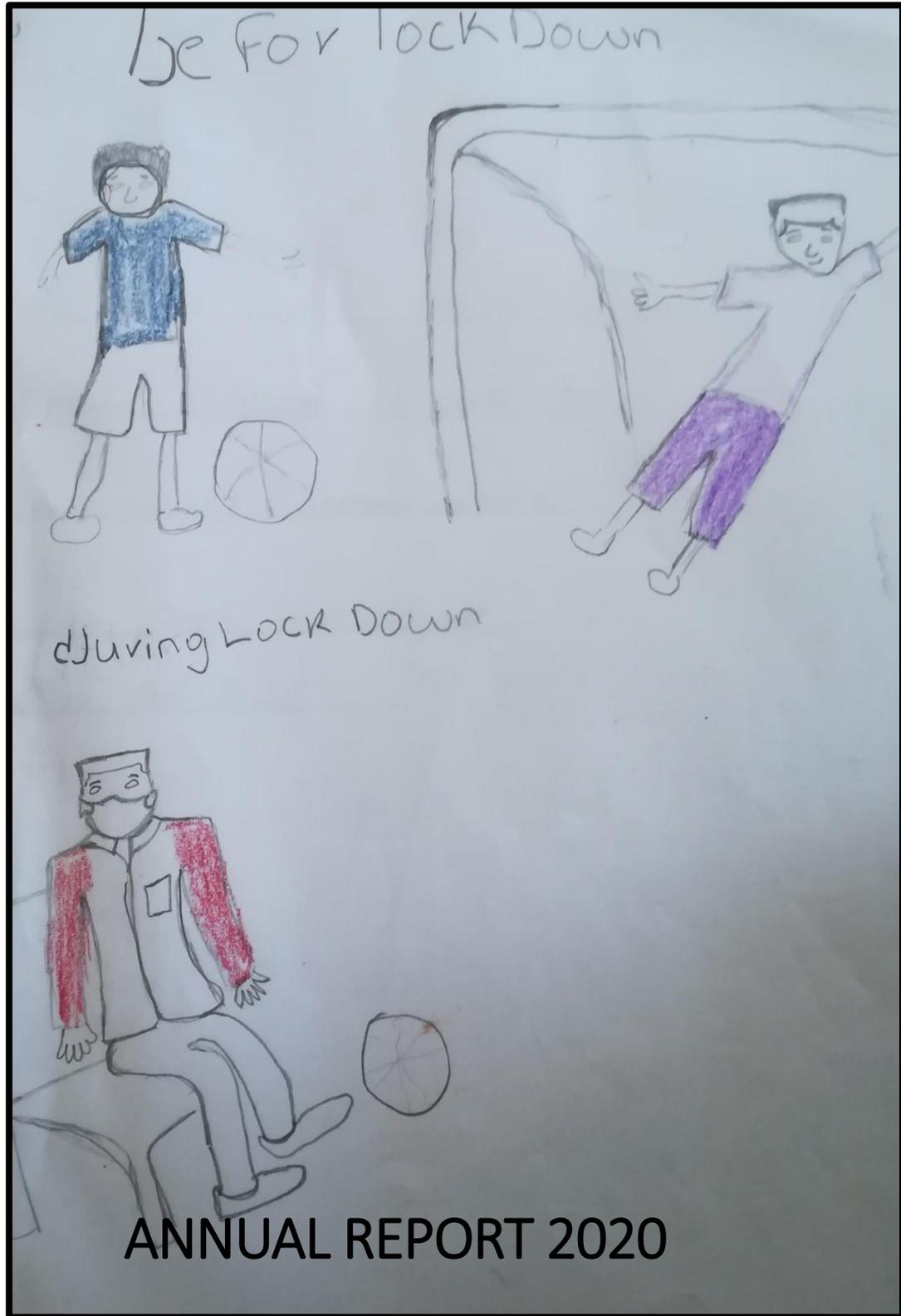




SOPHIATOWN

COMMUNITY PSYCHOLOGICAL SERVICES



CHAIRPERSON'S REPORT

As we come together to reflect on the work of Sophiatown Community Psychological Services (SCPS) in the 2020 year, it is unlikely that there is anyone reading this report who will not have experienced loss in some way. No matter where you are in the world, the COVID-19 pandemic will have affected you and we thank you, our partners, for continuing to support our work in this unprecedented time despite the loss you may have experienced.

As 2020 began and South Africans were hit with yet another round of load shedding, the economy still embattled and no end in sight to the same psycho-social problems as before, we had no idea of the even greater human tragedy that was about to unfold. As with any disaster, man-made or natural, it is always those without resources who suffer the most. Faced with the reality of being locked up in our homes, the more privileged in our society were able to adapt, finding new ways of interacting using technology that is unaffordable for those living below the breadline.

