

the infant trust

..... from broken innocence to a healthy future

Strategic Plan 2007 - 2011

UK registered charity 1109244

www.infant-trust.org.uk

Foreword by Lesley Rudd, founder of **the infant trust**

The abuse of small children has to be one of the vilest and most appalling crimes we can imagine. Some of the stories I have heard and some of the impact I have seen are beyond any kind of understanding and simply make it more important that we do something, anything, to help. Look at your children or your nephews and nieces or your grandchildren and imagine if it were them who were being so abused; it defies belief and shakes us to the core.

As many people know, I came across the rape of infants through a story in the press - the rape of a 5 month old baby in 2003: a baby girl who was born to a prostitute and hung on coat racks whilst her mother performed, a baby girl who was so severely damaged that she had to have many reconstructive operations, a baby girl who is now recovering with a wonderful, supportive adoptive mother and is, in that sense lucky. I may have worked in and out of children's health services, mental health services and forensic health services in the UK for most of my career but this was something totally different and totally shocking; then as I began to research the problem in southern Africa, I realised the extent of the crisis and decided that, little as it might be, I had to do something to help alleviate the problem and protect children vulnerable to abuse.

With the supportive help of my family, two ex-colleagues, both as experienced as I in children's services, and friends, we set out to define and identify what we could do and what we could realistically achieve, with your help. So **the infant trust** was born.

From the moment I began to talk about these matters I have had huge help from my family who have given time and know-how and funds unstintingly, and also from friends and colleagues and now a growing band of other supporters.

This issue touches us all, if we can't look after and protect the most vulnerable in our society, in our world, what kind of people are we?

Mission statement

the infant trust exists to alleviate, treat and prevent the abuse of infants and small children.

STRATEGIC PLAN 2007 - 2011

Executive summary

the infant trust was set up in 2005 when the extent of the problem facing the young in South Africa [SA] was becoming known. Childline SA has estimated that annually there are 41,013 rapes of young children. The issues facing young vulnerable children in SA are often complicated by HIV/AIDS and given that there are already many charities which work on disease awareness and prevention we decided to take a different focus. We have laid out our values, beliefs and ways that we will work. To deliver all of this we have devised a simple 4-point plan:

1. Medico-social support for abused children who are taken to a crisis or other centre, through supporting and training volunteers working in these centres
2. Provision of more safe places for defenceless and abused children – particularly orphans and vulnerable infants/children
3. Developing and funding training packs and programmes for community and outreach workers, nursery and crèche workers, traditional healers and home workers to enable them to understand, identify and deal with suspected abuse
4. Raising awareness through research and publicity campaigns

In years one and two we defined our beliefs, addressed all the governance, legal and official matters relating to the setting up of a charity and this strategic plan sets the direction for the next phase of our development. We have undertaken considerable research, set up and developed our website, produced publicity material, made many sites visits and developed excellent partnership arrangements with organisations in South Africa dedicated to treating and preventing abuse against small children

We raised just under £20,000 in year one and secured funds of £100,000 spread over the next three years; we now work towards steady growth through fundraising. Our funds will be allocated proportionately for:

1. Training = 50% of our work,
2. Support Safe Havens = 35% of our work
3. Research = 10% of our work
4. Pump-priming new projects = 5%

In order to ensure value for money and obtain results the money is paid to our partners in agreed stages following clear updates and progress reports. For each project we have agreed contracts on what is to be done and when reports will be sent. All projects are visited.

Our general objectives for 2007 – 2011 are set, with specific short term objectives for 2007 – 2009 and longer ones for 2009 – 2011.

Background to our work

In South Africa violence, premature death and illness are widespread. Within this setting the most vulnerable in society are mainly at risk. Some of the relevant facts that have led us to begin work in South Africa on the emotive issues of small child abuse are:

