

A Case Study

Bonukhanyo Youth Organisation's OVC Project



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Cover photo by Gareth Rossiter: Children enjoy a wholesome meal at the drop-in centre after school each day.

Acronyms

AI	appreciative inquiry
AIDS	acquired immune deficiency syndrome
BYO	Bonukhanyo Youth Organisation
CBO	community-based organisation
DoH	Department of Health
DoSD	Department of Social Development
ECD	early childhood development
emergency plan	U.S. President's Emergency Plan for AIDS Relief
HBC	home-based care
HIV	human immunodeficiency virus
NGO	nongovernmental organisation
NPO	nonprofit organisation
OVC	orphans and vulnerable children
SCDC	Sinamya Community Development Centre
UNAIDS	United Nations Joint Programme on HIV/AIDS
UNICEF	United Nations Children's Fund
USAID	U.S. Agency for International Development

Executive Summary

Despite the magnitude and negative consequences of the growing number of orphans and vulnerable children (OVC) in South Africa, there is insufficient documentation on “what works” to improve the well-being of these children affected by HIV/AIDS. In an attempt to fill these knowledge gaps, this case study is one of the 32 OVC programme case studies that have been researched and written by Khulisa Management Services with support from MEASURE Evaluation, the Support for Economic Growth and Analysis II (SEGA II) project, the U.S. President’s Emergency Plan for AIDS Relief (emergency plan), and U.S. Agency for International Development (USAID/South Africa).

The primary audience for this case study includes Bonukhanyo Youth Organisation (BYO), programme implementers in South Africa and elsewhere in Africa, as well as policy-makers and funding agencies addressing OVC needs. This case study is based upon programme document reviews; programme site visits, including discussions with local staff, volunteers, beneficiaries, and community members; and observations of programme activities. When designing this research, appreciative inquiry (AI) concepts were used to help focus the evaluation and to develop and implement several data collection methods. AI was used to identify innovations and strengths (both known and unknown) in the BYO OVC project, and to identify and make explicit areas of good performance, in the hopes that such performance is continued or replicated. Data collection for this case study took place in August 2007.

Bonukhanyo (meaning light) Youth Organisation is located in the Alfred Nzo District of the Eastern Cape Province in South Africa. The Eastern Cape Province is characterised by a high HIV prevalence rate, few economic opportunities, and high levels of unemployment resulting in households surviving on grants from the Department of Social Development. The area the project provides services to has a high density of OVC, predominantly due to poverty and the high HIV/AIDS prevalence rate. BYO is located on property belonging to the parents of the organisations founder.

BYO began its operations in 2001 when the founding member decided to take it upon herself (with the help of family, friends, and neighbours) to do something about the social ills that were plaguing the area. Activities began with an HIV/AIDS awareness drive which saw the recruitment of 10 people from surrounding villages. This initial group was trained in home based care after which BYO was able to begin its operations.

BYO has been instrumental in providing much-needed services to the areas it operates in. The key activities through which it does this are mainly networking with other community-based organisations and departments that, in turn, facilitate access to a wide range of services the organisation does not provide; the provision of a drop-in centre for OVC to access nutritional support, assistance with academia, and a social network of children in similar circumstances; home visits by volunteers to provide palliative care and support; and community sensitization to raise awareness about HIV/AIDS and OVC. Through these activities, the project is able to deliver an array of services. These comprise food and nutritional support; child protection to OVC identified as at-risk; general health care (either through facilitation of access to local clinic or through home visits); assistance with general education by lobbying for school fee waivers and the provision of uniforms and stationary; HIV prevention education; and psychosocial support. As of August 2007, a total of 410 OVC benefited from these activities and services.

Beneficiaries’ ages range from preschool to secondary school level, with some of them being school drop-outs. OVC are identified by volunteers, community members, and teachers from local schools.

The project is able to conduct its day-to-day operations predominantly due to the assistance received from government departments, the local municipality, donors such as the U.S. emergency plan and The AIDS Foundation, and well-wishers from the local community.

In the time the project has been in operation, it has faced a number of challenges, most of which are linked to the lack of resources and economic opportunities in the area. Specific challenges faced entail lack of reliable transport; lack of facilities where long-term operations can be based; inconsistent cash flow due to late payments of grants or donations; and inadequate remuneration and equipment for staff and volunteers. The lack of financial resources in the area also translates into poor infrastructure and availability of machinery.

There are a number of needs of OVC that the project would like to address, but thus far has not been able to do so. These include provision of safe houses for OVC; early childhood education for OVC; opportunities for vocational and business training; and adequate food within OVC homes.

Going forward, BYO would like to secure financial support to improve its infrastructure and expand its operations, including establishing a multipurpose centre where a wide range of services can be offered under one roof. It would also like to streamline and expand its food production so more sought-after crops can be grown and, where possible, processed and packaged for the market. In addition, staff members would like to extend their support to more youth in the area; this not only provides the vitality and energy needed to drive the project but also encourages youth to remain in the area.

