

CRS SCORE ECD MAGAZINE

vol 1 2019



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results.

GIVE THE CHILD THE BEST IN LIFE

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CRS' initiative to address the welfare of the child is a welcome move

EDITOR'S NOTE

The move by Catholic Relief Services (CRS) to address the welfare of the child in our region is praiseworthy and a welcome initiative.

Hence, the publication in your hand is the first edition of the CRS-ACWECA SCORE ECD Magazine. In it you will find documentation of best practices on the implementation of the Strengthening the Capacity of Religious Women in Early Childhood Development, SCORE ECD initiatives in Kenya, Malawi and Zambia. This project is being implemented through the Association of Consecrated Women in Eastern and Central Africa (ACWECA), the National Associations of Kenya, Malawi and Zambia with funding from the Conrad N. Hilton Foundation.

Evidence has shown that young children need nurturing care from the start. The burden and cost of inaction is high. A poor start in life can lead to poor health, nutrition, and inadequate learning, resulting in low adult earnings as well as social tensions. Negative consequences impact not only present but also future generations.

Early Childhood Development is the most important pillar for accelerating the attainment of Sustainable Development Goals.

The project which is in its Second Phase of implementation has improved the situation of over 35,000 vulnerable children and their families, and not to mention the over 700 sisters whose technical capacity has been enhanced in the three countries since its inception in 2014.

The project has seen religious sisters in the three countries help pregnant and lactating mothers and caregivers understand the importance of nutrition, positive parenting, exclusive breastfeeding, play and communicating early and effectively with their children.

And for the implementing sister congregations, the CRS' coordinated project couldn't have come at a better time. The institutional capacity strengthening and technical capacity building for the sisters that preceded the implementation was a plus.

It was amazing for us to see that the sisters implementing the SCORE ECD have established linkages with

various stakeholders, all in an effort to ensure the welfare of the child in their countries.

Some of the linkages have brought the sisters face to face with various government agencies where the sisters have become powerful advocates of child welfare in their countries. And this is helping to improve the welfare of children in ways we did not anticipate.

And while many of these linkages have directly benefited the children from age of 0-2 years and their caregivers, other linkages have improved the organizational capacity of the implementing congregations and the sisters involved.

Today, nearly all the congregations and the national associations participating in the project have developed key management policy documents with sisters developing skills in competitive proposal writing, monitoring and evaluation and leadership/management.

A number of sisters have confessed that participating in the project had opened their congregations to a wealth of other opportunities. "This project has helped us to work with other congregations and network with other likeminded partners," one sister confessed

But while this move is commendable, the initiative has not come without challenges. From the onset, scaling up the project to the other countries in the Region has always been one of the key concerns of CRS and ACWECA and so far, this has been slow to come by.

As such, CRS and ACWECA are constantly working towards institutional strengthening and technical capacity building of implementing sister congregations and national Associations especially in resource mobilization. It is hoped this will ensure the sustainability of the project and by extension, the welfare of the child in our Region.





A MESSAGE FROM THE CONRAD N. HILTON FOUNDATION

The Conrad
N. Hilton
Foundation

wishes to applaud the

Association of Consecrated Women in Eastern and Central Africa (ACWECA) on the launch of the CRS SCORE ECD Magazine, covering Kenya, Malawi and Zambia. We are grateful for this tribute to Early Childhood Development; especially how Catholic Sisters positively impact the lives of children and their families experiencing disadvantage in often the hardest to reach communities.

Through the Hilton Foundation's commitment to supporting both the Catholic Sisters and young children affected by HIV and AIDS, the Strengthening the Capacity of Women Religious in Early Childhood Development (SCORE ECD) project has been a priority investment to advance the Nurturing Care Framework, an evidence-based roadmap for action with policies and services that support parents, families, caregivers and communities providing nurturing care for young children.

Catholic Sisters are uniquely placed within communities as a direct link to services and information on the multisectoral components of nurturing care, including nutrition, responsive caregiving, security and safety, early learning and improvements to health overall. Through the work of the Catholic Sisters, Associations and Congregations within ACWECA region, the sisters demonstrate the importance of reaching pregnant women and caregivers of very young children from birth through age two during the first 1,000 days, when brain development is most rapid and when stable, responsive caregiving is most critical.

We appreciate the dynamic partnership that Catholic Relief Services, the sisters of ACWECA region and the SCORE ECD Associations and Congregations in Kenya, Malawi and Zambia have developed in order to strengthen nearly 700 Sisters to advocate at ECD forums.

This investment is a natural fit for the Foundation's programs, building on the great compassion of Catholic sisters in service to children, the trust and respect that they have within the communities in which they work, and their strong voice advocating to a multitude of government and civil society stakeholders.

The Foundation wishes to recognize the leadership and many contributions of ACWECA to bring the importance of early childhood development to the global forefront to advance child development outcomes, especially for children affected by HIV and AIDS.

With esteem and gratitude, we congratulate you!

Conrad N. Hilton Foundation



A message from the Catholic Relief Services SCORE ECD Regional Project Coordinator

For every child, a decent and strong early start in life is a right. Strong beginnings mean every child, starting from conception to birth and throughout the early years, receives a positive and loving care from his/her parents with adequate stimulation, play, health care, nutrition, education, and protection.

A well-nourished and healthy mother with less stress guarantees strong bonding, effective communication and play with her child – all contributing to positive brain development, which in turn lays the foundation for life-long and well-being of a child.

Unfortunately, many children in Africa fail to reach their full potential due to malnutrition, domestic violence, family stress, depression among caregivers, and lack of basic health care, early stimulation and early learning opportunities, among others.

The CRS-ACWECA SCORE ECD Magazine is about how faith-based institutions – the Association of Consecrated Women in Eastern and Central Africa (ACWECA), the National Association of Sisterhoods of Kenya, (AOSK), the Association of Women in Religious Institutes of Malawi, (AWRIM) and the Zambia Association of Sisterhoods, (ZAS) are addressing the needs of the most vulnerable children in their communities.

This is done through the Strengthening the Capacity of Religious Women in Early Childhood Development (SCORE ECD) Project.



CRS SCORE ECD Regional Coordinator, Sr. Pauline Silver Acayo explaining the importance of childcare to a caregiver in Western Kenya.

The main beneficiaries are children from disadvantaged communities, who are poor and malnourished, including children with disabilities and HIV/AIDS.

Supported by the Conrad N. Hilton Foundation and Catholic Relief Services (CRS), the SCORE ECD Project since its inception in 2014 addressed two main goals: to build the ECD capacity of sisters and caregivers in the three countries to be able to help children under five (phase I 2014-2017) and children under two (Phase II, 2017-2021) grow up healthy and thrive, as well as strengthen the sisters' organizational sustainability and their capacities in networking and advocacy. We aimed at these key goals to ensure right from the start the continuation of quality congregational ECD services beyond the project's life.

As a Coordinator of the SCORE program, I have witnessed great transformation among sisters and their congregations in the way they are now providing care and support to children and their families. I remember when we started SCORE in 2014, sisters understood early childhood development to mean "preschool."

But now with their newly gained knowledge and skills in ECD, sisters have changed their attitudes and ways and have become change agents in early childhood care, development and education. For example, since its inception, over 700 sisters from over fifty sister congregations across the three project countries are reaching out and training other caregivers in key practices of quality child care and development, including promoting maternal mental health.

At the core of SCORE's success is CRS' primary focus on quality training materials and cascaded training modality, which lends itself to the strong abilities of sisters to implement ECD at all levels. CRS together with the project's stakeholders developed a one-stop evidence-based and inclusive ECD Curriculum with its six-module series on pre-postnatal care, holistic child development, nutrition, health, protection, and standards for quality care, development and learning.

The Parenting Education Packages with picture-based user-friendly and integrated messages on early childhood development, health, nutrition, and protection, and the integrated Mother and Babies' Course (IMBC) helped sisters to easily translate what they learned into a grassroots level practices. Six years through the two phases of the project life, the faith-based institutions were able to have their own 136 ECD master trainers across the three countries, including selected twelve ECD Champions trained by ACWECA. These sister-trainees have been the backbones of the congregations' success in reaching out and improving the situation of over 30,000 vulnerable children and their families, especially those living in remote areas and infected and affected by HIV.

Together with community health volunteers, they help pregnant and lactating mothers and other early childhood caregivers understand the importance of responsive feeding, safety and security, positive discipline, early health screening and referrals, and play-based stimulation and early learning opportunities. The Integrated Mothers Babies Course (IMBC) also taught mothers how to cope with and manage their stress for better interaction with their child.

Due to the dedication of the Sisters in ECD work, there is increased practice of key health care seeking behaviour by Pregnant and

Lactating Women and caregivers of children under two. Mothers have increased knowledge on the benefits of antenatal and postnatal (ANC/PNC), increased their practice in infant and young child feeding (IYCF) in exclusive breast feeding, complementary feeding, hygiene promotion, safe drinking water, and early stimulation through songs, play and communication.

Noteworthy of the projects' success is the engagement of fathers in child care and women's awareness and enthusiasm towards managing their moods and reducing their stress, which helps mothers to have improved mother-baby interactions. The networking sisters have established with various stakeholders in their respective countries is part of the promising factors for the sustainability of the program. Sisters now assume various government responsibilities and have become strong advocates of early childhood development in their respective countries.

CRS staff works hand in hand with the sisters to strengthen the organizational structures and systems for the congregations and the national associations participating in the project through trainings, mentorship and accompaniment. This has resulted in to the development of key management policy documents with sisters developing skills in competitive proposal writing, fund mobilization, documentation, monitoring and evaluation and leadership/management, among others.

Several sisters have noted that participating in the project had opened their congregations to a wealth of opportunities. In one of my monitoring visits with the sisters in Kenya, a focal point person of one of the congregations had this to say: "This project has helped us to work with other congregations

and network with other likeminded partners, and we are becoming a sustainable organization."

