

WESTERN CAPE GOVERNMENT

PREVENTION AND EARLY

INTERVENTION STRATEGY

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PART 1:

1.1 FOREWORD

1.2 DEFINITION OF CONCEPTS

Adverse life events

Refers to adverse life events that impact on families and children can include disability, illness, child abuse, poverty, homelessness and disaster. These events can occur at any stage of life and in various contexts and settings. Adverse life events may be associated with mental health disorders and they may increase the risk of other adverse effects.

Childcare and protection

A broad term used to describe philosophies, policies, standards, programmes, guidelines and procedures to protect children from both intentional and unintentional harm.

This refers to all the activities whose primary purpose it is to prevent or respond to children who are deprived of care, who are at risk of such deprivation, or who require protection from violence, abuse, harm, neglect or exploitation.

Community

Refers to a group of people living in the same area, having a common background and sharing the same interest within the society (The White Paper for Social Welfare of 1997).

Community-based programme

Families are the building blocks of communities. Community-based programme is an approach in which communities have an active role and participate in highlighting and addressing the needs of families that matter to them. This in turn helps families to function optimally.

Collaboration

Refers to a recursive process, where two or more people or organisations work together in an intersection of common goals (White Paper for Social Welfare of 1997).

Coordination

Refers to the regulations of diverse elements into an integrated and harmonious operation; synchronisation and integration of activities, responsibilities, and command and control structures to ensure that resources are used in the most efficient way, in pursuit of the specified objectives.

Court-ordered early intervention programme

Before making an order concerning the temporary or permanent removal of a child from that child's family environment, a children's court may order –

- (a) the provincial department of social development, a designated child protection organisation, any other relevant organ of state or any other person or organisation to provide early intervention programmes in respect of the child and the family or parent or care-giver of the child if the court considers the provision of such programmes appropriate in the circumstances;
- (b) The child's family and the child to participate in a prescribed family preservation programme. Such an order must be for a specified period not exceeding six months.

Early childhood development (ECD) programmes

ECD refers to a comprehensive approach to policies and programmes for children from birth to nine years of age, with the active participation of their parents and care-givers. Its purpose is to protect a child's right to develop his or her full cognitive, emotional, social and physical potential. These programmes provide one or a collection of daily care, developmental, and early learning opportunities and support to a child from birth until the year before he/she enters formal schooling.

Early intervention

Refers to services aimed at families where there are children identified as being at risk of harm or removal into alternative care.

Evidence-based

Refers information and data that can confirm, or reject, assumptions about a policy's anticipated effectiveness and how it is best achieved. Effective programmes will show evidence of:

- Adopting a holistic approach, that is flexible, innovative and fits the needs of families and children;
- Interventions taking place within the context of skilled staff empowering families, through education and awareness, to access support services in a strength-based way;
- Targeted interventions;
- Clear goals, continuous evaluation and quality improvement; and
- Strong co-ordinated and integrated service provision.

Exploitation

Refers to the use of children with little or no consideration of their well-being, and includes all forms of slavery; forced marriage; sexual exploitation; servitude; sale of a child; the use of a child to commit a crime; prostitution; pornography; trafficking and child labour prohibited in terms of the laws of the land; and the removal of body parts.

Family

A societal group that is related by blood (kinship), adoption, foster care or the ties of marriage (civil, customary or religious), civil union or cohabitation, and goes beyond a particular physical residence (White Paper on Families, 2013).

Family preservation

Services to families that focus on family resilience in order to keep families together and strengthen families that are in crisis or at risk.

Family strengthening

Refers to the deliberate process of giving families the necessary opportunities, relationships, networks, and support from a strengths perspective that will assist them to fulfill their roles and responsibilities to family members, the community and the broader society.

Indicator

Refers to a quantitative or qualitative factor or variable that provides a simple and reliable means to measure achievement, to reflect the changes connected to an intervention and to help assess the performance of an intervention (Organisation for Economic Co-operation and Development, 2002).

Integration

Refers to a method of networking in order to improve the use of resources, to provide effective services and to reduce costs. It entails providing children with access to birth registration, health, nutrition, psychosocial care, and protection through the strengthening of the capacity of communities and improving access to basic services at the local level.

Intersectoral collaboration

Refers to different sectors working together in order to achieve a certain development goal. It can involve institutions that are dependent on others for the realization of their own objectives or those that are mutually dependent on each other for the achievement of common objectives. Achieving equity and reaching vulnerable groups are critical aspects of planning for intersectoral collaboration (Vishal Ramduny, 1998). In this strategy, integration is used to describe the relations and links that are developing across government departments, non-government organisations and communities in order to provide a comprehensive basket of services to families on a community-based level.

Prevention

Refers to an act or approach to reduce and eliminate the number of any hazardous activities, and to increase protection and safety. The Integrated Social Crime Prevention Strategy (2011) refers to the following levels of intervention, as outlined in the integrated Service Delivery Model (2005):

Primary prevention

Refers to aspects that will address risk factors in the general population known to be associated with criminal trends, such as youth unemployment or lack of economic opportunities for women. It is aimed at strengthening and building capacity and self-reliance in a child within the family by providing public education and awareness campaigns, strengthening community-based responses and family preservation, and ensuring that children remain in school.

Secondary prevention

Refers to aspects that target situations where people or neighbourhoods whose risk is significantly higher than average, such as helping youth at risk, or providing extra public health nurses for teenage mothers in disorganised communities. Services delivered at this level make use of developmental and therapeutic programmes to ensure that children who have been identified as being at risk are assisted before they require statutory services, which are more intensive.

Tertiary prevention refers to focused strategies targeting high-risk individuals, e.g. preventing recidivism by assisting with the social reintegration of offenders, as prescribed in Chapter 8 of the Children's Act 38 of 2005.

Programme

Refers to purposeful and structured set of learning experiences that lead to prevention, development and growth of individuals, families and communities. More specifically the emphasis is on programmes and services that will help to prevent abuse, neglect and exploitation and the removal of children into alternative care.

Sections 143 and 144 of the Children's Act 38 of 2005 describe the focus of prevention and early intervention programmes as:

Prevention programmes are provided to families with children in order to strengthen and build their capacity for self-reliance, to address problems that may or are bound to occur in the family environment which, if not attended to, may lead to statutory intervention.

