

REVIEW OF
THE ROBS SMETHERHAM BEREAVEMENT SERVICE
FOR CHILDREN (RobS)

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Compiled by



Presented to



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1. Introduction

The importance of providing psychosocial support to those children forced to cope with the trauma of dying and death in the HIV/AIDS context is critical. With their resilience and their ability to cope with their life circumstances severely impacted, it is important that they are attended to emotionally so that they can make better use of opportunities for education, health and material care. Many families coping with death and severe poverty no longer have the capacity to meet children's emotional needs in addition to everything else. As Lewitt¹ (2001) for Rob Smetherham Bereavement Service for Children (RobS) writes,

“We understand this emotional desert and hope to bring some relief, through working with these children in their communities and teaching others to help in practical ways, through play, which is, after all, a child's natural medium of communication. Often children internalise their feelings and responses and that makes it difficult to see the need for emotional support.”

RobS strongly believes that giving children food and clothing is no longer enough. While there are a number of aid organizations that provide for material needs, children's resilience is, according to RobS, only encouraged when their emotional needs are also met.

1.1 Overview

1.1.1. Brief overview of the organization

RobS was founded in the year 2000, with the aim of bringing hope and healing through therapeutic play interventions to bereaved, orphaned, and vulnerable children in communities affected by death and loss. RobS works with poor communities to help them respond to the psychosocial needs of their grieving children, as well as alongside organizations who provide material assistance to children affected by HIV/AIDS. RobS hopes to reach its goal through the following aims²:

1. To create awareness in the greater community – stakeholders, counsellors, chiefs, pastors, schools, School Governing Bodies (SGB), clinics and community-based organizations (CBOs) – regarding the needs of bereaved children
2. To provide therapy counselling for bereaved children especially those affected by AIDS
3. To provide play therapy support to families and adults in these children's lives
4. To educate and train community members, who have a passion for children, to meet the emotional needs of bereaved children

¹ Adopted from <http://www.cyc-net.org/cycol-1101-jewitt.html>

² Adopted from <http://www.cindi.org.za/?q=RobS>

5. To scale up this intervention, we teach and train partner organizations to provide direct support to bereaved children and in turn to be able to train others to do the same
6. To enable community members to establish links with organizations, potential partners and government, who in turn will be able to respond with material support, so that interventions will be sustained in the long term

1.2 Grant summary

The Rockefeller Brothers Fund (RBF) supported RobS from 2003 - 2006 with four grants totalling \$136,700. The grants focused on RobS' capacity-development (train the trainer workshop on bereavement therapy), capacity-development for NGOs in play skills therapy, institutional strengthening (to expand skills play training unit), and general support.

1.3 Purpose of study

The purpose of this review is three-fold:

- Firstly, it aims to explore in somewhat greater depth the results of 12 grantee partners' work in order to establish the outcomes and impacts of their work within the education and vulnerable children sector.
- Second, these mini reviews will form one aspect of a meta-analysis which will explore the RBF grant making strategy.
- Finally, the mini review also aims to provide the organization with useful feedback from a peer organization, donor and government representative.

1.4 Methodology

For this review, the team relied heavily on the organization's progress and external evaluation reports (where possible). These were combined with findings drawn from qualitative in-depth interviews held with the organization's director and program staff, as well as interviews held with representatives of a self-nominated peer organization and a donor representative. Conducting an interview with a government representative was not considered to be relevant for this review.

Questions for the in-depth interviews focused on the organizations' greatest achievements, challenges and lessons learnt. In addition, questions explored the results of institutional strengthening and RBF's funding.

1.4.1 Selection of organizations

The first selection criterion for organizations to be included in the mini evaluations was extent of support. Only those with a longer relationship with RBF could be

included. Secondly, an effort was made to select organizations from across three provinces, as well as across the three grant types.

1.4.2 Limitations

One key limitation of this review is the high reliance on self reporting (either through team interviews or progress reports) by the organization due to the time and budget constraints of the study itself. This was counter-balanced through the inclusion of interviews with donor, peer organization and government representatives, as well as evaluation reports where possible.

