

PO Box 23893 Claremont
 7735 South Africa
Tel: 021 670 9840
Fax: 021 670 9850
Web: www.dgmt.co.za
PBO No. 930008414

Concept Document

Cape Town's 'Great Potential' Project

1. THE PROJECT IDEA

1.1. Aim

To substantially alter the life prospects of the half of the 75 000 children born each year in Cape Town who would otherwise have limited access to opportunity, by connecting and building the relationship between the people of Cape Town who are currently divided by social and economic circumstance.

1.2. Project concept

This project will use relationship and connection to reduce divisions and fragmentation in the whole Cape Town community through a focus on creating "connections to opportunity" for children who would otherwise have limited or no access due to poverty and related social ills.

1.3. Elements to be considered in the emergent model:

1.3.1. *The personal connection*

Individuals would be mobilised through faith-based organisations and service organisations to establish a personal connection to the parent/ caregiver of one child born in that year. The required commitment would be to 'look out' for the interests of that child (to the extent that he or she was able) through:

- Companionship for the mother-to-be and new mother, and encouraging father's involvement;
- Early stimulation and development of the infant (facilitating access to toys, books, blankets and food if needed);
- Encouraging access to early childhood development services (subsidising attendance in ECD programmes and facilities);
- Preparing the child for school (encouraging reading, access to educational toys, helping to provide uniforms if needed);
- Taking an interest in school attendance and achievement (providing small incentives for participation and performance and following-up in the case of poor attendance or drop-out);
- Providing mentorship and career guidance (helping the child to identify opportunities for financing, further study).

Note though that the primary axis of connection will be between the parent and the 'connector', and not the child.

1.3.2. Institutional backing

The faith-based or service organisation to which the 'look-out' is affiliated would:

- Provide monthly updates on all active connections to the central hub;
- Encourage participation by other members;
- Seek to find the right opportunities for the children.

The Community-based Family Support Agency to which the child/family is affiliated to:

- Ensuring continuity of care and development processes
- Monitoring professional standards are upheld
- Managing schedule of interaction and supplying information about resource need.

1.3.3. Central hub with links to other institutions

The small central hub would:

- Promote the project and recruit new organisations to participate;
- Collate the data monthly and communicate back to organisations and with the main media partners;
- Keep a current aggregate profile of the participating children (where they are, major happenings in their lives e.g. hospitalisation, deaths, migration) that will give the City a real-time picture of its children;
- Work with 'mini-hubs' in specific communities that meet regularly
- Work with a key link person in each institution to establish and nurture a network of leaders for the project;
- Liaise with the State systems (w.r.t inviting attendees of antenatal clinics to participate, for example).

1.3.4. Media support

One major newspaper (The Cape Times) and one major radio station would be approached a primary media partners to:

- Promote the city-wide project;
- Represent the real-time picture of the half of the City's children that are often invisible in the media;
- Carry stories of success and challenge in the evolution of the project.

1.3.5. Referral and monitoring systems

Systems of referral (for malnutrition, abuse identified etc.) will need to be set up.

Similarly, systems of monitoring to minimise risks to children (eg. interest by paedophile groups) will be put in place.

2. THE REASONS FOR THE PROJECT

2.1 Missed opportunities

In the City of Cape Town municipality:

- Fewer than half of children younger than five are exposed to early childhood development (ECD) services outside of the home¹.
- Half (52%) of people aged 20 years and older living in the municipality of the City of Cape Town did not complete school².
- A quarter (23%) of active work seekers are unemployed; the true unemployment rate is about 10% higher if discouraged work seekers are taken into account^{3,4}, while in some areas such as Khayelitsha the official rate of unemployment exceeds 50%⁵.

There are about 75 000 babies born every year in Cape Town.⁶ Of these, about:

- 2 000 will die before their first birthday⁷
- 10 000 will become stunted through chronic under-nutrition⁸
- 40 000 will not have the opportunity of fully developing their cognitive, language and motor skills through early learning programmes;
- 38 000 will not complete school;
- 25 000 will not find permanent work.

In other words, we are only creating opportunity for about half the babies born each year to reach their full potential - and contribute fully to the development of the City of Cape Town. The other half miss out, and so does the City.

¹ Western Cape Government (2012). Investing in the Early Years: Integrated Early Childhood Development Strategy 2011-2016. http://www.dgmt-community.co.za/sites/dgmt/files/documents/INTEGRATED%20PROVINCIAL%20ECD%20STRATEGY_FINAL%20FOR%20HDSSC.pdf

² Statistics South Africa, Census 2011. http://www.statssa.gov.za/Census2011/Products/WC_Municipal_Report.pdf

³ Western Cape Government Provincial Treasury (2011). Regional Development Profile, City of Cape Town, working paper. [http://www.westerncape.gov.za/Text/2011/12/dc0_city_of_cape_town_15_dec_2011_\(mb\).pdf](http://www.westerncape.gov.za/Text/2011/12/dc0_city_of_cape_town_15_dec_2011_(mb).pdf)

⁴ Small K (2009). Labour Force Trends in Cape Town September 2005 to September 2007. City of Cape Town. http://www.capetown.gov.za/en/stats/CityReports/Documents/LFS_Trends_Report_Sep_2005_to_Sep_2007.pdf

⁵ City of Cape Town (2005). A population profile of Khayelitsha: Socio-economic information from the 2001 Census. http://www.capetown.gov.za/en/stats/CityReports/Documents/Population%20Profiles/A_Population_Profile_of_Khayelitsha_1_052006142120_359.pdf

