods so that they can care for children appropriately.
- » Be clear with families about organizational capacity and speak frankly with them about aligning HES support with the best interests of children.
- » Integrate HES and other types of interventions.
- » Facilitate access to education and health services.
- » Work within organization's capacity and focus on what the program can do well. Look for partners and networks that can fill its gaps.

(Laumann 2016-2018, Chaffin and Kalyanpur 2014)



Considerations for Design and Implementation of HES in Programs for Reintegration and Prevention of Separation

Programs develop HES interventions in various ways to support families with economic vulnerabilities. HES can precisely target households' immediate and specific needs and capacities at particular points in time; for example, a program may use HES to reduce the effects of immediate crises that could lead to separation (e.g., by covering housing costs during a shelter crisis). A program may also work to keep children in families over challenging periods of time (e.g., by providing food or other material support on a short- or long-term basis, helping families to cover costs related to education, or linking them to services that can address these needs) (Laumann 2016-2018).

Programs may also use HES to contribute to longer-term safety and resilience of children's families and their environments to reduce the likelihood of a future separation (e.g., by strengthening skills to manage resources, helping family members save money for future needs, increasing employability of adults, and/or helping them find job) (Mattingly 2015, Laumann 2016-2018, Laumann, Namey, and Okumu 2017).

Some programs seek to balance the needs to tailor HES support to family needs and capacities with the need to achieve scale through more standardized and potentially more cost-effective models, such as by incorporating a set of pre-determined interventions, using community-based HES approaches that realize economies of scale, or proactively linking families with existing social protection support (Mattingly 2015, Laumann 2016-2018).

Practitioners have identified a number of considerations and potential challenges related to implementing HES and other measures to support reintegration or prevent separation. Program designers and funders should keep these in mind as they develop HES approaches for programs, make assumptions that inform project design, and consider how programs might mitigate risks and unanticipated consequences. Case managers should bear them in mind as they plan for HES with families, facilitate access to HES support, and monitor family progress.

THEORY OF CHANGE

Practitioners of reintegration and prevention of separation generally see HES interventions as linked to desired outcomes for families through supporting access to basic needs—including children's education—and, to some extent, stability, resilience when shocks arise, and protection from abuse and neglect. Often, however, they are not clear about how exactly this happens and whether selected HES interventions are effective in actually helping in these

areas (Laumann, Namey, and Okumu 2017). Articulating a theory of change for a program in general and for specific HES interventions can help practitioners clarify anticipated cause-and-effect relationships, refine or rethink program design, and plan for monitoring program results. The logic should flow through to the program's monitoring and evaluation plan. A well-thought-out theory of change can also facilitate conversations with families about interventions that can help them meet their needs.

LOCAL ECONOMIC AND MARKET CONTEXT

Understanding the local market is important for selecting and designing HES interventions that are relevant to the local context and to program participants. Organizations without existing livelihood resources and experience and program planners who are not HES specialists should seek support to identify information about the local economy, as well as market opportunities and constraints, and consider their implications for program design. This information might include, for example, market system analyses, which examine exchanges of goods and services, supply chains, and the rules that govern the system; value chain analyses, which focus on supply chains, their rules and systems, and opportunities for greater engagement or efficiency; seasonal calendars; weather data; and cost barrier analyses, which examine, for example, the cost factors that make it difficult for new entrants to join markets (Chaffin, Rhodes, and Carmichael 2013, Martin-Simpson, Verjee, and Paruzzolo 2017, Women's Refugee Commission 2008, Miehlabradt and Jones 2007).

IMPLEMENTATION OF HES INTERVENTIONS VS. LINKING TO OTHER PROGRAMS

While some programs choose to directly implement HES interventions because they have the necessary technical capacity and/or want to maintain quality control over the interventions, some seek to leverage other services or programming in the area. Drawing on other resources in the environment—for example, through social protection programs, where available, and/or community resources—can broaden ownership, increase the breadth of response to particular needs issues as they arise, reduce dependence on the program, and increase the sustainability of interventions and, potentially, of their results.

“One of the lessons we’ve learned in relation to family strengthening is that there is no community that is poor. Poverty is a relative thing and it is the way you perceive it... We changed our terminology and we don’t call people beneficiaries, we call them participants... When you call someone a participant, they perceive that they have a role to play. And when you go to a community and you have an intervention, first of all do a mapping of the resources in the community. You will find that there are a lot of resources there. They may not be monetary; they may be resources in terms of human capital, access to certain properties, or land, or whatever. The question is how do you make them see these things as resources that they can also contribute to whatever intervention you are bringing along.”
SOS Children’s Villages (SCV) Nigeria (Laumann 2016-2018)

IMPLEMENTING ORGANIZATIONS' CAPACITY TO WORK ACROSS SKILL SETS

There is a lengthy history of family reunification projects being designed and implemented by personnel with social work skills, but without adequate inclusion of other personnel with training and experience in HES (Chaffin and Kalyanpur 2014). Both kinds of expertise are needed for effective family strengthening to support children's reintegration and to help prevent unnecessary separation. If an implementing organization does not have a strong HES skill set, it [should consider hiring relevant personnel or seek the collaboration of a suitably skilled organization](#) (Evans et al. 2013).

It is also important that staff with social work/family development skills and those with HES skills take the time to understand the paradigms guiding both areas of work and to develop a shared understanding of how they need to relate to each other over time. It is important to consider at the planning stage what HES support is intended to accomplish in the context of family care plans, what it can realistically achieve within a program, and how outcomes can be monitored and assessed.

In seeking new or external HES expertise, it is important to recognize that community-level economic development practitioners may have expertise in programming that includes poor households, but not necessarily households that are the poorest or highly vulnerable in multiple ways. Some projects use a "one-size-fits-all" approach to HES. While this may be appropriate in some situations where the households concerned are economically very similar, it is important to avoid importing an approach to HES because, for example, it appeared to work in another context or because of assumptions that it can be easily implemented with all households. Interventions must be appropriate to the local market and economic opportunities and to the capacities and limitations of the households served. Where interventions must target individual households that are not concentrated in one specific area, which is likely in the case of programs supporting family reintegration, a program needs the benefit of expertise and experience in developing and implementing effective economic interventions for specific households, including those at the lowest economic level.

PROGRAM DURATION

Practitioners indicate that short program duration will undermine the likelihood of success of HES interventions, given the time required to prepare interventions, encourage and facilitate participation, and enable families to engage in them successfully and experience sufficient and sustainable improvements both in income and resulting outcomes for children (Mattingly 2015, Save the Children 2017, ChildFund International 2018b, 2019, AVSI Foundation 2019). Funders and practitioners should realistically consider the time required to achieve the family integrity outcomes sought and remember that family cases may include issues of abuse or conflict with

the law that can add complexity and time to family support. Experience has shown that, given anticipated and unanticipated challenges, more time is almost invariably needed than initially projected.

Program duration is something funders, designers, and implementers must think about carefully. New programs may require extended start-up periods to refine program design; develop or refine tools and materials; develop partnerships; procure project materials or in-kind support items for project participants; train staff, volunteers, and other collaborators; and overcome unforeseen challenges. The time required for the case management process of monitoring the safety and well-being of a child who has been reunited or placed in a family is likely to be at least one year, and some agencies insist that much more time is required. Supportive services, including those addressing consumption related to basic needs and children's education, need to be provided for a sufficient period to enable households to stabilize and adequately meet their own needs. Likewise, HES activities will need to continue for a sufficient period of time to have a sustainable effect on family economic activities and assets; otherwise, a family risks losing gains made during the program and sliding back to its previous economic status.



Box 11. Duration of HES support in Ethiopia and Moldova

In its prevention of separation work in high-risk areas of Hadiya and Wolayita zones in Ethiopia's Southern Nations, Nationalities and People's Region, Retrak formerly planned for three-year programs to enable self-help groups, which include group saving, to become independent and self-sustaining. It found this was not quite enough time and extended its program timeframes by a year (Laumann 2016-2018).

In Moldova, the government provides financial support to reunified families of about US\$236, which may be paid in a single payment or in multiple payments over a six-month period. Limited government resources pose challenges for ongoing support. CCF Moldova indicates that reintegrating families and families at risk of separation requires an average of 12 months of active intervention. Some reintegrating families require up to two years of intervention support of various types. Through their child care reform work, directly or with partners, Lumos and CCF Moldova offer additional HES interventions based on family need, including referral and support to access services, short-term food and material support, short-term cash support, school-/preschool-related costs, access to technical or vocational education or training, and productive assets or related grants. (Laumann 2016-2018)



PLANNING WITH THE END IN MIND

Program planners are faced with two types of exits: the exit of families from programs because the objectives of a care plan have been achieved, and program exit when funding for a program ends. Participant and program exit should be considered from the start of a program. Planning for the exit of families from a program requires being clear with families about how the program and collaborators will assist them, what changes indicate readiness to exit the program, that support will reduce over time, and that the program will seek to link them with local support structures, as possible. Planning for program exit requires clear communication with communities and local government, identifying ways to embed support capacities in communities and engagement with local support structures to identify ways they can continue to support families as needed when programs finish.

ADEQUATE RESOURCES FOR HES ACTIVITIES

A sufficient commitment of resources for HES interventions is essential for effective support to families at high risk of separation in order to enable families to improve their conditions that can lead to separation. For example, if cash transfer amounts are too small to address important needs, such as being able to invest in livelihood development or asset creation (particularly for large households) and/or the duration for which they are provided is too short, they may not be effective (Roelen et al. 2017). Inadequate resources can push practitioners toward focusing on families that are less vulnerable but more capable of participating in, benefitting from, and demonstrating change attributable to the HES interventions offered.

Limited resources may also prevent programs from ensuring adequate staffing for case management and the related follow-up of HES interventions, as well as for HES activities themselves. It may also prevent them from offering activities best suited to hard-to-reach program participants, with implications for participation and development of hard and soft skills important for improving family economic well-being. In addition, limited resources may prevent programs from engaging relevant partners with better capacity to design and implement HES activities. Implementers and the funders that support them need to seek a balance that supports families adequately for a period of time sufficient to make a sustainable difference in their economic situation, while benefitting as many children and families as possible with the resources available.

LOCATION AND ACCESSIBILITY OF PROGRAM PARTICIPANTS

The physical location of project participants may also pose challenges to practitioners in HES and other programming. Families may be located in areas where topography, seasonal weather conditions, or conflict make them difficult to reach and support. Reunited families or families at risk of separation may be dispersed across large geographic areas, making it hard to offer them group-based interventions, such as saving groups, and hard for professional and para-professional staff to reach, support, and monitor in time- and cost-efficient ways. It may be technically, logistically, or financially difficult for a single organization to manage a

large number of HES interventions over a large geographic area. In some programs with both reintegration and prevention of separation components, reintegrating families may receive less HES intervention support and have less interaction with case workers following reunification than families in their prevention caseload, who may be more geographically concentrated.



Box 12. Enhancing HES interventions for families of returning children

In Uganda, ChildFund's DOVCU and ESFAM projects and AVSI Foundation's FARE project found that children returned to families over a much broader geographic area than they had initially anticipated, making it more challenging to provide and follow up on HES and other support. FARE added an additional HES element—hands-on training in the production and sale of household items such as soap, student copy books, and paper bags—late in the program to address this perceived gap in access to HES. ChildFund's DOVCU and ESFAM projects provided reunification kits to families that aimed to reduce the economic burden of a child's return to the family; these kits included a variety of items, including bedding and food. DOVCU and ESFAM also provided cash transfers to destitute families, and ESFAM offered a matched savings account to some struggling families and financial literacy training and coaching to all families. This individualized support ensured that reintegrating families benefitted from some form of HES. (ChildFund International 2018b, 2019, AVSI Foundation 2019)



INCLUSION/EXCLUSION IN HES ACTIVITIES—GENDER, DISABILITY, DISCRIMINATION

A program should clearly and transparently define the characteristics of households that are to be included and the aims that it seeks to help those families achieve. This may also require being clear about characteristics of households that will not be included in prevention of separation programming, and why. It is also important to think about, and discuss with participants, how HES interventions are intended to affect children's well-being and how they will be monitored.

In addition, program planners and implementors should anticipate and seek to recognize community power dynamics that come into play as some households begin to accumulate and control more resources (Chaffin, Rhodes, and Carmichael 2013, Trickle Up 2013) and how new resources may influence relationships and power dynamics within the household. For example, some income-generating activities have typically been seen as the responsibilities of men or as ones in which disabled people are unable to participate. Practitioners should discuss such issues directly with participants and seek creative ways to surmount barriers and minimize potential conflict (Trickle Up 2013). They may also seek to involve respected community members, such as religious or other leaders, to take the lead to address these issues.

Families with particular challenges (e.g., with members who are sick, disabled, imprisoned, or extremely poor) may find it hard to engage in market-based HES or to participate in activities without depending upon older children, who should be in school, to provide care for their younger siblings (Chaffin and Kalyanpur 2014). Implementers may need to consider alternative activities for them or consider additional activities, such as cooperative day care, that may ameliorate the issue.

It's important to explain the project very well to the husbands of the women involved and to the community as a whole to mitigate social pressure on the husband about his wife's activities. It's good to involve them in some elements of coaching visits... and to involve them in the livelihood planning process and some progress check-in. Sometimes coaches mediate between the participant and husband. They might engage the village council to assist. Sometimes, a VSLA might send a group to speak to a husband, or, for example, in the case of a girl being withdrawn from school, to request the school principal to speak to the husband. Trickle Up Burkina Faso (Laumann 2016-2018)

FAMILY CAPACITY, EXPECTATIONS, AND CONCERNS

HES support to reintegrating families or those at risk of separation should take family capacities and circumstances into account. While developing entrepreneurship skills is often a default HES option in places where access to the wage labor market is limited, not all participants have the interest and capacity to be entrepreneurs; program design and case planning discussions should be sensitive to this. Programs may also need to improve their ability to provide economic strengthening and inclusion support to families with disabled adults to increase their capacity to be economically active (Leymat 2011, Handicap International 2006). They may also need to consider ways youth may appropriately participate in HES.

Some programs find that families have unrealistic expectations about the kind of HES support a project may provide. This is often the case when they have undergone a substantial selection process and/or when the nature and financial value of support is segmented by vulnerability-level classifications that distinguish between different households in the same community. Some families may be reluctant to participate because they fear they will be stigmatized by others in their communities due to their program eligibility and participation, or they may drop out if other households (e.g., those assessed as more vulnerable) receive more support than they are offered. Some families may be reluctant to participate in activities because they do not think the HES support is likely to be helpful or until they see that others have benefitted from those activities.

TIMING AND SEQUENCING OF HES INTERVENTIONS

Practitioners should give careful thought to when families will be best able to benefit from specific HES interventions. Families in crisis may not be psychologically or emotionally ready to start a training activity or a business. Coordination between families and the practitioners responsible for implementing and supporting portions of the care plan can be helpful for timing activities appropriately. Support in developing financial and budgeting skills, in addition to addressing consumption needs, may be a good place to start. A lag between enrollment and starting some form of HES demotivates some families.

Timing may pose particular challenges for reintegrating families. It may be difficult for practitioners to know in advance when separated or unaccompanied children will be placed with families, making post-reunification activities, including HES activities, challenging to coordinate and schedule. Implementers should give thought to whether pre-reunification HES support to families is needed to prepare them for a child's return and, if so, whether this support is sufficient to compensate for any limitations in the implementer's ability to provide post-reunification HES support.

A lag between reunification and the provision of economic support may contribute to post-reunification stress and reduce interest in participating in the program over the longer term; therefore, practitioners need to develop strategies to provide support quickly when necessary. In some cases, it may be better to begin HES support before the reunification takes place—and risk the loss of those resources if the reunification does not take place.

Seasonal economic activities or weather patterns may also affect practitioners' ability to meet with or provide support to program participants. Implementers should aim to identify these potential constraints when designing and enrolling participants in programs so that their interventions reflect and respect the productive activities that already contribute to family incomes. They should be aware of potential slow agricultural or other periods when program participants may have more free time, giving thought to the timing of interventions to enable essential support when needed.

Box 13. Adapting VLSA practices to member needs in AVSI Foundation's FARE project in Uganda

In Kampala, AVSI Foundation's FARE project ran into challenges when mobilization to participate in VSLAs coincided with a seasonal snack-processing activity. Many residents of the slum areas where the project focused its activities were occupied with this seasonal labor and, therefore, were less available to participate in VSLA meetings. As a result, staff went to processing sites to mobilize targeted project participants and their acquaintances. Some of the FARE VSLAs adapted their attendance standards to accommodate members whose seasonal work or work in locations distant from home made it difficult for them to participate during that time. These adaptations were somewhat outside of VLSA best practices, but they resulted from members' assessments of what was realistic and appropriate in their context. (AVSI Foundation 2019, Moret and Ferguson 2018b)

POTENTIAL FOR UNANTICIPATED NEGATIVE CONSEQUENCES

Programs should avoid creating perverse incentives for families to seek support, communicate consistently with families about the purpose of HES, and remain watchful for unanticipated consequences. Being discreet about cash transfers, for example, may reduce a potential incentive to send a child away in the hope of attracting support for reunification, or the possibility that a family may foster children primarily to receive benefits or to work in a family business instead of attending school (Chaffin 2011, Chaffin and Kalyanpur 2014). Facilitating income-generating activities may have intended effects in terms of increasing children's work.

Saving match activities may prompt some families to borrow from other, potentially higher-risk, sources so that they can use the borrowed funds to increase the matching amount they receive through a project. Pressure from savings groups to borrow to increase profits from interest may lead participants to take, and pay interest on, loans they do not really need. Practitioners should monitor potential issues related to saving and coach individuals and groups to avoid saving behavior that might not be in their best interests or the interests of children.

EXTERNAL ENVIRONMENT

Climate crises such as drought or flooding may require implementers to revise or adapt their HES strategies. Implementers in crisis-prone areas may need to give thought to emergency contingency planning in program design and develop project plans that help families prepare to cope with climate events. Challenges in the broader economic environment, such as inflation and related rising costs, or poor job opportunities, may make it unrealistic for families to save money, impossible for the value of their savings to keep pace with inflation, harder for families to find jobs or engage in market-related activities, and more difficult for them to support their children. Implementers may need to adjust project design and expectations in response to significant changes in the economic environment.



Box 14. Effects of the external environment in Burundi and Uganda

During the implementation of IRC's Family Care First project in Burundi, the inflation rate increased from 4.4% to 13.2%, which increased reunification costs for the project and families and limited the number of families financially able to receive children. It also affected families' abilities to save money in VSLA or elsewhere or to benefit from income generation support, in part because higher costs meant there were fewer customers in the market. (International Rescue Committee 2017)

Some VSLA in ChildFund's DOVCU project in Uganda stopped saving for a time during a drought crisis when members did not have money to save. Groups utilized meeting times for other capacity building activities and resumed saving when they had more resources. (Laumann 2016-2018)



Box 15. Good practices designing and implementing HES interventions in programming for reintegration and prevention of separation

- » Develop a theory of change for specific HES interventions and link it to monitoring and evaluation.
- » Access specialist support to understand the local economic context and market; to inform HES design, implementation, and monitoring and evaluation planning; and to support implementation, if needed.
- » Try to ensure that program duration and the duration of HES interventions is enough to support sustainable change, and plan with the end in mind.
- » Carefully consider financial and staffing resources required to achieve desired outcomes and consider reducing program scale if available resources are unlikely to achieve desired outcomes.
- » Design interventions with participant accessibility and likely power relations in mind and consider and consider back-up plans and alternative strategies if initial HES interventions are not successful.
- » Align HES program offerings with family capacity as the family enters a program and as its capacity evolves over time. Discuss family expectations, concerns, and availability to participate in HES interventions, as well as what the program is able to offer.
- » Be aware of the potential for interventions to create perverse incentives and have negative effects, and monitor this at the family and program levels.



Resources

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Matching HES Options to Family Characteristics, Contexts and Capacities

HES interventions offered and provided to a family should integrate with the non-economic interventions in its care plan. Practitioners recommend that HES aim to address potential drivers of separation specific to the family, be monitored to assess progress or problems, and then be adjusted, if necessary (Laumann 2016-2018). HES should also consider a family's current economic activities, respond to a family's economic vulnerability level and capacity, and help it move toward a sustainable livelihood that meets children's basic needs, including education. This section reviews household and economic environment considerations relevant to the identification of HES options for a family and discusses matching HES to family economic capacity.

