PRESS KIT

FICE International

Condemns USAID Funding Suspension,

Calls for Urgent Action

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26 February 2025

FICE International Condemns USAID Funding Suspension, Calls for Urgent Action

February 26, 2025

On February 25, 2025, FICE International convened a global meeting with representatives from 20 national sections across four continents to address the devastating impact of the USAID 90-day funding suspension pending review. Reports from our members highlight severe humanitarian consequences, particularly in Africa, with early signs of distress also emerging in India.

For example, among FICE members, the abrupt halt of crucial aid programs has forced vital services for orphaned and vulnerable children and youth in South Africa and Kenya to suspend operations, leaving tens of thousands of children and families without support.

In South Africa, the National Association of Child Care Workers (NACCW) has been forced to lay off staff, shut down offices, and discontinue essential HIV treatment and child and youth support programs, directly affecting over 15,000 children and adolescents. Children living with HIV have lost access to lifesaving treatment and medication, putting their health and survival at immediate risk, with no alternative support systems in place. The prohibition on utilizing previously purchased essential medications further exacerbates the crisis, endangering the lives of children and youth living with HIV.

Similarly, in Kenya, the humanitarian child and youth organization Make Me Smile has been forced to cease operations, stripping nearly 15,000 children of critical protection and support, including access to healthcare and education. Additionally, the closure of 20 safe spaces that served 14,500 adolescent girls and young women has cut off access to vital prevention information, biomedical services, and economic empowerment programs.

FICE International strongly denounces the suspension of funding and its devastating humanitarian impact and calls for the immediate restoration of financial support to affected nations and institutions once the review period ends.

"Funding must resume urgently, ensuring that life-saving services continue immediately," FICE International stated.

The international community must take responsibility. FICE International urges USAID to work collaboratively with global partners to ensure financial stability for child and youth care organizations. We also call on our national governments and other international donors to step in with emergency funding to mitigate the crisis and establish long-term strategies to prevent similar disruptions in the future.

Now is the time for action. Millions of children and families depend on these programs for survival. FICE International stands in solidarity with affected children, youth and communities and remains committed to advocating for the protection and well-being of the world's most vulnerable.

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FICE International

Fact Sheet

This fact sheet outlines the consequences of the USAID suspended funding as experienced by two national sections of FICE International:

- In South Africa, the National Association of Child Care Workers NACCW / FICE South Africa,
- In Kenya, the humanitarian child and youth organization Make me Smile / FICE Kenya.

FICE International recognizes that the situation faced by these two national sections reflects, to varying degrees, the challenges experienced by other FICE national sections. More broadly, it highlights the widespread and dramatic impact on the health, well-being, opportunities for growth, and, in some cases, even the survival of children, youth, families, and communities worldwide as a result of the U.S. government's decision to halt USAID funding.

SOUTH AFRICA

Impact on the National Association of Child Care Workers (NACCW) as a result of the suspended funding of USAID / The U.S. President's Emergency Plan for AIDS Relief (PEPFAR)

A total of of 15,817 children living with and affected by HIV/AIDS were suddenly left without essential support and services. This disruption could lead to children defaulting on their medication, missing school, and, in some cases, even losing their lives.

The *NACCW* is a sub-grantee to Children in Distress (CINDI) for the USAID/PEPFAR grant to implement the May'khethele (meaning "My Choice" in Zulu language) model in KwaZulu-Natal since 2019. The model intensifies HIV services to orphaned and vulnerable children and youth, and their families to prevent occurrences of new infections, increase access to – and enrolment into – HIV care and treatment services, and support retention in those services. Child and Youth Care Workers (CYCWs) work closely with health facilities to provide services to those most in need of HIV prevention, care, and support.

On the 27th of January 2025, NACCW was informed of the U.S. President's Stop Work Order for a period of 90 days. The order required work to be stopped with immediate effect and all staff attached to the programme pause work on any funded activities.

As a result, 15,817 children living with and affected by HIV/AIDS were suddenly left without essential support and services. This disruption could lead to children defaulting on their medication, missing school, and, in some cases, even losing their lives.