Early intervention programmes are provided to families where there are children identified as being vulnerable or at risk of harm or of removal to alternative care. Early intervention programmes target certain individuals and interpersonal contexts (families) where there are indications of risk (PEIP Guidelines).

In terms of section 143 of the Children's Act 38 of 2005, 'families with children' are the beneficiaries of such programmes.

Psychosocial support services

Refers to a continuum of care and support and protection activities that are aimed at ensuring the social, emotional and psychological well-being of individuals, families and communities.

Psychosocial support also helps to build resilience in children.

Reunification

Refers to the process of reunifying family members with their families after being detached from the family and it involves the process of empowering and supporting the client and family, the extended family to be reunited with their family over time.

Reintegration

Refers to the process of reintegrating family members with their families or community after being detached from the family or community and it involves the process of empowering and supporting the client and family, the extended family or community to be reintegrated with their family or community over time.

Safe and supportive environment

A baby is a completely dependent being. The presence of adults who recognize and attend to their needs and the organization of a routine centered around the different stages of their development helps babies familiarize themselves with the world and have more confidence to discover and comprehend. Affection is essential for the baby to feel safe and encouraged to explore the environment, learn and gain autonomy.

Screening

Screening is an initial or preliminary consideration of the risk and protection factors of children to determine if the children are at risk of poor development and significant harm. The objective thereof is to identify vulnerable children and families through a determination of their risks, opportunities and need for services, with a view to referring them to appropriate service providers to enable their access to a suitable package of care and protection services.

Special needs children

Children who, due to their living or medical conditions, have an identified and diagnosed disorder in their development and require additional support in order to fully participate in society. Children with special needs may need greater help and attention from their parents, siblings, teachers and the community in which they live.

Strategy

Refers to a carefully devised plan of action for preventive initiatives to achieve a set of objectives, or the art of carrying out those initiatives.

PART 2:

2.1 Introduction

The problems associated with a lack of prevention and early intervention (PEI) services were recognized more than a decade ago, when the SA Law Reform Commission and the Department of Social Development began the process of reviewing the Child Care Act 74 of 1983. This Child Care Act focused almost exclusively on statutory intervention and made very little provision for PEI programmes. The greater emphasis on PEI in the new Children's Act 38 of 2005 is one of the most important shifts in child protection legislation emerging from that review.

The Provincial Department of Social Development is mandated in terms of the Children's Act 38 of 2005 to have a National and provincial strategy for the provision and funding of quality prevention and early intervention services for children and families. Resource allocation, programme landscape and child protection need to shift from predominantly reactive approaches to proactive preventative approaches. The well-being of the family is critical for the overall functioning of society and any breakdown in a family's functioning and its ability to provide care, increases the vulnerability of its members.

The South African government is committed to protecting the rights and safety of all its children and families. South Africa's ratification of the International Convention on the Rights of the Child in 1995 set in motion many of the child protection measures, research projects and legislation and instruments such as the Children's Charter of South Africa, the Sexual Offences Courts (ensuring special measures for the protection and care of children), the Office of the Family Advocate and the Children's Act 38 of 2005, all measures aimed at ensuring that children's rights are protected.

Childcare and protection is therefore the most important policy priority and key statutory mandate of all Government Departments. The effectiveness of Child Protection should also

place the highest priority on prevention and early intervention to ensure that children are free from abuse, neglect and exploitation.

2.2 METHODOLOGY

This PEI Strategy was developed through an extensive consultation and research process.

This process included:

2.2.1 A Comprehensive Review of Literature and Policies

Review of both local and international literature was conducted to gather data on current practices and models in prevention and early intervention services. The literature review undertaken gave support to the development of the strategy, which covered the effectiveness as well as impact of prevention and early intervention services.

To solicit more data, studies documented as evidence-based programmes were also consulted.

2.2.2 An Analysis of the Legislative Framework

An analysis of data that was sourced out from various references and frameworks was conducted. This covered legislation relating to children and families.

2.2.3 Consultations with Key Stakeholders

Extensive consultations were held with key internal and external stakeholders through individual interviews, and provincial seminar. A very successful provincial PEI seminar was conducted on the 25 – 27 September 2019 aimed at driving forward the development of Provincial Strategy and allowing exchanges of views between various government departments and members of child protection organisations on aspects of legislation and service delivery.

The main themes of that seminar were as follows :

- Lack of provincial PEI strategy to ensure that all stakeholders are working towards common goals.
- Lack of co-ordination mechanism between the relevant stakeholders to ensure that existing PEI programmes are standardized and achieve the intended outcomes and results.

- Lack of framework to strengthen the base of the child protection system and reduce the demand for statutory interventions.

All the Regions and Programmes of the Department of Social Development were represented. Other institutions that attended included Dept of Health, Dept of Education, ISS, Office of the Premier, ECD, Drop-In Centres, Shelters, and various designated child protection organisations.

Child participation formed an integral part of the process of drafting a Prevention and Early Intervention strategy in the Western Cape. The Children and Families Directorate engaged with participants, age 14 - 17 during a Children's Consultative Workshop facilitated by the Department of the Premier in collaboration with DSD on 9 November 2019. The purpose of the engagement was to reflect on the 25 years of South Africa's Children Rights and elicit contributions from the children, on what the key issues are pertaining to prevention and early intervention services.

2.3 Situational Analysis

In mid-2018, South Africa's total population was estimated at 57.7 million people,² of whom 19.7 million were children under 18 years. Children therefore make up 34% of the total population. The distribution of children across provinces is slightly different to that of adults, with a greater share of children living in provinces with large rural populations.

There have also been striking changes in other provincial child populations since 2002. The number of children living in Western Cape has risen by 22%.

Stats SA 2019 Mid-year Population estimates show that 700 000 people are projected to be added to the Western Cape population over the next five years, increasing the provincial population to 7.45 million people by 2024.

The Western Cape is estimated to have about 1.9 million households with an average household size of 3.6 persons. The unemployment rate is 21.5%, which implies that one in five persons is unemployed. Consequently, children and families remain at risk.

An estimated 2 073 903 children between the ages of 0 and 17 years live in the Western Cape. Research indicates a high incidence of child maltreatment, which is related to the high incidence of substance abuse (including alcohol) and violence – general, and importantly, gender-based.