2. Findings

The findings of the RobS review are presented in three sections. The first section focuses on the organization's overall achievements and the factors that supported its effectiveness. Thereafter its challenges in meeting its objectives, and finally the key lessons learnt are presented.

2.1 Key Achievements

2.1.1 Program outcomes against its objectives

The achievements of RobS' work will be discussed against each aim.

Aim: To create awareness in the greater community – stakeholders, counsellors, chiefs, pastors, schools, school governing bodies (SGB), clinics, CBOs – regarding the needs of bereaved children

Assessment: No available data exists as to the extent of the awareness that RobS has raised. Some findings do, however, suggest that RobS has changed the perception of viewing some groups of orphans as problems and a crises in need of support, to allies who are not that different from other children.

Aim: To provide therapy counselling for bereaved children especially those affected by AIDS

Assessment: RobS succeeded in providing therapeutic play support groups for bereaved children, the effectiveness of which is reflected in the Child Participation Program evaluation report (2008). The children reported that since they were able to talk about death to their caregivers, they experienced many benefits linked to improved self-esteem (they no longer feel ashamed to be without parents, feel more self-respect), improved school performance (are finding it easier to do their school work), and generally seemed more aware of and able to deal with their emotions

(realize their situation is not unique and understand their suffering, know what to do when they feel sad, and know what happened to their parents).

The children also spoke about how the support group helped them in their relationships with others. In particular, they learnt how to be compassionate and not to laugh at others. This is illustrated by a quote from the 2008 Child Participation evaluation report:

“One child spoke about how the group taught her ‘to respect each other and treat each other like family’ (*10-year-old, rural community*), while another child spoke about how she learned to be friends with the others in the group and now they ‘play with each other and greet each other’ (*10-year-old, semi-urban community*). Furthermore, as the children described the impact the group had on the family, one child spoke about how the group taught him, ‘to give people love and care, especially our family members’ (*13-year old, rural community*).”

Aim: To provide play therapy support to families and adults in these children's lives

Assessment: The RobS team explained that in order to strengthen relationships between children and adults, they first work with adults (especially the overwhelmed and despairing caregivers who believe they cannot do more) and then with children. RobS’ support to families helped to increase the awareness of the needs of bereaved children, as well as the ability of caregivers to use resources at their disposal to strengthen their families. These include the healing power of conversations and attention, the power of play, and the usefulness of simple, cheap and local materials that can be used for play therapy. In the RobS external evaluation (2008) caregivers reported a newfound sense of emotional connection and communication with their children and a new mutual understanding is strengthening the families as a result of the training. Those caregivers, who were on the brink of giving up, chose to continue supporting their children as a result of their improved relationship. Caregivers also shared dramatic changes in children’s behavior, including greater co-operativeness at home, with some teenagers shifting from spending nights away to living at home full-time. Many grandmothers reported that they have stopped using corporal punishment to discipline their children. This shift is believed to be significant and suggests an improved relationship between caregiver and child. This improved relationship was confirmed by a peer respondent, who observed,

“What I’ve heard from caregivers who participated in the doll-making workshops is that their relationships with their children had improved and that they understand them better, children share with them more, they listen and don’t worry as much. This is very important for overwhelmed caregivers who face many challenges. They also are enjoying their children. The relationships have been enriched and this is life-saving”.

Aim: To educate and train community members, who have a passion for children, to meet the emotional needs of bereaved children

Assessment: Evidence provided by the 2008 external evaluation indicates that RobS is moving towards achieving this aim by training teachers and community caregivers. Teachers, for example, reported that as a result of their new skills, their learners improved academically, were less withdrawn, were doing their homework again, participated in the classroom, and were less aggressive and more open.

Aim: To scale up this intervention, we teach and train partner organizations to provide direct support to bereaved children and in turn to be able to train others to do the same

Assessment: Evidence indicates that RobS has established key partnerships through its cascade approach to training, which seeks to strengthen organizations and not primarily individuals, and by strategically choosing the organizations whose staff or volunteers they train.