In total 50 staff members had to be laid off immediately. Two permanent employees were temporarily laid off. 22 others who were contributing to the success of the programme through level of effort were affected. Salaries for all remaining staff were reduced.

Two permanent employees were temporarily laid off, salaries for all remaining staff were reduced. An important regional office had to be closed. Further reductions may be necessary in the future. The full impact of the USAID Stop Work Order remains to be felt at *NACCW* and has created significant instability for the organization.

Kenya

Impact of Stop Work Order on Make Me Smile - Kenya: US freeze on foreign aid

Notable effects include the halting of services to 16,111 children (7,656 male, 8,455 female) living with HIV or exposed to it as well as 14,500 adolescent girls and young women in the DREAMS project aimed at prevention of new HIV infections, teenage pregnancies, and violence.

The January 24th Trump Administration Executive Order freezing all foreign assistance funds for 90 days included funds disbursed under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). *Make Me Smile - Kenya* has been receiving Orphans and Vulnerable Children (OVC) and Adolescent Girls and Young Women (AGYW), Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) grants to support community prevention and response to new HIV infections and Gender-Based Violence (GBV).

Through the USAID programme, the project was supporting an active OVC caseload of 16,111 children (7,656 male, 8,455 female) and 14,500 adolescent girls and young women in the DREAMS project.

The sudden cessation of this funding has affected *Make Me Smile – Kenya's* critical community work in prevention and response.

The sudden cessation of this funding has affected *Make Me Smile – Kenya's* critical community work in prevention and response. The stop order continues to expose the children and adolescents to; (1) HIV infection (2) delayed treatment for the CALHIV, (3) Low viral suppression, (4) delayed disclosure, (5) access to basic services – health, nutrition, education and protection due to limited household economic capability (6) Separation from family, abuse (physical, sexual, emotional and exploitation).

Notable effects include:

- 1. Halting of services to 1611 OVC aged 0 17 years including
 - a. 1,407 living with elderly caregivers,
 - b. 764 total orphans,
 - c. 3,168 partial orphans
 - d. 345 children and adolescents undergoing violence
 - e. Others/siblings
- 2. Interruption of services to 2,243 Children and Adolescents living with HIV (CALHIV) and 145 HIV Exposed Infants (HEI). The services to CALHIV include
 - a. Monthly monitoring of adherence to antiretroviral therapy (ART) through community structures
 - b. Follow-up and access to viral load testing
 - c. Age-appropriate counselling and disclosure support.

- d. Suspending engagement of 384 Community Health Promoters (CHP) who connect community to health care services through monitoring CALHIV and HEI adherence to ART.
- e. Halting return to school for 320 CALHIV and adolescent girls engaged in risky behaviours to pay education levies, including school fees and scholastic materials support
- f. Halting community awareness sessions for 3,400 parents and caregivers on positive parenting through the Family Matters program.
- g. Fear of halting school attendance and transition to over 10,000 OVC that had requested support for school fees.
- 3. Interruption of services to 14,500 Adolescent Girls and Young Women (AGYW) on prevention of new HIV infections, teenage pregnancies, and violence.
 - a. Closure of 20 safe spaces that serve 14,500 AGYW. The safe spaces provide unlimited access to information on prevention, access to biomedical services and building their economic empowerment through skills training which include ICT, Tailoring, beauty and hairdressing. These interventions help build the girls resilience not to engage in risky behaviours that predispose them to HIV, GBV, and violence.
 - b. Halting the monthly follow up of over 320 risky AGYW who had been initiated on Pre-Exposure Prophylaxis medication (PrEP) to protect them against new HIV infection.
 - c. Community follow-up of 340 AGYW who have experienced different forms of violence and linking them to post-violence services including access to medication and follow-up with the justice system.
 - d. 2,801 AGYW assessed to be supported through school fees at risk of dropping out of school.
 - e. Halting the engagement of 245 AGYW community mentors and 10 paralegals responsible for follow up AGYW and supporting families of 80 survivors of violence access justice.
 - f. Halting community awareness sessions on violence prevention through the Start Awareness Support Action (SASA!) for 6,000 community members in Kisumu County.
 - g. Halting economic support to 741 AGYW who are young mothers through business start ups, business boosts and vocational training.
- 4. A total of 71 full time staff members exclusively dedicated to the OVC and DREAMS project funded by PEPFAR through USAID (83% of *Make Me Smile Kenya* full-time staff) had to be sent on compulsory unpaid leave.

