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## FOREWORD



#### **FOREWORD**

The year 2010 will forever be synonymous with the first-ever FIFA World Cup™ held on African soil. South Africans came together with tremendous pride and solidarity to show the world the progress that has taken place in their country and on the continent.

UNICEF was there to rally its partners around child rights. The FIFA World Cup™ presented both opportunities and risks to children, and UNICEF seized the moment to create an alliance of government partners, civil society and companies to protect children from abuse and exploitation. Thousands of children were reached by child protection services and, together with adults, were exposed to messages about safety and child rights. The travel and tourism sector signed a code of conduct to protect children against sex tourism, which aims to make South Africa a tourist destination that is safe for children.

The year held other big moments for children. Key legislation – the Children's Act and the Child Justice Act – came into force in 2010, marking an important milestone in the realisation of children's rights.

In the health sector, we welcomed the government's move to decentralise HIV services to the primary health care system, to reach many more children and women. UNICEF has worked with the Department of Health to strengthen models of down-referral and ensure that guidelines on prevention of mother-to-child transmission (PMTCT) and paediatric HIV treatment reflect the latest medical advances. UNICEF is also supporting the capacity of community health systems to increase uptake of PMTCT and high-impact child health interventions.

The Child-Friendly Schools programme is growing steadily and now reaches more than half a million children in 820 schools. School violence and other challenges faced by South Africa's youth are being addressed through the Sports for Development programme, which uses sport as a vehicle for

adolescent development. UNICEF is supporting a number of initiatives to improve the quality of early childhood development and scale up service delivery, including parenting programmes and a public expenditure study.

Our ongoing support to an impact evaluation of South Africa's Child Support Grant will generate a better understanding of how the grant influences child poverty, health and education. We supported the first-ever analysis of the national budget from a child rights perspective, and will continue doing so in the years to come to ensure that children are at the centre of South Africa's development. The government has taken great strides to improve the quality of services in communities. A key tool to do this is the recently completed Public Expenditure and Quality Service Delivery Study on early childhood development in 790 centres.

We continue to deepen our understanding of the manifestations and drivers of inequality in South Africa. We believe all children and women should benefit from the fruits of progress. In October, we brought together experts from different fields to discuss key issues, make policy recommendations and sharpen UNICEF's equity-based advocacy and programming.

Looking forward, UNICEF will continue to work with South Africans to create a more equitable society. We are committed to supporting our government partners to achieve the 12 National Development outcomes. Our partnerships with the corporate sector, civil society, the media, research institutes and others will also grow in strength to accelerate progress for children.

Aida Girma Representative



#### PROGRESS AND CHALLENGES

#### A world in one country

South Africa is a land of contrast and diversity where opportunities for children and women to lead healthy, safe and productive lives vary greatly. The country has sophisticated and technologically advanced cities that contrast sharply to impoverished townships and rural areas. There are 11 official languages in South Africa and a multitude of peoples and cultures that comprise one of the world's most diverse societies.

Poverty and inequality are major obstacles to equitable human development, with income poverty affecting 52.9 per cent of the South African population. The country also is one of the most unequal societies in the world, with a Gini Coefficient of 0.66 (with 0 expressing total equality in wealth between citizens and 1 complete inequality). One in four working-aged South Africans is unemployed and the current rate of economic growth is not enough to reduce unemployment and poverty significantly.

#### **Progress for children**

South Africa's children have played a prominent role in fighting for their rights. Iconic photographs and stories of the 1976 Soweto riots are a testament to the courage children displayed in standing up for what they believed in. Since the birth of the democratic South Africa in 1994, the country has made major efforts to fulfil the rights of children.

Major international child rights instruments, such as the Convention on the Rights of the Child, have been ratified and translated into national laws. New legislation and progressive public spending have contributed to creating an environment where progress for children is being achieved. The South African government is considered to be one of the most child-friendly in terms of budget allocations for children, with large investments made in early childhood development and social protection.

The Child Support Grant, for example, has increased more than ten-fold since 2000, reaching 10.2 million disadvantaged children in 2010 with a monthly grant of R250 per child. In 2011, all children under the age of 18 will be eligible and it will be increased to R270 per child. A national school nutrition programme helps to alleviate child hunger by providing nutritious meals to eligible primary school pupils. Children under the age of six years, and pregnant and lactating mothers are entitled to free primary healthcare.

South Africa is on track to achieve the Millennium Development Goals of universal access to primary education and gender equality in education. Disadvantaged children benefit from free education through the no-fee and school fee exemption policies. In 2009, 98.6 per cent of school-aged children attended school, up from 86.7 per cent in 1996. Most promising is the dramatic rise in access to early childhood development

#### **KEY INDICATORS**

Population 49.9 million

Children 18.6 million

Gini Coefficient **0.66** 

Unemployment 25.3%

Population living below national poverty line 52.9%

Under-five mortality 62/1,000 live births

Maternal mortality
410/100,000 live births

Antenatal HIV Prevalence 29.3%

Children orphaned by AIDS **1.9 million** 

Gross primary school enrolment 98%

programmes for young children, up from 16 per cent in 2001 to 43 per cent in 2009.

South Africa's severe AIDS epidemic shows signs of stabilisation. HIV prevalence among children aged 2–14 years dropped from 5.6 per cent in 2002 to 2.5 per cent in 2008. Out of an estimated 210,000 babies who are exposed to HIV, more than 95 per cent had not acquired HIV at 6 weeks of age due to the massive scale up of PMTCT services.

HIV prevalence also decreased among young people aged 15–24, from 10.3 per cent in 2005 to 8.6 per cent in 2008. Care and treatment for children exposed to, or infected with, HIV has also dramatically improved in recent years. More than half of children in need of treatment have access to antiretroviral therapy (ART) and an estimated 60 per cent of infants born to HIV-positive mothers are tested at six weeks of age.

