DISRUPTING POVERTY

GLOBAL CHANGE THROUGH CHILD-FOCUSED OUTCOMES

2014

ChildFund
International

TABLE OF CONTENTS

CREDITS

OVERVIEW

For 75 years ChildFund has focused its programs on disrupting poverty for deprived, excluded and vulnerable children. We believe that fundamental change starts with children, so it is important that children have the ability to improve their own lives and bring positive change to their communities. As we change a childhood, we change the world.
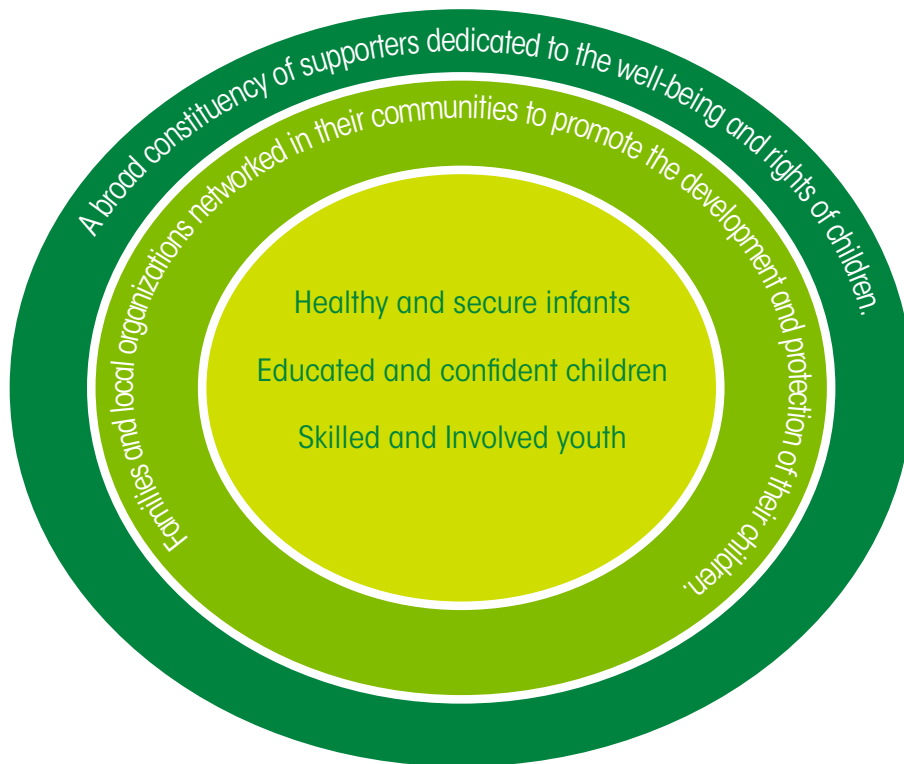
Our approach focuses on working with children throughout their lives from birth to young adulthood, and building the long-term capacity of community-based local organizations to create the environments children need to thrive. We hold ourselves accountable to clearly defined core outcomes which are interconnected and essential to achieving measurable impact for children.

Our global strategy for disrupting poverty has three core outcomes:

CORE OUTCOME #1: Positive outcomes for children in every stage of their lives, from infancy to young adulthood.

CORE OUTCOME #2: Strong networks of families and local organizations that provide a supportive environment for children to develop.

CORE OUTCOME #3: A broad constituency at national and global levels to champion the overall well-being of children.

A broad constituency of supporters dedicated to the well-being and rights of children.

Families and local organizations networked in their communities to promote the development and protection of their children.

Healthy and secure infants

Educated and confident children

Skilled and Involved youth

We prepared this report to gain a better understanding of the impact of our efforts to disrupt global poverty. This report explores how we are learning, highlights what we have achieved, and reflects upon what we are measuring, analyzing and discovering. In this and future impact reports, it is our intent to be transparent about the results of our development approach, and to invite a sustained dialogue with our readers about meaningful ways to help children overcome poverty and become positive leaders of enduring change within their communities and in our world.

Anne Lynam Goddard

Anne Lynam Goddard
President & CEO
ChildFund International

ChildFund International is becoming more systematic about how we study our contributions to social change versus what social change we can attribute directly to our work. Our experience and our strategic plan tell us that many actors and factors must come together if we are to achieve positive results for children. Because we have learned that our work is most effective when we link marginalized communities to services, infrastructure, and opportunities, and how we collaborate with others to do so. We strive to get better at mapping this multifactorial landscape more systematically in each community where we work.

As we celebrate our accomplishments, we also take pride in our focus to have a better understanding of how we contribute to broad social change, and at analyzing those contributions so we can refine our programs and approaches. This report highlights some of our past work. As we take on new endeavors, we are getting better at testing specific models and interventions that we have designed and improved over long periods, to determine if we can attribute change to them, separate from other factors in a child's or community's life. By becoming more systematic about attributing social change to our models, we will be better able to contribute to collective knowledge in the field—and we will have evidence-based impetus to scale up and replicate the models to reach more children in more countries.

SUMMARY OF KEY FINDINGS

DISRUPTING POVERTY AMONG INFANTS AND YOUNG CHILDREN

- A combined approach focusing on parenting, young child participation, and child protection has maximum positive outcomes during the critical window or early childhood.

- Parenting education is best integrated and delivered with: (a) child development and growth monitoring, and (b) work to build community-based child protection mechanisms that promote and protect the rights of children.

- The involvement of all family members, combined with home- and pre-school-based activities contribute to positive outcomes for young children.

DISRUPTING POVERTY AMONG CHILDREN AND VERY YOUNG ADOLESCENTS

- Young children who are deprived, excluded and vulnerable, when given equal chances to gain academic and life skills, are closing the gap between their own achievements and those of their better-off peers. Even in resource-poor settings, parents, teachers and traditional leaders are improving services such as educational quality and community protection—and children are not only benefiting but helping to make the change.

- Gains made at the community level are only sustained when they are articulated upward through coordinated advocacy engagement with regional and national services and legal frameworks.

- Teachers can effectively gain and use new skills to the benefit of students, if provided re-training, observation, modeling, and the opportunity to share with their peers.

DISRUPTING POVERTY AMONG YOUTH

- Both boys and girls who come from a background of deprivation, exclusion and vulnerability are often eager to help younger children who struggle with the same deficits. Because young children look up to and want to imitate older children; an age-stepped system of youth mentoring of younger children can have profound positive impact in making children as change agents.

