

End of Project Evaluation

Project Name: Access to Justice for Children in Zimbabwe

Implemented By
VIVA Network Zimbabwe

With Funding from



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By

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LIST OF ACRONYMS

AMTO	Assisted Medical Treatment Order
CCW	Case Care Workers
CPC	Child Protection Committee
DSD	Department of Social Development
FGD	Focus Group Discussion
IEC	Information, Education and Communication
JCT	Justice for Children Trust
KII	Key informant interview
IPC	Infection, Prevention & Control
PPE	Personal Protective Equipment
RG	Registrar General
TOR	Terms of Reference
VD	Viva Denmark
VFU	Victim Friendly Unit
VNZ	Viva Network Zimbabwe
WHO	World Health Organisation
ZRP	Zimbabwe Republic Police

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EXECUTIVE SUMMARY

Introduction

In August 2021 Viva Network Zimbabwe (VNZ) commissioned an end of project evaluation for the *‘Access to Justice for Children Project’* implemented in Mbare and Epworth. The Project was implemented from June 2019 to end of August 2021 by VNZ in collaboration with Justice for Children Trust (JCT). The overall objective of the Project was to *‘improve access to justice for 15000 children at risk/ or victims of abuse or exploitation in two highly vulnerable communities in Harare (Mbare and Epworth)’*. The overall objective of the evaluation was to assess the overall performance of the project as measured against the OECD-DAC Criteria for development evaluation with special focus on project relevance, effectiveness, efficiency, impact and sustainability. This report presents the key findings of the evaluation and provides recommendations to guide future programming.

Evaluation Methodology

The evaluation applied a mixed methods approach that included qualitative, participatory and quantitative methods of data collection. Specific data collection tools used were the key informant interviews (KIIs), Focus Group Discussions (FGDs) and Parent/Guardian Questionnaire. An in-depth review of project documents was conducted from inception to data analysis and report production. A total of 15 KIIs, 2 FGDs and 337 Questionnaire interviews were conducted across the two project areas.

Key Evaluation Findings

Project Relevance

Given the high numbers of children in need of protection services, including birth registration, the relevance of the project is undisputable. At baseline, while 85% of caregivers interviewed indicated knowledge of children that had been abused in their communities, reporting of such cases to relevant authorities was very low as people were either not aware of the reporting channels or lacked confidence in the child justice system. At end of project evaluation, nearly all parents/guardians interviewed confirmed the relevance of the project with 86% indicating that the project was ‘very relevant’ while 13% considered it as just ‘relevant’. The Covid-19 pandemic has further exacerbated the plight of vulnerable children and constitute a firm justification for continuing with project activities beyond the original timeframe.

The project’s interventions were quite distinct and appropriate. These covered a critical gap that was not addressed by existing organisations and programmes reaching out to address the needs of vulnerable households and children in Epworth and Mbare. Hence, the project did not result in competition or duplication of services carried out by other agencies but rather complemented operations by both government and other civic society organisations in the targeted communities.

Effectiveness

The project achieved almost all its objectives and targets, with most of the targets having been surpassed. Over 1953 cases of child protection, out of a target of 300 were reported to competent authorities. 937 cases were resolved through the Department of Social Development (DSD), JCT and the Zimbabwe Republic Police (ZRP). A total of 1745 children, from a target of 1500, were assisted to get birth certificates, while 129 children (out of a target of 100) were assisted with litigation services. Child protection committees managed to follow up 1860 cases out of a target of 100. Over 700 children who were victims of exploitation (out of a target of 300)

were assisted to exercise their rights through DSD, JCT and ZRP-VFU. A total of 30 stakeholders, from a target of 15, were represented in the Child Justice Alliance, also better known as Child Protection Committee. At policy level, the project managed to submit a position paper on birth registration to senior parliamentarians. During the extension period (June to August 2021), the project managed to produce a Policy Adjustment Brief Document after conducting advocacy work for the digitalisation of Birth Registration.

The effective use of community level Help Desks, awareness campaigns, mobile clinics and community volunteers resulted in a high turnout leading the project to exceed its set targets. Had it not been of Covid-19 restrictions in movement and business operations, the project could easily have more than doubled the final achieved results.

The seemingly serious under-targeting of project results can also be attributed to a change in project's strategy from the original concept. At design stage the general strategy was to use the few targeted cases of children assisted with protection services to support advocacy work for the creation of an enabling environment for child protection, including birth registration and access to justice. With the observed high demand for child protection services, the project found it necessary to address the urgent crippling needs of vulnerable children while not neglecting advocacy work whose results take time to be realised. At the time when such policy changes are made, the lives of current needy children would have been adversely affected.

The Covid-19 pandemic had an adverse effect on project implementation as movements were restricted while business and key government offices were either closed or operating below 50% of capacity. The project made some adaptations that ensured project activities continued to be carried out whilst observing Covid-19 WHO Infection, Prevention, Control (IPC) Guidelines. This included the use of the Help Desks for caregivers invited by DSD drawn from databases submitted by volunteers. Thus, the number of cases that could be assisted during the period were drastically reduced. Response rate of DSD to submitted requests for birth registration assistance by caregivers was also very low.

Efficiency

Project expenditure was generally at a lower level during the first four quarters. While such expenditure pattern is normal during the inception period, expenditure was expected to rise as activity implementation increased. The least activity expenditure was in Quarter Four (May to June 2020). The activity expenditure pattern is a true reflection of the adverse effects of Covid-19 lockdown on implementation of activities. During Quarter 4, the Government of Zimbabwe imposed a nationwide lockdown that brought business to a standstill following an increase in Covid 19 cases. The project made some adaptations that were less costly compared to the original activities. During the first year the project rationalised and dropped some activities that amounted to duplication of efforts with other agencies. This led VNZ to exceed most targets without concomitant cost overruns which further enhanced efficiency in the utilisation of resources.

Impact

There was a marked reduction in child protection cases within the two communities as measured through the proportion of caregivers who knew a child abused within their communities over the last two years. At baseline, all interviewed caregivers had knowledge of children that had been abused in their communities compared to 49% (19% Strongly Agree, 30% Agree) of respondents at endline evaluation.

With regard to reporting child abuse cases to responsible authorities there was a significant improvement in reporting with 12% caregivers at endline compared to 44% of the caregivers at

baseline who knew about child abuse cases in their communities but did not report such cases or did not know if any reporting was done. This indicates improved awareness at community level as well as some degree of confidence in the child justice system. At baseline only 44% of caregivers were aware of the reporting channels compared to 72% of caregivers at endline. As regards confidence with the child justice system, 78% of caregivers interviewed at endline, compared to 51% at baseline, asserted that reported child abuse cases were addressed effectively by Justice Operators.

While caregivers who had interfaced with the justice delivery system expressed some confidence in the system, there was a general mistrust among caregivers who had not gone through or heard about the justice delivery system. Lack of confidence in the system was also raised by volunteers during FGDs held in the two communities. This attitude negatively affects reporting of child abuse cases to responsible authorities.

The proportion of caregivers who knew children without birth registration in their communities dropped from 87% at baseline to 64% at the end of the project. Although this demonstrates some marginal improvement in birth registration attributable to the project, the situation is still very dire. It also turned out that children without birth certificates were also being denied access to education due to ignorance on the part of caregivers and miscommunication by school authorities. Children without birth certificates can still be enrolled in school and can sit for public examinations upon production of an affidavit.

Advocacy work on enabling policy environment for the welfare of children contributed towards Cabinet's ratification of two key Bills in the month of July 2021, the Children's Amendment Bill and the Child Justice Bill. The Bills reflect a number of child protection issues that the child justice alliance advocated for consideration by policy makers.

Sustainability of project results

For children who accessed birth certificates, the project has enabled such children to access their fundamental right to identity as enshrined in the Constitution, Acts of Parliament as well as regional and international treaties and conventions such as the Convention on the Rights of the Child. This is a lifetime change that further unlocks a whole range of opportunities for the child and household that include enhanced access to education as well as socio-economic opportunities.

