

OUR VALUABLE CHILDREN: the OVC project in Uganda, Rwanda, Kenya and Ivory Coast

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CONTEXT

In 1990, AVSI started the Distance Support Program (DSP) in the Great Lakes Region of East Africa to support about 6,000 children for their education.

The DSP is a stable, continuous economic contribution directed towards one specific child or adolescent from one specific donor who receives regular information on the child, the program and on AVSI's activities in the world. This contribution allows AVSI to design an individual intervention plan for the child, his/her family and community, to give material support and to accompany his/her education always with the presence of an adult. The support has a beginning and an end; the end can be finishing a course or receiving a diploma, or an improvement in the economic situation of the family. In this way, the DSP is a piece of path walked together: the experience of a positive glance on oneself and on reality which gives the child the possibility of becoming a protagonist of his/her own life.

AVSI's method consists of a holistic approach to the person, considering his social, cultural and familial context. Ultimately, it is an educational approach in which the stress is not only on giving assistance, but mainly on promoting the responsibility of each person. The social workers give specific attention to each child and facilitate interventions which can support his growth and education, involving all the people living around him.

For the child the donor can become a point of reference that conveys personal affection, both through the social worker (who is the point of connection between the child and the donor) and through the letters and communication exchanged between them. At the same time, this relationship also presents a possibility for the child to encounter gratuitousness, just as it is a chance for the donor to live solidarity with a distant world by having at the center the relationship with a person and not only the economic support given.

In the three countries of the project in East Africa, the DSP was born as an answer to different needs and has developed in slightly different ways as a result.

In UGANDA, the DSP was born in 1993 from a deep friendship among AVSI expatriates and some HIV/AIDS patients who asked for help in taking care of their children after their death. In Kitgum, these patients founded the Meeting Point, a place where sick people could meet and share, which since has become a reference point for orphaned children as well. Significantly, the initiative was born to answer to a concrete and urgent need expressed by sick people. At the same time in Italy, many people approached AVSI with the desire to support HIV/AIDS affected persons. For this reason, AVSI began to collaborate with local organizations that share a common vision and method, like Meeting Point Kitgum and others.

In RWANDA, the DSP started after the genocide of 1994 when AVSI entered the country with a project to recover unaccompanied children traumatized by the events. After the emergency period, AVSI decided to collaborate with two local provinces, Muhura and Gitarama, and to directly implement social programs for child-headed households, vulnerable children and orphans. The main activities have been support to education, health and income generating activities.

In KENYA, the DSP started in Nairobi as assistance to a priest who was working in one of the biggest slums in the world. AVSI was already supporting some vocational schools and decided to begin contributing towards the education of children. The first interventions were coordinated by AVSI social workers and later through local partners, but always with an adult educator near the child to evaluate his/her situation and to respond to the needs of the child and his/her family and community

Due to the steady support of the Italian donors, the DSP is often an occasion for AVSI to maintain a regular presence and to provide continuity to its intervention in a country.

In 2004, the United States Agency for International Development (USAID) launched the President's Emergency Plan for AIDS Relief (PEPFAR) with the explicit aim to reach at least two million people with Anti-Retroviral Treatment, to prevent infection in another seven million people and to care for ten million people affected or infected by HIV/AIDS with particular attention to orphans and vulnerable children (OVC), in 15 countries, mostly in Africa. The initial total budget was \$15 billion dollars for 5 years.

USAID published an Annual Program Statement (APS) that would make PEPFAR funds available for OVC programs in a limited number of countries through a competitive but open process. Many of the essential criteria for a program to be funded were already included in AVSI's method for the Distance Support Program. Among these were the following: to have the possibility to scale up existing activities with positive results and to work through community based organizations and faith based organizations. The statement indicated that: *"The pressure by donors to quickly increase the numbers of children reached could lead to unacceptable sacrifices in the quality of assistance and level of benefits, unless firm quality standards are established. In addition, if success is assessed only by counting the number of children reached, implementing organizations could select interventions that reach large numbers of children quickly, but are not sustainable, instead of selecting interventions that reach fewer children, but are more likely to continue for a longer time. For example, providing school fees to orphans is a quick way for cooperating agencies to reach many children. However, better ways of reaching children for a longer term could exist by supporting community structures and community approaches that will continue to provide support when funds for school fees dry up."*

In response to this APS, AVSI presented a project to care for OVC in three countries where the DSP was more advanced and structured: Uganda, Rwanda and Kenya. USAID approved the project with a total budget of \$15 million: \$7.2 million financed by USAID and \$7.9 million financed by AVSI cost share through the DSP.