- Accurately measuring adolescent pregnancy poses challenges, as questions on the topic have cultural and sometimes legal ramifications. These challenges affected our data-gathering, and in fact affected the national-level data that we sought for comparison. ChildFund is currently testing different and better measures to gauge healthy reproductive choices.

- The absence of global research quantifying youth participation and leadership makes it difficult to measure impact in this area.

DISRUPTING POVERTY — THE CHILDFUND APPROACH

"Disrupting Poverty" means breaking the patterns of poverty—from poor nutrition as an infant, to lack of education as a child, to no positive life options for youth. By focusing on how poverty impacts children, ChildFund believes this is the most effective way to begin disrupting systemic poverty. ChildFund disrupts global poverty by intentionally working with deprived, excluded and vulnerable children. We make a 12- to 15-year commitment to children and youth in communities served. Our life stage program approach focuses on three core outcomes for children, according to their life stage:

1) Healthy and Secure Infants

2) Educated and Confident Children

3) Skilled and Involved Youth

As an organization, we have achieved core outcomes for children by doing the following:

We FOCUS...		We ENGAGE...		We BUILD...	We ACHIEVE...
on children as agents of change and their experiences of deprivation, exclusion and vulnerability	X	families and communities in child development and protection	X	a broad constituency of supporters dedicated to the well-being and rights of children	✓ children have the capacity to improve their lives ✓ young adults, parents and leaders bring lasting and positive change in their communities ✓ societies value, advance and protect the worth and rights of children

ChildFund has learned that disrupting poverty comes through community ownership. Sustainable community development is not done through charity, but can only occur when communities own and lead in the process of their own development. Globally, we implement our programs by working through over 550 community-based local partner organizations. Many of our local partners started out as community-based parent associations, and through partnership with ChildFund, have become independent organizations. We are now helping to organize local partners into a broader global network that advances the rights of children from the local, to the national and international levels.

REIMAGINING IMPACT — PURPOSE OF THIS REPORT

For more than seventy-five years, ChildFund International has committed its organizational resources to unleashing the potential that is inherent in all children. Working in 30 countries around the world, our programs seek to fulfill the potential of children to not only survive but to thrive. ChildFund's programs and interventions have focused on disrupting poverty by helping deprived, excluded and vulnerable children have the tools and support to improve their lives and strengthen their opportunity to become young adults, parents and leaders in their communities. The key findings in this report highlight those program interventions, strategies, and policies that ChildFund has implemented in working with children from birth to young adulthood, and with families, local organizations and communities to create the environments children need to thrive.

In conducting this five-year analysis of our own child development and protection programs, we are able to evaluate the efficacy of our current program interventions, and also determine what might better engage children through our programs that are centered on the three life stages that can reliably produce desired outcomes and results. ChildFund's core competencies center around our understanding of children's experiences of deprivation, exclusion and vulnerability. By keeping our organizational values and principles at the center of our policy and practice, the organization has evolved a child-centered programming approach that focuses on:

HEALTHY AND SECURE INFANTS

- Good nutrition and care during the prenatal period and early years
- Protection against potentially life-threatening childhood illnesses
- Opportunities to develop and learn through play and exploration
- Stronger relations with the adults who care for them

EDUCATED AND CONFIDENT CHILDREN

- Support for children as they grow and develop

- Knowledge and life skills in school, at home and in the community

- Foundations to build lifelong learning and confidence for today and hope for the future

- Interaction with other children, family and community members to develop social skills

SKILLED AND INVOLVED YOUTH

- Training to acquire the skills needed to enter the workforce and meet challenges to grow into adults

- Skills to help understand and express emotions in ways that foster safe and fulfilling relationships

- Enhanced social and leadership skills to become meaningfully involved for the betterment of their communities

A REVIEW OF LIFE STAGES — A MODEL THAT IS WORKING

ChildFund has identified broad areas of intervention, that, acted upon by us and/or others, create change within component domains; and, together, these domains accomplish the core outcomes for a child at each unique life stage. Taken together, the interventions-domains of change-outcome chain in each life stage represents our theories of change or causal logic that, when accompanied by an evidence base for effective practice, form our holistic approach to child development.

Life Stage Outcomes and Domains of Change

0-5 years old	**Healthy and Secure Infants**	✓ Empowered and Responsive Caregivers ✓ Safe and Caring Environments ✓ High Quality Nutrition and Health Care ✓ High Quality Developmental Stimulation
6-14 years old	**Educated and Confident Children**	✓ Positive Relationships in Supportive Homes and Communities ✓ Literacy, Numeracy and Life Skills to Make Healthy Decisions ✓ Healthy and Actively Participating in Community Life
15-24 years old	**Skilled and Involved Youth**	✓ Employed at a Living Wage in Non-Exploitative Work ✓ Make Choices for a Healthy Reproductive Life ✓ Change Agents in Family and Community

Across all life stages key principles underpin our approach:

CHILD RIGHTS

Children's development and the fulfillment of their rights are essential elements of societal development—after all, children are an important part of the human capital in any community. Child rights occupy a central role in ChildFund's programs: we blend child-focused programming, child participation and leadership, capacity building of local partner organizations, with national and global advocacy on child protection and child rights. We work with duty bearers to protect rights, end discrimination and play an active role in developing local child protection networks that build toward national networks and advocacy work aimed at protecting children's rights on a national and global scale.