At community level, the established Help Desks would continue to operate under the management of DSDs in each community. These have proven to be easily accessible to vulnerable households and children in the targeted communities.

At institutional level, the Child Protection Committees would continue to play their role as focal persons of birth registrations and child protection issues within their respective communities. These committees are under the direct supervision of DSD. The Child Justice Alliance is comprised of key stakeholders, including government and CSO representatives at national, provincial, district and community levels, with a role to play in improving the welfare of the children. As the project used to finance all meetings, unavailability of committed financial resources for alliance activities by individual members would affect the continuity of future coordination meetings. However, the members would still advance child protection issues in the various platforms they would be participating in. In the medium to long term, changes in organisational structure and staff movements within member organisations will lead to loss of institutional memory and ultimately continuity of the child protection agenda by member organisations.

While project results are not likely to be eroded by the Covid-19 pandemic, continued business and movement restrictions as a result of the lockdowns would certainly result in a huge backlog of children in need of birth registration. With schools closed, children will continue to be at risk of abuse and exploitation.

Conclusions

1. The Project was indeed very timely and relevant in addressing the critical child protection issues threatening the lives of vulnerable children in Epworth and Mbare. The project achieved almost all its targets with most having been surpassed. But the need on the ground is still huge and not only in the targeted communities but in other poor and vulnerable communities of Harare.
2. The Project rightfully extended its support to reach out to more disadvantaged children in need of birth registration, child protection and litigation services. While at conception, it was worthwhile to make use of the few targeted cases for birth registration and litigation services for advocacy purposes, many children would still be without birth certificates while at the same time no tangible policy changes would have been achieved within the short space of time.
3. The evaluation noted that there still existed some misconception or misinterpretation of existing policy provisions among communities and duty bearers at different levels of administration. The project tended to focus more on awareness raising at community level with limited attention being given to different levels of key stakeholders especially within the birth registration, education, health, security and justice sectors.

Recommendations

1. In view of the effects of Covid-19 pandemic and demand for child protection services, it is a considered recommendation of this evaluation for project proponents and stakeholders in the justice alliance to secure more resources for the continuity of the programme within the targeted communities and beyond.
2. Both medium to long term advocacy activities and short-term interventions aimed at addressing prevailing child protection issues in targeted communities are critical considerations during project design. While results of advocacy work may take a longer time to be realised, once new policies and regulations have been promulgated, this will benefit disadvantaged children nationwide.
3. There is need for projects to engage in education and awareness raising targeting duty bearers at different levels of operation. At the community level, development and dissemination of information fliers and posters on key steps, processes and requirements for services at different government ministries would be very useful. In addition, community level information dissemination on justice delivery system will enhance reporting of child abuse and exploitation cases as well as instil confidence among the general population.
4. To mitigate loss of institutional memory and address unavoidable changes in personnel of member organisations, the project would need to conduct periodic lobbying, training and sensitisation meetings on the child protection agenda with various members of the child justice alliance.

1. INTRODUCTION & BACKGROUND

1.1 INTRODUCTION

This report presents the key findings of the End of Project Evaluation of Access to Justice for Children Project implemented by VIVA Network Zimbabwe (VNZ) in collaboration with Justice for Children Trust (JCT). The two-year project (June 2019 to May 2021) was implemented in two highly vulnerable communities of Harare Metropolitan Province (Mbare and Epworth). Due to challenges associated with the COVID 19 pandemic, the project was extended from June to end of August 2021. VNZ engaged an independent consultant to execute the evaluation during the month of August 2021. The overall purpose of the evaluation was to assess the effectiveness and impact of the project. According to the Evaluation Terms of Reference (TOR), the main purpose of the evaluation was to assess the project's relevance, effectiveness of implementation approach, overall performance as measured against project objectives, outcomes, milestones and targets, sustainability of project results and overall impact at household and community levels. The evaluation will document lessons learnt and provide recommendations that will be useful in guiding ongoing and future programming.

To address the objectives of the evaluation, this report starts by highlighting the key objectives, outcomes and targets of the Project and then presents in detail the evaluation objectives, evaluation approach and methodology, followed by key findings of the evaluation and finally conclusions and recommendations drawn from the findings.

1.2 BACKGROUND

The overall objective of the Project was ***“to improve access to justice for 15,000 children at risk/ or victims of exploitation in two highly vulnerable communities in Harare (Mbare and Epworth).”*** With limited access to basic rights such as a legal identity and legal representation, at-risk children become increasingly vulnerable to economic, social and health discrimination and exploitation. To bring about better outcomes in the delivery of basic services to children at risk and in need of support, the project seeks to strengthen civil society organizations around the issue of child justice through linkages, capacity building and collaborative interventions. Three organizations, Viva Denmark (VD), VNZ and Justice for Children (JCT) were at the core of the implementation of this intervention.

1.2.1 Project Immediate Objectives and Key Results

The Project is comprised of two Immediate Objectives:

1. Reduced barriers to justice for 15,000 children at risk or victims of exploitation in two vulnerable communities in Harare (Mbare and Epworth).
2. Civil society empowered to advocate for 5 Justice Operators to deliver effective and inclusive prevention, rescue, and restoration services to 15,000 children at risk or victims of exploitation in the two vulnerable communities in Harare.

Key Project Results

- 1.1. Quality data on child exploitation has been made available to Justice Operators
- 1.2. Birth Registration Champions have contributed to functionality of Registrar's Satellite Help Desk and/or Hospital Birth Registration Help Desk

- 1.3. Civil society's input to changes in procedures or legal framework has been taken into account.
- 1.4. 15.000 children have been empowered to claim access to justice from relevant authorities.
- 2.1 A strategic Child Justice Alliance comprising key civil society actors with capacity to advocate for children's right to justice has been activated.
- 2.2 Child Justice Alliance has ensured that Justice Operators have capacity and coordination with civil society to deliver prevention, rescue and restoration services.
- 2.3 Child Parliamentarian Committee has been established, trained and capacitated for effective child protection advocacy.

1.2.2 Project Target Groups

The project's target groups fall into two categories, the primary and secondary participants as summarized in Table 1.

Table 1: Project Target Groups

TARGET GROUP	TOTAL TARGETED
A. PRIMARY TARGET GROUP	
1. Children without birth certificates	1500
2. Children victims of exploitation	300
3. Children at risk or victims of exploitation	15000
4. Child and youth advocates trained to participate in Child Parliamentarian and Child Protection Committees	20
5. Civil society organizations who will participate in Child Justice Alliance	15
B. SECONDARY TARGET GROUPS	
1. Policy makers in relevant parliamentary committees	10
2. Parents and guardians of children	15000
3. Representatives from five (5) key Justice Operators	20

1.3 OBJECTIVES AND SCOPE OF THE EVALUATION

The TOR stipulates five key tasks to be performed by the Consultant:

1. Evaluate the **impact** of the project in the sites of operation at stakeholders, partners and individual beneficiary levels, including both direct and indirect beneficiaries.
2. Assess the **success** of the project in meeting its outcomes, milestones, objectives and targets with particular reference to **impact** and **sustainability**.
3. Identify **lessons learned** and make **recommendations** on any changes to project strategies and/or methodologies that may be valuable for any subsequent and/or similar project, including how greater **impact** and **cost efficiency** might be achieved.
4. Assess the extent to which project achievements are **sustainable** and identify key contributing factors which enhance and/or hinder these prospects.
5. Assess the **effectiveness** of the implementation approach i.e. working with and through community structures.