This confidence among sister congregations and the changes they exhibit in their day-to-day early childhood services is an inspiration to other congregations in ACWECA region. Many are now expressing their wish to replicate the SCORE ECD in their communities. For example, through external and CRS' private funding, the SCORE ECD model has been replicated in ECD projects in Ethiopia and South Sudan. Our vision is to continue the good work of the sisters in providing strong beginnings to the most vulnerable children throughout the region with more sister associations and congregations.

For this, CRS and ACWECA will continue working together with the sister associations, and other faith-based institutions, including local and international donor communities. The stories in this CRS-ACWECA Magazine are self-witnesses of the potentials and promises that sisters, their associations, and congregations bring into the ECD workforce and initiatives.

Let us continue working together towards ensuring that every child, especially the disadvantaged, gets the chance to grow up healthy and thrive.



CRS official during a household visit in Western Kenya



A message from the ACWECA Secretary General Sr. Eneless Chimbali, SBVM

We all know that the life of Children needs to be safeguarded in the way our life was guarded for us to reach at this level. For the fact that we are here and alive today someone somewhere protected our life. It is our duty as sisters to awaken the conscious of all who have chance to interact with life at an early stage, life is sacred and it needs to be protected.

That is why children need to be cared for with much love, care and safety by inculcating in them good values. This can be done from wherever the children are, whether at home with the family, in schools, Church etc., because children are a gift to the family, community and God Himself. *“And he took the children in his arms, placed his hands on them and blessed them”* (Mark 10:16). So we should do the same.

The Association of Consecrated Women in Eastern and Central Africa, (ACWECA) embarked on a journey to strengthen sisters in this Region to prioritize child welfare, and if we want to have a better society tomorrow, let us begin with children. This is in light of the fact that ACWECA Region has more than 30,000 sisters who currently work in hospitals in preventive and promotive health care; antenatal, postnatal and under five clinics, counseling, health education, in pre-schools, day cares centers, primary and secondary schools as well as universities and social

works, among others.

Sisters are all over and mostly in remote areas where health and education systems have not yet reached. And it is an opportunity for us to empower the community and families about the welfare of children.

It is ACWECA's priority to provide capacity building to the sisters to ensure that they have the knowledge and skills they need to deliver as our vision states: *“The Association envisions an empowered women religious and with enhanced evangelization tools. It therefore, shall strive to promote the dignity of women religious and the vitality of religious and human life in Eastern and Central Africa.”*

ACWECA with support from Conrad N. Hilton Foundation through Catholic Relief Services embarked on a journey to support Sisters in the project that we call SCORE ECD *‘Strengthening the Capacity of Religious women in Early Childhood Development’*. This project has unfolded many treasures hidden in most of the Congregations of the Sisters in ACWECA Region because it has not only provided knowledge and skills, but also transformed the entire approach in the apostolate of child welfare.

Prior to the beginning of the project, Sisters were encouraged to have sustainable structures to ensure that the knowledge gained

would go beyond the lifespan of the project. The project focused on three countries Kenya, Malawi and Zambia out of the ten English speaking countries (Eritrea, Ethiopia, South Sudan, Sudan, Kenya, Uganda, Malawi, Tanzania, Zambia and Zimbabwe) that ACWECA coordinates. In all these countries Sisters are taking care of children.

Through ACWECA Secretariat office, the Coordinator of the Project is working with the National Associations of Sisters in the region to ensure that Sisters have knowledge and know the importance of taking care of children.

We are also concerned of children from South Sudan and Northern Uganda for whom life is very hard because of the civil war in South Sudan. It is our wish and prayer that one day they will enjoy the peace of being a child.

Eritrea is another country where children are deprived of their right of being a child, they grow in an environment very difficult to explain. We encourage the Sisters across the Region to be the hope for the children and to be in solidarity with each other.

And as we entrust all this work to God who accompanies us in whatever we do, may He bless our work and our partners so that together we can reach beyond our hands.

Caregivers in Catholic Relief Services' project in Zambia bring ECD messages home, inspire neighbours



(L-R On the foreground) Lead mother Mervis Choonya and Agnes Bongula during a home visit

Mervis Choonya is a caregiver in Keembe constituency in Chibombo District of Central Province in Zambia. She joined the CRS coordinated Strengthening the Capacity of women Religious in Early Childhood Development, (SCORE ECD) project when her baby Joyce was one week old.

The Little Servants of Mary Immaculate Sisters in Kaparu Mission with whom Choonya works, are part of the 18 sister congregations implementing the project across Kenya, Malawi and Zambia.

The sisters through this program teach families on the importance of nutrition, breastfeeding and positive parenting, infant and young child feeding, early stimulation, play and communicating early with their children. The initiative also addresses the issue of general hygiene and sanitation in families.

Choonya and other caregivers are overjoyed for having gained skills and knowledge on the above ECD messages during their care group sessions and they are practicing in their households. Choonya exclusively breast fed her baby Joyce and she is very happy with the outcome.

“We have four children, but Joyce is the first among the other children of mine to walk within one year,” the proud mother says.

Choonya says her first child who was born before the SCORE ECD project was pre-mature and that she started giving her supplementary foods at only three months and she took so long to walk.

Her family now practices some of the key ECD messages on general hygiene and sanitation like ensuring there is a pit latrine, plate drying racks, clean environment and washing hands during the five critical points (before breast

feeding the baby, after visiting the toilet, before and after changing the nappy of the baby, before and after handling food, among others.

“We don’t have to count how many times we wash hands in the course of the day,” she firmly said, of the need to wash hands at all times. The caregiver who is also a lead mother has 10 women in her care group to whom she conducts care group sessions.

This is addition to seven other women who are not directly registered in the program, but often join in the group sessions. “One should not be stingy with knowledge and skills learnt,” she said proudly.

And on the involvement of men in the ECD program, she noted that at first it was very hard to get the men on board. But she encouraged the women to come with their husbands for the ECD sessions, and during their first cooking demonstration “the men loved it and they now attend the ECD sessions,” she testified.

At the cooking demonstration, they were able to teach the women how to prepare good and nutritious meals for their families using the locally grown foods.

The lead mother also narrated the story of one man, who after attending care group session for the first time built a pit latrine for his family and started a kitchen garden behind his house. They now get different types of vegetables to supplement their diet and sell the excess to meet the cost of other necessities at the household. All his children are very healthy.

He has encouraged other men to do the same and now there are kitchen gardens in almost all the families in his community. "We are grateful to the SCORE ECD project which has made our children and families very healthy," the man was quoted as having said.

Agnes Bongula, another lead mother of another care group in the same community could not agree more. "Men have really changed. Among the Bemba and Lala tribes, it is always said childcare is the responsibility of women but now the men on the program communicate and play even with their babies from conception, bathe and feed their children," she said, with a feeling of satisfaction.

And she continued: "My son Kevin has walked at 14 months and he is very active healthy and strong," she said of the experience. To Bongula, this experience is close to a miracle. Her other children took longer time to walk than did Kevin.

"To me this program has been helpful. My husband and I have learnt to feed our children well, made tippy tap (the locally made hand washing facility near the pit latrine), and ensure our compound is always clean", she says.

Bongula was also happy to note that she had mentored their neighbours who are not direct beneficiaries and they have also set up some of the facilities like constructing pit latrines, plate drying racks and ensuring general hygiene in their homes.

Another SCORE ECD Lead mother, Winfrida Makufa said she was lucky to join the project when she became pregnant with her first baby and right away she practiced what she learnt in the ECD sessions. Some of the ECD messages she learnt covered nutrition, the health of her baby and herself, responsive caregiving, safety and security, early learning as well as play and communication with the baby.

She exclusively breast fed her child who was able to walk at one year and he is very strong, healthy and playful.



Young Zambian couple proud to be champions of responsive caregiving in CRS Project

Solomon Muntanga and Micheelo Hichibula are first time parents. Since Mervis Choonya, the lead mother for the Catholic Relief Services' Coordinated Strengthening the Capacity of Women Religious in Early Childhood Development, (SCORE ECD) in their area visited their home, the two have been interested in the child/family friendly initiative.

And in their desire to learn more about the initiative, Muntanga did not only encourage his wife to participate in the care group sessions, he endeavoured to attend several SCORE ECD care group sessions. And luckily for him, the first session was on exclusive breastfeeding.

"I had seen how those in the group exclusively fed their babies on breast milk for the first six months and how their children had turned out to be healthy and strong and I wanted the same for our baby," he said.

Once their baby was born, he encouraged the wife to exclusively breastfeed their baby for the first six months and the two became interested in feeding their child and watching her grow.

After their baby turned seven months, the young father now

takes care of their child, giving her complimentary food. But he was quick to note that it was not in their culture for men to take care of children, let alone babies.

Muntanga is however adamant to his friends' criticisms and accusations against his wife that she had bewitched him. "My friends laugh at me and say my wife has given me love potion to do the work of women – taking care of babies and other house chores," he said of their accusations.

He was happy to note that their involvement in the ECD initiatives had created a strong bond between them and their baby, as well as cementing their relationship. The young couple treat each other with love and respect. Since the programme highly promotes dialogue, the two have opted to use this as a way of solving any misunderstanding that may come between them.

But most importantly Mutanga has not kept the skills and knowledge he learnt from the ECD Care group sessions for himself. He has shared it with other fathers who are using the same skills in their own households.

"I am proud to be a champion of ECD among my fellow men in our village," he concluded.



On the left: Kenya CRS SCORE ECD Project Manager, Tobias Opiyo making contribution during Commcare Training in Kisumu Kenya

Catholic Relief Services project in Kenya lowers maternal, infant mortality, builds sisters' capacity

Tobias Opiyo is CRS SCORE ECD Program Manager for Kenya, one of the countries which is implementing the Strengthening the Capacity of Religious Women in Early Childhood, (SCORE ECD) project in the ACWECA Region. Recently ACWECA Communication Officer had an online interview with him to assess the impact of the project on the beneficiaries/implementing sister congregations and its sustainability plan beyond the project's lifespan in Kenya.

Can you briefly describe the status of expectant and lactating mothers and their children before and during the implementation of the SCORE ECD programme?