As the hard lockdown was implemented in South Africa on 27 March, the SCPS team was faced with a seemingly impossible task. How could they still make a difference in their clients' lives when they could not meet them face-to-face and neither they, nor their clients, had unlimited access to technology that could enable connection? In addition the SCPS team had to deal with their own fears and uncertainty about the future.

Our friends and supporters will know that the SCPS team have never wavered from taking up the challenge of working in impossible conditions and COVID-19 was no exception. The team knew that the work they needed to do over this time would probably not involve the usual in depth psychological interventions but would need to focus on the most pressing immediate needs of their clients. Meeting these immediate needs would ensure that the worry and anxiety of not being able to feed their families would be alleviated to some extent and this was the kind of emotional support required. At a time when no one was really allowed to be out on the streets, some of our team members risked their own safety to meet their clients' most basic needs, delivering food parcels and basic necessities.

In addition to suffering food insecurity, many of SCPS' clients battled with the psychological effects of being locked down in cramped, overcrowded conditions worrying about their ability to feed their families and pay rent as a result of not being able to leave their homes to earn any income. Basic telephonic counselling helped many clients to cope with the emotional hardship this brought. As time passed and restrictions eased to some extent, the team was able to resume some of their more normal activities and had to think of innovative ways to accommodate working within the "new normal."

I invite you to read our Director's report that follows to share in the successes that were achieved in these most extraordinary of times. I would also like to acknowledge the loss that many of the members of our SCPS team experienced in 2020. To our incredible team I would like to say that; despite the loss and difficulty you may have experienced, the board thanks you for still being the light and hope in your clients' lives, and not losing sight of the purpose and mission of Sophiatown. I would also like to thank the support staff who work behind the scenes, making sure that the client facing staff are enabled and supported. Johanna and Mpumi, thank you for your leadership. You never falter in your support and nurturing of your team as well as excellent management of resources entrusted to you.

Thank you to my fellow board members, who continued in this incredible year, to unconditionally give of their time and expertise. In 2020 we welcomed a new board member to ensure growth and strengthen our team.

With the climate of uncertainty in the early part of 2020, the team and board of SCPS felt great concern, not knowing if the organisation would be able to continue its very important work. As we go into 2021 it is with a sense of hope that our funders continue on the journey with us, enabling the spirit of hope, healing and care that is Sophiatown to live on!

Cathy Mollink: Chairperson

DIRECTOR'S REPORT

2020: The year of COVID-19

The essence of the year 2020 has been encapsulated in seemingly contradictory words and phrases which, when put together, paint a sad and devastating and yet beautiful and hopeful picture of the complex nature of the human condition: the year of an unprecedented disaster; the year of fear; the year of death; the year of uncertainty; the year that sank millions into poverty, hunger and homelessness; the year of failure, of blame, of denial, of ignorance. The year of even further self-enrichment by a few at the expense of the many. But also: the year of introspection; of kindness; of critical reflection on the distribution of resources and the use of power; the year of solidarity and of sharing experiences across geographical, social and economic divides; the year that has stretched our view of the human capacity for both self-destruction and the regeneration of hope, love, and connectedness.

When the team met at the beginning of the year for its annual planning workshop, we anticipated a year full of the usual struggles, exacerbated in many ways by rising levels of systemic xenophobia, child abuse and gender violence, the never-ending cycles of poverty and its intergenerational impact on the physical and emotional wellness of families, and the continued failure of the state to adequately address the social and economic inequalities that deprive the vast majority of its citizens of quality education and health care. Like many others across the world, we knew about the outbreak of a strange disease in China but, locked into our own realities, the idea that it would come to play a dominant role in our personal and professional lives, seemed ludicrous.

That is, until the beginning of March when the first case was identified in South Africa. On 23 March, the management team decided to send staff home and to temporarily shut down face-to-face services. On 28 March, the whole country was put into a five-week hard lockdown which prohibited any non-essential activity or movement. Counselling and psycho-social support services were at this stage considered non-essential.

While housebound, the team connected with clients whenever possible on the phone, caught up with administrative tasks, and adjusted to a new reality which had suddenly descended on them without warning. The very brave ones ventured out with food parcels which were generously donated by private individuals and companies, organizing mothers on street corners for a quick hand-over, and then rushing on for fear of being ambushed by equally hungry people venturing out into the streets in search of food. New technologies and ways of communicating needed to be introduced, mastered, and ethically managed. Most of the staff do not have access to computers or to the internet in their homes and reports and process notes were handwritten, photographed, and sent through WhatsApp to the supervisors who then had the laborious task of downloading, printing, and reading them. Zoom meetings with other service providers became the norm, and the solidarity that had already been developed through the Director's Circle, Ethics Café's, and other projects in the wider community of practice intensified during this time period.

