

## Tushinde Children's Trust Case Studies January 2023

### Youth Programme

Tushinde has initiated a youth and employability programme for teenage boys and girls. The programme offers support with nutrition, housing, access to school, vocational training, and psychosocial support so that young people can realise their rights and thrive. Core activities include:

- Weekly mentoring sessions
- Quarterly large group training workshops
- Gender-specific group sessions
- My Star assessments (My Star is an evidence-based tool which assesses well-being in vulnerable young people)
- Vocational training (10 per year)
- Social worker sessions
- Emergency funds for food, medicine or housing



Gender-specific group sessions



Vocational training



One-to-one mentoring session

### Case study: Bridget\*

Bridget is 20 years old. She was enrolled in Tushinde in 2019 and placed under the Youth Programme. She was the first born in a family of three children. Bridget's father fell sick with liver disease secondary to a tropical infection and she had to drop out of school when she was 15. Her mother was unable to continue paying for their father's medical bills, school fees and look after the family. Bridget tried looking for employment but with no success.

Luckily, a friend referred the family to Tushinde after seeing the challenges they faced. They were in a bad state when first reviewed by our social work team. As part of Tushinde's initial crisis intervention the family was given emergency food donations and Bridget's two little sisters were enrolled in school. They were also started on weekly cash transfers. This helped the family sustain their basic needs. Tushinde enrolled the family on the government's health insurance scheme (NHIF).

*"Through this we got some hope for our father's health" says Bridget. "He could just take his [NHIF] card and they would give him the medicine. Mum could use her cash transfers and wages from casual work to feed me and my sisters and we stopped going hungry."*

Bridget refers to it as their "turning point in life." Tushinde paid for Bridget's sisters to attend school. Once stable, the Tushinde social workers started working with the mother to become independent of support.

Bridget's passion was fashion and design, so we supported her study dressmaking at a local college. She passed the exam with flying colours.

*"Tushinde came in at the time when I had completely lost hope in life. It was a golden opportunity to take a certificate course. It has opened doors for me."*

At the date of this interview, she had just come from a job interview and was to report for work the next day. She will start earning a life from the skills she has always longed to possess. From the Tushinde team, we wish Bridget all the best as she strives to better and remodel her life and that of her family.

She is grateful to the Tushinde team for the support she got and wishes that more youths will benefit from the programme. She also thanked the donors who facilitated the youth programme and prayed for blessings upon their lives.

# Family Support Programme

Tushinde uses the Outcomes Star™ assessment tool (as shown below) to help families identify the areas of their lives where they are strong and where they need to find solutions.

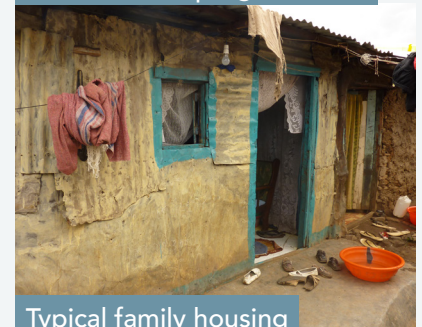
The social workers do a Star assessment with the caregiver every six months to talk about progress and set new goals by scoring themselves in each area. A simplified version of this star; the My Star, is also used by the youth workers in the Youth Programme.



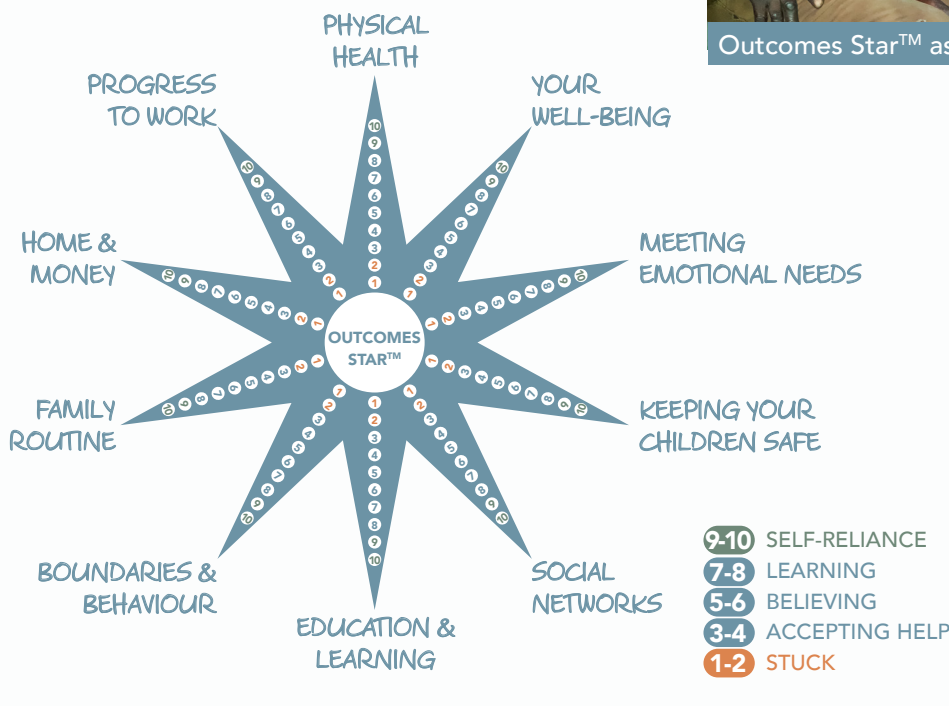
Outcomes Star™ assessments



Social worker progress visits



Typical family housing



## Case study: Janet\*

Janet, a single parent with two children, was enrolled in the Family support programme in 2019. She was living with epilepsy and the irregular focal seizures made it extremely difficult for her to run a business or find employment. She was unable to afford specialised health care and could not work to provide for her children. *"It felt like my life was over, I was all alone with no one to help me."* Her 11-year-old son had no choice but to drop out of school and work as there was never enough for school fees.