#### **Challenges**

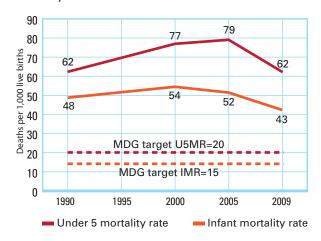
Despite the massive resources and efforts dedicated to making life better for children, South Africa faces enormous challenges. Though the national child poverty headcount dropped by 13 percentage points between 2002 and 2008, largely as a result of economic growth and the social grants programme, about two-thirds of all children – and three out of every four black children – are living in poverty.

The Child Support Grant has reduced the depth of child poverty in recipient households, yet despite its extensive reach, close to 17 per cent of eligible children are excluded. These are hard-to-reach children, many of whom do not have birth certificates and face challenges in accessing social services.

## Child mortality decreasing but not fast enough

Child mortality rates are on the decline but remain high for a middle-income country – one in 16 children dies before their fifth birthday. Available data shows large inequities in childhood mortality by income status, race and location. Children in the poorest 20 per cent of households are four times more likely to die before the age of five years than the wealthiest children. Under-nutrition is also associated with poor socio-economic status, with stunting rates six times higher in the poorest quintile compared to the richest.

Maternal mortality has increased over the years and close to 4,500 women die every year during pregnancy and childbirth as a result of conditions that could have been prevented or treated. AIDS and the uneven quality of healthcare in public health facilities are contributors to the country's high child and maternal mortality rates.



The continuing challenges to child survival mean that South Africa is unlikely to achieve the Millennium Development Goals of reducing child and maternal mortality – unless massive efforts are made to reach all children and mothers with quality health and nutrition services.

The manifestations of the AIDS epidemic are still rife in South Africa. The country has the world's greatest number of people living with HIV and AIDS – 5.2 million in 2009 – and the biggest paediatric HIV pandemic in the world. Young women are four times more likely to be infected than young men.

#### Quality education still at stake

Though South Africa has succeeded in enrolling the vast majority of its children in primary school and dedicates a significant proportion of its public spending to education, academic achievements are poor. An evaluation of Grade 3 learners in 2007 found low average scores of 36 per cent in reading and 35 per cent in numeracy tests. The reasons behind this situation are inadequately trained teachers, large class sizes, school buildings in poor condition, lack of proper sanitation facilities – especially in rural areas – and violence in and around schools.

#### Violence and abuse against children on the rise

Many South African children are exposed to violence, abuse and exploitation. According to the South African Police Service, reported crimes against children increased by 16 per cent between 2008/09 and 2009/10, reaching 57,000 cases. Although corporal punishment has been outlawed, 17 per cent of children experience physical chastisements, while nearly one-third feel unsafe in schools. A fifth of all children – 3.9 million – are orphaned, having lost one or both parents. Twenty-three per cent of children are not living with their biological parents and more than half a million have become legal wards of the state in the foster care system, one of the highest rates in the world.









#### ALL CHILDREN COUNT

UNICEF's mission is to advocate for the realisation of children's rights, to help meet their basic needs and to expand their opportunities to reach their full potential. As a global organisation, UNICEF works in more than 190 countries and territories.

Among UNICEF's strengths are long-term presence in countries, global experience and expertise that can be tailored to local needs, close working relations with governments, and multiple partnerships with civil society, the private sector, academic institutions, donors and others.

UNICEF has been present in South Africa since 1996. Its work is guided by a human rights-based approach to development, helping to ensure that the rights of all South African children and women are realised.

#### The Country Programme

The Government of South Africa UNICEF Country Programme aims to support South Africa in attaining its national development goals as well as meeting its commitments to the Millennium Development Goals and other global benchmarks. By doing so, UNICEF helps to ensure that children and women remain at the core of all efforts to improve the welfare of South Africa's citizens.

UNICEF collaborates closely with the Government of South Africa and other partners to achieve results for children in five focus areas:

 The Child Survival and Development programme aims to contribute towards reducing mortality rates of mothers and children under the age of five years, prevent infection in infants who have been exposed to HIV and improve nutrition.

- The Education and Adolescent Development programme supports national efforts to provide a basic quality education for all children. This includes early childhood development and learning, child-friendly schools and life skills-based education for adolescents.
- The Social Transformation and Strategic Leveraging programme supports the development and dissemination of national policy, budget and institutional analyses with a focus on child poverty and disparity, social protection and the decentralisation of services for children, to accelerate the realisation of child rights.
- The Protection for Orphans and Vulnerable Children programme supports activities that prevent and respond to violence, abuse and exploitation of children and women. Children who are vulnerable as a result of AIDS also receive special attention.
- The External Relations and Strategic
   Partnerships programme builds partnerships
   with a diverse range of national and
   international entities development agencies,
   media, business actors, civil society and
   influential personalities to increase public
   awareness of children's issues, support child
   rights advocacy and leverage resources for
   child rights programming.



#### **HEALTH AND NUTRITION**

### Bringing services closer to children and women

A strong district and community health system is crucial to bringing high impact healthcare services closer to where children and women live. In 2010, UNICEF supported the training of thousands of primary healthcare workers and community counsellors in PMTCT, Integrated Management of Childhood Illnesses, management of severe and acute malnutrition, and infant and young child nutrition; and 170 programme managers, clinic supervisors and operational managers in programme planning and implementation.

As South Africa continues to scale up antiretroviral treatment (ART), there is increasing emphasis on moving the provision of services from hospitals to primary healthcare clinics. Making treatment available at clinic level increases the number of entry points to care, while the greater proximity of services encourages patients to remain in care and adhere to their treatment.

UNICEF has supported the Department of Health to decentralise maternal and paediatric HIV/AIDS care and treatment to the primary healthcare system.

UNICEF assisted five out of the country's nine provinces with 'down-referral' of maternal and paediatric ART services.

This is expected to increase children's and women's access to life-saving treatment and ultimately improve their quality of life.