According to the SAPS (2018), the Western Cape reported the highest number of child murders for 2017/2018 – 279 cases. This was further supported by an internal analysis of child murder in the Western Cape for the period 2013–2018 that revealed an upward trend, with an increase of 23.5% over the five-year period (SAPS, 2018).

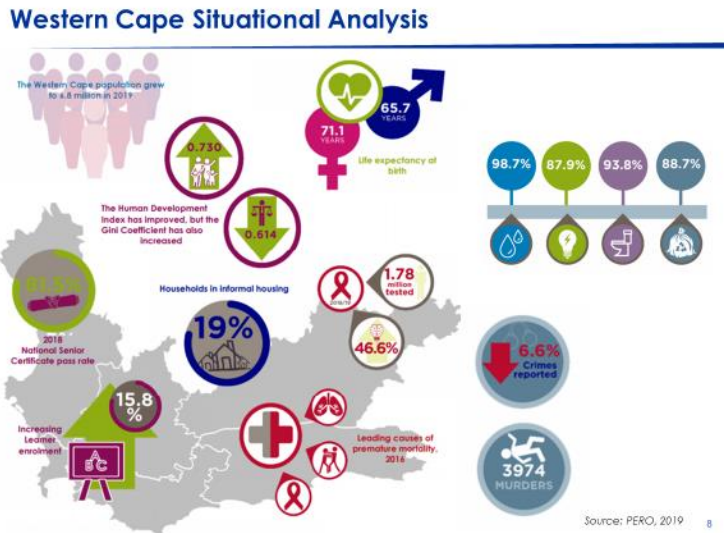
ECD services have a big impact on school outcomes through the rendering of an essential package of ECD services which comprise the following components: maternal and child health services; nutritional support; support for primary caregivers; social services and stimulation for early learning.

Primary Health Care services in targeted and prioritised early childhood development centres continue to support child development through screening and using the Road to Health Booklet and home visits to vulnerable and high-risk families.

The incidence of social crime negatively impacts on the Province's social and economic well-being; and the increase in violent crimes (often drug-related) is of concern. This necessitates a focus on crime prevention. The Province has the highest number of cases of sexual assault.

The Poverty Trends released by Stats SA in 2017 shows that the poverty headcount in the Western Cape increased from 17% in 2011 to 21.3% in 2015. Using the 2016 Community Survey as basis, it is expected that the number of households experiencing food insecurity is likely to grow by approximately 11% from 2019 to 2023. Currently about 13.2% of households in the Province experience food insecurity.

The situational analysis can be summarised as follows:



Social services are rendered through an extensive network by the DSD from six regional offices with 45 local offices including various service points. The Department has over 2 000 contracts with NPO partners, of which 115 render designated child protection services.

The Department’s budget remains constrained and this is expected to continue. There is an increase in the demand for services resulting from the increasing levels of poverty and social pathology in the Province.

2.4 Legislative Framework

The Prevention and Early Intervention Strategy will be aligned to the following legislative and strategic mandates:

- **Provincial Strategic Context 2019-2024**

Five (5) Western Cape Government Vision-Inspired Priorities will underpin service delivery goals during the 2019-2024 Provincial strategic planning period. Of particular importance for this Department is VIP 1: “Safe and Cohesive Communities” and VIP 3: “Empowering People”

Provincial Strategic Context, 2019-2024



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Resilient families, children that are well care for and parents, care givers and/or guardians who have efficient access to the support services are the bedrock of an empowered people. Strong families improve the life chances of individual family members, which aligns to VIP 3: “Empowering People” and Focus Area 1: “Children and Families”.

- **Annual Performance Plan**

In 2020/2021 the Families Programme will focus on making provision for essential community-based prevention and early intervention services, family promotion and preservation services, therapeutic programmes, re-integration and mediation services. It will also pilot and strengthen the integrated community-based Prevention and Early Intervention (PEI) model (this includes the ISIBINDI, Drop-In Centres, eye-on-the-Child, After School Partial Care (ASC), develop guidelines for the designation of PEI organisations and the registration of PEI programmes and, strengthen reintegration services.

This will be achieved by strengthening evidence-based family interventions and collaboration and coordination across departments and court-ordered early intervention programmes.

- **The Children’s Act 38 of 2005**

In recognition of the paradigm shift that is required in policy and practice, section 145(1) of the Children’s Act stipulates that “*The Minister, after consultation with interested persons and the Ministers of Education, Finance, Health, Provincial and Local Government and Transport, must*

include in the departmental strategy a comprehensive national strategy aimed at securing the provision of prevention and early intervention programmes to families, parents, care-givers and children across the Republic". A comprehensive National Strategic Framework (2013/14 – 2018/19) was developed by the National Department of Social Development.

Furthermore, *"The MEC for Social Development **must** within the national strategy provide for a **provincial** strategy aimed at the provision of properly resourced, co-ordinated and managed prevention and early intervention programmes".* The development of this provincial PEI strategy is therefore in fulfilment of the requirements of section 145 of the Children's Act.

The greater emphasis on prevention and early intervention in the Children's Act 38 of 2005 is an important shift towards empowering parents, families and caregivers as duty bearers for the care, development and protection of their children. The Government is duty-bound to provide an appropriate package of services to address risks and maximize the care and protection of all children. It is recognized that vulnerable families will need targeted services to overcome challenges to provide care and protection and prevent children from falling prey to risks. Responsive services apply where children fall through the public safety nets, have no parents, families, caregivers, or guardians and are exposed to abuse, deliberate neglect and exploitation. Child participation is mandatory in decisions that affect them.

Services must meet the norms and standards as set out in the Children's Act 38 of 2005.

In terms of the Child Protection Policy (2019) prevention and early intervention programmes pursue the following strategies:

- a life-course approach to the provision of services, using differentiated age-appropriate early childhood development (ECD) and community-based delivery platforms;
- strengthening and empowering families, parents and other caregivers;
- expanding and diversifying partnerships and scaling up targeted community-based prevention and early intervention services for vulnerable children;
- strengthened co-ordinated and integrated multi-disciplinary planning and delivery of services; and
- law reform to remedy gaps in the child protection system.

PART 3: THE PREVENTION AND EARLY INTERVENTION STRATEGY

3.1 Scope of applicability

This strategy applies to all individuals, entities, government departments, municipalities, and organizations that provide PEI services and programmes, or support functions.

