Sustaining Community Engagement in COPESSA's Safe and Caring Communities Programmes: A C4D Strategy

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EXECUTIVE SUMMARY

The team was tasked to apply Communication for Development (C4D) concepts and methods to design a strategy to address a particular development issue faced by Community Based Prevention and Empowerment Strategies- South Africa (COPESSA) a local Non-governmental Organisation (NGO). The team focused on the key elements of a C4D planning process, including, an understanding of the situation, basic formative research and a brief intervention design, implementation and monitoring and evaluation plan. The final strategy report document is forwarded to COPESSA on 16 Aug 2013 for review, input and possible implementation.

The understanding of the situation was informed by a presentation by COPESSA's Chief Executive Officer (CEO), Dr. Nobs Mwanda, and an informal Question and Answer session with Dr. Mwanda and Gopi Maremela, a COPESSA social worker. A review of COPESSA's profile included publications: pamphlets, newsletter, annual reports and year-end financial accounting of funds allocations and activities to donors and also videos posted on YouTube and the COPESSA website. This initial exploration provided a basis in understanding the situation for more in-depth qualitative research process.

The key process in undertaking this task was based on the C – Planning Model. This model allows for the use of practical steps that are doable with limited resources and the minimum amount of expertise.

This report provides a basic situational assessment , a causal analysis, focus and design of the C4D strategy which includes the creation of an implementation and monitoring and evaluation plan and strategy review for possible implementation.

Acronyms and Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
AMPS	All Media and Production Survey
C4D	Communication for Development
CBO	Community based Organization
CEO	Chief Executive Officer
COPESSA	Community Based Prevention and Empowerment Strategies- South Africa
EE	Entertainment Education
HBM	Health Belief Model
HR	Human Resources
HRDP	Human Resources Development Program
IEC	Information Education Communication
Imbizo	Informal community meeting
IT	Information Technology
KAP	knowledge, attitude and practice
KOICA	Korean International Cooperation Agency
PSA	public service announcement
REC	Research Ethics Committee
SEM	Socio-ecological model
UNICEF	United Nations Children's Fund

Background on COPESSA

COPESSA is a non-profit organisation established in 2000, located in a low-middle income neighbourhood in Soweto. It advertises its mission and services in pamphlets and in large lettering painted on the front of its office, which include: clinical services for child abuse victims, and counselling for survivors and their families. To fulfil its aim of supporting community health and development, COPESSA established beautiful play parks for children, a gymnasium park for adults which attracts regular users, community vegetable gardens, after-school reading and homework programmes for children, and income-generating sewing and beading activities for women. COPESSA offers training on lay counselling and parenting, and medical assessments and counselling for abused children. Counselling for abused men and women and relationship counselling are also offered.

COPESSA has full time staff who include a social worker, a psychologist and administrative staff. The organisation has volunteers who support many of the activities serving the community. In addition to the many day-to-day concerns that Dr. Mwanda expressed in reaching the community, sustaining activities, and outreach to service providers, donors and potential partners, Dr. Mwanda also expressed concern with the long term survival of her organisation.

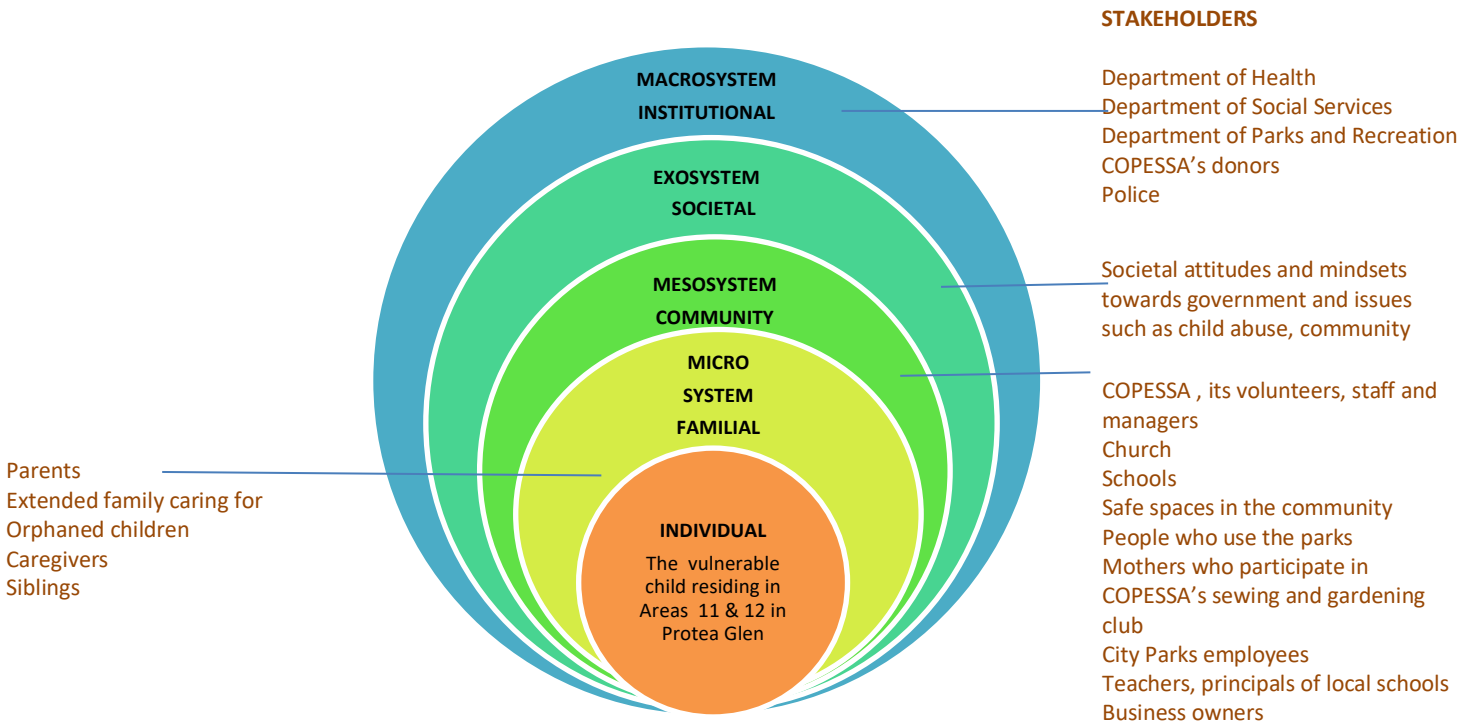
COPESSA receives the majority of its funding from the Department of Social Development (for staffing). Other large donors include: Infant Trust UK and private companies such as Aspen Pharmacare and Vodacom. It has a Board of Directors whose responsibilities include the preparation and fair presentation of annual financial statements which are not only disseminated to donors, but are also freely available to the public on COPESSA's website.

