

Project Definition:	Implementation of a comprehensive, structured residential care program for vulnerable children and youth originating from highly impoverished and under-resourced communities			
Project Purpose:	To deliver trauma-informed care, secure attachment figures, and holistic educational support to children facing severe systemic resource deficiencies and family fracturing.			
Impact Goal	Target Outcomes	Intermediate Goals	Outputs	Activities
To provide a secure, trauma-informed environment that fosters holistic healing, restores dignity, and equips vulnerable children with the resilience and life skills necessary to break cycles of adversity and successfully reintegrate into society and their families	• Restoration of the children's dignity, social well-being, and psychological health. • Successful empowerment of the youth to become equal, valuable, and contributing members of society. • Development of essential life skills, values, and knowledge to handle life challenges effectively. • Positive family reunification and safe reintegration into the community	• Improved mental health resilience and development of crucial social skills, including self-confidence and self-efficacy. • Enhanced cognitive growth, academic progress, and open engagement in learning. • Provision of personal stability, routine, and permanence • The child is supported in terms of learning about their abilities, fears, hopes, dreams, and strengths. • Establishment of secure attachments with caregivers • Development of an understanding of their own identity and self-worth.	• Individual Development Plans: Formulation of tailored Care Plans, Permanency Plans, and Individual Development Plans (IDPs) for every child. • Delivery of three balanced meals daily alongside a structured schedule covering schooling, homework, chores, recreation, and bedtime routines. • Regular individual and group psychosocial sessions led by a qualified Social Worker, incorporating trauma-informed care and behavior modification techniques • Enhancement of psychosocial sport and play programs for children/youth experiencing adversity in their lives	• Provide a full-time structured daily program offering schooling, homework, chores, free time, and bedtime routines • Deliver trauma-informed care and behavior modification to build mental resilience. • Involvement of children in Character-building programs to develop skills to identify triggers and appropriate responses • Family intervention where applicable, referral of families/children to relevant support systems •
Long Term Outcomes				
To break destructive cycles of abuse, neglect, and systemic poverty by offering vulnerable youth a protective therapeutic home, empowering them to heal from past trauma and build a foundation for a self-sufficient, dignified future				
Assumptions		Risks		
• Resilience-Based Approach: A resilience-based approach that provides protective factors and opportunities fosters success far better than solely trying to eliminate the factors that lead to failure. • Peer Dynamics: Group-focused practices (sports, drama, and play programs) allow children to form strong friendships, learn teamwork, and build shared identity • Attachment Dynamics: The unique quality of relationships children build with staff, peers, and families is a key distinguisher in their development and healing. Consistent, empathetic adult caregivers act as secondary attachment figures, rewiring a child's neurological stress response and building trust		• Social worker turnover disrupting therapeutic care and IDP review schedules ○ Mitigation: Enforce mandatory supervision frameworks, staff wellness initiatives, competitive retention support, and a multidisciplinary team (MDT) approach. • Reactive attachment disruptions from fractured family histories ○ Mitigation: Provide consistent, empathetic adult caregivers as secondary attachment figures and group-focused practices (sports, drama, play) to foster trust and teamwork • Unsafe or unstable home environments risking successful reunification ○ Mitigation: Require formal MDT assessments and progress reports from external social workers prior to home visits, disengagement, or reunification • High prevalence of severe emotional and mental health challenges among children in care ○ Mitigation: Implement evidence-based clinical support, early MDT case tracking, and alternative non-verbal therapeutic channels		

Challenge	Who (Type and Scale):
Socio-Economic & Family Fracturing - An increasing number of children are growing up with absent fathers or in single-parent households. - Children from fractured families face significant disadvantages, and poverty heavily intensifies the negative effects of family breakdown on these children. - The consequences of family breakdown manifest in critical areas such as education, youth unemployment, teenage pregnancy, youth attitudes toward sex, and substance abuse, all contributing to alarmingly high unemployment rates. The Cycle of Poverty & Health Vulnerabilities - The children we serve live in extreme poverty and face various risk factors, including severe health issues and increased challenges in school. - Our target communities exemplify the cycle of intergenerational poverty—poor parents raising their children in poverty, who are then statistically more likely to become poor parents themselves. - These impoverished children are at a higher risk of suffering from malnutrition, poor hygiene, and lack of access to medical care, which directly leads to health problems and developmental delays. They are highly prone to experiencing stress, anxiety, depression, and behavioral issues such as aggression and impulsiveness. Mental Health Trauma & Alternative Care Complexities - Research has consistently shown that children and young people in care experience significantly higher rates of mental health issues compared to the general population - Furthermore, nine out of ten children who have been abused or neglected at a young age will develop a mental health problem by the age of 18. - The ongoing trauma and lack of support for healing, especially among those already facing severe poverty and inequality, contribute to poor outcomes for many individuals with experience in the care system. - Most children and young people enter care due to abuse or neglect, and the resulting separation from family and established connections can lead to compounded, further trauma. - Due to their past damaging experiences, many children and young people enter the care system already facing emotional challenges or a heightened risk of developing them. Additionally, research and experience consistently indicate that being in care can exacerbate existing developmental issues. Systemic Lack of Resources & Institutional Constraints Under-Resourced Community NPOs & Reintegration Support: Scarcity of External Support: Non-Profit Organizations (NPOs) and external social service structures operating within impoverished communities lack the financial and operational resources needed to render effective support services to parents and families. Without adequate community-based interventions (such as parental counseling, substance abuse rehabilitation, or economic empowerment programs), the root causes of family fracturing remain unaddressed while the child is in care. The Reintegration Bottleneck: The ultimate goal of a CYCC is positive family reunification and safe reintegration into the community. However, when community NPOs are too under-resourced to rehabilitate the family environment, children are forced to return to the same unstable conditions that necessitated their removal Limited CYCC Capacity for Specialized Interventions. Restricted Resource Allocation: CYCC's frequently operate under severe funding constraints and limited state resource allocations – which impact on Care Depth (such as advanced psychiatric care, specialized occupational therapy, or intensive individualized rehabilitation).	- Vulnerable, abandoned, and abused children. 25 children and 25 parents
	Who (Demographics): - Children aged 2–18 located. - The demographic breakdown is 55% African, 46% Coloured, and 1% Other; 48% Male and 52% Female.
	Who (underserved)
	Community Nets & Generational Support Systems The Resource Gap: Families living in extreme poverty experience a severe lack of community support structures. This deficit isolates highly vulnerable families and intensifies the negative effects of family breakdown. It cements the cycle of intergenerational poverty. Profound Lack of Mental Healthcare & Psychosocial Support The Resource Gap: There is a profound lack of community-based mental health care, counseling services, and trauma-informed support systems. Deficits in Essential Health & Nutritional Resources The Resource Gap: Deep intergenerational poverty means communities lack consistent access to nutritious food and proper sanitation infrastructure. Shortage of Early Intervention & Educational Support The Resource Gap: The community suffers from a severe shortage of specialized early childhood services, educational support, and remedial intervention programs Limited CYCC Capacity for Specialized Interventions Resource Gap: : Child and Youth Care Centres (CYCCs) frequently operate under severe funding constraints and limited state resource allocations