PROJECT PRESENTATION

AVSI's OVC program developed as an extension of AVSI's presence in Uganda, Rwanda, and Kenya, and specifically from the established network and method of working of the Distance Support Program (DSP). At the program's launch in 2005, AVSI was positioned to take advantage of the investment offered by USAID-PEPFAR to extend the numbers of children who were being supported by the community level organizations already working with AVSI and the DSP. AVSI and its partners were empowered to provide a comprehensive, tailored package of services to the most vulnerable children and families in the communities.

While the OVC title refers to *Orphan and Vulnerable Children*, AVSI has intended since the beginning to show a different approach to the "problem" and so the acronym was modified to stand for *Our Valuable Children*. This redefinition of terms is an affirmation that the most reasonable and human approach to a child is one that emphasizes his value, not his vulnerability or what is lacking, but what is there: his infinite value as a unique and unrepeatable being.

"Poverty and development are related with the desires of the person...a person is poor if she is not able to satisfy her deepest desires, of truth, justice, beauty... [Emilio Colombo in "Lo sviluppo ha un volto", Guerini e Associati, 2008]

In a broad sense, every human being is poor since he has an infinite need that is always larger than any answer we can give. With the OVC program, we do not take care of the poor, but instead of the "**vulnerable**". Who is vulnerable? We can say that a person is vulnerable when he is unable of taking care of himself and of his need, and at the same time is not able to acknowledge his own resources. Most often this vulnerability is rooted in a lack of **awareness** of his own need and of his own "I".

"The first need man has, especially if he is in a condition of poverty and injustice, is to be aware of his 'I'. This elementary need is responded to with education, without which there is no chance of a future because nothing can last without an aware 'I', not even the most sincere generosity."

[Luigi Giussani from the foreword to UN Workshop on Children in Armed Conflicts, New York, June 2001]

Agreeing with this fundamental principle, AVSI considers education of the people to be the stone and frame of any intervention, particularly ones regarding the well being of children and youth.

The OVC program aims to respond to the needs of children and families and for this reason is first of all an educational project which creates relationships with the vulnerable people. These relationships support their education and promote their human development. Born out of the experience of DSP, the program has been shaped by the five points of the AVSI method: the centrality of the person, starting from the positive, doing with, subsidiarity and partnership. The method has been carried out in the OVC program through specific methods: all children are accompanied by an adult who is taking care of them from nearby and one who is take care of them from afar, like the Italian donor or USAID.

The objectives of the project are:

1. To promote and improve dignified living conditions for HIV/AIDS orphans and other vulnerable children and adolescents (OVC).
2. To build up the responsibility and capacity of families, communities and CBOs to take care of their OVC and support their growth.
3. To reinforce access to and provision of quality services for OVC.

Activities for the children and their families are implemented by AVSI with the collaboration of more than 100 local organizations and partners, including small associations, each with a great knowledge of the field and the needs of people. Direct activities are implemented for children “enrolled” in the project, known one by one, with a specific face (and code, like the DSP children), while indirect activities are implemented for their families and communities, including other children (not “enrolled”) who become beneficiaries of the project.

Direct activities:

- ✓ Education (support to nursery, primary and secondary schools, with school fees and learning material; after school programs, vocational training)
- ✓ Health care (medical insurance, medical fees, home based care support, visual/disability devices, food for nutritional support)
- ✓ Emotional support (personalized help, home visits, counseling)

Indirect activities:

- ✓ Recreational activities
- ✓ Income generating activities for parents and guardians
- ✓ Support to quality education (school rehabilitation, teaching material and equipment, teachers' training)
- ✓ Sensitization and training for guardians and community members on health education, nutrition, prevention of HIV/AIDS, promotion of girl's education
- ✓ Training and capacity building of social workers and local partners.

RESULTS

We report some numbers, without forgetting all the events and methods used to achieve them.

The numbers

- At the end of September, 2008, 12.787 OVC have received at least three essential services (support to education, health care, psychosocial support): the target of 12.000 children has been overcome before the end of the project.

