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Coordinating Comprehensive Care for Children



Case Study Of 4Children's DREAMS and OVC Parenting Programs in Lesotho

BUILDING TRUST AND MUTUAL RESPECT: STRENGTHENING FAMILIES THROUGH THE RETHABILE "HAPPY TOGETHER" PARENTING PROGRAM

Acknowledgements

This case study describes the learning gained from implementing the Rethabile parenting program in Lesotho. The information in this case study was gathered from project records and from interviews with representatives of the following organizations: CRS Lesotho 4Children DREAMS and OVC projects, Caritas Lesotho and Good Shepherd Sisters. Data collection also involved focus group discussions with parenting session participants and observation of one parenting session. The information-gathering approach ensured that all people consented to sharing information, and that all personal information about children or families concerned has been modified to ensure that they cannot be identified.

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This publication is made possible by the generous support of the American people through the United States President's Emergency Plan for AIDS Relief (PEPFAR) and the United States Agency for International Development (USAID) under cooperative agreement AID-OAA-A-14-00061. The contents are the responsibility of the Coordinating Comprehensive Care for Children (4Children) project and do not necessarily reflect the views of USAID or the United States Government.

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Context of the Rethabile positive parenting program

Initiated in September 2014, the Coordinating Comprehensive Care for Children (4Children) project is a global five-year USAID-funded consortium of organizations led by Catholic Relief Services (CRS) with partners IntraHealth International, Maestral International, Pact, Plan International USA and Westat. 4Children is designed to improve health and well-being outcomes for orphans and vulnerable children (OVC) affected by HIV and AIDS and other adversities. The project aims in part to strengthen and build the evidence base for effective OVC programming through research and evaluation.

4Children Lesotho is housed within the CRS Lesotho office, and together with three other DREAMS implementing partners, has been providing a comprehensive package of services targeting the most at-risk adolescent girls and young women (ages 9 to 24 years) in Maseru and Berea districts since 2016. This comprehensive package of services includes three interconnected interventions for girls and young women: 1) social assets building; 2) socio-economic strengthening, especially Savings and Internal Lending Communities (SILC); 3) strengthening relationships between children and their caregivers through parenting interventions; and 4) HIV messaging. The DREAMS project's positive parenting approach is called the Rethabile positive parenting program and was adapted from the Sinovuyo Teens Parenting Programme, initially developed by Clowns Without Borders in South Africa.

In October 2017, 4Children Lesotho initiated a second project; this project focused on lowering lifelong risk of HIV acquisition for OVC and their caregivers in 46 community councils in five districts in Lesotho with the highest HIV prevalence — Maseru, Berea, Mafeteng, Leribe and Mohale's Hoek. One way in which the project aims to strengthen resilience and well-being for OVC and their households is through using the Rethabile parenting approach for both adolescent girls and boys.

About the Rethabile positive parenting program

The Rethabile positive parenting program for caregivers and teens ages 9 to 24 focuses on reducing harsh parenting practices (i.e., violence) and improving positive parenting practices. The program also helps adolescents and caregivers work together to develop strategies to reduce sexual risk and violence within the home, and more broadly, within the community, by addressing issues such as adult and child substance use, parental stress and depression, parental endorsement of corporal punishment and financial stress. By promoting adult-child communication around topics such as HIV and AIDS prevention, and exploring models of family-focused violence prevention and support, the program facilitates disclosure of HIV status, promotes greater treatment seeking and adherence, and helps to reduce HIV stigma.

What is positive parenting?

Positive parenting¹ focuses on creating safe home environments and building a foundation of support and care for children through affection, quality time, praise and healthy methods of dealing with difficult behavior, such as positive discipline that teaches pro-social behavior.

- **Nurturing parenting** involves helping children develop healthy social and emotional behaviors, teaching life skills, and promoting well-being through modeling healthy ways to solve problems and communicate feelings.
- **Positive discipline** refers to praising, rewarding, supporting good behavior and nonviolent responses to misbehavior that take into account children's cognitive and emotional stage, such as natural or logical consequences, time-outs or taking breaks and redirection.

How is the parenting program delivered within DREAMS and OVC projects?

The Rethabile parenting program is a 14-week program of weekly sessions delivered to 15 adolescent-caregiver pairs per group (30 participants in each group). The groups meet weekly with two facilitators to work together on parent-teen interactions, managing stress and building good, strong relationships. All sessions follow the same basic pattern and use illustrated stories to deliver a core lesson and role-plays, during which participants practice the specific parenting skills that are the topic of the core lesson. At the end of each session, participants are given home practice activities. These activities help participants to remember and strengthen the skills they learned during that session.