CONSIDERING FAMILY CONTEXT

In developing HES to best address family characteristics, circumstances and context, practitioners should consider how they interrelate. Table 4 gives examples of household characteristics, information about the economic environment, and questions practitioners might consider when thinking about HES approaches and activities to use with families.

Table 4. Household and economic environment considerations relevant to HES selection

Household Characteristics	Economic Environment	Consider
<ul style="list-style-type: none"> • Household size • Adults in household • Concentration or dispersion of family members • Current and previous economic activities • Access to land • Labor capacity and constraints (age, disability, chronic illness) • Division of domestic work • Knowledge and skills • Availability of child care • Proximity of services • Existing knowledge and capacities • Existing assets • Ambition and hope 	<ul style="list-style-type: none"> • Rural, urban, or peri-urban • Agriculture and market systems • Proximity of places to earn income • Employment opportunities and constraints • Business opportunities and constraints • Climate/weather context 	<ul style="list-style-type: none"> • How can the family build on what it is already doing or has done in the past? • Can the family be connected to a social protection program? • Is another organization better placed to provide HES services to the family? • When should HES support be offered? • What are incentives for family members to participate in HES? • What perverse incentives related to HES options might exist? • How might the HES options affect children? • Will HES options affect or require child care? • Are HES options sustainable? • How can the family become less dependent? • Who would benefit from possible HES options? • How might it affect the distribution of power in the family? • Are family members (men, women, children) open to new initiatives?

MATCHING HES TO FAMILY ECONOMIC CAPACITY

Identification of HES options appropriate for a family should start with looking at the family's current economic activities and level of economic vulnerability, considering the extent to which economic activities support family needs and general well-being and how they affect, and are affected by, the family's other strengths and vulnerabilities. The HES plan should consider the best entry point for HES, given the family's level of economic vulnerability, its characteristics, and context, and the extent to which children's educational needs are being met. For example:

- A family **generally unable** to meet its basic needs may initially benefit most from consumption and money management support to help it stabilize before it takes on new HES activities.
- A family **sometimes able** to meet its basic needs may initially benefit from money management support, saving, and development of productive, business, and/or employability skills to help it stabilize consumption, build some assets, and position itself for further livelihood development.
- A family **usually able** to meet its basic needs may benefit initially from money management support to help it plan to invest in family members and livelihood development, along with opportunities to improve its employment or business.

Table 5 identifies broad types of HES activity based on their intended purpose and gives examples of HES interventions that support those purposes.

Table 5. Broad types of HES by purpose and related HES interventions

Type of Activity and Purpose	Examples of HES Interventions Appropriate to Intervention Types
<p>Consumption support to address basic needs and stabilize the family</p>	<ul style="list-style-type: none"> • Linking families to social protection mechanisms • Cash transfers • Reunification package/kit • Providing specifically needed goods • Paying for shelter or shelter improvement • Providing school access, paying for school fees and materials
<p>Money management and asset-building support for basic and educational needs, resilience to shocks, and positioning for investment in the future</p>	<ul style="list-style-type: none"> • Developing financial literacy/financial capability skills • Community-based savings and credit groups • Savings accounts and matched savings accounts
<p>Income promotion to develop job or productive skills and use skills in a livelihood</p>	<ul style="list-style-type: none"> • Developing productive skills (e.g., in agriculture and processing) • Developing business skills • Providing seed capital, equipment and inputs • Linking families to formal microfinance for business growth • Providing access to vocational or apprenticeship training and job preparation • Supporting or assisting job placement

Practitioners should be aware that family HES needs and capacities may relate to more than one of the broad activity types at any given time. The [HES Activity Selection and Planning Tool](#) in Annex 1 can assist practitioners to analyze a family's economic situation and identify appropriate activities.

Common HES Interventions

An HES plan may draw on multiple sources of support and evolve over time as the family's needs and capacities change. The following sections describe specific HES interventions, their purposes, characteristics of families for whom they might be most appropriate, and considerations for implementation. A description of the evidence base in relation to vulnerable children and links to relevant resources are provided where available.

LINKING FAMILIES TO SOCIAL PROTECTION MECHANISMS

Description

Ensuring that families that are reintegrating or at risk of separation are linked to the social protection mechanisms that are available to them is a key action that practitioners should take to support families' economic stability. Very poor people often lack access to contributory social protection mechanisms associated with participation in the formal labor force, such as pensions, insurance, and spousal benefits. However, they may be targeted for social assistance (e.g., conditional or unconditional cash or income transfers, social pensions, grants, school feeding, or public works), subsidized insurance (e.g., for health care), and service access mechanisms by meeting income or other vulnerability criteria (e.g., poverty level, pregnancy, new motherhood, orphanhood, or old age).

Purpose

Social protection programs address deprivation, vulnerability, and risk and are often seen as ways to reduce poverty, inequality, and social exclusion (United Nations Research Institute for Social Development 2010, Sanfilippo, de Neubourg, and Martorano 2012, PEPFAR 2012). They may provide families with predictable income support that can boost their ability to pay for basic needs and may enable them to save, invest, or develop assets in other ways. Linking families to them is a cost-effective and sustainable way of assisting families to access resources and/or services. Depending on the requirements and family members' capabilities, some families may find no problems in applying for this type of support, while others may need assistance.

Appropriate beneficiaries

Where they are available, social assistance, insurance, and service access mechanisms are appropriate for anyone who qualifies—individuals and families who have trouble paying for basic costs that support a safe, healthy, and stable environment for children and other family members. They may be particularly useful for families that face labor or child care constraints, such as households headed by an elderly person, households with a disabled member or very sick member who cannot work, or those with young children.

Evidence base on social protection

Research on government social protection programs providing cash or asset transfers, subsidies, and grants (e.g., for education, housing, or emergencies), as well as school feeding, has shown that such support can help families meet basic needs; access education, health, and other services; save money; avoid migration for work; enable caregiving of children by extended family members; and increase birth registration (when required as a condition for participation) (Barrientos et al. 2013, Adato and Bassett 2012, Sanfilippo, de Neubourg, and Martorano 2012, Roelen et al. 2017, Arnold, Conway, and Greenslade 2011). Such programs have also been found to produce indirect benefits such as improving caregivers' confidence in their ability to care for their children, reducing resource-related family tensions, improving family dynamics, and reducing money-related risk-taking behaviors by children (Barrientos et al. 2013, Adato and Bassett 2012, Sanfilippo, de Neubourg, and Martorano 2012, Roelen et al. 2017, Arnold, Conway, and Greenslade 2011).

The income effects of these transfers may be little to none if they are of insufficient size, if they are not received regularly, or if caps are placed on the number of household beneficiaries. Concerns and problems may arise if transfer-related work requirements (e.g., in a public works program) affect child care and child well-being or if transfers are used in ways that reflect and reinforce existing household inequalities (Roelen et al. 2017). Coordination between child protection and social protection programs may surface challenges when these programs compete for limited resources and administrative needs crowd out family support (Barrientos et al. 2013, Roelen et al. 2017).

Key considerations for implementation

To the extent possible and practical, practitioners should aim to connect the families with the social protection support for which they are eligible and work with them to plan to use the social protection support they receive. Linking families with social protection mechanisms requires understanding the portfolio of mechanisms for which families may be eligible, eligibility requirements, and application and monitoring processes. Depending on the situation, practitioners may need to assist families with some or all of the processes connecting them to these mechanisms and ensure there is adequate staff time for this. As noted above, the size and frequency of social transfers may be insufficient to family needs, and additional consumption support to fill gaps in social protection support may be required. Connecting financial capability training with cash transfer programs has become a policy priority in a number of countries, although evidence on the effectiveness of the combination is mixed (World Bank 2014); reintegration and prevention of separation practitioners can reinforce and strengthen family financial skills through training and coaching.

For most families, social protection support should be an interim step and not be the end goal of an HES plan; the end goal should be a sustainable livelihood.

Lessons learned and good practices

Practitioners interviewed by ASPIRES Family Care repeatedly stressed the importance of coordinating with government structures at appropriate levels in planning programs, linking families to support systems and resources available through various levels of government, and ensuring the complementarity of different types of support being issued from different sources to fragile families. To strengthen the quality and efficiency of the system and public-nonprofit interface, they recommend working closely with government child protection entities and building the capacity of authorities to identify families in crisis, implement early and targeted solutions, and monitor progress. Monitoring systems should enable practitioners to monitor changes at the family level, identify unintended negative consequences of participation in social protection mechanisms, and facilitate information required for the determination of continuing eligibility.

Common problems and potential solutions

The administrative requirements for connecting families with social protection mechanisms can consume a great deal of staff time. Program designers and managers should consider how programs can balance these administrative and informational requirements with family needs for counseling, coaching, and other support (Roelen et al. 2017). Program designers and practitioners should also be aware that social protection mechanisms may lead to perverse incentives such as gaming the system to access duplicate benefits (Chaffin and Kalyanpur 2014) and unintended negative consequences, such as children left unattended while mothers participate in labor schemes (Roelen 2015, Roelen et al. 2017). They should consider how their program might monitor and address these issues, if necessary. Social protection systems may be limited in scope, poorly resourced, and slow or unable to respond to immediate needs. Practitioners may need to be prepared to provide complementary or emergency support (e.g., immediate food assistance or emergency heating assistance) when required.



Box 16. Hope and Homes for Children (HHC) support complements social protection support in Romania

In Romania, social workers from HHC and district social work personnel work together to make decisions related to HES support. Following assessment of the family using a Quality of Life Tool, staff have discussions with the family, set objectives in the family's Intervention Plan, and prioritize needs. HHC's HES support, if provided, may complement or complete support provided by the state; for example, HHC may cover the costs of a job-related training course for an adult, while the government's social welfare program may support the adult in finding a job. In addition to keeping families together, HHC aims to help families move away from a mindset of dependency. Over the course of time, financial support decreases, and technical support and counseling increase. (Laumann 2016-2018)





Box 17. Practitioner challenges in working with government systems

Practitioners interviewed by ASPIRES described the limited development of the social protection systems and government services with which they worked, highlighting the insufficiency of universal services and of financial resources to meet family needs. Respondents from HHC and Lumos referenced the low capacity of state providers, noting deficit-focused attitudes of government professionals, resistance and mistrust on the part of child protection professionals, lack of commitment from local authorities to provide follow-up support that could increase the sustainability of non-governmental interventions and the lack of government professionals with whom to develop social services. In some cases, addressing government capacity gaps in government necessitates a great deal of training, support and monitoring. (Laumann 2016-2018)



CASH TRANSFERS BY PROGRAMS

Description

Nongovernmental practitioners sometimes seek to replicate some social protection elements in their work, often by providing unconditional or conditional cash transfers. Conditional cash transfers may allow recipients freedom of choice in spending decisions, but are contingent upon specific behaviors, such as use of health, nutrition, or education services or on use of funds for a particular purpose. Unconditional cash transfers allow recipients to set their own spending priorities for the money received. The duration of a cash transfer intervention in nongovernmental programs is generally shorter than in government programs. Transfers may involve regular payments extending over various time periods or one-off payments to individuals or families. Resources may be provided in cash, through electronic means, or in the form of vouchers for a quantity or set value of goods that may be redeemed at pre-selected vendors.

Purpose

Recurring cash transfers are often intended to support and stabilize consumption related to basic needs such as food, water, shelter, education, and health care. They aim to prevent households from having to sell productive assets (e.g., tools or livestock) as a survival strategy that can lead to a further slide into poverty. Recurring transfers or shorter-term interventions (e.g., a one-time transfer) may help a household avoid selling productive assets needed for financial recovery and growth, or they can assist a household to recover lost assets. They can also help a household create new assets, by enabling saving or investment in business, because they help reduce risk and smooth income flow (Adato and Bassett 2012, Evans et al. 2013).

Appropriate beneficiaries

Cash transfers are most appropriate for very vulnerable families who cannot meet their daily needs, have suffered a shock, or have an ongoing situation leading to asset loss or may be experiencing a high opportunity cost for engaging in economic activity (e.g., working or caring for children instead of accessing education that might lead to a better economic situation in the future) (Evans et al. 2013). They are particularly useful for families that face labor or child-care constraints, such as households headed by an elderly person, households with a significantly impaired or ill member who cannot work, or those with young children. They may be useful for families that have a hard time accessing other HES activities. They can be used in both rural and urban settings.

Key considerations for implementation

While cash transfers promote autonomy and choice, practitioners and families find it helpful to precede provision of cash transfers with support and coaching to strengthen their financial capabilities (e.g., financial planning, budgeting, money management, saving and borrowing, and accessing and using financial platforms) and/or business skills training. Existing financial literacy curricula may be reinforced with additional attention paid to [budgeting, with optimal use of cash transfers in mind](#) (World Bank 2018). Families may benefit from continuing

discussion and coaching on how they spend resources. Post-disbursement monitoring is important to ensure that recipients are using transfers in ways that address drivers of family child separation (e.g., access to basic needs, children's education, emergency saving and investment in income generation) and improve the well-being of children.

Cash transfers need to be handled carefully for a variety of reasons. While the costs of the transfers themselves, the administrative setup, and logistics may be high (World Health Organization 2018), they are often seen by practitioners as more cost-efficient and empowering than other interventions and can have immediate effects (Laumann 2016-2018). This depends on context, design, and the quality of implementation.

Practitioners need to make sure that transfers do not duplicate support available from a government source. Selection criteria must be appropriate to the context, realistic in terms of what the program can provide, and clear and transparent. Providing cash transfers can provoke jealousy and bullying on the part of nonrecipient households, lead to stigmatization of recipients, or subject recipients to the threat of theft (Chaffin and Kalyanpur 2014). In targeting, implementers may also want to consider the relative costs of an extensive, expensive targeting exercise that more rigorously screens against vulnerability criteria (so more money is available to the poorest), versus a less expensive process that may include more error but allows greater coverage or transfers of more meaningful amounts; the relative costs will depend on the particular situation (The International Rescue Committee 2015). Using a participatory process at the community level to identify households at greatest risk of a child separating can increase community perceptions of the legitimacy of beneficiary selection.

In designing cash transfer interventions in reintegration and prevention of separation programs, practitioners need to consider what recipients may be able to achieve because of the intervention, particularly in terms of children's well-being. Since a project is unlikely to be able to sustain cash transfers for an extended period, the aim is generally to enable an extremely poor household to stabilize while it engages in activities to sustainably produce income. This suggests that cash transfer interventions should take place early in a program to help participants address immediate needs. The amount of the transfer should be large enough to make a meaningful difference in family consumption and should be adjusted to family size; best practice suggests that cash transfers intended to meet basic needs should be based on the cost of a standard basket of goods (Mercy Corps 2014).

Practitioners should discuss the likely duration of the intervention and the exit process frankly with participants before any transfers begin. If transfers are to be recurrent, they should be provided at predictable intervals that make sense in terms of family needs, as well as for the security, functionality, and cost of the process. The duration should be sufficient to enable a sustainable improvement in family and child vulnerability. Delays in providing expected resources can cause problems for the families expecting them and extra work on the part of implementers. When support is provided through vouchers, vendors should be carefully selected and monitored to mitigate the risk of embezzlement (Chaffin and Kalyanpur 2014).

Resources

Mercy Corps. 2014. Cash Transfer Programming Toolkit. Accessed at <https://www.mercycorps.org/sites/default/files/CTP1MethodologyGuide.pdf>.

The Cash Learning Partnership. <http://www.cashlearning.org/>

Moret, Whitney and Michael Ferguson. 2018. ASPIRES Family Care Process Assessment: Cash Transfers for Family-Child Reintegration and Prevention of Separation. Washington, D.C.: FHI 360. Accessed at <https://bettercarenetwork.org/library/strengthening-family-care/household-economic-strengthening/aspires-family-care-process-assessment-cash-transfers-for-family-child-reintegration-and-prevention>.

The International Rescue Committee. 2015. Cost Efficiency Analysis: Unconditional Cash Transfer Programs. Accessed at <https://www.rescue.org/sites/default/files/document/954/20151113cashcefficreport.final.pdf>.



Box 18. Cash transfers in ESFAM and FARE projects, Uganda

The ASPIRES Family Care ESFAM and FARE projects both included cash transfer components that targeted households they classified as destitute. In each project, selection was based on assessment of household economic capacity using standard tools, program design in the context of ASPIRES' research needs, and resource availability. ESFAM planned to reach 408 households with cash transfers; FARE planned to reach 90 households.

Both projects provided unconditional cash transfers, but recipients had to participate in financial literacy or business skills training first. The purpose of the transfers was specified to influence their use; recipients signed agreements, although there was no mechanism to enforce them, that they would use the funds for their intended purposes:

- » FARE's agreement stated that cash transfers should be used primarily for food, clothes, shelter, health, education, income-generating activities, and savings in the VSLA group (participation optional).
- » The ESFAM cash transfer was meant to stabilize destitute households' basic consumption needs so that the children could stay in the household and go to school. ESFAM's agreement stated that transfers should be used for food, clothes, shelter, health, and education, and ESFAM guided recipients to develop plans for how they would use their transfers.

Both projects set a cumulative ceiling of approximately US\$116 per recipient household, following a FARE exercise with a sample of families to determine need based on income and expenses. FARE's exercise yielded an amount greater than it could afford, so it set the amount somewhat lower than the assessed need. Both projects planned to distribute funds monthly—FARE through transfers of about US\$19 disbursed monthly via mobile money for six months, and ESFAM through monthly transfers of variable size depending on household needs.

Recipients greatly appreciated the transfers and the financial literacy and business training that preceded them. They generally used the transfers for the purposes described above and for other urgent expenses. Analysis at endline of 394 at-risk and 82 reintegrating households that received the training and transfers, with or without follow-on savings group participation, through FARE or ESFAM showed:

- » Approximate doubling of median monthly household incomes, except for FARE reintegrating households which recorded a more modest increase;
- » Improvements in ability to pay for basic needs, including food and shelter, health care, and education;
- » Improvements in general wellbeing of caregiver and child; and
- » Reductions in reported or observed concerns with child abuse, neglect, or exploitation.

Reductions in the use of harsh discipline practices were varied, with the most substantial improvements recorded among FARE at-risk and ESFAM reintegrating families. Households in the ESFAM CT and CT+VSLA groups recorded reductions in the percentage of families that reported a child separation between baseline and endline, with a rate of 5.6% (20 of 358) at endline for at-risk families and 2.6% (1 of 38) for reintegrating families, both of which were lower than the aggregate samples for ESFAM. FARE at-risk households in the CT+VSLA group showed the opposite, recording an increase in reported child separations at endline, and a higher-than-average rate of separations at endline of nearly 14% (5 of 36 households). Separations recorded among FARE reintegrating families at endline were also around 14%, similar to the average for FARE reintegrating families.

The projects also encountered some challenges. Both faced some challenges with recipients' mobile phone skills and with government requirements for mobile phone registration that were imposed as the intervention was rolling out. ESFAM's process allowed paraprofessionals to have periodic discussions with recipients about resource planning and resource use, but this was labor intensive and led to much less regular assessment than planned and unpredictable timing of transfers. Both projects felt that the transfer sizes and durations may have been too small to have lasting effects and were not enough to address families' education costs. The transfers may have been most useful for small families, those without pre-existing debt, and those that had some existing income source(s). (AVSI Foundation 2019, ChildFund International 2019, Moret and Ferguson 2018a, Namey and Laumann 2019)

REUNIFICATION PACKAGE

Description

A reunification package or kit generally includes goods of some sort—an asset transfer—provided to a family to which a child is returning.

Purpose

A reunification package is intended to address some immediate household needs, such as improving the physical environment and safety of the home, and to reduce the financial and resource impact of the child's return to the family. The items included may assist the child's transition by providing some continuity with his or her former experience (e.g., a mattress or educational materials).

Appropriate beneficiaries

Reunification packages may not always be necessary and appropriate. They may be suitable for individuals and families who have trouble paying for basic necessities that support a safe, healthy, and stable environment for children and other family members. They may be useful for children returning from residential institutions, juvenile detention facilities, or the street to households that lack adequate food or household items to ensure a reasonably comfortable environment for family members upon the return of a child. They may also be appropriate when children associated with armed forces or armed groups are demobilizing (Wedge 2013).