3.2 Vision

A Province in which communities work together to empower families and communities to raise children in safe and nurturing environments to ensure that they are safe and contributing to their own safety through integrated child protection systems.

Mantra - Let us work together NOW and leave no child behind.

3.3 Mission

The provision of a comprehensive network of social development services that enables and empowers the poor, the vulnerable and those with special needs.

3.4 Strategic Objectives

There are seven (7) strategic objectives to address the prevention of child abuse and exploitation through prevention and early intervention programmes. Each strategic objective relates to one element of the child protection system, and each has an associated outcome (Guidelines on PEI services, 2019).

PRIORITIES	STRATEGIC OBJECTIVES	OUTCOMES	OUTPUTS
Legislation, policies, regulations, norms and standards, strategies and plans	Review the legislative framework that prioritizes prevention and early intervention as well as adequate resource allocation.	Data is continuously collected to inform the periodic review of policy and legislative framework that governs and prioritizes prevention and early intervention services for children as well as adequate resource allocation.	<p>Policies and plans influenced by evidence gathered through Provincial Profiles.</p> <p>Build strong partnerships with researchers and academic institutions to build evidence-based data.</p> <p>Services to families comply with legislation and policies.</p>
Leadership, co-ordination and co-operation	To ensure effective leadership, co-ordination and co-operation between spheres of Government and between various departments, and with the NPO sector for securing the implementation of integrated and resource-efficient prevention and early intervention programmes.	All role-players responsible for prevention and early intervention work together to implement integrated and resource efficient PEI programmes.	<p>Formalised partnerships between all role-players responsible for prevention and early intervention programmes.</p> <p>Updated provincial policy on the funding of NGOs.</p>
Prevention and early intervention programmes and service delivery mechanisms	To facilitate a gradual shift from remedial, curative social services and programmes towards the provision of more developmental integrated prevention and early intervention programmes targeted at children, families, parents and caregivers.	Systems for the provision of well-coordinated, standardized PEI programmes with appropriate service delivery mechanisms are in place.	<p>A database of PEI programmes on SDA, Regional and Provincial level.</p> <p>Protocols for referral and feedback reporting systems between service providers developed.</p> <p>Align spread of services to the Strategic Plan and Western Cape Safety Plan.</p>

			Integrated development services improve functioning and promote family preservation
Adequate and skilled workforce	To secure provision of an adequate child protection workforce that is skilled in prevention and early intervention.	Workforce skilled and empowered to render prevention and early intervention services.	PEI skills training incorporated into Provincial Capacity Building Implementation Plans.
Evidence-based planning	To facilitate the design and continuous improvement of strategies and plans focusing on PEI that is based on evidence gathered through research and the implementation of a monitoring and evaluation system.	Strategies and plans focusing on PEI are achieving the desired impact.	M&E Framework for the Province makes provision for PEI services. Evidence informs APP and indicators are aligned.
Communication, education and mobilisation for social change	To design and implement a communication strategy which supports child safety and well-being, and which informs stakeholders of child rights and prevention and early intervention programmes.	Greater public awareness, including awareness of children, of child rights and prevention and early intervention and increased behaviours and attitudes supportive of child safety and well-being.	Communication plan accommodates initiatives to prevent the abuse and exploitation of children. Explore the role of the media (also social media) in influencing attitudes and community values that affect the safety of children.
Budget & resources	To allocate sufficient budget to prevention and early intervention programmes at provincial level, to spend allocations efficiently, and to transfer adequate budget to NGOs timeously, so as to ensure the availability of prevention and early	Adequately funded prevention and early intervention programmes for provincial and regional DSD SDAs, and the NGO sector; and funding is efficiently and timeously distributed.	Funding model aligned to strengthening prevention and early intervention services. Dedicated budget allocation for sustainable prevention and early intervention programmes.

	intervention programmes for all children in the province.		
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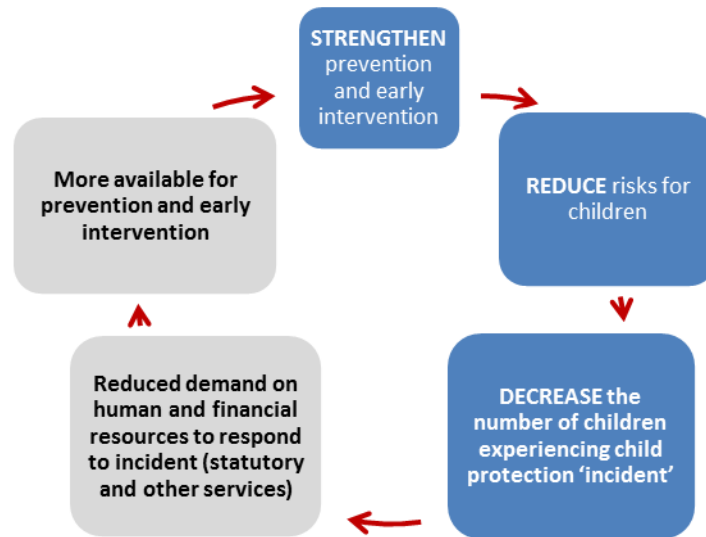
3.5 Principles for Implementation

The following guiding principles apply to this Strategy:

- Evidence-based
- Data-driven implementation
- Flexible and adaptive implementation
- Person-centred
- Whole of society approach
- Area-based approaches
- Trauma-informed implementation
- Gender-sensitivity in implementation
- Child participation
- Family preservation
- Targeted approaches
- Community-based
- Inter-sectoral collaboration
- Sustainability

3.6 The Pyramid Reversal

The focus of this Strategy is on strengthening prevention and early intervention efforts so as to incrementally strengthen child protection and reduce the demand for statutory interventions. This is a transformative strategy and establishes the building blocks for the gradual shift to increased PEIP.



3.7 Whole of Society Approach

The Whole of Society Approach (WoSA) envisions safe, socially connected, resilient and empowered citizens and communities with equal access to social services and opportunities. The WC Government WoSA to Socio-Economic Development (2018) presents a framework for integrated and innovative social development in a phased approach.