2. EVALUATION APPROACH AND METHODOLOGY

2.1 STUDY APPROACH

The evaluation was informed by best practice approaches in conducting development evaluations. The OECD-DAC criteria for assessing project performance (focusing on relevance, effectiveness, efficiency, impact and sustainability) was used to guide the design of the evaluation with specific questions being drawn from the TORs. A participatory cross-sectional study design employing mixed methods (quantitative and qualitative research techniques) was applied. This enabled the consultant to obtain relevant information from multiple sources (both primary and secondary) in a cost-effective and realistic way and to validate findings through triangulation. This methodology allows for a comparative analysis approach through analyzing the context at baseline and end-line.

In view of the COVID-19 pandemic the evaluation team had to adhere to World Health Organisation (WHO) Infection, Prevention, Control (IPC) guidelines to ensure the health of participants were not compromised. Hence, besides practicing recommended measures of social distancing, masking and frequent sanitization, the use of participatory methods and face to face interviews were limited. The evaluation followed four main stages, viz; Inception, Field Work, Data Collation and Analysis and Report Production and Dissemination of findings.

2.2 EVALUATION METHODS

Inception Phase- (Desk Review)

This stage was marked by a comprehensive review of project documents was conducted. Main documents reviewed include project proposal, baseline report and progress reports. This culminated in an inception meeting held virtually with VNZ and Viva Denmark. The key outputs of the Inception Phase, shared with VNZ, were the Inception Report, data collection tools and Powerpoint presentation.

Fieldwork Phase- (KII, FGD, Questionnaire)

Primary data collection was conducted over a period of two weeks with the assistance of trained enumerators and evaluation assistant. Main data collection tools used during this stage were the Key Informant Interview (KII) Guide, Focus Group Discussion (FGD) Guide and the Parent/Guardian Questionnaire.

Key Informant Interviews

Table 2 shows the key informants interviewed. A total of 15 key informants were interviewed. These were drawn from a list of key project stakeholders provided by VNZ.



Picture 1: Enumerator Training at VNZ Offices

Table 2: List of Key Informants

	Key Informants/ Institution/ Stakeholder	# Interviewed
i)	VIVA Network (Zimbabwe & Denmark); Justice for Children Trust	2
ii)	Child Justice Alliance	9
iii)	Justice Operators	1
iv)	Child Parliamentarians	1
v)	Child Protection Committee Chairpersons (DSD)	2
	TOTAL	15

Focus Group Discussions

Two FGDs with volunteers (Case Care Workers) were held, one per project area. These provided an overview of child protection issues prevalent in their respective locations. The demand for birth registrations, associated registration challenges and the effectiveness of the justice delivery system for children was also highlighted.



Picture 2: FGD with Volunteers in Epworth

Parent/ Guardian Questionnaire Interviews

A stratified random sampling approach was used to identify parents/ guardians for questionnaire interviews in the two project areas of Mbare and Epworth. The targeted sample size was adjusted from the 91 parents/guardians proposed at Inception Phase to a target of 269 parents/guardians. From a total of 35000 parents/guardians reportedly reached by the project, a sample size of 269 was recommended at 5% margin of error, 90% confidence level and 50% response distribution. The increased sample size enabled the evaluation to interview both direct beneficiaries and non-beneficiaries of the project. To ensure Project beneficiaries were not entirely missed through random sampling, the evaluation ensured that at least a quarter of project participants were purposively sampled through the guidance of volunteers. For the other three quarters of respondents, the enumerators used systematic random sampling to identify households for the questionnaire interviews. However, through the systematic random sampling by enumerators, some direct project participants were also randomly identified.

A total of 337 parents/ guardians were interviewed. Table 3 shows the number of parents/guardians interviewed by area and the proportion of respondents that were direct participants of the project.

Table 3: Parent/Guardian Respondents & Proportion of Project Participants

Location	Total Respondents	Project Participants	% Project Participants
Mbare	118	25	21%
Epworth	219	59	27%
Total	337	84	25%

3. EVALUATION FINDINGS

3.1 INTRODUCTION

This chapter presents and discusses the key findings of the evaluation. The findings are drawn from the mixed methods applied; desk review, KII, FGDs and Parent/ Guardian Questionnaire Interviews. The first section summarises the demographic profile of households for the parents/guardians of targeted children. The key evaluation questions, as organized under the OECD-DAC Criteria, are addressed in subsequent sections.

3.2 PROFILE OF RESPONDENTS (PARENTS/GUARDIANS)

Annex I shows the key demographic features of the target group. Most (88%) of the respondents were female. The average size of households for the target population is 5 with an average of three (3) children per household. About 70% of parents/guardians were married or co-habiting, while 15% were divorced/separated, 12% were widowed and only 3% of the parents/guardians were never married/single. The majority (41%) of the parents/ guardians were within the 36-50 years age group, while 9% were between 51 to 64 years and only 3% were elderly (65+ years).

The population group has generally lower levels of education, with a quarter of the parents/guardians having ended at primary level. Only seven percent (7%) of the parents/guardians have proceeded beyond secondary education to advanced level and tertiary education.

3.3 RELEVANCE

1.3.1 Introduction

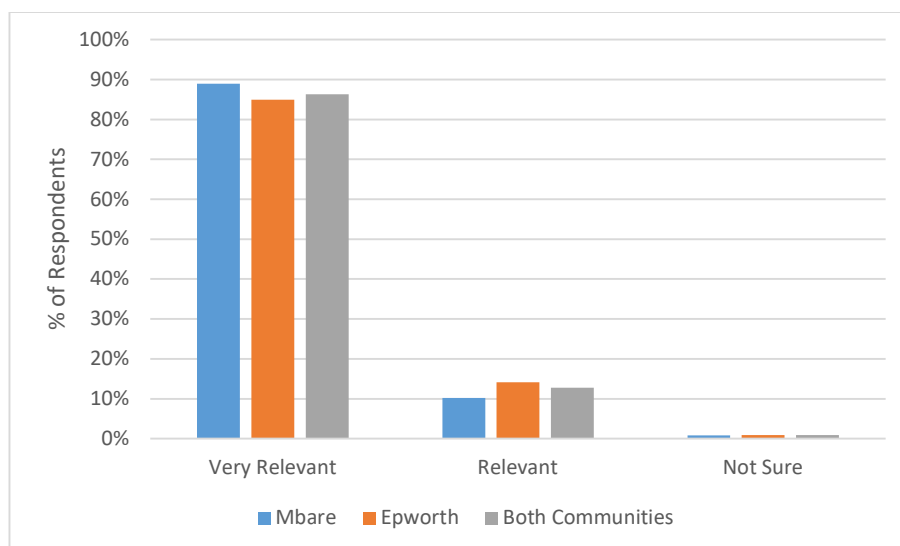
As guided by the TOR, this Section focuses on the extent at which the Project has been relevant to the target communities and targeted beneficiaries. The complementarity of VNZ work to other actors on the ground is also examined. The section largely draws upon input from secondary data review, key informant interviews and focus group discussions held with project participants.

3.3.1 Relevance to target communities and target beneficiaries

The sheer prevalence of child protection cases, and particularly children in need of birth registration and support with litigation services, underlines the relevance of the project to the communities of Mbare and Epworth. The Baseline Report highlighted a very high prevalence of child abuse cases with 85% of respondents indicating that they were aware of child abuse cases in their communities. Reporting of such cases to relevant authorities was very low with people either not aware of the reporting channels or lacking confidence in the effectiveness of the child justice system.

Interviews with parents/ guardians during the end of project evaluation (EoPE) further confirmed that the project was and is still relevant to the targeted communities. Figure 1 shows that 86% of respondents in both communities regarded the project as very relevant while 13% considered it as just relevant. None of the respondents viewed the project as not relevant.

Figure 1 Relevancy of Project Focusing on Child Protection & Birth Registration to the Communities



With the COVID-19 induced lockdowns and schools closed, cases of teenage pregnancies and child marriages in Zimbabwe rose significantly. According to a Newsday Report¹, the government reported that nearly 5000 girls became pregnant and about 1800 entered early marriages in January and February 2021. According to the report most of the girls live in poor suburbs such as Epworth. This further confirms the relevance of the project and the need to continue with project interventions beyond the stipulated implementation period.

