

## **Information on icdp in South Africa 2013-2014**

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### **1. A short description about your team**

We are currently aware of 3 organizations with a focus on children and youth, who are including icdp in their projects. They are Dlananathi, Letcee, Gamalakhe Development centre ( NGOs)

Charmayne Forster (Letcee) and Rachel Rosenthal–Thresher (Dlananathi) are the team leading icdp in South Africa at the moment.

During 2013 we were delighted to both be certified as Trainers Gugu has almost completed her requirements to be certified as a third trainer.

Sine Shusha, Nomatandazo Langazane and Thobe Ncama attended the Trainers workshops and are currently being mentored as they continue working towards becoming trainers.

### **2. Where you work.**

Most interventions are in Kwa zulu natal , with a focus on the impoverished under resourced areas close to where the organizations are based.eg Pietermaritzburg and districts, Gamalakhe on the south coast, and Greytown and the Umzinyathi district . An organization called Copessa in Soweto is also beginning to use icdp.

### **3. The target groups for the ICDP intervention**

Staff of the organizations- to become icdp facilitators

Caregivers/parents of young children

Student pre-school teachers

Abahambi(Early childhood development facilitators) who implement a home based Ecd programme to vulnerable children in their homes

House mothers in a children's home

Pre-school teachers

Toy librarians

**4. Number of trained caregivers, facilitators, trainers (include gender if you know it)**

**Completed**

Trainers 2 Female

Facilitators 1 Male 17 Female

Caregivers 1 Male 49 Female

**Partially completed**

Facilitators 5 male 11 female

Caregivers 25 female

**5. Successes**

ICDP fits well with play! It just fits and we love it.

ICDP is now a core part of our program.

Organisations now have more Staff who are icdp facilitators and supportive of the programmes

Outsiders have observed an improvement in housemother's interactions with the children

Abahambi comment often as to how icdp has changed them!

**Difficulties**

Disappointed with lack of implementation by some of those who were trained;

We need to think about how we recruit and prepare those we invite for training better;

Resignation of icdp trained staff can impact on planned projects

**6. Lessons learned**

If facilitators are not part of the implementing organizations, they can lose interest. We need to find ways to keep them motivated.

The value of there being dedicated funding to implement icdp groups.

## **7. Plans for the future**

3 facilitator groups –one in each organization

At least 15 caregiver groups

To try and re -motivate some previously trained facilitators to run caregiver groups

To put together a database of icdp trained people in SA- to perhaps organise a 2 day icdp seminar.

To continue advocating to funders and government departments to try and get icdp adopted as part of interventions.