- More than 4.000 persons (including parents, social workers, teachers) have received training courses on child care and HIV prevention
- The number of OVC who have benefited indirectly has greatly exceeded expectations: 185.547 were reached in 2007 and 101.106 by the end of September 2008. These children are siblings, peers and/or friends of the 'enrolled children'. They have participated in recreational and sport activities, sensitization meetings or have benefited from the support given to their schools, like teaching material, equipment, rehabilitation etc.
- Thousands of families benefited from business skills training and income generating activities, which in many cases have brought about other positive changes (school feeding programs, improved care for orphans, increased number of orphans receiving school fee assistance).
- More than 100 partner organizations have received significant technical assistance.
- Training materials have been developed, tested, translated and utilized in all three countries.

Training

Training is the key activity of the project, because it promotes that unique and loving glance that allows the adults caring for OVC to look at them as "valuable children" and to answer to their personal needs.

During 2007 we trained:

597 parents with adult literacy courses
 319 parents and community volunteers in health education
 292 social workers in training on child observation and intervention plan
 1.144 teachers on the value and the meaning of education
 131 administrators of local partners on management and administration
 7.255 adults on business skills in order to start a business and take care of their own children.

Database and Program Tools

To implement a program of this scale also implies the collection of data to show results. AVSI has coordinated the development and use of common working tools across the three countries and hundred partner organizations. The tools include the child/family assessment form, the follow up form, information management tools, and accounting records (already introduced during the CTO in 2006), all linked to the program database. The database has become a useful means to prepare reports for institutional donors like USAID and private donors like the Italian families, and to monitor and evaluate the activities implemented by social workers from AVSI and local partners.

The use of these tools has created a greater knowledge and awareness of the reality and has helped improve the work done because it gives the social workers and the managers a way of capturing the work being done as well as the shortcomings. Concerned at the beginning about the lack of means and resources, the social workers are now more aware of what they can do and achieve thanks to the relationships born and developed with the children and their families. This change has been achieved thanks to the importance given to activities which increase the relationship with the beneficiaries, like home visits and recreational activities, and by AVSI's inclusion of the social workers in the tasks of formulating the budget and the activity plan of the project.

Baseline survey

At the beginning of the project AVSI, with the support of Fondazione per la Sussidiarietà, started an evaluation consisting of three phases:

1. a baseline survey, to collect information on the children and their families and analyze them;
2. a mid-term assessment, to further define survey tools (questionnaire, indicators) and experiment with new models of data analysis; and
3. a final evaluation, which will take place in 2009, to verify the impact of implemented activities.

The research is implemented by using resources already existing within the project, namely the social workers employed by AVSI and implementing partners. In this way, the research benefits from the collaboration and mutual trust that already exists between beneficiaries and interviewers. Even if this choice has “scientific limitations”, the resulting benefits have been greater than the risks. The high level of motivation of the interviewers who were already involved in the project and the positive relationships between the social workers and children has meant that the data collected through surveys is more adherent to reality, and that the logistics of implementing the survey were more agile and less expensive.

The results of the first two phases were presented during seminars organized in Washington and in the involved countries, and at the Meeting of Rimini in 2008.

OVC events and the extension of the project in Ivory Coast

On November 27, 2007, AVSI presented the preliminary results of the project during a seminar held in Washington, DC: “Our Valuable Children; the quality and sustainability of care for OVC”. During the week of May 26 – 30, 2008, AVSI repeated the seminar in the three countries of the program, Uganda, Rwanda and Kenya. The seminar agenda consisted of a program presentation with a video, two oral presentations of the project manager and researchers of Fondazione per la Sussidiarietà on the challenges and achievements of monitoring and evaluation of OVC programs and the last session of witnesses of changes with representatives of beneficiaries from “the field”—local partners working with children and youth supported by the project.

Through these presentations and witnesses, AVSI was able to demonstrate its method in action, a method based on the centrality of the person, starting from the positive, doing with the families, communities and local networks, without replacing them, but supporting the discovery of their resources and their engagement with reality.

At the conclusion of the seminar in Washington, Dr. Kirk Felsman, child psychologist and Senior Technical Advisor of OVC at the Office of HIV/AIDS, USAID, gave some final comments in which he underlined the fact that AVSI’s method is that of being present and of working in close relationship with partner organizations in a manner that is humble and respectful, but which is also serious and professional. This method means that the effort to build capacity of a selected organization is less about techniques and protocols and more about relationship-building which can then become the context in which the transfer of know-how and expertise makes sense.