Noteworthy in the manner in which BYO is implementing its OVC project is the inclusion of youth in the organisation as volunteers. This has proved to be an effective strategy of advocating to young people and encouraging them to take a more active role in improving the livelihood of OVC in their area. The high level of collaboration with government departments has also proved to be an approach that has helped the project access key services for its beneficiaries. Furthermore, staff and volunteers are on a continual developmental curve as they have periodic training to build organisational and personal knowledge. The experience of working with OVC was reported as an enriching one for all involved. Overall the project has found effective means of implementing its project with the meagre resources available to it and is making a difference to the lives of the OVC it is able to reach. Continued support to projects such as this one and others working to improve the lives of OVC may prove to be an effective means of breaking the cycle of pain, suffering and poverty which OVC are likely to be condemned to if nothing is done.

Introduction

“The pandemic is leaving too many children to grow up alone, grow up too fast, or not grow up at all. Simply put, AIDS is wreaking havoc on children.”

Former United Nations Secretary-General Kofi Annan

Despite the magnitude and negative consequences of growth in orphans and vulnerable children (OVC) in South Africa and in sub-Saharan Africa, insufficient documentation exists to describe strategies for improving the well-being of these children. There is an urgent need to learn more about how to improve the effectiveness, quality, and reach of efforts designed to address the needs of OVC, as well as to replicate programmatic approaches that work well in the African context. Governments, donors, and nongovernmental organisation (NGO) programme managers need more information on how to reach more OVC with services to improve their well-being.

In an attempt to fill these knowledge gaps, this case study was conducted to impart a thorough understanding of Bonukhanyo and to document lessons learned that can be shared with other initiatives. USAID in South Africa commissioned this activity to gain further insight into OVC interventions receiving financial support through the U.S. emergency plan. This OVC case study, one of a series of case studies documenting OVC interventions in South Africa, was researched and written by Khulisa Management Services (Johannesburg, South Africa) with technical support from MEASURE Evaluation and with funding from the emergency plan and USAID/South Africa.

The primary audience for this case study includes Bonukhanyo, OVC programme implementers across South Africa and other countries in sub-Saharan Africa, as well as policy-makers and donors addressing OVC needs. It is intended that information about programmatic approaches and lessons learned from implementation will help donors, policy-makers, and programme managers to make informed decisions for allocating scarce resources for OVC and thus better serving OVC needs.

The development of these case studies was based on document reviews; site visits, including discussions with local staff, volunteers, beneficiaries, and community members; and, observations of activities. The approach is described in depth – including approaches to beneficiary selection, key programme activities, services delivered, and unmet needs. Programme innovations and challenges also are detailed.

It is our hope that this case study will stimulate the emergence of improved approaches and more comprehensive coverage in international efforts to support OVC in resource-constrained environments across South Africa and throughout the world.

Orphans and Vulnerable Children in South Africa

With an estimated 5.5 million people living with HIV in South Africa, the AIDS epidemic is creating large numbers of children growing up without adult protection, nurturing, or financial support. Of South Africa's 18 million children, nearly 21% (about 3.8 million children) have lost one or both parents. More than 668,000 children have lost both parents, while 122,000 children are estimated to live in child-headed households (Proudlock P, Dutschke M, Jamieson L et al., 2008).

Whereas most OVC live with and are cared for by a grandparent or a great-grandparent, others are forced to assume caregiver and provider roles. Without adequate protection and care, these OVC are more susceptible to child labour and to sexual and other forms of exploitation, increasing their risk of acquiring HIV infection.

In 2005, the South African Government, through the Department of Social Development (DoSD), issued a blueprint for OVC care in the form of a policy framework for OVC. The following year, it issued a national action plan for OVC. Both the framework and action plan provide a clear path for addressing the social impacts of HIV and AIDS and for providing services to OVC, with a priority on family and community care, and with institutional care viewed as a last resort. The six key strategies of the action plan include:

1. strengthen the capacity of families to care for OVC
2. mobilize community-based responses for care, support, and protection of OVC
3. ensure that legislation, policy, and programmes are in place to protect the most vulnerable children
4. ensure access to essential services for OVC
5. increase awareness and advocacy regarding OVC issues
6. engage the business community to support OVC actively

In recent years, political will and donor support have intensified South Africa's response to the HIV/AIDS epidemic and the growing numbers of OVC. The South African government instituted guidelines and dedicated resources to create and promote a supportive environment in which OVC are holistically cared for, supported, and protected to grow and develop to their full potential. Government policies and services also care for the needs of vulnerable children more broadly through such efforts as the provision of free health care for children under age five, free primary school education and social grants for guardians.

The U.S. government, through the emergency plan, complements the efforts and policies of the South African government. As one of the largest donor efforts supporting OVC in South Africa, the emergency plan provides financial and technical support to 168 OVC programmes in South Africa. Emergency plan partners focus on innovative ways to scale up OVC services to meet the enormous needs of OVC in South Africa. Programme initiatives involve integrating systemic interventions; training of volunteers, caregivers, and community-based organisations; and delivery of essential services, among other things. Emphasis is given to improving the quality of OVC programme interventions, strengthening coordination of care and introducing innovative new initiatives focusing on reaching especially vulnerable children.

Methodology

INFORMATION GATHERING



Researchers observe the youth team at work on the community garden, at the start of their day's work. They produce food for OVC, themselves, and to be sold.