RECOGNIZING CHILDREN'S EXPERIENCE OF POVERTY

The complex phenomenon of poverty can be understood from many angles, but we've learned that if only local partners or even children's caregivers, define a child's poverty for her, then we miss elements that the child finds vitally important. Extensive research[1] around the world led ChildFund to develop what we call the **deprivation-exclusion-vulnerability framework**[2] to help us understand and take meaningful action on poverty as children experience it.
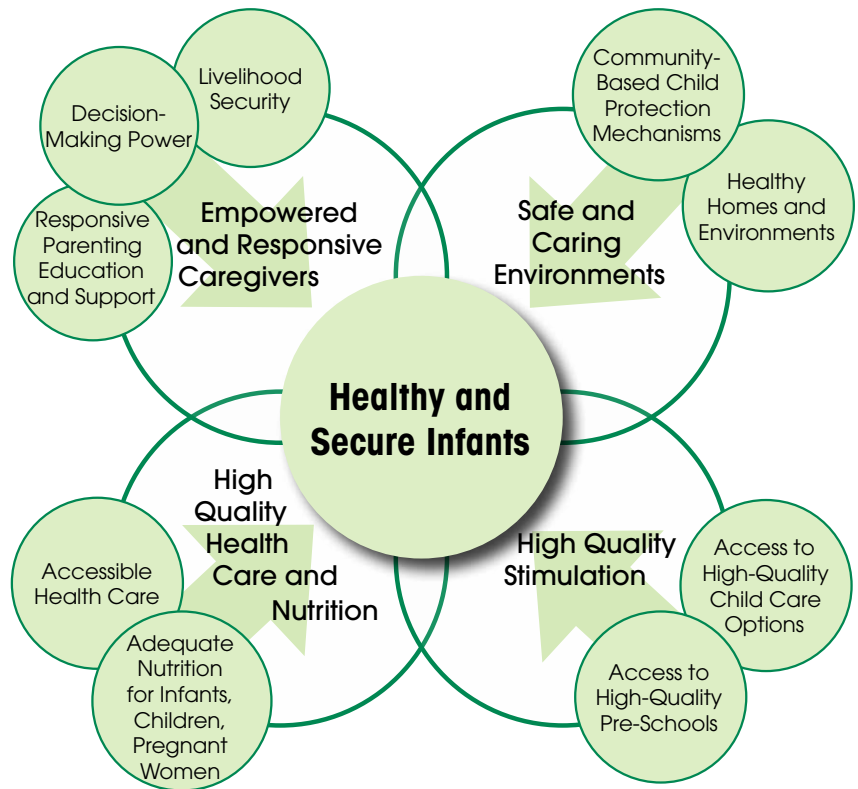
- **Deprivation** refers to a lack or sufficiency of goods and services—food, shelter, health care, schooling and the like—and is perhaps the most widely recognized dimension of poverty. Deprivation can affect children's physical, emotional, cognitive, psychological, social or economic well-being. Yet children often do not prioritize or may not be aware that they are deprived of goods and services that others think are necessary to their well-being. ChildFund recognizes the vital role of developing household assets and services for children.

- **Exclusion** refers to the many ways that people may be marginalized from full participation in the society in which they live. ChildFund found that children feel their exclusion intensely, often more so than their deprivation. Their experiences of exclusion can be grouped as: unequal social status and feelings of stigma or of being less than; social isolation because of poverty, gender, ethnicity, religion or caste; economic exclusion that excludes their participation in any but exploitative, hazardous or badly paid labor; and cultural bias that devalues children because of their age or sex. Our programs help children develop relations with caregivers, peers and champions of children's rights so as to help right the power imbalances that perpetuate exclusion.

- **Vulnerability** refers to people's inability to cope with events that disrupt their lives and are beyond their immediate control. Children defined their feelings of vulnerability as the precariousness of their present position—physical, emotional and/or social—and of not knowing what tomorrow might bring. Those who had experienced violence, abuse or neglect were deeply cognizant of their inability to control what happened to them. ChildFund bolsters the resilience of individuals, households and communities, and we collectively strive to alter the enabling environment to support this resilience.

DISRUPTING POVERTY: INFANTS AND YOUNG CHILDREN

In our work with infants and young children, we seek to help them develop to their potential, enjoy good physical and mental health, and live in stable, nonviolent families and supportive communities. Children aged 0 to 5 make up 30 percent of all children we serve; our interventions necessarily engage parents, other caregivers, and local and even national governments, who bear the responsibility for creating a world that is healthy and safe for children.

Parents and other primary caregivers, of course, are the mediators of most aspects of very young children's experience and development. Therefore, ChildFund reaches some 6 million adults in our programming, and we leverage their participation and contributions to produce positive change for children. We work to empower parents at two broad levels: as individuals, they gain skills and knowledge to improve their children's wellbeing; together, and in alliance with others in their community, they advocate for structures to become more supportive of children. By 'structures,' we mean the tangible and intangible systems

ChildFund's Theory of Change for Infants and Young Children

Healthy and Secure Infants

Empowered and Responsive Caregivers — Decision-Making Power, Livelihood Security, Responsive Parenting Education and Support

Safe and Caring Environments — Community-Based Child Protection Mechanisms, Healthy Homes and Environments

High Quality Health Care and Nutrition — Accessible Health Care, Adequate Nutrition for Infants, Children, Pregnant Women

High Quality Stimulation — Access to High-Quality Child Care Options, Access to High-Quality Pre-Schools

[1] Christian Children's Fund. (2007). *Programs in Practice.*

[2] Christian Children's Fund. (2005). *Understanding Children's Experience of Poverty: An Introduction to the DEV Framework.*

in the surrounding environment: government, health and education services are examples of the former; norms, values and social hierarchies are examples of the latter. ChildFund supports communities' access to or formation of tangible structures (child protection, child care, preschools, health services among others), and simultaneously seeks to illuminate intangible structures with actionable information on, for example, human rights, equality and respect. Parents are primary participants in promoting societies and structures that protect, value and advance the rights of children.

Holistic programs for infants and young children encompasses all the aspects of a child's development and are effective in both disrupting poverty and addressing systemic inequality.   Indeed, there is urgency to intervene in that critical window in the first 5 years of a child's life to ensure that a child's full potential is met, ensuring the greatest impact on the future. Within the complex web of factors and actors that influence young children's development and experiences, we have learned that the most effective approach to disrupting poverty in this life stage is by emphasizing **"the 3Ps"**:

- **Parenting**: the active, knowledgeable, responsive and rights-advocating role that is ideally played by parents and/or other caregivers on behalf of children.
- **Protection**: child protection is the sum of activities and actions by governments, communities and families to prevent and respond to violence, exploitations and abuse of children.
- **Participation**: children are not passive recipients of experience but active contributors to their own well-being and development. Our programs encourage children's input, opinions and even direction, appropriate to their developmental stage.

A child's strong start in life depends on a healthy pregnancy and safe delivery. For this, women need quality maternal care, which in turn depends on a host of factors from a functioning health care system to her financial, physical and social access to services. ChildFund supports healthy pregnancies and safe deliveries both as a woman's right and a prerequisite to a child's strong start in life. We view the availability and quality of maternal and delivery services as a reflection of the value that a society accords to women and children.

HONDURAS: PARENTING EDUCATION, A DRIVER FOR COMMUNITY CHANGE

The Honduras early stimulation intervention described here, became the strong and evidence-based foundation of ChildFund's current early childhood development model. The parenting education aspect of this model is now a central feature of our work; marking our continuing commitment to primary caregivers as key drivers of the well-being of infants and young children. Here we provide a generalized overview of parenting education, but first make two important notes:

1. We tailor parenting education to meet the implementation context, and draw upon positive local practices and values to enrich the model.
2. Parenting education is typically integrated and delivered with (a) child development and growth monitoring, and (b) work to build community-based child protection mechanisms that promote and protect the rights of children.