Goal of the C4D Strategy

The goal of the C4D strategy is to increase and sustain active community engagement in COPESSA programmes on child abuse and neglect in order to create caring and safe communities for children in Areas 11 and 12 of Protea Glen. The strategy focuses on: increasing awareness and knowledge about COPESSA and its programmes, increasing participation, and ensuring sustained engagement of the community in Areas 11 and 12 of Protea Glen.

Understanding the Situation: Formative Assessment

Stakeholder analysis



During the formative research, the team held interviews and focus group discussions (please see Appendix) in Protea Glen. In total, the interviews covered: adults (4 men, 8 women), 25 children and 12 young people, 4 COPESSA staff, 4 COPESSA volunteers, 3 representatives from other community authorisations, and 1 government employee. In the very short time available, the team focused on questions designed to give more insight into:

- Awareness and knowledge about COPESSA's offerings to the community.
- Stakeholders' experience and perceptions of community engagement in Areas 11 and 12 of Protea Glen.
- Stakeholders' perceptions about safe spaces in the community, and, more broadly: protection of children from abuse and neglect.

An analysis of statements relevant to the child's microsystem confirmed many actual and perceived potential threats to the child that are present in his/her environment.

Both adults and children interviewed characterised a child's microsystem as one where suffering and child abuse might be perpetrated by parents (particularly fathers and male relatives), with alcoholism, drug abuse, and domestic violence increasing the risk. It is clear that interventions aimed at protecting the child would need to be fully engaged with individuals in the child's microsystem.

COPESSA is situated in the child's mesosytem, and it is at this community level - with other stakeholders such as churches, schools, teachers, principals, COPESSA and its management, staff and volunteers – that all should endeavour to contribute to solutions. People involved in COPESSA's programmes, for example: women in the sewing and gardening clubs, and men and women using the gym equipment were generally very positive about COPESSA and found these activities a good opportunity to socialise and relieve stress. The target audiences of this C4D strategy are the children, young people and men and women who live in Areas 11 and 12 of Protea Glen. Other stakeholders at community level include: community level service providers, business owners, community radio, and other NGOs and CBOs that focus on child rights.

Interviews and focus group discussions revealed low community awareness about COPESSA and its community-oriented services. Some respondents who said they had heard of COPESSA thought it was a government agency. COPESSA's main communication platforms to the public include a website, a weekly newspaper and a local radio station. However, younger respondents said they did not pay attention to these media. Many seemed to own mobile phones and it would be relevant to find out more about this audience's preferred mode of communication on information around health, safety, and civic responsibility.

The young people in the community possessed a great energy but this was sometimes muted with a sense of despair about the future and frustration with factors they felt powerless to control, such as politics, unemployment, and unresponsive government service providers. Above all else, unemployment was their top of mind issue. They wanted opportunities to learn practical skills that would lead to meaningful employment – IT was the most frequently cited example. In addition to unemployment, adults cited as their top concerns: drug abuse, poverty, limited access to health services and exposure to junk food. Child abuse was a real concern which came out and readily acknowledged but only after prompting. On the other hand, children more readily identified violence and child abuse as their top worry.