When designing this research, we used appreciative inquiry (AI) concepts to help focus the evaluation, and to develop and implement several data collection methods. AI was chosen as the overarching approach because it is a process that seeks out and identifies “the best” in an organisation and its work. In other words, applying AI in evaluation and research is to inquire about the best of what is done, in contrast to traditional evaluations and research where the subjects are judged on aspects of the OVC project that are not working well. For this case study, AI was used to identify strengths (both known and unknown) in the BYO OVC project, and to identify and make explicit areas of good performance, in the hopes that such performance is continued or replicated.

“Appreciative inquiry is about the co-evolutionary search for the best in people, their organisations, and the relevant world around them. In its broadest focus, it involves systematic discovery of what gives “life” to a living system when it is most alive, most effective, and most constructively capable in economic, ecological, and human terms. AI involves, in a central way, the art and practice of asking questions that strengthen a system’s capacity to apprehend, anticipate, and heighten positive potential.”

David Cooperrider, Case Western Reserve University, co-founder of appreciative inquiry

The research team gathered information over two days in Nyosini Village in the Eastern Cape in late August 2007. The two-person team held two key informant interviews with the organisation’s coordinator and staff on the first day. In addition, two AI workshops were conducted: one with staff and the other with beneficiaries, guardians, teachers, grandmothers, a grandfather, a policeman, and a board member. Researchers were able to observe the BYO OVC project at work at the community garden site as well as meet the beneficiaries and observe procedures and interactions at the drop-in centre. Documentation pertaining to what the organisation does was also reviewed.

FOCAL SITE

BYO works in the far eastern part of the Eastern Cape Province of South Africa. The focal site consists of a set of 18 villages in Ward 11 of the Alfred Nzo District, situated approximately 30 kilometres from the rural towns of Mount Ayliffe to the east and Mount Frere to the west. These villages fall under the authority of the Mzimvubu Local Municipality.

The organisation operates from a small office on the property of the Gqoli family in the Nyosini Village. Whilst the organisation has its office in this locale, it provides services to the 18 villages in the district. Activities take place primarily in this village, and the drop-in centre located on the same premises as the organisation. In addition to this, the organisation manages a four hectare community garden nearby.

The area is characterised by small, rural, flat and Rondavel homesteads found in village clusters, between fields that are used for grazing and cultivation. Farmers typically grow potatoes, pumpkins, beans, and maize. Family units keep goats, sheep and cattle, chickens, pigs, cats, and dogs. The area is reportedly fertile, but there are problems with erosion, largely due to the overgrazing of livestock.

The Eastern Cape Province is characterised by a high HIV prevalence rate. Based on the Department of Health's 2005 National HIV and Syphilis Antenatal Sero-prevalence Survey in South Africa, the Eastern Cape has a 29.5% HIV prevalence rate. There are few economic opportunities, and high levels of unemployment mean that many households survive on grants from the Department of Social Development. Because there is little industry in the area, there are low levels of technical skills and scarce availability of mechanisation equipment. The area is densely populated for a rural area. The population comprises older people, women, children and youth. Many of the men from the area work as migrant workers in the cities of South Africa; thus, there are relatively few male partners and fathers living in the area.

Project Description

OVERVIEW AND FRAMEWORK



Bonukhanyo (meaning light) Youth Organisation is a nonprofit organisation established in 2001 by members of the Gqoli family, together with their friends and neighbours. These founders, a locally driven group of concerted

individuals, came together to address the key problems in their area including poverty, a scarcity of jobs, a soaring crime rate, and a high death rate. The death rate in particular was of concern considering it led to an increasing number of families headed by children. The founders wanted to do something about the high incidence of teenage pregnancy and felt a need to start an OVC focused organisation to provide support to vulnerable children in their community.

BYO is housed in a small structure on the Gqoli family property in the Nyosini Village serving 18 villages in the Alfred Nzo District of the Mzimvubu Local Municipality in the Eastern Cape Province of South Africa.

The organisation began with an HIV/AIDS awareness campaign to bring others on board. This proved to be a success in that the organisation was able to recruit ten people from the surrounding villages to serve as volunteers. These individuals were trained in home-based care (HBC). Following this, BYO commenced its work.

The Sinamya Community Development Centre (SCDC) in Mount Frere assisted BYO by providing training on HIV/AIDS, gardening, book-keeping, and proposal writing. SCDC mentored BYO and trained the first five volunteers as peer educators. Subsequent to this, many local donor organisations and government have provided assistance and advice. Government assistance comes from the Department of Health (health services, HBC kits, and transport for patients); Department of Agriculture (technical services for the establishment of food gardens); Department of Social Development (provision of funds and monitoring progress); and the Umzimvubu Local Municipality (to supervise and monitor progress and provide administrative and facilitation to management).

The goals of BYOs OVC project entail involving youth in the area to:

- provide care and support for OVC, youth and their families so that these children and youth can reach their full potential;
- work with government and other service providers to ensure improvement of services to the beneficiaries;
- work on projects to support economic sustainability for the project and its beneficiaries and to develop the skills of youth; and
- provide an example and support to others particularly in local villages to provide care and support in other communities.

“The founder of Bonukhanyo was my second daughter and a graduate from Fort Hare. She could not get employment after graduating and decided to attend OVC workshops at UNITRA and Fort Hare. She returned home and requested to open this project from my premises. She involved her sisters and the youth in the area.