Key considerations for implementation

Material support for reunification must be handled carefully (Delap and Wedge 2016). It has the potential to cause conflict within the household if it is seen to benefit some members more than others. It might serve as a perverse incentive for separation if the return of children is seen as a source of material support. It might also cause some antagonism from neighbors and could be co-opted by them.

Practitioners should carefully consider the timing of the delivery of the reunification package, specifically whether it should be provided before the reunification of the child so that the materials are in place when the child arrives, with the reunification of the child, or at some point following reunification. They should also consider ways to maintain a low public profile for such support.

While practitioners suggest that reunification kits should be tailored to a family's specific needs, programs operating at relatively large scale may need to consider some standardization, since the logistics of procuring and delivering reunification kits can be time-consuming and challenging. Providing a reunification cash transfer or vouchers may be lower cost alternatives to directly providing material goods. However, families in more remote areas may have difficulty purchasing essential items to facilitate a child's integration into the household and may prefer to receive material items.



Box 19. Family reunification kits in the DOVCU and ESFAM projects, Uganda

ChildFund’s DOVCU and ESFAM projects in Uganda provided reunifying families with items including mattresses, blankets, sanitary pads for girls, clothing, and school materials, as well as soap, sugar, beans, maize flour, and high-protein porridge flour for babies. The projects used their household assessment tools to determine needs and aimed not to focus their support solely at the reunifying child but to benefit multiple family members in some way. The average cost of an ESFAM reunification kit was about US\$90. In both projects, kits were distributed several months after children were reunified.

Some DOVCU stakeholders felt that the kits did not arrive in time to ease reunification pressures and reported that some children decided to leave their households before families received the kits. They felt that receiving the kits might have aided in children’s adjustment and their retention in care. Other stakeholders felt the timing was not problematic:

“When children were resettled first, we didn’t promise that there was any kit. The issue was focusing on the process. So, when they received the kits this was taken as a surprise and some households took that as a thank you—a gift.” (Severinsson 2018, ChildFund International 2018b, 2019)



PROVIDING SPECIFICALLY NEEDED GOODS

Description

Beyond reunification packages aimed at easing the return of a child to family care, practitioners may also directly provide a variety of goods to reintegrating families or families at risk of separation throughout the course of a program based on need. Practitioners report providing food, clothing, hygiene items, home appliances such as stoves and washing machines, furniture, urgently needed medications and medical supplies, and disability aids to families. Items might be purchased by the practitioner organization or obtained in partnership with another entity. (Laumann 2016-2018)

Purpose

Practitioners provide these goods to encourage children to remain at home, improve the physical environment and safety of the home, and support family equilibrium during a crisis so that a family can reestablish an economic base.

Appropriate beneficiaries

The direct provision of goods is most appropriate for at-risk or reintegrating families who cannot ensure that their family's immediate basic needs are addressed and/or may be faced with unpredictable needs. They may feel overwhelmed, be unable to buy needed items themselves, or be unlikely to purchase the items needed.

Key considerations for implementation

Provision of goods should be done in conjunction with other HES and non-HES interventions, based on needs identified in an assessment or in response to a sudden crisis. By directly providing goods, programs ensure that the family receives the resource intended and does not use it for other purposes; providing goods directly may also be simpler for them administratively than managing small, ad hoc cash transfers, particularly if the program does not have, and does not want to have, an established cash transfer system. Practitioners should discuss with families the purpose of this type of support, its likely duration, how families will use the resources provided and how they will manage if and when this support ends. Some families (e.g., those in which adults are unable to work) may never achieve independence and long-term social protection support, if available, or other solutions such as extended family support or community support may be required.

PAYING FOR SHELTER OR SHELTER IMPROVEMENT

Description

Shelter support can include a wide variety of measures to improve housing conditions. For example, some projects have covered (or contributed to) rent, utility costs, and/or taxes. Some have paid for or contributed to renovation costs or home construction costs, or costs for building water points or toilet facilities and addressing other household hygiene needs. Practitioners might also refer families to agencies specialized in housing support.

Purpose

Achieving adequate shelter helps to ensure the safety and security of children and other family members. Shelter support can take pressure off of caregivers and help them to focus on other things that are important for their family. If it is possible to enable a family to own a home that it has the capacity to maintain, the house becomes an asset that relieves them of the need to pay rent and helps protect them from future shocks.

Appropriate beneficiaries

Shelter support is appropriate for highly vulnerable families living in conditions that are not conducive to the health, safety, and well-being of family members, or for families at risk of losing their housing. It is appropriate for families for whom loss of shelter or unsafe shelter could mean family separation, families in which elderly or sick caregivers cannot take on major tasks to improve home safety and hygiene, and families who lack the social and community network or government social protection schemes to assist them with safe and dignified housing.

Key considerations for implementation

Practitioners should consider the urgency of the need for shelter support, the cost to their agencies, and whether there are other partners in the environment to whom families may be linked for this type of support. They should carefully consider, and discuss clearly with families, the likely duration and extent of this type of support and the role of family members in contributing to this support. While addressing an immediate need, shelter support should be coupled with longer-term HES strategies that strengthen family capacity to pay for shelter costs (e.g., by developing income generation capacity or using savings or a portion of cash transfers for shelter improvement) and ultimately reduce family dependency on the program. Some families (e.g., those in which adults are unable to work) may never achieve independence and long-term social protection support, if available, or other solutions such as extended family support may be required.



Box 20. Collaborating to provide material support to reunified families, HHC Bulgaria

In Bulgaria, an HHC program sought to reduce the number of children with disabilities in institutions. Highly skilled assessment reduced the number of children identified as needing specialized treatment that included residential care. Legal support assisted families to challenge court decisions to remove their children from their care. In collaboration with communities and local businesses, the program provided reunified families with in-kind material support and sought to develop wider support networks for these families. (Bilson and Markova 2014, cited in Delap and Wedge 2016)



PROVIDING SCHOOL ACCESS AND PAYING FOR SCHOOL FEES AND MATERIALS

Description

Support for school access and participation costs may include providing families with resources specifically for school-related costs, paying school-related fees (formal and sometimes informal) directly to the school/preschool; providing/paying for school materials, supplies, uniforms, and sport shoes; paying for tutoring and other supplemental support; and providing transportation, such as bicycles, or transportation costs. It may also include block grants to schools attended by children from targeted families that support rehabilitation and other costs at schools in exchange for allowing targeted children to attend at reduced rates or ensuring that assistive equipment is available in schools for use by targeted children.

Purpose

Support for school access and participation costs facilitates education and development (including through play), supports children's participation in school life, contributes to children's sense of achievement and belonging, and facilitates disabled children's access to mainstream education.

Appropriate beneficiaries

Support for school access and participation is appropriate for families who are unable to cover the full costs of schooling or who have other problems accessing schools. In some families, providing school support may influence caregivers to place a higher priority on children's education and divert children from other tasks, such as caring for siblings, that could affect their school attendance and participation.

Key considerations for implementation

Children's education is a high priority. Practitioners should consider, and discuss with families, the urgency of children's and families' needs for school support, the duration for which it may be provided, expectations for family contributions and responsibilities, and the extent to which the organization can provide this type of support in the context of other needs. Practitioners should support families to plan to meet children's education needs themselves and help them prepare for the end of program support. Some practitioner organizations choose to provide school support directly to schools and to provide school materials and other items because they feel that providing cash to families for children's education-related costs may be risky: money could be lost or stolen, or families might spend it on what they see as a more immediate need.

While practitioners should seek to limit family dependence on their programs, they should also remain alert to shocks such as job loss by a caregiver, a fire or climate shock, illness of a family member, or abandonment by a parent that might lead to reduced attendance or dropout even if school support is provided (Jordanwood and Monyka 2014), and should seek ways to mitigate them so that children can remain in school.



Box 21. Reduced school fees in exchange for school infrastructure improvement and supplies, Save the Children Democratic Republic of Congo

In the Democratic Republic of Congo, Save the Children's *Soins Appropriés pour les Familles et les Enfants* project sought to reduce family separation and mitigate risks to children living on the streets or in contact with the law in three cities. To families reintegrating children, Save the Children's partner CARE provided training on income-generating activity management and income-generating activity kits. Save the Children also performed minor rehabilitation and hygiene improvement work in 16 schools and provided them with school supplies. In exchange, the schools reduced fees for the students targeted by the project, which helped to increase enrollment of reunified children. The project also supported informal skills training for some older reunified children. Families in Bukavu reported that the main uses of income surplus (perhaps facilitated by income-generating activities) related to priority needs such as the schooling of children; buying enough food to provide two meals per day; payment of health care costs, rent, and clothing; and home rehabilitation and maintenance. (Save the Children 2017)



DEVELOPING FINANCIAL SKILLS

Description

Support for developing financial skills in reintegration and prevention of separation programming may include structured training on financial literacy (e.g., understanding how to make, spend, save, and invest money; financial services and credit and debt management), coaching and mentoring on budgeting and use of money, and coaching and mentoring on use of resources provided by programs.

Purpose

Developing families' financial skills supports their capacity to provide for their basic needs and ensure that their use of earned or provided resources is effective.

Appropriate beneficiaries

Development of financial skills is appropriate for all families; even families who have some skills can improve them. Training and other skill building activities provide an opportunity to help families plan and budget with outcomes for children in mind. While some family members may initially feel that if they lack money, there is no point to learning how to manage it better, practitioners and program participants report that learning to use money and other resources wisely is empowering. Financial literacy training and support can be developed to be age-, gender-, and context-appropriate.

Evidence

While governments are increasingly embracing financial education strategies as a means to protect consumers by increasing their capabilities, the evidence base related to effectiveness of financial education is limited and mixed, possibly due in part to the quality of design of financial education the quality of program design (World Bank 2014, Kaiser and Menkhoff 2017).

Key considerations for implementation

Development of financial skills can be done as a standalone activity but can also be effectively coupled with other HES interventions such as cash transfers and saving-related activities or in connection with other community platforms. Caseworker discussions and coaching sessions with families also offer opportunities to discuss income growth, spending and saving strategies in relation to children's needs and well-being.

Good practices for the development of training programs include carefully tailoring the language of delivery and materials to intended participants (including translation of difficult concepts), accommodating the lifestyles and schedules of participants, tailoring the length and frequency of training to participants, ensuring that trainers understand and internalize the content and are well-trained to deliver the curriculum, and ensuring that trainers are supported by detailed and well-developed training guides and resources. They also include ensuring that the curriculum and materials are tailored to the age of participants and likely

events and decisions they face, that training is customized to the social and cultural context, that it offers opportunities for practical application of skills, and that training reflects and accommodates changing demands in the consumer market and product innovation (including through technology) (Genesis Analytics 2013).

I have become like a teacher in my home. If I get any money, my first priority is to spend on food and school fees and the second is to save in the bank to help in emergency situations and also raise enough capital to start up a business. Caregiver, ESFAM, Gulu, Uganda

[Financial literacy] has helped me to carefully spend the money that I get. Where I could have spent on things that are not necessary, I prioritize the needs of the family. For example, instead of buying, say, a necklace, I buy sugar or soap to be used by the whole family. I am now able to use money the right way. Caregiver, ESFAM, Kamuli, Uganda

Resources

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Box 22. Ten steps to designing a financial education program

1. Identify the need for an intervention.
2. Isolate the audience who will be receiving the financial education training.
3. Survey the target audience to ascertain their baseline knowledge and specific needs.
4. Clearly define the objectives and expected outcomes of the program.
5. Develop a monitoring and evaluation strategy.
6. Draft appropriate content and contextualize for the target audience's demographic profiles, environment, and cultures.
7. Select a suitable method and platform to deliver the financial education.
8. Pilot the program and make changes based on any feedback received.
9. Train-the-trainers on their own financial well-being and the delivery of the financial education content.
10. Implement, refine, and review the program.

(Genesis Analytics 2013)



COMMUNITY-BASED SAVINGS AND CREDIT GROUPS SUCH AS VSLAS AND SELF-HELP GROUPS

Description

Community-based microfinance models offer financial services including savings, credit, and microinsurance to people who are often outside the reach of formal financial institutions such as banks. Assets are owned by group members, so a high degree of trust among the members is important. Together, they establish rules and processes for management of the group and the resources they have invested in it. Some common types of community-based microfinance include accumulating savings and credit associations, now commonly called savings groups (SGs) and self-help groups (SHGs).

SGs, such as the CARE-developed VSLAs, Catholic Relief Services (CRS)-developed savings and internal lending communities (SILC), and Pact-developed WORTH groups, require members to make regular minimum savings deposits (Meaux 2016, Allen and Panetta 2010).³ Members' deposits are pooled into a fund from which members may borrow, often for activities to generate income. These funds are typically held in a locked box, with keys to different locks held by different group members, they but may be deposited in a bank or savings and credit cooperative for security reasons. Group members assess the loan request and loans are repaid with interest. As savings and interest accumulate, the pool available for loans also increases. Groups are typically time-bound, and at the end of the group period (generally nine to 12 months), savings and profits from interest are distributed among members based on the amount they have saved. Groups may also decide to require members to make small deposits into a social fund, which members may access for emergencies and serves as a form of insurance. Groups initially receive training in the methodology and support through one or more cycles, but they are self-managed and self-governing and designated group members hold the cash box and manage transactions, which are observed by the group.

SHGs pool member savings and engage in internal lending similar to SGs, but they do not share out savings; rather, they aim to preserve capital for continued lending. The SHG approach developed in India, and in the Indian model, groups aim to rapidly develop the capacity to deposit joint savings with a bank or microfinance institution to be able to access larger loan funds that they can then loan out to members (National Bank for Agriculture and Rural Development n.d.). In other models, they may aim to provide an alternative to lending by banks and microfinance institutions that have high interest rates (Weingärtner, Pichon, and Simonet 2017). SHGs form federations at multiple levels to achieve economies of scale (Allen and Panetta 2010, Lee 2010) and may combine social empowerment with their financial purposes.

³ CARE initially developed the model in Nigeria in the early 1990s, and other nongovernmental organizations have developed their own similar models to meet their needs (Allen and Panetta 2010). SGs are more common in Africa than SHGs.

Purpose

SGs and SHGs all emphasize saving by members (including saving at a small scale) and access to credit. Saving can be a relatively low-risk and cost-efficient strategy to help families manage cash flow, smooth consumption over periods of variable income, mitigate the effects of shocks, and generate investment capital. Membership in community-based groups may help build bonds between members and may foster social networks that can provide psychosocial support and advice, a sense of social connection and support, and sometimes material support outside the group.

Appropriate beneficiaries

Community-based savings groups are appropriate for people in areas where banking is not available and/or for people unable or unlikely to be able to access services in the formal financial sector. VSLA and similar groups are often found in rural areas where people in communities know each other and can join together with people they trust. These groups are appropriate for many family types, but group members need to have the time and flexibility to participate in group meetings. For SG and SHG members, these meetings may be weekly.

Evidence

Research and program experience indicate that poor people are able to save. However, barriers include a lack of places to save (e.g., formal financial institutions, mobile banking options, and various forms of group savings mechanisms); a lack of trust in the places available to save; and a desire to spend rather than save (Meaux 2016, Steinert et al. 2018).

A 2016 literature review focused on community-based microfinance for orphans and vulnerable children (Meaux 2016) found strong evidence that SGs increase savings and household food security; medium evidence that they increase household assets (e.g., business, domestic, livestock), alleviate poverty, improve health, and improve educational attainment; and weak evidence that they increase child labor. There is some evidence that they play a role in smoothing food consumption and enabling purchase of livestock as a form of saving (Beaman, Karlan, and Thuysbaert 2014). They seem to initiate important changes in quality of life, resilience, and how participants handle existing assets and income. Findings are diverse with respect to education but tend to be neutral or positive. Child-/youth-focused SGs show some potential for impact on the empowerment of girls, and on the health and life skills of children and youth. Combining life skills and HES may help young people balance interest in working with school attendance.

A meta-analysis of saving interventions in sub-Saharan Africa found variability in whether saving interventions may be able to sustain effects for the poorest people. Saving may allow for the accumulation of sums of money that can be invested in opportunities that improve families' economic status and help reduce the intergenerational transmission of poverty, such as education and better housing, food, and access to health care. At the same time, high inflation and economic uncertainty can limit the effects of saving interventions. Saving interventions have demonstrated effects on increases in total savings amounts and the

promotion of small-scale family businesses, increases in household expenditures, incomes, and food security (although effect sizes are low, perhaps because uptake is low or program impact is too small to lift people out of poverty). However, they did not lead to intended economic impacts for female recipients, suggesting that there is more work to be done to address intra-household bargaining power and consensus building. Saving can also strengthen feelings of self-worth and self-efficacy (Steinert et al. 2018).

Key considerations for implementation

The selection of the type of community-based savings group to be used in a program should consider a number of factors, including the goals of the intervention, program duration, capacity to provide facilitation and support, and the model that is most acceptable in the local social, economic, and policy/regulatory context. SGs can be relatively simple to manage, since the duration of a saving cycle is short (typically nine to 12 months), they can be adapted to the local context, and links with banks are not required, although they may be supported. Programs with a longer time horizon, access to banks to deposit larger accumulated savings, and an interest in larger loans might wish to consider using the SHG approach. Both SHGs and SGs can be a platform for “plus” activities such as financial literacy, business skills, parenting skills, and raising awareness of child protection needs and issues. Programs can consider linking families targeted in reintegration and prevention programming with other programs running SGs and SHGs for similar people in their communities; form SGs or SHGs with people specifically targeted by their programs (if numbers are sufficient); or form SGs or SHGs that include both people targeted by their programs and other members of their communities.



Box 23. SHGs and SGs as platforms for more than saving

Retrak's prevention of separation programming in Ethiopia engages women from families identified by their communities to be at risk of separation in SHGs aimed at helping them become economically secure. It is also intended to help them be able to meet the needs of children for food, shelter, health care, education, and emotional well-being in their rural communities so that they do not migrate for work. Trained community development staff with a degree in development or community work facilitate SHGs and provide training on SHG approach, saving, loans, small business skills, parenting, and migration awareness. Members may also choose to access training on topics of interest from other sources. All SHG resources are generated by savings and loans, despite local expectations that programs provide seed funding for SHGs; such expectations sometimes slow the process of group formation, but once initiated, the approach supports commitment, ownership, and sustainability. SHG members almost always report that the economic advantages of the groups are important (and why most women joined) but that, in reality, the social empowerment that happens through the

groups is more important. Women value learning about caring for children, each other, and their communities and the dangers of sending their children to cities to work. They feel that their status in their communities has increased (Laumann 2016-2018).

While participation in a savings group may not lift a household out of poverty, it can help it to stabilize and through other initiatives or program opportunities begin to increase its economic base. Research with FARE and ESFAM VSLA groups, which had a base of program-targeted participants but also included other community members, found that members cited the main advantages of their participation to be “social support and a sense of belonging, supplemental trainings, and improved economic wellbeing.” Members of the savings groups organized by ESFAM who were considered destitute said that social support was an especially important function of the groups. Group meetings offered a platform for discussion about parenting and family relationships and, in FARE, VSLAs also became, or were sources of recruitment for, parenting skills training groups. Members interviewed in a process assessment of the FARE and ESFAM VSLA interventions highlighted the importance of parenting training in improving their relationships with their children and preventing separation (Moret and Ferguson 2018b). Additionally, analysis at endline of 186 FARE at-risk households that participated in VSLAs showed:

- » More than 50% increase in median monthly household incomes;
- » Improvements in ability to pay for basic needs, including food and shelter, health care, and education (from 43% of households to 65%);
- » Improvements in the proportion of households with all children attending school regularly (from 24% to 60%);
- » Improvements in general wellbeing of caregiver and child, including increases in caregiver emotional and material support;
- » Substantial reductions in reported concerns with child abuse, neglect, or exploitation; and
- » Substantial reductions in harsh discipline practices.

FARE at-risk households recorded reductions in the percentage of families that reported a child separation between baseline and endline. The proportion of FARE at-risk VSLA households experiencing a child separation at endline, at 2% (n=4), was slightly lower than for the full sample of FARE at-risk households (Namey, Laumann, Okumu, and Zissette 2019).