The parenting program sessions build on each other to enable caregivers and their adolescents to become more conscious of how they respond to each other, emotions that influence their interactions, how they can manage these emotions, and how to develop positive strong relationships. Each session is thus focused on the following specific core lessons:

- Session 1: Introducing the program and defining participant goals
- Session 2: Building a positive relationship through spending time together
- Session 3: Praising each other
- Session 4: Talking about emotions
- Session 5: What do we do when we are angry?
- Session 6: Problem-solving: putting out the fire
- Session 7: Motivation to save and making a budget with our money

1 World Health Organization (2018). *INSPIRE Handbook: action for implementing the seven strategies*. https://www.who.int/violence_injury_prevention/violence/inspire-package/inspire-handbook/en/



Marapaelang and her 16-year-old daughter participate in a Rethabile parenting group in Ha Fuleni. Marapaelang explained, *“We were like village women, with no confidence. Now we are stronger, we have formed a SILC group and have invited other women from our community to join, and we are now the leaders!”*

- Session 8: Dealing with problems without conflict I
- Session 9: Dealing with problems without conflict II
- Session 10: Establishing rules and routines
- Session 11: Ways to save money and making a family savings plan
- Session 12: Keeping safe in the community
- Session 13: Responding to crisis
- Session 14: Widening the circle of support

Preparations for Rethabile program delivery involved a cascade of training of facilitators. Initially a Clowns Without Borders consultant trained 4Children Lesotho technical officers and their DREAMS implementing partners (Caritas and Good Shepherd Sisters), as well as field supervisors working for these implementing partners (IPs). The field supervisors then delivered the Rethabile parenting program to a *first round* of 3,000 participants (1,500 adolescent girls and 1,500 caregivers), while the CRS and IP technical officers provided supportive supervision and mentoring support to the field supervisors. After this initial experience of parenting program delivery, the best field supervisors were trained and certified as parenting program trainers by Clowns Without Borders.

The DREAMS project subsequently invited local communities in all the targeted community councils to recommend potential Rethabile facilitators — DREAMS Leaders — using set selection criteria (high school graduate, socially engaged, respected, motivated, able to train others). These candidates were then interviewed and a first cohort of 468 “DREAMS Leaders” were identified and trained by the IP field supervisors to deliver the Rethabile parenting program to a second round of 20,000 participants (10,000 adolescent girls

and 10,000 caregivers). In 2017, after recruiting and training 200 additional DREAMS Leaders in remote and hard-to-reach villages, the DREAMS project completed a third round of Rethabile parenting sessions reaching a cumulative total of 43,288 participants.

The Rethabile program not only includes delivering parenting sessions to groups of caregivers and teens, but also follow-up and message reinforcement between sessions.

If caregivers or adolescents missed any sessions, their DREAMS Leaders would visit them at home and provide a “home catch-up” to update them about the content of the session they had missed. Participants were also encouraged to meet weekly with their Rethabile Buddy — another participant that they have been “paired” with from the program — to discuss the activities and techniques that were suggested in the previous Rethabile session (“home practice”). This was an additional opportunity to deliver content to participants who were unable to attend a session.

In the OVC project, the Rethabile parenting program is delivered by trained case management workers who are responsible for the delivery of parenting program sessions, as well as life skills interventions for girls and boys. These case management workers also provide education on violence against children and identify and refer any violence against children cases to the project social worker for response.

Quality of parenting program delivery was ensured through supportive supervision and on-site mentoring provided by CRS technical officers and their IPs, as well as IP field supervisors who have been trained and certified as Rethabile trainers.

What are the results?

In 2016 and 2017, three full rounds of the 14-week Rethabile program were delivered through the DREAMS project, reaching a total of 43,288 participants (21,644 adolescent girls and 21,644 caregivers). Through the DREAMS and OVC projects, the parenting program is currently being substantially expanded geographically, as well as population-wise (adolescent girls and boys and their caregivers).

After piloting the Rethabile parenting program among the initial round of 3,000 participants, the effectiveness of the

Increased sense of self-efficacy among adolescent and young girls who benefited from the Rethabile parenting sessions translated into assertiveness in the way they expressed themselves about their engagement in sexual activities and their understanding of the involved risks.