HIV-positive women and children will also benefit from the new national guidelines on ART for pregnant women and prevention of HIV infection in children that became national policy in April 2010. Based on the latest scientific evidence and revised World Health Organisation (WHO) recommendations, the guidelines promote earlier ART for pregnant women, more efficacious preventive regimens and immediate ART for all infants with HIV. Such an approach can substantially decrease the risk of mother-to-child transmission of HIV and improve the chances of survival for babies who are exposed to the disease. UNICEF provided technical support to the Department of Health to revise the national ART and PMTCT guidelines and is helping three provinces to start implementation.

A generation of children who were infected through mother-to-child transmission is now reaching adolescence and needs support and treatment. UNICEF has been working with the University of the Witwatersrand's Paediatric HIV clinic. called ECHO (Enhancing Children's HIV Outcomes) on a programme that provides care and treatment for HIV and sexually transmitted diseases to young people in Gauteng and North West Province. An important component of the programme is peer support. Both HIVpositive and uninfected adolescents are trained to talk to others their age about living healthily with HIV and preventing

#### HIGHLIGHTS

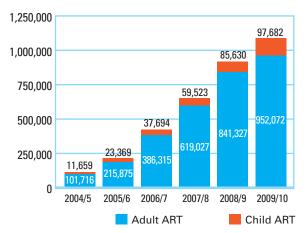
- Thousands of healthcare providers and health workers were trained on HIV care and treatment for children and women
- 15 districts were helped to enhance planning and leadership and secure high rates of coverage for high impact maternal, neonatal and child health interventions likely to reduce South Africa's high child and maternal mortality rates.
- 3.5 million children were vaccinated against measles and polio, and provided with vitamin A.

infection. In 2010, the programme reached more than 1,000 teenagers with youth-friendly HIV services and key messages. This model will be used to guide the development of youth-friendly HIV services in 2011–2012.

#### Saving babies, children and mothers

Quality primary healthcare – delivered through health facilities and in communities – is key to reducing South Africa's high baby, child and maternal death rates. UNICEF is working with the Department of Health to improve the quality of services in hospitals and clinics and to decentralise aspects of mother and child healthcare to community level.

### Access to ART for children and adults living with HIV and AIDS is increasing



Source: Monitoring and Evaluation, DoH, SA (May 2010)

In 2010, progress was made towards the finalisation of the national strategy for maternal, neonatal and child health and nutrition, and a national review of Community Integrated Management of Childhood Illnesses was completed with support from

UNICEF and other United Nations (UN) partners. Community health workers are trained community members who provide basic yet effective health services to children and women in their homes. The 'task shifting' of primary healthcare functions from professional medical personnel to community health workers is a cost-effective way to improve the health of many people who would otherwise not have access to health education and treatment.

Innovative work is also ongoing to make motherhood safer in health facilities. In partnership with the Medical Research Council, UNICEF is supporting the implementation of an integrated district package of maternal, neonatal and child healthcare in Mpumalanga province. Integrating maternal and child health and HIV services through district-based integration teams has developed the skills of health care providers, improved monitoring systems for key maternal and child health indicators, increased the rate of detection of HIV and syphilis diagnosis, expanded access to effective PMTCT regimens and increased the number of HIV-exposed infants being tested at the six week follow-up. However, it is too early to tell whether infant and maternal mortality has been reduced.

South Africa loses many babies in their first month of life. A third of all children who die under the age of five are lost in the neonatal period, many from causes that can be prevented through better and more timely care in hospitals. To address this situation, the Department of Paediatrics and Child Health at the University of Limpopo and the Centre for Rural Health started the Limpopo Initiative for Newborn Care (LINC) in 2003 with support from Save the Children and UNICEF. The aim is to improve services in all hospitals in the province by training staff and improving maternity



and neonatal wards in line with modern obstetric and newborn care standards. With UNICEF support, the LINC approach is being developed into a national package and will be scaled up in 2012.

Addressing nutrition and vaccine-preventable diseases

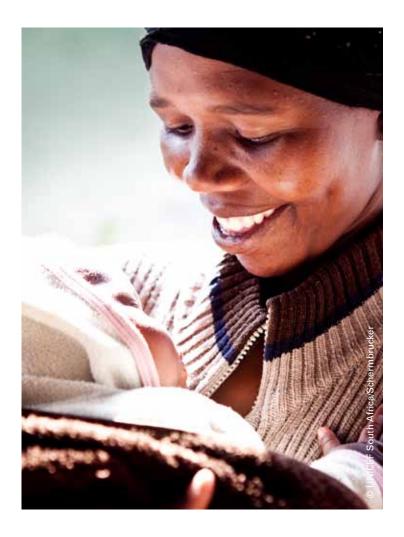
In response to declining immunisation rates and localised outbreaks of measles, around 3.5 million children under the age of five years were immunised against measles and polio and received vitamin A supplements in a campaign conducted by the Department of Health, with support from UNICEF.

In the field of child nutrition, 300 medical doctors were trained on in-patient management of severe and acute malnutrition through a partnership between the University of the Western Cape and UNICEF.

UNICEF provided technical assistance to the Department of Health to revise the National Guidelines on Infant and Young Child Feeding in the context of HIV. The adaptation was done to incorporate the 2010 WHO guidelines, which detail how babies born to infected mothers can still benefit from the highly nutritious and protective value of breastmilk without compromising their health.

An important step towards improving nutrition services for children was made in 2010 with the development of a national strategic plan for nutrition. UNICEF's technical support was provided to develop a plan that focuses on nutrition interventions in the country's key development priorities. In particular, the role of nutrition in reducing child mortality is a central element highlighted in the strategic plan.

UNICEF also supported the distribution of 3.3 million revised Road to Health cards containing new information. Separate cards for boys and girls were printed with revised WHO standards on growth monitoring. Road to Health cards are a useful way of recording a child's medical history in the first five years of life. They are also often the only ongoing link between health workers and a child's parents or caregivers.





# FOCUS ON Preventing mother-to-child transmission

When 21-year-old Khanyisa Mzimasi was pregnant, she took a brave step to make sure that her baby had the possibility of a real future. She decided to embark upon a journey through the prevention of mother-to-child transmission (PMTCT) programme offered at her rural clinic in Jingqi community in the Eastern Cape.