Under level 4 which started in May, counsellors, social workers, and community workers were deemed essential workers which made it possible for the team to return to the workplace in a carefully staggered way. A shift system was introduced with consideration for those with serious co-morbidities, monthly team meetings took place in the parking lot, and clients were informed that they needed to stick to appointments which were organized in such a way that the waiting room was never occupied by more than two individuals or one household. Routines of masking, sanitizing and deep cleaning needed to be developed as well as protocols for self-isolation, quarantining and testing. Those working from home also needed to be monitored in terms of productivity, self-regulation, and of course much attention was given by the management team to the state of emotional well-being of each individual team member. During this time, all client contacts were made in the office. Home and community visits were deemed too risky. Khula Nathi and Siyalalela clients were monitored and supported as far as possible by phone and a system of sending instant cash to the neediest of families (especially those not getting the extra top-up grant) was developed.



As restrictions eased further in June and then in August and October, shift schedules relaxed a little, and client numbers increased. Some groups could be reconvened, albeit in smaller numbers and alternating sessions.

Face-to-face work is the best- we must not be told otherwise. We do heart work and screens, and phones block the heart. (Mpumi Zondi)

COVID-19 brought with it a deepening of already desperate poverty, and exclusion. With many family members cramped into tiny, shared living spaces in shacks and inner-city ghettos, tensions in households where pent-up anger and frustration could find no outlet, increased between children and their parents, and between intimate partners. The vast majority of children did not have access to any online schoolwork and complained of the boredom and hunger, whereas mothers bewailed the fact that the children, deprived of school-provided meals, constantly clamoured for food. When clients were able to return to the counselling space, many women reported that they spent the day sleeping, as there was nothing else to do. They also switched off their phones to avoid the endless harassment for rent they could not pay. Whereas in the townships and informal settlements families, and especially younger children soon began to treat the regulations with contempt, migrant families tended to stick indoors afraid of being pursued by the police or soldiers if they ventured out, as they have come to associate armed forces with terror and persecution.

We haven't paid the rent and now the electricity has been cut. It's not easy with six children. I go around asking people to allow me to cook from their houses, but they refuse. Another problem is that there is no food. The children are hungry and angry. I don't know what to do. (Single parent)

A further challenge throughout 2020 has been the absence of governmental and non-governmental service providers from accessible workspaces. The Department of Home Affairs, for example closed all its

offices in March, and only recently re-opened for basic services for South Africans. Refugee Reception Centres, to which many of our clients need to return on a three-or six-monthly basis to renew their permits, remained closed which meant that all asylum permits had expired by the end of the year. While an extension was granted for these permits until the end of March 2021, this was not understood by other service providers such as hospitals and clinics, or potential employers, who demand proof of a valid permit. Many civil society organizations were also not available for people on a face-to-face basis. The vast majority of clients did not have access to Zoom or regular data for WhatsApp, and even if they did, they lacked the experience or language skills to communicate confidently through social media with service providers.

The result is that the Sophiatown team felt very alone in dealing with the overwhelming needs and expectations of communities in distress. Nurturing the community of practice, which SCPS has gradually cultivated and strengthened over the past five years, has therefore been critical for the most immediate partners in the sector to remain committed to working together, to sharing scarce resources, and to drawing on each other for support and solidarity.

COVID-19 by extension called for a shift in the usual approach to emotional support and counselling. Instead of supporting people in exploring their life histories and processing traumatic experiences which impacts their emotional well-being and ability to function, counsellors, community and social workers needed to focus much more on the emotional impact of the immediate situation and draw on the psychological first aid model of providing containment, comfort, connection to resources, and factual information.

Emphasis was placed on each person's ability to manage and contain their emotional responses to situations which are extremely stressful and for adults especially, to keep their immediate social context functioning, even if only at a very basic level of care and support. The Bertrams centre, which is situated in the inner city of Johannesburg, is accessible to most families by foot and this made it relatively easy for the team to introduce family-based play and creative activities which became important in diffusing tensions which could escalate into violence, and at least for short periods of time, re-connect positive affect between caregivers and children. Working with family groups who live in the same household (and therefore do not pose an additional risk of cross-infection) to some extent came to replace the groups for adults and children which posed too high a risk in the Bertrams Centre. Games, creative and learning materials were introduced into sessions before the materials were given to the family to take home. Families were encouraged to send photographs of their playful activities and come back for further sessions to receive further encouragement.