Prior to the implementation of the (SCORE ECD) project in Kenya, antenatal and postnatal (ANC/PNC) Clinic attendance and completion of immunization was a problem.

As per the Kenya Expanded Programme on Immunisation, (KEPI), completion of 4th ANC visits and immunization schedules was low. This tended to increase maternal and child mortality in the country. This has since improved as one of the key messages promoted by the project highlights the importance of ANC/PNC visits and immunization.

Today mothers in some instances now begin ANC visits as early as the first or second months of pregnancy. This has been attributed to the increased knowledge on the importance of antenatal visits on the health of the mother and her unborn child.

Additionally, there has been increased male involvement in childcare. It is important to note that the project has contributed to increased male involvement right from the birth planning stage through to pregnancy and childcare.

This is because the project encourages couples to plan for the pregnancies so that they only get the child when they are ready for it. The men are also encouraged to practice early stimulation throughout the pregnancy by communicating and playing with the foetus as well as providing support to the expectant mother with household chores, accompanying them for the ANC/PNC visits.

And after the birth of the child, they are encouraged to make age appropriate play items using locally available materials, providing clean, safe and stimulating environment for the baby. As such, child spacing is now not an issue to most women in SCORE ECD implementing areas as they now have bargaining power over their men.

And what is more, all issues around childcare that was in the past left for the mother and the younger siblings is now collectively handled with the involvement of men. This is because men are now aware of the value-addition of their involvement in child development.

Thus, the project has increased responsive caregiving in several ways. More than ever, the frequency of deliveries in health facilities have increased leading to low infant and maternal mortalities at birth.

Also, there has been an increased practice of maternal, infant and young child feeding behaviours like early initiation of breastfeeding, exclusive breastfeeding, complimentary feeding and adherence to dietary diversity standards. This has reduced poor child outcomes like stunted growth, low birth weight babies and malnutrition.

Through the Integrated Mothers' and Babies Course, (iMBC), the capacity of mothers to cope with stress has been reinforced. This has improved the relationship between mothers and their babies due to the mental wellbeing of mothers.

There is also increased practice of hygiene among caregivers. For instance, latrine coverage and use has improved as well as hand washing practices like after visiting latrine and changing baby's diapers, before feeding or handling food is on the rise. These, coupled with safe disposal of faecal matter and the provision of plate/dish drying racks and safe drinking water have drastically lowered cases of water borne diseases like diarrhoea.

What impact has the SCORE ECD programme had on the participating congregations?

The first phase of the SCORE ECD project began in October 2014 and was implemented by 48 sister congregations in Kenya, Malawi and Zambia. The

Second phase which began in October 2017 is currently being implemented by 18 Sister congregations. Since the project's inception, the congregations have benefited in terms of systems strengthening.

Participating sister congregations put the systems in place after undergoing Holistic Organisational Capacity Assessment Instrument, (HOCAL) process. Once the assessments were done, the congregations objectively recognised their strengths and weaknesses in terms of systems and policies and set out to rectify what was missing.

To date, most congregations have either developed or updated various policies like financial, child protection, procurement and human resource policies, and are using them to guide their daily operations.

The sisters have also had the opportunity to build their technical capacity on Early Childhood Development through the capacity building, monitoring and mentorship sessions conducted to them by CRS.

Moreover, there has also been increased visibility of the sisters through active participation in ECD related Technical Working Groups both at the national and sub national levels.

What sustainability plans does CRS have in place for the SCORE ECD Project?

Before undertaking the implementation of the SCORE ECD Project, Catholic Relief Services carried out institutional capacity strengthening for the sister congregations, the National Associations and the Regional body, ACWECA. This was aimed at making the congregations/Associations strong and donor compliant so that they are able to attract more funds.

In Kenya, CRS' implementation of the project through the Association of Sisterhoods of Kenya, (AOSK) which has the overall mandate over all the congregations



in the country is strategic. This will ensure that AOSK continues supporting all her member congregations implementing SCORE ECD beyond the project life.

Meanwhile the project was designed for transitioning in the second phase. As such, similar roles/positions of project managers and coordinators were created so that the sisters could be mentored by their CRS colleagues on the routine project implementation strategies with a view of seamlessly transiting the roles to the sisters by the end of the Second phase, and these accordingly have been done.

How is the wider community involved in the implementation of the SCORE ECD project?

The wider community is involved through the community health volunteers (CHVs) and care group volunteers, (CGVs) who are involved in various activities related to the implementation of the SCORE ECD Project.

They are responsible for mobilising the target population (pregnant and lactating women) to join the neighbour groups, they lead/facilitate neighbour group sessions and provide monthly project progress reports as well as run ECD spaces.

Other activities these volunteers are involved in include home visits and they act as role models in practicing the key ECD behaviours such as ensuring general hygiene in their own homes, among others.

And for the successful implementation of ECD in the communities, the roles of influential groups – husbands, mothers/fathers-in-law, Religious leaders and local area leaders and the government is key. Once these section

of the society embraces the project ideas, it creates an enabling environment for pregnant and lactating mothers to practice the key ECD behaviours.

What are some of the key challenges facing the implementation of the SCORE ECD project in the Region and what plans are in place to mitigate them?

One of the key challenges facing the implementation of the project in the region has been the frequent transfers of Sister Master Trainers out of the project. However, the SCORE ECD Project team has held meetings with superior generals over this and most of the participating congregations have heeded to this.

Another challenge is the high expectations from the community members for material benefits from the project which is often fuelled by other ‘similar’ projects providing incentives for attending sessions. This coupled with the little budget to cover unique systems gaps for the individual congregations has affected the implementation of the project in some instances.

On this issue, Catholic Relief Services has liaised with the County Steering Committees to plead with partners to harmonize service delivery in the community with a focus on sustainability

Meanwhile congregations have been trained on resource mobilization and are being encouraged to apply the skills through proposal development and other income generating initiatives. Here a number of congregations have succeeded and we foresee such congregations continuing with ECD initiatives beyond the project’s lifespan.



Caregivers attend a health talk at St. Elizabeth Hospital SCORE ECD Space in Lnaak, Kenya



Testimonials of CRS' SCORE ECD-IMBC beneficiaries across the Region

Artistic Impression of parental involvement in Child care in an ECD Space in Blantyre, Malawi

Home visits helped support my disabled child and overcome my fear completely

“My child was not walking when two sisters came to visit me at my home. They saw my child who was not able to walk and advised me to take her to the health center for a checkup. I refused because I did not want my neighbors to mock at me or my child. The sisters continued to visit me and finally I accepted their advice and took her to the sisters’ health clinic.

A sister nurse helped my child with physiotherapy, and now she is able to walk. I was invited to join the care group where I registered and learnt how to take care of my baby. I also learned how to make play toys for my child, he loves the toys, I play with her and she interacts with her peers and she is happy.

The care group members are my strong hold and I am no longer ashamed of my disabled child. Long live the ECD/IMBC care group members,” says a mother in Kenya.

Referral saved the life of a mother

“I have been experiencing daily sexual harassment by my husband and wanted to commit suicide since there was no meaning in life. I shared with other mothers during the IMBC/ECD care group session and was advised and referred to Sr. Mary Wandubusi, a counselor and focal point person for SCORE ECD at LWAK health facility in Kenya.

She counseled and supported me and my husband and the women in my care group were always with me. We are now a happy family. I thank the CNHF, CRS and the Sisters who brought the ECD project to us and save our lives and our children. I have become an ambassador of IMBC/ECD helping other caregivers and people living with disability in the community,” said a mother of one year old baby in Kenya.

Mother’s responses about IMBC sessions

“Before I joined the ECD/ IMBC Care group, I felt very lonely and

unsupported by anybody. But after joining, I met other caregivers and shared my problems and I found out that they have similar problems to mine.

This made me feel stronger, now I have many friends, we share and support each other in the group. We are trained on how to manage our stress. I can now manage my stress and take care of my one-year child very well,” says Mary Okee of Siaya County in Kenya

“IMBC sessions has helped me to know what to do in order to reduce stress. I like cleaning dishes as a pleasant activity. When I do this and my child is around, I allow her to splash, pour, and play with water. This is good because I talk and laugh with my child and that makes me feel better, less stressed and happier.

It is also good for my child since she is spending more time with me and also participating in washing dishes,” says Christine Otieno, mother of 20 month old child.



A demonstration of Kitchen Garden at Imanol Health Centre run by the Servants of the Blessed Virgin Mary in Blantyre Malawi

SCORE ECD project changes the attitude of Pregnant and Lactating Woman

As shared by an ECD care group member during the monthly reflection meeting “The skills and knowledge I gained through SCORE ECD project will stay with me. It is a treasure that I use in my life. I have mentored my husband on how to cope with stress, he has benefitted a lot from my mentoring and together we are happy and providing responsive caregiving to our children”, says Agnes from Malawi

“My first child breastfed for four months only but for this one (pointing to the baby standing by her side), I breastfed her exclusively for six months,” says Emelda Shilia in Zambia, adding that she had noted a lot of difference between her two children. She says the younger child seems to be sharper than the elder one when he was this age.

The Power of ECD trainings in changing the local beliefs in the community

“In our community there was

a belief that when a husband carries his child or talks to him/her during pregnancy and in the early years, the child would be sick. With the introduction of SCORE ECD project, the trainings, the Care Group sessions and home visits by the Sisters and CHVs, the communities have become more aware of the benefits of fathers’ involvement in child care.

The men are now very active in stimulating, talking and playing with their children. As a result, the children are more active and happier. We are grateful to the SCORE ECD program that opened our eyes and taught us the right thing to do,” says Francis Phiri - Malawi

“At the beginning when SCORE ECD project disseminated the messages of accompanying a spouse to the antenatal, the men would laugh, but this has become a normal practice now. Now I understand the situation of my wife better than before because during the under-five clinic, we receive health talks together, we are able to handle the pregnancy well and expect the new born baby together. This has encouraged me to continue supporting my wife even in second or third pregnancy,” said Andrew Phiri, a father in Zambia.