⁶ Statistics South Africa, Census 2011. http://www.statssa.gov.za/Census2011/Products/WC_Municipal_Report.pdf

⁷ Groenewald P, Bradshaw D, Daniels J, Matzopoulos, Bourne D, Blease D, Zinyakatira N and Naledi T (2008). Cause of death and premature mortality in Cape Town, 2001 – 2006. Medical Research Council, Province of the Western Cape and University of Cape Town. http://www.westerncape.gov.za/Text/2008/11/cause_of_death_and_premature_mortality_in_cape_town_5_november_2008.pdf

⁸ Zere E, McIntyre D (2003). Inequities in under-five child malnutrition in South Africa; International Journal for Equity in Health. 2: 7. <http://www.equityhealthj.com/content/2/1/7>

2.2 Still a divided city

In terms of place of residence, the City is still divided along racial lines, with relatively few suburbs achieving significant levels of integration.⁹ In effect, many people are boxed into their poorer communities with few connections to opportunity.

Changing the structure of Cape Town will take a long time, but the people of Cape Town can transcend the boundaries by connecting across them. While enhanced service delivery – clinics, schools and basic services – in each area is important, it will do little to break down the divides between them. Certainly, it will not substantially alter the life outcomes of the children born this year. What could substantially alter the life outcomes of many of the children born in 2013 is if they were connected to people who were better connected to opportunity.

2.3 A network of connectors

There are churches, mosques, synagogues and service organisations across the City. Together, faith-based organisations and secular service organisations comprise a massive social infrastructure across the City. Yet they too are often unconnected outside of their communities or areas of outreach. If connected, they could form a huge network, galvanised around a common city-wide project.

2.4 There's power in 'connection'

There is good evidence that connecting people – even in the context of structural inequality – can improve outcomes such as health and education.¹⁰ There is also evidence from the Western Cape: the Philani Nutrition Programme has shown that mentorship of mothers can improve child growth (even where maternal depression persists); and Ikamva Youth Mentorship Programme has just achieved 100% pass rate for Grade 12 programme participants.

But the importance of connection is not only in connecting individuals one-on-one, but in building social capital. The problem that must be addressed is the paucity of connections to information, resources and people of influence for the majority of the population, who are separated from the rich networks of connections maintained by the minority (see Figure 1).¹¹ Connecting individuals across the socio-economic divides will in time enable marginalised individuals to be linked to the 'connections' of their primary points of connection.

2.5 We need 3% commitment per year.

35 000 children born each year need to be connected. The other 35 000 will do fine. All we'd need in 2013 is about 3% commitment from the households of Cape Town – and 3% more each successive year for at least a decade. Ultimately, this would mean involvement of a significant proportion of the people City, but by then the promise of the initiative should be quite clear.

⁹ Smith K (2005). The status of Cape Town: development overview. City of Cape Town, Isandla Institute. http://www.capetown.gov.za/en/stats/CityReports/Documents/Cape%20Town%202025%20and%202030/The_Status_of_Cape_Town_Development_Overview_19122005111348_359.pdf

¹⁰ Rosenberg T (2011). Join the Club: How positive peer pressure can transform the world. WW Norton, New York

¹¹ Altman, M. & Marock, C. (2008) Identifying appropriate interventions to support the transition from schooling to the workplace. Human Sciences Research Council & Centre for Poverty Employment and Growth

3. VIABILITY

3.1 In favour

- Eighteen years into democracy, there is a growing call for community leadership and activism that goes beyond political protest.
- Many faith-based organisations are involved in different forms of social outreach, and would find the idea of helping to shape the next generation.
- Faith-based and service organisations are a huge resource that operates largely on the basis of collective commitment and voluntarism. Many faith-based and service organisations have developed the capacity to run large-scale initiatives.
- There is willingness by the media to play an active role.
- The costs of the initiative are widely spread and borne largely by individuals who have access to opportunity; while there will be some start-up costs, in time the costs of the hub could be shared across institutions.
- Development of a network of leaders from across the institutions will give the project coherence and cohesion.

3.2 Against

- There may be concerns that this initiative creates dependency and a hand-out mentality. On the contrary, the birth-cohort development approach aims to ensure that there is 'equality of agency' which would enable all children in the Western Cape to have fair access to opportunity.
- There may also be criticism that the 'give' is all one-way. Again, experience from many initiatives across the world that have sought to connect unequally empowered groups is that both sides (and the whole of society) benefits. Examples include the US Peace Corps Project and the efforts by Daniel Barenboim and Edward Said to bring together Jewish and Palestinian young people through music. Programmes such as that envisaged are not intrinsically patronising; it depends on how they are implemented.
- There may also be concerns that this type of programme may expose 'do-gooders' to people who may wish to take advantage of them. This can be mitigated through strategies such as ensuring that there is no direct payment of cash (e.g. >R50).

3.3 Similar programmes

This programme would learn from the experience of the “Promise Communities” of the Harlem Children’s Zone in New York, the Family Health Project in Brazil and other programmes that have sought to provide longitudinal support to children. (Many of these used highly skilled professional teams, and so are quite different in implementation from the programme envisaged. Nevertheless, they may still have reference to this project. The Sofia Rose meet-up groups (Chicago) are a useful model in terms of purposive community groups.

In South Africa, the concept is quite similar to Child Welfare’s Eye on the Children programme (although that focused on child abuse as opposed to prevention and development). The planned city-wide mobilisation and media components of the planned project are unprecedented.

This concept note is prepared by the DG Murray Trust for discussion purposes only, as it considers ways to help develop the potential of the children of Cape Town.

29 January 2013