“This daughter passed away in September 2006. My first daughter took over as coordinator. She won the Old Mutual and Sowetan award. She was buried two weeks ago. She is the one who arranged and prepared for your welcome here. Now my third born daughter who has been helping her sisters has taken over as a coordinator.”

Teacher and mother of BYO founder

In achieving these goals, a number of services are provided to OVC and their families. These comprise psychosocial support, educational support, HIV prevention education, basic health-care services (including home-based care and referrals), food and nutritional support, and child protection. These services are made available via activities – the vehicle for providing services. Key activities the project engages in are networking, drop-in centre activities, home visits and community sensitisation.

To supply a comprehensive auxiliary service of home-based and OVC care, BYO works with volunteer caregivers, as well as caregivers that work at three Department of Health local clinics. Staff members also work closely with teachers and schools to assist in the distribution of food parcels to needy homes, guide HIV/AIDS support groups, and ensure OVC have access to education. BYO also assist OVC in the application of documentation such as birth certificates and identity documents. The project recruit youth volunteers run a sports programme with OVC. Youth also volunteer in the drop-in centre established by BYO that provides food to 52 children a day. The project conducts public education programmes (focusing predominantly on HIV prevention education) and maintains a large community vegetable garden (produce of which is used to feed OVC at drop-in centre) with the support of volunteers.

Bonukhanyo's motto

"With these broken wings may you fly till the end of time."

"Come to the edge"

"It's too high"

"Come to the edge"

"We may fall"

"Come to the edge"

So we came...

And he pushed...

And we flew...

Appollonaire, translated by Christopher Logue

PROJECT STAFF

The organisation is governed by a seven-member board consisting of nurses, teachers, social workers, business people, and traditional leaders. The board's executive committee manages the finances of the organisation and the work of the staff.

The organisation began small, as the effort of the Gqoli family, their friends, and a few volunteers from the community (see below). Emphasis is placed on recruiting youth.

BYO now has a coordinator, administrative staff, and staff members who oversee each key area, namely HBC, the drop-in centre, the sports programme, the food garden, food parcel distribution, and health and life education programme. Training is provided to staff. Some training programmes organised as of August 2007 include home-based care, vegetable gardening, project management, financial management, and counselling.

"Bonukhanyo's staff is youth. This is what makes their project accessible to youth.

"They started by planting potatoes to raise funds for Bonukhanyo as they had no funds from outside until 2005. They cooked vegetable meals from their garden and fed the children in the neighbourhood.

"I advised them to affiliate with Isinamva Community Development Centre, a local NGO; loveLife; and Mount Ayliffe Development Agency. The Department of Social Development helped with food parcels and food supplements for the sick people."

Teacher and mother of BYO's founder

PROJECT VOLUNTEERS

Each of the programmes has a team of volunteers (referred to interchangeably as caregivers, unless they are youth volunteers) that support the project's work through such activities as gardening, coaching sports, or providing peer education on health. Youth volunteers are recruited and trained to support children conducting awareness campaigns, sports and cultural opportunities and serve food to children that attend the drop-in centre.

There were, in August 2007, 34 trained caregivers (including 10 funded through the Extended Public Works Programme) that form the core team for the HBC programme. Additional training for staff and volunteers over the years appears to have been extensive. Training included topics such as organisational development, HBC, growing vegetables, running a small business, administration, and counselling. Such training for both staff and volunteers facilitates the development of skills, which promotes the project's organisational sustainability and capacity to grow.

The value of a caring volunteer visiting a household and developing a close confiding relationship with a child cannot easily be measured. Although the impoverished community does not have much to spare, several individuals give their time, energy, and commitment to the project. Older youth from the community also give their time to run the busy sports programme that provides healthy recreation and an opportunity for OVC to interact with dependable role models.