A caregiver making contribution during care group session at Imanol ECD Space of the Servants of the Blessed Virgin Mary in Blantyre, Malawi

CRS project in Malawi helps Sisters to rebrand their identity, mission

Sisters of the Holy Rosary are part of the four sister congregations implementing the Strengthening the Capacity of Religious Women in Early Childhood Development, (SCORE ECD) project in Malawi. Catholic Relief Services (CRS) has supported the congregation in the implementation of project since 2014.

With funding from Conrad N. Hilton Foundation, SCORE ECD project is implemented through the national associations of sister congregations in Kenya, Malawi and Zambia and the Association of Consecrated Women in Eastern and Central Africa, (ACWECA) as a regional coordinating body.

The project is aimed at strengthening the practical knowledge, skills and attitudes of religious women and their associations and congregations in ECD through development of ECD materials, trainings, mentorship and regular follow up of activities with families, children and communities.

To sustain the ECD programs, the project also increases the efficiency of associations and congregations in organizational management, networking and advocacy in ECD.

Sister Mariarosa Phiri who was her congregation's contact person at the inception of the project in 2014 is the current Superior General, and now explains how her congregation has benefited from the project.

Can you summarise some of the key benefits your congregation gained from the SCORE ECD project?

Our congregation (Sisters of Holy Rosary) has greatly benefited from the SCORE ECD project. After we were selected as a participating



Sr. Mariarosa Phiri in their maize plantation. The Sisters harvested over 100 bags of maize in the last harvest season.

congregation, CRS staff came to train congregational leaders and the sisters involved in the project.

We were trained on holistic child development and how to set up early childhood centres and plan activities for children according to their age and developmental levels. Sisters can now make toys for play and learning using locally available materials.

To share what we learnt to families in our communities, the project trained us how to use a parenting education card that has pictures and messages on how to nurture children's development and learning.

CRS also took us through the Holistic Organisational Capacity Assessment Instrument, (HOCAI)

and taught us how to use the tool for self-assessment and improvement of our congregational management and administration. Some of the areas they covered included financial and human resource management, identity and governance, external relations and partnership, and sustainability. They also taught us proposal writing, ICT and documentation, fund mobilization and ECD activities.

We were able to trace where we were and what we needed in order to progress. We looked at the governance structure of our congregation focussing on the organisational chart, the mission, the vision – key structures that any organisation needs. Not surprisingly, these structures were all there in books but members couldn't explain or articulate them.

Some major documents we lacked as a congregation at the time included finance and human resource policies. We had payment vouchers but lacked quite a number of key things. After undergoing the training, we focused on developing these documents.

We were not aware that one needed to make requisition and approval before using the funds, and upon use of the requested funds, one must liquidate before receiving cash for further activities.

In the past, much of what guided us were the 'unwritten rules', which have been handed on orally. We lacked clearly stipulated operational guidelines on human resource management and as such our leadership team, the secretary general, bursars and community leaders lacked clearly defined roles.

But with the guidance of CRS staff, we now have a finance policy while the HR manual is in its final draft and sensitization of the members on their usage is ongoing.

Another thing we were guided on was how to come up with core values, which were not originally written down. We now have clearly defined core values, and this

together with the mission, vision and charism of our congregation are placed in strategic places in all our communities.

What impact has the sisters' work in ECD had in the community?

This project has trained over 200 sisters in holistic ECD and they take active part in reaching out to families, especially to pregnant and lactating mothers. We educate and counsel families on the importance of early care and education on children's well-being.

Generally, the ECD initiative has been successful in our area that many families who have graduated from the parenting education program are practicing positive parenting with their children.

The sisters have trained over 7,500 pregnant and lactating mothers and over 2000 men on positive parenting, early stimulation, exclusive breastfeeding, health and nutrition, safety, security, hygiene and sanitation. And through cooking demonstrations, the sisters are teaching pregnant and lactating mothers to use locally available foods to prepare nutritious meals for their families.

Each household now has a kitchen garden where vegetables of different kinds are planted to supplement the nutrition of the family. Mothers are impressed with the outcome of what they learnt from the sisters and this has successfully brought down the rate of malnutrition in the area.

The sisters have also become active in networking and advocacy. They now participate in ECD forums at district, national and international levels. They are using these forums for advocacy on ECD related issues and more importantly for sustaining their ECD works through fund raising.

We have partnered with the Ministry of Social Welfare and have been able to supply some of the ECD play materials needed by the ministry. The Ministry asked us to apply for iron sheets, which we did, and we have now completed the construction of our ECD Centre. This Centre is providing services for over 1000 children in the community. Children learn, play, and interact with peers and some parents also come to the centre to play with their children.



Banana from the farm of the Holy Rosary Sisters

We also participated in Health Surveillance Campaign spearheaded by the District of Mzimba. Meanwhile, the Ministry of Gender, Children, Disability and Social Welfare, told us if we needed any flour for porridge for malnourished children, we should not hesitate to ask and so we have been receiving flour from time to time. The flour is given to mothers who are on the ECD program.

What is the level of male involvement in the implementation of ECD messages in your area?

The ECD program is inclusive of all family members. Even though mothers are main targets, the Sisters understand the important role of fathers on child development. So they encourage fathers to participate in the education and implementation of ECD messages.

Fathers now sing and play with children, and also tell or read stories to them. Fathers in the community are also trained in toy-making and they make toys and objects for play and learning. Many households now have toys for their children.

They have started group gardening whose profit they have used to buy goats and chickens to support their families.

Recently, some government officials together with officials from UNICEF and Save the Children made a courtesy call to our congregation. They were particularly impressed with the male involvement in childcare in the area. They wondered how the sisters managed to involve many men in the implementation of ECD activities. Generally, it's a taboo for men in our area to get involved in issues of childcare.

What measures does your congregation have in place to ensure the sustainability of the SCORE ECD project beyond CRS sponsorship?

Our congregation is very keen about the sustainability of the

SCORE ECD project. As such, the leadership team is careful when it comes to transferring sisters involved with the project.

We have sisters trained as ECD master trainers and they continue to mentor other sisters and work with the community. We also have our comprehensive ECD Curriculum, which stays with us for training sisters and carrying out ECD activities with families and at ECD centres and mother and child health care units.

At the level of the wider community, we are helping the people to own up and continue when the CRS coordination and sponsorship phases out. Already households that graduated from the project are continuing to implement what they learnt.

We are encouraging households that have received training to share the knowledge and skills with non-participating households in their communities. As such, non-participating households have taken personal initiatives to implement some of the general ECD related messages on hygiene, health, nutrition and childcare.

How effectively has your congregation used some of the capacity strengthening skills?

One of the skills we have capitalised on is that of resource mobilisation. Once some of the key structures were in place, we formed a resource mobilisation team and CRS came to train the team, and this has helped us to move on.

Before the partnership with CRS, we were a closed community. This project has helped us to work with other congregations and network with other likeminded partners, which in a way has opened for us a wealth of opportunities.

The congregation has created a team that helps in resource mobilisation and they have divided themselves into groups – education, pastoral, health, and all have come up with initiatives for the sustainability of

the congregation.

They have written project proposals some of which have been successful. With the funds, we constructed an outpatients' health centre which is now serving the people in the area.

Another group has procured sewing machines for a project that now takes orders from schools and other institutions both within and outside the church.

Then the different teams have pooled funds together to buy a piece of land from which we harvested over 100 bags of maize during last harvest season. The sisters are working closely with the ministry of agriculture on this.

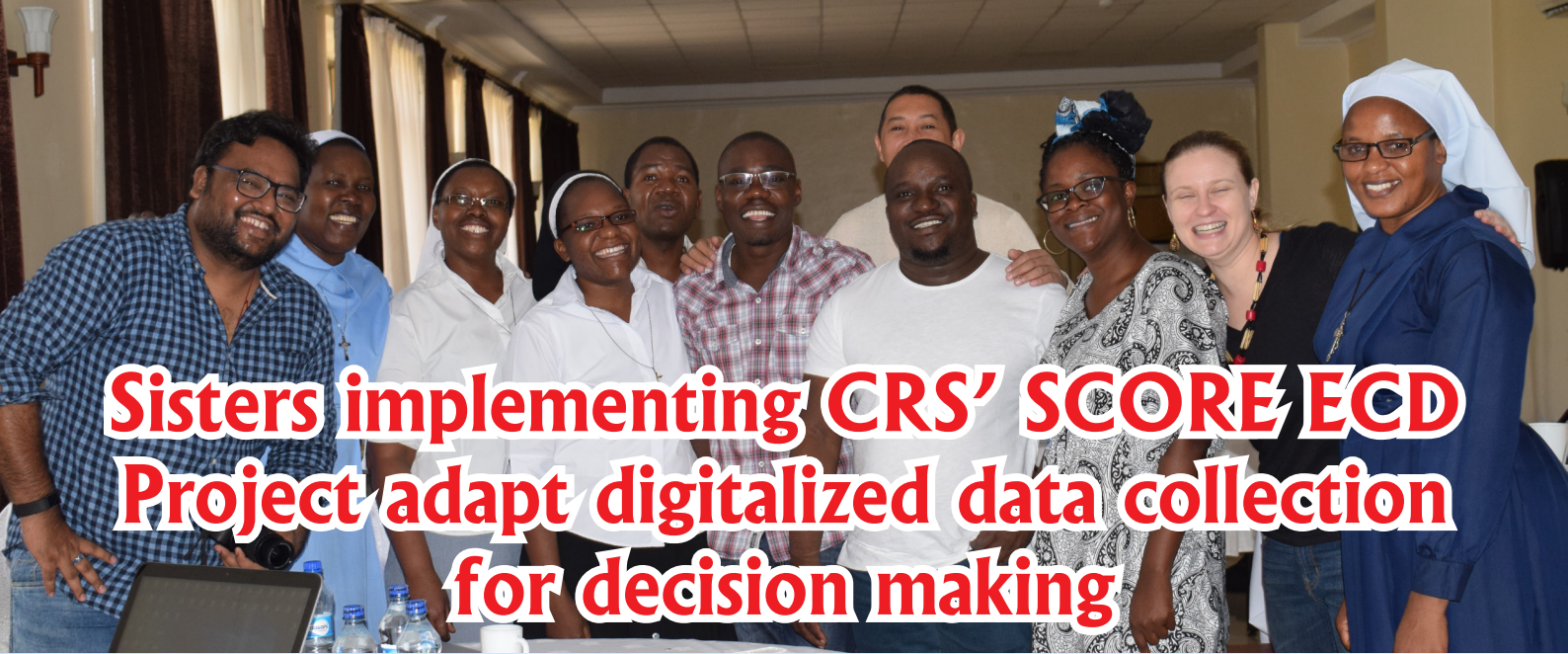
And during a recent visit to the farm, an official from the ministry advised us that our area is good for growing apples and we have already planted 600 apple trees.