3.8 Developmental Approach

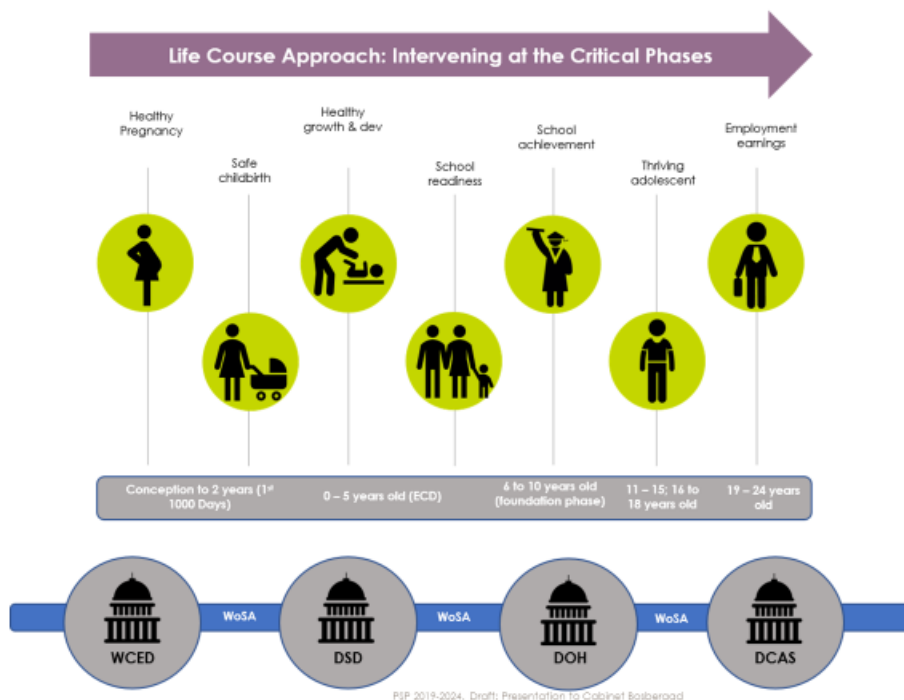
The developmental approach defines childcare and protection as the full continuum of care, support and protection that all children need for their well-being, to develop and to thrive to their full potential.

The approach is family-focused, and child centered. It recognizes that parents and family members, or alternative legal guardians, are the primary duty-bearers for the care, development and protection of their children, and that, furthermore, all parents and families

have the capacity and desire to provide the care and protection their children need to develop to their full potential.

3.9 Life-course Approach

Reducing and preventing abuse and exploitation of children and their later removal, calls for a holistic life-course approach, which recognizes and responds to the different needs of individuals as they progress through their life trajectories.



Prioritised and co-ordinated integrated interventions which, it is anticipated, will have the most effective impact on building resilience of households and communities to crime and trauma include:

- The Department of Health has been offering a comprehensive 1st 1 000 Days Programme specifically to mothers and care-givers at risk.
- The Western Cape Education Department has adopted a “Transform to Perform” Strategy aimed at promoting a values-driven organisation to positively impact on the motivation levels and mindsets of staff, learners and educators. This is supported by the Western Cape Departments of the Premier and Community Safety.

- The Western Cape Department of Social Development will lead interventions aimed at supporting families at risk to use alternatives to violence, reduce substance/alcohol abuse and address gender-based violence through evidence-based parenting programmes and other interventions.
- The Western Cape Departments of Social Development, Cultural Affairs and Sport, Community Safety and the Chrysalis Academy will increase support to youths at risk. Prevention programmes are multi-sectoral and it is envisaged that the Safety Cabinet (chaired by the Premier) will be the formal forum to oversee and enhance collaboration across the government on the interventions across the life-course.

3.10 Ecological approach

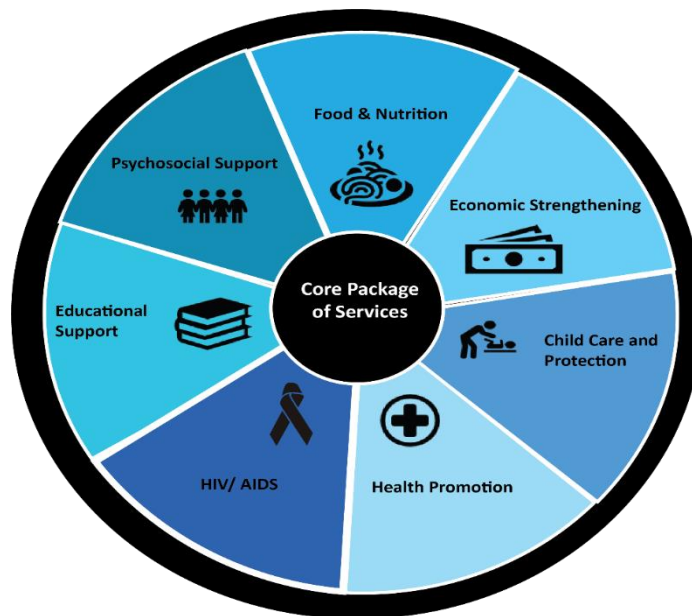
This approach holds that a child's circumstances may be seen in the context of two sets of factors, namely risk factors and protective factors. A risk factor may be defined as a "factor that increases the likelihood of a future negative outcome for a child. A protective factor works at the opposite end, and relates to factors in the life of the child that operate to decrease the likelihood of these negative outcomes (such as child behavioural difficulties, physical abuse of children, and school failure). Protective factors promote resilience in children and families. Central to prevention and early intervention is to recognize that problems that may appear to relate to a specific child or family are influenced by factors outside of these spheres, including the community and society within which that child and family operate.

3.11 Core Basket of Services

The aim of the core packages for community-based prevention and early intervention services is to provide continuous support through the life-course approach, ensuring that children are safe and develop to their full potential – and that no child is left behind.

Responding to the needs of vulnerable children calls for a defined and universal package of prevention and early intervention programmes across the life-course, that are evidence-based, available in communities to children, and are effectively implemented by service providers. The core package of services focuses on seven (7) interrelated service areas that contain the

evidence-based interventions in each domain to improve the life of the child and support holistic development:



- **Food and nutrition**

The focus in this area is to provide a safety net for children within their communities where they can access food when the food provision in their family is insecure or where the child is at risk of malnutrition.

- **Economic strengthening**

This area aims at supporting and increasing the economic base of households by extending the economic base of families to meet their basic needs.