Presence and human accompaniment can be learnt by following the one who works in this way, and not only through written material and best practices.

After this seminar and due to the positive judgment that the USAID Advisors have had on AVSI, USAID has requested AVSI to extend the program to Ivory Coast, where existing PEPFAR are giving scarce results in terms of quality of intervention. In the words of Beverly Nyberg, the OVC Advisor for the U.S. Office of the Global AIDS Coordinator, Ivory Coast was a place where: “ we need an NGO like AVSI, with experience in Africa, who knows the human being and works *with* the people and respects them.”

AVSI’s method highlights the fact that: “our programs are not development projects for x number of beneficiaries, but life projects for persons, for human beings,” as expressed by Riccardo Bevilacqua, AVSI Rwanda Country Representative during the OVC Seminar held in Rwanda in May. This method, and the value of it, is acknowledged by people who know and follow us.

The capacity building of social workers and local partners

In Africa, a high percentage of orphans still live in a family setting, but many of these families face significant pressure to provide for the material and emotional needs of all members of the expanded household. However, family and community capacity to care for their children, especially the most vulnerable, implies a number of factors that go beyond financial resources, and that can be affected by the HIV/AIDS epidemic. Looking at the family, capacity to care for vulnerable children implies first and foremost the recognition and acceptance of personal and collective responsibility for the well-being and growth of each child. Often what is not there is this level of responsibility.

“The development of a People is not related first of all to money, material needs or technical structures, but mainly to the development of a mature mentality and customs. The protagonist of development is the human being, not money or techniques” [Pope John Paul II- Redemptoris Missio].

“The meaning of each richness is given by Humanity, there is no economic development and civil and cultural progress without the human capital generated in the family” [Fazio dal libro: Globalizzazione – Politica economica e dottrina sociale].

Education of human resources is the main aspect of capacity building. Through their education, adults can increase their responsibility and discover how they can help their children. In the OVC project we have many examples of adults whose capacity has been built in this direction. In Rwanda, for example, the women of an association of widows first received business skills training and began to generate an income from their agricultural work. Later, they decided to open a nursery school together for their little children so as to give them an education instead of bringing them into the fields. In Mutuati, a rural area of Kenya, the parents of the Don Bosco Association whose children were supported by the project brought themselves together and decided to build a piece of road and a water tank to give water to their village. These examples show that the result of “capacity building” as AVSI understands it is not merely increased knowledge or technical skill in a certain area, but a demonstrated passion for the well-being of the community and the most vulnerable.

AVSI's approach to capacity building implies frequent interaction within a relationship based on mutual trust and respect, helping individuals, partner organizations and families to recognize their needs and identify solutions based on existing resources. Always at stake is the capacity of the person, whether the personnel of AVSI or a local partner organization, or of the child or parent.

This perspective influences all decisions that give shape to the program, including the identification of local organizations as partners in the program. AVSI does not identify partners through public advertisements, as many international organizations do. Local partners are chosen after an encounter in the field where, through working together in the same area and/or for the same people, it is clear that a common vision is shared. AVSI recognizes local partners as expressions of the societies from which they come and formed by individuals with certain values, knowledge, experiences, goals and patterns of working. Individuals to share with and to do a piece of life's path together. In a daily interaction of work, needs are identified together with strategies and solutions, having as a common goal the care and growth of OVC. Thanks to training courses, frequent follow-up visits and the use of common working tools, many partners have also increased their technical and management capacities and are now prime recipients of donors' funds.

For families and communities, capacity building plays out in sensitizations on different topics, like child education, life skills, child care and nutrition, parenting responsibility, prevention of child abuse, HIV/AIDS prevention; but also in adult literacy programs, business skills training and promotion of Income Generating Activities. Through their education, adults can increase their responsibility and discover how they can help their children. The opportunity for parents, guardians and older youth to be actively and regularly engaged in dignified work contributes not only to economic stability of the family, but also allows adults to enjoy a real sense of fulfillment.

AVSI strongly believes in family involvement in a participatory process which will allow them to become responsible and self-reliant. But mainly, the capacity of parents and guardians to care for

their children is built through a close relationship with AVSI and partners' social workers and other personnel who help them to have a deeper sense of responsibility of their life and for the care of their children.