Getting children into the counselling space proved to be much more difficult for the team based in the Westdene Centre. The community halls in Noordgesig and Mzimhlophe remained closed and transporting children either by taxi or by hired transport was simply too risky, especially since most taxis soon resumed operation at full capacity and posed the threat of being small super-spreaders. Play and learning materials were purchased and handed to some families with food parcels. Most of the contact here was made through primary caregivers either in counselling sessions, or through phone calls or "gate visits". In conversations with caregivers, however, special attention was always paid to the immediate needs of

children and ways of being present for them emotionally - with a special emphasis on the importance of play.

While services were needed more than ever, team members themselves were affected in their personal lives. In many families, breadwinners lost their jobs increasing the financial burdens on those still working. Family members died and could not be buried in the traditional ways that allow for support and closure. Team members were separated from their children in other provinces or countries, and constantly worried about their well-being. Single parents had to leave children unattended at home when schools were closed. In this context, emotional support for colleagues became an important part of sustaining the quality of services:

Everyone within the organization had one goal and one vision: to serve our clients without hesitation. The support coming from management was an important motivator. Resources were made available for team to continue working even during lockdown. All precautionary measures were taken to assure the safety of the team. Communication with team members even during Level 5 made one feel that one is never alone. Support was always there when one was experiencing challenges.

Windows of Hope: the Sophiatown West Counselling Programme

The Numbers

The team based in Westdene was able to reach out to a total of 212 clients on a face-to-face basis before the lockdown and after the easing of restrictions in May 2021 - a smaller number than usual, since groups could not continue running and that the community centres in Mzimhlophe and Noordgesig remained closed. A total of 78 children and adolescents were reached, mainly in the first three months of the year, before groups were closed. As expected, the majority (70%) of the clients were female and all but a small handful were South Africans from the surrounding townships which continue to have a high prevalence of HIV.

The progress of 28 of these clients was reported on in case study format at the end of the year. The average number of sessions attended was 68, with most clients being carried over from the previous year. By the time of the submission of the case studies, 82% of the clients were still attending counselling on an ongoing basis. Presenting problems ranged from relationship conflicts (38%) to rape and sexual violence (20%), intimate partner violence (30%) and difficulties in managing anger (20%). 40% of the adults seen struggled with inordinate burdens of care in their families and households which was often accompanied by family conflict and parenting struggles. Symptoms of anxiety and depression were noted in at least half of this sample with displaced anger, often harking back to childhood trauma and neglect, being equally prominent. Over one third of those who were employed lost their jobs as a result of COVID, a quarter were struggling to survive on a much-reduced income, and 20% experienced acute food insecurity. The emotional impact of the virus and the lockdown was evident in increased levels of depression, conflict in crowded households, and to some extent in domestic violence.

The main changes noted by the counselling team in this centre related to improvements in signs and symptoms of depression, anxiety and traumatic stress (61%), and increased ability to confront and deal

with daily stressors, more active parenting, and the improvement of relationships in the family. Four clients were able to return into the job market by the end of the year.

Siyalalela

At the time of the introduction of the hard lockdown in March, 27 clients were on the home visit list of the community workers responsible for the Siyalalela (“We are listening” or home-based emotional care) project. Following the lockdown, telephonic contacts and/or (from October onwards) “gate visits” could be maintained with 18 clients and their families who altogether cared for a total of 35 children under the age of 18 years. Food parcels were delivered to those clients who had no access to food distribution initiatives through community structures and undocumented or elderly clients who did not qualify for the child support grants also received e-wallet payments. Conversations with these clients revealed that this very practical support went some way in alleviating the most extreme anxiety and depression. More significantly from a psychosocial point of view, all clients commented on that they felt cared for and “not forgotten.” Improvements reported on were mainly in the areas of parenting (the distribution of basic art and play materials helped), the ability to cope with daily stressors, the increased use of networks of support in communities and families. The community care workers noted that 50% of these clients showed improved levels of agency e.g., started a small garden, making efforts to get back to piece jobs once the hard lockdown had ended and/or started hawking small items again. All 18 clients continued receiving their ARV treatment.



Khula Nathi

Maintaining meaningful contact with the eight families involved in the Khula Nathi project reaching into Soweto and surrounding settlements has been the most difficult challenge of 2020. Until October no direct contact through home visits was possible, and the “gate visits” which were then introduced provided little extra depth to the communication. Although the project is intended to reach into family systems, for 2020 it was possible only to maintain some form of contact with the primary caregiver. Families were supported with food parcels and/or connected to partner organizations in the community for food relief. All families also received e-wallet payments to cover the most basic needs.

All the caregivers with whom regular contact could be maintained throughout this difficult year, indicated how much they appreciated not only the material support, or the linking to other community resources that could be facilitated through SCPS, but also that they had not been “forgotten.”