Many statements, particularly from adults, corroborated COPESSA's belief that there was a feeling across society that the responsibility to care and maintain the community was an obligation of government. Young people and children were more likely to answer that, as useful members of their community, they very much wanted to participate in solutions but did not know how – either believing they lacked the skills required or were never given an opportunity to step forward.

Community members have a general mistrust of stakeholders in the macrosystem: government institutions and the political system. Police are also perceived to be ineffective. COPESSA also expressed a mix of experiences with various departments and, like the community members, there is a level of frustration stemming from the inordinate amount of time and energy that bureaucratic processes demand of NGOs.

Problem/causal analysis

An overall challenge identified by COPESSA and confirmed by stakeholders is that **community engagement in COPESSA's programmes to create safe and caring communities is low and not sustained over time.** Interviews with individuals and representatives of organisations in the community suggested that this problem could be rooted in:

- **Community disillusionment:** It is possible that people in the community face economic or other constraints that prevent them from becoming involved in COPESSA's projects. We know that lack of engagement is not universal as COPESSA has a number of regular adult participants in income-generating activities, exercise in the gym park. However, overall, people in the community expressed a deep distrust and disenchantment with the ruling party and in politics generally, as the promises of post-Apartheid socio-economic equality and well-being have not been fulfilled. At the same time, comments suggested that many people felt that civic responsibilities such as preventing vandalism and looking after public property rest solely with police and government authorities.

The underlying causes feed many of the problems in the community identified by the children, young people and adults – all risk factors for child abuse and neglect: crime, alcoholism, violence, and drug abuse.

C4D alone cannot effectively address the root causes, as these are often structural. In contrast, C4D is about community. Therefore the strategy pays attention to the immediate and intermediate causes, which include:

- **Knowledge and awareness about COPESSA and its work:** The majority of adults and children from Protea Glen who were interviewed either "never heard" of COPESSA. If they had heard of COPESSA, many interviewees were not aware of COPESSA's contribution to improve community life or to offer opportunities for people in the community. When informed about COPESSA's mission and activities, some interviewees said they were either not interested in these goals, or disagreed that priorities identified by COPESSA reflected the top concerns of residents in the community. At worst, some people in the community believe that COPESSA is government, and this feeds into the negativity that was identified as a root cause (see above).

- **Limited two-way communication** between COPESSA and the community: COPESSA uses a number of communication outlets to let people in the community know what the NGO is doing. For example, COPESSA owns an up-to-date website where all current and previous financial and annual reports are freely available. There are a number of videos available online as well. Communication products such as leaflets, newsletters, and banners displayed in the reception area clearly enumerate the goals of the organisation and provide details on the achievements of COPESSA. A pledge form prompts a fundraising opportunity. COPESSA's aims and offerings are painted on the front of their office, located on a main street in Section 11 and 12. There is a large white sign board where black lettering spells out upcoming events. COPESSA also uses community radio and a weekly newspaper for the same purpose. It does not appear that these communications platforms offer an opportunity for the community to feedback their concerns and ideas to COPESSA.

- **Insufficient involvement of community in the design of programmes to address community problems.** The examples of project design provided by COPESSA and the examples of implementation, as described by different people in the community, suggested that generally, the creation of safe spaces and income-generation projects (e.g. vegetable gardens, sewing clubs, parks) were inspired by COPESSA and presented to the community. Involvement of the community was elicited by COPESSA only after a project had been conceptualised. An exception might be the idea of creating a skate park, suggested to COPESSA by boys in the community, but this group has not been formalised and on-going engagement has not been sustained.

Objectives of the strategy

By identifying the problems that could be addressed through a C4D strategy, three objectives suggested are as follows:

1. At least 50 per cent of people in Area 11 and 12 in Protea Glen are aware of and knowledgeable about COPESSA programmes, within 12 months.

2. One in ten community members in Areas 11 and 12 in Protea Glen are participating in COPESSA's programmes within 12 months.

3. Community awareness on child abuse and neglect increased by 15 per cent from the baseline within 12 months.

Expected results will be measured by changes within the specified period of number of people that know COPESSA and can articulate what it does, aware of COPESSA's planned social activities and do actively participate in them, can identify what child abuse is, can state how to react to child abuse issues and know the right person / organization to talk to in such cases.

Limitations of the process

Although this strategy has been developed through an informed and consultative research process, there are still some unavoidable limitations. First, two weeks is too short a time to identify and conduct a comprehensive, representative overview. Consequently, the research was conducted only on a small size of the population / stakeholders which might not represent the majority and only through qualitative methods of focus group discussions, interviews and observations. Second, there was no baseline data; the team did not have enough information on the community, the popular channels of communication and the available information sharing platforms and to have a validated ranking of concerns for particular groups of people (children, young people, men, women etc.) who live In Areas 11 and 12 of Protea Glen.