Through our local partners, parenting education begins with a participatory community diagnosis of children's home and community environment, and the conditions of deprivation, exclusion, and vulnerability experienced by children and their families. We use the results as a basis for further analysis with Community Child Protection Committees, developing community risk maps, discussing other risk factors for children, and identifying families whose children's health, security, and development are considered to be at high risk. The results and findings are disseminated throughout the community to raise awareness and garner community support and participation. Willing and qualified women are selected to become Mother Trainers, participating in about 20 hours of training over several months; in addition to the core parenting curriculum, they learn participatory teaching methodologies, workshop development, and monitoring and evaluation of participant progress. Trainers then teach the parenting education program in their own communities, with groups of up to 15 mothers and fathers using discussion, brainstorming and hands-on activities, and inviting local professionals (such as doctors, psychologists, nutritionists and nurses) to co-teach and answer questions, the caregiver-students proceed through five units that cover children's rights and general development, physical well-being, emotions and affection, socialization, and intellectual and creative development. They analyze their own beliefs and behaviors, and create strategies to cultivate more supportive home and community environments for children's development throughout the multi-week course, parents apply their learnings at home, and return to share their experiences. ChildFund and local partner staff routinely visit the education sessions to ensure quality; they and mother trainers assess not only participants' progress but the health and development of their infants and young children.

Parents in participating families emphasized horizontal and affectionate cooperation among family members, respected and listened to their children, and perceived much less need for punishment. Comparison parents, by contrast, viewed punishment as necessary to children's wellbeing, and their family

structures were more vertical and authoritarian. Participating parents, when asked what constituted family well-being, responded: love, respect, health and education. Non-participating parents listed housing, health, work, food and money. Researchers traced this difference in socio-affective values to the effects of the ChildFund intervention.

Interviewee responses and researchers' own observations indicated that the program had generated a 'spirit of collaboration' and mutual respect in the community. The affective bonds within families appeared to extend to others in the community. Families visited and were visited by friends and neighbors, while families in the comparison group said that they 'had no friends.'

This study in Honduras examined the outcomes of our work on children (and secondarily on families and communities) and made clear that it was the involvement of all family members, combined with home- and pre-school-based activities that contributed to positive outcomes.

KENYA: INTEGRATED EARLY CHILD DEVELOPMENT

ChildFund's Loipi model of early childhood development and care illustrates one way we work with communities to foster a safe and supportive environment for children. Founded on deeply held values within Kenya's Samburu culture, the model builds on local knowledge and networks to offer high-quality services in the heart of communities. In the Loipi, a traditional gathering spot whose name means 'shade,' ChildFund and our partners train teachers and caregivers—mothers, fathers and grandmothers—to provide physical, cognitive, social-emotional and language stimulation to children aged 2 to 5, in the form of play and socialization. Children transition from the loipi to community pre-schools when they are ready to perform more sophisticated tasks in a more structured setting. The model also promotes immunization, safe motherhood, treatment of disease, child-growth monitoring and community-based child protection.

Results: an evaluation[3] into the Loipi model's effectiveness found lasting, positive outcomes in areas ranging from better health (increased immunization and perinatal care; decreased malaria and diarrhea) to men's greater participation in parenting. Participants especially valued the interweaving of traditional practices with modern knowledge and services to increase caregivers' capacities and skills. "Your communities are very good at bringing up children, [and]… you must continue doing these good things," is how one respondent paraphrased ChildFund's approach. At present, ChildFund and our partners support 1,338 loipi that serve more than 98,000 vulnerable children in Kenya. ChildFund and other NGOs are replicating the Loipi model in Uganda, Ethiopia, Tanzania, Namibia and Angola.

IN SUMMARY

ChildFund's approach to disrupting poverty among infants and very young children involves engaging caregivers, communities and government service providers, and blends interventions from multiple sectors, to support the health, security and development of those aged 0 to 5. Parents, in collaboration with our local partners, gain the knowledge, skills and self-efficacy to better play their caregiving role. With like-minded others, parents use their capacity and agency to analyze the service and social structures around them, and shape those structures to become more accountable to and supportive of children. We have learned that we are most effective when we connect excluded communities and their children to national-level investments and services, and when we empower parents, caregivers and families to provide the early developmental stimulation their infants need. Finally—and this holds true for ChildFund's work with children of all ages—our impact is heightened when we design holistic rather than single-sector programming, when we examine and refine our comprehensive program models over time, and when we integrate our interventions for children and parents with community-based mechanisms to protect the rights and security of children of all ages.

DISRUPTING POVERTY: CHILDREN AND VERY YOUNG ADOLESCENTS

The age range encompassed here—from 6 to 14 years—is universally linked to children's primary school attendance and the acquisition of numeracy, literacy and other foundational skills. As children enlarge their sphere beyond home and family, they also strengthen essential competencies such as identity and voice, participation and confidence. Almost half (48 percent) of the children whom ChildFund serves are 6 to 14 years old, and our programs help them achieve the critical developmental milestones of childhood and early adolescence.

We build upon the foundations for lifelong learning established in earlier years by promoting children's learning in safe, accessible schools that provide a quality education, and their socio-emotional development in supportive homes and child-friendly communities. ChildFund and our partners work with deprived,

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[3]   ChildFund hired Acacia Consultants, Ltd., of Kenya to perform a summative evaluation of the Loipi model.

excluded and vulnerable children, striving to ensure that these children have equal chances to develop and grow, not only in the academic realm, but in their aspirations, creativity, communication, self-confidence and leadership skills.

The evidence presented below outlines our work with local partners and marginalized children, illustrating the opportunities to gain fundamental skills. We organize evidence by the three domains of our theory of change for children aged 6 to 14. Within the domain of literacy, numeracy and life skills as a prerequisite to healthy decision-making: household survey data on school completion are discussed, and we examine what we are learning from our work on educational quality in primary schools in Zambia. Next, we move to the domain of positive relationships in supportive homes and communities, and see how a school-based project in Angola increased children's learning, in part by engaging parents and teachers in supporting children and in part by helping them build positive relationships with peers. Finally, we turn to the domain of children's health and participation in community life, and examine how upholding children's right to protection leads to improvements in children's and communities' lives.