Most of the children without birth registration and prone to abuse are orphaned and come from poor and vulnerable families. These include single parent headed families, families headed by the elderly, disabled and chronically sick. Most parents and guardians do not have stable sources of income with some engaged in commercial sex work. Some of the parents do not have own identity documents which further complicates the process of obtaining birth registration documents for their children.

3.3.2 Complementarity of VNZ work with other actors

VNZ worked closely with other organisations (both governmental and the civil society) in Mbare and Epworth focusing on the welfare of children. The project's services were quite distinct and did not result in competition or duplication of services carried out by other agencies on the ground. For instance, besides key government ministries concerned with the plight of children, there were quite a number of other civic organisations reaching out to the needs of children through other services that include, access to education, child protection and food and nutrition security interventions). Examples of organisations that were on the ground include Caritas, Plan International, Danish Churchaid (DCA), children's homes (such as Hupenyu Hutsva), community-based organisations (CBOs), such as Madanhaashe in Epworth. A critical gap in child protection, litigation services and birth registration was quite apparent across the organisations and communities. This gap was then filled in by the project. From the shared beneficiary databases by other organisations, VNZ identified children that needed support with birth registration or child protection services. Through the Ministry of Women Affairs, the project was also linked to the United Nations' Spotlight Initiative focusing on eliminating gender-based violence. The

¹ <https://www.newsday.co.zw/2021/04/zim-reports-major-rise-in-teen-pregnancies-during-pandemic/>

project participated at some of the Initiative's Mobile Clinic outreaches in Epworth through the provision of legal advisors from JCT who also provided specialized litigation services.

Key informant interviews with stakeholders from the Child Justice Alliance highlighted the need for project interventions to be extended beyond the two communities of Mbare and Epworth and reach out to other areas such as Hopley.

3.4 EFFECTIVENESS

3.4.1 Introduction

In this section the project's performance, as measured against its objectives, outputs and targets is discussed. The key questions in the TOR addressed under this section include the extent at which project activities contributed towards the achievement of project objectives. Under the discussion sub-section the effect of Covid-19 on project results is further explored.

3.4.2 Progress Against Objective Targets

Immediate Objective 1: Reduced barriers to justice for 15000 children at risk or victims of exploitation in two vulnerable communities in Harare (Mbare and Epworth)

On this objective, the project sought to enhance access to justice for children at risk or victims of exploitation through facilitating birth registration for children without birth certificates and providing litigation services to affected children. The project also supported the reporting of child exploitation cases to competent authorities.

To achieve this objective, the project established Help Desks and conducted awareness campaigns for birth registrations in the two communities. Some advocacy work was also conducted to address identified challenges and barriers in legal documents and procedures.

A review of project documents shows that the project exceeded almost all its targets under this objective. Table 4 below shows that out of the six (6) targets under this result, 5 were achieved with most of them being surpassed.

At the outcome level, the number of child protection cases reported to competent authorities surpassed the target by over 650%. The number of children that were successfully assisted to get birth certificates reached 1745 compared to a target of 1500. The target for children assisted with birth registration was also surpassed by 129%.

The same trend where targets have been exceeded is also noted at output level. All the outputs, with the exception of one focusing on changes in legal documents or procedures, were achieved. It should however be noted that changes in legal documents or procedures should be considered as higher-level results in the results chain, i.e. at outcome and impact levels as this cannot be achieved in the short-term and would require multiple processes and stakeholders for changes in legislation to be achieved.

Table 4: Immediate Result 1: Performance against targets

RESULT	INDICATOR	TARGET	ACHIEVEMENT	% OF TARGET
Outcome	No. of cases of child exploitation reported to competent authorities	300	Over 1953 cases	Over 650%
	No. of children assisted to get birth certificates	1500	1745 children	116%
	No. of children assisted with litigation services	100	129 children	129%
Outputs	No. of community databases that are updated	2	3 databases were created	150%
	No. of verifiable changes in legal documents or procedures	1	1 recommendation paper produced	Over 50%
	No. of children reached through awareness campaigns	15000	Over 35000 children reached	Over 230%

Immediate Objective 2: Civil Society empowered to advocate for 5 Justice Operators to deliver effective and inclusive prevention, rescue and restoration services to 15000 children at risk or victims of exploitation in two vulnerable communities in Harare (Mbare and Epworth)

This objective focused on building the capacity of the civic society to advocate for the creation of an effective and inclusive environment that provides preventative, rescue and restorative services to children at risk or victims of exploitation. Key activities included supporting following up of cases by child protection committees, operation of birth registration Help Desks, lobbying and awareness raising on birth registration procedures and child protection referral protocol targeting key justice operators. Table 5 shows the project performance against targets for this specific objective.

Table 5: Immediate Result 2- Performance Against Targets

RESULT	INDICATOR	TARGET	ACHIEVEMENT	% OF TARGET
Outcome	No. of cases actively followed up by child protection committees	100	1860 cases	1860%
	No. of well-functioning birth registration information desks	2	2 help desks established	100%
Outputs	No. of organizations represented in the alliance	15	30 stakeholders	200%
	No. of recommendations presented to Justice Operators	3	2 recommendation papers	66%
	Proportion of Justice Operators that adopt and implement recommendations from Child Justice Alliance	60%	All stakeholders (100%) represented in the alliance	167%
	No. of key Justice Operator staff with increased awareness of birth registration procedures and abuse and exploitation referral protocol	20	Over 30 members from justice operators directly involved	150%

	No. of child victims of exploitation empowered to exercise their right to justice	300	Over 700 children who were victims of exploitation were assisted through DSD, JCT and VFU.	233%
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Almost all targets under this objective were achieved, with most having been surpassed. The number of cases actively followed up by child protection committees was extremely high as 1860 cases were reached from a target of 100. The number of organisations represented in the alliance doubled from a target of 15 to 30 organisations. Similarly, the number of child victims of abuse and exploitation assisted through the Department of Social Development (DSD), JCT and Victim Friendly Unit (VFU) more than doubled from a target of 300 to Over 700 children being assisted. The only target not achieved was on the number of recommendations presented to Justice Operators. Out of a target of three (3), the project managed to submit two (2), one being a recommendation on birth registration while the other was a policy position paper. At project design, the target of three recommendations was comprised of birth registration, child protection and policy issues. However, during implementation it was learnt that birth registration and child protection issues are inextricably linked, hence only one recommendation document was found adequate.

3.4.3 Discussion

The project recorded exceptionally very high-performance figures against targets set during project design. This however did not come with additional costs to the project but ensured the project was cost-efficient. Discussions with key informants and community groups highlighted the following as the key reasons for exceeding the targets:

- (i) At project design stage, the prevalence of children in need of birth registration as well as child protection services in the targeted communities of Mbare and Epworth was not fully understood. The high numbers of children reached is one clear demonstration of the need on the ground. Focus group discussions held with community volunteers as well as the parent/ guardian questionnaire administered highlighted that those that were successfully assisted are merely a drop in the ocean as there are still many vulnerable children in the communities in need of birth registration and child protection services.
- (ii) According to KII, at project design stage, the original strategy was to use the few targeted cases for child protection, particularly children in need of birth registration and litigation services, as a launch pad or background information to lobby authorities and policy makers for the establishment of child friendly environment. But upon realizing the urgent need on the ground, the project found it prudent to shift attention towards addressing the urgent needs of children rather focusing on policy change that could take a longer time to realise. At the time when such policy changes would be effected, the lives of targeted children would then have been negatively affected beyond reparation.
- (iii) In addition, the effectiveness of project strategies applied by the project to address the problems was under-estimated at project design as demonstrated by the following situations:
 - At project design stage, budgeting for litigation and birth registration support was specific to children that would be directly supported or reached. During implementation it was discovered that one targeted case ended up benefiting more than one originally targeted child. For instance, on numerous occasions when

pursuing birth registration for one child this ended up unlocking registrations for more children from the same family, especially in situations where the problem was linked to parents that had no identity documents to facilitate birth registration of their children.