The C4D Strategy

Theoretical framework

Behaviour and social change theories have provided a conceptual frame in the situation and problem analysis with regards to COPESSA's programmes in Soweto's Protea Glen. The C4D Strategy for COPESSA is based on Theory of Change model which explains how Intended change builds in steps, starting from (1) **awareness** (community members hear and know about COPESSA) → (2) **knowledge** (community members can name two services/programmes provided by COPESSA) → (3) **attitude** (they appreciate good changes catalysed by COPESSA, do not vandalize facilities) → (4) **practice** (community members actively engaged in supporting and contributing to COPESSA's work – attending events, volunteering, seeking counselling, and learning with the shared aspiration to create safe and caring environments that prevent child abuse).

The design and implementation are inspired by the C-Planning Model, which includes five elements (enumerated, in bold): **(1) understanding the situation,** which is done by analysis, formative research, stakeholder analysis and so on, informs → the **(2) focus and design** of the the strategy and implementation plan (which is where this contribution of UNICEF C4D workshop is situated). The strategy and implementation plan proposes a number of activities and products that will inform →the process of **(3) creating**. At this stage of the process, inputs from the community will be extremely important to reflect the principles of participation and inclusiveness, and give a genuine community "voice" to the project's output. Community involvement is at the heart of community empowerment, and critical to the buy-in process that is a crucial success factor in the→**(4) implementation and monitoring** of the activities. The C-Planning Model emphasises on-going monitoring of the project during implementation, and a means to undertake course correction when necessary. The findings of on-going monitoring are useful in supporting → **(5) evaluation and re-planning** which further may inform **(1) understanding the situation.**

The Socio-Ecological Model (SEM) has been a key tool in understanding how constituents and stakeholders are engaged in or participate in COPESSA's programmes. Discussions with the various members of the community reveal that they are still grappling with the physiological and safety needs, which according to the Theory of Human motivation, are regarded basic needs. Drawing from the SEM, the proposed sequential interventions seek to effect change at individual, interpersonal and community level. This will be achieved through the application of multiple theories converging into the proposed C4D strategy.

The proposed C4D strategy's objectives are founded on C4D approaches, including:

Positive deviance: Based on the observation that in every community there are certain individuals or groups whose uncommon behaviors and strategies enable them to find better solutions to problems than their peers, while having access to the same resources and facing similar or worse challenges. The Positive Deviance approach is an asset-based, problem-solving, and community-driven approach that enables the community to discover these successful behaviors and strategies and develop a plan of action to promote their adoption by all concerned.

Diffusion of innovation: Diffusion of Innovations seeks to explain how innovations (such as a new practice or idea) are taken up in a population. Instead of focusing on persuading individuals to change, it sees change as being primarily about the evolution or "reinvention" of products and behaviours so they become better fits for the needs of individuals and groups. In Diffusion of Innovations it is not people who change, but the innovations themselves.

Health Belief Model: The HBM was spelled out in terms of four constructs representing the perceived threat and net benefits: perceived susceptibility, perceived severity, perceived benefits, and perceived barriers. These concepts were proposed as accounting for people's "readiness to act." An added concept, cues to action, would activate that readiness and stimulate overt behavior. A recent addition to the HBM is the concept of self-efficacy, or one's confidence in the ability to successfully perform an action.

Social Learning Theory: posits that people learn from one another, via observation, imitation, and modelling. The theory has often been called a bridge between behaviorist and cognitive learning theories because it encompasses attention, memory, and motivation.
People learn through observing others' behavior, attitudes, and outcomes of those behaviors. "Most human behavior is learned observationally through modelling: from observing others, one forms an idea of how new behaviors are performed, and on later occasions this coded information serves as a guide for action. Social learning theory explains human behavior in terms of continuous reciprocal interaction between cognitive, behavioral, and environmental influences.

UNICEF's Values

UNICEF works and advocates for the rights of the marginalised and vulnerable in society, especially women, youth and children. These rights are based on what a child needs to survive, grow and fulfil his/her potential. On a daily basis, in Protea Glen community, these rights are abused. "Children are subjected to varied levels of violence, abuse, neglect and discrimination."(1). The youth wallow in abject poverty and unemployment, prone to substance abuse and wanton destruction of public property. Through community-focused activities COPESSA is striving to reverse these social practices that are detrimental to the security, growth and general wellbeing of children in Protea Glen Area 11 and 12. The youth advocate for the protection and the creation of meaningful opportunities for them to participate and make their voices heard in social issues. It is also essential to empower and equip adolescents with necessary life skills, including negotiation, conflict resolution, decision-making, critical thinking, communication and other psychosocial competencies to enable them to contribute to the development of their societies. (*Human Development through Life Cycle Approach; KOICA; 2012)*