Resources

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SAVINGS ACCOUNTS AND MATCHED SAVINGS ACCOUNTS

Description

A savings account at a financial institution allows an account holder to deposit and withdraw money and to earn interest (or profit) on the funds in the account. Savings accounts may be opened at banks (for-profit financial institutions owned by individuals or private investors and governed by shareholder-selected boards), savings and credit cooperatives (SACCOs, member-owned financial cooperatives governed by member-elected boards) or microfinance institutions (organizations that offers financial services to low income populations and those with limited banking access). Savings accounts may require an initial minimum opening deposit and an ongoing balance to be maintained. They may have some sort of monthly service fee, and there may be restrictions on withdrawals.

Matched savings accounts incentivize saving by providing a resource (cash) transfer in the form of a matching deposit made by an outside source when an account holder makes a deposit. They may be known as child development accounts, child savings accounts or individual development accounts.

Purpose

Individual savings accounts offer individuals and families a safe place to keep their savings, a variety of services or products, access to credit, and the opportunity to build a credit history.

Matched savings accounts use a “match” to link people to formal financial institutions and incentivize saving, often to influence financial behavior (Martin 2013) for such purposes as a child’s education. For these accounts, the match is a deposit of funds on a proportional basis (e.g., a 1:1 match or a 1:2 match) by an outside source (e.g. a government or a practitioner organization). Matched savings accounts generally target people with limited income and assets. Programs establish parameters such as minimum and maximum savings per month, a specified savings period, and a cap on savings and/or matching. Programs are often administered in a partnership between a community organization and local bank. Match funds may come from government or other sources. Matched deposits may need to be used for authorized purchases (Martin 2013).

Appropriate beneficiaries

Individual savings accounts are appropriate for families who can afford to open and maintain an account and who are reasonably able to access banking services because of geographic proximity or mobile or local-agent-based service facilitation. Account holders need to be able to make sufficient deposits to make the costs of saving in a formal institution worthwhile.

Evidence

The evidence base related to individual savings accounts for vulnerable families is limited. Often, formal financial institutions are geographically inaccessible to poor families, and if they are accessible, families may feel that they do not have spare money to save and that the costs

of opening and maintaining accounts are out of reach. Poor families may also distrust financial institutions. The high cost to providers to provide services may also limit accessibility and demand for savings accounts (di Giannatale and Roa 2016, Resch 2017).

Research on education-focused child development accounts in Uganda indicated that holders of these matched savings accounts may be more likely to save than others (Karimli, Ssewamala, and Neilands 2014, Ssewamala 2015), that modest savings in child education savings accounts may make a meaningful contribution to schooling costs, and that children's saving in these accounts is associated with family financial socialization (Karimli et al. 2015). Participation in matched savings accounts is associated with some reduction in parent stress and dysfunctional parent-child relationships (Ssewamala et al. 2012).

Key considerations for implementation

Implementers should carefully consider whom they intend to assist with formal savings interventions (using related eligibility criteria), whether or not participants can reasonably access the banking service in terms of geographic proximity, and whether or not they can afford it. They should consider whether the intended participants' families are stable enough that they can make regular deposits at the targeted level, whether the money likely to be saved during period of implementation will make a meaningful difference to participants, and whether the savings will be used to support program and family objectives. They should also think about whether or not the intervention might benefit some program participants more than others, in what ways and why, and whether that is acceptable in terms of program intent.

Matched savings accounts require that a financial institution be willing and able to offer this type of account to program participants. These accounts may be most appropriate when a long-term source of matching funds exists (or can be developed), since a short-term program may not last long enough to facilitate enough saving and matching to achieve sustainable outcomes; for example, matching savings for a year may not truly change a family's saving behavior and may not change their financial situation enough to enable increased spending on children after the intervention ends. Programs considering using matched savings should consider whether the goals of the program are solely focused on building financial assets or whether they are also connected to the development of social and employability assets (Martin 2013).

Establishing a partnership with a financial service provider requires clarifying the roles of the partners (for example, with respect to mobilization and enrollment), agreeing on account opening processes, agreement on how program participants access accounts and funds, matching modalities and timeframes, information flow, and program duration (Martin 2013). Program practitioners should discuss the intervention and its purpose with program participants; help them plan how they will save, access and use the funds in their accounts; and help them think through logistical and financial challenges they may face. In follow up and monitoring, practitioners should seek to understand whether participants are using their accounts and how, and whether they are encountering any problems so that they may be addressed at the individual and program level.

[MSA] has brought a change ...when I save 100,000/= they match it with 100,000/=. This 100,000/= does a lot because it helps me cover what I would have failed to cover... I was paying school for five children, but I would manage to pay for only a few. Right now, I can afford to pay school fees for all the children. Caregiver, ESFAM, Kamuli, Uganda

Box 24. Matched savings accounts in the ESFAM project, Uganda

In ChildFund's ESFAM project in Uganda, households enrolled in the program were assessed and classified into one of three vulnerability groups, according to their assessed degree of poverty. Matched savings accounts, along with financial literacy training, business coaching and training, parenting training, psychosocial support, and monitoring of child well-being comprised the package of services offered to households in the mid-level vulnerability group. The project matched family savings 1:1 in these accounts, generally opened in the name of the school-aged girl or boy assessed by project staff to be most at risk of separation, up to UGX 490,000 (US\$132) in the accounts opened in girls' names and UGX 420,000 (US\$113) in accounts opened in boys' names. The amount for girls was set higher so that girls would be able to buy hygiene supplies that might facilitate their regular attendance at school. Accounts were managed by caregivers, and, while caregivers were encouraged to save for their children's education, they were able to use the funds saved as they desired.

A total of 130 enrolled households opened matched savings accounts and saved an average of UGX 429,000 (US\$115) in the first year. Uptake was slow. Some households were unable to mobilize the account-opening fees and did not open accounts, while others were deterred by previous negative experiences with savings projects or services. The long distances between bank branches and beneficiary households required extensive facilitation of deposits and withdrawals from project and bank staff. Somewhat cumbersome administrative procedures meant that matches were not always made on a timely basis, which caused some families to be late in paying school fees.

Program data suggest that 63 percent of the matched savings account expenses were education-related and supported caregivers to develop a habit of saving for education. The proportion of households with matched savings accounts reporting children attending school at least three times per week increased from 52 percent to 83 percent over the course of the intervention (ChildFund International 2018a). In addition to these improvements in regular school attendance, analysis at endline of data from 106 at-risk and 20 reintegrating households that participated in ESFAM's matched savings accounts showed:

- » Approximate doubling of median monthly household incomes, though the endline median monthly income for reintegrating households (about USD 12) was roughly equivalent to the baseline value for the at-risk households;
- » Improvements in at-risk households' ability to pay for basic needs, including food and shelter, health care, and education (from 38% to 65%);
- » A decline in consistent ability to pay among reintegration households (from 45% to 35%), but a 15-point reduction in the percentage of households unable to pay for these sets of expenses for any of the past three months;
- » Improvements in general wellbeing of caregiver and child;
- » Reductions in observed concerns with child abuse, neglect, or exploitation; and
- » Reductions in harsh discipline practices, particularly within reintegrating families.

Child separation rates among matched savings account families were slightly higher, at 8% (n=8), than the average for at-risk households and more than double the average (15%, n=3) among reintegrating households (Namey, Laumann, Okumu, Zissette, et al. 2019).

Resources

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DEVELOPING BUSINESS SKILLS

Description

Support for developing business skills may include structured training on topics including understanding products and services people need, what is required to operate a business, consumer interest, profitability of a potential enterprise, costs of a potential enterprise, potential income, marketing and customer service, time management, problem solving and decision making, adding value and increasing profits, and managing failure and growth. Timing and content may vary somewhat; two projects in Uganda used curricula comprising 15 to 20 hours of content. Basic business skills training may be adapted for different age groups and contexts.

Purpose

Business skills development is intended to provide participants with the knowledge and skills to identify, plan for, and manage a micro or small business that can form part of a sustainable livelihood. Business skills training may be coupled with other interventions to increase their effectiveness, for example, as a precursor to receiving an income-generation activities kit, grant, or loan or in conjunction with vocational or apprenticeship training.

Appropriate beneficiaries

In the context of reintegration and prevention of separation programming, development of business skills is appropriate for families that are able to generate some resources to invest in a business and who have the time and capacity to participate in (and concentrate on) learning business skills. It may be useful to help participants first develop basic financial literacy skills. Business skills training is appropriate for participants in apprenticeships or vocational training. It may be tailored and offered to older adolescents in care and may be provided in conjunction with group activities such as savings groups.

Evidence

While better business practices appear to be correlated with sales, profits, and productivity, there is little evidence that short courses in business skills on their own are effective in getting people to improve their practices and consequently increase sales and profits. When packaged with other interventions such as provision of cash and/or material assets and coaching, as in graduation approaches, though, business skills training can substantially increase earning and household consumption (Blattman and Ralston 2015).

Key considerations for implementation

Not everyone is skilled or comfortable as an entrepreneur, and many people prefer to find a job, if possible; however, many people become entrepreneurs, or at least sellers of something, out of necessity. Targeted to an appropriate audience, and in connection with other interventions (e.g., cash transfers, SGs and SHGs, and provision of inputs), business

skills training can help participants become more efficient and effective and potentially enable them to launch new enterprises. Like financial literacy training, business skills training may be precursor to a cash transfer intervention if the participants have good financial literacy skills and if the transfer is large enough that the participants may have some money to invest. Business skills training can also connect well with SG and SHG platforms, and, as noted above, can form an important component of a broader graduation program. Depending on the level and complexity of content, business skills training is best delivered by trained and well-prepared facilitators. As with financial literacy training, the language and content should be tailored to the context and anticipated participants and timing and scheduling should fit their needs.

Business skills training affected me positively, because, due the teachings, I was able to use part of the cash transfers to inject in my business of mowing people's compounds. I bought my own mowing machine so I no longer borrow or hire from other people. Caregiver, ESFAM, Gulu, Uganda

Resources

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DEVELOPING AGRICULTURAL OR OTHER PRODUCTIVE SKILLS FOR INCOME GENERATION

Description

Capacity building in agriculture or other productive skills may take place through a variety of means. For example, farmer field schools use participatory, discovery-based methods over a crop production cycle to help farmers develop new knowledge and skills that can increase their productivity (Food and Agriculture Organization of the United Nations). Very short courses can help participants learn to produce household goods in demand in the local market, such as soap or paper bags.

Purpose

Capacity development in productive skills ultimately aims to help participants increase and/or diversify their livelihoods, which in turn should improve their living conditions and benefit their children.

Appropriate beneficiaries

The appropriate participants for these activities depend on family needs, family characteristics and the local environment. Participants need to have the time and capacity to participate in the skills building activities, the willingness to use the skills they learn and access to resources to help them use them, if needed. Skills training may be appropriate for people with low skill levels or who need to work at home.

Key considerations for implementation

Income generating activities can help stabilize families and potentially reduce their dependence on provision activities. Programs should consider the local context, markets and value chains (Action Against Hunger 2009) and seek specialist assistance to help determine the kinds of skills most likely to lead to desired income goals and the most efficient and effective ways to ensure that participants can access capacity building of quality. It may be most effective for a program to facilitate participant access to external capacity-building services rather than to seek to provide the service itself. Programs should follow up with training participants over time to see if they are using the skills, if the skills are leading to increased and/or diversified income and if children are benefitting. Training may need to be accompanied with seed capital or other inputs.

Resource

Action Against Hunger. 2009. Income Generating Activities: A Key Concept in Sustainable Food Security. Accessed at https://www.actionagainsthunger.org/sites/default/files/publications/Income_generating_activities_A_key_concept_in_sustainable_food_security_09.2009.pdf.



Box 25. Developing productive skills through SCV Ecuador and FARE Uganda

SCV Ecuador sometimes organizes program participant support circles “so that they can get to know each other and support each other.” SCV helps some circles form communal enterprise groups and brings in specialist partners to train them in productive skills and enterprise management (Laumann 2016-2018).

Late in the FARE project, AVSI and partners added a productive skills training activity to its HES menu to allow families that had not participated in VSLA to access HES support. A market assessment exercise led to the identification of bar soap, student copy books, paper bags, reusable sanitary pads, and a local millet drink as highly marketable goods in Kampala and Wakiso. Participants decided to learn to make student copy books and millet drink. FARE brought in external training support, provided materials for training, and distributed excess training materials to the participants. Some participants produced goods on their own, or with help from family members; others formed production groups (AVSI Foundation 2019).



PROVIDING SEED CAPITAL, EQUIPMENT, AND INPUTS

Description

Some programs provide money grants for seed capital, equipment, or other inputs, alone or in combination, to targeted families. Provision of these resources is often complementary to other HES interventions, such as microcredit, skills training, or business skills training (Chaffin and Kalyanpur 2014) or as part of a graduation program.

Purpose

Practitioners provide seed capital and/or inputs to members of targeted families to increase family economic and income-generation assets, help them overcome constraints to investment in a low-risk way, and help them shift to less risky economic activities than their current ones. These investments may help families increase their economic independence and sustainability and also help improve family members' self-esteem.

Appropriate beneficiaries

These inputs can be useful for anyone who can responsibly make use of them. They should be tailored to need, recipient capacity, and the local economic, agricultural and/or market context. They may be suitable for people with low skill levels or who need to work at home.

Key considerations for implementation

Practitioners should consider whether or not the recipient has the commitment and capacity to use the resource well, the potential for the resource to cause conflict within the household or with neighbors, appropriate timing and seasonal issues, and potential misuse of the resource. They should also consider whether the volume or value of inputs is sufficient to make a difference in productivity and livelihoods and whether the administrative processes, logistics, and associated costs for either direct provision on inputs or provision in cash make sense from a cost-efficiency perspective. Inputs may need to be preceded by training specific to the assets received (Dubitsky and Samaranayake 2015) and accompanied by linkages with suppliers or buyers. Implementers may need to provide follow-up coaching and monitoring to make sure resources are used correctly and contributing to improved productivity and income and that children are not being diverted from school to contribute to production directly or as child care providers (Chaffin and Kalyanpur 2014).

Resource

James-Wilson, David, Veronica Torres, Margie Brand, and Ben Fowler. 2008. Economic Strengthening for Vulnerable Children: Principles of Program Design and Technical Recommendations for Effective Field Interventions. Accessed at https://pdf.usaid.gov/pdf_docs/Pnadu441.pdf.



Box 26. Income-generating activities in the SAFE project, Democratic Republic of Congo

Save the Children's SAFE project in the Democratic Republic of Congo provided funds and goods for income-generating activities with a standard value of about US\$90, mostly to families reintegrating children. Focus group feedback at evaluation indicated that 83 percent of recipients felt the income-generating activities had helped improve their social and economic conditions, but that the value was low and that more families at risk of separation (who mainly participated in SGs) should have been included in the intervention. A high rate of inflation also affected their abilities to do business.(Kakudji Mande and Muanda Mukandala 2016)



LINKING TO CREDIT THROUGH FORMAL MICROFINANCE

Description

Formal microfinance⁴ aims to reach low-income people with microcredit and other financial services such as savings, insurance, and transfer of remittances. Institutions providing these services may also provide non-financial services such as financial literacy training and skills development. They include non-bank microfinance institutions, SACCOs or private or government banks.

Purpose

In general, the intended programmatic purpose of credit to participants is to establish or expand small businesses. Participants are known to use loans for consumption purposes or education-related costs, however, which creates a financial risk to the borrower and potentially to the lender, since the loan is not used to generate income.

Appropriate beneficiaries

Linking program participants to credit opportunities with formal microcredit institutions is appropriate for participants who have the capacity to use loans to produce sufficient income to repay them, including interest. In some cases, participation in community-based microfinance entities, such as SGs and SHGs, can be preparation for and a stepping stone to larger credit through formal institutions. Microcredit loans may be a risky financial management strategy for families who use them to manage and smooth consumption expenses over time and remain in constant debt. Constant indebtedness could lead, at some point, to family-child separation.

Evidence

The evidence base related to microcredit for vulnerable people is mixed. An analysis of six randomized controlled trials of microcredit programs found that microcredit loans did not increase consumption; had no significant effects on income; had limited effects on business ownership, starts, and closures; had more promising effects on investment, business size, and profits; lacked significant effects on health and education; and had some effects on occupational choice, business scale, consumption choice, female decision power, and improved risk management (Banerjee, Karlan, and Zinman 2015). An evidence review of the effects of microfinance in sub-Saharan Africa found evidence of both positive and negative effects on household and business incomes, some evidence of increased expenditure and asset accumulation, and some evidence of positive effects on food security, nutrition, and housing (van Rooyen, Steward, and de Wet 2012). A review of the literature on the impact of microcredit loans on children found positive or null results on education expenditure, mixed results on school attendance and enrollment, and mixed or null results on education gap

⁴ Microfinance refers to activities to provide financial services to low-income people. The term has been closely associated with microcredit loans, but microfinance also includes services such as savings, insurance, remittances, and payments. Microfinance services may be provided through entities ranging from community-based groups SACCOs to banks. See <https://www.findevgateway.org/what-is-microfinance>.

for age, quality of schooling, and cognitive development (Brown 2015). It found mostly positive effects on health care expenditures, health-seeking behaviors, and self-reported nutrition, some positive effects on health status indicators, and no or mixed effects on child labor indicators.

Key considerations for implementation

While the microfinance industry has grown over time and its coverage is extensive in some countries, in other countries its reach is limited to urban and peri-urban areas and may not be physically accessible to program participants. Products offered to clients may not be tailored to the needs of highly vulnerable families at risk of separation or that are reintegrating children. Some loan products offered by institutions that provide microfinance services may call for collateral, which program participants may not be able to provide or afford to lose, and interest rates may be higher than program participants can afford.

Resource

James-Wilson, David, Veronica Torres, Margie Brand, and Ben Fowler. 2008. Economic Strengthening for Vulnerable Children: Principles of Program Design and Technical Recommendations for Effective Field Interventions. Accessed at https://pdf.usaid.gov/pdf_docs/Pnadu441.pdf.

PROVIDING LOANS

Programs may make loans to project participants, for example through direct individual loans or through mechanisms like revolving loan funds, which are externally-capitalized pools of funds generally used for business loans, replenished with loan repayment and interest; revolving loan funds are now discouraged due to their high rates of default (Murray and Rosenberg 2006, James-Wilson et al. 2008). Programs may also encourage participants to participate in rotating savings and credit associations (ROSCAs), in which members make deposits at regular meetings and each member receives the total amount collected at a meeting in turn. While non-specialist programs may make loans to participants, possibly coupled with business skills training and/or provision of productive assets (Chaffin and Kalyanpur 2014), loan making is risky and may not be legal; therefore, facilitating access to credit through formal microfinance institutions or community-based micro-finance may be more appropriate.

Purpose

As with loans through other mechanisms, the intended programmatic purpose of directly providing loans to program participants is to establish or expand small businesses, although participants might use them for other purposes.



Appropriate beneficiaries

Directly making loans may be appropriate for participating families that lack access to other affordable credit services and that are able to use loans to produce sufficient income to repay them; this may be particularly the case in rural areas where people lack access to formal institutions. Organizations whose primary skill set is in social services should probably not consider directly making loans due to the risk involved and the challenges likely to be posed by loan administration; facilitating contact with a community-based mechanism, microfinance institution, or bank would be more appropriate.

Key considerations for implementation

Making loans is probably best left to specialized entities or those with strong existing experience and systems. Making and managing loans can be labor-intensive and problematic for practitioner organizations. Recipients may treat them as grants and refuse to repay them, depleting resources for future loans. If providing individual loans to program participants, it is important to ensure that they understand loan terms and conditions and that it is not a grant. Combining a loan with a grant of money or goods may confuse participants and lead to non-repayment of the loan (James-Wilson et al. 2008).

Resource

James-Wilson, David, Veronica Torres, Margie Brand, and Ben Fowler. 2008. Economic Strengthening for Vulnerable Children: Principles of Program Design and Technical Recommendations for Effective Field Interventions. Accessed at https://pdf.usaid.gov/pdf_docs/Pnadu441.pdf.

VOCATIONAL OR APPRENTICESHIP TRAINING

Description

Vocational training involves the teaching of skills, generally in line with industry standards and often for formal certification. It may include literacy, numeracy, life skills, and employability skills training and support. Vocational training generally takes place in a formal center.