Just as every success has its failures, what are some of the challenges you face as you try to implement the SCORE ECD project?

One of the key challenge has been to get people on board. At the beginning of the project we tried to assess what they want and this prepared us to reach out to them. But generally the people have the attitude of receiving things and when we come, they expect handouts.

But on the whole, we as a congregation are very grateful to Conrad N. Hilton Foundation for funding this project through CRS. And we are grateful too, to CRS for their technical support mentorship and guidance; to ACWECA and AWRIM for their support and guidance.

I cannot forget to thank all the implementing Sister Congregations because of the team spirit we have developed over the years. The bond we have created is a strong one.



Sisters implementing CRS' SCORE ECD Project adapt digitalized data collection for decision making

Participants who attended the Commcare ICT4D training at Pine Cone Hotel in Kisumu, Kenya

Sisters implementing the SCORE ECD Project in Kenya, Malawi and Zambia have adopted CommCare digital data collection for decision making. According to the creators of the Application, CommCare is the most widely adopted, technically advanced and evidence-based mobile platform for data collection. Thus, under CRS' Simple Measurement of Indicators for Evidence based decision making and Reporting (SMILER) and Monitoring, Evaluation, Accountability and Learning, (MEAL) systems, the platform is seen as an integral part of project implementation and decision-making process.

"The digitized online mobile platform provides timely/real time data for decision making," CRS MEAL Staff team member Charles Ndegwa said, adding that the platform is designed for data collection and management.

He further explained that the platform helps to track progress against set targets and that over time, data generated through MEAL system is used to inform evidenced based decision making to improve project performance.

Ndegwa told this reporter during a recent online interview that the introduction of Commcare had seen many sisters directly benefitting from the Information and

Communications Technologies for Development, (ICT4D) platform. He noted that a total of 20 Sisters from the countries of Kenya, Malawi and Zambia implementing the SCORE ECD project were trained in the use of the Commcare. These Sisters were given android phones with Commcare platform at the end of the training to facilitate the ECD data collection. "Sisters are now able to collect project data on time, use the Commcare as job aid, counseling tool, and better project supervision and make decisions based on evidence," Ndegwa said. He said with the platform, the Sisters are able to capture caregiver's attendance during the ECD and Integrated Mothers Babies Course (IMBC) care group sessions. "The captured data is helping the Sisters to decide when to conduct home visits and mentor mothers who have missed the sessions before beginning a new topic" he noted with confidence. Additionally, the Sisters use the Commcare platform to track referrals for services to health facilities, psychosocial support/ counselling and other related services. He explained that CRS MEAL team and other project management staffs have continued to give mentorship and accompaniment support to the Sisters on how to strengthen their Institutional systems and

structures. This, according to him helps to ensure continued capacity strengthening that is critical for the sustainability of the SCORE ECD project in the region. And as part of continued improvement and accountability to the people served by the project, the sisters continue to receive feedback through the project's established Feedback and Response Mechanism (FRM). The feedback mechanism allows and encourages project participants and community members to voice their concerns, raise complaints or provide any information in relation to the project during the quarterly reflection meeting. Although phone calls and text messaging are some of the key channels of receiving beneficiary feedback, Ndegwa said the integration of ICT4D gives the Sisters an edge in maximizing the use of the mobile phones. This, he said was in addition to other related functionalities such storage and retrieval of feedback into issue logs for action taking. "Embracing ICT4D has not only enabled Sisters to provide the much-needed project implementation support to the caregivers/pregnant and lactating mothers, but it equally provides quality assurance of data prior to synching to the main server," he said, adding that it also provides effective supportive supervision to Community Health Volunteers, (CHVs).

Zambian Nun involved with CRS' SCORE ECD Project spurs community to development

A Zambian nun involved in the Catholic Relief Services' coordinated Strengthening the Capacity of Women Religious in Early Childhood Development, (SCORE ECD) Project has a great passion for the welfare of children and the community she supports and works with.

According to the CRS Zambia SCORE ECD Project Manager Ms. Bertha Mpepo, Sr. Ruth Kuyumba is a self-motivated nun who goes beyond her expected responsibilities as a master trainer in early childhood development.

“Sister Kuyumba’s strong technical expertise and passion in early childhood development and her style of working with children and adults including her commitment to the project brings reassurance that positive change is taking place among families and children supported by the Project in her communities,” Ms Mpepo told this reporter in a recent online interview.

She explained that the Sisters of Mercy, the congregation to which Sr. Kuyumba belongs is one of the 18 congregations from Kenya, Malawi and Zambia that is implementing the project. The project is supported by the Conrad N. Hilton Foundation and implemented partnership between CRS and four sister associations – Association Of Sisterhoods of Kenya, (AOSK), Association of Women in Religious Institutes of Malawi, (AWRIM), and of Zambia Association of Sisterhoods, (ZAS), and the Association of Consecrated Women in Eastern and Central Africa, (ACWECA) as the regional coordinating body.

The CRS SCORE ECD regional coordinator Sr. Pauline Silver Acayo in Nairobi further explained that the sisters through this project help families understand the importance of nutrition, breastfeeding and communicating early and effectively with their children.

“The sisters together with community health volunteers, (CHVs) educate women on the importance of responsive care giving,” Sr. Pauline said.

In order to bring positive change in the families and community’s attitude around child development and care, Sr. Kuyumba makes weekly visits to project beneficiary households. “The community leaders of

Kasaba now recognize Sister as an ECD champion as she is constantly engaging them in meetings aimed at creating and increasing an understanding on the benefits of early care, communication and play on child development among communities of the newly created Chifunauli district,” Ms Mpepo said.

The nun is also versatile and highly organized. Being the vocation directress of her congregation, she has no problem in balancing her time between ECD work, the Health centre where she is an intern, and her community life in the convent. She sets aside two days per week for community outreach, while two other days are in the hospital and the remaining three days, she is full time in the community in the convent.

And what is more, Sr. Kuyumba is a strong advocate of fathers’ involvement in early childhood care and development. She has the highest number of men participating in integrated early childhood messages that includes water, sanitation and hygiene (WASH). This according to Mpepo has resulted into high number of households being able to show physical WASH outputs such as making of tippy taps, building pit latrines and constructing plate drying racks, among others.

She noted that the nun had developed strong working relationship with the Community Health Volunteers (CHVs) she is working with in the community. These CHVs provide regular supportive supervision to households and also lead monthly care group sessions with the lead mothers.

The CRS SCORE ECD Project Manager further explained that Sr. Kuyumba is a quick learner. She grasps new ideas and skills and implements them as it fits the needs of the families and children she is supporting. The PM said Sr. Ruth adopted some ideas from her counter parts in Kenya and has rolled out some of these ideas in Kasaba. This was in April 2019, when Sr. Kuyumba participated in a learning exchange field visit to Kisumu, Kenya that brought together master trainers from the three implementing countries.

“We have introduced table banking, commonly known as ‘merry go round’ in our area, which I first introduced to the Community Group Volunteers,

(CGVs) – i.e. lead mothers before rolling it out to the households,” Sister Kuyumba said.

She further explained that the amount to be contributed was decided by the Care Group mothers themselves based on their income level. She said this was done once a month as they come for their monthly group sessions. “Each mother brings K20 (US \$ 1.50) and since each group has ten members, the amount comes to K200 (about US\$ 15) that is then shared to two members,” she said.

“I am happy to mention that many mothers have started some small businesses because of that, and they are able to support their families as well as help other beneficiaries,” she noted with satisfaction.

She said the initiative had also reached the households in Kasaba. But unlike in the group of the CGVs, the women in the households bring together foodstuffs on monthly basis and share it to their members. She said the food items they contribute include groundnuts, maize flour, sugar, salt, maize etc., to be shared during their care group sessions.

The CRS SCORE ECD Project Manager said the ‘merry go round’ was a revolving initiative that allows mothers to either contribute a stipulated amount of money or food items which is given to support group members on a monthly basis. She added that their monitoring visits showed that the neighborhood have welcomed the initiative and are very happy with the idea of providing internal support to group members. Encouraged by the progress of the care group, Sr.

Ruth, has also introduced kitchen gardening, another initiative she learnt from her colleagues in Kenya, which helped families to provide nutrient-rich foods to their child.

But what the soft-spoken nun however values most about her group is their time and commitment. “The mothers contribute a lot to this project. Their time and commitment to the project is invaluable,” she said, adding that they really love the project and have welcomed it into their communities.

The CRS SCORE ECD Project manager said Sr. Kuyumba’s efforts to motivate mothers and the community to become self-sustained had born fruits.

And unlike in other areas where beneficiaries expect handouts, she said the concern of beneficiaries in Kasamba is how to remain part of the project after their children graduate. She said many mothers want to be retained on the project to continue benefiting from the lessons even after the children turn 2 years of age.

Another thing CRS appreciates about Sr. Kuyumba is that her reporting is always on time and that she never hesitates to ask for clarifications whenever something is not clear.

“I believe Sr. Ruth’s attitude towards her work is a general reminder of Sisters’ call to serve children and the vulnerable in the community. Moreover, her effort highlights the value of working with young passionate sisters as models of change agents in ECD,” she said.