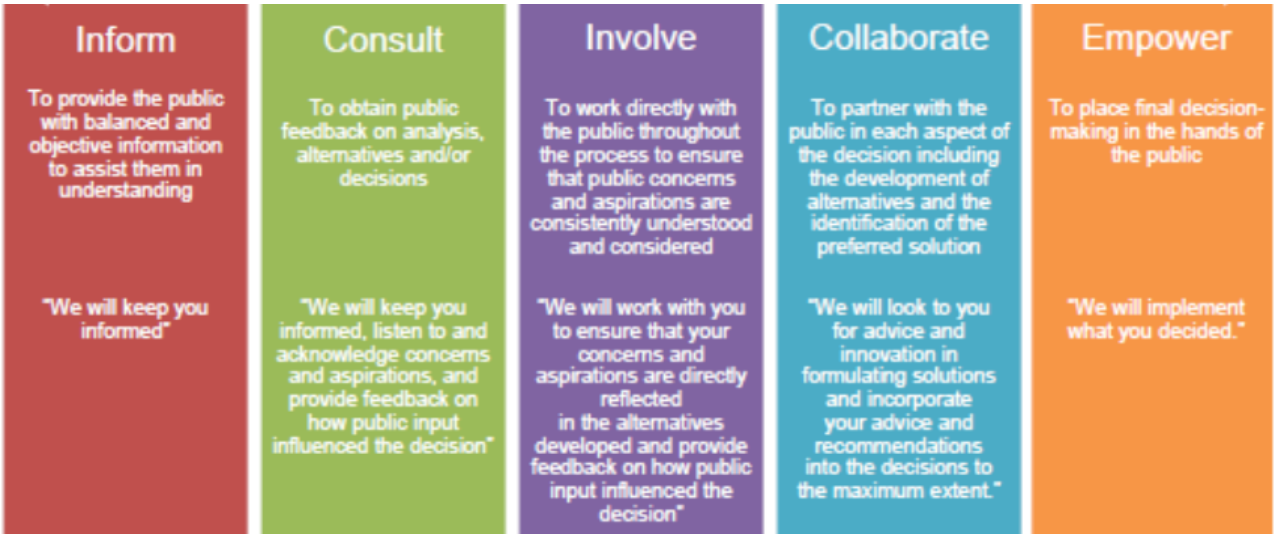
Defining "community engagement"

Before drafting and implementing a strategy, it is useful to have a common understanding of what community engagement means. The strategy assumes the following definition, provided by UNICEF Kenya: *"Community engagement is the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest, or similar situations to address issues affecting the well-being of those people. It is a powerful vehicle for bringing*

about environmental and behavioural changes that will improve the health of the community and its members. It often involves partnerships and coalitions that help mobilize resources and influence systems, change relationships among partners, and serve as catalysts for changing policies, programs, and practices.

Below illustrates five essential strategies for sustained community engagement. Embedded in these strategies is a commitment for agencies working with communities to:

- Communicate: provide access to the information that people in the community need to get involved and to benefit from sustainability.
- Participate: engage people in the community in a variety of specific activities where they are directly involved.
- Celebrate: recognise and reward the community to incentivise them for future efforts.



C4D borrows from various strategies and approaches in participatory methodologies. The following approaches, consistent with the definition of "community engagement" were included in the strategy: advocacy, coalition building, partnership with opinion leaders, social mobilisation, partnerships with local media, social media and interpersonal communication.

Implementation

This section provides suggestions on activities that could be carried out in order to achieve each of the three objectives. Expected outcomes have also been identified. In order to ensure that implementation strategies set the right targets and that time frames are appropriate, this strategy recommends that baseline data be collected. Baseline data will clearly define starting point on measurable indicators such as the target audience's existing knowledge of COPESSA, its current level of engagement with the organization and its knowledge of social issues. It is an opportunity to find out more about the target audience that will usefully inform the design of the strategy: for example, the audiences' preferred mode of giving and receiving information and prioritizing issues they believe affect them and their children the most. These elements would provide a basis of

comparison when the project is completed and evaluation is carried out. Without a baseline, it will be difficult to assess the impact of the interventions.

The baseline is the point of comparison for monitoring and evaluation data and should be conducted prior to the launch of interventions. The Baselines will explore three areas in project cycle: Change (outcomes), Secondary changes and the assumptions. A plan should be drawn for the baseline that could include:

- Review of documentation and development of data gathering tools
- Surveys
- Data gathering tools and techniques pretesting
- Organising resources (human, financial and material)
- Data collection
- Drawing up an analysis plan
- Creating a database using data management software and analysis.

Objectives, activities, and expected outcomes

Objective 1: At least 50% of people in Area 11 and 12 in Protea Glen have an awareness and knowledge about COPESSA programmes, within 12 months.

Activities:

- Conduct workshops for mothers of children attending COPESSA's after-school programmes to promote COPESSA to other mothers
- Produce and distribute flyers for community members about services and programmes offered by COPESSA, and how adults, young people, and children can get involved.
- Conduct open days in schools, park, and other public spaces on particular topics of concern to the community and COPESSA.
- Work with the community to re-design COPESSA's main sign board emphasising children and the voice of the community.
- Conduct a survey to find out how different groups in the community (parents, young people, and children) access information with a view to expanding and diversifying the ways that COPESSA can effectively reach the different audiences.