Through its training workshops, RobS enabled partner NGOs to adapt their current programs to include direct support to bereaved children, including play skills methods to increase communication with children and to encourage children to express themselves. The 2008 external evaluation reports that the training enabled NGOs to identify gaps in their psychosocial support of children, and assisted them with identifying ways to meet children's needs more systematically. As a RobS staff member said,

“We work with four to six communities per year, in year one the work is intensive, in year two the community members do more independent work and we close our relationship with the community at the end of year two. We provide training in response to requests by other NGOs and we work intensively with eight strategic partners per year to train as trainers” (RobS Executive Summary Report, 2008).

RobS' experiential learning approach was described by a peer respondent as enabling trainees to learn how to relate to children in a meaningful, approachable and subtle manner. The RobS' trainings also provided participants with opportunities for reflection, self care, and professional development. A sign of the success and demand for the RobS training is that, at the time of this review (November 2008), RobS' training schedule was fully booked for 2009.

RobS' national and international strategic partners in 2006, for example, included NOAH (85 arks countrywide), HOPE Worldwide (Africa, Johannesburg, Durban and Umtata) and Catholic Aids Action in Namibia. All of these organizations work with vulnerable children and have been strengthened in terms of their capacity to deal with bereavement issues.

RobS has reportedly also inspired individual volunteers (some of whom were trained by RobS a few years ago) to form CBOs. An example is *Magic Service Providers* who offer psychosocial support to children – and in this way, RobS' reach is increased. For example, for every person trained in foundation course, the organization hope they will reach at least one individual child; for two people trained in advanced in groups, the organisation hope they will each reach a group. This means ideally, ten people trained in groups should reach 100 children directly as a result of the group training. However, RobS observed that 50-60% of those trained actually implement - so in reality 58 is a more realistic estimate of reach although this figure varies.

RobS is also currently working on a staff support program, the content of this support program, has been endorsed by directors of our strategic partners organisations. The purpose of the program is to help NGOs and CBOs implement simple reflection and self-care practices (that have worked for RobS in practice) to take care of themselves and some ideas of how to provide support structures in organizations. It is envisaged that this will support scale up efforts.

Aim: To enable community members to establish links with organizations, potential partners and government, who in turn will be able to respond with material support, so that interventions will be sustained in the long term.

Assessment: This review could not determine how and how many community members have benefited from the networking efforts of RobS, and was reported as not being the focus of the RBF grants.

2.1.2 Factors that supported their achievements

Of great support to RobS' achievements is its reputation. It is believed to be a forerunner in child psychosocial support and is respected by NGOs working with children. A donor representative remarked that,

“Various services exist that meet physical needs, but few strengthen and assist families and organizations working with children. Their contribution is significant because they are investing in children’s emotional needs which are very important at an early stage. The results of RobS’ work cannot be measured statistically and will only be evident later when these children grow up to being functioning adults” .

In addition, RobS has strengthened its reputation by strategically positioning itself as part of a circle of care around the child, family and community by being the leader of the psychosocial support (PSS) cluster of the Children in Distress Network (CINDI). Representatives in the PSS cluster appreciated RobS because they follow through with action, are passionate about their work, are highly supportive of other organizations,

work hard to fulfil commitments made, and always have time to really listen to the challenges others face.

This raises the second identified supporting factor, which is the organization's professionalism. Feedback from organizations that participated in the 2008 RobS external evaluation, as well as from respondents in this review, reported that they were impressed with RobS' professionalism, capacity to forge partnerships, and specifically for providing clear information, reliably coming to meetings, being constructive with problems and challenges, being clear, succinct, having a coherent plan, and providing timeous communication.

This work ethic is based on two factors RobS, that is, belief that in order to "look after other people you need to look at yourself" and the necessity of ongoing professional development of your own practice. The later is achieved through regular conscious reflection on "what works, what does not, what are we learning, what do we need to change and improve in our practice". This brings awareness of professional development needs to maintain the quality of work. Awareness of personal emotional capacity to maintain the intensity of the work is achieved through *regular* debriefing and individual therapy sessions *available as needed* with staff. Because of these sessions staff members feel that they are able to manage the *emotional burden* of dealing with children in great difficulty, as they get a chance to offload *in debriefing and there is the option of more individual support*. In the RobS review (2008), all partners, stakeholders and trainees remarked that RobS provides "excellent training systems and has wonderfully experienced and effective trainers". This notion is shared by a peer organization respondent who said,

"The staff members are excellent and are able to distil complex ideas. They understand the task very well and share ideas of what kids need from caregivers and the community in an engaging manner, and they are able to share this with professionals, children, NGOs, caregivers alike".