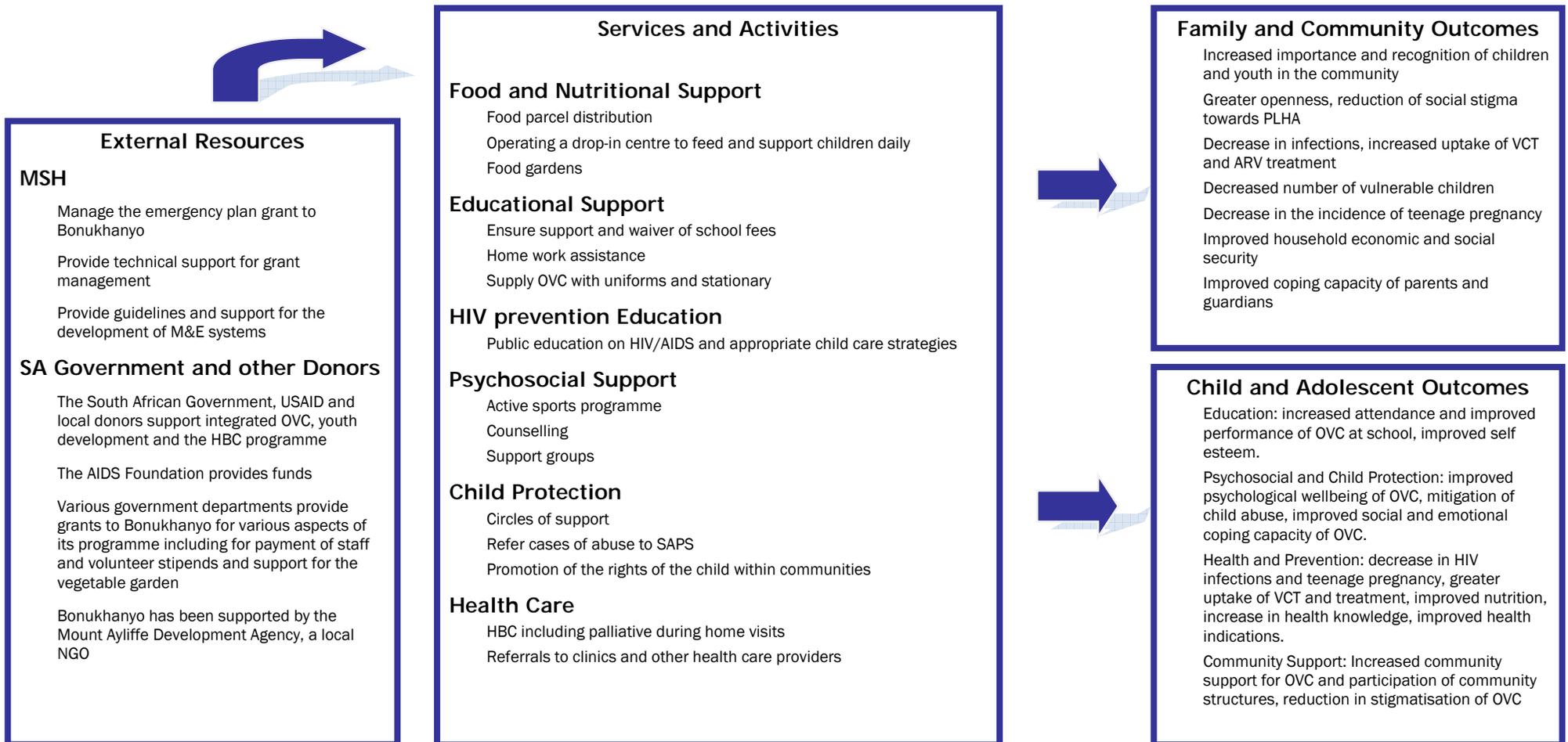
Bonukhanyo Youth Organisation's OVC Project

The OVC project provides a comprehensive and holistic range of services to support orphans and vulnerable children and youth and their families in the Mzimvubu Local Municipality in the Alfred Nzo District of the Eastern Cape.

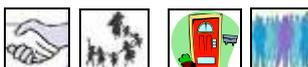
OVC Project Goals

To organise the youth of the area to:

Provide care and support for OVC, youth and their families so that these children and youth can reach their full potential.
 Work with government and other service providers to ensure improvement of services to the beneficiaries.
 Work on projects to support economic sustainability for the project and its beneficiaries and to develop the skills of youth.
 Provide an example and support to others particularly in local villages to provide care and support in other communities.



KEY PROJECT ACTIVITIES



Key to the success of the project's operations is its ability to network, run its drop-in centre, conduct home visits, and mobilize and sensitize the community. The following describes these activities.



Networking

The project has proven itself well-organised and reliable by facilitating the access to services including health, education, social, personal documentation, grants, economic opportunities and food relief by networking with relevant government entities.

One of the keys to the project's success lies in sustaining an ongoing relationship with the districts DoH. Staff refer OVC in need for services including treatment or referrals for additional care. In addition, a close working relationship with DoSD has been developed to ensure that needy families receive grants and benefit from poverty alleviation measures. DoSD also provides a significant grant to the organisation to manage food parcel distribution, home-base care and to run other poverty alleviation projects.

"I am a teacher at the school at Mzinto. We work together with Bonukhanyo. We have gymnastic children that Bonukhanyo invites when they have projects and that help with their publicity. Now government departments invite them to perform when they have projects. Bonukhanyo sponsored them with a Tedelex music system. The OVC at our school are also sponsored with uniforms and food from Bonukhanyo. As teachers we also help to identify OVC for Bonukhanyo."

Teacher at a village school

Staff members maintain close ties with the Department of Agriculture, which provides support for the community food garden project. The organisation also works closely with the Department of Home Affairs to ensure beneficiaries have access to documentation that they need for school, health services and grants. To ensure that its members have access to training opportunities, Bonukhanyo works with the Department of Labour, which supports training of staff and volunteers. The Extended Public Works Programme funds training for 10 home-based care providers.

Networking goes beyond government to include schools in that teachers are used to identify and refer OVC to the project for assistance. Other partnerships include those with other community-based organisations, such as SCDC in Mount Frere. SCDC provided training on various subject matter including HIV/AIDS, gardening, book-keeping and proposal writing.



Drop-in Centre

Bonukhanyo operates a drop-in centre located at the organisation's headquarters. From this centre, 52 children are fed and supported on a daily basis. A team of cooks prepares wholesome meals for the children each school day. Some children come to collect sandwiches from the centre in the morning before they leave for school. Children are also helped with their homework at the centre.



