The “Urwaruka Rushasha” (New Generation) project was developed by the International Rescue Committee (IRC) to respond to the needs of the poorest and most vulnerable children in Burundi by building the economic capacities of their families and improving their ability to provide a safe and nurturing environment for their children. Only three months after its inception, the first quarterly impact monitoring assessment suggests that the project is having an impact on children’s lives.

An Overview

Recovering from decades of conflict that claimed 450,000 lives and forced over a million people to flee their homes, Burundi is one of the poorest countries in the world. Since 2003, over 450,000 refugees have returned to the country and potential for political instability remains high. Economic opportunities are scarce and many families, particularly those that have been most affected by conflict and displacement, lack the capacity to adequately respond to children’s needs, fulfill their rights, and protect them from violence, abuse, and exploitation.

To improve the safety, wellbeing and development of vulnerable children in the Makamba and Bujumbura Rural Provinces of Burundi, the “Urwaruka Rushasha” (New Generation) project is aimed at achieving two outcomes:

- Families have increased financial assets.
- Children are active participants in defining their own wellbeing, and families can describe techniques to protect children.

To achieve the program’s intended outcomes, the IRC is implementing two main activities:

- Supporting the establishment and functioning of 80 Village Savings and Loans Associations (representing approximately 1600 households); and
- Engaging half of all VSLAs in “Healing Families and Communities” discussion groups that raise awareness about issues including child protection and participation within the family and community, health, education, family budgeting and positive discipline.
The baseline assessment revealed significant child protection and education needs:

With 62.6% of all surveyed households falling below the poverty line:

- 68.5% of boys and 61.5% of girls suffered chronic malnutrition;
- 37.2 percent of girls and 32.7 % of boys between the ages of 5 and 11 were engaged in child labor;
- On a wellbeing scale of 0-14, the average children’s wellbeing score was 4.65.
- Only 14.7% of all secondary-school aged boys and 9.3% of all secondary-school aged girls were enrolled in school.

Evaluating project impact

In line with its commitment to implementing programs that are both evidence-based and evidence generating, the IRC is carrying out a rigorous impact evaluation with a randomized control trial to assess the impact of VSLA activities and the added impact of the Healing Families and Communities discussion series on:

- Spending on children’s education, health, nutrition and clothing;
- Children’s education, health, nutrition and wellbeing;
- Parents attitudes towards discipline and their ability to protect their children from violence, abuse and exploitation; and
- Children’s participation.

The impact evaluation has four primary components: a baseline assessment, program monitoring through quarterly quantitative surveys, a midterm impact evaluation, and a final impact evaluation. In each phase of the evaluation process, data is collected from children (with parental consent) and adults using quantitative surveys. The children’s questionnaire includes questions about:

- Education,
- Labor,
- Parental treatment and punishment,
- Family functioning, and
- Psychosocial wellbeing.

Surveys issued to adults include questions on:

- Household demographics, assets, consumption and expenditure;
- Family functioning and health;
- Treatment and punishment of children; and
- Children’s health, nutrition, education, labor and wellbeing.

Qualitative interviews and participatory activities with children were carried out to develop contextually appropriate measures of family functioning and wellbeing.

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1 To ensure the quality of the impact evaluation results, project participants are divided into "treatment" and "control" groups. The control group is a waitlisted group and all participants are guaranteed to receive the services offered in the project a year later than the treatment group.
What we are achieving: the results of the first quarterly monitoring survey

The first quarterly monitoring survey was conducted between August and September 2010, beginning three months after the VSLAs began functioning. The survey involved 189 households that were receiving VSLA support. 77 of these households also had a member who participated in the Healing Families and Communities discussion modules.

The results of the first quarterly monitoring survey reveal that after just three months, the “Urwaruka Rushasha” (New Generation) project is already having a positive impact on the lives of children:

- The percentage of all respondents who reported having yelled or screamed at their child in the month preceding the survey decreased from 64.2% to 55.6%.
- The percentage of all respondents who reported having shaken their child during the last month decreased from 28.4% to 8.6%.
- The percentage of respondents who reported having hit or slapped their child with their bare hand dropped from 25.9% to 16%.
- Respondents in both VSLA and VSLA+ groups reported a statistically significant increase in the well-being of their children.

Is money enough?

- In regards to child well-being, statistically significant improvements were reported in both VSLA and VSLA+ groups; however, the increase in child well-being is markedly higher for respondents enrolled in the Healing Families and Communities discussion group: an 87% increase as opposed to a 58% increase for those participating in the VSLA only program.

- In regards to discipline practices, statistically significant improvements were reported in both VSLA and VSLA+ groups. At this early stage in the project, however, a comparison of the VSLA and VSLA+ does not reveal a significant difference between the two groups in the rate of improvements to discipline practices. This is likely due to the fact that participants in the VSLA+ groups had not yet participated in the Healing Classrooms session on discipline.

- The increase in child well-being is markedly higher for respondents enrolled in the Healing Families and Communities discussion group: an 87% increase as opposed to a 58% increase for those participating in the VSLA only program.

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