- **Child care and protection**

The core package of services related to child care and protection aims to create enabling environments within the home, and community and accessible services that will support parents to look after their children. Efficient and effective referral systems and follow-up services should be in place for vulnerable children.

- **Health promotion**

The area aims at observing, early identification, documenting, and tracking a child's basic health and immunisation information to enable children and adolescents to access

health care services to ensure families are educated on health and hygiene matters. Strengthening support is offered to families caring for children with special needs.

- **HIV AIDS**

PEI services, together with Department of Health, facilitate early identification, screening, tracking and linking of children at risk with support services.

- **Educational support**

Education is key and this area aims at strengthening the timely ECD/school enrolment of children, with improved focus on children with special needs.

- **Psychosocial support**

This area aims at the provision of a continuum of care and support and protection activities that are aimed at ensuring the social, emotional and psychological well-being of individuals, families and communities. It sets out the pathways to mental health and emotional well-being into adulthood.

PART 4: Implementing the Prevention and Early Intervention Strategy

4.1 Implementation Plan

OUTPUT	OUTPUT INDICATOR	BASELINE	TARGET	ACTIVITY	SUB-ACTIVITY	RESPONSIBILITY
1. Legislation, policies and programmes related to PEI are updated according to the 2014 review process	Policy and legislative recommendations made by the province at national level		Province provides input and makes recommendations on policy and legislation	To participate in national policy and legislative review processes	Conduct consultative sessions with stakeholders on PEIP to develop recommendations	WESTERN CAPE PROVINCIAL DSD
					Provincial consultation to inform diagnostic review of PEI legislation, policies and programmes	WESTERN CAPE PROVINCIAL DSD in partnership with other Provincial departments and NGOs
					Provincial consultation to inform diagnostic review of PEI legislation, policies and programmes	WESTERN CAPE PROVINCIAL DSD in partnership with other Provincial departments and NGOs
					Document the gaps and make recommendations for amendments to the	WESTERN CAPE PROVINCIAL DSD in partnership with

					relevant legislation, policies and programmes	other Provincial departments and NGOs
Provincial profile on demand and supply of PEI services is developed	Updated provincial profile on PEI	Information on PEI services is available but not consolidated	Updated provincial profile based on current data	Conduct regional workshops on profiling tools	Collate data needed on PEI provincial profile (from Regional profile)	WESTERN CAPE PROVINCIAL DSD in partnership with other Provincial departments and NGOs
					Bring Regional DSD offices and stakeholders together at provincial level to complete profile	WESTERN CAPE PROVINCIAL DSD in partnership with other Provincial departments and NGOs
					Distribute provincial profile for PEI to stakeholders	WESTERN CAPE PROVINCIAL DSD in partnership with other Provincial departments and NGOs
Regional profile on demand and supply for PEI services developed	Regional profile on demand and supply for PEI services available	Information available but not consolidated	Provincial profile based on completed Regional profiles available	Collate Regional profiles for provincial profiling	Develop a tool for Regional profiles on PEI services Information on PEIP profile to be distributed to NGOs and other stakeholders	WESTERN CAPE PROVINCIAL DSD in consultation with DSD regional offices

						DSD Regional Offices in consultation with SDA Offices
					Conduct capacity development on the tool for district profiles for data collection, planning, funding and monitoring PEI	WESTERN CAPE PROVINCIAL DSD in consultation with DSD Regional Offices, NPO and other stakeholders
					Collate and consolidate data on Regional PEI profiles Information disseminated to all stakeholders	WESTERN CAPE PROVINCIAL DSD in consultation with Regional DSD offices WESTERN CAPE PROVINCIAL DSD in consultation with DSD Regional Offices, NPO and other stakeholders
Completed Provincial PEI strategy and implementation plan	Provincial and implementation plan developed.	Zero strategy and plan	Strategy and implementation plan developed.	Co-ordinate completion and costing of provincial strategy and implementation plan.	Provincial consultation within DSD and Seminar with other stakeholders (departments and NGOs) on: a) Western Cape provincial PEI strategy	WESTERN CAPE PROVINCIAL DSD in consultation with Regional DSD offices

					Costed implementation plan for provincial PEI strategy	WESTERN CAPE PROVINCIAL DSD in consultation with DSD Regional Offices, NPO, government departments and other stakeholders
					Two-day provincial sessions to assist with development and costing of Provincial PEI strategy	WESTERN CAPE PROVINCIAL DSD in consultation with provincial departments and NGOs.
2. Co-ordinate consultation on the strategy to promote integration and collaboration amongst stakeholders	Co-ordinated PEIP services	PEIP services currently not co-ordinated		Communicate the PEIP strategy to stakeholders (amongst departments and NGOs)	Circulate the draft PEIP Strategy to stakeholders for input and comments	WESTERN CAPE PROVINCIAL DSD in consultation with Regional DSD offices
					Consultative workshop with relevant stakeholders Develop MOUs to be signed by the relevant stakeholders	WESTERN CAPE PROVINCIAL DSD in consultation with regional DSD offices, provincial government departments and NGOs

Formalised partnerships/ agreements between all role-players responsible for prevention and early intervention implementation	Formal/ written agreements (MOUs) with roles and responsibilities for all role-players available	No written agreements to clarify the roles and responsibilities for PEI role-players available	Formal agreements (MOUs) are signed between PEI role-players	Facilitate signing of MOUs between key departments, i.e. DOH, WCED, SAPS and with NGOs at provincial level	DSD signs MOUs with and between other provincial departments and NPOs	WESTERN CAPE PROVINCIAL DSD in consultation with Regional DSD offices
3. A database of PEI programmes available covering provincial, regional and SDA level	Database of PEI programmes is established and accessible at provincial, Regional and local level	There is no comprehensive database of service providers at provincial, regional or local level	Databases are updated on an annual basis and being used by DSD & stakeholders at provincial, regional and local level to inform planning of PEI programmes	Develop and maintain a database of provincial, regional and local prevention and early intervention programmes	Review database of available PEIP at local and regional level for all service providers	WESTERN CAPE PROVINCIAL DSD
					Print and distribute updated PEIP database annually	WESTERN CAPE PROVINCIAL DSD

