



**“Building bridges to foster
Children Social Welfare, Protection and Health Services
in Lusaka Province, Zambia”**

**CHILDREN
WELFARE
HUBS**

CHILD PROTECTION IN ZAMBIA

- On average, 3/4 children between the ages of 2 and 14 are subject to some form of violent discipline in their own home. Much violence goes unreported.¹
- An estimated 28.1% (992,722) 5 to 14 years old children are engaged in child labour and hazardous work such as stone crushing and mining.¹
- Less than 10% birth registration rates and slow progress in raising registration figures.²
- 591 maternal deaths occur per 100,000 live births while the infant, neonatal and under-five mortality rates are at 70, 34, and 119 per 1,000 live births, respectively³
- Prevalence of Wasting 5%, Underweight, 15% and Stunting at 45%⁴
- Prevalence of VitA deficiency is 45%, Anemia 53% for children below 5 years old⁴



¹<http://www.zamcivic.com.zm/> | ²https://www.unicef.org/zambia/5109_8455.html |

³https://www.unicef.org/zambia/5109_8457.html | ⁴https://www.unicef.org/zambia/5109_8461.html

Birth Registration
Facilitation

Monitoring the
Utilization of Health &
Nutrition Services

Education Registration
Information

Information and Help
Desk for Child Rights
and Protection

Connect Communities
to Service Providers

CHALLENGE: To find solutions capable of real-time service tracking and response (availability, access, quality, delivery) for child services (health, education, social protection etc) at the community level in Zambia.

INNOVATION: Establishment of Church and Community Children's Welfare Hubs which would provide basic child services and would create and/or enhance linkages of the community to main service providers of health, social welfare and child protections.



STRATEGIES IMPLEMENTED

Partnership with
Government Offices

Training of Youth
Volunteers

Community
Mapping and
Awareness

> Partnership with National Registration, Ministry of Health, Ministry of General Education, Social Welfare and Child Protection Unit of National Police has been established.

> Youths and Elders of the Churches hosting the welfare hubs have been trained on the birth registration process, growth monitoring and promotion, education registration and re-integration, adoption and fostering, child abuse and protection

> 4 Pilot Communities have been mapped, surveyed and sensitized on the importance and availability of the children welfare services being offered by the government which is being bridged by the welfare hubs



IMPLEMENTATION CHALLENGES

Cholera Outbreak

Community Perceptions

> Cholera Outbreak which started in late September 2017 caused huge delay in project implementation as 3 of the children welfare hubs pilot sites are declared to be epicenters and government restriction were only lifted by late February.

> Upon initial engagement with community members, hesitation and resistance for birth registration is very high as they perceive it as something that is related to Satanism and Political Campaigning.



WHAT'S NEXT?

**Continuous
Community
Sensitization**

**Welfare Hubs
Services Starts**

**Exploration
Partnerships to
achieve SDG's**

> Church Sunday Announcements, Radio Programs and Continued Community Sensitization on the availability and importance of children welfare services and CWH operations

> Starting 2nd of May, Birth Registration and other children welfare services will start for the communities through the hubs established by the churches

> The Government showed appetite in the project and it is interested in replicating it in other communities. Church's wide presence in the remote areas could help reaching those left behind.



SUSTAINABILITY AND SCALING

Community Based

Government
Involvement and
Interests

Nationwide Church
Network and
Presence

Automation /
Technologies

> **Core Strength:** The Children Welfare Hubs are sustainable because they are within the local community (i.e. implemented in local communities by local people and addressing local needs). Additionally, the Government and the Churches are involved in them.

> **Further objectives:** Focusing on nutrition and make birth registration possible without leaving the community. Use of the hubs for other services (Cholera Information and Prevention)

> **Major SDG acceleration lever:** Using new technology (CWH can provide small mobile services to the communities) and encouraging good governance (promoting Church-Government partnership)

> **Major opportunities for scale:** Uses of new technology (online registration, mobile registration hubs), public policy (establishment of such hubs throughout the country)

LESSONS LEARNED AND IMPACTS



> **Government Harmonization:** Relationship between the line ministries were harmonized through this project. Each representative had a better understanding of how their works interlinked and deeper appreciation of each other's services

> **Youth Empowerment:** The youth volunteers trained to run the welfare hubs and those that were engaged for community mapping and awareness felt empowered and had a sense of purpose to know more about their community and ways to improve it.



LESSONS LEARNED AND IMPACTS

> **Expandable:** The Children Welfare Hubs can be used for further sensitization of other SDG's and government services as well as facilitating unit for emergency and development programs



> **Education:** It takes time and continuous sensitization for the community to understand, change their perceptions, and appreciate services and process for children welfare and community development

Twatotela!
Zikomo!
Lesa
Amupale!