Suggestions to optimising results and expected outcomes: The better COPESSA understands the concerns and communication preferences and of its target audiences, the more likely the audience will hear COPESSA's message. The more intense the community is involved in designing the messages about COPESSA and the services it offers, the greater the opportunity for community buy-in and understanding of COPESSA's programmes. Expected outcomes of activities for Objective 1 include:

- Structured, systematic, regular, effective communication to specifically identified target audiences.
- Increased number of people exposed to COPESSA's messages
- For children and adults, COPESSA becomes a familiar neighbourhood icon where they turn to contribute their efforts in improving the life of the community.

Objective 2: One in ten community members in Areas 11 and 12 in Protea Glen are participating in COPESSA's programme within 12 months.

Activities:

- Mobilisation and election/selection of community representatives/advisors to sit on COPESSA's Board.
- Conduct twice-yearly training on community engagement for key stakeholders.
- Mobilise community members and organize monthly "imbiizo" consultations (gathering of people in the community to discuss issues and make decisions)

Suggestions to optimising results and expected outcomes: At the heart of activities to achieve Objective 2, is for people in the community to be part of the decision-making process. Consultations with opinion-leaders in the community are essential in generating interest among people to become involved. Concrete outcomes such as representation of the community in formal settings (such as before the COPESSA Board), provides a sense of visibility for the community. They need to see themselves as part of the process. Expected outcomes include:

- Community concerns/issues guide COPESSA's Board and agenda.
- Effective community participation in COPESSA's programmes.

Objective 3: Community awareness on child abuse and neglect increased by 15 per cent from the baseline in 12 months.

Activities

- Mobilisation and election of advisors to sit on COPESSA's Board.
- Organize community radio talk shows
- Organize theatre performance, sport activities and other entertainment activities with youth
- Conduct monthly training on community engagement for key stakeholders.

Suggestions to optimising results and expected outcomes: The qualitative evidence from interviews and focus groups confirmed that the residents of Protea Glen are concerned about the issues of child abuse and neglect, but they expressed powerlessness on their capacity to personally express concern and address these serious issues. Working with existing organisations and clubs is important; it is a way to leverage the community's strengths. The activities above are really aimed to empower people who want to make a difference. Expected outcomes include:

- Community members are aware and knowledgeable on issues of child abuse and neglect and are united to jointly address the issue: Community publicly declare their commitment to protect children.
- Community people/ parents participate as discussants and discussion in phone-in program on parental care and child abuse and shared their experiences through dialogues.
- Increased knowledge on the issues of child abuse and neglect among people in Protea Glan community
- Network established among like-minded organization who share experiences and dialogue among themselves and developed common understanding on the issues of child abuse and neglect

Monitoring and Evaluation

The indicators include measuring continuing participation in program activities in the absence of ongoing support. Data collection would be based on staff observation or self-report or both and may include personal and telephone interviews or email surveys. Consent for follow-up contact with the people and organisations that took part in the activities would be required. Community action impact indicators and measurement require a clear definition of the ongoing environmental (organisation, community, social) and individual change as part of the program objectives.

OBJECTIVE 1	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
At least 50 per cent of people of Area 11 and 12 in Protea Glen have an awareness and knowledge about COPESSA programmes within 12 months.	**Impact**	The percentage of people in the community of Area 11 and 12 in Protea Glen who have an awareness and knowledge about COPESSA programmes, within a 12 month period	No. of individuals who have an awareness and knowledge about COPESSA programmes, within a 12 month period **(n)** Total population in community **(d)** X 100	Knowledge, attitude & Perception (KAP) study	KAP study conducted in the community	Annual
	Outcome	The percentage of organisations that participate in health promoting activities as per communication and marketing plan The percentage of individuals who participate in health promoting activities as per communication and marketing plan	No. of organisations who participate in health promoting activities **(n)** Total no. of organisations that work in this community **(d)** X 100 No. of individuals who participate in health promoting activities **(n)** Total population in community **(d)** X 100	COPESSA Quarterly report	Attendance register NGO / CBO reports presented at at Quarterly Coordination meetings with COPESSA	Quarterly
	Output	No. of education entertainment (EE): theatre events held per month in accordance with National Health Calendar	Count	COPESSA Communication report	Register of attendance	Monthly
		No. of education entertainment (EE): sport/ recreational events held per month in accordance with National Health Calendar		COPESSA Communication report	Register of attendance	Monthly

OBJECTIVE 1	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
		No. of radio (PSA) broadcasted on community radio station per month		Community Radio monthly schedule of broadcasts.	All Media produced (AMPS_ database)	Monthly
		No. of IEC – pamphlets distributed per month as per distribution list for strategic target audiences (volunteers/ community leaders, etc)		Procurement audit of materials produced Monthly Media	Inventories of IEC material distribution	Monthly
		No. of editorials published in local newspaper per month		monitoring report	AMPS database	Monthly
	Process	Development of IEC materials – Pamphlet, videos, photo story books, personal testimonies Development of PSAs for radio broadcast Development of radio programme (1 x 10 minute drama series for weekly broadcast for 6 months) Production of weekly editorials for local newspaper publication Development and maintenance of COPESSA website	Count	Research on successful cooperative communication &marketing plans	Monthly meeting: feedback from COPESSA	Monthly