“From my side, I do not have a specific role model. I do not want to imitate anyone or look up to anyone. I actually want people to look up to me.” — Rethabile program participant

Source: 4Children (2017) Preventing HIV in Adolescent Girls and Young Women: Lesotho. DREAMS Endline Report

program was assessed both statistically and qualitatively in terms of individual benefits (i.e., change of attitudes, self-concept, behavior) and social dimensions of behavior change (i.e., family life, social networks). The program was also assessed to determine if Rethabile participants are aware of any benefits, and if so, how; whether there are demonstrable connections between reported and externally measurable benefits; and to what extent the reported benefits result from the Rethabile program itself. The findings of this assessment showed that parents/caregivers and adolescent girls and young women who participated in the Rethabile parenting sessions experienced positive benefits, including a greater sense of self-efficacy, and appreciated the changes they were able to make in their relationships. All beneficiaries attested to the fact that the Rethabile program positively affected not only the lives of direct beneficiaries, but of other family members also.

Reach, adoption and sustainability

The parenting program’s reach is far beyond the caregivers and children participating in parenting sessions. Caregivers

who participated in the first round of the Rethabile parenting program roll-out reported that their standing in the community has increased because of their engagement in the parenting program. They are called upon to advise neighbors and other community members on matters of child-rearing, as well as to help resolve conflicts within households and among community members. Several participants have become advisors to their village chief and help address sensitive and confidential issues. DREAMS leaders have and continue to provide guidance to community members who have not participated in Rethabile on topics such as how to develop a good relationship with their children (girls and boys), manage anger, and resolve conflicts.

Another example of how the Rethabile parenting program influenced behaviors beyond the members of the parenting groups was shared by ‘M’e Atang Ntelele, a primary school teacher whose participation in the Rethabile parenting program has influenced educational practices in her school. ‘M’e Atang was so intrigued when she first heard about the Rethabile program during the introductory community meeting, that she asked a neighbor if she could “borrow”



‘M’e Atang Ntelele with some of the students in her class.



Matsepo is a DREAMS Leader in Ma'Arone. She reports how the Rethabile parenting program interested her because it is about strengthening relationships between children and parents, and because it is also associated with a SILC* group. Matsepo shared how she was so worried about her daughter — about HIV risk to her daughter, peer pressure and older men. The training introduced her to positive parenting, and she learned how to facilitate such training among others in her community. She believes that the program has made her daughter stronger and more resilient, and it has also had a positive effect on her community. Matsepo states that “before, when there was conflict, I would react immediately. But now I wait, let emotions calm down first, and then I intervene when everyone is more able to be reasonable.”

*Savings and Internal Lending Community, the CRS version of a village savings and loans group

her daughter to join the parenting program together. As 'M'e Atang only had sons, and the DREAMS project was focused on adolescent girls and their caregivers, she initially could not be considered as a DREAMS beneficiary. However, as “caregiver” of her neighbor’s daughter, 'M'e Atang was able to participate in the parenting sessions. From the very start of the program, 'M'e Atang related what she learned in the parenting sessions to her work as a primary school teacher, and applied this learning to praise her students and focus on providing them with positive reinforcement. She quickly found that her students were more motivated to study, and that they loved coming to class and learning with her. All other teachers in the primary school observed the way 'M'e Atang was interacting with her students and the successes she was achieving, and asked her how she did this, which she readily explained. 'M'e Atang Ntelele is now recognized as a role model for other teachers in her school, and advises them on how to use positive reinforcement to motivate their students to perform well. she also serves as a counselor for one teacher dealing with serious aggression and anger management issues – both in terms of helping him be a better teacher and regarding his relationship with his wife and children. The principal of Thathe Primary School reports that 'M'e Atang has had such a positive effect on student performance and on the school’s reputation within the surrounding community that the school

is now reported to be the best performing school in the area. This is all the more remarkable in a setting where classes are very large (60 to 90 children per class) and the school lacks books and other basic teaching materials.

Recruitment of parenting facilitators who live in the same villages as participants is key to sustained behavior change.

Respondents shared how in the first two rounds of roll-out of the Rethabile program, DREAMS Leaders followed up with any participants who missed a session, provided “catch-ups,” and continued to advise and guide caregivers and children who had participated in their sessions even after the full curriculum had been completed. They also highlighted how DREAMS Leaders extended their parenting support to other households in their communities beyond parenting session participants. This continued support is reportedly key in intensifying and sustaining positive parenting practices and would not have been possible had the DREAMS Leaders not lived in the same community.