Sr. Ruth Kuyumba (at the far right) joins her colleagues in an energiser exercise during training organized by Zambia Association of Sisterhoods (ZAS) in Lusaka, Zambia

Catholic Relief Services' project positively impacts lives of women in Kenya

When the Franciscan Sisters of St. Ann, (FSSA) in St. Elizabeth Lwak Mission Hospital recruited Ruth Atieno Onyango as a community health volunteer and Integrated Mothers and Babies' Course, (IMBC) facilitator, she had no idea she would become a beneficiary herself.

As Integrated Mothers and Babies' Course, (IMBC) facilitator, Atieno teaches neighbourhood women on internal and external realities – how moods coordinate thoughts and realities and helps them to manage stress. She teaches mothers about common mood swings before and after birth and the importance of antenatal clinics. She also uses the opportunity of the home visits to teach mothers and communities about general hygiene.

The CRS Integrated Mothers and Babies Course is a community mental health intervention that helps mothers, pregnant women and caregivers to children below two years. The intervention helps them to understand depression or stress; its causes and how to regulate their moods. In this way, they are able to manage stress and improve their relationships with their children.

But the programme has not left Ruth without 'a feel good' experience in her own life. She acknowledged that part of the IMBC program has helped her to manage her external and internal realities.

"My life was full of visions and depression at day time and of nightmares at night," she noted with a sadness that seems to come from the depth of her heart. She said she was deprived from her mother's love at the age of two years and when it came to time for her to go to school, it was not easy.

She said the course has helped her to manage her moods, thoughts and activities, and "I love this programme so much." And not only that, she is able to help others who have gone through similar experiences to overcome them.

And to her family, she said the IMBC messages has helped her children to engage in pleasant activities. In all, the programme has benefitted not only the neighbourhood women but also the wider community.

Ruth is in charge of four care groups with each group having between 12 to 14 members that meet twice a month. She is able to manage these groups well because she always prepares a work plan and she is able to incorporate her home responsibilities into the programme.



CHVs during their monthly reflection meeting with Master Trainers at Lwak, Kenya

Another beneficiary of the Integrated Mothers and Babies' Course is Maurine Atieno Onyango in Siaya County in Kenya. According to her, having undergone the IMBC program has helped her to be a better mother with clear thoughts.

At their monthly group session, Atieno learnt about harmful and helpful thoughts and their impact on mothers and their unborn babies. This has helped her manage stress and other harmful thoughts.

During an IMBC group session, beneficiaries were told if anyone had a problem they could come and share with the facilitators.

"I was pregnant and I had a sick child but I did not understand the sickness of my boy who was convulsing and this confused me a lot. I went through depression and I almost lost the pregnancy," Atieno recalled.

She has put into practice what she learnt from the IMBC sessions and she has been able to mentor other expectant and lactating mothers on how to manage stress and other harmful thoughts. She also encourages the women to create time for themselves. This, she said is aimed at boosting their strength and stamina.

Atieno and the women in her group have since created a bond and they help one another when the need arises. They started table banking (locally known as merry go round) to create an internal support system for themselves.



Maurine Atieno Onyango (left) used her savings from the table banking to buy three chickens in 2018.

Each of the women contributes 50 shillings (about US\$ 0.50) which is collected and shared to a member, every two weeks. Atieno used her savings to buy three chickens in February 2018 and to date, she has over 50 chickens with several young ones.

The mother of two says the chickens are a ready source of nutrition and income for her family especially in times of emergency. She recalled that at one point her baby was sick and she had to sell some of the chickens to raise money for his treatment.

Documentation as a project management tool

By Sr. Grace Candiru, MSMMC

Before discussing the importance of documentation as an effective project management tool, I wish to start by sharing the definition of the word “Documentation.” The Oxford dictionary defines it as, “The material that provides official information or evidence or that serves as a record.

Additionally, the word Documentation could also refer to the process of classifying and taking note of some important information.

We could then say documentation is a set of an official written, maintained or recorded material with information or evidence.

That being said, it is important to note that documentation is part and parcel of any project management. This is because project documentation helps to track project progress and performance for purposes of informed decision making. This therefore calls for the need to understand the significance of good documentation throughout a project cycle.

Thus, project managers can significantly enhance their communications skills and project success by using and telling stories of their project. These stories can be used to bridge stakeholder differences, to develop win-win solutions, develop long profitable relationships, improve and sustain their personal, business and project success.

On the basis of the above, it is important to note that inadequate or no documentation in project management and sharing of best practices increases the chances of project failure. Also, inadequate documentation can lead to issues related to support in a project.

Nevertheless, I would wish to limit this presentation to documentation of best practices, which I believe is possible through story telling. Story telling can be a powerful tool for change and can be done through publications both online and hardcopy (newsletters, newspapers, magazines), photos, video clips etc.

As David Smith succinctly put it: “If a picture is worth a thousand words, then a story is worth a thousand pictures,” alluding to the composition of a great story. Such stories must be able to capture the context, meaning and emotion of those involved.

And one might wonder “Why tell the story of your project to the world? In project implementation, there are high chances that you will be working with other partners. It is therefore imperative that you will need to get stakeholder feedback on your project and make people out there to be interested in your project. This will earn you the support of your sponsors/donors to give you money for future expansion of the project, or as may be the case, impress your superiors in case they may wish to entrust you with the management of another project in the future.

But one might be tempted to ask: “How do you tell the story of your project?” To begin with, it is worth noting that personal success stories related to the project have the power to stick to people’s minds. This is because for most people, stories are easier to relate to – and recall – than statistics or data summaries. Stories have the ability to bring the message of the project home.

Additionally, personal stories have the added impact of authenticity and can help to quickly establish trust. A well-crafted story, if appropriate to the purpose and the message of the project, has the advantage of recognition by the audience. Moreover, knowledge gained from interviews with stakeholders can be of great value for the implementation of the project.

But most importantly, stories can also be used to obtain funding for the project. Stories can help persuade and sell the benefits of a project by humanising the project (i.e. putting a human face to the project). Stories sell “what is in it” for the funders of the project.

Thus, your role is to tell compelling stories – ones that will connect your project with the audience. And not only the right stories but ones that deliver the key messages or call to action on issues related with your project.



Malawi SCORE ECD Master Trainers attend their quarterly reflection meeting at CRS office in Lilongwe

Catholic Relief Services' SCORE ECD Project in Malawi lays ground for sustainability

Malawi is one of the three countries implementing CRS' Strengthening the Capacity of Religious Women in Early Childhood Development, (SCORE ECD) in the region.

The CRS Program Manager, Fidelis Chasukwa said, prior to the implementation of the project in Malawi, CRS guided Sister Congregations to undertake self-assessment through its Holistic Organisational Capacity Assessment Instrument, (HOCAI) tool.

The idea was to help sister congregations assess their strength and weakness and develop action plan to mitigate the gaps for sustainability.

Some of the gaps included; networking and advocacy skills, lack of financial and human resource

policies, lack of child protection policy, little skills in proposal writing, no proper documentation, many sisters were working with children 3 years and above not knowing ECD begins from conception. Others included sisters not participating in ECD technical working group meetings at the district or county level and lack of confidence in public presentation.

What are some of the actions taken to support the Sisters in the identified gaps?

Catholic Relief Services built sister capacity and helped them strengthen their congregations through trainings in various areas identified during the assessment. There has been face to face and on the job trainings, mentoring and accompaniment.

Some of the Sisters we trained, mentored or accompanied have become part of the National Technical ECD working groups networks – a top notch ECD think tank in the country and I can comfortably say the sisters have greatly contributed to the National ECD Network policy development. Some sisters are now members of the national ECD Coalition in Malawi, thus making it possible for them to make presentations on ECD related issues to the parliament.

In the area of institutional strengthening reforms, the sister congregations were able to put in place key institutional management policies such as finance, human resource, procurement and assets.

And in terms of human resource development, sisters are no longer

simply appointed to positions but can now confidently undergo the interview process and have clear segregation of duties. Sisters are able to advocate on radio and TV without fear, they write good proposals and are able to compete for funding from donors.

What impact has the involvement of sisters in ECD had on the welfare of the child in Malawi?

Service to children in Malawi varies between rural and urban settings. While the children from urban setting have access to better health care services and their parents are able to afford, for rural children, the issue of affordability, the quality of service and the required dosages of medication are a problem.

But today the sisters are able to reach out to these areas and provide quality and affordable services to the communities using the mobile clinic and organizing child health days in the community with various health activities taking place, thus breaking down the inequalities that exist in healthcare service provision.

In the past some health officials noted that they always had malnourished children even though people would have just harvested food. They now realize that it was not lack of food but the lack of proper knowledge on how to prepare balance diet using local available foods. The sisters are training mothers on how to prepare nutritious balanced diet using the locally available foods, and mothers are able to prepare nutritious and well balanced diets for their families.

Also, husbands and wives collectively now take care of their children 0-8 years which is the most important developmental stage of a child. Initially men would not accompany their wives to the hospitals for antenatal and postnatal visits or play with their children. Now most of the men are very active in doing all these hence, leading to more bonding

between them and their children, improvement in relationship in the house.

So, there is quite a lot that the sisters' intervention through the SCORE ECD project has contributed to the wellbeing of the children which is good for the children and for Malawi too.

Why is advocacy and networking very important for the successful implementation of ECD initiatives?

The Catholic Social Teaching of the Church that calls to family and community participation is an important requirement that explains the social nature of the human person.

This therefore explains that no one individual is able to single handedly handle an issue of public concern. And even as Africans, the saying that: "No one hand can go round a Baobab tree," holds true.

Likewise, the rationale for investing in child development is a big issue and no single organization would be super good to address it. Each organization has their strengths which can be further strengthened by others.

For example, ECD is a child protection issue and yet the sisters are not part of the policing service. But by networking with community policing service, the welfare of the child is taken care of.