OBJECTIVE 1	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
	Input	No. of staff trained and available to implement the COPESSA Communication & Marketing plan in the community	Count	COPESSA: HR data base	Staff audits	Annual
		No. of COPESSA volunteers available to distribute IEC materials and implement health promoting events in the community.	Count			
		% of budget available to implement the advocacy and education community campaign.	Amount available for communication and marketing plan programme **(n)** / Total Budget **(d)** X100	Finance system	Annual allocation of budget	Monthly Cash Flow reports
		% of budget available for production of IEC materials	Amount within budget available for IEC material development, production & distribution / Total budget **(d)** X 100			

OBJECTIVE 2	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
One in ten community members in Areas 11 and 12 in Protea Glen are participating in COPESSA's programme within 12 months	**Impact**	The percentage of individuals who participate in community action activities facilitated by COPESSA. The percentage of organisations that participate in community communication forum meetings.	No. of individuals who participate in health promoting activities facilitated by COPESSA **(n)** Total population of Protea Glen- Area 11 & 12 **(d)** X 100 No. of organisations who participate in community communication forum meetings **(n)** Total no. of organisations who received capacity building training **(d)** X 100	COPESSA Quarterly report COPESSA Quarterly report	Attendance register NGO / CBO reports at Quarterly Coordination meetings	Quarterly Quarterly
	Outcome	No. of staff trained in participatory approaches & communication technologies No. of community members attended imbisos	Count Count	COPESSA Report Human Resource Development Plan (HRDP) Imbizo reports	Register HRD monthly reports Attendance register	Monthly Monthly
	Output	No. of COPESSA Board meetings held No. of community (informal meetings with community members) "imbisos " held	Count Count	Board report Imbizo Report	Agenda + minutes + register of attendance Attendance register	Quarterly Quarterly

OBJECTIVE 2	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
		No. of community communication forum meetings (includes Community based organisations & key role players) held. No. of training workshops held with staff on participatory approaches & communication technologies	Count Count	Community Communication Forum meeting minutes Training workshop reports	Attendance register Attendance register	Quarterly Monthly
	Process	Development of a community engagement plan which includes: - Re constitution of the COPESSA Board to include active participation of at least 3 Community members - Co – design the establishment of a community communication forum Plan - Establish an online communication platform on the COPESSA website and mobi- site on mobile telephones for community conversation	Community Engagement Plan New COPESSA Board Community Communication Forum Online platform for community conversations created on website and mobi – sites for mobile telephone communication	COPESSA: HR data base Minutes of meetings held Analysis of report	Staff audits Monthly meetings Record of inputs / hits / sms	Annual monthly Monthly

OBJECTIVE 2	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
	Input	% of budget available to implement the community engagement plan. No. of staff skilled in community participatory approaches, include computer website and mobile communication technologies Funding to appoint a technical expert (3 month contract) to train staff on participatory & communication technology approaches & expertise	Amount available for community engagement plan **(n)** Total Budget **(d)** X100 Count Amount available for appointment of consultant **(n)** Total Budget **(d)** X100 Amount available for appointment of technical expert **(n)** Total Budget for **(d)** X100	COPESSA Finance Plan HR plan Situational Analysis	Annual budget Annual Skills audit Consultant report at monthly staff meetings	Monthly Cash Flow reports Annual 3 months

OBJECTIVE 3	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
Compared with the baseline, community awareness on child abuse and neglect increased by 15 per cent in 12 months.	**Impact**	The percentage of individuals that is aware of child abuse & neglect. (Based on an opinion poll- random house to house visit response) The percentage of organisations working in collaborative programmes with COPESSA on child abuse & neglect. (based on a telephonic opinion poll)	No. of individuals who are aware of child abuse & neglect**(n)** Total population **(d)** X 100 No. of organisations working with COPESSA on child abuse & neglect. **(n)** Total no. of organisations working in the same community**(d)** X 100	Community Opinion Poll results Telephonic Opinion Poll results / report	Opinion Poll - Random House to house visits Telephonic opinion Poll	Bi annually Bi annually
	Outcome	Network of NGOs & CBOs working on child abuse & neglect established.	NGO and CBO Network	CBO / NGO network report	Agenda + Minutes of meetings	Monthly
	Outputs	No. of collaborative programmes held with other partners in the community on child abuse and neglect No. of Newspaper articles published on child abuse & neglect issues No. of Community Radio programme child abuse and neglect (PSA / drama series / Talk shows) broadcasted.	Count Count Count	Literature reviews / personal testimonies Literature reviews / personal testimonies NGO /CBO report backs at Network	List of programmes recorded AMPS database AMPS database	Monthly Monthly Monthly

