

Creating a Targeted Household Referral System: A Case Study of the Amajuba Child Health and Well-being Research Project (ACHWRP)

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INTRODUCTION

- ACHWRP is a research study conducted in the Amajuba District of KZN
- Referral system was established in 2004/5
- Lack of access to grants and social support services are commonly reported by study households.
- Referral system was established with Department of Education's PGSES to attend to mental health referrals;
- and Department of Social Welfare to resolve households with grant access challenges.
- Ethical, logistical and financial benefits to partnering can address challenges for stakeholders working with underserved households.

How did the referral system start?

- Households reported problems and queries with DoE and DSW to the field researchers.
- Researchers are limited in scope, referral system was the only way (intervention) to go.
- ACHWRP engaged these two government departments as to creating formal referral system.
- Both departments in the Amajuba District accepted the suggestion.

Methodology (the process)

- Study participants with expressed need of referral are identified by field researchers.
- Explain our role and limitations as a research project.
- Explain to hh what a referral is.
- Back in the office they check with the senior staff whether a case deserves referral.
- If eligible, seek consent from the hh.
- Full information is gathered through the use of a tool that was developed by the role-players.
- The form is sent to the appropriate department.
- ACHWRP monitors the progress and gives feedback to the hh.

ACHWRP CAREGIVER CONSENT FORM

Referral Particulars

Auto ID
Referral No.
Referral date
Department Name-1
Department Name-2

Identifying Particulars of Child

Child name
Child Surname
Gender
Age
Grade

School Particulars

School Name
School Contact Name
Telephone1
Telephone2

Family Particulars

Caregiver Name
Physical Address
Postal Address
Caregiver Phone1
Caregiver Phone2

Location of Household-Other Additional Information to Locate

Landlord
Neighbor
Eskom
CHW
Inkosi
Induna
Other
Councillor

Referral Reason:

Feedback Date: *Three weeks from Date of Refc*

Referred By:

ACHWRP Caregiver Consent Form



UKWAZI NGEKUSASA LETHU
UNDERSTANDING OUR FUTURE

Amajuba Child Health & Well-being Research Project

Findings

- Hh do not know where to go/turn to when faced with such problems.
- Financial constraints.
- Lack of understanding the systems & illiteracy.
- Lack of follow-up by officials.
- The process of developing the referral system needs buy-in and commitment from involved parties.
- Database of referrals and good record keeping and communication.
- Amount of personnel effort devoted and communication expenses.
- Two case studies will be discussed demonstrating the benefits to households of referral partnership. (See next slide)

Case Study # 1

Referral Number: 137

Date: 27 July 2005

Case:

- A 13 year old boy child has mental health problems as well as a medical problem, but there is no money to take him for treatment. Referred to DSW and DoE.

Response from DSW:

- Home visit to interview the child and his mother. He reported that he has a reading problem. The child's mother reported that her child is a slow learner. The caregiver was advised to apply for care dependency grant at DSW. She will be assisted in finding a special school for the child. His teacher informed the social worker that he was supposed to go to a special school in 2004.

Case Study # 2

Referral Number: 453

Date: 22 July 2005

Case:

The mother of a 12 year old boy child passed away and he is taken care of by relatives. Child is having problems with bladder and bowel control which causes problems at school. Referral to DSW and DoE.

Response by DSW:

The case is still under investigation to process foster care grant. Application for foster care grant is still in process. DSW to take application to court, arrangements to be made with the magistrate as the father is unknown. The child was referred to hospital and he is on treatment.

Case Study # 3

Problems facing the school:

- Child headed households
- HIV positive children.
- Abandoned children.
- Sexual, emotional, and physical abuse of children.

Teachers have tried to

- Visit parents/or caregivers in the child's household.
- Organized meetings with parents.
- Approached social workers.

ACHWRP's position:

- ACHWRP is a research organization.
- Departments of Social Welfare and Education referral.
- Share our research experiences with the school.

Way forward:

- ACHWRP referred the school to the PGSES unit in the DoE
- The school principal confirmed that an official from DoE contacted her to arrange for a visit. ACHWRP still awaiting feedback from DoE on the progress of this matter.

Conclusion/Recommendations

- Community groups can develop similar partnerships with government departments.
- Social and economic capital of stakeholder and households can be improved.
- Research studies can fulfill ethical responsibilities to study participants utilizing existing referral systems without compromising study methods and data quality.
- Intervention can be more cost effective and have positive impact on children and families.