Counselling Groups

All groups started at the beginning of the year and then came to an abrupt halt with the imposition of the hard lockdown. The Leseding group for adults living with HIV, the Thandanani group for grandmothers caring for orphaned or abandoned grandchildren, and the Sivuyile group for bereaved children were re-convened between October and the beginning of December, although divided into alternating subgroups

Group Counselling

Groups run from the centre in Bertrams also came to an abrupt halt with the hard lockdown. However, because most clients can access the centre by foot it was possible to restart the Study Buddies project in September, although the 26 children in this programme were divided initially into three and then into two groups meeting on alternating Saturdays. All the children expressed an enormous sense of relief to be allowed to get out again, to meet with peers, and to play. For the rest of the year, homework took a backseat, as children were in desperate need of social interaction, of play and of debriefing from all the stressors of the lockdown. A small intensive therapy group for parents was also started. Another new initiative which had started earlier in the year is the Youth Advocacy Group consisting of four bright and articulate young men and women striving to find ways of making their voices heard in the larger community.

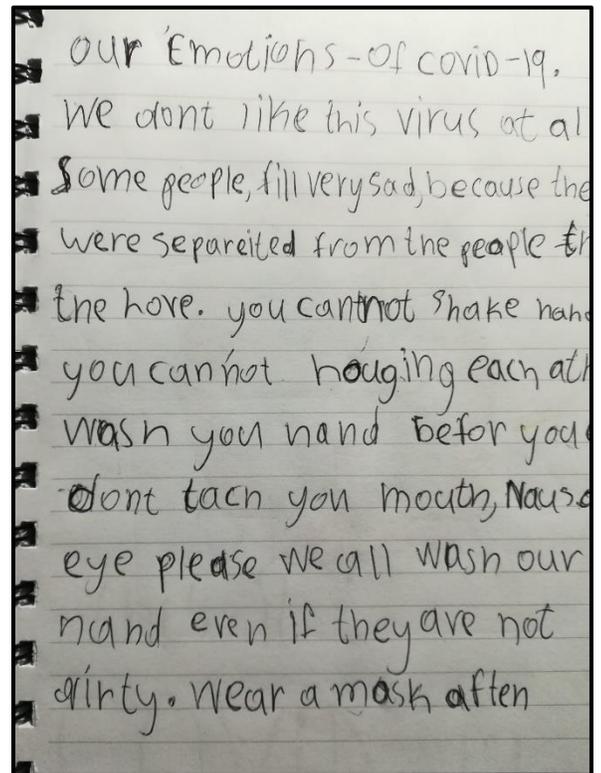
Creative Families in Lockdown

Because it was not possible to convene the other groups after March 2020 the team developed a small project called *Creative Families in Lockdown*. While children from different families could not come together, it was possible to get the members of one family or household into a safe space. The Bertrams team explored games and activities that had shaped their own childhood, experimented with these during team sessions, and then invited families to come together to play, draw, or create things together. Once this kind of playful interaction had been “modelled” in the counselling space, families were given materials, games, and ideas to take home and encouraged to continue playing with each other in their family spaces. Wherever possible they were also asked to send or bring photos of the playful happenings in the home. 13 families with a total of 9 boys and 19 girls got involved with this intervention. Unfortunately, the re-opening of schools in erratic and staggered ways, made it almost impossible to get a whole family together again, as none of the children in the same household would be at home on the same day. Despite this, photos sent to us by various families and story books and drawings returned to us by children indicate that the

availability of play and art materials went a long way in alleviating the worst of lockdown boredom, and in many cases diffused some of the worst tension between parents and children.

Supportive Material Interventions

With migrants and asylum-seekers being excluded from the limited social relief packages announced by the state, families already trying to survive on the underbelly of society, suffered even more extreme hardship. Although there was a moratorium on evictions, most of the families rent rooms informally and are entirely at the mercy of the landlords, who continued to threaten with eviction, cut off electricity and water supplies, and leave people homeless on the streets. At the best of times, these families make



barely enough money to cover the rent for a flat or a room shared with other families, and hunger is a constant companion in crowded households. An appeal to a network of friends and associates, as well as emergency funds made available by international partners made it possible for the organization to support 71 families with e-wallet cash payments and/or food relief. The small cash payments were particularly useful in that they gave mothers some power to negotiate with landlords around rental arrears. Many clients have told their counsellors that without this assistance they would not have survived the year. 24 caregivers were also provided with small business grants when the lockdown restrictions were sufficiently eased to allow some return to hawking clothes, vegetables, and small items on the streets.