- Addressing groups of students at schools, sometimes as many as 1500 per visit, enabled the project to reach out to many children than originally anticipated.
- The active participation of community volunteers in sensitization and mobilization of parents/guardians for birth registration resulted in high numbers of vulnerable children being reached. Discussions with Case Care Workers (CCWs) in the two communities highlighted the critical position played by these volunteers in birth registration for vulnerable children. The CCWs also played a vital role in case follow-ups which resulted in the project reaching many children than originally planned. While the CCWs expressed commitment to their volunteering work, their main concern was on unavailability of project visibility material such as t-shirts, posters and fliers.
- Help Desks were originally planned to run once per month but ended up being conducted once per week. Mobile child protection and birth registration clinics also enabled more children to be reached within the implementation period.
- Multi-stakeholder participation in planning, implementation and advocacy not only enabled the project to reach many children, but also ensured smooth implementation of the project with minimum barriers as the stakeholders, including duty bearers, identified with the project from inception. From an initial target of 15 organisations in the alliance, the project ended up doubling the target.

Targets were however not met in only two outputs; (i) Number of recommendations presented to Justice Operators, and (ii) Number of verifiable changes in legal documents or procedures. The project submitted recommendations on child protection and birth registration. The third recommendation was an oversight at design stage as issues addressed are inextricably connected. But as for changes in policy and regulations at national level, it is the view of the Consultant that such changes cannot be achieved over a short period but would require more time as this involves lobbying with various stakeholders at different levels.

However, the project facilitated a number of dialogue meetings with policy makers focusing on child protection and birth registration. Key participants in these dialogue sessions included parliamentarians, officers from the DSD, RG's office, the Zimbabwe Republic Police- Victim Friendly Unit (ZRP-VFU), Ministries of Education, Youth and Local Government and the civic society. These meetings enhanced collaboration among the key actors in the alliance as they shared a common vision towards enhanced child protection and birth registration. In March 2020, the project facilitated a critical advocacy meeting between the RG's office and DSD officers from Highfields and Harare Central in March 2020. Mbare's DSD District office is located in Highfields. The meeting highlighted key challenges between the two key offices affecting timely production of birth registration. Among the reasons provided included inadequate information provided by DSD. For enhanced registration process, the RG emphasized the need for home visits and thorough interviews by DSD before opening a case and compiling a sociological report. Inadequate DSD staff was identified as a key challenge affecting the quality of reports as staff were overwhelmed by the many cases that required their attention. One key outcome from these meetings was the consent by the RG office to conduct mobile birth registrations for the two communities.

Effects of Covid 19 and Project Adaptations

Covid 19 induced lockdowns had an adverse effect on project implementation. While VNZ managed to continue with project implementation activities, the level of operation by other key stakeholders ranged from complete shutdown to operations being conducted below 50% of capacity. The Registrar General's office, that is critical for birth registration is one such office that was closed for a considerable time when the lockdown started in March 2020. Hence, if it were not for Covid, with budget allowing, the project could have easily more than doubled its reach in terms of awareness raising as well as birth registration.

Mobile child protection and birth registration clinics were being carried out two times per month before Covid 19. These were adversely affected by the pandemic. The same applies to Help Desks that were being conducted on a weekly basis in two strategic centers for the two communities. At the time of evaluation these had since stopped in both communities as at times the turnout by parents was quite high thereby risking contravening laid down Covid 19 preventative measures. Through key informant interviews it was highlighted that the Help Desks are now only open to specific cases that would be called by DSD in batches to come to the Help Desk. This is an adaptation by the project to the pandemic aimed at reducing crowding at the Help Desks. VNZ collected databases of children in need of birth registration from the communities and submitted these to DSD. Schools, community based volunteers, Junior Parliamentarians and Councilors as well as other community level stakeholders also submitted names of children in need of birth registrations to DSD. DSD would then contact the caregivers in small batches of 10 to 15 people to meet at the Help Desks to facilitate the birth registration process. Depending on specific requirements of each case, some caregivers would be called to go to the DSD office or the RG's office instead of the Help Desk.

With controlled visits to the Help Desks, the rate at which cases were being addressed was also significantly slowed down. Volunteers at an FGD meeting conducted in Epworth during the evaluation expressed concern over the time that was being taken to call back the caregivers whose contact details had been submitted to DSD for birth registration assistance. This dampened their spirits to continue mobilizing for birth registration and collecting names of children in need of such assistance. According to KII, besides there being a huge number of children in need of birth registration, some of the contact numbers provided by the caregivers were either wrong or not reachable. It was pointed out that over 70% of calls, especially to Epworth caregivers, could not get through. *To ensure the volunteers remain motivated in assisting vulnerable children to acquire birth registration, regular communications (remotely or in-person) with DSD personnel and VNZ staff is critical.*

While Covid-19 negatively affected the numbers of children assisted JCT still managed to successfully lodge an urgent chamber application (under its Strategic Litigation Services) at the High Court for one child who was being denied access to Assisted Medical Treatment Order (AMTO) offered through DSD due to unavailability of birth registration. This led to the opening of the Registrar General's office for birth registration not only for the directly affected child but also for all other children in need of birth registration at the time.

Other adaptations made by the project, in response to the Covid-19 pandemic include provision of smart phones to lead volunteers to facilitate effective communication, production of Covid 19 awareness materials that included music, videos and Information, Education and Communication (IEC) materials which were distributed via online and social media platforms. The project also provided the volunteers with personal protective equipment (PPE) in line with government and World Health Organisation (WHO) requirements. The model of assistance was

also modified to limit crowding and direct interface with communities, with volunteers compiling the databases and submitting the same to VNZ and DSD for actioning.

3.5 EFFICIENCY

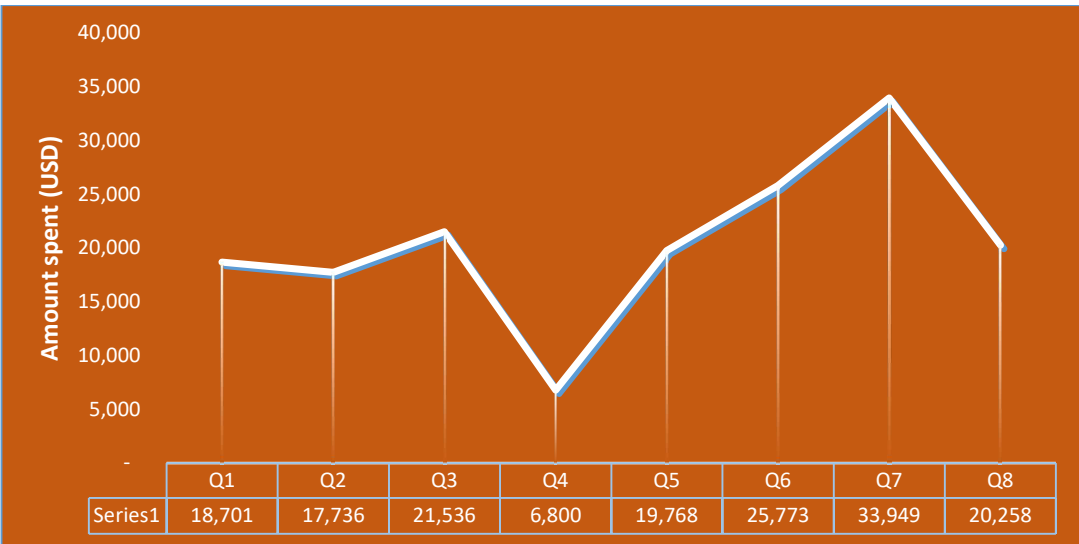
3.5.1 Introduction

In this Section, the project’s timeliness and cost effectiveness is discussed. This also includes assessing the effectiveness of working with local volunteers. At the time of preparing the evaluation report, VNZ was still in the process of producing the project’s final financial reports. Available expenditure data covers Quarter 1 to Quarter 8. Hence, expenses incurred during the extension are excluded from this analysis. With this data it is not possible to assess unity costs of the various project activities and establish the extent at which expenditure was within the allocated budgets.