Home Visits

Door-to-door visits are conducted by volunteers. Once identified OVC and HBC patients receive various services such as psychosocial support by way of family counselling, and other services such as basic palliative care and education about HIV/AIDS. Volunteers also distribute food and food parcels during these visits and educate families about HIV/AIDS.

"We were doing door-to-door work in Umzinto. We found a child-headed household. It looked as though it was uninhabited, as it was so dirty. There was no food. The children had no food and hadn't washed. We registered them and gave them a food parcel. The two children are now at school and are clean. Their relatives are alcohol abusers. The children come to the drop-in- centre every day where we are able to monitor them.

"We were once called by a school teacher. She had identified some orphans and contacted Bonukhanyo to help. We gave them school uniforms. Sometimes DoSD or DoE identify the child and ask for Bonukhanyo's help with food and uniforms."

Bonukhanyo staff member



Community Sensitization

Through activities in the communities, Bonukhanyo seeks to mobilise support and voluntarism from its constituency. In addition, assistance to community structures (e.g., support groups for people living with HIV/AIDS) is provided. Another key element of the mobilisation strategy is sensitising the community to HIV/AIDS issues and changing negative attitudes such as stigma through public sensitization campaigns. These campaigns raise awareness via educational talks and awareness campaigns. Community members are encouraged to participate in awareness programmes to gain insight and knowledge about the needs of OVC and the services available to them.

As a longer-term prevention strategy, the organisation is training children and the community at large on child-centred approaches in dealing with children and to protect and uphold their rights. To this end, staff communities and children are empowered to recognize and speak out about abuse.

BENEFICIARIES

As of August 2007, the project had 410 OVC registered. These include preschool children, primary school children, secondary school children and out of school youth. They all live in one of 18 villages surrounding Nyosini Village and are registered at a local school. Many are supported by grannies and aunts or guardians. A group of 52 of these OVC in the Nyosini Village area attend the drop-in centre for a meal and aftercare support. Other OVC benefit from home visits where volunteers provide counselling, food parcels and assistance with homework.

There are three ways that OVC are identified by the project:

1. **By volunteers** when they provide HBC services to the sick. This is the primary method of identification.
2. **By community members.** The project has a sound reputation in the communities where it works; members of the community refer children they recognize in need of assistance to the project.
3. **By teachers** at local schools.

SERVICES PROVIDED



OVC are offered a number of services. These comprise food and nutritional support, child protection initiatives, general health care services, educational support; HIV prevention education; and psychosocial support. Beneficiaries are offered holistic support in that they can access a number of services from the project. The story below illustrates the positive effect this has on beneficiary households.

“Ah! Bonukhanyo, what can I say first about Bonukhanyo. There is a lot of help coming from Bonukhanyo to us as parents of the children in these areas. Some parents have nothing, they give them food. They sell us vegetables, chickens, and eggs at low prices. They also supply tools to the sick that are relevant to the sickness e.g., first aid medicines as the clinic is far away. The people call them first when they are sick and they come to their rescue, phoning the ambulance with their phones and give the money to those who have no money to go to the clinic.”

Grandmother



Food and Nutritional Support

As of August 2007, 52 beneficiaries received a daily meal at the organisation’s drop-in centre. This is important for learning and development.

Further to this support, emergency food parcels are distributed to needy households. For example, from April 2006 to March 2007, a total of 183 food parcels were distributed to 98 needy families. These parcels are periodically supplied by the Department of Social Development and distributed on a needs basis to OVC households. Caregivers help to identify those most in need and ensure the distribution of the food parcels. In addition, the projects community garden provides fresh seasonal produce to OVC and volunteers. It started with a small vegetable garden, produce of which was used to feed OVC. As at August 2007 a four hectare piece of land being developed for this purpose.

“Bonukhanyo is helping me by giving me food in the morning before I go to school and a lunch box of bread with polony (another name for balony), Rama (margarine) and after school I come and eat here. They also took me to a Social Worker at Mt. Ayliff with their money and gave me uniform to wear at school. Thank you Bonukhanyo.”

~ OVC Beneficiary

Crops are distributed to households or used for food preparation at the drop-in centre. Some seasons have been so plentiful that surplus produce has been sold to the community and local stores.



Child Protection

When OVC are known to be in high risk or unsafe situations, volunteers alert staff to intervene. In emergencies and if the situation requires it, the police are asked to assist.

Another child protection intervention used by the project is circles of support for OVC. When a child’s parents die and the circle of family care is broken, circles within communities are engaged to protect the child (typically schools, churches, volunteers, organisations, and community members who live around the vicinity of the child). Other protection interventions include

assisting OVC in applying and accessing support grants and legal documentation such as birth certificates and identity documents. Further to this, child protection training is provided to communities to promote the rights of children and ensure these rights are upheld and respected.



General Healthcare Services

The project works closely with the local clinics and DoH caregivers. The project refers beneficiaries to the clinics for health care services. In addition to this and through its home visit programme, the project provides primary health care services including information and basic palliative care. In instances when professional care and treatment is needed, OVC are accompanied to health facilities to access this. Volunteers are well-known in the communities that they operate in and as a result are often the first to be asked for help when there is need for an ambulance or other health services.