SIYABANAKEKELA: CARING FOR THE WOUNDED HEALER

COVID-19 also impacted severely on the Siyabanakekela project which seeks to promote personal and professional development of community and/or residential care workers, as well as carers in families, who are responsible for the well-being of families in impoverished communities. In 2020 this project targeted primarily community health workers in Weiler's Farm, a small settlement to the south of Johannesburg with high rates of HIV infection. In addition, the plan was to start a weekly counselling service as the work in this and the neighbouring community of Lawley has begun to draw in many individuals seeking emotional support for their struggles in their personal life spaces.

The pandemic put a complete halt to the latter plan. However, work with the community health workers based at the Weilers Farm Clinic did get off to an early start in January and 9 weekly sessions could be held before the lockdown was announced at the end of March, with a further six sessions held when restrictions were eased to level 1 on 21 September. Between April and September Mpumi Zondi, who leads the programme and facilitates the sessions, kept in telephonic contact with individual group members with some then also receiving telephonic counselling. There was a lot of anxiety in this group of health workers about their changing responsibilities - from caring for and monitoring families living with HIV and other chronic conditions, they were suddenly drawn into screening and testing for COVID with little preparation and initially with no personal protective equipment (PPE). Fortunately, the clinic manager was courageous enough to defy authority and refuse to send her team into the community until PPE was provided. On a personal level many of the group members shared the difficulties they experienced in their families, especially with increasing conflict between partners, particularly when men no longer had access to alcohol. During this period, the hard-fought battle for the integration of community health workers into the Department of Health as permanent employees was finally won. With this came a significant increase in wages. With many sessions in the previous and current year having focused on life goals beyond the immediate needs of the present and the skills of planning and budgeting in achieving these, the members of this group

*Hello, Sis Mpumi. I just want to say thank you a lot for your wisdom that you share with us, your encouragement, and for making me believe in me. You are the best mother. A lot has happened. I now know how to save. I have managed to save R10 000 so far. I did my driver's licence last year. I failed, but I went back. I got it today. And now I am expecting. I am going to be a mom. It is all new but I know I am going to be a good parent because of your teaching
(Whatsapp message from a CHW)*

have actively started working towards their dreams, as evident in learning to drive, buying bricks to replace a shack into a two-roomed house, returning to school to complete matric, and investing in their children's education.

In terms of the anticipated outcome, all members of the group have managed to find words for their emotional baggage and allowed themselves over time to share their vulnerabilities with others in the safe space of the group. All participants have grown in confidence and in the skill of planning beyond the moment and of mobilizing the inner and outer resources needed to realize the goals they have set themselves. Fortunately, this particular group of community health workers have a very capable and visionary leader in the matron of their clinic who is a willing advocate for her workers, which means that there were less issues emerging from an organizational level.

Four new community health advocates who were funded through a local community based organization (Lindani Home Based Care) by the Catholic Health Care Association (CATHCA) attended four support and self-awareness sessions at the request of their manager. Their primary function was to monitor and care for patients and families living with HIV/AIDS in Orlando West, Soweto. These carers did not work during level 4 of the lockdown and even when restrictions eased somewhat they were not able to attend to their patients on a regular basis. When Mpumi Zondi tried to re-convene the group in October, she was informed that the contracts of all participants had been terminated due to a lack of continued funding from CATHCA. Much of the telephonic support offered during the in-between months centred on difficulties within families.

Only two sessions could be held with the informal carers in the Phaphamani Women's group in Weilers Farm. All these women care for children, grandchildren and often also other young people from their extended families. The process started with encouraging the women to delve into and share their understanding of their various roles as mothers, grandmothers, partners, community carers. Telephonic contacts with those who could be reached during the lockdown revealed a lot of anxiety about livelihood and family issues. Many of the 14 women in the group could no longer continue with their small businesses and tensions escalated in households, especially with young people addicted to the street drug nayaope. By the time the group reconvened for another two sessions at the end of the year, two members had lost loved ones and needed to be held in their grief, while others were supported by the group in establishing boundaries for children with substance abuse problems.

The Legal and Advocacy Programme

With the continued closure of the Refugee Reception Offices of the Department of Home Affairs, only limited work could be done in terms of helping clients to obtain or update legal documentation, or to appeal decisions already made by the RRO. With most organizations working from home, this also meant that clients had no direct access to legal assistance, which meant that many concerns clients brought to Federica Micoli, the coordinator of this programme, could not be directly addressed with the relevant service providers and remained in limbo.

Nevertheless, the lockdown also provided opportunities for activists, advocates, and practitioners to connect with each other remotely on the broader issues facing migrant communities, to make submissions to government, and to advocate for the inclusion of migrants in social relief programmes.