OBJECTIVE 3	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
				meetings		
		No. of house to house visits to conduct health education on child abuse & neglect undertaken	Count	NGO /CBO report backs at Network meetings	Monthly reports compiled by field workers	Monthly
		No. of Rallies held in collaboration with NGO/ CBO partners	Count	NGO /CBO report backs at Network meetings	Monthly reports compiled by field workers	Monthly
		List of topics addressed in house to house visits	Count	Training report	Monthly reports compiled by field workers	Monthly
		No. of field workers trained			COPESSA HR monthly report	
	Process	Development of health education and awareness plan on child abuse and neglect	Plan	COPESSA Operational Plan	Monthly reports	monthly
		Schedule of list of topics for health education: - Rallies - Publications - IEC materials - Radio broadcast	Schedule			
		Schedule of rallies to be held in accordance with the health	Schedule			

OBJECTIVE 3	Indicator Level	Indicator	Indicator: numerator (n) / denominator (d)	Source of data	Method of collection	Frequency of collection
		calendar Training programme for field workers - NGOs/ CBOs	 Training programme			
	Input	No. of field workers available to implement opinion polls in community & with organisations	Count	COPESSA: HR data base	Staff audits	Annual
		No. of COPESSA volunteers available to provide IEC materials and health education at rallies & during house to house visits	Count	NGO/ CBO HR database	NGO/ CBO annual skills audits	Annual
		% of budget available to implement the education community campaign.	Amount available for education programme **(n)** / Total Budget for **(d)** X100			
		% of budget available for production of IEC materials	Amount within budget available for IEC / Total budget **(d)** X 100	Finance system	Monthly Cash Flow reports	Monthly

Limitations of the Strategy

The C4D strategy proposed is based on the limited situation analysis findings, undertaken in area 11 and 12 of Protea Glen, which identified the root, underlying and immediate causes of child neglect and abuse. The proposed strategy focuses on the immediate and underlying causes. It does not address the root or structural communal and institutional challenges as these will require social and high level advocacy and policy dialogue.

The proposed period for the implementation of the strategy is 12 months. It is noteworthy that the effective implementation of this strategy requires a formative study/baseline to be undertaken and its findings used to refine the proposed strategy and participatory monitoring and evaluation framework. The strategy would requires review before implementation.

Annexes

APPENDIX 1: Questions developed by the Team for Formative Research:

Check-list of Questions

Questions to raise with the community

- According to you what are the issues/concerns in your community?
    - [Is abuse/violence/neglect of children an issue in your community]
    - What community mechanism exist to help you report child abuse or violence related issue; or
    - Are you aware of organizations in your community who help address issues related to child abuse/neglect? How do these organizations address the concerns? If in your family your son/daughter/nephew or a child is abused what would you do?

- Have you heard of COPESSA and what do you think of their work?
    - How did you hear about them (radio, TV, friends,workshops, etc)?
    - What are some of the things they have done with the community?
    - How does COPESSA communicate with the community or with you as an individual?
    - How do you want to be actively engaged?

Additional questions to specific community members

Focus Group : School children

- What are the good things of living in this community?
- What needs to be done to make children be proud of this community?
- What do you need to do as children to make this community proud?
- Somebody said that this place is a safe and caring environment for children…
- How do you take care of yourselves… if criminals are here?
- What are some of the ways to ensure children are always safe
- In this community, which are the safe places for children?
- Which places are not safe for children?
- What are the things you would change about this community so children can be happy?
- How can we have ways of meeting and talking to children?
- At school do children come together and talk about their issues?

Women in the sewing group:

- How are they involved in encouraging the overall community engagement in COPESSA's programmes?
- Why are other members not involved and what can the ladies do to increase active participation and engagement?
- How does the COPESSA programme help them?

Women in the garden programme:

- What is your role in this activity? Why do you participate?
- How to involve other members of the community? Why not many are here? What about youth involvement? Why don't they come to join this income-generation opportunity?

People using parks:

- Why and when do they come to the parks?
- How does the park assist them and other members of the community to prevent child abuse?
- Are they involved in maintaining the parks?

Focus group: people at the gym:

- According to you what are the issues/concerns in Protea Glen?
- What evidence do you have that children are abused? Where do the children report?
- Which Organizations in your community help address child abuse?
- What do you know about COPESSA's work and their programmes and activities?
- How can you as members of the community engage with COPESSA and the overall community?

Partners: NGO partner/ Social worker of home-based care organization/youth organization

- How do you work with COPESSA?
- Why is their lack of engagement and participation by the Protea Glen community?
- Do you feel COPESSA's work has an impact on the community and if yes, what is it?

Questions for COPESSA

- Why does COPESSA feel that building a park will help in reducing child abuse and neglect? How did they come to this decision?
- How does COPESSA communicate with the community about the on-going activities/programs? What are the traditional communication channels COPESSA considers will be effective to reduce violence against children.
- How does COPESSA communicate with partners about the on-going activities/programs?
- What are the traditional communication channels COPESSA currently use to communicate?
- What does COPESSA consider effective communication channels to reduce violence against children in the community?
- How does COPESSA access and engage with stakeholders (community members, provincial government, partners, local business) to address child issues?
- How can the community be actively engaged with your organization?
- What is your biggest success? What do you feel are some of the challenges?