- Most abuse is sexual but there are also very high numbers of physical and emotional abuse – sometimes all three; most children are abused by a 'known' other
- In May 2002 the SA government said that 5,859¹ cases of rape of young children were reported to the South African Police Services. Many estimates² put the number at 7 times this figure: 41,013
- In 2004 Childline SA noted a massive increase in the numbers of child sexual abuse, up by 400% was recorded on the previous 10 years³; for example, in Kwazulu province, over 75% of all rapes are against children⁴ younger than 18 years old
- In 2001⁵ two thousand and forty [2,040] children in one province, Gauteng, under 12 years of age were physically and traumatically raped.
- It was reported in 2004 that 50% of all children attending KwaZulu therapy services⁶ [the only figures available] following abuse were under 7 years old
- Because of the lack of facilities and services and safe havens many abuse sufferers have to return to their 'families'
- HIV/AIDs is decimating families and extended families; child-headed families are becoming the norm, and they are in the greatest danger from abusers simply because they are the least protected. The numbers of orphans of all ages, particularly babies, is rising due to HIV/AIDs deaths, in some provinces over 40% of the children have lost both their biological parents and are either living with caretakers or on their own as sibling groups⁷
- The numbers of street children left alone during the day is rising rapidly – they are extremely vulnerable.
- The age of the perpetrators is getting younger – according to Childline SA⁸ ages of 9 and 10 years are not uncommon and children from all racial groups are raped with the numbers proportionate to the population figures
- Only around 1½ % of perpetrators are found guilty and convicted
- Unemployment in at least 5 of the 8 provinces in South Africa is running at around 70%; many children leave school before they have the opportunity to matriculate and gain the education they need.

¹ 15th May 2002. Report to SA Government by Minister of Safety and Security

² Cawood, 2001b; Childline, 1991 - 2002

³ Cawood, 2001b; Childline, 1991 - 2002

⁴ Childline, SA

⁵ The Teddy Bear Clinic, Johannesburg [2001 produced the latest most accurate figures]

⁶ Childline KwaZulu, 2002

⁷ Cawood, 2001b; Childline, 1991 - 2002

⁸ Cawood, 2001b; Childline, 1991 - 2002

There are many different models of providing frontline care for children who have been abused. The South African National Prosecuting Authority provides some funds for Thutuzelas [crisis centres]; there they aim to bring together all the elements of treatment and follow-up care. The Thutuzelas are staffed by willing but largely untrained volunteers and a few paid care workers. Volunteers in these, and numerous other children's services, are paid a small stipend for between 40 and 80 hours a week. Because many see volunteering as a job some services will not use volunteers, or only use them for a maximum of one year; this decision has a major impact on what services can be provided. It is, however, informally and formally recognised that volunteers are a major source of information and knowledge for their community

Our beliefs and values

the infant trust has been set up as we believe that every child has an unalienable right to be safe and free from violence, harm and abuse.

the infant trust believes that one of the best ways of breaking the cycle of abuse is to fund and support local communities to develop the skills to help them help others.

the infant trust believes that if we help women to gain knowledge and skills this will help them into paid work, it will assist in the future of their communities and also help the mothers of the future to protect their own children. The empowerment and ability of women to be economically self-sufficient is crucial, and training is a vital element.

the infant trust believes that offering funds for training is a key way to empower local people

the infant trust believes that by supporting volunteers we can help people to develop skills to advantage their communities

the infant trust believes in working in partnership with local services and with organisations of all cultures and beliefs

the infant trust believes that our work should, wherever possible, work towards achieving

- one of the United Nations Millennium goals – Goal 3: to promote gender equality and empower women⁹
- the aims in The United Nations Secretary General's Study on Violence Against Children¹⁰.

⁹ www.millenniumcampaign.org

¹⁰ <http://www.violencestudy.org/r25>

the infant trust will ensure good governance, adherence to accepted good practice in running a charity/organisation and integrity in fundraising and allocation of resources

the infant trust has determined to fund projects in South Africa as close to where the abuse is happening as possible, and only in partnership with viable and recognised organisations where the chances of additional abuse are minimised and where we can work with the organisations to improve services for children. In that context the infant trust is not a conventional aid agency.

the infant trust will ensure that each project is well defined, clear in its objectives and time-limited; we recognise that we work with organisations that may be run by enthusiastic volunteers, and this should be no bar to our support.

the infant trust funds will be largely directed at revenue costs rather than one-off grants for bricks and mortar.

Our Achievements

In year one – our setup year 2005-2006 – we defined who we are, what we will do, how we can work most effectively from a distance and how we can best access local community services. We addressed all the legal and official matters relating to the setting up of a charity and this strategic plan sets the direction for the next phase of our development.

At the same time we undertook considerable research and made several fact-finding missions to assure ourselves of the need for the work and the best ways of working at arm's length. To make this possible we have been extremely fortunate to have had the costs of travel specifically funded by individual donors. The value of these site visits in building relationships and defining projects is immense. We are mindful that this may not be sustainable long-term. To this end every project will have management and travel costs incorporated and proportionate to the project.

We have now set up and developed

- publicity materials based on research
- the website
- good governance arrangements,
- criteria for funding,
- policies for the organisation
- projects for funding application.
- service levels agreements with partner organisations for all our projects

We now have good and thriving partnership relationships with local South African services, and have met many experts in the field who have worked with us to develop new projects.