The Psycho-Social Rights Forum

SCPS continued to play the leading role in convening, chairing, and documenting the monthly meetings of the Psychosocial Rights Forum, with 7 other organizations attending sessions (all but one on zoom in 2020). Due to unanticipated impact of COVID-19 on organizations, the Forum meetings created much needed space for participants to debrief, to express feelings and frustrations (these related primarily to the fact that most organizations had not returned to workspaces accessible to clients even by the end of the year) and to support each other. The main themes that dominated discussions beyond this related to the impact of COVID-19 on migrant communities; the implications of the Refugee Amendment Bill which was quietly signed by the President in December 2019; training of the members of the Forum in the above Bill and its implications for migrants and the organizations trying to assist them; the instruction issued by the Department of Health in Gauteng that all foreign nationals not in possession of refugee IDs needing to pay for health services at hospitals; and the preparation for the online indaba which was held on 16, 23, and 30 October 2020

Federica Micoli prepared submissions to the New Refugee Appeal Authority and endorsed the submissions prepared by CoRMSA on the new Township Bill, which seeks to exclude foreign nationals from trading in township communities. She also attended meetings organized by Lawyers for Human Rights about the Refugee Amendment Bill to discuss the application of the Refugee Law. As a member of the executive committee of CoRMSA, Federica actively contributes to the advocacy work of this organization, also on behalf of Sophiatown CPS.

The indaba took the form of 3-hourly weekly Zoom sessions on three consecutive Fridays in October. It was agreed to focus on the psycho-social issue of “belonging” which transcends the narrow definitions of nationality, ethnicity, and social class, as a construct which everyone can personally and emotionally relate to. The theme of the indaba thus became: *Creating Belonging in a Fractured Society*. A total of 97 participants registered, and between 40 and 50 attended each session. The sessions were planned in such a way that structured input would ignite vibrant conversation. *Belonging, resilience, and social connectedness* were the central themes running through the three days, and the attendance and active participation of young people from all backgrounds added fresh energies, insights, and ideas to the process.

Legal Consultations

31 clients benefitted from legal advice and/or interventions in the course of 2020. These included responses to illegal evictions and police raids during the lockdowns; advocating for health care for mothers and their children and referring one case of medical negligence resulting in the death of a baby to Section 27; facilitating access to schooling and addressing the rights of undocumented migrant learners to write matric with school authorities; liaising with SASSA officials about the cutting of social grants for mothers who are legally entitled to receive them; protection needs assessments of individuals and families whose lives continue to be under threat in South Africa and liaising with the UNHCR with regard to the processing of these assessments; applications made to the Minister of Home Affairs for exemption from asylum status in the case of unaccompanied or orphaned children; and the facilitation of reunification and/or repatriation processes in collaboration with other service providers. .

SUSTAINING OUR COMMUNITY OF PRACTICE

The programme Sustaining our Community of Practice has continued to support NPO leaders and teams throughout this difficult year with a range of creatively adapted interventions and activities. The absolute relevance of the theme “Staying connected to what is important” could not have been anticipated when it emerged from the leadership retreat at the end of 2019. As Zelda, the coordinator of this project, writes in her report:

“The psychological and practical jolt was felt by everyone in the NPO sector. Organizations had to continue fulfilling their vision. Leaders were under pressure to make ‘things work’: to find alternatives for face-to-face interactions; to promote ways of working that contradict professional experience and knowledge (such as working with young children while wearing masks); to be aware that families go hungry, even more so than before; and to balance work output requirements with an understanding of the humanness of staff as they manage their personal lives.”

In this context, leaders were encouraged to be present both to themselves to those around them and the concepts of Care Ethics and Solidarity Care were brought into discussions in groups and in individual support sessions. This spoke to the substance of the leadership community which has developed over the past years in that colleagues understand each other’s struggles care about each other’s wellbeing; held each other in mind and validate each other.

The Leaders Circle

Attendance of the monthly Leaders’ Circle, held for most of the year on Zoom, was good with up to 20 leaders attending a session. Many were working from home and struggling with finding the balance between caring for the health and well-being of beneficiaries, frontline workers, and their own families. Those who worked in schools lost all contact with beneficiaries and many organizations were surviving on bare bones. As the months went by, the sense of exhaustion and depletion became more and more palpable in the sector, and the monthly sessions became important sources of sharing and re-fuelling. One leader also facilitated a discussion on the Black Lives Matter Movement and its role in highlighting the persistent and ever-starker inequalities in society.

In the light of the pandemic no residential leadership retreat could be held. However, a one-day retreat session was held to give leaders the space to reflect on the experiences of the year and draw courage for the next year with a sense of belonging, care, and solidarity.