Each child is taken care according to his needs but also to his resources. To help his growth it is fundamental to develop his inner resources, both the physical, mental and social ones. For this reason, educational support is the main core program area for AVSI. Adolescent and youth are also helped to gain skills and work opportunities, helping them grow in their responsibilities and roles in society.

RELEVANT ASPECT

Cultural Context

First of all, we want to underline that AVSI approach has been positive and innovative both for beneficiaries and social workers.

The centrality of the person is not a common approach for the African culture. In fact, the first challenge has been not only with children and families (families where it is not always clear who are the parents of a particular child), but also with our social workers. In a workshop where the facilitator asked the social workers about their feelings towards children, they replied that their feelings are always the same, because each child is vulnerable, so each child is looked at by the social worker in a similar way.

Another element of difficulty is the approach of humanitarian assistance that is used by many international aid agencies. This approach has led to a passive attitude of beneficiaries who are accustomed to waiting for external support and often demand it. It may happen that beneficiaries come to expect only material support and are not willing to be personally involved. As a result, they insist that AVSI provide the solution to all their problems and deny any responsibility towards their children who "must" be taken care by the organization. To confirm this common vision of the external support, we give the example of UNICEF Nairobi which introduced a new cash transfer project, where a financial contribution is given to parents to take care of their children, that is to be parents!

To work with a different approach means to help each social worker to make the experience of his/her own centrality and uniqueness, and therefore to reflect it in the relationship with the child and the family. In this sense, all training programs are designed to promote the awareness of social workers to put themselves into play as persons and to increase the importance of their educative role vis-à-vis the child.

It is a long and patient work where individual freedom is at play and where each step can be little, but is real. For example, during a training session in Rwanda the social workers were underlining the difficulty of answering to the overwhelming needs with such limited financial resources. After a few years of work together, the same social workers "discovered" that families think that their main problem is poverty, while there are other problems, mainly in their relationships, and that each situation is different and needs time and patience. As a result, the social workers asked to be helped in the relationship with families. When one understands what is useful for oneself, even the way of looking at the others changes. In front of the need of people, it is important for a social worker to understand that not only material support is important, but that each one finds a way to support a child through the relationship with him and his family.

To have the person at the center means to value each child and each family's resources and possibilities and to create a plan through which he can develop them, taking into consideration the personal skills which are different for each one. Also families are different and can be involved in different ways and with different means to support the growth of their children.

For the social workers, to have the person at the center means to promote their own creativity, for example asking them to propose and organize recreational activities and different methods of work (working in couples to share information, experience, or organizing meeting with families having similar problems).

To have the person in center means to look at all available resources, to “start from the positive” and to “do with”. This has been possible with the children, their families, the social workers and the local partners.

In particular, the improved capacity internal management and accountability for many local partners (i.e. “subsidiarity” and “partnership”) has resulted in a possibility for them to have more donors and to increase their activity, and therefore for AVSI to expand its method. This was possible for the Meeting Point Organizations in Uganda, for example.

An original meaning to common words

Some common words in the humanitarian field have found a new interpretation and meaning through this AVSI experience with the DSP and OVC program.

Capacity building: generally its meaning is related to technical capacities, while for AVSI it means the risk implied in the meeting of two freedoms at play in answering to identified problems in life.

Training: generally they are organised as residential workshops with planned lessons, working groups and standard evaluation of results. More than this “traditional” way (still used by AVSI in different training sessions, like the Value of Life or the Risk of Education) other approaches have been used, such as exchange visits and witnesses where it has been possible to share with people working in a special way, to look at them, to understand how they do, to deepen their reasons and to imitate them. In a certain sense this is a “come and see” approach. Since the project is developed in different countries, the exchange among them has been possible and fruitful at different levels: the work of social workers, the income generating activities, the relationship with different local partners, etc.

Another original training method has been through the regular exchange among social workers who, on a weekly basis, reflect on the connection between the training courses received and the singular children they have to face in daily work; for example asking themselves how to tackle a specific situation by using the educational criteria learnt during a training of the Risk of Education.

The flexibility in planning training sessions has create the possibility for the AVSI program managers to use their own creativity, like in Kenya where a training session was done visiting an exhibition on Benedictians monks called “With our hands, with His strength.”

This different way to organize trainings has two interesting aspects: 1. activities are not predetermined, but there is the possibility to experiment new ways and solutions to share with others; 2. this method, based on experience, promotes the encounter with everybody and with peculiar experiences and interesting people. If development can be born out of the personal involvement of everybody, this method is very important.