ChildFund's Theory of Change for Children and Very Young Adolescents
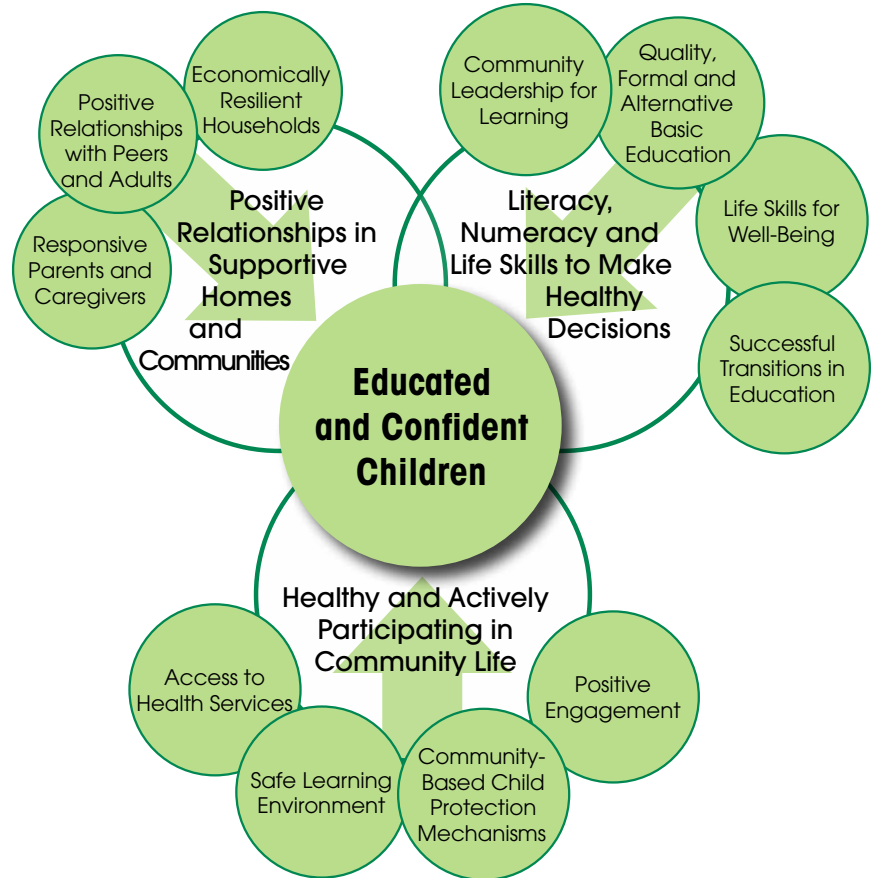
A quality, primary education is every person's right. Globally, the primary school enrollment rate reached 90 percent in 2011 (up from 83 percent in 2000), but completion held steady at just 75 percent.[4] The United Nations cite poverty, gender and rural residence as key determinants of being out of school.[5] Our own surveys of more than 300 children in Ethiopia revealed that household poverty, childhood illness, and caring for younger siblings keep primary school-aged children from completing school in our program areas.[6] In India, where our surveys reached almost 800 children, many girls in our program areas are already married by the age of 14, stay out of school when menstruating, or are overtly denied an education because of gender discrimination.[7]

When a child misses this window of opportunity—when she does not attend or complete primary school in the expected age range—she is unlikely to make up the loss and her chances for a productive and satisfying future are compromised. She will not have the important credentials conferred by a primary school diploma, and in many cases will not have gained the vital skills of literacy and numeracy. Perhaps as devastating are her missed opportunities to build the life skills she needs to make healthy decisions.

For this reason, ChildFund puts a premium on children's attendance and completion of primary school. In 2013, more than 99 percent of all school-age children enrolled in our programs were also enrolled in an educational institution.[8] But our household surveys show mixed results when it comes to children's completion of a primary education.[9]

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[4] United Nations. (2013). *We Can End Poverty-Millennium Development Goals and Beyond, 2013 Fact Sheet.* Retrieved December 2013 from United Nations: http://www.un.org/millenniumgoals/pdf/Goal_2_fs.pdf

[5] Ibid.

[6] ChildFund International. (2012). *Midline Assessment of ChildFund Core Outcomes at Sodo-Buee and Silti-Aynagie Program Areas.*

[7] ChildFund International. (2013). *Report on Findings from India Midline: Assessing the Status of Core Program Area Indicators in India.*

[8] ChildFund. (Fiscal Year 2013). *ChildFund Accountability Dashboard.*

[9] The proportion of boys and girls aged 12 to 16 who have completed primary education.

Primary school completion in ChildFund programming areas, compared to national

	ChildFund		National	
	2009-10	2012-13	2009-10	2012-13
Ethiopia	70	61	54	58
India	61	79	97	-
Mexico	79	97	105[10]	104
Philippines	79	75	92	92
Sri Lanka	83	89	96	101

Our programming areas in two countries—India and Mexico—show statistically significant change in a positive direction. While the Sri Lanka surveys registered a slight increase in school completion rates, and Ethiopia and Philippines slight decreases, we did not find statistical significance in these cases. ChildFund does know that changing school completion rates requires great social change by many actors at many levels, and we are learning even from these inconclusive results how we can better detect and measure change over time. Meanwhile, the significant differences in India and in Mexico do have something to teach us.

The Indian government places a priority on children's education, and makes significant investments in primary schooling. The national primary school completion rate was about 97 percent[11] in 2010, yet more than 2.3 million Indian children are out of school.[12] ChildFund works in deeply marginalized communities where multiple obstacles stand between children and a quality, primary education: inadequate infrastructure and resources (the student/teacher ratio can be as high as 62:1), child labor and gender discrimination are often insurmountable obstacles, especially for girls. In light of these realities, we are encouraged by the narrowing gap between the local completion rates that we measured (60.8 percent in 2010 and 78.8 percent when we re-surveyed in 2013) and the national completion rate of 97 percent in 2010. It would appear that our multi-faceted work is indeed helping marginalized children to catch up to their peers nationwide.

In Mexico, too, the school completion gap appears to be closing. Across the country, 104 percent of all children complete primary education.[13] The government is strong on educational availability—in 2009, for example, it made pre-primary education mandatory for all children—although the public system struggles with corruption and uneven quality. Still, as in India, ChildFund works with children who are less likely to attend and finish primary school than the national average, and is encouraged by our survey results: completion rose from 78.9 to 96.8 percent in just three years.