And whereas the sisters may have a forum to facilitate child development, they must do so in line with the government that has the mandate to put in place public policies related to the welfare of the child. Hence, they must collaborate with the government and other likeminded organizations to ensure that the public polices related to child development are maintained.

In this way, the sisters have joined other civil society organizations and have gone to members of parliament, met with the social committees and talk to them about the importance of investing in child development.

So when the law makers make national budget, they do so from an informed point of view so as to increase funding for child development initiatives.

So, when you ask about the importance of advocacy and networking, I would say they are important because "It takes a village to raise a child."

What measures are in place to ensure that sisters who have acquired skills and knowledge in managing the project are maintained in the position to ensure its stability?

First of all it is important to note that CRS is not against sisters being



Malawi CRS SCORE ECD Senior programme manager explains a joint point to Sr. Esther Wacera of AOSK-Kenya

transferred. However, the process of the transfer should be done carefully to ensure the stability of the project. And as we deal with other stakeholders outside our domain, we need to attach a face to the project to avoid undue confusion.

But we have observed that sisters who have acquired skills in managing the project are very often shifted to manage other projects. We have raised the issue with the leadership of the Association of Women in Religious Institutes of Malawi, (AWRIM) and through the concerned congregational leaders.

As an external partner we think that the Association of Consecrated Women in Eastern and Central Africa, (ACWECA) and AWRIM need to come in and clarify this with implementing congregations.

What sustainability plans are in place to ensure that the ECD initiatives spearheaded by sister congregations don't phase out after 2021?

First and foremost, SCORE is a capacity strengthening project and as such it has put in place a number of measures to ensure that after 2021 the project will continue to roll out to deserving needy populations of Malawi.

As mentioned earlier, CRS guided participating sister congregations

to undertake self-assessment. It is important to note that with ECD work, we were not starting a new thing because the sisters have already been working with children in other sectors. The interaction was meant to orient the sisters to the frameworks of the country or region related to child rights/conventions.

And in line with the sustainable development goals, (SDGs) this project is trying to orient the sisters that whatever they do should be layered with the conventions and dictates related to child rights. If they are well imbedded in this dictates, then it will be sustainable.

Additionally, sisters have undergone training of trainers in child development through the science of ECD run by Aghakhan University with support from Conrad N. Hilton Foundation. One hundred and thirty-six sisters from Kenya, Malawi and Zambia were trained using the Government and SCORE ECD curriculum/Care for Child development and are ECD trainers for their countries and congregations. They have acquired knowledge and skills towards the science of brain development which is key to the understanding and rationale of child development.

The sisters are also running health facilities, which are now including ECD messages among the health

talks given to caregivers when they bring their children for treatment. But previously these health facilities focused on Child health in general with no debates or discussions regarding early stimulation. We have now brought in stimulation which is key to child development.

The personnel at the health facilities have been trained on ECD and are working with the SCORE ECD Sister Master Trainers to train more mothers on toy making, positive parenting, early stimulation, growth monitoring and immunization, voluntary counseling and testing.

The sisters have also been linked with government health department and are providing supervision to SCORE ECD activities at the community and health facilities.

And at community level, the sisters are linked with the community leaders and together established area development committees that are specifically looking at child development. This Committee is supervised by the top most traditional leaders known as Traditional Authorities.

These ECD networks at community levels were already in place but nonfunctional and we have only helped to revive them. I therefore believe the government will continue to spearhead child welfare initiatives through these structures.

SCORE ECD Program in Kenya turns couple's life around

A young couple in Siaya County in Western Kenya has had their life turned around after fully embracing Early Childhood Development, (ECD) interventions. Erick Omondi Otieno and Emma Adhiambo who are beneficiaries of the programme are parents to two beautiful six month old twin girls – Samantha and Natalie and three year old Tony Blair Graham.

Through the (CRS) coordinated Strengthening the Capacity of Women Religious in Early Childhood Development, (SCORE ECD) programme, sisters help families understand the importance of nutrition, breastfeeding and communicating early and effectively with their children.

According to the CRS Regional SCORE ECD Coordinator, Sr. Pauline Silver Acayo, the project is being implemented with funding

from Conrad N. Hilton Foundation. She said CRS is implementing the project through the Association of Consecrated Women in Eastern and Central Africa (ACWECA) and three national Associations of Sisters within the ACWECA region.

“Catholic Relief Services works in partnership with 18 congregations in Kenya, Malawi and Zambia with the aim of helping children under two to thrive in a sustainable culture of care and support,” she further explained.



Erick Otieno Omondi holds one of their babies as his wife Emma Adhiambo bathes the other twin

The Franciscan Sisters of St. Ann, (FSSA) at Lwak in Siaya County where the couple lives are part of a nine Sister congregations implementing the SCORE ECD project in Kenya.

“The sisters together with community health volunteers educate women on the importance of responsive care giving,” the CRS SCORE ECD Regional Coordinator said.

She explained that the training was aimed at giving the women knowledge and skills in nutrition, early stimulation, positive parenting, exclusive breastfeeding, antenatal and postnatal care and hygiene.

And as well, the women are encouraged to play and communicate with their children to enable them reach their developmental milestone and provide them early learning opportunity.

At the couple’s neatly kept spacious compound which also houses Otieno’s parents’ home, the children have the opportunity of playing with their grandparents. In fact as the reporter interviewed Otieno, Graham and another little boy sat with their grandmother in another part of the compound to draw pictures from a picture chart.

And Otieno who is himself a primary school teacher also in his free time helps the little boy to learn using picture charts to stimulate his cognition.

Since Emma joined the neighbour women group for the Integrated Mothers and Babies Course and ECD programme about a year ago, a lot has changed for the couple. “Today, hygiene in our home is of high standard,” Otieno observed.

And the father of three is particularly impressed with the keenness with which his wife now handles issues of hygiene. “Hygiene in our home was moderately low and the children’s soiled clothes took long before being washed,” he said.

But after becoming part of the ECD programme, he noted that his wife became a promoter of ECD interventions in the family and the neighbourhood. “Personally I have been won over and I have no problem helping with some of the house chores,” he said, adding that he can now fry eggs and prepare a simple meal for the children.

Further on, Otieno says he often uses his free time to play with their children, bathe them or simply look after them when his wife is tired or busy with other chores.

Otieno who is now contented with the positive change in his family and the respect that this has commanded in the community said his peers see him as a point of reference.

“We have a lot of friends and we gladly share with them the importance of responsive care giving, personal hygiene, nutrition, play and communication and, a good number of them have changed,” he said.

But what surprised him most was when his wife told him that one could communicate with an unborn baby in the mother’s womb. “You know I am a stubborn man and I couldn’t simply accept that unborn children are able to respond to any communication directed at them in their mothers’ womb,” he recalled.

So for a while Otieno refused to communicate with his unborn babies. But after some convincing from his wife, he reluctantly began touching his wife’s womb whenever he returned from school. He made the same sound whenever he stroked his wife’s womb, and was surprised that the unborn babies responded by kicking their mother’s womb.

And when the babies were born, Otieno was shocked to note that they instantly recognised his voice when he made that sound. From then on, Otieno became very keen on the wellbeing of his children. He plays, bathes and feeds the children whenever his wife is busy or they simply feed or bathe the babies together.

He said the parental involvement has created a strong bond between them and their children. Not surprisingly, the couple’s relationship has greatly improved. “We are able to understand each other and if there are problems, we resolve them amicably,” he said.

More so, the family’s diet has also improved greatly. “We have a kitchen garden and are able to provide a balanced diet for our family and this has greatly impacted the mother’s diet helping with the production of breast milk for the babies. “Now our children rarely fall sick – they are alert, healthy and eager to play and communicate with us,” he said.

Sisters in Zambia use CRS' assessment tool to spearhead development



Some of the participants who attended the child care training organised by ZAS included Lead Mothers/fathers, Community Health Volunteers and master trainers.

Catholic Relief Services' institutional assessment tool which was introduced to SCORE ECD implementing sister congregations in 2014 has become a benchmark for development for congregations in Zambia.

Before taking up the implementation of Strengthening the Capacity of Religious women in Early Childhood Development, (SCORE ECD) CRS took all participating sister congregations through the assessment process.

The Holistic Organisational Capacity Assessment Instrument, (HOCAI), is a standardized framework that helps organizations to engage in a process of continuous assessment and improvement towards a sustained organizational capacity.

With the tool, organizations are able to conduct a self-analysis of their strengths and challenges, develop an action plan to improve organizational functions through capacity strengthening.

"We have seen sister congregations improving through policies after undergoing the HOCAI assessment," Bertha Mpepo, CRS Zambia SCORE ECD program manager said. She noted that all congregations that

have undergone the process have grown through, accompaniment, mentorship and capacity building from CRS.

Clear management strategies and structures

And the CRS-ZAS SCORE ECD Program manager, Sr. Astridah Banda said at the national level, Zambia Association of Sisterhoods, (ZAS) had grown more by implementing the action plans derived from the HOCAI assessment. She said the sisters are mentored to grow even beyond the SCORE ECD program. "We as an Association have moved miles ahead of what we were before the advent of the SCORE ECD program," she noted with satisfaction.

The Association (ZAS) has moved on to put in place key management policies for its daily operations. "Our Association now has finance and human resource policies, with monitoring and evaluation becoming part and parcel of every project," she said.

This, according to her has enabled ZAS to get direct funding from other donors. With the knowledge gained through training in resource mobilization, ZAS has

done a lot of resource mobilization both from within and without Zambia, Sr. Astridah said.

The CRS SCORE ECD project manager in Zambia observed that the above improvements had resulted into healthy and strong children especially in the communities. This is because congregations' project implementation is guided by clear management strategies and procedures.

She likened this experience to that of a village headwoman who is also lead mother in Kasaba. As the village headwoman, she made mandatory and stringent requirements on general hygiene for the whole village and a lot of homes are cleaner than they were before. Mpepo said this was a sign that ECD messages are being appreciated by the community.

She further noted that the dropout rate of those leaving the project due to lack of handouts had greatly reduced. In fact, she observed that those who previously dropped now want to re-join the group.