Firsthand Stories from the Field

Kenya: Make me Smile – Kenya / FICE Kenya

Corazon's Struggle: A 17-Year-Old's Battle with HIV Amidst Funding Uncertainty.



Picture 1: Hesbon Anditi, Case Worker following up with Corazon during the stop work order to ensure adherence support

In the quiet village of Angola, 17-year-old Corazon wakes up each day with the same quiet resolve. She is like many girls her age curious, eager to learn, and full of hope. But Corazon's journey has been marked by challenges that most of her peers will never know. Born with HIV, Corazon has faced the harsh reality of living with a chronic illness from a young age. Her viral load has remained high, requiring constant medical attention and support. But for Corazon, the journey has been more than just physical health, it has been about

overcoming the emotional and social hurdles that come with living with HIV.

For years, Corazon's life was made a little easier by the support she received from USAID, an organization that played a crucial role in her well-being. USAID helped her in several critical areas from paying her school fees, providing transport to her medical appointments, and offering adherence support to ensure she stayed on track with her treatment. The holistic support system helped Corazon thrive despite the challenges she faced.

"Without USAID, I don't know where I would be," Corazon says, her voice soft but filled with gratitude. "They made sure I went to school, that I had access to medication and regularly attended my clinic appointments, and that I didn't feel alone in the fight." But in 2025, Corazon, along with many others, learned that USAID had shut down its operations in Kenya. The announcement sent shockwaves through the communities that had depended on their services.

"Everything has changed," Corazon admits. "I don't know how I will continue my education or get to the hospital. The transport costs are too high, and I can't afford my school fees now." The closure of USAID's programs has left Corazon and other young people in similar situations at a crossroads. Corazon is currently at home, as she was sent home from school to get school fee. The financial and emotional

safety nets that had been in place for years are now gone, forcing her to navigate a future that seems uncertain and filled with obstacles.

Before the shutdown, Corazon had a stable routine from regular school attendance, doctor's visits, and adherence to her treatment plan. Now, she finds herself facing the tough reality of paying for transportation to her care appointments, which she used to receive at no cost. Her school fees, once covered by the support she received, now hang in the balance.

Even though the challenges ahead seem dire, Corazon's resilience shines through. Her mother, who has been her constant support, does her best to keep him motivated. "We will find a way," she says, though the worry in her eyes is evident. "Corazon has always been strong, and we will fight for her future."

While Corazon's path ahead is unclear, she remains determined to continue her education and treatment. "I want to be a doctor one day," she says with a quiet determination. "I want to help others like me. I know what it feels like to struggle, but I also know that we can survive if we help each other."

For now, Corazon's journey continues a lot of uncertainties, and her hope remains unbroken. As her community rallies to fill the gaps left by the shutdown, Corazon's story will undoubtedly be one of many. But for him, it's not just about surviving it's about thriving and, one day, paying forward the support that helped her get this far.

Loureen's change perspective

My name is Loureen Alma Auma, a beneficiary of DREAMS program. I was enrolled into the DREAMS program in November 2021 with the effect of 'Behavioural Change'. I was self deprived in a relationship that I had no voice in. This was due to lack of knowledge in that a relationship should be both parties responsibility and not a one person thing. The family I grew up in led to 90% of my ignorance due to the domestic violence we grew up around. The fights and abuses made the essence that the woman's voice was never heard and her place was always in the kitchen. My partner was a university student who had multiple sex partners and with my ignorance I never had the courage to ask him to go with me for an HTS test placing me in the risk of being infected.

Being enrolled into the program brought out my own potential. I was taught different EBIs (Evidence Based Interventions) that made me see the world and my surrounding in a classical manner. Shuga II taught me the essence of having protected sex with the right contraceptives killing all the myths and misconception around these contraceptives and Financial Capability taught me the essence of saving whatever little I have and having goals and plans. In the process of these learning, I had a chance to counter my introvert self that could easily express herself and cascade the learned information to my peers and other AGYW through DREAMS Ambassadorship. I am now a Determined, Resilient, Empowered, AIDS-FREE, Mentored and Safe young woman.