Apprenticeship training may be formal or informal and involves on-the-job training with a skilled worker. Apprenticeships may be community-based, and they may not result in a formal certification, but they involve trainees in a functioning business and may provide opportunities to learn business skills, as well as those of a particular trade. Before supporting either vocational training or apprenticeships, ensure that the skills are in high demand and employment prospects after training are good.

Purpose

Vocational training and apprenticeships provide skills participants potentially can use to develop a sustainable livelihood.

Appropriate beneficiaries

Vocational training and apprenticeships can be appropriate for older adolescents, young adults (and even other adults), especially those who have completed primary or secondary education but do not plan to continue in an academic track and who have the capacity and interest to engage in practical, structured learning. They can be appropriate for some care-leavers, young people who have demobilized from armed forces or armed groups, and individuals who otherwise lack access to skill-development opportunities.

Key considerations for implementation

When considering apprenticeship or vocational training interventions, practitioners should carefully consider whether these opportunities may lead young people to drop out of school and related implications. They should also consider that participants may need to leave home and reside elsewhere to participate, which might pose cost or protection challenges. In some contexts, some participants may face challenges in accessing these opportunities; for example, family responsibilities or mobility issues may hinder full participation.

Planning for vocational training or apprenticeships requires careful attention to identifying specific skills for which there will likely be market demand once training is completed, as well as participant interest. It is important to ensure that the training will enable trainees to attain the skill level and/or certification required to gain employment. It is also important to consider how those trained will have access to the tools or equipment and start-up capital that may be necessary to use their skills in the marketplace.

Practitioners should assess the learning environment to ensure that learning, safety, and child safeguarding standards are in place so that participants will not engage in harmful work or be exploited. They should raise participants' awareness about protection risks in work environments and monitor participants and learning environments to ensure that participants

remain engaged in skill development, that the quality of training is acceptable, and that safety and protection issues have not arisen. Upon completion of training, practitioners should assist participants to connect with employers. Practitioners need to assess the costs of vocational and apprenticeship training to ensure that they are realistic and sustainable and consider how the timing of these interventions fit within their program timeframe and whether they will be able to accompany participants through the full process.

Resources

Women's Refugee Commission. 2008. Market Assessment Toolkit for Vocational Training Providers and Youth. Accessed at https://www.womensrefugeecommission.org/joomlatools-files/docman-files/Market_Assessment_Toolkit_rev_2013.pdf.

Youth Power Action Empleando Futuros Training Model. Accessed at <https://www.youthpower.org/resources/empleando-futuros-training-model>

AVSI Foundation. n.d. SCORE Apprenticeship Guide: Facilitator's Guide. Accessed at https://issuu.com/avsiuganda/docs/score_apprenticeship_guide_manual.



Box 27. Vocational and skills training and apprenticeships through SCV Ethiopia and FARE, Uganda

In Ethiopia, SCV connects members of targeted families with vocational and skills training, mostly by linking them with government training institutions (which may be at a distance), but also by drawing on locally available skill-development resources. It also links youth and family members with employers. It is also engaging in an initiative with government to establish locally appropriate vocational training in remote areas (Laumann 2016-2018).

In Uganda, AVSI's FARE project organized apprenticeships with master artisans for older, out-of-school adolescents. The intervention was successful for many; for example, at project end, 43% of the youth who had completed training had found jobs. The apprenticeship intervention also encountered some challenges:

- » For some young people, placement in apprenticeships too late in the project meant that they had not completed their training before the end of the project, posing some problems for ongoing monitoring. Ideally, potential apprentices should be identified early enough in a project to enable them to complete training before a project ends and should be preceded by market skills assessment, life skills training, career guidance, and caregiver engagement.
- » Some young people refused apprenticeships because they thought they were a waste of time, and some left apprenticeships that might have led to more lucrative and safer employment because of immediate work opportunities. Prior life-skills training might mitigate this possibility.
- » Some of the master artisans changed business locations during the apprenticeship period, making it difficult or impossible for the apprentices to reach.
- » In a few cases, caregivers who viewed apprentices as a cheap source of labor at home gave them little material support (in terms of food and transportation or other resources) or moral support to facilitate their learning a trade. Program staff may need to work with caregivers to help them understand the importance of helping young people to develop trade and other work skills. (AVSI Foundation 2019).



SUPPORTING EMPLOYABILITY AND JOB PLACEMENT

Description

Employability skills refers to “soft” skills needed to succeed in jobs such as work ethic, customer service, punctuality, time management, problem solving, working as a team member, ability to accept direction and criticism, and more, as appropriate to the environment. Supporting or assisting with job placement involves identifying capacities on the part of program participants and coordinating with employers or intermediaries to identify appropriate jobs. Programs may offer incentives, such as salary subsidies to employers (Chaffin and Kalyanpur 2014), the provision of tools or equipment, and support for measures to improve workplace safety.

Purpose

Job placement and employability skills support aim to increase adult family members or youth likelihood of job finding, link them with wage employment, prepare them to transition well into and succeed in employment.

Appropriate beneficiaries

Job placement and employability skills support is appropriate for unemployed or underemployed adult family members or youth who are out of school and have employable skills. Depending on the circumstances, this support may be appropriate for families at different vulnerability levels where child care is not an issue. Job placement support may not be appropriate in places where wage jobs are few.

Key considerations for implementation

Programs can help adults and young people develop employability skills through coaching at home and connecting them with opportunities, such as school groups, other clubs, volunteer activities and life skills training that give them opportunities to learn and practice core skills. Job placement support should be accompanied by the development of soft skills and may be offered in conjunction with vocational education or apprenticeship training. Supporting job placement may require a substantial investment of time in developing relationships and coordinating with potential employers, identifying opportunities, and coaching and mentoring program participants. Practitioners may also be involved in helping to improve participants' relationships with existing employers.

Resource

Youth Power Action website. Accessed at <https://www.youthpower.org/youthpower-action>.



Box 28. Protecting marginalized children and youth through employment services in Mith Samlanh, Cambodia

In Cambodia, Friends-International program Mith Samlanh works to protect marginalized children and youth, including children outside of family care. Its Futures offices offer employment-related services including assessment, career counseling, resume and interview skills development, internship links, and job placement. For program participants, Futures looks for jobs that pay adequately and provide good working conditions; these jobs are often with members and partners of the ChildSafe Alliance. (Laumann 2016-2018)



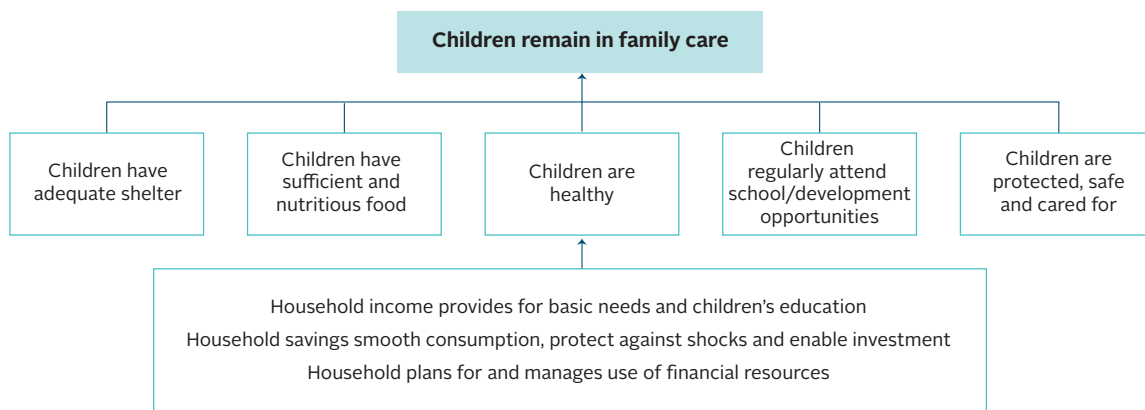
Monitoring and Evaluation of HES in Programming for Reintegration and Prevention of Separation

The specific goals, outcomes, and outputs to be achieved by a program will guide the selection of indicators, appropriate data collection methods, and timing of data collection and program monitoring. This section highlights some key considerations for programs that integrate HES activities into family (re)integration efforts, namely that monitoring and evaluation should treat economic outcomes as intermediate to the goal of family care, quantitative and qualitative data should be used to understand the connections between economic outcomes and family care and that formative assessment can help in understanding and refining HES processes throughout a program.

ORIENTING MONITORING AND EVALUATION TO THE GOAL OF RETENTION OF CHILDREN IN CARE

The goal of reintegration and prevention of separation programming is that children remain in their families, unless it is not in their best interests to do so. The primary objective of HES activities in this context is to support that goal. Family-level monitoring and overall program monitoring and evaluation should focus on how HES activities support intermediate outcomes linked to retention of children in family care. When good family care for children is the primary outcome, the economic outcomes that HES programming generally measures become secondary, or even tertiary—important for their foundational, but indirect, contributions to family unity. Figure 4 illustrates broadly how positive HES outcomes support program goals.

Figure 4. HES outcomes in support of family care



Given the integrated nature of case management, family strengthening, and HES programming in support of families, it is important that child protection, HES, and monitoring and evaluation staff collaborate to ensure that their programs track, measure, and connect the right information. For example, measuring whether an HES activity helped increase household income is important to assess a direct effect of the HES, but in the context of family (re) integration programming, it is essential to assess whether HES is, in fact, contributing to improved child safety and well-being. Increased household income is not the primary aim; it needs to be a means to the end of better care for children. For example, programs should seek to determine whether increased income contributes to more spending on children and on whether HES interventions rely on children's labor to care for younger siblings and thus prevent older children from attending school. Programs should gather data from adults and children and data, where possible, should be disaggregated by sex, age and socioeconomic status to better inform understanding of the effects of interventions.

Practitioners may need to collect both quantitative and qualitative data through formative and summative evaluation to understand whether and how interventions work for families at the program, family, and child levels. Tracking information and reflections on HES in case files and care plan reviews can highlight important questions and concerns and help inform formative and summative evaluation.

QUANTITATIVE OUTCOMES OF HES AT THE HOUSEHOLD LEVEL TO MEASURE CHANGE

Quantitative assessment of outcomes based on baseline and endline (and possibly interim) measurement can provide concrete measures of change over time at both the household level and in aggregate. Table 6 provides examples of commonly desired outcomes of HES activities relevant to vulnerable children and child protection programs. Although HES influences all five of the domains listed, it can be more directly attributed to outcomes at the top of the list. Outcomes further down the list are more likely to be affected by intervening factors beyond HES interventions (e.g., family and community relationship and distance to school).

Indicators to measure those outcomes should be informed by local expertise and framed appropriately to the local context and the needs of the program. They should also reflect what is realistic for the program to achieve. Some indicators, such as income indicators, may be affected by respondent bias and may be better addressed by indirect measures. Stratified data collection that aims to include child- and caregiver-level data should also capture information about age and sex to facilitate understanding of how programs may affect different groups, and the data collected should be adjusted, if necessary, to meet specific needs (Chaffin, Rhodes, and Carmichael 2013). Asking children at different stages about [how much time they spend on different activities](#) can help assess how they are being affected by HES interventions. Table 6 describes positive outcomes to which HES can contribute.

Table 6. Positive outcomes to which HES contributes

Domains	Outcomes
Economy	<ul style="list-style-type: none">• Eligible household has access to social protection• Household has stable and diversified income sources• Household has increased assets• Household spending supports children's well being• Household avoids economic coping strategies that negatively affect children
Basic needs	<ul style="list-style-type: none">• Household has safe shelter• Household has safe water• Household has appropriate sanitation• Household is food secure• Children have nutritious food• Children access health care
Education	<ul style="list-style-type: none">• Infant and young children have appropriate stimulation and developmental experiences• School-age children regularly attend school• Out-of-school children access other age-appropriate developmental activities
Psychosocial and social well-being	<ul style="list-style-type: none">• Caregiver stress about finances is limited• Children feel safe at home and in their communities• Children have time for play and recreation• Children feel positive about their well-being and about their futures
Care and protection	<ul style="list-style-type: none">• Caregivers use positive parenting strategies (e.g., communication, positive discipline, spending quality time with children)• Children's work is safe and appropriate to their age and capacities

(MEASURE Evaluation 2019, Martin-Simpson, Verjee, and Paruzzolo 2017, Chaffin, Rhodes, and Carmichael 2013, Rutherford, Carmichael, and Christopherson 2015)

QUALITATIVE ASSESSMENTS TO ILLUMINATE CONNECTIONS BETWEEN HES AND OUTCOMES

Qualitative data can help practitioners understand how families experience HES interventions and how they connect them with improved child and family well-being. They can also shed light on how families perceive the synergies and interactions between different interventions.

Qualitative assessments may involve structured questions related to HES, guided life stories that capture relevant information, or drawing or sorting activities. Whereas quantitative data can provide measurement of several domains of household well-being, qualitative data can help to clarify how the various levels and domains of relevant outputs are connected. For instance, in the example below, a caregiver describes how her ability to generate income (an economic outcome) reduces her stress (a care and protection outcome), which in turn allows her to be a better parent and improve connections with her children (also a care and protection outcome). She then credits these improved connections for the lack of family-child separation in her household (primary outcome).

“The children are happy because we are no longer bothered by the landlady. Even recently, I told her that [we] had sent this month’s installment, and she was happy. Our [family] relationship is now better, because we are no longer constrained by money problems. I am no longer worried as before, so I do not take out my stress on the children by shouting at them. I talk to them if they have done something wrong.”
Caregiver, FARE, Kampala, Uganda

This type of data can strengthen interpretation of quantitative data and/or suggest revisions or refinements to an underlying theory of change.

FORMATIVE ASSESSMENTS TO UNDERSTAND PROCESSES AND REFINE PROGRAMS IN PROCESS

Practitioners should not wait until the end of a program to elicit feedback from participants and other stakeholders and generate actionable learning. Especially if HES is a new area of activity for a program or implementer, formative assessment can be invaluable to inform course corrections and activity adaptations to improve implementation efficiency and beneficiary effects/outcomes. Formative assessment may involve gathering information from program participants individually or in groups (e.g., through focus group discussions), but also from staff members, and community and government stakeholders.

The objectives of this type of evaluation are:

- To explore how the HES interventions function in specific contexts,
- To gather perspectives on what works from an implementation/supply point of view,
- To gather information on what works from a beneficiary point of view,
- To take an early and exploratory look at results and household effects of HES intervention(s), and
- To explore what could be improved in similar situations.

Table 7 describes the types of questions that might be addressed in a formative assessment of an HES intervention.

Table 7. Questions a formative assessment might address

Topic	Example Questions
Theory of change	<ul style="list-style-type: none"> • What is the theory of change for the HES intervention? How appropriate is the theory to the situation on the ground? To what extent, and in what ways, are the objectives of the HES intervention being met or not?
Outcomes	<ul style="list-style-type: none"> • What effects of HES do intervention participants feel they have experienced? • What, if any, effects do HES intervention participants feel they have experienced because of participation in the HES interventions with respect to: <ul style="list-style-type: none"> » skills developed; » actual or likely effect on income, savings, food consumption, and general consumption-smoothing; » ability to offset economic shocks; » adequacy of housing; » access to health care; » children's education; how family members spend time; » self-esteem; » effects on family relationships/dynamics; and » relationships with the broader community?
Value	<ul style="list-style-type: none"> • What do HES intervention participants see as the main advantages of the HES intervention? • Do HES intervention participants perceive disadvantages to the intervention? If so, what are they, and why? • What aspects of the HES intervention made it useful to participants? • What aspects had negative effects on the family? • How do HES intervention participants anticipate making use of the intervention or its result in the future? • Was the HES intervention worth its financial cost? Was the intervention worth participants' time investments?

Topic	Example Questions
Design	<ul style="list-style-type: none"> • What was the rationale for the design of the HES intervention? • Who participated in the design of the intervention? • Who was the intervention intended to reach?
Implementation	<ul style="list-style-type: none"> • Are the HES interventions being implemented as planned and appropriately? <ul style="list-style-type: none"> » How has the project explained each intervention to participants and the community? » Are target households being reached? » Who participates? Who is not participating? » Is there a problem with dropouts? Who has dropped out and why? » How long did (or will) the HES intervention last? When did participants experience positive results, if any? » What happened in the HES interventions? • Is the HES intervention being implemented in keeping with the project plan and applicable technical guidance? Have implementing staff been adequately trained, and do they have appropriate skills? • Have there been any child protection, gender-based violence, power, or security issues related to the HES intervention? • Has the HES intervention led to unanticipated consequences? • How do other community members perceive the HES intervention? • How do relevant government representatives perceive the HES intervention? • How might the HES intervention be improved? <ul style="list-style-type: none"> » What adjustments to the intervention design might make it more effective in general? In improving children's well-being? » What adjustments in management and support might make the HES intervention more effective? » What changes, if any, would the team propose to the intervention guidelines?

While the questions above are aimed at assessing project activities and effects in order to make adjustments, their wording can be adapted for use in a project's endline evaluation.

Box 29. Good practices in monitoring and evaluation of HES in programming for reintegration and prevention of separation

- » As possible, design monitoring and evaluation systems to capture HES intervention data at the household and child levels, as appropriate, to facilitate analysis of outcome data.
- » Seek inputs from children, as well as from their parents or guardians.
- » Review indicators with local actors to ensure that they are appropriate to the context.
- » Capture data in such a way that they can be disaggregated by sex, age, and socioeconomic status.
- » Be aware that families may not report financial information accurately, and recognize this in analysis and in reporting findings. Consider indirect indicators to assess changes in financial status.
- » Capture information and reflections on HES interventions with families in care plan reviews and case files. Although they may not be directly usable data, they may inform both formative and summative quantitative and qualitative assessments.
- » Proactively look for connections between HES and positive outcomes, and between HES and problems and negative outcomes (including program dropout) to better understand how interventions affect children and families.

Resources

Chaffin, Josh, Natalie Rhodes and Jennine Carmichael. 2013. Children and Economic Strengthening Programs: Maximizing Benefits and Minimizing Harm. New York: CPC Network Livelihoods and Economic Strengthening Task Force. Accessed at <http://womensrefugeecommission.org/resources/document/953-children-and-economic-strengthening-programs-maximizing-benefits-and-minimizing-harm>.

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Annex 1: HES Activity Selection and Planning Tool

This assessment tool is designed to help caseworkers and other program staff consider which HES activities from a program's "menu" of services, including those offered by other providers, may best align with a household's current and future needs and capacities. It is intended to facilitate a process enabling a basic analysis of the household's economic situation (e.g., vulnerabilities, capacities, resources) in order to identify HES activities appropriate to improving and supporting its wellbeing. This process should inform discussion and development of the HES component of a case plan with the family.

Prior to using this tool, program staff should review it and make necessary adaptations to reflect the context and options available. For example, not all of the HES activities listed in this tool will be offered by a particular program or be available in the local community; organizations may therefore need to refine and limit the range of possible activities to be considered, or plan to link families with external HES services and support.

The tool includes three steps that progress from a broad to a more specific understanding of how a household's specific configuration of economic status, capacities, limitations, and family dynamics, followed by a step to narrow HES options and identify next steps in decision-making.



1

The first step aims to identify the household's general level of economic vulnerability. This suggests the starting point for HES support based on the household's most immediate need (e.g., consumption support to address basic needs and stabilize the family, money management and asset building support to increase resilience, income promotion to improve livelihood).

2

The second step helps determine the household- or individual-level resources that could enhance resilience or vulnerability. This helps narrow the activities under consideration to those with the potential to leverage existing resources or close resource gaps.

3

The third step calls attention to other household characteristics that may affect the implementation of specific HES activities and should be considered in selecting HES interventions and other family support interventions that are appropriate to a family's situation.

4

The fourth step uses that information to identify appropriate HES measures to discuss with the household and specific actions to be taken to plan HES interventions for and with it.

This is not an exact diagnostic tool. It is meant to help inform a process that includes additional family input, caseworker assessment and observation of the family's non-economic dynamics, potential consultation with other stakeholders, and information about program resources and reach. The caseworker may wish to collect more detailed information for further assessment or monitoring purposes. The action items identified at the end of Step 4 are also not a care plan, although they can feed into established project household development planning by informing current and future actions that the organization will support the family to undertake.

STEP 1:

Identify OVERALL Household Economic SITUATION and broad support NEEDS.