The CYCC Group

At the request of one director of an adoption home, a meeting was convened for leaders and managers in child and youth care centres (CYCCs), who were facing challenges regarding the protection of both care workers and children. The Department of Social Development has to date given little or no guidelines or support to CYCC leaders. Admission procedures for children in need of protection and care, quarantining requirements, and the ethical management of care workers who move between children’s homes and their own families, (thereby being at very high risk to themselves and the children they care for) was a major concern. In the meantime, the registration of children’s homes which needs to be re-applied for

every few years had expired, which meant that many of the children's homes were technically operating illegally.

As a result of this initial meeting, participants agreed to continue meeting online every two weeks and this continued throughout the year with Zelda Kruger, facilitating the sessions. Much important information has been shared, and various attempts have been made by participants to communicate with the authorities on behalf of the collective. A strong sense of community has thus been formed in recognition of the reality that government departments are a necessary, but overwhelmingly unhelpful and obstructive partner in the child and youth care sector.

Leadership Support Activities

Individual supervision, coaching and/or supportive counselling sessions were offered to leaders of 11 organizations over the year. In most cases, leaders needed to process feelings related to uncertainty, isolation, fear, and sense of failure, and the focus of these sessions was on remaining present to what is happening now, engaging with uncertainty, and staying connected with the purpose of their work. In addition, leaders were invited to refer team members in emotional crisis for short-term counselling to a team of three professional counsellors who made themselves available for online sessions.

Ethics Management Resource

Ethics workshops sadly were less effective when conducted on Zoom and were replaced by "ethics storytelling workshops" with small numbers of staff in their own organizational facilities. The aim of these workshops is to use a story-writing/telling process to get team members to reflect on the ethical dilemmas they face in their daily work and to draw out, give words to, and reflect on the ethical principles involved. This gives frontline workers the vocabulary to think about the many ethical conflicts that play themselves out in their organizational contexts, and to start more informed and reflective conversations about how these could be best addressed or resolved. Four workshops were held in the second half of 2020, one with the Sophiatown team, and another three with a child abuse clinic, a baby home, and a children's home. A total of 31 leaders and team members benefitted from these sessions.

Although no Global Ethics Day event could be held in October, reflection pieces were written and distributed to the Community of Practice in the week of 19 to 23 October. These reflections encouraged teams to think and talk about their organization's structure and frame (and that of the sector as a whole) in relation to its moral character and identity, and to explore ways of putting this into action.

Ethics consultations were requested by three organizations. These included concerns by practitioners about the quality of social work services rendered by statutory agencies, ethical considerations regarding disciplinary measures against staff, and the ethics of sharing information about the improper conduct of a staff member of another organization with its management.

- *In 2020 the NGO community came together.*
- *This space allows one to realize that one is not insane as others verbalize what I feel*
- *We don't know how we would have coped without if not for this forum*
- *This is a space in which one forces oneself to reflect*
(NPO leaders)

ALUTA CONTINUA: THANK YOU TO ALL WHO STRUGGLE WITH US

2020 has been described by many as a “year from hell.” In our wider community of practice there is an overwhelming sense of depletion as the new year promises to be not that much different from the one we would have liked to leave behind forever. The only certainty we now have is that a return to the “old normal” is no longer possible, nor even desirable. Collectively we have been given the opportunity to create a more equitable, more just, more humane “new normal”. Many people say that the pandemic has put us all in the same boat. This is not true. We may be in the same ocean, but there are still far too many who cruise around in their luxury liners and who have no interest in changing the status quo- in fact, the pandemic provides further opportunities for ruthless looting. There are those clinging onto flimsy rafts and those drowning in the ocean. It is for those of us who still have the privilege of steering our own small but solid boats to take on the task of barricading the luxury liners and reaching out to those drowning in the waves. This includes us all, funders and practitioners, frontliners and managers, service providers and beneficiaries.

Sophiatown funding partners need a special word of appreciation. With the pandemic creating unparalleled hardship, suffering, and grief globally, management dreaded dire consequences for the future of the organization, or at least some of its programmes. But with global suffering came global solidarity in the form of care, dialogue, practical and financial support which helped Sophiatown CPS not only to survive the year intact but also to go into 2021 with renewed energy, motivation, and resources.

A big word of thanks also goes to the Board of Sophiatown CPS which has provided continued personal, professional and governance support when team members and management were struggling with the loss of income in their own families, with illness, with loss and with grief. The mix of kindness and clear-headedness was exactly what the organization needed when sadness, fear and uncertainty threatened to overwhelm us. May we all continue to strive together in this community of care to make the world a better place around a common set of values that leaves no one out in the ocean, alone, drowning.

Johanna Kistner: Executive Director



FINANCIAL REPORT