General Education

The project has successfully lobbied with schools to waiver school fees for children who are on its OVC register. OVC are also provided with school uniforms and stationary supplies. For example during the period from April 2006 to March 2007, 60 needy children received school uniforms and a further 38 were provided with stationary. The provision of school uniforms is important as it prevents stigma and discrimination of OVC, since they are not singled-out as being different due to deteriorating uniforms or having no uniforms at all. Children are also assisted with their homework during home visits.



HIV Prevention Education

Volunteers promote prevention by conducting peer education programmes in schools, as well as at community and sporting events. They conduct public education campaigns on HIV/AIDS and appropriate child care strategies. These are generally aimed at youth and are carried out at schools and community halls, and during community events (especially sports activities).



Psychosocial Support

Psychosocial support provided to beneficiaries comprises counselling and an aftercare programme of extra-mural activities which offers sports and cultural programmes to OVC during the afternoon after school. One of the advantages of having young, athletic individuals serving as volunteers for an OVC project is their talent and energy to run sporting and cultural activities. Children play soccer, netball and a range of other sports. These sessions are supervised by volunteers from the project and provide children with an opportunity to develop new skills, learn how to work and play in a team, gain confidence, and develop relationships. Youth volunteers provide strong positive role models. Good supportive relationships that develop in the neighbourhood, at school and in healthy recreation provide vital structure to the lives of OVC. Support groups are also provided to people living with HIV and AIDS and families of infected children. For example, during the period from April 2006 to March 2007, the project had empowered 30 people to live positive lifestyles through support groups. Other psychosocial support initiatives comprise Christmas parties and educational trips are provided to OVC [see inset].

“At the end of every year, they organize a holiday party for the OVC. They also have a sports programme called Siyadlala. The OVC are coached in soccer, netball, tennis, cricket, hoola-hoops and boxing. They have managed to get sponsorship for boxing kits, balls and toys.

“Children are taken on educational trips to the seaside and sometimes sleep in hotels.”

Teacher and mother of BYO's founder

Resources

DONORS

As at August 2007 the bulk of financial assistance comes from the DoSD, the emergency plan (through MSH), and The AIDS Foundation. Collectively, these donors contributed a substantial amount to the annual cost of running the organisation during 2006 and 2007. In addition to this, the local municipality donated funds to the organisation. During the same period, the DoSD gave the organisation a grant to undertake specific activities including home-based care, running the food garden, and distributing food parcels and school uniforms. An emergency plan grant was used to ensure the protection of the rights of OVC through popular public education initiatives, to run over a two year period.

These resources supported operational costs including running the office, transport, paying the remuneration of staff and, when appropriate, payment of small stipends for volunteers. Finances also went to food parcels, food for the drop-in centre, school uniforms, training of staff and volunteers, and life skills education, including HIV/AIDS prevention.

COMMUNITY IN-KIND CONTRIBUTIONS

The project relies heavily on the goodwill and generosity of members of the community to make its work a success. Most in-kind contributions come from volunteers that provide their time, energy and kindness to the project and its beneficiaries.

Community members also work in the food garden, provide peer education at schools and community venues, as well as undertake prevention campaigns. In addition many of their volunteers are community members who themselves or loved ones have been directly served by the organisation. Many of those who volunteer began such work after witnessing or benefiting from the services the CBO provides.

Community members explain how they became apart of the organisation:

“When they came to give us food and uniforms.”

“When they came to introduce their project at our school.”

“When they came to introduce their project at our school.”

“When they brought treatment for my sick mother-in-law.”

“When they came to nurse my sick brother.”

Community members

Lessons Learned

The project has had many successes and faced several challenges. Its efforts have not gone unnoticed. The organisations leadership and the outstanding work they are doing have been recognised at the local, provincial and national government. For its work with the community BYO was recognised with an award and a R10 000 voucher from Shoprite (a chain of South African supermarkets).

“Last year the former coordinator got three awards for her work in Bonukhanyo. This was a huge achievement and recognition for us all. There was increased exposure and advertising. More people came to visit and some new CBOs wanted mentorship. Others came for assistance on how to start a CBO.”

Unathi Gqoli, new coordinator of Bonukhanyo

PROJECT INNOVATIONS AND SUCCESSES

The efforts of staff and volunteers appear to have positively influenced the communities being served. Those interviewed during fieldwork reported that staff and volunteers had increased local awareness and support for protecting and developing OVC and youth. They also reported a noticeable decline in teenage pregnancy, a reduction in crime, an increase in uptake of voluntary counselling and testing, greater openness, reduced stigmatisation, and more people on antiretroviral drugs. Though a direct causal relationship has not been proven through a study, interviewees credit these changes at least in part to the project. The manner in which the project is structured and operates, as described below, has contributed to its success.

A Leadership Role

The project stands out as a shining example of a youth-driven initiative seeking to make a difference to the lives of the most vulnerable and the impoverished communities it works in. Involving the local youth in its operations (e.g., by recruiting youth as volunteers) has proven highly effective in providing positive role models and energy to drive the project.

High Levels of Collaboration with Government

BYO is an excellent example of a civil society organisation that has established a valuable and collaborative relationship with government. As such the OVC project has secured support from various government departments and developed a reputation for high quality services, good reporting practices and effective use of its resources. Due to this collaboration the OVC project is able to expand services to youth and achieve a more holistic approach in caring for OVC, youth and families.