School completion confers credentials that can help ensure that children are not kept from opportunities requiring, for example, a primary school diploma. Yet the school completion rate does not prove that children have acquired basic academic skills. Our survey data on skills acquisition is less robust than primary school completion rates, in part because it is more difficult to measure. We had the most success measuring reading skills in our programming areas in India. There, ChildFund detected a significant increase, from 25.1 percent (2009) to 34.5 percent (2013), in the proportion of 6- to 14-year-old boys and girls who performed at or above their current grade level in reading tests. While this is an encouraging development, the relatively low numbers of children reading at grade level—only about one-third after a significant increase—confirm the importance of educational quality and making sure that children truly gain the skills they will need for a productive and satisfying life.

EDUCATIONAL QUALITY: ACTIVE TEACHING AND LEARNING IN RURAL ZAMBIA

In Zambia's Mumbwa district, ChildFund helped children in marginalized, rural communities catch up to their peers nationally by improving the quality of education in local schools. We began by adapting several global best practices to support improved teaching quality as a route to greater student achievement. Teachers tend to teach the way they were taught, and in Mumbwa this often equated to lectures and memorization, rather than interactive and child-centered learning. Yet teachers can effectively gain and use new skills, to the benefit of students, if provided re-training, observation, modeling, and the opportunity to share with their peers.[14] ChildFund's ATLAS project[15] offered such a package to teachers in three primary schools, aiming to:

[10]   Can exceed 100 percent due to over-age or under-age children (those who enter school late, early and/or repeat grades).

[11]   World Bank. (2013). *World Development Indicators 2013*. Retrieved December 2013 from World Bank: http://databank.worldbank.org/data/download/WDI-2013-ebook.pdf.

[12]   UNESCO. (June 2012). *Education for All Global Monitoring Report Policy Paper 04*. Retrieved January 2014 from UNESCO: http://unesdoc.unesco.org/images/0021/002165/216519E.pdf.

[13]   World Bank, op cit

[14]   P.D. Pearson and Ghallager, M. (1983). "The instruction of reading comprehension." *Contemporary Educational Psychology*, 8. 317-344.

[15]   ATLAS, which stands for *Active Teaching and Learning Approaches in Schools*, was launched in 2008 and funded by ChildFund New Zealand.

- **Improve the technical skills of teachers**. To this end, three dozen teachers received intensive training in child-centered pedagogy over three school terms. They had opportunity to learn, practice and share their knowledge; monitor student learning and assess methodologies' effectiveness; and gain experience in classroom management strategies.

- **Systematically increase the use of active, participatory, child-centered and research-based classroom practices**. The 36 teachers in the intensive trainings immediately became teacher-leaders in their schools: by the end of the project, they had trained 56 of their peers in child-centered pedagogy. They formed Quality Circles of administrators and educators who, in monthly meetings at each school, shared best practices, problem-solved, and gave one another feedback and encouragement. Thus all teachers in the ATLAS schools participated meaningfully in processes that recognized and valued their intellect, experience and resourcefulness.

Evaluators observed teachers' classroom performance both pre- and post-ATLAS, and scored them on 21 elements of quality, ranging from interactive environment and student participation, to lesson preparation and classroom organization. Teachers' scores in 17 of the 21 criteria increased over baseline, and 13 of these gains were significant.[16] Of the four criteria whose mean scores declined, no decrease was significant. The before-and-after comparison shows that ATLAS teachers were planning better, clarifying their objectives, praising more, setting up better group activities, organizing their classrooms more effectively and creating more interactive experiences for their students—all of which were aims of the ATLAS trainings.

Changed Teaching Styles Post-ATLAS (score ≥ 0.5 represents significant change)
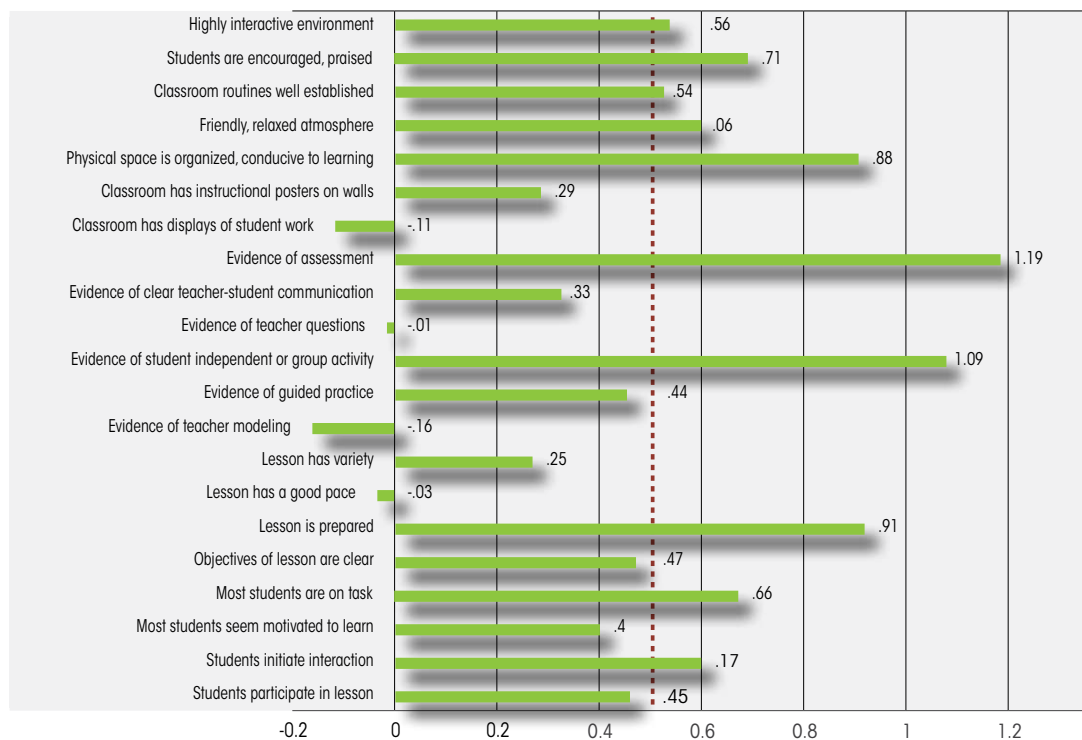
ChildFund and our local partner continued teacher training in Mumbwa, and we engaged parents and teachers as champions of children's roles, rights and responsibilities in school and, ultimately, their retention and academic performance.[17] In 2013, we sought to determine the cumulative effects of these interventions. In 28 participating schools, evaluators found ample qualitative evidence of improvements: student participation in school governance was up, and child representatives were actively training peers in leadership, rights and responsibilities. Children were aware of their rights, and reported concerns to appropriate adults. Students had opportunities to practice the democratic process, and their voices were heard. Inclusiveness of girls and disabled children rose, while corporal punishment decreased. Evaluators linked these many improvements to students' greater confidence, to greater parental and teacher

[16]   The differences between pre- and post-pilot scores were calculated and averaged. Evaluators judged any difference over 0.30 as significant. To estimate this threshold, evaluators used the Effect Size statistic, derived by dividing the difference between the means by the standard deviations; most standard deviations in this analysis clustered around 0.60. Therefore, any difference greater than 0.30 would yield an Effect Size of 0.50, a conventional level for judging significance.