3.5.2 Project cost-effectiveness

During the eight Quarters, the project had a total activity budget of USD 173,108. From this total budget, the project spent USD 164,520 representing 95% of total income. Figure 2 shows expenditure pattern by quarter.

Figure 2: Project Expenditure by Quarter



The low expenditure levels during the first four quarters reflect the effects of the Covid- 19 induced lockdowns that slowed down project implementation.

Expenditure was reasonably high during the first two quarters of the project but dropped to the lowest level during Quarter Four. The dramatic fall in expenditure during quarter four can be attributed to restrictive stringent measures on movements and gatherings imposed in June following an upsurge in number of Covid 19 cases reported.

On the 30th of March 2020, the Government of Zimbabwe imposed the first nationwide lockdown that resulted in total shutdown of all business activities including operations of NGOs.

This explains the lowest expenditure experienced by the project. Only after the government relaxed lockdown measures and allowed NGO activities as essential activities, did project operations resumed. The trend in project expenditure can be directly linked to Covid-19 response measures enforced by Government. After a brief lifting of the lockdown measures towards the end of 2020, the government again imposed another lockdown at the start of 2021 following a dramatic increase in the number of cases.

During the first year of project implementation, after a review of operations by other NGOs, the project rationalized activities and discarded activities that amounted to duplication of efforts. Consequently, with the approval of the donor, savings made through this process were channeled towards other under-funded project deliverables.

The project also maximized on the allocated budget to reach out to more beneficiaries than originally targeted. The exceeded targets under the Section on Effectiveness, without associated cost-overruns, is a clear demonstration of resource optimization. Another example of resource optimization was demonstrated in the project's ability to increase the number of volunteers by 250% from the originally budgeted 20 volunteers to 50 volunteers that the project finally worked with. Working with community-based volunteers has enabled the project to reach out to more vulnerable children than originally planned without incurring additional costs.

3.6 IMPACT

3.6.1 Introduction

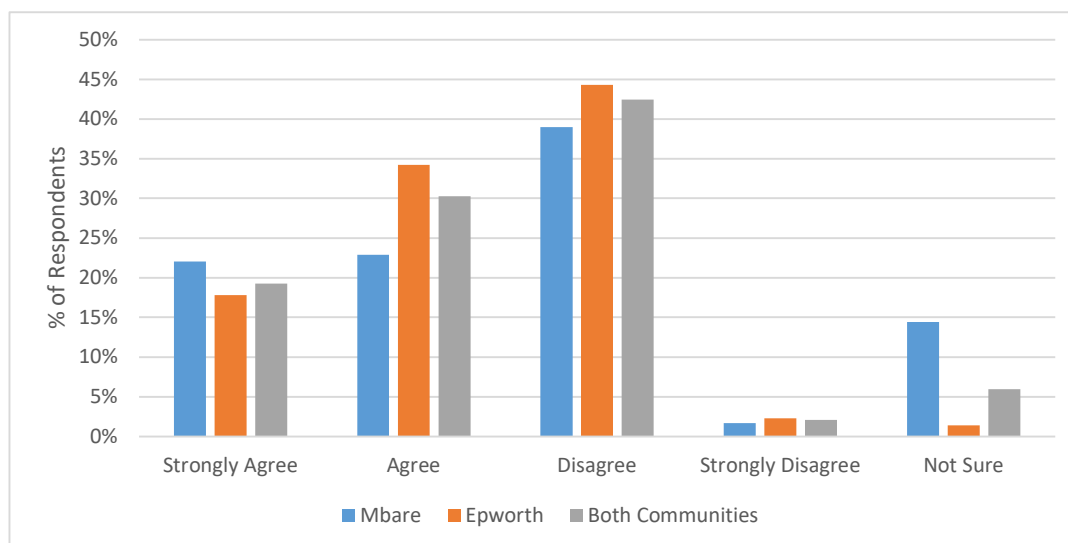
This section seeks to provide highlights of key changes at household, community and national levels that can be attributed to the project. This is achieved through a comparison of baseline and endline information gathered through secondary data review, KIIs and FGDs conducted during the course of this evaluation. The TOR specifically required the evaluation to shed light on key changes brought about by the project at community level, establish if the project has resulted in changes at policy level and in the attitudes and practices of decision and policy makers for the ultimate benefit of the project's target group. Finally, the evaluation was required to establish the extent at which the project contributed to the achievement of broader national and international policies, conventions and targets.

3.6.2 Project Contribution at Community Level

Prevalence of child protection cases

At baseline the prevalence of child abuse cases was high as demonstrated by the higher proportion of caregivers who knew of a child that had been abused. At project start-up, all the respondents (85% Strongly Agree and 15% Agree) had knowledge of a child that had been abused in their communities. Figure 3 shows that at endline evaluation barely 50% of caregivers interviewed in both Mbare and Epworth had knowledge of a child abused in their communities over the last two years (19% Strongly Agree, 30% Agree). This reduction can be attributed to the awareness campaigns by the project over the last two years.

Figure 3: Percentage of caregivers who knew a child abused over the past 2 years



Reporting of Child Abuse Cases to Authorities

Just as knowledge of child abuse cases was higher at project start-up than at endline, the reporting of child abuse cases was also comparatively higher at baseline than at endline. At baseline 56% of caregivers (32% Strongly Agree, 24% Agree) interviewed reported or had knowledge of someone who reported child abuse cases to responsible authorities. At endline, 35% (10% Strongly Agree, 25% Agree) reported or had knowledge of someone who reported cases of child abuse. The comparatively low proportion of caregivers reporting or with knowledge of someone reporting could be linked to reduced incidents of cases of abuse during the past two years vis a vis the period before the project.

Differences in reference periods may have an effect on the comparability of baseline results against endline results. At baseline a recall period of five years was used to assess knowledge of abuse cases. A longer period may affect the recall capacity of respondents while the environment five years ago could be different with few or no agencies raising the awareness of communities on child abuse cases. In addition, as pointed out by one KII, the community's understanding of child abuse would affect the accuracy of reported figures. Some communities restrict the definition of abuse to only sexual abuse, thereby grossly understating the number of abuse cases prevalent in their communities.

Further analysis, through comparing the proportion of caregivers with knowledge of child abuse cases and those that reported the cases, shows that not all cases of abuse are reported to responsible authorities. At baseline 44% of caregivers who knew about child abuse cases in their communities either did not report such cases or did not know if any reporting was done. At endline, only 12% of caregivers who had knowledge of child abuse cases did not report or had no knowledge of reported cases. This is a remarkable improvement compared to the period before the project.