					Intensify implementation of integrated community based PEI services, parenting enrichment programmes, family preservation services (including first 1000 days), Isibindi, eye on the child, Drop in centres, after-care programmes	WESTERN CAPE PROVINCIAL DSD
Regions are supported to implement guidelines in rendering PEIP services	Regional PEIPs implemented according to guidelines	Guidelines available for PEIP	Regions are able to undertake the transition from curative to preventative programmes which are based on clear guidelines	Oversee implementation of guidelines for PEIP	Capacity development and distribution of guidelines	WESTERN CAPE PROVINCIAL DSD
					Monitor use of the Guidelines	WESTERN CAPE PROVINCIAL DSD
Best practice models for prevention and early intervention programmes	Number of best practice models monitored, evaluated and costed	Good practice models of intervention have been	One best practice model per district identified for up-scaling purposes	Pilot best practice	Identify, conduct best assessment programmes	WESTERN CAPE PROVINCIAL DSD

piloted, monitored, evaluated and costed		identified by the PEIP profiling			Cost, fund and implement recommended best programmes	
Protocols for referral and feedback reporting systems between service providers developed	Protocols for referral systems and feedback reporting between service providers in place	Draft national and provincial protocol documents available, but not in line with the Children's Act 38/2005	Clear provincial and regional referral and follow-up protocols and procedures are in place, implemented and monitored	Develop protocols for referral, feedback reporting and monitoring and evaluate the application of it on service delivery	Conduct SWOT analysis on existing protocols, feedback reporting and case monitoring systems and revise accordingly Review / develop provincial protocol document Train all relevant stakeholders in the referral and reporting protocol (Combine with M&E training)	WESTERN CAPE PROVINCIAL DSD
4. Human Resource Framework and plans for adequate PEI	The extent to which the HR Framework clearly specifies the following: - roles, functions and responsibilities	There are a number of processes underway which review HR-	HR Framework and overarching HR plans in place which clearly assure an adequate PEI workforce	Implement HR Framework and overarching HR plans which clearly assure an	Skills audit of all Social Service Professionals amongst stakeholders rendering PEI services	WESTERN CAPE PROVINCIAL DSD and Regional DSD offices

<p>workforce developed</p>	<p>of multi-disciplinary teams to guide province in its implementation at District and Local level</p> <p>- deployment strategy including task-shifting to ensure service supply matches the demand</p> <p>Recommendations to higher/further education institutions and SACSSP</p> <p>Quality assurance to monitor development of PEI work-force</p>	<p>related matters, and they need to be assessed and influenced for their inclusion of PEI</p>		<p>adequate PEI workforce</p>	<p>Map Provincial, Regional and Local HR profiles to assess current service offering and compare this to areas of need</p>	
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	Care-giver wellness programme					
					<p>Develop and implement plan for task-shifting clarifying the delegation of specific roles (traditionally undertaken by social workers) to social service practitioners and administrators as appropriate</p> <p>Make recommendations to SACSSP and higher education and training institutions for greater emphasis on PEI</p>	Regional DSD offices and NGOs
					Develop and Implement a plan to include care-giver wellness programmes into departmental and NGO Health and Wellness programmes	DSD in partnership with NGOs
					Evaluate the impact of implementation of human	DSD at all levels .

					resource framework and plans for PEI workforce on the child protection system	
5. PEI monitoring and evaluation framework is developed for province	Provincial monitoring and evaluation systems & tools are available	Tools are available but not standardised and integrated	District and local services offices report using the same tools/formats	Integrate the PEI indicators into departmental M&E framework	<p>Revise departmental framework to incorporate PEI indicators and standardise the tools</p> <p>Train regions and SDA staff to use the tools and understand evidence-based planning</p> <p>Allocate/employ data capturers at service office level and develop their capacity</p>	<p>Provincial DSD</p> <p>Provincial and Regional DSD</p> <p>Regional DSD</p>
Research report on PEI services – accessibility, reach, impact	Provincial research report on PEI	No Research/Evaluation reports on PEI programmes are available	Provincial research report on PEI programmes based on one research report per region	Conduct research on selected PEI services	<p>Develop research priorities and ToR</p> <p>Commission the research</p> <p>Monitor the progress of research</p>	WESTERN CAPE PROVINCIAL DSD in consultation with Regional DSD offices and Research institutions

					Dissemination	
Implement-tation and strategic plans are updated based on collected evidence and APPs are aligned to this				To review implemen-tation plan every three years. To review strategy every five years.		DSD in partnership with other stakeholders
6. A Provincial strategy on advocacy, information, education and mobilisation campaign plan for the prevention of child abuse, neglect and exploitation implemented	Number of promotional materials distributed	None	Awareness campaign at regional and local sphere	Develop and implement Provincial communica-tion strategy on PEIP	Compile, print and distribute information targeting communities; care-givers; families and children Co-ordinate implementation of awareness campaigns on prevention and early intervention services in regions and local offices Monitor and evaluate the implementation of	DSD in partnership with other stakeholders

					provincial communication strategy	
					Evaluate the implementation of provincial communication strategy	
7. Dedicated budget allocation for PEIP provided by provincial DSDs	Dedicated budgets for PEIP in region and other stake holders	Dedicated budget for PEIP is available	Budget dedicated for the implementation of PEIP	Utilise the existing budget model for allocation of funds to PEIP on an annual basis	<p>Collect data from other directorates to determine how much is dedicated to prevention and early intervention services</p> <p>Analyse budget allocation and expenditure for funds dedicated to PEIP on an annual basis</p> <p>Budget allocation done according to areas where there is greatest demand for PEI, and PEI service gaps (e.g. Isibindi)</p>	Provincial DSD in partnership with other stakeholders

4.2 Monitoring and Evaluation

In order to know if we are reaching our goals and making a difference, we need to measure what we do. Indicators help us to do so. Indicators also help us to set targets, allocate resources, monitor progress and ensure accountability. Furthermore, indicator systems which are embedded in the administrative practices of the relevant government departments and service providers enable us to track how we are doing with respect to the desired outcomes for PEIP.

Monitoring and evaluation will be conducted on a continuous basis to ensure that quality and effective interventions and services are being rendered to families and children and their caregivers.