Tushinde registered her and her children with NHIF and she was able to access inpatient and outpatient treatment services for her condition. Her children were enrolled in school and Janet received the weekly cash transfer to cater to the family's needs such as meals.

Using the Outcomes Star and tailored case management, Janet was able to identify the needs of her family and set goals to improve their situation. By 2021 she had proceeded to the progression stage and her social worker referred her to the economic empowerment programme. She has been an active participant in all the training sessions portraying remarkable commitment, confidence, and eagerness to learn.

In the group's savings scheme, Janet was elected as the team lead and treasurer for the table banking/savings group.

With a successful market stall, Janet graduated from the Family Support Programme in December 2022. The programme has supported her and she is now confident, economically capable, and determined to provide for her children. Tushinde will continue to support her with the medical cover (NHIF) until her children turn 18 years old.

*"Tushinde has completely turned my life around. I feel secure now that my children are in school. It is a relief that they don't have to worry about me anymore because of my condition and they now know that their mother is healthy and strong enough to take care of them. I now get income from my business and for the first time ever, I was able to buy my children some gifts last Christmas. I bought them nice clothes and shoes, they were so excited! I have never been able to afford Christmas gifts before. I am also able to cover food expenses, house rent, and pens for school through my business earnings."*



## Case study: Agnes\*

In 2010 and 2011 Agnes lost three of her children when they were adults and parents of young children. She had to take her grandchildren in as they were orphans. She was coping, but only just, and a neighbour referred the family to Tushinde in 2013.

The family was still really struggling. The eldest granddaughter now had a small baby, Joseph\*, who was severely malnourished. The second grandson, Bernard\*, aged thirteen was out of school and being mistreated by an older youth; our social workers strongly suspected sexual abuse. There was also a son of Agnes's who owned the house and was dependent on alcohol. It was not a safe or stable house for children.

Tushinde's social workers intervened. Their priority was to ensure the baby had treatment for his malnutrition and that Bernard was safe. The social workers were able to locate Bernard's paternal grandparents who were able to take him in and enrol him in a school near their rural home. The remaining two grandchildren were enrolled in school and Agnes was supported to find accommodation with her grandchildren and great grandchild that was away from her son.

She explains how the support she got was of help to her, *"Nilikuwa napata pesa kwa simu, watoto wanalipiwa shule na pia tunapata chakula. Hii usaidizi ilikuwa ya maana sana kwa sababu sikuwa na kazi hio wakati - I was receiving cash transfer, my kids school fees was paid and at times received food donations. The help I received was so dear to me as it came at a time when I was jobless."*

After stabilising with the support Agnes got from Tushinde, she received a business grant which she used to become a greengrocer. In 2018 she successfully graduated from the programme. She says that the business has been her main source of income since then and the family is able to meet their basic needs.

She pays for one granddaughter's boarding school fees. Her other granddaughter and Joseph still live with her and Joseph is doing well at school. Agnes says that Tushinde has been a part in transforming her life saying that she now has a happy home despite being so devastated by the loss of her children when they were in the prime of their lives.

Families joining on the programme follow a clear pathway from crisis to independence.

### FAMILY IN CRISIS JOINS PROGRAMME



Social worker health assessments



Community days to encourage participation and positive networks



Facilitating business grants and training to enable financial independence



# Foster Care Programme

In some cases, the family situation is so high-risk that the children need to be found a place of safety quickly whilst work is done to make the family environment stable and nurturing. Tushinde is hoping to add a foster care element to its programme so that there is a safety net for all children. Kenya's Care Reform Act 2022 offers guidance on how to provide such care legally and sets a framework for Tushinde to support the children most at need when they need it.



Working with schools to improve child protection



## Case study: Veronica\*

Veronica lost her father when she was four and her mother when she was 7. Since then she has not been in a stable family situation.

Veronica was referred to us last year, aged 11 and attending primary school. She was living with John, her maternal grandfather and his second wife. The wife has a street stall selling vegetables and John works as a casual labourer. When her parents first died Veronica lived with her paternal grandmother but John saw she was being used as a farm worker and denied school, so he decided to rescue her. However, his wife has been physically and verbally abusive towards the child. Veronica had been running away from home and skipping school.

Interventions provided:

- Weekly cash transfer of Ksh500 (about £3.50)
- Food parcels in the initial stabilisation phase
- School fees
- Counselling sessions for Veronica to process past trauma and build her resilience
- Building the relationship between the child and the grandmother.
- Holiday camp during the school holiday
- Family enrolled on NHIF
- Support of the step-grandmother's business
- Family tracing by the Tushinde team (no suitable kinship carers identified)

Despite all the interventions, and a clear improvement in Veronica's school attendance and behaviour, her step-grandmother was still abusing her. It had culminated in a physical attack that was witnessed by others one evening. At this stage Tushinde involved the District Children's Officer (DCO). Through partnership with a local organisation Veronica was placed in an emergency refuge for girls for two nights. At the same time, a foster care family was identified through the Community Health Volunteer. Veronica was placed with the family. The parents had already been vetted and had some basic training. They had two younger children and Veronica settled in quite quickly. This was two months ago and regular follow up by the social worker and counsellor has found that Veronica is happy in her new home. The plan is to do further family tracing of Veronica's maternal aunts and if this is not successful to look into long term foster care which will need court involvement and a detailed care plan.

Foster care is greatly needed in cases such as Veronica's. With a foster care programme Tushinde would have trained foster carers ready to take on children in an emergency.

\*Names for all case studies have been changed for safeguarding and maintain anonymity.

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Providing Family Support To Help Vulnerable Children Thrive