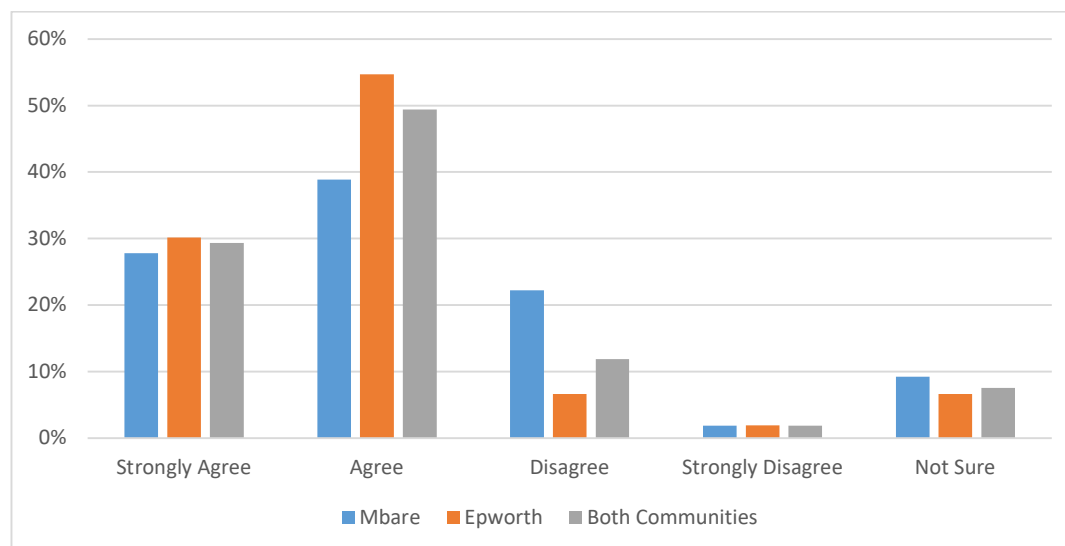
Survey data also shows increased awareness of reporting channels for child abuse. At baseline only 44% of caregivers were aware of the channels compared to 72% of caregivers at endline.

This can be attributed the awareness campaigns conducted by the project over the last two years.

Competency of Justice Operators in addressing reported child abuse cases

There has been a significant improvement in the effectiveness of justice operators in addressing reported child abuse cases. At baseline only 51% of caregivers (10% Strongly Agree and 41% Agree). The endline evaluation shows that 78% of caregivers interviewed in Mbare and Epworth agreed (29%) or strongly agreed (49%) with the statement that '*reported child abuse cases are addressed effectively by Justice Operators*' (Figure 4).

Figure 4: Proportion of Respondents agreeing that child abuse cases are addressed effectively



Only 22% of the respondents were not sure or disagreed with the statement. When comparing the two communities, Epworth has a relatively higher proportion of respondents (85%) compared to Mbare's 67% of the respondents confirming the effectiveness of the justice operators.

However, there is a general misconception amongst some caregivers and even volunteers in the communities that the child justice system is not effective. Endline survey data shows that this misconception is prevalent amongst caregivers who had not reported or heard about any reported child abuse cases to justice operators. Only 9% of such caregivers agreed while 21% did not agree and 70% were not sure about the effectiveness of the child justice system. Such mistrust and misconceptions amongst the general population adversely affects reporting of child abuse cases. Key informant interviews and FGDs held across the two communities confirmed the general lack of confidence among caregivers arising from a general misunderstanding of the justice system. For instance, when an accused who has been reported to authorities has been released on bail, many uninformed community members would construe it as a failure of the justice system.

Birth Registration

Although the endline survey of parents/guardians shows a reduction of known children without birth certificates from the baseline situation, the number of children without birth certificates in the two communities is still very high. At baseline 87% of caregivers reported knowing children in their communities without birth certificates. At endline the proportion of caregivers knowledgeable about such cases had gone down to 64%. A comparison of the two communities

shows that Mbare has a higher proportion (73%) than Epworth that recorded 59% of parents/guardians interviewed that had knowledge of children without birth certificates in their communities. According to key informants, Epworth had more active volunteers compared to Mbare that enhanced greater reach to vulnerable children without birth certificates. This difference is largely due to different settlement patterns. Epworth's volunteers were distributed across seven wards, while Mbare is divided into four wards only with many people residing in flats.

Besides challenges associated with Covid 19 lockdowns, KII and FGDs highlighted a number of barriers that included the following;

- Unavailability of birth records
- Parents without own birth registrations or identity documents
- Separated parents. A number of families have broken due to a number of reasons including economic challenges
- Prohibitive costs associated with gathering required documentation, information or witnesses from different places
- Corrupt officials at health facilities demanding payments for birth records.

FGD participants in Epworth highlighted that a lot of cases have been brought before the project and caregivers and children have been waiting for promised phone calls from the project to pursue the registration process. Nearly three quarters (73%) of caregivers interviewed reported that it was quite difficult to get birth registration for a child while 64% conceded having known families that tried to get birth certificates for their children but all in vain.

Despite the highlighted challenges, households that got assistance from the project to get birth certificates expressed significant change as a result of the project. Hence interviewed caregivers with registered children had hope for a brighter future for their children. Due to absence of birth certificates, most caregivers believed that children would not be able to enroll in government schools or sit for public examinations. When asked about the importance of birth certificates, 47% of respondents indicated that birth certificates are a pre-requisite for enrolling in government schools or sitting for public examinations. Government schools are relatively cheaper when compared to private schools that are expensive and do not demand birth certificates for enrollment. Through KIIs, it was pointed out that this is not the policy of the Ministry of Education. While the Ministry encourages caregivers to access birth certificates for their children and bring such on enrollment, it is not government policy to deny education to children who genuinely do not have birth certificates. The Ministry encourages parents with such children to come out in the open, get written affidavits and enroll their children in school. *"But the problem is that parents do lie,"* said an official from the Ministry of Education.

Another key informant from the child justice alliance indicated that this policy position of the Ministry of Education is not well communicated at school level. For instance, a school head in Mbare at first refused to enroll a child without a birth certificate. Only after the intervention of a Schools Inspector, through the project's facilitation, did the headmaster finally agree to enroll the child. It therefore follows that many disadvantaged children without birth certificates are being denied this right to education due to miscommunication by school authorities.

3.6.3 Project contribution to policy change, attitudes and practices of decision makers

Under the component on specialized litigation services, the project carried out advocacy work aimed at enhancing children's access to birth registration. During the 2020 Covid 19 lockdown, the Registrar General (RG) office was closed and thereby children's access to birth registration

was adversely affected. The project, through JCT, lodged an urgent chamber application for a case that needed birth registration. Through this case, the RG's office was opened for birth registration for many other children that needed the service.

Another key strategic policy area pursued by the project relates to RG's regulation that does not allow a father to register a child in the absence of the child's mother. In October 2020, the project held a virtual meeting with Senior Parliamentarians where a position paper on birth registration was presented. One of the key recommendations on the paper included the need for RG's office to allow fathers with children born out of wedlock to register their children in circumstances where mothers are deceased/ have abandoned their child. For those children born in wedlock, the father can register the child without the mother upon production of a marriage certificate.

While no specific regulations had been amended at national level at the time of project evaluation, the issues raised by the project have since been discussed at Cabinet level. The 25th Post Cabinet Briefing held at the end of July 2021 highlighted significant progress on the Child Justice Bill, 2020 and the Children's Amendment Bill, 2021.

The Cabinet considered and approved the Child Justice Bill. It was highlighted that the Bill will establish a Child Justice System for children in conflict with the law, in accordance with the values and principles underpinning the Constitution and the international obligations of Zimbabwe. The Bill also reviews upwards the age of criminal responsibility of a child from 7 to 12 years and provides for the establishment of child justice committees at national, provincial and district levels that will be mandated with monitoring child justice.

The Children's Amendment Bill, 2021 will result in the Children's Act being amended to align with Zimbabwe's 2013 Constitution and incorporate provisions of International Conventions and treaties ratified by Zimbabwe. The Bill widens and criminalises instances of child abuse to include allowing a child to reside in or to frequent a brothel; causing the seduction, abduction or commercial sexual exploitation of a child; and causing a child to participate in the propagation of child sexual abuse material. A new clause has been incorporated that empowers probation officers to obtain birth certificates of children without parental care.

3.7 SUSTAINABILITY

3.7.1 Introduction

This section discusses sustainability of project outcomes in the long-term and assesses the extent at which the project has contributed towards structural change that will ensure the long-term improvement of the situation of the target group. Lastly, the effect of Covid-19 on the sustainability of project results is highlighted.

3.7.2 Sustainability of project outcomes

The project objectives aimed at; (i) reducing barriers to justice for children at risk or victims of exploitation, and (ii) empower civil society to lobby justice operators to deliver effective and inclusive prevention, rescue and restoration services to children at risk. The main outcomes of the project are at four levels; household, community, institutional and national/ policy levels.