Monitoring is ongoing and concerned with the collection and analysis of information as a project progresses. Evaluation in turn provides factual information about the comparison between what was intended and what has been accomplished, as well as how it has been accomplished. Both are necessary as they help you learn from what you are doing and how you are doing it because you can:

- Review progress
- Identify risks or problems early on
- Take corrective action that can improve the likelihood of achieving objectives

Monitoring and evaluation in respect of the strategy will be conducted on three levels:

- Internal: relevant departments must monitor and evaluate their own progress in respect of their own plans
- External: relevant departments will monitor the programmes and progress of service providers who receive transfer money, as well as monitor for compliance with minimum norms and standards
- A joint representative mechanism will be put in place, with overall responsibility for reporting on progress regarding the successful implementation of the strategy

In terms of reporting requirements, there will, at a minimum, be dual accountability and progress reports will have to be submitted as determined by departmental prescripts.

4.3 Communication Strategy

A joint communication strategy will be developed and implemented. This will include, but not be limited to:

- ensuring that all staff in all departments know and understand the strategy and, commit to achieving its goals and objectives;
- presenting the strategy to the relevant Cabinet committee and the applicable standing committees;
- obtaining Cabinet approval for the strategy;
- ensuring that communities, service delivery partners and other relevant stakeholders are aware of the strategy, contribute to it and support it;
- widespread dissemination of the finalised strategy; and
- communication must be language and literacy sensitive.

4.4 Research

The following areas require investigation and research:

- **Mapping** the coverage of PEI service provisioning and gap analysis: The DSD is currently mapping all social service delivery points and service delivery areas. This will allow the DSD to do a gap analysis between current service delivery and areas of highest need/priority. In short, it will assist the DSD to do proper and informed spatial targeting, including matching service delivery to areas with the highest rates of child abuse. Included in this is the identification of gaps in service provision for young children with disabilities.
- **Costing** the provisioning of minimum quality/inclusive PEI services in the province.

- **Impact Analysis** of PEI Programmes: The purpose will be to determine the impact of existing PEI programmes aligned to the evidence-based criteria.

PART 5: CONCLUSIONS AND RECOMMENDATIONS

Prevention and early intervention programmes are designed to support and sustain healthy families, and to prevent the removal of children from their home environments and communities. Responding to the needs of vulnerable families calls for leadership and an available universal package of prevention and early intervention programmes across the continuum that are evidence-based, available to communities and effectively implemented within the limitations of the Regulations.

DICs, as legislated in the Children's Act, are identified and earmarked to play a critical role in the field of child protection. Drop-in Centres are intended to be a child's first port of entry into the child protection system. As a centre of implementation, these centres are the Department of Social Development's footprint in communities where families lack the means to provide proper shelter, food and other basic necessities of life to their children, and for children with disabilities.

It is at this level that the Department must integrate theory with practice to ensure that families and children at risk receive effective and responsive services. It is only when prevention and early intervention have failed that these families and children should reach statutory services. Creating this safety net of community-based services will positively impact on the workload in statutory services.

The basket of services was defined and when aligned to the norms and standards will outline what services should be sought in communities as part of the business planning process.

The system put in place by the Department of Health with the 1000 days project and the Road to Health, together with extensive ECD services, creates an opportunity for collaboration and integration of data systems that will strengthen service delivery on community-based level.

It is recommended that:

1. The development and piloting of the integrated community-based prevention and early intervention services model be consulted and drafted per district to sustain service delivery on that level.
2. Strengthen court-ordered early intervention services.
3. Designation of prevention and early intervention programmes be implemented in the new call for proposals (2021-2024).
4. The costing of prevention and early intervention programmes be discussed once treasury guidelines are available.
5. The development of an indicator be piloted in 2021-2022.

DR LESLEY CORRIE

DIRECTOR: CHILDREN AND FAMILIES

DATE: 30 MARCH 2021

ANNEXURE A

ACRONYMS AND ABBREVIATIONS

APP	Annual Performance Plan
CANE	Child Abuse, Neglect and Exploitation
CBO	Community-Based Organisation
CSO	Civil Society Organisations
DCPO	Designated Child Protection Organisation
DoE	Department of Education
DoH	Department of Health
DoJ	Department of Justice
DSD	Department of Social Development
ECD	Early Childhood Development
HOD	Head of Department
M&E	Monitoring and Evaluation
NGO	Non-Governmental Organisation
NPO	Non-Profit Organisation
OVC	Orphans and Vulnerable Children
PEI	Prevention and Early Intervention
PEIP	Prevention and Early Intervention Programmes
PFMA	Public Service Management Act
SACSSP	South African Council for Social Service Professions
SDA	Service Delivery Areas
SAPS	South African Police Service
TPA	Transfer Payment Agreement
UN	United Nations
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WCPEI	Western Cape Prevention and Early Intervention

ANNEXURE B

LEGISLATIVE AND POLICY FRAMEWORK

The legislative and policy framework informing this Strategy includes the following:

1.1 The Constitution of the Republic of South Africa, 108 of 1996

The Constitution provides for the protection and promotion of the human rights of all citizens in the Republic of South Africa. Section 28(1) deals particularly with the rights of children and young people.

1.2 United Nations Convention on the Rights of the Child, 1989

The Convention is the most comprehensive international document on the rights of children. It spells out a wide range of rights for all children including the right to protection, development, survival and participation. These rights are embodied in the African Charter on the Rights and Welfare of the Child as well as the South African Constitution.

1.3 The Children's Act 38 of 2005

The Children's Act seeks to protect children from abuse, neglect, maltreatment, trafficking and exploitation.

1.4 National Child Care and Protection Policy (2019)

1.5 White Paper on Families (2012)

1.6 The National Anti-Gangsterism Strategy (2016)

1.7 Integrated social crime prevention strategy (2011)

1.8 Western Cape Safety Plan (2019)

1.9 Child Protection Strategy

1.10 Births and Deaths Registration Act

1.11 The Social Assistance Act (59 of 1992)

1.12 National Health Act (61 of 2003)

1.13 South African Schools Act (84 of 1996)

1.14 The Domestic Violence Act (116 of 1998)

1.15 The Child Justice Act (75 of 2008)

1.16 Prevention and Treatment of Substance Abuse Act 70 of 2008

1.17 Probation Services Amendment Act 35 of 2002

1.18 Prevention and Combating of Trafficking in Persons Act 7 of 2013

ANNEXURE C

PROPOSED FRAMEWORK FOR THE COMMUNITY-BASED MODEL