Khanyisa recalls vividly how the nurse did a rapid HIV test during her first antenatal clinic visit.

"She puts on gloves and holds a blue needle. She pricks my finger to make it bleed and drips it into a container. I watch as two lines appear... and I fall into the dark shadow of despair. Two lines – I am HIV-positive," explains Khanyisa.

However, Khanyisa quickly realised that there was hope, and that her positive status did not mean the end of her life and that of her baby's.

"The nurse helped me understand the fight that lay ahead," says Khanyisa. "She advised me to eat well, how to take ARVs to keep strong and to stop the infection from passing to my baby, and how to best feed my child."

The clinic provided daily ARVs and Nevirapine to take at the onset of labour. She was cautioned that without PMTCT treatment, the baby was most at risk of contracting HIV during pregnancy, delivery and breastfeeding.

Every year in South Africa, an estimated 300,000 children are born to HIV-infected women. Without

effective interventions, 68,000 of them will become infected and at least 34,000 would die before their second birthday. Mothers with HIV are almost 10 times more likely to die.

Faced with such a burden, South Africa has established the largest ART programme in the world. Close to one million adults and over 87,000 children aged 0–14 were receiving treatment at the end of September 2010. It is estimated that 67 per cent of adults and 80 per cent of children in need of treatment are now receiving ART, and about 54 per cent of children in need are receiving cotrimoxazole, to prevent opportunistic infections.

Six weeks after her baby boy, Luxolo was born, Khanyisa returned to the clinic to find out if the PMTCT intervention had managed to keep her son HIV-free. The first step was to test the baby using the HIV PCR test. Khanyisa then had to wait anxiously to get the results. Much to her joy and relief, Luxolo was declared HIV-negative, proving that PMTCT interventions are one of the most effective ways of reducing the risk of infection for young children.

"Luxolo has changed my life and given me something to live for," says Khanyisa. "I want other women to know about PMTCT and how it can give them and their children a chance of a future together."

















#### **EDUCATION**

#### Giving children the best start in life

UNICEF has been supporting the Government to develop an integrated package of early childhood development services to home- and community-based centres. Lessons learnt from this model led to the inclusion of alternative modes of early childhood development service delivery in the new Children's Act. This has in turn provided a wider range of early learning programmes for children, with promising results. Children's access to centre-based pre-school activities increased to 30 per cent in 2010, up from 16 per cent in 2007. Enrollment in Grade-R has increased from 48 per cent in 2007 to 78 per cent in 2010.

Important steps were made towards creating a national monitoring and evaluation (M&E) framework for the early childhood development sector. With UNICEF support, a M&E strategy and framework was finalised for Gauteng province and will be used as a model of best practice to develop the national system. M&E systems provide critical information on the impact of programmes on children, help programme managers to identify weaknesses and correct them, and empower policy-makers to make evidence-based decisions.

Programme managers from key departments, civil society and the private sector were trained on leadership skills for early childhood development as part of a capacity-building drive to improve the delivery and quality of services.

#### **Child-Friendly Schools**

The Child-Friendly Schools (CFS) initiative, which aims to improve the quality of education through an integrated package of school interventions, reached 574,000 children in 820 primary and secondary schools in the Western Cape, Eastern Cape, Northern Cape and KwaZulu-Natal provinces in 2010. There are plans to scale up the programme to more schools in these provinces as well as to expand to other provinces.

To improve the quality of teaching and assist in the expansion of the CFS initiative, a teacher training diploma, incorporating CFS principles, will be offered in 2011 by the University of Limpopo in partnership with UNICEF.

UNICEF is promoting the CFS approach in many countries as an initiative focused on children's right to quality education. In South Africa, the quality package of school interventions includes health, safety, protection, teaching and community participation – caring for the physical, psychological and emotional well-being of every child, with special attention to orphaned and vulnerable children.

## Developing adolescents through sport

The Department of Basic Education, with support from UNICEF, has been implementing Sports for Development since 2008. The programme is

#### **HIGHLIGHTS**

- More than half a million children benefited from the Child-Friendly Schools programme.
- The proportion of children in early childhood development centre-based pre-school activities increased to 30 per cent in 2010, up from 16 per cent in 2007. Enrollment in Grade-R has increased from 48 per cent in 2007 to 78 per cent in 2010.
- The Sports for Development programme brought sports fields, equipment and life skills training to over 200,000 adolescents nationally.

implemented in 54 'critical' schools, reaching over 300 cluster school communities. Around 200,000 adolescents are being reached with opportunities to play sport and develop their life skills, and many more will benefit in the future. The concept of sports for development implies that sport does not stop with the game but also acts as a channel to achieve goals in health, education, gender equality, HIV and AIDS and child protection.

The programme hopes to turn around schools identified as 'critical' by the government because of high levels of school violence, substance abuse, HIV infection and teenage pregnancy. An important focus of the Sports for Development programme is to empower boys to adopt healthy lifestyles and prevent HIV infection as well as help reduce school violence. The programme has been evaluated and findings will inform the finalisation of a national school sport policy.

Girls' education is being promoted through the Girls and Boys Education Movement, which now encompasses 2,200 active extra-curricular clubs and involves both girls and boys. The initiative tackles major barriers to girls' school participation and academic achievement, including gender inequality, school violence and AIDS.

Since 2006 UNICEF has been supporting the Department of Basic Education in empowering girls to pursue careers in science and technology. Over 4,500 'technogirls' have completed the programme. The programme targets grade 9–12 learners from disadvantaged communities in four provinces. During the school holidays, these girls are placed in various companies to gain first hand experience of the career choices available. In 2011 the Technogirls programme will be expanded nationally to empower even greater numbers of girls.







## **FOCUS ON** Girls and Boys Education **Movement Clubs**

The Girls and Boys Education Movement (GEM/BEM) is a movement practiced in many countries around the world. It was first launched in South Africa in 2002 and was formalised as a national programme in 2003. The school clubs which form part of the movement, are all bound by their commitment to the promotion of human rights, empowerment and quality education.

