



CENTRE FOR CHILDREN IN VULNERABLE SITUATIONS IN DAVEYTON BRANCH

South Africa Red Cross

CASE STUDY

Photo description: Child participants at South Africa Red Cross OVC Drop-in Centre.
Photo credit: South Africa Red Cross.

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Background

The South African Red Cross Society (SARCS) traces its origins back to its establishment by the Parliament of South Africa in 1921. SARCS operates as a voluntary humanitarian relief and development organisation, collaborating closely with public authorities in humanitarian assistance. SARCS commits itself to the mission of preserving lives, preventing diseases, and delivering a diverse range of humanitarian services. Operating across all nine provinces of South Africa, SARCS has established a robust presence with 51 branches across 9 provinces strategically positioned to address the unique needs of diverse communities. SARCS through its Daveyton Branch located in Gauteng Province, implements the Orphans and Vulnerable Children (OVC) Drop-in Centre Programme at Etwatwa Township. This is funded by the South Africa Department of Social Development. The programme responds to the compounded effects of HIV/AIDS, poverty, and family crises, which have left many children orphaned or highly vulnerable.

Anchored in the IFRC's Health and Care Framework and guided by the Protection, Gender and Inclusion (PGI) Policy, the programme creates safe, accessible, and inclusive spaces where children can receive holistic support. The services include psychosocial counselling, nutritional support, school monitoring, recreational activities, and vocational training (computer literacy and gardening), home visits, and structured community forums that aim for children and their caregivers to be continuously supported. The programme is community-driven, with 29 child and youth care workers, 2 auxiliary social workers, a project manager, an administrator, 2 cooks and over 9 caregivers actively delivering services. The programme is implemented in collaboration with schools, local government, and community-based organisations (CBOs); this enables resource pooling and strengthening accountability to the children and families served.

Who was Supported and How

The SARCS Daveyton OVC Drop-in Centre supports over 470 children (ages 0–17) annually. Children who participate include orphans, children living with or affected by HIV, child-headed households, and children facing extreme poverty.

The OVC Drop-in Centre delivers a comprehensive package of services designed to address the multiple vulnerabilities faced by children and their caregivers. Nutritional support remains a cornerstone of the programme, with children receiving hot meals at the centre, food parcels for households, and support to establish home food gardens, all of which help to reduce hunger and improve dietary diversity. Furthermore the OVC Drop-in Centre caters services for strengthening emotional well-being which includes provision of Mental Health and Psychosocial Support (MHPSS) through counselling, peer support groups, art therapy, and recreational activities that build resilience, reduce stigma, and enhance children's self-esteem. It also delivers educational support around homework assistance, school attendance monitoring, provision of uniforms and learning materials, which have significantly improved school performance and retention among OVC.

The OVC Drop-in Centre also prioritizes prevention and protection, equipping adolescents ages 9–14 with lifeskills that promote HIV prevention, self-protection, and awareness of gender-based violence, thereby reducing risks and fostering safer communities.

Recognising the essential role of family structure, the programme invests in caregiver empowerment through workshops on financial literacy, psychosocial support, and access to social grants, which collectively strengthen family stability.

In addition, a priority is investing in capacity building initiatives for staff, volunteers, and child and youth care workers, with a particular focus on PGI-sensitive modules covering safeguarding, gender equality, and inclusion.

The OVC Drop-in Centre also actively engages in networking and advocacy through partnering with schools, government departments, and CBOs to raise awareness about issues affecting orphans and children in vulnerable situations through advocating for child rights, child safeguarding, and mobilising resources to sustain and scale up the impact of interventions.

Successes

The OVC Drop-in Centre has achieved measurable successes at both individual, household, and community levels, demonstrating its effectiveness in addressing the needs of orphans and children in vulnerable situations. In terms of well-being, children and families report reduced poverty, improved nutrition, and greater access to essential health services, contributing to healthier and more stable childhoods. Moreover, educational outcomes have improved with higher school enrolment rates, stronger academic performance, and delayed sexual debut among adolescents, reflecting enhanced awareness and safer life choices.

At the household level, the OVC Drop-in Centre has contributed to community resilience by equipping caregivers with MHPSS, financial literacy skills in order to enable families to provide more stable and nurturing environments.

Furthermore, the initiative has strengthened institutional capacities within the SARCS and its partners. In particular, over 29 child and youth care workers and volunteers have been trained to deliver PGI-sensitive services, ensuring greater sustainability, accountability, and quality of care. In addition, the OVC Drop-in Centre has advanced system integration by aligning closely with national social protection programmes, which has reinforced its long-term relevance and scalability.

Most importantly, the initiative has demonstrated PGI in action through applying the Minimum Standards for Protection, Gender, and Inclusion by creating safe and inclusive spaces, protecting children from harm, while ensuring that they participate meaningfully in activities that shape their lives. These achievements collectively showcase the programme's ability to deliver both immediate relief and sustainable impact for children, families, and the wider community.

Challenges and Difficulties

Despite its achievements, the OVC Drop-in Centre has faced several challenges that have affected its reach and overall effectiveness.

- Resource constraints remain a critical limitation, as insufficient financial and human resources often lead to staff burnout and high volunteer turnover, particularly due to low or irregular stipends.
- Monitoring limitations, especially the lack of consistent sex, age, and disability-disaggregated data, have hindered comprehensive PGI analysis and limited the programme's ability to adapt interventions to diverse needs.
- Stigma and discrimination, for example persistent HIV-related stigma, discourages some children and families from fully engaging with available services.

To mitigate these challenges, SARCS continues to strengthen its community mobilization through leveraging local goodwill and partnerships to expand resource availability, while also providing training for volunteers on PGI-sensitive approaches to ensure more inclusive and effective service delivery. Additionally, the participatory monitoring and evaluation methods such as collection of community feedback continues to enhance accountability and allows greater responsiveness to the needs of children and caregivers.

Lessons Learned

The experience of implementing the Daveyton OVC Drop-in Centre has highlighted several important lessons that can inform future interventions.

- 1- **Sustainability is highly dependent on resources**, as persistent financial and infrastructure constraints undermine service quality making it difficult to retain trained staff and volunteers.
- 2- **Holistic support is essential**, since addressing only one dimension of vulnerability such as education without nutrition or psychosocial care risks leaves critical developmental gaps unaddressed.
- 3- **Combatting stigma remains a priority**, as HIV/AIDS-related stigma continues to discourage families from accessing services; this also reinforces the need for sustained community sensitization and inclusive programming.
- 4- **Mainstreaming PGI** across all activities has proven to be essential in achieving stronger outcomes. Specifically, integrating dignity, access, participation, and safety ensures that services are both inclusive and equitable.
- 5- **Community-driven approaches** work best, as initiatives rooted in local mobilization and participation are more sustainable, culturally appropriate, and scalable, filling the gaps left by overstretched formal safety nets.