At **household level**, the importance of an identity document cannot be under-estimated. The project has enabled disadvantaged children to access their fundamental right to identity as enshrined in the Constitution, Acts of Parliament as well as regional and international treaties and conventions such as the Convention on the Rights of the Child. This unlocks a whole range

of opportunities for the child and household that include enhanced access to education as well as socio-economic opportunities. For families that were able to obtain birth certificates for their children, birth registration becomes a lifetime change that can never be reversed.

At **community level**, the project worked closely with volunteers (CCWs) who are watchdogs for child protection as well as readily accessible focal points for birth registration. The CCWs occasionally submit names of children in need of birth registration to DSD officers who in turn follow up the cases and assist with birth registration processes with the RG's office. This structure will continue to serve the target communities even long after the completion of the project.

The project established Help Desks in the two communities that were deemed effective and very accessible to targeted communities. Discussions with authorities indicated that these structures will continue even beyond the project as these served as decentralized centers for birth registration information gathering and dissemination.

At **institutional level**, the community-based Child Protection Committees (CPCs) would continue to be watchdogs that would ensure the matters affecting children's well-being continue to take center-stage. These committees work closely with DSD and other relevant government ministries such as Ministries of Youths and Women Affairs.

The **Child Justice Alliance** comprised of key government ministries and civic society is one critical entity in the advancement of children's rights as it brings together all key stakeholders at various levels. VNZ has made use of this group of stakeholders and financially supported meetings of the alliance to deliberate on child protection issues pertinent to the project. Thus, VNZ did not create a separate institution but rode on existing platforms such as the CPC to advance its child protection and registration agenda. Thus, the alliance is not bound by any specific terms of reference apart from that governing the operations of long-established platforms such as the CPC. This poses both opportunities/strengths and threats/weaknesses to the sustainability of the alliance. One key strength of the alliance is that all the individual organisations/institutions represented do identify, in one way or the other, (at different levels) with the key objectives of the alliance, i.e., focusing on upholding children's rights, enhancing children's access to justice, ensuring that children access birth registration and are protected from abuse and exploitation. This ensures issues affecting children will always be on the spotlight across the organisations.

The absence of funding for coordination meetings will certainly be a threat to the sustainability of the alliance. Although the organizations do identify with the objectives of the alliance, required funding to cover costs associated with coordination meetings, poses a threat to the sustainability of the alliance. The change in organisational structures as well as personnel, in the absence of proper handover procedures results in loss of institutional memory and affects continuity and commitment to resolutions that may have been agreed by previous office bearers. For instance, over the past year, the Ministry of Local Government experienced more than three structural and personnel changes with key personnel being assigned to different areas and portfolios. Such changes at organizational levels would require continuous training or awareness raising among new staff if institutional gains achieved within the past two years are to be experienced in the future.

At **policy level**, Cabinet has since discussed and approved the Child Justice Bill (2020) and the Children's Amendment Bill (2021) which will go a long way in improving the welfare of children and children's access to Justice.

Threat of Covid-19 pandemic on project achievements

With more children enrolled in school, caregivers were also hopeful that cases of child abuse and exploitation that rose significantly during the Covid-19 lockdown period would be curtailed. Thus, as long as children are in school, child abuse and exploitation cases within the two communities will be expected to decline markedly. But extended lockdowns are detrimental to the welfare of vulnerable children. Not only are the children exposed to abuse and exploitation, but the number of children in need of birth registration would continue to increase as operations of relevant authorities, such as the RG's office and DSD, are below 50% of capacity.

4. CONCLUSIONS & RECOMMENDATIONS

4.1 CONCLUSIONS

1. The *Access to Justice for Children Project* was a very timely and relevant project that sought to address critical child protection issues threatening the lives of vulnerable children in Epworth and Mbare communities of Harare. While the project achieved and even surpassed its planned targets, the Covid-19 pandemic with associated lockdowns further worsened the plight of vulnerable children. At the time of endline evaluation, cases of child abuse and exploitation were reportedly on the rise. Not only was the project relevant to the targeted communities, but there was a growing call for project services to be extended to other vulnerable communities in Harare such as Hopley.
2. It was very appropriate for the project to pay particular attention to addressing immediate needs of vulnerable children while at the same time conducting advocacy work for the creation of a child friendly justice system. At project conception, the few targeted cases of child protection were aimed at supporting advocacy work in the child justice delivery system. The project was able to adapt to the huge demand of child protection cases, which if not timely addressed would affect the future wellbeing of the children.
3. In terms of enabling policy, the project had made significant progress towards improved birth registration with a position paper presented to senior parliamentarians. Some of the project's lobbying activities have since been reflected in the Children's Amendment Bill and Child Justice Bill ratified by Cabinet during the month of July 2021. However, the evaluation noted that there still existed some gap in information, a general misconception or misinterpretation of existing policy provisions among communities and duty bearers at different levels of administration. The project tended to focus more on awareness raising at community level with limited attention being given to different levels of key stakeholders especially within the birth registration, education, health, security and justice sectors. Much focus on stakeholders was on lobbying for the development of enabling regulations and policies with limited attention being given to what could be done with existing policy provisions.
4. There was a marked reduction in the proportion of caregivers who knew children that had been abused in their communities during the project implementation period compared to the period before the project. The proportion of caregivers knowledgeable about child abuse reporting channels and with demonstrable confidence in the justice system also increased at the end of the project when compared to the baseline period. However, the same cannot be said about caregivers who had no direct interface with abused children or awareness of reporting channels. These caregivers, including volunteers, had lack of confidence in the justice delivery system and hence this could hamper effective reporting of child abuse cases.
5. Structural changes in key member organisations such as DSD and general attrition rates through staff movements tend to be retrogressive as this affects continuity and institutional memory regarding child protection gains that may have been accumulated over time.

4.2 RECOMMENDATIONS

1. In view of the Covid-19 pandemic, there is a critical need for stakeholders in the Justice for Children Alliance to continue with project services focusing on birth registration, awareness raising and provision of litigation services for children abused or in conflict with the law. This should not be confined to the initial targeted communities of Epworth and Mbare but should be extended to other vulnerable communities of Harare that can be identified through the Child Justice Alliance.
2. Both medium to long term advocacy activities and short-term interventions aimed at addressing prevailing child protection issues in targeted communities are critical considerations during project design. While results of advocacy work may take a longer time to be realised, once new policies and regulations have been promulgated, this will benefit disadvantaged children nationwide. In contrast, without policy change, the reach of interventions aimed at addressing child protection issues within specified communities, is very limited.
3. There is need for projects to engage in education and awareness raising targeting duty bearers at different levels of operation. At the community level, development and dissemination of information fliers and posters on key steps, processes and requirements, for instance, on birth registration and school enrolment, would go a long way in addressing rampant miscommunication and misconceptions on the requirements and processes. This would also go a long way in averting some alleged corrupt tendencies by some public officials.
4. To mitigate loss of institutional memory and address unavoidable changes in personnel of member organisations, the project would need to conduct periodic lobbying, training and sensitisation meetings on the child protection agenda with various members of the child justice alliance.

5. ANNEX 1: DEMOGRAPHIC FEATURES OF TARGET POPULATION

Demographic Characteristics	n	%
Sex of Parent/ Guardian		
Male	40	12
Female	297	88
Age of Parent/ Guardian		
Below 18 years	1	0
18-25 years	44	13
26-35 years	116	34
36-50 years	137	41
51-64 years	30	9
65+ years	9	3
Marital Status of Parent/ Guardian		
Single/never married	10	3
Divorced/separated	49	15
Married/ co-habiting	237	70
Widowed	41	12
Highest Level of Education Attained by Parent/ Guardian		
None	5	1
Primary	81	24
Secondary	227	67
Advanced Level	13	4
Tertiary Level (College/University)	11	3
Household Size		
Average household size		5
Average number of children in household		3