From being an ambassador I was selected to be a lead mentor where I supported the project in coordination roles as I build my leadership skills. The stipend I used to receive every month was able to cab my daily expenses to a particular level and save what I could and I was able to clear all my remaining fee areas at the Kisumu National Polytechnic. I was allowed to graduate in April 2024. This gave me the inns that education continues and my diploma is not enough. I enrolled for a degree at KCA University where am pursuing Bachelors of Science in Information Communication Technology as a part time

student for evening and weekend classes. I was given the opportunity to be a Ward Coordinator in Railways Satellite ward (where I was an AGYW) and Kajulu Satellite Ward (where I was a lead mentor and learned the basics of the program to the latter). I was able to pay my school fees on time from the opportunity given.

When the stop work order came in January, I was at a loss of ways because I don't know how to continue with my studies and how to maintain my basic needs all through. The saving I had was used to pay part of my Jan - April Semester fees and now I am torn in a dilemma of dropping my studies from next Semester come May. I used to pay for small basic expenses in the house to help my mum but now I feel like a burden in the family.

South Africa: National Association of Child Care Workers NACCW / FICE South Africa

One of *NACCW's* programmes on HIV prevention, care and support which reached approximately 15,000 high-risk children abruptly ended owing to the funding being stopped from USAID. These children were receiving a range of services from child and youth care workers (CYCWs) who had built rapport and relationships with them, and where services were planned to continue until the children were no longer of high risk to negative outcomes such as HIV treatment non-adherence.

To illustrate, there were 5 children living with HIV that were not virally suppressed due to poor treatment adherence. The CYCWs provided ART adherence counselling after a case conference was held with their families as caregivers were not monitoring their child's adherence, or they themselves were HIV positive and not adhering well. As the programme closed, these children's adherence was no longer being tracked to be sure that after the services were provided, that they were on track with their adherence. Several of these children were also being neglected, and in one of the cases, was in foster care, and the CYCWs were working with social workers to provide follow up care to these children and to alert them to problems that persisted.

Again, these services are no longer continuing, leaving the children at risk of harm and viral non-suppression, which if left unattended is life-threatening due to the progression of HIV if no treatment adhered to.

In addition, the CYCWs worked with clinics to trace Loss to Follow Up (LTFU) cases where children did not return to the clinic for their appointments and treatment. Just before the project closed, 4 cases were traced back to the clinic. These children may have not been found if not for the home visits conducted by the CYCW to trace them and clinics will no longer have CYCWs to support in tracing new LTFU cases. Of the LTFU cases recently traced, 3 children were from a home where they were being neglected, and their caregiver did not take her children to the clinic. Social services were called in to support these children and the CYCW was involved in the case management of this child protection case, which stopped once the project closed, and whether the caregiver has received parenting programmes, or the children have been removed, is unknown.

About FICE International

The International Federation of Educative Communities (FICE International) is an expert network of organizations and individuals from all areas of care of children and youth who cannot live with their families for a shorter or longer period of time. Its members come from direct work with children, youth and care leavers, from research and education, from professional associations, authorities, and aid organizations. Together, they advocate for high-quality alternative care of children, be it in foster families or in the various forms of residential groups. They work for children in vulnerable situations as well as for the implementation of the UN Rights of the Child. Special focus is also placed on the care of children and young people at risk in situations of war and crises and with refugee experiences.

FICE International is a politically and religiously independent, non-governmental organization (NGO) and not-for-profit association, led on a voluntary basis. Founded in 1948 under the auspices of UNESCO at the Pestalozzi Children's Village in Trogen, Switzerland, its founding members consisted of 14 children's villages from France, Italy, Hungary, the Netherlands, and Switzerland. Their aim was to foster exchange and cooperation among the different children's villages – their leaders, staff, and young people – with the goal of developing the best possible practices in their work.