The clubs are run and organised by the learners themselves, with support from school management, the Department of Basic Education and UNICEF.

#### Speaking to Bridget Mphahlele

Eighteen-year-old Bridget Mphahlele, club founder and leader of the Genius Buddies of GEM BEM at the Mathomomaya Secondary School in Lebowakgomo, Limpopo province, speaks to us about her club and her recipe for success.

What do you want to do when you finish school? I want to pass my matric very well so I can study medicine. But one day what I really want to be is an international motivational speaker.

Why did you become a Gemmer? I became a GEM member because I want to be a leader of a bright generation. I also want to develop my school and community.

Tell us a bit about your club. We have 45 members from all grades. I approached the principal with the idea to start the club at the

beginning of 2009. I come up with some of the activities we do but also give an opportunity to other members to give their ideas. The teachers and principal have been supportive - they come to our discussions and help when we need to use school equipment. We meet three times a week. On Wednesdays we debate and discuss different topics after school, like sexual harassment. On Fridays we clean up the school grounds and on Saturdays we clean the community. The municipality helps us when we do clean-ups by giving us gloves, plastic bags and large bins. The parents are also supportive of the club and we had a parents' meeting last year to tell them about GEM and what it stands for.

I am working closely with 10 members of the club so they can lead it when I leave. I share my materials with them and give them opportunities to lead.

What are some of the challenges facing children in your community?

There are many children here who rely on social grants and who do not have parents.

What is your message to other young people? Dreams really can come true but they are mostly the result of hard work, determination and persistence. In success there are always challenges and in challenges there is always success. As a GEM leader I am a true witness to these words.











#### CHILD PROTECTION

### Integrated services to protect children from violence and abuse

The coming into force of the new Children's Act, Child Justice Act and Sexual Offenses Act in 2010 was a major achievement for child rights in South Africa. The Children's Act, which brings South African law in line with the Convention on the Rights of the Child, stresses that the State has a key role to play in helping families and communities to care for and protect children. This builds on more conventional forms of child protection legislation whereby the State would only intervene after the child has already suffered from abuse, neglect or exploitation. The Sexual Offences Act includes a wide range of crimes that commonly occur against children while the Child Justice Act establishes a separate criminal justice system for children in conflict with the law. Together, these laws form the foundation of a comprehensive child protection framework.

UNICEF continues to support the response to children and women who have suffered at the hands of abusers. Six additional Thuthuzela Care centres – one-stop centres for child and women victims of rape – were operational in 2010, with the capacity to provide medical, legal and psychosocial support to 7,500 victims every year. Evidence on the effectiveness of the Thuthuzela model revealed a 73 per cent conviction rate for cases that went through the Thuthuzela centres, compared to 58 per cent for cases that were dealt with by

specialised sexual offences courts, and 48 per cent conviction rate for cases that were handled by ordinary courts in non-integrated settings.

#### Helping communities to help children

Despite severe constraints imposed by poverty and AIDS, communities throughout South Africa have opened their arms to orphans and vulnerable children by establishing locally-based groups that look after these children. These groups, known as 'childcare forums' care and protect vulnerable children who may otherwise fall victim to neglect, abuse and exploitation.

Through UNICEF support for a provincial scale up of best practice child care forums, orphans and vulnerable children have a chance of receiving the kind of care and community support they deserve. In preparation for roll out, 150 trainers were trained to set up new childcare forums, improve standards in existing ones and oversee service delivery. In 2010, work started on developing implementation guidelines, and training material was translated into Zulu and Sotho.

In the Northern Cape province, three new Isibindi sites were established. Isibindi is an award-winning model of a childcare forum designed by UNICEF's partner, the National Association of Child Care Workers, and is implemented in 55 sites in eight provinces.

Children facing the death of parents and caregivers are now in a better position to

#### **HIGHLIGHTS**

- The Department of Social Development received support in implementing the new Children's Act, notably through developing innovative models of foster care, upgrading services for children in institutional care and guiding the implementation of protection programmes for migrant children.
- Six Thuthuzela Care centres were up and running, with the capacity to support 7,500 child and women victims of sexual abuse every year.
- Around 20 million parents, children and tourists/ football fans were reached by child protection awareness-raising in the lead up to the World Cup through a multistakeholder Red Card campaign.

access their inheritance rights. UNICEF supported the training of 490 government and Non-Governmental Organisation (NGO) social workers in succession planning in 27 districts. The skills gained will help these social workers to advise children on how to access their entitlements and prevent injustices such as property grabbing.

Another key result in 2010 was the consensus reached by the Government, UNICEF and partners on priorities and best practice in psychosocial support for children affected by HIV and AIDS. A framework on psychosocial support in programmes for orphans and vulnerable children was drafted to inform future interventions.

#### Stronger capacity to lead

An essential element of strengthening the child protection system in the country is to bolster the capacity of the Department of Social Development. In 2010 the Department identified and costed a model of cluster foster care, which will be scaled up and included in provincial departmental budgets. UNICEF also provided support to a team of researchers that assessed 345 registered children's homes, shelters and places of safety. The aim is to transform them into well-managed centres that are compliant with the Children's Act.

The Department established national guidelines to guide the implementation of protection programmes for unaccompanied migrant children. Five hundred migrant girls and boys in Musina, the border town in Limpopo province next to Zimbabwe, were reached by awareness-raising campaigns that aimed to improve their access to information on reproductive health, HIV prevention and treatment and human rights.

#### FIFA World Cup™

Working with a wide range of partners, UNICEF helped to ensure that child protection was stepped up during the 2010 FIFA World Cup™. Innovative Child-Friendly Spaces were set up in four Fan Fests in three host cities, providing children with protection services and a safe place to play. Around 162 children who became separated from their caregivers or who needed other assistance received either family reunification services or were referred to a place of safety through the UNICEF-supported Child Friendly Spaces. Trained staff were able to help 3,778 children by identifying at-risk children, providing psychosocial support, recreation and food. Close to 40,000 children and parents were reached with information on how to protect themselves while enjoying the games.