Personal Development for Staff and Volunteers

Those interviewed emphasised that everyone involved with the project had developed personally from their experiences. In addition to this, training for staff and volunteers covering a variety of subject matter has developed the skills of both staff and volunteers. A skills database of staff members that have attended training programmes and workshops has been developed. This is important for documenting the ongoing and extensive skills training provided. However, as interviewees pointed out, the personal development of staff and volunteers is not only the result of training and mentoring, but of the enriching experience they have in making a difference to the lives of others and being part of a successful team.

PROJECT CHALLENGES

Lack of Economic Opportunities

Poverty is the constant backdrop to the project's work and poses a number of challenges. There is a shortage of infrastructure, machinery, and capital in the area to support enterprises and economic development. The key to the development of an improved economic environment lies in partnership between civil society, business and the government.

Financial Sustainability and Inconsistent Cash Flow

Late payment of grants from donors or government exacerbates the food problem. A mechanism to deal with interruptions to the cash flow, as well as a broader array of donors to enhance stability, is required.

Staff and Volunteer Support

Staff and volunteers are placed under enormous stress and there are not always sufficient resources to ensure that they are adequately remunerated and equipped to perform their duties. Resources for outings, counselling, and debriefings to help staff and volunteers deal with their own trauma and stress would go a long way in providing motivation to hard-pressed staff and volunteers.

Lack of Transport

The project relies on public transport for its volunteers and staff to carry out their respective duties. This is problematic in that the project has to transport staff, volunteers, and food over significant distances to reach beneficiaries. Because BYO does not have its own transport, it has difficulty in servicing outlying areas and experiences other hardships in running its programmes efficiently. Hired and public transport is not reliable and is expensive.

UNMET NEEDS

Safe Houses

At the time of research, the project did not operate or support any safe houses and there were no such facilities in the areas it served. The result is that, often against their better judgement, social workers, teachers, and volunteers have to send OVC back into vulnerable home situations where guardians may be abusive or may be abusing alcohol.

Early Childhood Education for OVC

Facilities for early childhood development (ECD) in the area were scant and opportunities for preschool-age children to receive quality education were limited. As a result, OVC were not receiving the kind of stimulation and preparation they needed. BYO does not have an ECD centre or programme and thus can not provide this service.

Vocational and Business Training and Support

Though the OVC project strives to promote and provide vocational and business training, many problems in the area result from chronic poverty and will remain pervasive until there are greater economic opportunities available to people in the area. There is an ongoing unmet need for access to training, learning, and development opportunities. Addressing this unmet need is likely to result in greater numbers of vulnerable youth finding employment.

Food Security

Though food services are offered, those services are still insufficient to meet the continual food insecurity needs of OVC and their families. Shortages of food for personal and market consumption require investigation to ascertain cause and combined effort to address it. Whilst the project has demonstrated its ability to mobilise young people, there was still an ongoing shortage of food in OVC households. The project lacks the financial resources to purchase additional food, and poor irrigation and other mechanical constraints limit the quantity of food the project is able to produce. This is a source of constant stress.

Parenting and Money Management Skills

Parents and guardians have never had the opportunity to learn and develop appropriate parenting skills. This is an issue that is reported to be a widespread problem in that it requires ongoing attention. In addition, many guardians mispend their grants; some even use them to purchase alcohol. Unfortunately, the children suffer as a result. Those interviewed highlighted that the project is struggling to determine the best way to address this pervasive problem.

The Way Forward



The project has a vision of developing a multi-purpose centre as a community and economic hub. This is the point from which they will start – a very well-located community garden on a large piece of land at the cross roads with the national road.

In 2005 BYO held a participatory rural appraisal of its organisation in the Nyosini community. The event was attended by 99 community members and 19 DoSD officials. At this gathering three priority needs the organisation plans to focus on in the future were identified and agreed upon all having an impact on the OVC project. These were:

1. increased emphasis on preschool children as part of HBC;
2. a multi-purpose centre for training, business, and youth activity; and
3. food security.

There is commitment to harnessing expertise and support to reach their goals. Comprehensive plans for the development of a multi-purpose centre are envisaged for

the future. This centre will enable the organisation to bring its operations under one roof. The centre will serve as a place to host training and meetings, as well as a space where beneficiaries, volunteers, staff, and the community can participate in economic activities such as the development of food gardens.

Food production and processing has been identified as an important economic sector that they plan to explore and capitalise on. The potential in producing surplus produce for the market has been identified. There are also tentative plans to include some processing of the crops that are produced, e.g., milling, preserving and packaging for supermarkets.

There are plans to encourage the youth to remain and work locally (instead of following the norm of migrating to cities) and in so doing ensure the economic development of the areas that the project serves. The project aims to do this by mobilising the youth to participate in constructive community work.

A youthful organisation can however miss out on the experience, skills and insight of older adults. It appears the project has found the balance and sought advice and counsel from the older members of the community. This balance is important to ensure older members of communities make space for and encourage young people to organise themselves. Through continued effort, youth will be encouraged to lead the way to finding some of the solutions to the challenges they face.

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