The purpose of Step 1 is to identify an overall sense of household economic capability, averaged over seasonal or intermittent fluctuations. Consider two broad questions:

Question 1: How often, over the past six months, could this household meet the basic needs (i.e., food, water, shelter, hygiene, health care) of its members?

Question 2: How often, over the past six months, were the educational needs of all school-aged children in the household met?

The answer to Question 1 in the Documentation Table helps to suggest the types of HES support a household will likely need first. The answer to Question 2 in that table can surface education challenges that need to be addressed.

In the Documentation Table, select the responses that most accurately portray the household's general situation over the last six months. Review the Resource Information and note comments and concerns related to basic needs and children's education.

Documentation Table

Over the past six months...	<i>never</i>	<i>sometimes</i>	<i>usually</i>
How often could this household meet the basic needs (i.e., food, water, shelter, hygiene, health care) of its members?			
How often were the educational needs of all school-aged children in the household met?			
Write below comments and list concerns related to financial constraints with respect to basic needs and children's education and how adequately education needs have been met.			

Resource Information

The figure below connects responses to Question 1 with broad types of support appropriate to those responses and examples of activities or interventions that can support them.

Needs met:

<i>Never</i>	<i>Sometimes</i>	<i>Usually</i>
CONSUMPTION SUPPORT	MONEY MANAGEMENT & ASSET BUILDING SUPPORT	INCOME PROMOTION SUPPORT
<ul style="list-style-type: none"> • Cash transfer • Food or material support • Access to health care 	<ul style="list-style-type: none"> • Financial education training • Promote individual saving • Provide productive assets 	<ul style="list-style-type: none"> • Group savings as microfinance • Sponsored work opportunities • Training in productive skills • Entrepreneurship training • Access to vo/tech training • Job placement assistance • Apprenticeship opportunities • Access to small grants and loans

A family's position along the continuum of support based on their response to Question 1 suggests an initial starting point for HES; interventions from different points on the continuum may be included in the initial plan based on family capacity. For example,

If the response to Question 1 was:	The plan might include:
<i>Never</i>	Consumption support and money management activities
<i>Sometimes</i>	Money management and asset building activities
<i>Usually</i>	Money management and income promotion activities

If the response to Question 2 was Never or Sometimes, and if financial constraints were the primary reason for a family's inability to meet children's educational needs, educational support should be considered as an additional potential activity for the household. Additionally, for all families, regardless of responses to Questions 1 and 2, consider whether financial skills training or coaching may be appropriate to improve their strategic use of income and other household resources.

STEP 2:

Identify household- or individual-level RESOURCES and CAPACITIES that may affect resilience or vulnerability.

The purpose of Step 2 is to assess the presence or absence of household resources that can affect the family's resilience and vulnerability and to use that information to brainstorm caseworker actions and possible HES interventions.

Have a discussion with the family about household resources and capacities. The resource table below includes sample questions that can be used in discussions with families or other stakeholders to understand household or individual resources and capacities that may affect a family's resilience or vulnerability and inform decisions about appropriate HES interventions. Then, in the Documentation Table, identify the presence (Y) or absence (N) of each item and refer to considerations about selection and implementation of activities based on the presence or absence of each resource. Note that in some cases, the responses are not mutually exclusive (e.g., a HH might have some income but also rely on cash transfers). Note comments and implications for HES options.

Resource Table

TOPIC	SAMPLE QUESTIONS FOR DISCUSSION
Household income and production	<ul style="list-style-type: none">• What are sources of HH income? [What are barriers to HH income generation (e.g., health, physical or behavioral characteristics)?]• Does HH receive outside support from local or distant family? From whom? Is it regular and reliable? Does it help address HH basic needs and/or children's education needs?• Is family accessing all social protection support for which it is eligible?• How does the family get/pay for food? [What challenges, if any, does it face?]
Labor capacity and skills	<ul style="list-style-type: none">• Who in the HH can work and how much? Are current/potential workers mobile?• Are able family members working and generating income?• Are there local, appropriate opportunities for formal or informal work, self-employment that can be accessed or created?• Is income generated contributing to HH? Is it contributing to children's needs?• What productive skills do various HH members have? Are they using these skills?• What productive skills are most needed in the market?• Are there accessible opportunities exist to strengthen productive skills?• What job skills are most needed and useful in the current market?• Are there accessible opportunities exist to develop or strengthen job skills?

TOPIC	SAMPLE QUESTIONS FOR DISCUSSION
Assets	<ul style="list-style-type: none"> • What productive assets does HH possess? • What productive assets would make HH productive more efficient, increase profit, add value? • Are there resources (e.g., land, tractor, production equipment) in the local community that HHs can access for free or at low cost? • Does HH save? How, where, why? • What are barriers to saving (more)? • How secure are savings? • Should HH consider other ways to save? • How often does HH access savings and for what purposes? • Is HH saving as much as it can?
Coping strategies in the event of shock/unanticipated expenses	<ul style="list-style-type: none"> • Discuss coping strategies the HH has used in the past, is using now or might use in the future to cope with unexpected expenses. • Reinforce that unsustainable/risky strategies can have long-term detrimental consequences (reducing household spending to a level that causes harm, selling livestock, household goods or productive assets; migrating for work; borrowing at high interest; sending children to others for care; going without food, etc.).

Documentation Table

DOES THE FAMILY HAVE...	Y/N	IF YES	IF NO
<p>...adequate household-generated income?</p> <p>... outside income? (e.g., state benefits/pension, remittance)</p> <p>... household-produced food?</p>		<ul style="list-style-type: none"> • Discuss how household (HH) generates income and how income is used. • Help HH consider how use of income might be improved (e.g., difference between wants and needs). • Discuss how income might be increased and/or diversified. • Discuss who receives and uses outside income, its intended purpose and how it is used. • Discuss how children benefit or do not benefit from outside income. • Discuss quantity and regularity of household produced food supply and identify gaps in meeting HH food and nutrition needs. 	<ul style="list-style-type: none"> • Review eligibility status for government benefits and ensure family is linked to relevant state and local social protection. • Consider cash transfer or provision of physical goods. • Discuss possibility of support from extended family members, implications. • Discuss how family accesses food, challenges faced, opportunities to improve access to food and nutrition. • Consider need for child care. • Consider education support.

Write below comments and possible implications for HES options in relation to income and food availability.

DOES THE FAMILY HAVE...	Y/N	IF YES	IF NO
<p>... labor capacity?</p> <p>... productive skills, training or experience?</p> <p>... other job or business skills, training or experience?</p>		<ul style="list-style-type: none"> • Identify current and potential workers in the HH. • Discuss options for optimal use of HH labor capacity, productive skills and job skills to increase income and assets (ensuring time for school attendance is allowed for children). • Review market assessment information. • Consider training to acquire productive skills or job skills. • Consider other options to increase productive or job skills capacity. 	<ul style="list-style-type: none"> • Ensure family is linked to relevant state and local social protection. • Consider cash transfer or provision of physical goods. • Discuss possibility of support from extended family members. • Consider financial education training to improve strategic use of income and other HH resources. • Review market assessment. • Identify productive skills or job skills within HH's capacity. • Connect HH with productive or job skills development opportunities. • Consider need for child care. • Consider education support.

Write below comments and possible implications for HES options in relation to labor capacity and skills.

DOES THE FAMILY HAVE...	Y/N	IF YES	IF NO
<p>... productive assets? <i>(e.g., land, tools, livestock, raw materials)</i></p> <p>... savings? <i>(e.g., cash, jewelry, easily liquidated assets that retain value)</i></p>		<ul style="list-style-type: none"> • Review use of productive assets • Discuss potential for increasing strategic use of assets. • Discuss how family saves and how it uses/plans to use savings. • Consider whether current mechanism for saving is safe and appropriate and whether it can be improved. • Consider financial education to improve use of resources and assets. 	<ul style="list-style-type: none"> • Identify productive assets that could add value to HH's existing or planned productive activities • Consider financial education training to improve capacity to access productive resources, support saving, and improve strategic use of resources. • Identify/link to saving mechanisms appropriate to HH • Develop plan to access/acquire productive assets (e.g., through grants or planned saving)

Note comments and possible implications for HES options in relation to productive assets and saving:

DOES THE FAMILY HAVE...	Y/N	IF YES	IF NO
<p>... time to spend on training, group activities, etc.?</p> <p>... connections to other support programs?</p>		<ul style="list-style-type: none"> • Discuss how family might use time available to invest in HES to support family well-being. • Discuss how other programs can work synergistically with the caseworker's program. 	<ul style="list-style-type: none"> • Look for HES possibilities that do not place an additional time burden on family members. • Discuss how families might free up some time to invest in HES to support family well-being. • Discuss whether other support programs may help families address basic needs, education needs, capacity development needs. • Consider independent-study financial education that can be accessed in free time.

Write below comments and possible implications for HES options in relation to time and connections to other support programs.

DOES THE FAMILY HAVE...	Y/N	IF YES	IF NO
... use sustainable strategies to address household needs?		<ul style="list-style-type: none"> • Discuss how HH anticipates handling a financial crisis and make a plan. 	<ul style="list-style-type: none"> • Discuss implications of using unsustainable strategies to manage financial shocks on the family. • Discuss HES support that might reduce use of unsustainable strategies.

Write below comments and possible implications for HES options in relation to sustainable or unsustainable strategies:

Reinforce that unsustainable/risky strategies such as greatly reducing household spending, selling small livestock, household goods or productive assets; migrating for work; borrowing at high interest; sending children to others for care; going without food, etc. can have long-term, often detrimental consequences.

STEP 3: Identify the household- or individual-level CHARACTERISTICS that may affect resilience or vulnerability.

The purpose of Step 3 is to review family- or individual-level characteristics that may affect their economic and family resilience or vulnerability. Consideration of these characteristics can help caseworkers select HES activities to mitigate common challenges to families' successful engagement in HES activities.

During a discussion with the family, review each characteristic in the left column of the Documentation Table, and if it applies, tick the box. Consider how the characteristic affects the selection or implementation of HES activities to mitigate common challenges and ensure that the family is successfully engaged

Documentation Table

FAMILY CHARACTERISTICS	✓	FOR HES PROGRAMMING, CONSIDER:
Single parent household		<ul style="list-style-type: none"> • Child care needs and opportunities • Possible home-based production.
Elderly caregiver		<ul style="list-style-type: none"> • Child care needs and opportunities • Whether vocational training, apprenticeship training, employability training is appropriate for older child in HH who does not want/is not able to return to school.
Migrant parents		<ul style="list-style-type: none"> • Child care needs and opportunities • Job skills development for work opportunities closer to home.
Child-headed household		<ul style="list-style-type: none"> • Child care needs and opportunities.
Adolescent(s) out of school		<ul style="list-style-type: none"> • Possibilities for return to school • Possibilities for vocational training and/or apprenticeship.
Reconstituted/blended household/ separation/ divorce/remarriage		<ul style="list-style-type: none"> • How family resources are distributed/used on behalf of children in family and how children's needs may be met in equitable ways.
Large family size		<ul style="list-style-type: none"> • Child care needs. • Appropriateness of vocational training, apprenticeship training, employability training for older child in HH not wanting or able to return to school.

FAMILY CHARACTERISTICS	✓	FOR HES PROGRAMMING, CONSIDER:
Disability of a child or other household member/chronic health issues		<ul style="list-style-type: none"> • Child care needs and opportunities. • Inclusive education for children not in school. • Possible additional support in community.
Caregiver/other adult spending discretionary resources on drugs or alcohol to the detriment of basic needs or education		<ul style="list-style-type: none"> • Extent to which caregiver is capable of managing resources and benefitting from interventions • Need to identify another adult to receive and manage support.
Caregiver reliance on harsh discipline practices		<ul style="list-style-type: none"> • How HES interventions may add or reduce stress on caregiver and implications for positive parenting.
Household open to change/trying new ideas		<ul style="list-style-type: none"> • Focusing initial support on interventions that address pressing needs. • Counseling and provision of positive parenting training (group or individual).

Write below comments and possible implications for HES options in relation to family characteristics.

STEP 4:

Identify possible interventions related to the family's HES support needs.

The purpose of Step 4 is to reflect on findings from Steps 1-3 and, use that information and available program offerings to propose HES activities appropriate for the family now and in the coming months.

Refer to the Resource Table below and list HES activities that may be most appropriate for the household in the Documentation Table. Record the suggested interventions to discuss with the family. During discussions with the family and program staff, determine what should happen next, who should be responsible for the action, and when it should be completed. For example, this might include additional fact-finding that needs to take place with respect available HES opportunities, identification of child care options so caregivers can participate in HES interventions, coordination with social protection mechanisms and coordination with other partners. This information may be integrated directly into a household care or development plan.

Resource Table

Consumption support to address basic needs and stabilize family	Money management and asset-building support for basic and education needs, resilience to shocks and positioning for investment in the future	Income promotion to develop job or productive skills and use skills in a livelihood
Provide training in essential financial management skills		
Link families to social protection		Develop business skills
Provide cash transfers	Promote saving at home	Provide seed capital, inputs, tools or equipment for a micro-business
Provide reunification package/kit	Form/link to community-based savings groups	Make loans and link to microcredit and other formal financial credit services
Provide basic household goods	Facilitate individual savings accounts and individual matched savings accounts	Provide access to vocational or apprenticeship training and job preparation
Pay for shelter or shelter improvement		Support or assist job placement
Provide for school access, paying for school fees and materials if needed		

Documentation Table

Timing	Interventions to discuss	Actions to be taken	By whom/when
IMMEDIATE NEED	1.		
	2.		
	3.		
	4.	4.	4.
WORKING TOWARD...	1.		
	2.		
	3.		
	4.		

Annex 2: Program Examples

AVSI FOUNDATION'S FAMILY RESILIENCE PROJECT IN UGANDA

From late 2015 to early 2018, AVSI Foundation implemented the Family Resilience (FARE) project in urban and peri-urban areas of Uganda's Kampala Capital City and Wakiso District in collaboration with Retrak and in association with two local nongovernmental organization (NGO) partners, Companionship of Works Association (COWA) and Fruits of Charity Foundation (FCF). FARE's theory of change posited that tailored HES activities, along with case management and family strengthening activities, should reduce the drivers of separation and make families more resilient, thereby reducing child separation and supporting and enhancing child reintegration. The project aimed to reach 350 households at risk of separation in slum areas thought to be hot spots for sending children to the streets, as well as to support 281 reunified children and their families.

FARE identified children to be included in its reintegration caseload through three Retrak drop-in/residential centers for street-connected children, an FCF children's home that takes care of abandoned, lost, abused, and neglected children, and the government's Naguru Remand Home supported by COWA. To be eligible to participate, children had to be from Kampala and Wakiso and they and their caregivers had to be willing to reunify. Retrak, COWA, and FCF collaborated with the Ministry of Gender, Labor and Social Development to prepare and reunify the children and their families. FARE identified at-risk families through a process that began with a pre-screening tool to be completed by members of parish local councils, followed by staff verification with an adapted version of Uganda's Household Vulnerability Prioritization Tool. The project assessed all enrolled households using an adapted version of Uganda's Household Vulnerability Index Tool (HVAT), Uganda's Progress Out of Poverty Index tool, and Child and Caregiver Integration Status Tools, with follow-up assessments at project midpoint and endline.

FARE's project logic was organized around three intermediate results and supporting activities (Table 8).

Table 8. FARE intermediate results and supporting activities

Intermediate Result	Activities
Quality, appropriate case management helps reintegrating children and families and families at high risk of separation identify needs and access support and services	<ul style="list-style-type: none"> • Pre-reunification support • Household development plans for all families
Targeted families are less vulnerable and more resilient to shocks that can lead to family-child separation	<ul style="list-style-type: none"> • Cash transfers preceded by selection planning and management of enterprises (SPM) training for a limited number of the most economically vulnerable families • VSLAs formed around targeted families • SPM training for members of interested VSLAs • Apprenticeships for youth • Training on production of household items for sale
Children are nurtured and protected in targeted families and communities	<ul style="list-style-type: none"> • Home visits • Family and individual counseling • Parenting skills training • Life skills training for adolescents • Interactive learning sessions for children and youth • Community dialogues on topics of concern • Connecting people with services • Recreational and psychosocial support activities

All families received case management and home visits and could work with project social workers to identify appropriate interventions offered by the project to include in their household plan. Thirteen social workers and community-based trainers (initially intended to facilitate group-based activities, but some of whom also provided support at home) worked directly with families. Some families chose to participate in as many of the offered project activities as they could, while others chose not to participate in HES or family strengthening activities. Sixteen percent of at-risk families and 26 percent of reintegrating families dropped out of the project or were lost to follow-up; and many moved out of the project area.

At the end of the project, FARE reported that, 76 percent of at-risk families had improved their overall vulnerability score measured through the HVAT by 25 percent or more, while only 31 percent of reintegrating families met that threshold. Eighty-four percent of at-risk families improved their economic vulnerability score, compared to 58 percent of reintegrating families.

The proportion of families reporting increased ability to pay for recurring expenses increased in both groups. More than half of at-risk families had increased their incomes by more than 30 percent by the end of the project; this was true for less than 25 percent of reintegrating families. More than 80 percent of at-risk families reported increasing their savings, compared to just under 50 percent of reintegrating families. Sixty percent of at-risk households and 27 percent of reintegrating households reported an increase in their child protection and psychosocial vulnerability scores. Ninety-five percent of at-risk households experienced no separation with a child; over 85% percent of children reunified with families remained in family care at endline. In both groups, there was only slight improvement in school enrollment, likely because parents were still unable to reliably pay children's school fees. A summary of changes to key indicators at endline, disaggregated by economic strengthening activity, is provided in Table 9 (Namey, Laumann, Okumu, and Zissette 2019).

Among the challenges FARE staff reported experiencing was a caseload too large to be manageable by team members; they felt this was particularly the case with respect to reintegrating families, many of whom required a great deal of time and support. Family members were busy and highly mobile and had little time for project activities, and some thought they might experience stigma for participating in FARE or were otherwise not interested. Families also moved very often, which made it hard for team members to track them down. Substantial gaps in time between data collection, development of household plans, and the rollout of activities may have demotivated members of some targeted families. FARE's emphasis on group-based activities meant that it was not well-prepared to reach scattered reintegrating households.

Table 10. FARE project - Summary of key indicators by ES activity

	Improvements on key indicators at endline	At-risk HHs				Reintegrating HHs				
		All HHs	VSLA	CT+ VSLA	No ES	All HHs	CT	Comm Skills	Other ES	No ES
		(n=292)	(n=187)	(n=36)	(n=63)	(n=188)	(n=44)	(n=30)	(n=17)	(n=97)
Child protection concerns	Decrease in % of HHs reporting a child separation in past 6 months	✓*	✓	-	✓*	NA	NA	NA	NA	NA
	Decrease in % HHs with child living outside family for any reason	✓*	✓	✓	✓	NA	NA	NA	NA	NA
	Reduction in % HHs with reported child protection issues (reductions across all issues)^	✓	✓	✓	✓	✓	✓	✓	✓	-
	Reduction in % HHs reporting harsh discipline practices (reductions in all types)^	✓	✓	✓	-	✓	✓	✓	✓	-
Economic well-being and basic needs	Reduction in economic vulnerability (CPA1)	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓*
	Reduction in % destitute HHs (Simple Tool)	✓*	✓*	✓*	✓*	✓*	✓	✓	-	✓
	Reduction in % HHs likely to be living on <\$2/day PPP (PPI)	✓*	✓*	✓*	✓	-	-	-	-	-
	Increase in median HH income	✓*	✓*	✓*	✓*	✓	✓	✓	✓	-
	Reduction in % HHs with risky coping strategies	✓*	✓*	✓*	✓	✓	-	✓	-	-
	Increase in % HHs with ability to cover all basic needs past 3 months	✓*	✓*	✓*	-	✓*	✓*	✓	-	✓*
	Increase in % HHs with 2+ meals/day	✓*	✓*	✓*	✓	✓*	✓	✓	✓	✓*
	Increase in % HHs with adequate shelter	✓*	✓*	✓*	✓	✓*	✓*	✓	✓	✓*
Education and family well-being	Increase in % HHs with all children in school	✓*	✓*	✓*	✓*	✓*	-	✓	✓	✓*
	Increase in % caregivers with 2+ emotional supports	✓*	✓*	-	✓*	✓*	✓	-	-	✓*
	Increase in % caregivers with 2+ material supports	✓*	✓*	✓*	✓	✓*	✓*	✓	-	✓*
	Improved child well-being/integration, all domains	✓*	✓*	✓*	✓*	✓*	✓	✓	-	✓*
	Improved caregiver well-being/integration, all domains	✓*	✓*	✓*	✓*	✓*	✓	✓	-	✓
		✓*	✓*	✓*	✓*	✓*	✓	✓	-	✓

* = findings statistically significant at $\leq .05$. Key to ES interventions: VSLA = HH received VSLA only, CT + VSLA = HH received both interventions, No ES = HH did not receive HES intervention, Comm Skills = HH received training on productive skills, Other ES = HH received apprenticeship intervention or ad hoc education support only.