The initiative had several other positive outcomes, including stronger relationships and networks with the Department of Social Development, the police and civil society. The exercise also served as an orientation for child protection practitioners on how to move from a reactive approach to a more proactive, child-friendly approach to protection work. An adaptation of the model was developed for use in future emergency situations in South Africa.

Around 20 million parents, children, tourists and football fans were reached by child protection awareness-raising in the lead up to the World Cup through a multi-stakeholder Red Card campaign. Thirty-two of the largest tourism operators catering to some 10 million travellers annually committed to a code of conduct to protect children from sex tourism.



## FOCUS ON Caring for Vulnerable Children

Selinah Ntuka, 39, has been a childcare worker with Isibindi Kathorus in Katlehong, Johannesburg, since June 2006. She is a mother of two and takes care of her 11-year-old niece. She spoke to us about her work and how she found her calling.

Why did you become a childcare worker? And how has it changed your life?

I love children. I raised them even before I had my own by helping to raise my siblings and looking after children in the community.

Becoming a childcare worker has changed my life a lot. It is great to be a professional and to receive training and information about rights and responsibilities. Before I was nothing to the community, now I am something. I am recognised.

What do you do at Isibindi with the children?
There are 17 childcare workers at this site. I do home visits every day and work with the children. I help them to make memory boxes with pictures and documents of parents or family members who have died, to deal with grief. If I see there is a problem in a family I talk and consult with them until it is resolved. I see six families a day; not all of the children are orphans but the parents are often sick.

I also help the grannies looking after their grandchildren to become legal guardians and to get social and disability grants. Before they access grants, I work out a budget with them. If the children are HIV-positive, I take them to a local support group. I encourage and teach families to start vegetable gardens to improve their nutrition.

What are the main challenges in this community?
HIV is a very big challenge: there are so many orphans here and children who are staying at home, not going to school, to look after sick parents.

One of the biggest problems I experience is the lack of documents. If you do not have documents it is very difficult to get help. Sometimes the children do not get admitted to schools so the older ones, who are desperate and head their households, turn to selling their bodies.

Tell us about a case you have helped with?
There was one family where the grandmother died in 2009. She was 62 and HIV-positive. She was looking after her granddaughter at the time who was also infected and on ARVs; the girl's mother had died of AIDS. When the granny died nobody knew what to do with the child, the rest of the family was not looking after her so the social workers placed her with a foster mother. When it was time for the funeral, the family came and I sat down with them to discuss the girl's care. The uncle is now the girl's legal guardian and is receiving the grant for her. His wife is going with the child to the local support group and she is happy and healthy.













#### SOCIAL TRANSFORMATION & STRATEGIC LEVERAGING

#### Following the money

South Africa recognises that early childhood development that meets high standards and is available to all children, starting with those who are most disadvantaged, is the most cost-effective economic investment. The Government has taken great strides to improve the quality of services in communities. A key tool with which to do this is the recent Public Expenditure and Quality Service Delivery Study (PETS) on early childhood development, conducted in 790 centres.

PETS compares budgetary allocations to actual spending. The data compiled by the study shows how much of the funds intended for service providers actually reach the intended beneficiaries. The information provides invaluable diagnostic material for senior managers and policy makers so they can address any systemic bottlenecks and improve the quality of services.

UNICEF is working with the Government and its partners to revise the country's National Integrated Plan on Early Childhood Development on the basis of the study's recommendations.

#### **Child-friendly budgets**

One of the main outcomes of UNICEF's social budget work is to increase the effectiveness and efficiency of public spending on children. In 2010, an analysis of national and provincial budgets revealed that the government was spending relatively less on district

and community level child-related services. Significant disparities existed between provinces and sectors. UNICEF is working with the National Treasury, Parliament and government departments to address these gaps, and will continue to advocate this message in 2011.

## A thorough look at the Child Support Grant

Highly regarded as the government's most successful intervention to combat child poverty, the Child Support Grant is being evaluated to generate more robust evidence of its impact on child outcomes, in particular the extent to which the programme reduces hunger and improves school attendance. The study, which was supported in part by UNICEF, has two components: the quantative part, which lays out the hard facts and figures, and a qualitative component, which provides the human stories behind the data.

Children's knowledge of how to claim their rights to social security will be improved through a school-based programme in 2011. UNICEF helped to develop educational material on available grants, called *Smiley G and Polly G on a grant tour* for children aged 6–12 years.

#### HIGHLIGHTS

- First-ever analysis of national and provincial budgets from a child rights perspective supported to ensure that children are placed at the centre of South Africa's development.
- Study on early childhood development conducted to improve the quality of services for young children in communities.
- Support provided to the evaluation of the Child Support Grant programme to generate more robust evidence of its impact on child outcomes.
- A continuing partnership with Parliament strengthened oversight of child rights.

#### Understanding child poverty and inequity

A study of the impact of the economic recession on child poverty, supported by UNICEF and other partners revealed the unequivocal influence of the Child Support Grant in keeping poor families and children afloat during the crisis. A survey of the coping strategies of 300 families affected by the crisis showed that a substantially high number of poor children with no State support dropped out of school and were not able to access quality healthcare. UNICEF's advocacy on complementary social protection programmes for those most affected by the economic down-turn will continue in 2011.

An important result of several child policy-related roundtables that UNICEF organised during the year was the joint publication, entitled *Government funded programmes and services for vulnerable children in South Africa* with the Human Sciences Research Council on the nature and scope of child-focused services, which will inform future work on poverty reduction. UNICEF also brought together experts from different fields to discuss pro-child development issues, policy recommendations and sharpen UNICEF's equity-based advocacy and programming.

#### **Working with Parliament**

Parliament's child rights oversight is being strengthened by supporting parliamentary researchers in monitoring child-related indicators and providing budget policy briefs. UNICEF supported the participation of South African parliamentarians in an Inter-Parliamentary Union conference on social protection for children affected by HIV and AIDS. The parliamentarians have since committed to playing a more substantive role in the legislative process and in exercising their oversight role in the social protection of vulnerable children.