We started fund raising immediately although the charity was initially pump-primed by family and friends. In order to start the charity on a proper footing there were some immediate expenses which were unavoidable and these included legal fees, accountancy fees and registration fees. In our first year we raised just under £20,000 and have, so far, secured at least £100,000 over the next three years, 2006 – 2009 inc. Consistent and reliable access to funds is our biggest requirement. It is our intention to keep administration costs to a minimum aiming to ensure that as much as possible is directed to helping children

The development of our strategic direction

SWOT analysis

ISSUE
<p>Strengths</p> <ul style="list-style-type: none"> • Trustees with first hand experience of working with children • High profile Patrons • Run by a dedicated and committed team • Driven by ideological and humanitarian considerations • Connections into many professional groups of people • Time to devote to the work • Experience in running organisations, training and leadership
<p>Weaknesses</p> <ul style="list-style-type: none"> • Too few Trustees with consequent effect on Chief Executive • Limited [but growing] expertise in fund raising or running a charity • In-house financial and accounting expertise
<p>Opportunities</p> <ul style="list-style-type: none"> • No other charity in the UK is working in this field – unique selling point • Other charities working in related fields (particularly those working with HIV/AIDS?) may be willing to consider partnership arrangements
<p>Threats</p> <ul style="list-style-type: none"> • Other large established charities with very wealthy donors and Patrons • Keeping up the motivation • Constantly trying to source money • Drain on time and energy

In the light of all this analysis we have determined HOW¹¹ we will work:

Our aim is to focus exclusively on four things - training, the protection of vulnerable children, fostering research and public awareness and pump-priming new projects:

1. Training

Training can be done at several levels¹² and our support will include

- Volunteers and /or staff who work in centres or homes where they meet and/or work with vulnerable or abused children
- Stipends to support the learning and work experience
- Direct training costs
- Travel to and from the training venues [for trainees or trainers]
- Motivation and support – T-shirts, books
- Access to and fees/support for auxiliary social work courses

2. Supporting safe havens for vulnerable and abused children through the partnership development of

- Residential homes
- Foster homes
- Host families
- Day care facilities

This might include start-up costs, the ongoing stipends for volunteers, training or ad hoc grants.

3. Research

We will support national or international programmes of research into the reasons for and possible solutions to infant and small child abuse in South Africa. This will be overseen and supervised by approved academic institutions

4. Pump priming new projects

Any new projects we support will have to fit with our plans to protect and / or treat the most vulnerable children

¹¹ Appendix 1

¹² Appendix 2

General objectives 2007 - 2011

We will work exclusively in South Africa until 2008-9 then review with a view to expanding to other sectors of sub-Saharan Africa.

When we develop work outside South Africa we will develop a p/t paid post in SA to monitor and project manage our continuing work in South Africa

Providing ring-fenced funds are secured specifically for travel the Chief Executive will visit SA regularly to develop and maintain relationships, find new projects and ensure probity in expenditure

Fundraising will be a major part of our work over the foreseeable future and the intention is to raise at least 30% more each year growing to £150k - £200k income pa by 2011

The Board of Trustees will manage and monitor the work of the charity until there is a certain income of £100k a year, and then there will be consideration of a paid CE post – possibly part-time

Every project will have agreed reporting and evaluation arrangements to ensure value for money and the quality of the service provided

Specific objectives 2007 - 2009

Governance

- Develop a fund raising committee to lead on fundraising
- Secure a further two high profile Patrons
- Recruit a trustee to manage and oversee the accounts
- Secure a Board of 6 trustees + Chairman
- Consider administrative support for fund raising, administration, publicity and communication when the charity has a secured income of £50k pa
- Register as an NGO in South Africa

Funding projects

- Support a growing number of safe havens each year for small children through training and grants
- Fund a minimum of 50 volunteers working with damaged or vulnerable infants and small children every year by 2009, and continue to grow our volunteers programme
- Fund 100 training packs / training places a year
- Support increasing numbers of community projects dedicated to preventing or treating abuse through training

- Pump prime new projects that involve the safety of orphaned and/or vulnerable small children

Fundraising and communication

- Set up a major donors programme
- Access philanthropic funds
- Aim to source European funds
- Raise our profile in the market, and awareness to the public
- Increase our private donors numbers

Additional objectives 2009 – 2011

Fundraising

- Have a major donors programme in place
- Have a fund raising committee in place and delivering
- Secure several regular corporate sponsors