CRS-ZAS ECD sustainability plan in Zambia

The ZAS SCORE ECD sustainability plan goes beyond the CRS sponsorship. The program manager explained that they would need to include other child related issues and that they were in the process of developing their own Child Protection Policy. They are inviting congregations to identify focal persons to be trained in child related issues.

However, the issue of sustainability of the project is a key concern for both CRS and ZAS. The main aim of the two partners is therefore to help implementing sister congregations to appreciate the project and progress from there.

So along that line, they are networking and linking with other organisations that are involved in child related initiatives. Mpepo cited an organisation implementing a project on nutrition in Kasanka that they are partnering with.

She said the organisation had recruited more than half of the SCORE ECD community health volunteers and lead mothers who are helping with the implementation of the project in their area. This according to Mpepo would ensure that the community continues to benefit from this child related initiative while at the same time putting lead mothers and the CHVs at a higher pedestal.

Creating linkages and partnerships

Additionally, the two organisations are working hand in hand with both public and private health facilities to ensure that ECD services are accessible in the health facilities around. This is aimed at ensuring that the community continues to benefit from this child related initiative both within the community and at the health facilities.

The CRS program manager however said there was still need to strengthen the area of working with children with special needs.

The next steps

She noted that parents who have benefited from the program are concerned of what would happen when their children graduate from the project. The CRS SCORE ECD Zambia plans to start an early literacy program to accommodate children who graduate from the SCORE ECD program.

They are also planning to start internal savings and lending schemes in the communities where the project is being implemented.

An assessment they carried out revealed that about 90 percent of participating mothers wish to join the scheme while 5 percent have already been in the group.

They are now in the process of finding ways of how to implement it for the participating communities. And CRS is assessing the viability of the scheme to see if the monies collected through the scheme will help with child development.

Another challenge in the implementation of the project is

the transfer of Sisters who have already been trained and are doing great ECD work in the community.

In line with this, ZAS Secretary General is talking with the superiors to maintain the Sisters trained on ECD to continue with the work and mentor more sisters for sustainability.

The CRS-ZAS SCORE ECD program manager noted that a lot can be done when sisters who are spearheading the project are maintained for a longer period. She cited an example in Kasanka where two junior sisters who had been retained on the project are doing a great job.

“There is a whole lot of difference and one can see the commitment of these sisters,” she said, adding that there is a difference between those who are retained and those who are shifted from time to time.

With HOCAI, organizations are able to conduct a self-analysis of their strengths and challenges, develop an action plan to improve organizational functions through capacity strengthening



CRS Project broaden Sisters' horizon towards sustainability

By Sr. Grace Candiru

*Sr. Hellen Matchado plays with the little boy.
Play is an essential part of a child's development*

For the Congregation of the Sacramentine Sisters at Ulongwe in Malawi, the institutional capacity strengthening reforms proposed by Catholic Relief Services, (CRS) came as an eye opener. The CRS Coordinated Strengthening the Capacity of Women Religious in Early Childhood Development, (SCORE ECD) reforms which preceded the implementation of (ECD) initiatives in Kenya, Malawi and Zambia sought to build the sisters capacities in certain areas of management.

As such, the project focused on building Sisters' capacity among others in areas of proposal writing, human resource management and development of some key policy documents.

According to Sr. Hellen Matchado, the sisters acquired new management skills and were able to develop some key policy documents like human resource, finance and procurement policies which have helped them to streamline their operation.

“We used to depend on our staff to inquire from among their relatives and acquaintances when recruiting workers,” Sr. Matchado went onto explain, adding that they simply employed workers without interviews.

This recruitment procedure however landed the sisters

into litigation from some disgruntled staffs who were dismissed for some reason or the other.

“Some disgruntled staffs have taken us to the Labour Office and we have lost considerable amount of money because of that,” the nun who is also the Coordinator of her Congregation in Malawi said.

New way of doing things

Today, staffs undergo interview process and are employed based on competence. Moreover, each staff now has a file and is contracted for a period of time, at the end of which their contracts can either be renewed or nullified based on competence.

The sisters also underwent financial management training by CRS and now record every financial transaction. And according to Sr. Matchado, the sisters who have been trained have mentored other sisters on the same and this has created a multiplier effect in her Congregation.

“We have started a new way of doing things and there is a great improvement,” she confidently said, adding that whatever new knowledge they acquire, they practice and where necessary, they consult with CRS.

On the issue of sustainability, she said every now and then, they are trying to find ways of sustaining this

project outside of the life-span of CRS sponsorship. “Before taking on SCORE ECD, we depended on our salaries and support from the General administration but now we think of income generating activities,” she said.

The sisters have swung to action and have put the proposal writing and financial management skills they acquired during HOCAI assessment to good use.

The Sisters have incorporated poultry and piggery farming as a way of earning income to sustain the project with the money they received from a project they wrote. They rear both local and highbred chickens. With the waste from the poultry and piggery they started a small scale organic farming where they grow vegetables, bananas and fruits for home consumption and sale.

ECD project spreads its wings, sisters create linkages

Meanwhile, the nursery school that initially ran like charity has been transformed into a social enterprise. The school sought to offer value for money for which they asked the parents to pay a little more than they initially did.

The nun recalled that the immediate reaction of many of the parents was to remove their children from the school. She said the number of children dropped by half.

This however, did not scare the sisters. Instead, they integrated ECD messages into the children’s learning, which many parents came to appreciate. Today the number of children at the Nursery stands at 105, up from 60 children.

Sr. Matchado narrated that for the project to penetrate the community, they had to go to the villages and meet the people in their communities. “At first it was not easy to relate with the villagers,” she said. But later on, they had to go through the chiefs. They sensitized the chiefs about the benefits of the project to the community and the chiefs in return sensitized the people and encouraged them to come to the sisters.

The women were the first to come to the sisters. The sisters taught the women on general hygiene and how to look after their homes. But most importantly, they taught the women how to prepare nutritious meals for their families using local foods through cooking demonstrations. To date, the sisters still hold cooking demonstrations twice a month.

After the first cooking demonstration, word went round because the women who participated eventually became ambassadors to the wider community. They shared the knowledge with the others who didn’t attend.

Later, the sisters identified some cluster leaders (Community Health Volunteers), most of whom were already working with the government or other organizations operational in the area. They trained the CHVs on ECD messages and these further helped to spread the message about the project to the people.

In total the congregation has trained 1036 beneficiaries in nine villages in Ulongwe district. The results of the training are so amazing. The beneficiaries are able to prepare nutritious meals for their families, make local play materials for their children with increased number of women going for antenatal and postnatal clinics.

Health units in participating communities now register more hospital births than before and this has enabled parents to receive birth registration certificates for their children. And more so, most households now have pit latrines and clean environment, with more men getting involved in taking care of children.

Networking and advocacy

Today, Sr. Matchado has taken to using Radio Maria and a local television station in the area to pass on the message about ECD. She attends meetings at the District where she freely shares about ECD.

The Sacramentine Sisters have also gone on to share the information about SCORE ECD to other religious congregations during the Association of Women in Religious Institutes of Malawi, (AWRIM) diocesan meetings. This has heightened the desire of many congregations to participate in the project.

Even in the surrounding community, the project has had a positive impact. This has resulted into people knowing more about SCORE ECD, while others have come to see for themselves what the sisters do at the ECD Centre at St. Gertrude Nursery School in Ulongwe. She explained that most of the children at the nursery were from the ECD participating homes.

As such, the Sisters’ ECD Centre has now become a point of reference for officials of the Ministry of Social Welfare as well as officials from the Ministry of Gender, Children and Community Development. They often refer to the role Sisters have played in promoting the welfare of the child and community development in general.

PICTURES SPEAK





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1. Care group session in Ulongwe, Malawi.
2. Children in one of the homes CRS Staff visited in Kenya display their drawings.
3. The ACWECA SCORE ECD Coordinator, Sr. Wilhelmina Tunu Uhai carries a baby from one of the ECD/IMBC beneficiary homes she visited in Siaya, Kenya.
4. Malawi SCORE ECD Master Trainiers during their quarterly reflection meeting at the CRS office in Lilongwe, Malawi.
5. Some of the play materials that caregivers and master trainers have made at the Sacramentine Sisters ECD Space at the St. Gertrude Nursery School in Ulongwe, Malawi.
6. Caregiver Maurine Atieno Onyango with her little boy. Atieno is a beneficiary of ECD/IMBC project in Western Kenya.
7. The little girl plays as her mother conducts Care group session in Siaya, Kenya.
8. Children at St. Gertrude Nursery School run by the Sacramentine Sisters in Ulongwe District, Malawi.
9. A learning material made in form of a Bible at St. Gertrude Nursery School in Ulongwe.
10. Care group Session in Siaya District in Western Kenya.
11. Sisters Pauline Silver Acayo and Wilhelmina Uhai Tunu together with other CRS Staff after household visits in Western Kenya.
12. Sisters of the Holy Rosary with some of their farm workers plant trees in their newly acquired plot of land. The Sisters pooled funds to purchase the plot of land.
13. Sr. Ruth Kuyumba during the Child care training organised by Zambia Association of Sisterhoods at Kasisi Retreat Centre in Lusaka, Zambia.
14. Some of the participants who attended the ZAS Child care training in Lusaka, Zambia.
15. Some of the participants who attended Commcare 1CT4D training at Kisumu, Kenya
16. SCORE ECD Project managers and coordinators from Kenya, Malawi and Zambia pose for a group photo after a reflection meeting at ACWECA Secretariat in Nairobi, Kenya. Also in attendance were CRS SCORE ECD Regional Coordinator, Sr. Pauline Silver Acayo (far right), ACWECA Secretary General, Sr. Eneless Chimbali and ZAS Secretary General, Sr. Elizabeth M.
17. Erick Otieno Omondi cleans the ears of one of his twin babies at their home in Siaya, Kenya. Otieno is a champion of male involvement in childcare.



Sisters with certificates from training

CONRAD N.



FOUNDATION



AWRIM

