COMMUNITY & FAMILY BASED SUPPORT FOR CARE OF CHILDREN EXPERIENCING DISABILITIES
KEY POINTS

• Key achievements

• Challenges

• Learning

• Ways forward
GENERAL OBJECTIVE

• Design a tailored package to improve family-based care for children experiencing disabilities, tackling issues related to stigma, discrimination and limited accessibility/affordability of basic services in their areas.

• Provide hands-on technical support to families of children with disabilities, to prevent family separation and sustain post-placement support.
SPECIFIC OBJECTIVES

• Facilitating referral for access to disability-related specific services like education, healthcare and (re) habilitation, and social protection.

• Engaging with key players including local government, Disabled People Organisation, Faith Based Organisation, the wider community and families to set up peer support groups and build resilience.

• Increasing the capacity of communities to support children and their families through awareness raising and sensitization of communities and local leaders.
Output 1: Children experiencing disabilities and their families are supported to access mainstream and disability-related services

Situation analysis and Baseline and mapping findings

- Stigma and discrimination are still high at 53% in the community.
- Poverty makes it even harder when it comes to affordability. (Medical, Rehab & schools)
- Inappropriate placement of people in the social economic categories (though 56.1% are placed in the 1st and 2nd category) prevents them from accessing social services.
- Lack of budget at the cell and sector to support People Experiencing Disabilities/Children Experiencing Disabilities.
Output 1: Children experiencing disabilities and their families are supported to access mainstream and disability-related services

- The total number of children experiencing disabilities identified is 6689 with 56.5% of them in Bugesera district with Rweru sector having 10.97% & 43.5% in Huye District with Mbazi sector having 11.48%

- About 30% of school-aged children experiencing disabilities are not receiving the specialist support they need in the schools they attend.

- Mainstreaming services for children experiencing disabilities are available but accessibility, knowledge and skills of service providers are of great concern.

- About 95% of children experiencing disabilities need Rehab and other medical services that are not available in their localities but only 21.4% can travel to the service provider though it remains difficult for the remaining group.
Output 1: Children with disabilities and their families are supported to access mainstream and disability-related services

- About 46% of children experiencing disabilities identified have severe & multiple disabilities (all the six domains are impaired) i.e., hearing, vision, communication, cognitive, Self-care and physical/mobility.
- 53% of children experiencing disabilities agreed above 7 are in schools.
- 42.7% are not aware of the child protection services in their communities.
- Only 4.3% of the parents confirmed they have resources to meet their child’s needs. Therefore; accessibility, affordability and availability of special and inclusive services in the community should be a priority for the Government, Civil Society Organisations (CSO) and Non-Governmental Organisations.
OUTPUT 2: PARENTS FACILITATED TO ACCESS SELF-HELP GROUPS AND OTHER COMMUNITY-BASED INITIATIVES

Have trained 6689 Parents of children experiencing disabilities (3814 in Bugesera & 2875 in Huye) along with 353 Community Volunteers (IZUs & NCPD coordinators)

Have established 146 Parent Support Groups (76 in Huye and 70 in Bugesera) - 3 cells had to be combined

All 6689 children experiencing disabilities were referred to social, educational, health and child protection services but 1169 children experiencing disabilities were referred to more than 1 service

“I am happy that we now have people who can help us know what to do about our children experiencing disabilities’ difficulties” said by a parent from Huye District
Set (Science)

Goat, Monkey, Cow, Giraffe

Wild animals = Monkey, Giraffe

Domestic animals = _
OUTPUT 3: COMMUNITY-BASED STRUCTURES EMPOWERED TO PROVIDE AND SUPPORT CHILDREN EXPERIENCING DISABILITIES AND THEIR FAMILIES

- 301 Community volunteers were trained (154 in Huye & 157 in Bugesera)
- Have run 29 community advocacy events across all the sectors of Huye and Bugesera districts
- Trained 183 local leaders (93 in Huye & 90 in Bugesera)
- Trained 231 primary school head teachers (119 in Bugesera & 112 in Huye)
- Trained 32 health officers (16 in Huye and 16 in Bugesera district) and have installed 149 signposts across all the cell offices in the two districts.

We fight for every child.
UPDATES ON REFERRALS MADE IN HUYE DISTRICT

- Social protection: 19 (Received) vs 39 (Referred)
- Child protection: 5 (Received) vs 18 (Referred)
- Education services (Early Childhood Development, Public, private and special...): 881 (Received) vs 1392 (Referred)
- Health services (Hospital and Rehabilitation): 502 (Received) vs 1845 (Referred)

Children and young people who received services vs Referred children and young people
**REFERRALS CONTINUE**

Updates on referrals made in Bugesera district

- **Social protection**: 39 / 148
- **Child protection**: 60 / 93
- **Education Services (Early Childhood Development, Public and private schools plus TVET)**: 703 / 1965
- **Health Services (Hospital and Rehabilitation centres)**: 667 / 2364

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We fight for every child
(RE)HABILITATION & HEALTH SERVICES

REFERRALS CONTINUE

- **319 (30.4%)** went for rehabilitation and other health services. 254 are being treated in different hospitals and health centres and 65 are in the (re)hab. services in both districts.

- **47 (4.5%)** were sent back home by the medical staff saying that they cannot do anything about their children.

- **604 (57.5%)** had no financial capacity to keep up the medical appointments and hence dropped out.

- **78 (7.4%)** are in category 1 of ubudehe but could not afford to pay the transport and catering cost to access the services.
EDUCATIONAL SERVICES

REFERRALS CONTINUE

• **717 (59.5%)** are now in the schools though still facing some discrimination and stigma.

• **298 (24.7%)** were sent back home by the teachers/headteachers saying that they can not teach children like them.

• **25 (2.1%)** were asked to join special schools for the deaf and/or blind. Parents decided to keep their children at home as they do not have financial capacities.

• **165 (13.7%)** could not go to school as they have difficulties going there due to long distances and/or lack of assistive devices.
REFERRALS CONTINUE

SOCIAL PROTECTION SERVICES

- 58 (31.0%) are enrolled in the social protection services in their districts.
- 42 (22.5%) never went for the service thinking that they do not qualify for the service.
- 87 (46.5%) were denied social protection services by local leaders saying that they do not qualify for such services.
• 65 (58.6%) cases were handled as most of them were related to physical, psychological abuses and neglect.

• 46 (41.4%) have unaddressed cases, either perpetrator was jailed for some months and then got released, or the victim is on continuous therapy or in extreme poverty resulting from that abuse, but nobody provides support with this. One case is still in court in the Bugesera district.
CHALLENGES

• The children we support needs are beyond the project scope (assistive devices, financial support to facilitate referrals, shelters)

• Parents’ attitudes and lack of awareness on some programmes available for them in their communities

• Most service providers still do not get it right when it comes to providing inclusive services (think about sophisticated approaches that will never work)
• High-level need for income-generating activities among Parent Support Group members

• There is a need to train parents of children experiencing disabilities in business development/management

• Looking at the impact we need—the project is just started (fixing dropouts, parents & service providers’ attitudes,
WAYS FORWARD

• Pushing for Community Based Rehabilitation approach

• Advocacy for resources mobilisation for the needs highlighted above

• Increase the buy-in by the local authorities/leaders to ensure the sustainability of such interventions.

• Advocacy for the needs that are beyond the project scope
THANK YOU!