Today, FICE International has members in over <u>26 countries</u> across five continents. The majority of these are national sections—legally independent NGOs in their respective countries—which, in turn, have a wide network of organizational and individual members providing a large variety of direct services to children and youth. The national sections and further members collaborate at the international level to:

- Share experiences and ideas as well as to learn from each other.
- To develop knowledge, best practice recommendations, tools and, in some cases, projects or services, for example in strategic working groups such as "Quality in Care", "Leaving Care and Empowerment" and "Special Task Force Ukraine and Further Emergency Situations / 'Hand in Hand'".

FICE South Africa

FICE South Africa is one of the more than thirty members of FICE International and is represented by the *National Association of Child Care Workers (NACCW)*.

The National Association of Child Care Workers (NACCW) is a non-profit organization (NPO) that has been working to improve the quality of services and care for vulnerable and at-risk children and youth for 50 years (since 1975) through promoting the field of child and youth care (CYC) and developing the skills and abilities of child and youth care workers (CYCWs) so that they are able to advocate on behalf of vulnerable children within a committed Child Rights Framework.

NACCW's vision is to secure healthy child and youth development and improved standards of care for vulnerable and at-risk children. Its mission is to provide the professional training and infrastructure to promote healthy child and youth development and improve standards of protection, care and treatment for orphaned, vulnerable, and at-risk children and youth in family, community, educational and residential group care settings.

NACCW's strategic goals and areas of operation are as follows:

- Developing and replicating models: NACCW implements models and programmes for children, youth, and their families. In the past year (2024), NACCW's programmes reached 116,000 vulnerable and at-risk children and youth.
- Consultancy and mentoring: NACCW provides consultancy and mentoring support to child and youth care workers (CYCW), government departments and other organizations.
- Skills development: NACCW offers Level 4 and 5 accredited training in CYC Work and other training in the CYC field.
- Professionalizing the field: NACCW advocates for the professionalization of the CYC sector in South Africa.
- Membership: NACCW has individual and NGO members, and corporate and private members involved in the provision of care for children.
- Knowledge development: *NACCW* disseminates information through its journal and conferences and takes part in forums in the field.
- International liaison: *NACCW* represents the CYC sector as the Federation of International Educative Communities (FICE) South Africa and is a member of FICE International.
- Advocacy: NACCW and its members advocate for the wellbeing of children and youth through its programmes and membership activities.
- Youth development and participation: NACCW has created a Youth Forum structure to provide opportunities for youth who are service recipients to act on their own environments and circumstances.

FICE Kenya

FICE Kenya is one of the more than thirty members of FICE International, and is represented by the humanitarian child and youth organization *Make Me Smile – Kenya*.

Make Me Smile Kenya (MMS-K) a national section member of FICE International is a Kenyan non-profit making organization established in 2009. The Mission of MMS-K is to help you help yourself for the benefit of your children. The organization works towards the promotion of social and health development of Orphans and vulnerable children (OVC), adolescents and young people through programming, policy advocacy and capacity building. Since its inception, the organization has significantly contributed towards the improved livelihoods for vulnerable communities, children in need of care, and adolescents, establishing itself as a key implementer in: OVC, adolescent youth sexual and reproductive health (AYSRH) rights programming and advocacy in Kisumu County. Over the years, MMS-K has developed a strong behavior change communication background developing and utilizing innovative communication tools and approaches in line with the department of Children Services and Ministry of Health. MMS-K headquarter is centrally situated in Kisumu County within Tom Mboya Estate with satellite offices across the Sub-Counties.

The organization has strong technical capacities in community engagement processes including dialogue forums using local structures (opinion leaders, marginalized group associations, youth platforms), working with religious associations and champions and meaningful adolescent and youth engagement in design implementation and evaluation of SRH/FP programmes.

Specifically, *MMS-K* implementation undergirds the key principles of community-based programming as:

- Strengthening families as primary caregivers of children.
- Strengthening systems to support community ownership.
- Ensuring prioritized and focused interventions that address children's most critical care needs.

The <u>website</u> and <u>annual reports</u> of FICE International provide further information about the activities and impacts at the International, Regional and National levels of FICE. For further information, please contact: Ms. Rosa Núñez (Technical Assistant), email: fice.inter@gmail.com.

Further links and information as examples

Impact USAID cuts on children: firstfocus.org

Impact USAID cuts in general: ngosafety.org