Lessons learned

As time goes on, the parenting sessions have a greater effect on caregiver-child, household and community dynamics.

Adolescents and caregivers who participated in Rethabile

parenting sessions two or three years ago (in 2016 and 2017) were able to reflect back and identify the various ways in which they had changed, provide examples of how they spent “special time” together, and described how they were happier and trusted each other more. They were also very clear in their descriptions of why this was important to them and to their families and communities. When more recent program beneficiaries considered the outcomes of the parenting program (caregivers and adolescents currently attending the eighth of 14 sessions), their thoughts were much less clear and not as detailed. Caregivers in the current sessions described the benefits they experienced from learning how to manage their anger and solve conflicts but were less able to describe how they used praise and positive reinforcement to influence the behavior of their children. The adolescent girls participating in the same parenting session were able to describe how they should follow the guidance of their caregivers and that they had all accessed HIV testing services but were less able to describe how the positive parenting practices increased both trust in their caregivers and happiness at home. It was clear that parenting and relationship building are complex and need time and repeated practice to achieve lasting and intentional change.

Combining parenting programming and SILC is mutually reinforcing and enables sustained behavior change.

Parenting program beneficiaries, both caregivers and girls, highlighted the importance of the sessions on joint financial budgeting and saving in terms of empowering them to manage their daily lives better and avoid situations of risk. The DREAMS project includes three types of interventions—parenting strengthening, socio-economic strengthening and livelihoods strengthening — and encourages project beneficiaries to participate in all three types of interventions. Socio-economic strengthening is facilitated through the establishment of SILC groups, which help members groups slowly accumulate savings and have a share out, typically after one year. The groups can then continue to function on their own, and many continue to function for years. Beneficiaries from the first three rounds of Rethabile parenting programming shared that participating in a SILC group gives them an opportunity to regularly reflect on their parenting practices and continue to support each other in this regard. It was remarkable how the parenting groups had stayed together, continued to encourage each other to practice positive parenting, and further intensified such awareness and skills.

The active learning methodologies used in the parenting sessions, especially role-plays, are essential for skills building. Both Rethabile facilitators and participating parents and caregivers shared how role-plays help them learn positive behaviors. Both children and caregivers highlighted the importance of acting out the negative and positive scenarios, and while they all loved the singing, physical exercises and games, they considered role-plays to be the most critical activity within the parenting sessions.

Supportive supervision and mentoring are essential to ensure quality of parenting program delivery. In the DREAMS project, the Rethabile parenting sessions are

facilitated by DREAMS Leaders who are community members, while in the OVC project, these sessions are facilitated by community case management workers. Both DREAMS Leaders and community case management workers receive five days of training before they can facilitate any parenting sessions. However, in order to ensure that the parenting sessions are presented as they are intended to be, it is fundamentally important that facilitators receive supportive supervision and mentoring from qualified and experienced parenting trainers. Also, as parenting program facilitators and supervisors reported, participants sometimes share difficult personal experiences during parenting sessions, which can be challenging for the facilitator to manage. Supportive supervision and mentoring are important for quality assurance purposes and as a way to provide ongoing capacity strengthening to these frontline workers and must be considered a core cost in program budgets.

Recommendations for further strengthening of parenting programs

Some respondents shared that children are often hungry, which can make it difficult for them to focus during parenting sessions. It might, therefore, be good to **combine parenting sessions with cooking demonstration sessions** in which participants bring basic ingredients for a simple nutritious meal, discuss balanced nutrition, and prepare and eat a meal together. This would be fun and beneficial for all participants.

All respondents stressed the importance of ensuring **parenting sessions for boys and male caregivers**, as are now being introduced in the OVC project. As one girl shared, *“boys and fathers should be included so that we can speak*

Supportive supervision and on-site mentoring in Ha Ramaema

A visit to an OVC program parenting session for a group of caregivers and boys in Ha Ramaema underscored the importance of supportive supervision and on-site mentoring. It was just the second session, the facilitator was a trained case management worker, a young woman, clearly more educated than the villagers who are engaged as DREAMS Leaders, but uncomfortable with the social interaction parts of facilitation (the essential part) — she couldn’t sing, was stiff in demonstrating how to do exercises and games, and skipped the acting part of role-play (she only read the story, and asked how the parent and child felt and they could do better). She also substantially shortened the session (it was less than one hour). The field supervisor of LIRAC, the IP in charge of OVC project implementation in Ha Ramaema, helped out the case worker/facilitator during the session and provided feedback afterward. It was clear that this facilitator really needs supportive supervision and on-site coaching to ensure effective parenting session delivery, and that her parenting sessions should be monitored to verify quality and inform any other supportive actions.