As a result of a stronger partnership with the South African Human Rights Commission, UNICEF was invited to provide direct technical assistance to its work on child rights in 2011. Furthermore, UNICEF brought together top experts to agree on concrete steps towards advancing child participation to inform national policy.





## FOCUS ON Child Support Grant

It is early morning in the rural Eastern Cape and the sun is beginning to break through the mist that hangs in the air. Ma Ngcobo has been up for two hours to ensure that her children are ready for school and that some of the household chores are completed before she goes to collect the Child Support Grant from a pay-point at her local supermarket. In the past, she had to spend a large part of the day travelling to a larger town nearby to collect the grant; but with a greater availability of pay-points, the process is now much easier.

After collecting the money, she will set aside some for the children's school needs and use the remainder for groceries and food that Nomusa (8) and Mxolisi (10) have asked her for. Although the grant money helps Ma Ngocobo to take care of her children, she is unemployed and struggles to make ends meet each month. It is a relief when her husband is able to find temporary work for a few weeks at a time, and she does not have to worry as much about unforeseen expenses, especially if one of her children falls ill.

South Africa has a social protection system that cannot be found elsewhere on the continent. The Child Support Grant was introduced in 1998. If the caregiver of the child is a South African citizen or permanent resident and earns below a certain income, they are eligible to benefit from the grant.

By June 2010 the grant was reaching 9.85 million children. The President announced, during his national address, that the grant would be extended to children under the age 18 in stages over the coming years. The grant is a crucial source of support to caregivers in a country where inequality and unemployment are sky high. However, the grant is yet to cover some two million children who are being left out due to administrative barriers.

In 2009, the Department of Social Development and the South African Social Security Agency – which is responsible for managing the grant distribution – initiated an impact evaluation of the Child Support Grant with support from UNICEF.

In 2010, the qualitative evaluation was undertaken and completed to provide a deeper understanding of the uses of the grant, the social challenges facing beneficiaries and non-beneficiaries, and to inform the design of the quantitative research. The aim of the overall evaluation is to assess the impact of the Child Support Grant on children and to inform how access to the grant should be managed in the future.

















Diego Maradona, one of the world's best loved football players, took time out to conduct a mini clinic and donate footballs and kits at Selelekele Secondary, a UNICEF-supported school in Soweto, Johannesburg.



TV and radio personality, Kabelo "KB" Ngakane took part in a special YoTV Blue Couch show on the importance of children's broadcasting.



German Goodwill
Ambassador Eva Padberg
visited the Phefeni
Secondary School in
Soweto to learn about
Child Friendly Schools
and the Girls and Boys
Education Movement
(G/BEM) clubs.



#### **PARTNERSHIPS**

## Safeguarding children during the 2010 FIFA World Cup™

2010 was an exceptionally exciting year for the country. South Africa's hosting of the FIFA World Cup™ was a major focus for the nation and provided a platform for raising awareness about issues such as trafficking and child safety. UNICEF's strong presence at the Child-Friendly Spaces, at four official FIFA Fan Fests, was an opportunity to make sure that children were protected against abuse and exploitation.

Thanks to its alliances with government entities, civil society organisations, companies and the media, UNICEF helped to ensure that children were protected against the risk of sexual exploitation during the international event through its Red Card campaign.

TOTAL South Africa distributed the red cards – which listed contact details for the South African Police and Childline – via its service stations. Children and adults at the Child-Friendly Spaces and in communities also received the cards. Building on UNICEF's collaboration with MXit – the mobile messaging application used by millions of young people – 21,000 MXit subscribers accessed information about rights and safety through the Red Card contact.

Additional child protection messages reached members of the public and the hospitality industry through Fair Trade and Tourism South Africa's (FTTSA) network of corporate entities, all of which were signatories to a code of conduct against the sexual exploitation of children in the travel and

tourism industry. UNICEF supported the production of awareness material for placement in hotel rooms, car rental companies and insertion into in-house publications prior to and during the 2010 FIFA World Cup<sup>TM</sup>. FTTSA and its partners also distributed material that formed part of the Red Card campaign.

#### The power of business

Key to the work of UNICEF is the support of corporate partners. Their investment in critical, results-based programmes – all of which are aligned with national development priorities and the Millennium Development Goals – is inspiring proof of the power of business to effect positive, lasting change for children.

Partnerships can range from collaborations on corporate social investment (CSI) or programme initiatives to cause-related marketing and efforts aimed at raising awareness of an issue and building support among stakeholder groups.

Characterised by a shared agenda, mutual respect and a drive for results, UNICEF builds alliances with the private sector in the true spirit of collaboration.

UNICEF values its local partnerships with TOTAL South Africa, in support of Sports for Development; Mr Price, with a focus on Early Childhood Development, Mango Airlines and Let's Play, which in 2010 also supported Sports for Development.

UNICEF's global partnership with Pampers – through its 'one pack = one vaccine' campaign, continues

#### JUNE

Amidst football fever, Goodwill Ambassador Angelique Kidjo highlighted the needs of vulnerable children in South Africa by visiting an Isibindi safe park in Soweto.



#### SEPTEMBER

Twelve learners from Girls' and Boys' Education Movement clubs, joined UNICEF Celebrity Advocate Tshedi Mholo and a representative from *True Love* magazine to debate girls' empowerment, social problems and violence.



#### NOVEMBER

The head coach of South Africa's national football team and UNICEF Celebrity Advocate, Mr. Pitso Mosimane opened the 2010 AfricaCom Awards by emphasising the power of sport to transform children's lives.



to draw attention to the realities of babies dying of preventable diseases.

Informa Communications – through their hosting of the AfricaCom Awards – nominated UNICEF as the beneficiary of this event, as does the Sheraton Pretoria Hotel, through their staging of an annual golf day in support of UNICEF's work.