Participation: this is another word which gets a lot of use, and yet has an important meaning that needs to be rediscovered. In general, participation is considered to be the possibility for beneficiaries to decide or influence the use of donors’ funds. During these years for AVSI, participation has meant mainly to involve the beneficiary in a personal commitment to achieve positive results with the support given. For example, some parents were asked to give a contribution for the payment of school fees or to collect the final results in the school. In this way, the parents were made more aware of the importance of their children’s education. During a seminar with parents, a father gave his witness: Only one of his six children was supported by the project for the payment of school fees. In the beginning he was very disappointed because we were not solving his problem. Then he became involved in a group of parents who received supported for an IGA and started a school feeding program. He concluded his witness with these words: “Today I can proudly say that with my job I can pay the school fees for all my six children.” If the project would have supported all the six children since the beginning, the result would have been apparently the same, all children were in school. But imagine what it means for these children to have a father who is committed to an activity with other parents, able to use his talents and capacity to support them, compared to a father who remains idle, most probably also sad and frustrated.

Another interesting experience of participation is in Rwanda where a group of secondary school students asked AVSI to fix some minimal criteria, such as regular attendance and good results, that would be needed to continue receiving school fee support from the project. In other words, they asked to be present and involved and that their involvement was recognized. This is a great result in term of awareness of one's own resources, of the fact that they had something to give ("you paid my school fees, but I studied" a girl wrote to her sponsor last year). Although this step in Rwanda may cause the interruption of studies for some children, the challenge is also for them to exercise their freedom and so it is an educative experience.

To work directly as AVSI or to work through local partners

Having different situations in the three countries we could experiment different ways of working and judge them. In the beginning, the DSP in Uganda was implemented only through local partners, in Rwanda only directly through AVSI social workers and in Kenya there was a "mixed" system, both direct and through local partners.

After making the experience during an evaluation exercise done in Nairobi at the annual regional meeting in 2007, we identified the "mixed" system as the most comprehensive one. In fact, direct implementation is useful because it implies use of the AVSI method and allows for learning to take place directly from experience through monitoring and evaluation of all activities implemented, like a "pilot experience" which allows for direct contact with the reality, its problems and solutions, and avoids the risk of becoming only a "coordination body" of the work of others. On the other hand, by working with partners we can reach more beneficiaries with AVSI's method and also promote the growth and the development of intermediate bodies already existing in the community. We can realize in this way the principle of subsidiarity.

THE CHALLENGE OF EDUCATION

OVC/DSP is a project where the challenge of education is particularly evident. To explain this project, we always use peculiar stories, daily experiences of peculiar people, one by one, both children, or families or social workers.

"People are involved for a hope arisen through an encounter: if there isn't an encounter, if there isn't a "different" and new subject, the impact of the project is very low: we can build walls and streets, but the position of the single human being does not change"¹: if this is the risk for any development project, the risk facing the OVC/DSP project is very high since most of its activities are "immaterial". This project represents an investment in the possibilities of each single person to become protagonist of his life.

On the other hand, if development means to be active in front of someone else, our objective is a path², the real essence of each action is at play, everything can happen when the spark of a human encounter has struck and the wish to set out again is enlivened, and this can happen also in the most desperate conditions. This is what happened to Vicky Aryenyo, a beneficiary of Meeting Point International and now a social worker for this same organization. She said: "Often the beneficiaries, those whom we can try to help, do not trust you. Or they ask always more than what you can give them, or they complain when you cannot give them something, however the day after you are always there with them. I went to Meeting Point not for the food, the drugs or the money, but for an encounter, because Rose Busingye – director of Meeting Point International in Kampala – told me: don't you know that your value is greater than your illness?"

All this was already present in the experience of the DSP: the OVC project has allowed AVSI to reach a greater awareness and to develop useful instruments and tools, while also witnessing to all Italian donors the complexity and the richness of an experience made possible also thanks to their contribution and as an occasion of education also for them.

1 Giuseppe Folloni in "Lo sviluppo ha un volto", Guerini e Associati, 2008

2 "...mettere la persona umana al centro dello sviluppo significa in primo luogo riconoscere che lo sviluppo é un percorso da seguire piuttosto che un obiettivo da raggiungere." [Emilio Colombo in "Lo sviluppo ha un volto", Guerini e Associati, 2008