[17]   The project that followed ATLAS was called *Promoting Child Participation in Education* (2010-2013) and was funded by the German Federal Ministry for Economic Cooperation and Development (BMZ) and ChildFund Germany.
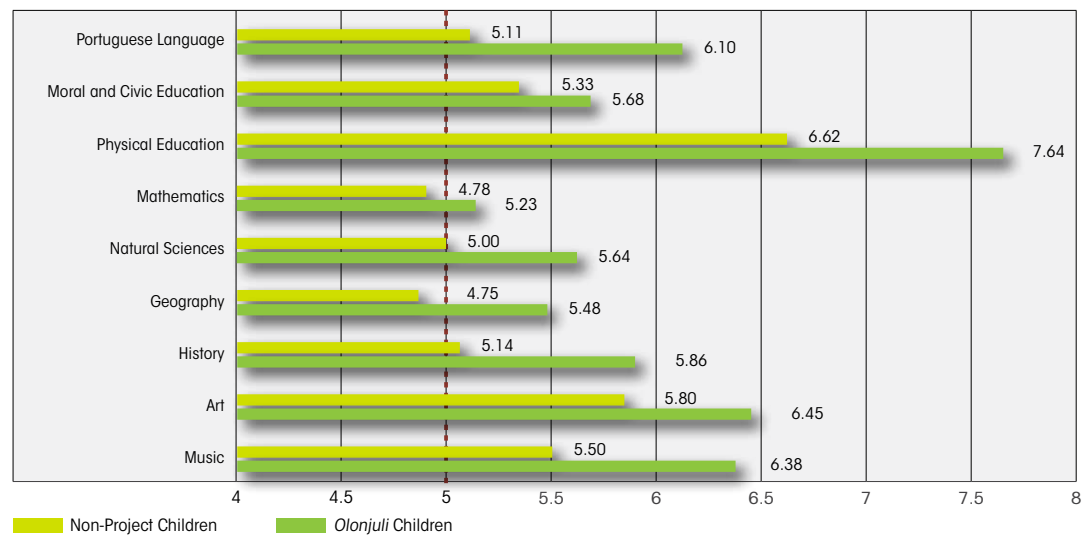
support of students, and to reduced absenteeism and dropout rates. Average enrollment in the primary schools rose by 15 percent between 2007 and 2013. In the same period, the proportion of children who passed the seventh-grade leaving examinations showed an overall rise, from about 59 to 71 percent (Figure 9). In sum, more children in Mumbwa were attending primary school, more children were successfully completing primary school, and the quality of their classroom experience was better, than at the onset of ChildFund's interventions.

Parents formed committees and learned to self-govern, plan and monitor their contributions to schools. They learned about child development, and the crucial role that parents (and schools) play in protecting and promoting children's rights. They learned to mobilize other adults, and to advocate for quality education. Active parental involvement was intended not only to strengthen the quality of education for children, but to foster stronger relationships between children, their parents and other adults in the community.

ANGOLA: INCREASED EDUCATIONAL OUTCOMES THROUGH ADULT SUPPORT AND CHILDREN'S PLAY

In Angola, the *Olonjuli Learn and Play* project took place in the coastal community of Baia Farta, across four schools, followed by schools in three other districts. Two elements of this project centered on adult support, specifically parents and teachers, for children's development of academic skills and overall well-being. The play component was designed to attract and retain students and to help them gain life-skills, such as confidence and leadership. In this

Angolan 6th Graders' Mean Final Exam Scores (score ≥ 5.0 represents significant change)

Subject	Non-Project Children	Olonjuli Children
Portuguese Language	5.11	6.10
Moral and Civic Education	5.33	5.68
Physical Education	6.62	7.64
Mathematics	4.78	5.23
Natural Sciences	5.00	5.64
Geography	4.75	5.48
History	5.14	5.86
Art	5.80	6.45
Music	5.50	6.38

component, girls and boys formed soccer (football) teams, coached by trained teachers, and competed intramurally. After five years of implementation in the original Baia Farta schools, an evaluation[18] of *Olonjuli* found that its overall impact on children was significant. Quantitative data indicated that teachers valued their training, judged it relevant, and linked it to more effective and enjoyable lessons. Parents' committees played an important and relevant regulatory role in school management.

Quantitative evidence supported these findings. The Baia Farta Bureau of Education provided final examination results for 6th graders in the four *Olonjuli* schools and for their grade-mates in four non-participating schools. The exam is standardized and used nationally, making a comparison between the two sets of schools meaningful. Students' performance in each subject is scored from 0 to 10; the minimum passing mark is 5. As the graph above illustrates, children in *Olonjuli* schools outperformed peers in non-project schools across all academic subjects. The difference is statistically significant at $p < .05$ for all subjects, and at $p < .001$ for most subjects. The evaluation also found that the sports teams and tournaments contributed to increased school attendance, built children's physical and interpersonal skills, and honed their civic competence through participatory decision-making and leadership opportunities.

CHILD PROTECTION IN POST–WAR UGANDA

After more than two decades of conflict and crisis, almost all the 1.8 million people displaced by war in northern Uganda have returned home and begun to rebuild their lives. The war put enormous pressures on traditional social supports for children: safety nets unraveled, and protective cultural values eroded. Even now, in the transition to recovery, interpersonal violence—including physical and sexual violence against children—appears to be widespread. Moreover,

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[18] The UBS Optimus Foundation hired João Manuel dos Santos Rosa of the School of Higher Education, Lisbon, to perform the evaluation.