CHILDFUND'S ECONOMIC STRENGTHENING TO KEEP AND REINTEGRATE CHILDREN INTO FAMILY CARE (ESFAM) PROJECT IN UGANDA

From late 2015 to early 2018, ChildFund implemented the ESFAM project in Uganda. ESFAM aimed to understand how different HES approaches, combined with social support interventions, could reduce the risk of family-child separation and facilitate the reintegration of children previously reunified from residential child care institutions into family care. ESFAM's theory of change was based on the premise that poverty (and resulting lack of access to education) and lack of social services cause family-child separation in Uganda. Since family needs and capacities vary, ESFAM proposed that HES interventions should be aligned to a household's level of economic vulnerability.

ChildFund had earlier identified three priority implementation districts—Gulu, Luwero, Kamuli—through its ongoing USAID DCOF-funded Deinstitutionalization of Orphans and Vulnerable Children in Uganda (DOVCU) project. These three districts had exhibited a high incidence of family-child separation and high numbers of children in child care institutions, and were also some of the top districts for “supplying” children to child care institutions in other districts. The 611 at-risk families selected to participate in ESFAM were located in 11 parishes in six subcounties in these districts and identified through a three-step process beginning with participatory rapid appraisal to prioritize local factors causing family-child separation and families likely at high risk of separation, followed by verification using ChildFund's ESFAM Family Status Vulnerability Index form, and then collection of data on different domains of caregiver and child well-being using Child and Caregiver Integration Status Tools. ESFAM identified 89 families with reunited and reintegrating children to participate in the project. These children and families were scattered throughout 23 parishes in the targeted districts.

Three district-based staff social workers, 46 volunteer parasocial workers, and 34 volunteer economic strengthening facilitators implemented activities with participants. These volunteer workers received a stipend. Parasocial workers provided participants with messaging and coaching on parenting skills, home-based case management and social support. Economic strengthening facilitators facilitated VSLA and provided financial training and coaching.

Once enrolled in the project, ESFAM reviewed and further assessed family well-being and needs, developed household plans, and initiated monthly or quarterly family visits and monitoring. Using FSVI data, ESFAM classified households by economic vulnerability level (i.e., destitute or struggling to make ends meet) and further divided struggling households into more vulnerable and less vulnerable groups. Each group was offered a distinct package of support (Table 10).

Table 10. Household economic vulnerability levels and corresponding ESFAM packages of support

Economic Status	ESFAM's Packages of Support
Most vulnerable (Destitute)	Household financial literacy training + cash transfer + transition to village-based savings and loan association (VSLA) + group-based business skills training + home-based economic and social coaching
Highly vulnerable (Struggling 1)	Household financial training + matched saving accounts at banks + home-based business skills training at home + home-based economic and social coaching
Vulnerable (Struggling 2)	VSLA + group-based financial literacy and business skills training + home-based economic and social coaching

Families reintegrating children received a reunification package of food, bedding, clothes, and school uniforms. ESFAM also implemented a savings group intervention for children and youth that included financial and life skills training and coaching.

There were several successes resulting from the project. ESFAM's end of project assessment found a substantial reduction in the proportion of households classified as "Destitute" and a substantial increase in the proportion of households classified as "Struggling 2." Over 93 percent of reunified children were in family care for more than 10 months following enrollment, while the remaining reunified children were at boarding school or staying with extended family members. During the project, the proportion of households with all children attending school increased from 50 percent to 80 percent. The proportion of index children with positive well-being status, based on Child Status Index criteria, increased substantially from baseline to endline, and the proportion of families assessed to be at high risk of separation decreased. A summary of changes to key indicators at endline, disaggregated by economic strengthening activity, is provided in Table 11 (Namey, Laumann, Okumu, Zissette, et al. 2019).

ChildFund staff reported a number of things learned from the project. Financial literacy appeared to be an important prerequisite for the success of other HES interventions. Project participants applied the financial literacy training and coaching, and this was apparent in their improved planning for spending and better use of money.

Table 11. ESFAM project – Summary of key indicators by ES activity

Improvements on key indicators at endline	At-risk HHs				Reintegrating HHs						
	All HHs (n=580)	CT (n=55)	CT+ VSLA (n=303)	MSA (n=107)	VSLA (n=64)	Other ES (n=33)	All HHs (n=89)	CT (n=38)	MSA (n=20)	VSLA (n=11)	Other ES (n=11)
Child protection concerns	✓	✓	✓	✓	-	✓	NA	NA	NA	NA	NA
Decrease in % of HHs reporting a child separation in past 6 months	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Decrease in % HHs with child living outside family	✓*	✓	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with no observed child protection issues	✓	-	-	-	-	✓	✓	✓	✓	-	-
Reduction in % HHs reporting harsh discipline practices	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Reduction in economic vulnerability (CPA1)	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Reduction in % destitute HHs (FSVI)	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Reduction in % HHs likely to be living on <\$2/day PPP (PPI)	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in median HH income	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Reduction in % HHs with risky coping strategies	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with ability to cover all basic needs past 3 months	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with 2+ meals/day	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with adequate shelter	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with all children in school	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with 2+ emotional supports	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Increase in % HHs with 2+ material supports	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓
Improved child well-being/integration, all domains	✓	✓	✓*	✓*	✓	✓	✓*	✓	✓	✓	✓
Improved caregiver well-being/integration, all domains	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓	✓	✓	✓

* = Findings statistically significant at ≤ .05. Key to ES interventions: CT [only] and CT + VSLA = Destitute HHs (VSLA was optional). MSA = Struggling 1 HHs that participated in MSA intervention. VSLA = Struggling 2 HH that participated in VSLA intervention. Other ES = HHs that participated in financial literacy or business skills training/coaching only, but not CT, MSA or VSLA interventions.

ESFAM also learned that financial support in the form of cash transfers or savings match was a catalyst for positive family and child outcomes. Destitute and Struggling 1 households that received financial support were more motivated to participate in project activities, leading to better outcomes than for Struggling 2 households, which did not receive financial support. Cash transfers were a major incentive for participants in the Destitute category to participate in VSLA groups.

ESFAM also faced a number of challenges. Project staff found that getting Struggling 1 participants to agree to open bank accounts and save money in them required a great deal of time and effort on the part of staff. Project staff felt that the implementation period was too short; therefore, some program effects may not have been visible in measured outcomes. Furthermore, the limited technical capacity of parasocial workers and economic strengthening facilitators vis-a-vis the complex programming and case management process, and high turnover in some locations, contributed to implementation delays.

CHILDFUND'S DEINSTITUTIONALIZATION OF ORPHANS AND VULNERABLE CHILDREN PROJECT (DOVCU) IN UGANDA

From 2014 to 2017, ChildFund implemented the DOVCU project in Uganda with partners Retrak, TPO, and Child's i Foundation; five community-based organizations; and in collaboration with the Ministry of Gender, Labor and Social Affairs. The four-year project supported the national child care reform efforts to:

- Strengthen the capacities of district level officials and social workers to establish alternative care panels to inspect residential care centers, to serve as gatekeepers to prevent new children from entering and close centers as needed in twelve priority districts;
- At the community level, map household vulnerabilities were mapped to accurately target children at risk of separation, reaching close to 20,000 children and families; and
- Support social workers and para-social workers to facilitate the reunification of 2,000 children in residential care.

DOVCU worked with families and child care institutions in two parishes in two subcounties in each of six districts. Children from child care institutions were returned to families over a much larger geographic area, and DOVCU coordinated with local authorities, as well as child care institutions and national authorities, to reinforce follow-up and other support to them.

At the community level, DOVCU strengthened informal child protection mechanisms and mobilized communities to monitor children's well-being, training community leaders and faith-based organizations to use a variety of community mobilization methods to support family-based care. Support to families included social services and HES using a graduation approach. Activities with families and intended results are shown in Table 12.

Table 12. DOVCU activities with families and their intended intermediate results

Intermediate Results to Prevent Unnecessary Separation	Activities
Households with children at risk of family separation recover assets; stabilize household consumption and economic conditions (destitute households re-build short-term capacity to pay for basic necessities).	<ul style="list-style-type: none"> • Cash transfers to destitute households (e.g., disabled, sick and elderly heads of household), preceded by financial literacy training and supported by financial counseling • Links/referrals to other HES opportunities • VSLA for struggling households • Training of VSLA on microenterprise selection, planning and management • Reunification package for families at reintegrating children
Older highly vulnerable children with highly demanded skills in the local labor market.	<ul style="list-style-type: none"> • Vocational training for targeted older youth
Targeted caregivers show improved parenting skills and understand the benefits of family-based care	<ul style="list-style-type: none"> • Parenting skills sensitization and training through community meetings, group training, and interactive learning at the household level • Home visits by trained parasocial workers, government community development officers, and project staff • Group parent support sessions to VSLA, women’s groups, youth groups, other groups
Children living in households supported to recover from psychosocial problems show reduced psychosocial distress	<ul style="list-style-type: none"> • Alcoholics Anonymous groups “plus” • Awareness raising by community support structures • Post-treatment support groups for people recovering from substance abuse and community sensitization to support these people • Mental health partnerships with health facilities • Strengthening community support structures in child protection
Strengthened community-level skills and knowledge to effectively manage psychosocial conditions that perpetuate child separation	<ul style="list-style-type: none"> • Dissemination of child protection messaging • Children’s clubs • Child protection reflection meetings for government and community structures

(ChildFund International 2018b)

DOVCU sought, through its graduation approach, to address poverty as a factor pushing children to leave home in order to receive support at child care centers. It also found that fathers' alcoholism was a contributing push factor for child-family separation and it used the Alcoholics Anonymous 12-step model with success.

An evaluation of DOVCU found that households' economic vulnerability reduced over the course of the project, with most households falling into the struggling category at endline. The vulnerability scores of children in targeted households improved as well, with the most significant changes seen in health, shelter, and care, followed by food, nutrition, and education and skills training. Psychosocial support and protection also show improvement, although to a lesser extent. The evaluators found that the cash transfer helped vulnerable households to better regulate consumption and increase food security and nutrition, but that interview respondents did not feel it had fully brought them out of food insecurity for the longer term. Parenting skills training was also seen as very helpful (Severinsson 2018).

Some of the challenges the project reported facing included its long preparatory time, which limited time for support to families. DOVCU's geographic scope was wide, but limited in each district, and it might have been better to concentrate in fewer districts. That being said, it was impossible to predict accurately at the start of the project where the families of children returning to care would be located. DOVCU found that support to reunified families needed to emphasize social worker and peer support, as many of these families could not be included in group-based activities (ChildFund International 2018b).

RETRAK/HOPE FOR JUSTICE ETHIOPIA: WORKING WITH VULNERABLE CHILDREN TO PREPARE AND REINTEGRATE THEM WITH THEIR FAMILIES IN RURAL COMMUNITIES

Since 2006, Retrak has worked in Addis Ababa, two regional cities, and rural communities to support reintegration of street-connected boys and girls who are escaping from abusive domestic service. This effort includes center-based transitional support for two to three months (e.g., accommodation, food, medical care, life skills training, education catch-up classes, and psychosocial support to help them cope with abuse and trauma). Families are prepared for the reunification, and an economic strengthening (ES) grant is provided to families for consumption and income-generation activities. Links are made with the local government for monitoring and to ensure access to services such as education and food programs. Retrak staff make periodic follow-up visits. Reunification preparation includes a plan that indicates that the returning child will attend school and that the family will use its ES grant for appropriate purposes. This plan is signed by the parent, Retrak, and a government representative. Retrak aims to monitor reunified children every two to three months, ideally in person but sometimes by phone due to distance. This follow-up includes counseling and training. If there is some clustering of families, Retrak may offer group learning sessions on parenting issues and skills. Generally, the highest risk of re-separation is during the first three months following reunification. Retrak follows reunified families for two years or until they meet its phase-out criterion, which is a score of four on all domains of the Child Status Index (CSI) in two consecutive follow-up visits.

Retrak uses the logic of the graduation model to inform its understanding of what families need. It employs the CSI to assess the family's economic circumstances and need for ES. If children have a low score on the CSI domains of food, shelter, access to education, or health care when reunified with their families, Retrak provides their families with an ES grant, delivered in one or two installments, along with business skills training and parenting training. These grants are intended to help with consumption and investment in income generation, diversification, and value addition so that families are better able to meet children's needs; families decide how to use them. Retrak finds that almost all reunified families need these grants. Prior to late 2017, the value of the ES grant was about US\$51, which Retrak felt was enough to help most recipient families improve their economic status. However, following the launch of Ethiopia's National ES Guidelines for Vulnerable Populations, the amount was increased to the government standard of about US\$91. Retrak encourages families to save or invest about two-thirds of the total amount. Retrak may provide a grant to an older reunified child if he or she wants to contribute to the family income, following a five-day small business skills training at the rehabilitation center.

Retrak finds that ES grants are most useful when families use them to start a small business. It may supplement a grant if a family has had to use a grant to meet consumption needs or cope with a shock. While Retrak finds that most families follow through on their plans, an illness of

a family member can “undo” the plan as its ES foundation is undermined. Retrak takes steps to reduce the possibilities that other families may see the ES grant as an incentive to send their children to cities to work; it encourages children to talk about their experiences on the street or in domestic service, and staff members also talk about these realities when community members gather to welcome children home to reduce the “celebrity” factor.

Retrak estimates that 73 percent of reunified boys and 86 percent of reunified girls are still at home and at school 12 months after reunification. It appears that the ES grants contribute to positive longer-term outcomes, as some families have made substantial savings over two or three years, and some children have gone to university or into lucrative skilled jobs. Children and caregivers recognize ES support as an important contributing factor in keeping reunified children at home, but they also indicate that changes in children’s attitudes and behavior and in caregivers’ attitudes about parenting and migration are essential.

RETRAK/HOPE FOR JUSTICE ETHIOPIA/HOPE FOR JUSTICE: PREVENTION OF SEPARATION PROGRAM

In Hadiya and Wolaya zones in Ethiopia's Southern Nations, Nationalities and Peoples' Region, Retrak runs community-based programs to prevent family separation. These programs address major push factors that encourage family separation: (1) poverty, (2) inadequate parenting knowledge and skills, (3) peer pressure among youth, and (4) community attitudes that view children as economic assets. Retrak now aims to work in communities for four years after learning that three years was not quite long enough for the groups it forms to be sustainable without support.

Retrak's main prevention program is realized through self-help groups (SHGs) aimed at women's empowerment, economic strengthening, and building knowledge and skills in parenting, risks of migration, trafficking, and family separation. Families are selected for inclusion in the SHGs through a participatory process in which communities identify the families most at risk who are then invited to join the SHGs. Retrak tries to get 20 women per group at the start. Retrak does not provide cash or matched funding to families in the SHGs, only training and facilitation. Training includes the SHG approach, saving, loans, small business skills, parenting, and risks of migration and is organized based on the needs of each group. The intended outcome is that families are economically secure and able to meet the needs of children for food, shelter, health care, education, and emotional well-being within the context of rural communities. The groups place their funds in bank accounts in areas where SHGs can open bank accounts; in more remote areas, they place their funds in microfinance organizations.

All activities are facilitated by community development workers with a degree in development or community work and training in SHG approach and parenting skills. Most staff are new graduates or have only a couple of months of experience. Retrak recruits in the areas where they work, but they have noted facing challenges in recruiting women because Ethiopian culture dictates that women "should be quiet and submissive" and found that many women lacked the communication and leadership skills needed for mobilization and facilitating groups. Both male and female staff seem able to develop productive relationships with the women in the groups.

Retrak's response to peer pressure among youth to migrate for work is child protection clubs organized in schools. It sees social interventions such as this one as a way to combat a prevailing pattern of families' sending children to the city to work. The groups provide certain basic resources (e.g., some money, materials, mini-media, and sports materials), but much of what they do is basic messaging on migration, trafficking, and girls in domestic work. Children who return are encouraged to talk about their experience and to debunk myths about migration. Retrak trains two teachers to be mentors of a school club. These teachers then select 20 children who are trained and provide peer education for children, parents, and teachers about issues that are important in their community.

Retrak seeks to influence community attitudes by organizing awareness raising events with community leaders, husbands of women in SHGs, and key government officials.

The tools used to measure success include the Household Economic Vulnerability Tool (HHEVT) developed for use in United States-funded orphans and vulnerable children programs and approved by the Ethiopian government, Progress out of Poverty (PoP) Assessment, most significant change stories, and focus group discussions with key community leaders and school principals. Retrak concedes that measuring prevention of family separation is difficult, but the most significant change stories from SHGs and reports from the child protection committees all indicate examples of families who decided against letting their children leave and children who decided against separating. SHG members have reported that the economic advantages of the SHG are important (and why most women joined), but that they find the social empowerment to be far more important/beneficial.

In its prevention work, Retrak has learned that real change takes time (three years minimum), but that if they work consistently during this period, changed attitudes regarding migration, behavioral changes, and women's empowerment lead to stronger communities. They also feel strongly that they must implement their community program without providing seed grants or matched funding to SHGs because this is the very essence of the SHG approach—by not doing this, the process of economic empowerment is slower, because people have been conditioned to expect an incentive, but sustainable.

HOPE AND HOMES FOR CHILDREN (HHC) ROMANIA: REFORM OF THE CHILD PROTECTION SYSTEM IN ROMANIA

HHC has worked in Romania since 1998. It works at both the national and local levels. It supports state authorities in reforming the child protection system, and at the local level it supports closure of residential institutions and builds capacity among personnel working with children. Its programs have three main characteristics: a holistic approach with individualized solutions; a flexible character allowing for change and iterative steps; and a systemic approach involving relevant local agencies and other stakeholders to ensure sustainability and target causal factors of vulnerability and separation.

Its reintegration project is aimed at children in state-run institutions, including old-style institutions in which over half of the children have special needs. Other activities concern prevention support for children at risk of separation or institutionalization and family-style alternative care placements for children already separated from their families. Both their reintegration and prevention programs assess families using a proprietary tool which addresses five areas of well-being (living conditions, financial situation, family and social environment, education, physical and mental health) and ensures a comprehensive overview of the family's conditions and needs. Most families are enrolled in HHC's prevention program through the local Child Protection Directorate (CPD) and Public Service for Social Work (PSSW) with a small number of self-referred families.

For the reintegration program, HHC works with families in order to meet needs in these five areas. An assessment is carried out, usually three months after the opening of a case. If conditions are deemed sufficient and sustainable, the child is returned to the birth family or extended family. A multidisciplinary HHC team including a psychologist (for reintegrating families) and a social worker implements the interventions together with representatives of the CPD and PSSW, who also take over the monitoring of the family and child/children once the reintegration process is finished. Support for reintegration generally lasts three to nine months, plus family monitoring for an additional three months, while the prevention program generally takes one to six months (or more) depending on the family's levels of risk and need. The program has a 98 percent success rate in terms of children remaining in family care. This is attributed to the multidisciplinary nature of the program and its integration of local authorities and other stakeholders to ensure sustainability. HHC uses the Quality of Life Assessment Tool and scores the family at various timepoints to track progress and determine indicators of success. The family itself is involved throughout, as well as CPD and PSSW officials who monitor post-intervention.

Interventions involve close consultation with the individual families and involvement of local authorities, counseling on issues and needs identified in the assessment, and support activities. HES-related support activities include material/financial support to address problems in the physical environment that make it hard to keep children at home (e.g., provision of extra food resources, clothing, footwear, school supplies or hygiene items; covering household costs or taxes for a limited period of time in order to avoid eviction; provision of home appliances in order to increase the safety of the home and to improve the health and security conditions for the children; and provision of drugs or medical items that are urgently needed). HES support activities also include facilitating families' access to different services; financial education; assistance for employment; and improvement of relations with employers, community members, or authorities. This approach helps ensure sustainability of prevention measures.