Caregivers, adolescents and a DREAMS Leader in Ha Tlali participated in Rethabile parenting program sessions in 2017, joined a SILC group, and also established a dance group to stay together and continue supporting the positive practices they learned.

the same language and understand each other.” Many caregivers and girls shared that *“as boys are perpetrators of most violence, they must learn to respect girls and women and understand that if they have a respectful relationship this will also be beneficial to them.”* While DREAMS Leaders often personally shared the parenting learning to help caregivers of boys, they all noted that boys must be formally included in the program. An inclination of boys to be violent was also reflected among the boys participating in the parenting session in Ha Ramaema. At the beginning of the session when asked how they felt, one boy, who was perhaps 10 or 12 years old, said he was very happy and his hands felt so great and tingly that he wanted to beat someone. Later in the session, when discussing a role-play scenario in which a boy wants to say something to his mother who is focusing on her WhatsApp and not listening to him, one participating boy (also around age 12) commented that the boy would be upset and slap his mother.

Program and implementing partner staff considered **how to ensure that parenting facilitators would be adequately skilled**. Staff supporting the parenting program shared concerns about the facilitation skills of some DREAMS

Leaders and case management workers. Recognizing the importance of engaging parenting facilitators from local communities, staff noted that some DREAMS Leaders have excellent parenting facilitation skills, but that others did not and this seriously affected participation rates and positive outcomes. While DREAMS Leaders and case management workers are selected according to clear selection criteria and training includes practical sessions, the quality of their facilitation skills can really only be observed when they are facilitating parenting groups. One suggestion was to **evaluate and drop non-performing facilitators**, and reward performing facilitators as follows: after completing their first round of 14 parenting sessions, facilitators should be evaluated. Those who do not demonstrate required facilitation skills should be dropped, and those who succeed should receive an initial certificate of parenting training and practice completion. The program could then engage these successful facilitators to volunteer for a well-defined period of time (e.g., 18 months or two years), after which they would be rewarded with a certificate of proficiency and possibly given an opportunity to follow an accredited para-social work training course, such as REPSSI’s Community Based Work with Children and Youth distance learning certificate, which can then open up

employment opportunities. With regard to such employment opportunities, it was considered that the Lesotho government's current efforts to expand Early Childhood Care and Development (ECCD) and auxiliary social work services may provide such prospects, but this should be discussed with and agreed upon by the government ministries leading these efforts.

Annex 1 – List of key informants and Focus Group participants

CRS Staff:

- Molarisi Mehale, Chief of Party, 4Children Lesotho
- Moroesi Makhetha, DREAMS Project Manager
- Aletta Koetlisi, OVC Project Manager
- Mookho Thatho, MEAL Assistant, OVC Project
- Kananelo Kutumela, Project Officer Social Assets, DREAMS
- Ntsiuoa Tlhomola, Project Officer Parenting, DREAMS
- Ntsoaki Khosi, Technical Specialist, Gender and Child Protection, 4Children Lesotho

IP Staff:

- Ntsohlo Ranchobe, Parenting Technical Officer, DREAMS, Caritas
- Mathebe Tlali, Parenting Technical Officer, DREAMS, Good Shepherd Sisters
- Lineo Saoana, OVC Social Worker, LIRAC, present during the observation of the OVC program parenting session in Ha Ramaema, Matjotjo, Tebetebe Community Council Lebohang Mosaku, OVC Project Coordinator, LIRAC, present during the observation of the OVC program parenting session in Ha Ramaema, Matjotjo, Tebetebe Community Council

DREAM Leaders:

- Mareitumebe Mojalefa, Ha Tlali, Maseru
- Matsepo Selele, Ha Arone, Berea

Case Management Worker:

- Cecilia Moeti, LIRAC-supported parenting in Ha Ramaema, Matjotjo, Tebetebe

Thank you to the adolescent girls and young women and their caregivers, who also shared their views and experiences.

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