The third factor supporting ROBS' achievements is its cascading strategy (training and mentoring) which not only allows them to widen their reach by strengthening organizations' psychosocial responses, but also supports their awareness-raising and networking objectives. By working with existing networks, RobS aims to increase its reach and use the best possible leverage to scale up its model. As one team member said,

"We do provide direct services to children ourselves. However, our focus is on using every activity to work alongside community members and strategic partner organizations to help them to increase effective emotional support to children. Our vision for all of our programs is to strengthen the work of others to be able to respond to the devastating emotional impact of loss on children they serve".

All the above factors are strengthened through RobS' own institutional strengthening, through which they ensure that their model is professional, structured, and responsive to each organization and partner and unique, adaptable and flexible enough to respond to the needs of each.

Results ascribed to RBF

The RBF grants for RobS focused on capacity-development (train the trainer workshop on bereavement therapy); community organization's capacity-development in play skills therapy; institutional strengthening by expanding skills play training unit, and general support. All the grants contributed significantly to the strengths of the organization. In particular, RobS valued the RBF-funded debriefing sessions offered by a play therapist which allowed field co-ordinators to offload any emotional burdens and prevented program staff, in general, from being overwhelmed and possibly leaving the organization. RobS also believes that as a result of RBF's support, they were able to identify strategic opportunities and build valuable networks of people by focusing on relationships.

Overall, RobS believed that RBF was able to provide a swift response to the needs of South African children by trusting and valuing its grantee partners.

2.2 Challenges

RobS observed that there was little change in some partners' approaches to supporting children and this in turn limited the impact of the cascading model. Some of the trained NGO staff and volunteers did not use the acquired knowledge and skills to support children. The 2008 evaluation review noted a number of reasons for this including:

- lack of confidence to use the skills; requests for refresher courses; fears of being criticized; lack of practice
- some process-related barriers such as difficulties linked to the consent forms and not being paid
- resistance to the concept of play therapy from parents.

In addition, some personal emotional issues emerged from participants during training, which indicated that some were not emotionally ready to provide psychosocial support to others. This was compounded by the fact that many NGOs use volunteers, who tend not to remain with the organization for long and results in a loss of the newly acquired skills. RobS has realized that because they have to rely heavily on the capacities, attitude, willingness, and co-operation of their partners they also have to accept that there will be a number of drop outs.

2.3 Lessons learnt

When it comes to scaling up, RobS believes that there is a need to balance numbers with quality. If a generic component is placed within a functioning system, scale up is

easier. However, the system needs to be robust enough to hold emotional issues as well. To ensure that RobS identifies the most appropriate partners to build staff members' capacity in psychosocial support, it has developed criteria to help assess the best fit for a partnership. These include the NGO's intentions, whether an organization structure can accommodate the RobS training, as well as the implementation, and whether the psychosocial support fits in with their organizational strategy, budget, planning and day-to-day practice.

3. Conclusion

It seems that RobS has achieved its goal of bringing hope to bereaved children by empowering and strategically positioning itself as being part of the supporting circle of care around the child. The extent of this support, however, lies outside the scope of this review. As a peer and a donor respondent said,

"It is difficult to measure the results of RobS' work, because it will require walking with people for a long time to see the change."

"...when these children grow up to be functioning adults."

References

Reports

1. RobS Narrative Report to RBF, December 2004
2. RobS Narrative Report to RBF on the Training Unit, October 2005
3. RobS Narrative Report to RBF on Capacity Building, December 2006
4. Child Participation Report at RobS, 2008
5. RobS External Evaluation and Executive Summary, 2008

Websites

1. Building resilience and hope for the future, <http://www.cyc-net.org/cycol-1101-jewitt.html>
2. RobS aims: <http://www.cindi.org.za/?q=RobS>

Interviews

1. On-site interview with RobS team

2. Telephonic Interview with a donor representative
3. Telephonic Interview with a peer organization