UNICEF remains committed to engaging with the private sector in the interests of South Africa's women and children and, in recognising the pivotal role that business plays in accelerating the realisation of children's rights, plans to grow and strengthen its existing partnerships and actively engage new partners in 2011.

#### Mobilising the media

UNICEF remains a leading source of information on children's issues in the South African media. In 2010, UNICEF was able to leverage a high level of exposure in print and broadcast media, cost-free, through several partnerships and the public's interest in children.

Pro bono advertorials on child safety, exclusive breastfeeding, hand washing and child participation, leveraged through UNICEF partnerships, reached over three million *True Love* readers, one of South Africa's leading women's magazines. Through news coverage of key issues, events and milestones in the country's print and broadcast media, valued at several million Rand, children's issues remained high on the agenda.

SuperSport's Let's Play continued to be a valuable partner in the promotion of children's right to sport and play, through co-branding and media exposure. Sports for Development received ongoing coverage on SuperSport television channels and during the World Cup, a public service announcement featuring UNICEF Goodwill Ambassador Lionel Messi was aired *pro* 

bono and thousands of footballs were distributed to children in under-resourced schools and communities at sports festivals and special events supported by TOTAL South Africa and Let's Play.

#### Partnerships with academia

In 2010, UNICEF's partnerships with key academic institutions such as the Human Science Research Council, the Medical Research Council and the Children's Institute at the University of Cape Town, contributed towards generating evidence for child services, with emphasis on equity, that will impact policy changes for children. This included a policy audit of statutory government-funded programmes and services for vulnerable children; an impact study of the global financial crisis on children; child-centred budget analysis; and a public expenditure tracking survey in early childhood development.

The launch of *The South African Child Gauge* 2009/2010, a UNICEF-supported report by the University of Cape Town on progress made towards realising children's rights, resulted in extensive media coverage valued at several million Rand and anchored UNICEF as a go-to authority on children's issues.





# FOCUS ON Children are everyone's business at TOTAL South Africa

Sport is a powerful channel through which to reach out to vulnerable populations, especially when it is associated with teaching and the modeling of important life skills. This approach has come to be known as Sports for Development (SfD) – a key area that has been supported by TOTAL South Africa through a significant investment.

In 2008, UNICEF and TOTAL South Africa signed a three-year partnership to benefit children through a SfD approach. TOTAL's key objectives were to fund a sustainable Corporate Social Investment (CSI) initiative that speak to the company's CSI objectives under the Social Development pillar.

With a pledge of 10 million Rand over three years, TOTAL's investment has meant that more than one million children will have benefited from the partnership by the end of 2011. These are tangible benefits – such as increased opportunities to play, new materials for soccer, exciting school community events, and exposure to life skills training aimed at leading to positive behavior change. The school cluster communities, to which the partnership responds, are some of the most vulnerable in the country.

The continued collaboration with numerous service providers in the field has strengthened implementation – as well as government capacity for a sustainable programme. Critically, the support from TOTAL continues to bolster the entire SfD focus.

The SfD programme operates on a school cluster approach. Currently there are 54 school clusters nationwide, i.e. on average six school clusters per province (total nine provinces) with an average of five schools in each cluster. This means SfD is reaching around 270 schools in total. With an average number of 800 children per school, the number of children reached exceeds 210.000 learners.

With the world's focus firmly on South Africa as a result of the FIFA World Cup, UNICEF was involved in promoting children's access to sports, and the developmental power of sport to transform children's lives. A request from the South African mission in Geneva for materials to promote Sports for Development at a global meeting, led to the production of a series of posters, which also highlighted the power of partnership with partners like TOTAL.

In 2010, UNICEF also commissioned an independent evaluation of SfD, which underlines our commitment to accountability. The results may also be invaluable in helping to further develop sporting initiatives in the country.

UNICEF extends its sincere appreciation to all its corporate partners for their commitment to supporting a better future for South Africa's children.















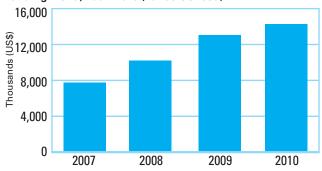
## RESOURCES BY DONORS (US\$)

Regular Resources	997,447
Set Aside Funds	167,620
Other Resources	13,298,710

National Committees for UNICEF	6,578,395
MAC Aids Fund (Belgium, Gulf Area, Japan, Netherlands, Spain, Austria, South Korea, Gre- ece, Hong Kong, US, New Zealand, Australia, France)	2,010,633
Netherlands National Committee for UNICEF	1,473,209
Consolidated (Portugal, Austria, Canada, Norway, Italy, Hungary, Germany, US, South Korea, Belgium, Poland, Japan, UK, Sweden)	1,413,856
UK National Committee for UNICEF	983,866
Finland National Committee for UNICEF	207,965
US Fund for UNICEF	207,259
France National Committee for UNICEF	190,108
Japan National Committee for UNICEF	66,536
Germany National Committee for UNICEF	24,962
Bilateral	3,708,072
Government of Denmark	2,173,960
Department for International Development (UK)	1,533,894
United States International Development Agency	218
Thematic	2,180,914
Basic Education and Gender Equality	1,445,885
HIV/AIDS and Children	551,838
Policy Advocacy and Partnership	157,694
Child Survival	10,100
HIV/AIDS Thematic	5,919
Young Child Survival and Development	5,116
Global Girls Education	3,033
Child Protection: Prevention	1,138
Girls Education	192

Private	437,080
Total SA	222,647
Donations from Individuals	85,070
De Beers	46,936
Mr Price	36,379
Informa UK	21,476
Sheraton	11,679
Mango Airlines	7.346
Woolworths	2,785
Procter and Gamble	904
East Nova	746
Citibank	572
ABSA	375
Spar	165
Inter-Agency	275,145
UNAIDS	215,083
UNFPA-USA	60,062
Donor Pooled funds	52,447
Mixed Donors	52,447
Donation In Kind	66,657
Micro-nutrient Foundation	66,657
Total funds utilised	14,463,777

#### Funding Trend, 2007–2010 (Funds Utilised)





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