HHC Romania does not have a formal means of tracking individual outputs since cases are complex and diverse; rather, it tracks these in a global manner, by the achievement of the objectives set forth in the intervention plan. HHC feels that the most successful aspects of their interventions are those that provide families with medium- and long-term sustainability and break dependency on social welfare. While there are economic interventions that respond to very urgent needs, they try to include them in a larger set of measures that improve the family's lives and help establish sustainable welfare. HHC feels it is very important that the families supported by the program understand the intrinsic value of the support afforded to them (to be able to retain children in family care) versus the extrinsic value of the economic support (e.g., an apartment that can be sold to raise money).

HHC Romania has learned several key lessons during its work, including the need to insist on school attendance and performance to break the cycle of poverty. They have recognized that medium- and long-term interventions are much more effective (even if they are more costly than short-term activities) for families, as they reduce and finally break the dependency cycle. Also, they have recognized the critical need to create a support network among public authorities and NGOs to ensure proper, meaningful, and sustainable outcomes.

HHC RWANDA: STRENGTHENING NATIONAL CHILD PROTECTION AND CARE SYSTEMS

HHC has worked in Rwanda since 2002. In keeping with the government's policy, HHC Rwanda aims to support the transformation of Rwanda's current child care and protection system into a family-based, family strengthening system whose resources (both human and financial) are primarily targeted at supporting vulnerable families to remain together. A further objective is to promote positive Rwandan social values that encourage all Rwandans and their communities to take responsibility for vulnerable children. HHC works with the subpopulation of children in residential care for reintegration and with families in hot spots to prevent separation. Their interventions can be direct (e.g., HHC professionals working with children and families during reunification and/or responding to the causes of separation) or indirect (e.g., training and working with partners to ensure follow up and family monitoring/sustainability). In contrast to more "broad brush" orphans and other vulnerable children programs, HHC focuses on the unique, specific needs of families.

Families reintegrating children are assessed on a six-monthly basis using a child-focused tool that concerns psycho-social issues, including child rights and/or a family tool that looks at these domains: living conditions, including where and how the child resides and the quality of those conditions; family and social relationships between members and within the community; behavior, including aggression, conflict, substance abuse, and sexual abuse; physical and mental health, related to medical history, insurance coverage, access, and developmental disorders; education, including parents' education history, children's access to and attendance and performance at school; and employment and household economy, including employment status of household members, income generation, access to benefits, and other means of support.

Key project activities include engagement; capacity building/human resource development of professionals; development of community alternative care (including foster care), building prevention mechanisms to prevent family breakdown; moving children living in institutions into families; reforming the buildings of former orphanages into relevant child-centered, community-based support centers; providing support to poor and vulnerable families; following up children; assessing the services developed; and closing cases and handing over the developed services to the community for sustainable operation. The support provided to families is responsive to the needs identified in the assessment of the family and can include motivating families to send their children to school; paying for school fees, school materials, and uniforms; paying for health insurance and some medical fees; and working with the family to design and develop a business to become resilient. They will support a family to start a business and follow up to make sure it develops and that there is benefit from it. Advocacy for families and mobilizing additional community resources and support are additional aspects of the project.

The workforce involved is HHC staff (psychologists and social workers), professionals trained by the National Commission for Children (psychologists and social workers, most of whom are based at the district level), local leaders, and community volunteers. HHC works closely with local authorities and other partners. It receives referrals but also identifies risk areas and discusses hot-spot zones with local authorities.

The duration of support for prevention depends on the case and the risk identified, but it is estimated to be a period from one month to one year. HHC engages families in savings groups, income-generating groups, nutrition groups, or farmer field school groups, depending on the analyzed cause of risk of separation. These groups build social cohesion and are a platform to learn about topics such as hygiene and family planning. Families participate in these groups for one year and then “graduate” based on an assessment of their resilience and capacity to care for their children and raise them in a safe and loving way. These groups build social cohesion and are a platform to learn about such things as hygiene and family planning. For reintegration, the duration of HHC support is generally between three months and three years, but support may even extend to five years for the cases of children with special needs. HHC assesses whether there has been family re-separation at one year, three years, and five years. To date reintegration has been successful, with only 0.04 percent breakdown as of five years of follow-up.

In terms of lessons learned, HHC Rwanda feels that direct economic support is important to provide immediate aid and maintain the self-esteem of families; however, this support must be balanced with an understanding as to why the family is receiving such support, which is to build their capacity and self-reliance. This is achieved step-by-step with the involvement of professionals to enable families to achieve sustainable well-being.

HHC/CHILDREN CARE AND COMMUNITIES (CCF) AND LUMOS FOUNDATION MOLDOVA: SUPPORT FOR CHILD CARE REFORM AND A CHILD PROTECTION SYSTEM

In Moldova, Children Care and Communities (CCF, HHC's Moldova representative) and Lumos Foundation separately support national and local authorities in the implementation of child care reform and the development of a child protection system. CCF and Lumos work on prevention of family-child separation; deinstitutionalization and reunification of children; children's reintegration in communities; mainstream health, education, and social services; service development; and building the capacity of the local work force. CCF focuses on children ages zero to seven; Lumos focuses on older children and children with special needs.

Support for reintegrating families and families at risk of separation include family assessment and intervention/support planning; assistance based on identified needs; strengthening community support for the intervention (services needed for the child and family, e.g., school, rehabilitation, day care); post-intervention support based on continuous needs assessment; monitoring visits; and case review/closure. Reintegration-specific activities are preparing the family for reintegration of children; preparing the children for reintegration (in accordance with age); and reintegration support (especially if a child has been in long-term institutional care). Staff of both organizations work closely with professionals from public services and representatives of local public authorities, such as social workers, mayors, local multidisciplinary teams, and service providers (e.g., crèches, institution staff, foster care), as relevant.

CCF estimates that families need 12 months of active intervention, followed by approximately six months of monitoring, but some cases can last up to two years. Lumos reports that the duration of its child/family support is based on the individual needs and complexity of the case but is not shorter than six months. Government legislation dictates that six months is the maximum duration for the provision of economic support. Successful reintegration is assessed based indicators related to health, development (i.e., physical, emotional, cognitive), school achievements, communication and social skills, and relationship within the family and with peers. CCF estimates a success rate of approximately 99 percent for reunified families and a 93 percent success rate among prevention cases.

Not all families require and receive HES interventions, and CCF stresses that HES support should be accompanied by counseling and psychological support. Both organizations report providing families with short-term food or material support for consumption and assisting with school-related costs such as supplies, uniforms, sport shoes, bicycles for transportation, and tutoring on school subjects. CCF reports actively linking families with the government's unconditional cash transfer scheme and indicates that its most successful HES intervention

is likely the provision of productive assets (e.g., animals, seeds, tools, equipment). Lumos reports providing long-term food or material support, paying health care costs, and supporting vocational training of care-leavers.

CCF has learned that it is essential to build trust with families and consult with them to understand needs, desires, resources, and competencies, but that it is also important to limit families' dependence and reliance on their support; understand what the market needs; and pull resources from all partners. Lumos has learned that HES support is very important for their reintegration and separation programs but that it must be accompanied by social interventions and capacity building of all beneficiaries, in addition to being well supported and monitored.

HHC BULGARIA

HHC's work in Bulgaria aims to eradicate institutional care for children under the age of three and play a significant role in reforming the national child protection system in Bulgaria for all children. The project involves the application of HHC's Active Family Support model, work in the field on prevention and reintegration, direct collaboration with the local stakeholders applying a coordination mechanism as a successful model of communication, exchange of information among specialists, and decision making for coordinated case management.

Families are identified and referred by Child Protection Departments (CPDs), after which HHC Bulgaria visits the family and conducts its own comprehensive assessment. Its workforce consists of 24 people engaged with implementation of the key activities and direct fieldwork, and a team of 10 trainers supporting capacity building of specialists in the system. Its intervention duration is based on the individual needs and assessment of the family and their child/children and can last from two months to two years. The main monitoring activities in HHC's model include assessments at enrollment, at case closure, and at six months after case closure; ongoing consultations; regular visits and contacts with the family and the child; and multidisciplinary meetings with all parties engaged in the process of prevention or reintegration.

While HHC Bulgaria recognizes that the connection between social and economic interventions is of great importance for the successful strengthening of a family, its Active Family Support model does not assume that HHC or others will automatically give money directly to families. The assessment reveals what support is needed, and then appropriate support is determined through collaboration with all of the relevant stakeholders in the region where the family lives. This offers the opportunity to combine resources from different sources, which helps ensure safety and security in as many areas as possible, supports sustainability, and helps the family establish a solid place in the community. The key element is the direct work with the family— assisting it to access various institutions (including those that might facilitate financial or other HES support), supporting it with specific actions, advocating for it, counseling, and providing emotional support in the period of crisis and as time goes on.

In terms of lessons learned, HHC Bulgaria noted that they believe their mission is achievable and applicable for all families, that working in partnership through cooperative efforts is key, and that families must be very active participants in all stages of the intervention.

HHC BOSNIA AND HERZEGOVINA

HHC's Bosnia and Herzegovina (BiH) program has a primary focus on prevention of separation of children from their parents but also supports the reintegration of separated children from institutions back into their biological families. The program uses HHC's Active Family Support model. Families' strengths and needs are assessed, and support is provided across six well-being domains: living conditions, family and social relationships, behavior, physical and mental health, education, employment, and household economy. The program's workforce includes social workers, as well as psychologists who provide coordinating support. Key activities include receiving referrals, assessing family strengths and needs, developing the care plan for a family, providing support, and monitoring. The average duration for reintegration and prevention support to a child and family is six to seven months but can last up to one year to allow for stabilization and/or self-sufficiency. A risk assessment is performed for every child pre- and post-intervention and six months after the support is concluded, followed by an evaluation of the success of goals set in individual care plans for families. Most families identify economic need as their most burning issue.

Key support offered by HHC BiH depends on each unique family's needs and should be provided in combination with other interventions. It is important to be clear with beneficiaries about their capacities and openly discuss opportunities to meet beneficiaries' expectations in the best interest of their children. Most families receive more than one economic intervention during their support period. Support can include linking, such as supporting families' access to state benefits including the government unconditional cash transfer program, although HES interventions provided by the government or others are limited. Support can also consist of making referrals to community programs (e.g., entrepreneurship programs) and developing local support networks, although HES interventions provided by the government or others are limited. Other HES support might include direct financial or material support for short-term crisis management, securing and improving housing, accessing utilities, paying for school fees or other school-related costs, access to primary health services, access to specialized support for domestic and/or substance abuse, the provision of productive assets, job placement assistance, access to small grants and technical and vocational education, financial literacy training, and referrals to providers of economic support/services.

HHC BiH feels that a combination of skills training, assistance with job searching, and developing financial skills helps families achieve the most sustainable results.

Resource

Review of Hope and Homes for Children ACTIVE Family Support program in Bosnia and Herzegovina 2003–2010: <https://bettercarenetwork.org/sites/default/files/attachments/Preventing%20Separation%20Bosnia.pdf>

TRICKLE UP/UNIVERSITY OF CHICAGO: ASSESSING CHILD WELLBEING AND PROTECTION OUTCOMES STUDY IN BURKINA FASO

In rural, northern Burkina Faso, during 24 months from 2013 to 2016, Trickle Up/University of Chicago sought to test the effects of a household economic intervention in a three-arm cluster randomized controlled trial (RCT). The focus of the trial was on reducing risk factors related to separation of children from families. The RCT included a total of 360 extremely poor female caregivers and their children (ages 10–15)—120 caregivers in each arm of the trial. The three arms were economic intervention for women, combination of economic intervention and family coaching on child well-being, and a control (caregivers were placed on a waitlist for support after completion of the study).

The project employed an initial participatory wealth ranking exercise with community members to determine the main characteristics of poverty. The exercise was facilitated by the field agents of Trickle Up's local partner, ADEFAD. Through discussions on how one characteristic differs from the next, the team developed locally defined poverty criteria which, through a facilitated process, community members then used to rank all the households in a village into three groups: very poor, poor, and less poor. This categorization was followed by household-level verification of poverty using a simple scorecard, which was modified to determine whether the household had children ages 10–15 in order to qualify for the RCT. The Trickle Up team then received consent for participation from the head of household, female caregiver, and participating child.

The basic economic intervention was the same for all participants in the two intervention arms, but staff worked with each participant to develop her own livelihood plan based on the household's specific circumstances. The economic strengthening supports that were provided included SG formation and training using the VSLA model, livelihood planning and training, seed grants of approximately US\$100, and one-on-one mentoring and coaching through the life of the project. The seed grants were usually lump sum payments and were invested according to the unique livelihood plans developed by the families. Trickle Up bases its economic strengthening theory of change on the graduation model. It sequences its interventions to enable women to develop skills and assets to develop sustainable livelihoods.

The sensitization component focused on child protection and well-being and was delivered through facilitated discussions in savings groups and household coaching visits. Importantly, the household coaching visits also included all other household members. They were combined with regular coaching visits delivered through the economic strengthening component. Structured discussions lasted for five months, and a new topic was discussed each month. Coaches then continued to follow up with sensitization and problem solving related to risk factors specific to each household throughout the project period.

The study identified a significant intervention effect on income from market activities and greater asset ownership by the women. While expenditure on children increased, the rate of

increase was less than the rate of increased income and profits. Women who received the graduation model economic intervention (both in the ES-only and combined study arms) showed a significant improvement in financial autonomy and in quality of marital relationships. The positive impact on child well-being and parenting variables was observed when the economic intervention for women was combined with the sensitization for all household members (e.g., reduction in the use of harsh discipline by parents, children's reduced exposure to violence at home, reduced involvement in hazardous child labor; improvement in child-parent relationships; improvement in parental attitudes supporting child protection, such as favoring girls' education over child marriage or child labor; and improvements in children's emotional well-being, including increased self-esteem and lower depression and emotional trauma). While economic strengthening provided an important foundation for addressing risk factors associated with children in low-income households, Trickle Up does not assume that HES will on its own positively affect risk factors related to family separation.

Through an integrated, sequenced approach adapted to localized contexts, Trickle Up has noted the success of its economic strengthening interventions across a variety of contexts, consistent with other evidence of the impacts of the graduation approach. The sequencing of the sensitization component also appears to have been important, thereby mutually reinforcing the economic strengthening component. In fact, through the RCT, the researchers found that the economic outcomes of the group that received the sensitization component were higher; this appears to be due to, at least in part, the increased buy-in from the household in general.

Based on its experience, Trickle Up recommends starting interventions with a focus on more neutral topics associated with economic strengthening through discussions in SGs (with male buy-in) and in households, building trust with the participants and the male counterparts helps to ensure continued participation. Later, building on the foundation of trust, more challenging topics can be raised with the participants. Trickle Up has noted that savings groups are seen as relatively neutral and safe spaces by others because of their ostensibly economic focus; once established, they can provide a good forum to address potentially sensitive or controversial issues, such as girls' schooling, early marriage, and gendered decision making around resource allocation.

Resources

“Improving Child Mental Health in Ultra-Poor Families: Two-Year Outcomes of a Cluster-Randomized Trial in Burkina Faso”, by L. Ismayilova, L. Karimli, J. Sanson, *Social Science & Medicine*, (2018) <https://www.sciencedirect.com/science/article/pii/S0277953618301898>

“Integrating economic strengthening and family coaching to reduce work-related health hazards among children in poor households: Burkina Faso,” L. Karimli L., L. Rost, L. Ismayilova, *Journal of Adolescent Health*, (2018), [https://www.jahonline.org/article/S1054-139X\(17\)30333-6/fulltext](https://www.jahonline.org/article/S1054-139X(17)30333-6/fulltext)

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FRIENDS-INTERNATIONAL CAMBODIA PROGRAMS

Friends-International (FI) is a global social enterprise with 25 years of experience working with marginalized children, youth, families and communities. FI enables individuals who often severely lack opportunities to become productive, functional and independent autonomous citizens of their country. Its work draws on three strategies: developing innovative, holistic services that respond to the ever-changing needs of children and youth; ensuring better coordination, collaboration and overall quality in services among NGOs in the field; and involving all actors of society (citizens, businesses, travelers) in the protection of children and youth. In Cambodia, these strategies are reflected in three main programs.

THE FRIENDS ALLIANCE

Friends Alliance programs Mith Samlanh in Phnom Penh and Kaliyan Mith in Siem Reap, through their Saving Lives outreach interventions in high-risk areas, provide marginalized people a range of direct services including health, education, support to drug users, and life skills development. Building Futures interventions offer opportunities in education, vocational training, and soft skills development that lead to younger children's return to and reintegration in school, employment and business start-ups for youth, and income generation for caretakers. Mith Samlanh and Kaliyan Mith place youth in apprenticeships in their communities and in FI-operated businesses that serve as vocational training providers. These include an electricity workshop, barber workshops, beauty workshops, mechanics workshops, welding workshop, restaurants and sewing workshops. These programs also make similar placements for caregivers of children and youth to ensure the stability of the family unit and ensure children are able to remain in school without the need to drop out to earn money to support their relatives.

THE CHILDSAFE ALLIANCE

In Cambodia, the Partnership Program for the Protection of Children (3PC) is FI's expression of its broader ChildSafe Alliance. 3PC is a Cambodian child protection program powered by FI in collaboration with UNICEF and the Cambodian Ministry of Social Affairs, Veterans and Youth Rehabilitation. It provides a platform for NGO child protection partners to share best practice and to implement programs that support government child protection and care objectives such as elimination of violence against children, appropriate alternative care, prevention of unnecessary family separation, and reintegration of formerly institutionalized children and youth. Specialist groups meet regularly to discuss and implement initiatives around specific issues.

The Employment and Vocational Training Specialist Group has yielded fruit in the form of an FI collaboration with 3PC Partners M'Lop Tapang and Mith Samlanh to create an employment program called Futures that supports youth and caregivers to access employment or develop their own businesses. The Futures program has been rapidly replicated among other partners

in Cambodia and globally and Futures workshops help to streamline approaches, share ideas and lessons learned, and support one another to improve employment programming.

FI also franchised its training business model, particularly the training restaurant model, allowing for partners to replicate and rapidly operate their own restaurants that help build effective economic independence for youth and caretakers.

THE CHILDSAFE MOVEMENT

Many 3PC Partners are also ChildSafe Movement implementers. They run awareness campaigns to Cambodian citizens (including children), businesses operating in Cambodia and travelers and volunteers coming to Cambodia so that they recognize children at risk and are able to respond to needs. A significant focus is put on protecting children from unnecessary separation from their families, reducing the risks for children in residential care institutions, and pushing for increased support for family-based care. The Movement also selects, trains, and certifies individuals to be directly involved in the protection of children in their communities and places of work.

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Mission Statement

ASPIRES accelerates evidence-based practice in economic strengthening for vulnerable populations through research and technical assistance.

Statement of Purpose

ASPIRES is a PEPFAR- and USAID-funded economic strengthening (ES) project focused on vulnerable populations, especially those affected by HIV. We aim to promote evidence-based practice by providing technical assistance (TA) for integrated ES programming most consistent with positive livelihood, health, and well-being outcomes. At the same time, we strengthen the evidentiary record through rigorous research so that future programming efforts have stronger foundations.

Research is at the heart of the ASPIRES identity, and all of our projects begin with a systematic interrogation of the existing evidence base in relevant program areas. We make major investments in original evaluation research of the highest possible rigor, both for course correction in implementation and to add to the evidence base. We share our findings on best practices with partners, the broader development community, policymakers, and other key constituents, and we offer TA to support programs that seek to replicate those practices.

ASPIRES provides limited direct implementation. Instead, we focus on providing existing USAID-funded projects with TA and research related to ES. This allows us to balance the collaboration necessary for in-depth research with independence from program operations. In this manner, we generate findings that contribute to identifying a core set of pathways to greater resilience for vulnerable households, and that provide insight into effective, efficient, and scalable interventions to achieve the desired impacts.

ASPIRES has no single theory of change; we are not a single-model or one-size-fits-all project. We are open to all manner of integrated ES interventions of interest to our USAID and PEPFAR stakeholders, with the ultimate aim to shape interventions around the best evidence available.