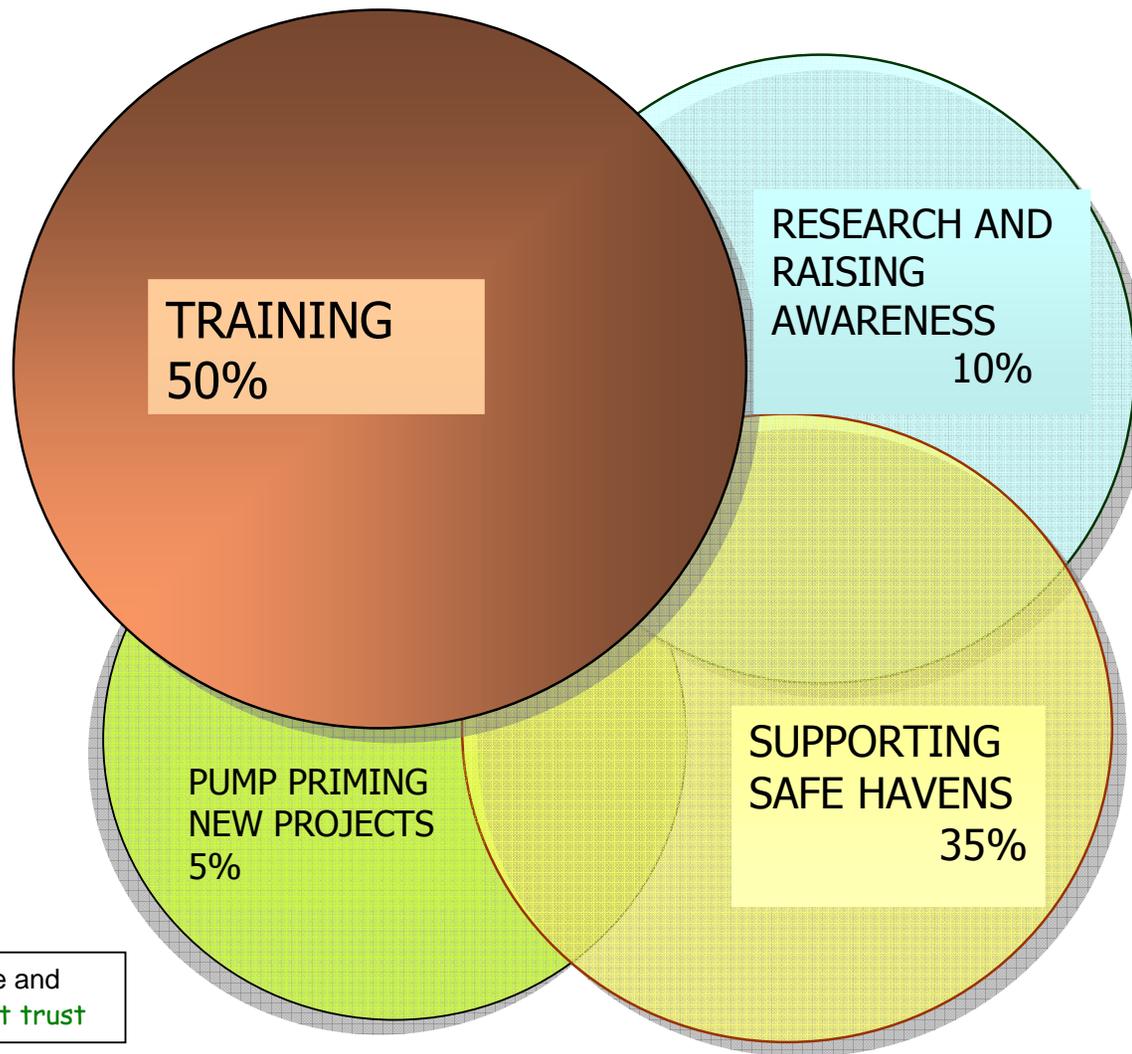
Management

- Reviewed the first three years including all the projects, then review this strategy
- LR will retire from the Chief Executive role by 2011 to handover to another and equally motivated individual to continue to drive the work forward.

Conclusion

This is an ambitious plan for a new charity but one that we believe is achievable given its excellent start. We have been extremely fortunate to have been able to visit South Africa several times thanks to the generosity of two main donors who have very specifically funded the cost of travel. These visits have enabled us to establish the real problems, identify and develop important partnerships, begin and build on projects, and develop the know-how to work successfully.

Lesley Rudd
Chief Executive



The main purpose and work of **the infant trust**

Appendix 1