[19] The project (2011-13) was funded by UBS Optimus Foundation. We implemented it in partnership with the Trans-cultural Psychosocial Organization and with the Global Child Protection in Crisis Network, which is based at and receives technical support from Columbia University.

[20] Any protective resource or structure that was not instituted or funded by the government: families, clans, elders, peers, community groups, and cultural and religious institutions.

[21] Police, elected local councils, schools and health facilities.

poverty and uncertainty in the post-war landscape are linked to the continued use of practices that are harmful to children, such as early marriage of girls in exchange for a bride price, and withdrawal of children from school to engage in child labor. These desperate economic solutions sacrifice children's long-term development and further weaken the conditions for realizing appropriate child rights and protection.

Where communities are experiencing or recovering from trauma, the normalizing influence of school can be positive for children. But the availability and even quality of schooling cannot, alone, accomplish a return to 'normal.' In Uganda's Lira and Dokolo districts, ChildFund's *Linking Communities and Strengthening Responses*[19] worked with a local partner to focus on protecting children from violence, abuse and neglect at home and in the community as a co-requisite of rehabilitating schooling and educational quality in the aftermath of war.

We began by instigating, with communities, a culturally sensitive, participatory mapping of risks to children, and the two types of child protection mechanisms in place: traditional, community-based systems[20] and government-supported, formal systems.[21] Community respondents identified sexual violence, child marriage, child labor and corporal punishment as their major concerns, and recognized that certain practices and traditions—early marriage, witchcraft, preference for boy children, bride price—posed significant risks to child well-being. Community-based protection mechanisms handled about 85 percent of reported child maltreatment incidents in Lira and Dokolo districts overall: they arbitrated disputes, referred cases to higher authorities within the informal system, provided psychosocial support, and determined how survivors should be re-integrated into community life. Respondents trusted the informal far more than the formal systems.

We then jointly designed interventions to fill gaps between the informal and formal systems, and to strengthen protection in schools and communities. We especially endeavored to prevent violations against children. The project's interventions, and participants' observations on them, were:

- **The importance of child participation, via school clubs and other activities**. Children gained a greater sense of their right to protection and increased their ability to protect themselves and their peers. They demonstrated these gains by detecting and reporting cases of abuse. 'We have learnt how to avoid early marriage...we spread this knowledge through dramas, and compose poems against sexual abuse of children,' said one member of a Child Protection Club.

- **Implementation of the 'Safe Schools' model**. School stakeholders mapped and assessed protective elements of the school environment and adopted policies, procedures and protocols to increase the physical, social and emotional well-being and protection of children in school.

- **Training and awareness-raising on children's rights**, the consequences of violations, adults' duty to protect and other concepts of child protection. 'The knowledge we acquired will always continue. Even if a person is transferred, the system and knowledge remain,' said one Local Council chairman.

- **'Focal points' in community protection mechanisms**. These individuals learned to document and refer cases, and served as knowledgeable links between informal and formal systems. 'We write down all cases brought to us, like defilement,[22] rape, property-grabbing, wife-beating...and then we forward it to the relevant authorities,' said the Focal Point of Anai parish.

- **Guided community dialogues**. These were an opportunity for clan leaders and elders to discuss and discourage negative practices in a culturally sensitive manner, and to re-awaken the spirit that all community members are protectors of and advocates for children. Initial qualitative evidence suggested an increased number of community leaders intervening in cases of early marriage and sexual violence 'All people are now aware of the dangers of child sexual abuse, especially defilement,' said one community member.

ChildFund is now replicating the *Linking Communities and Strengthening Responses* project in war-affected Nebbi and Arua districts of northern Uganda. This type of deep and sensitive work with communities and local partners is among our organization's strengths. However we are learning that gains made at the community level are only sustained when they are articulated upward through coordinated advocacy engagement with regional and national services and legal frameworks.

To that end, ChildFund made a priority of contributing to child protection at the national level in Uganda (see sidebar *Deep and Sensitive Work With Communities*). We now host Uganda's **Program Learning Group on Child Protection**. The group's 39 members are government ministries, academic institutions, donor agencies and practitioners; our common aim is to generate evidence-based programming and advocacy that respond to the needs of Uganda's children.

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[22] 'Defilement' refers to rape of a minor. Still used as a legal term in Uganda, the word is falling out of favor because it casts the victim as diminished or devalued by the crime.

ChildFund organizes symposia in which members share, learn from one another, and form common advocacy plans and goals. The Program Learning Group is poised to undertake the first-ever national study on all forms of violence against children.

IN SUMMARY

The range from 6 to 14 years—from childhood to early adolescence—encompasses enormous physical, intellectual and social change for a child. Children in this age range emerge from the sphere of home and family, ideally into primary schools within communities that value and protect their safety. ChildFund and our local partners support the quality of education so that schools promote a real acquisition of the foundations for life-long learning, and provide equitable opportunity for children to gain and practice life skills, ranging from playing on a team to claiming their fundamental rights to protection. We have learned that our work becomes more effective when we engage the contributions and support of parents and local leaders: remote and resource-poor communities can host services that transcend their impoverished environments to help children thrive and achieve at levels similar to national norms.

DISRUPTING POVERTY: YOUTH

ChildFund views young people as a force for positive change. Talented and passionate, they have tremendous potential to act as thoughtful, engaged change agents in their own lives, and in their communities and societies. With supportive programming, youth on the brink of adulthood and parenthood are in a position to break the cycle of multi-generational poverty before it affects their own children.

Our youth program approach recognizes young people's need for **technical skills and job readiness**, but we also know that other skills and knowledge—leadership, participation, problem-solving, confidence, self-efficacy, and the wherewithal to make informed choices about **sexual health and reproduction**—are essential for youth's transition to a healthy adulthood. ChildFund helps youth gain and practice these skills, and to engage as change agents for the betterment of their own and others' lives. Together, we strive to win the respect and support of adults, and especially power holders, for young people and their contributions. Youth make up 22 percent of the children whom ChildFund serves.

We reviewed the evidence that youth in our programming areas are engaged as participants or leaders in clubs, groups or teams—and we found that ChildFund is not the only organization struggling to measure youth leadership. Next, we step back and take a broader look at the many ways that young people can and do take action that leads to positive change that builds their skills and sense of agency. The next topic is helping youth gain skills and find non-exploitative employment. Finally, we acknowledge that, to date, our household surveys have not shed useful light on the outcomes of ChildFund's work to promote youth's healthy reproductive choices.

ChildFund's Theory of Change for Youth
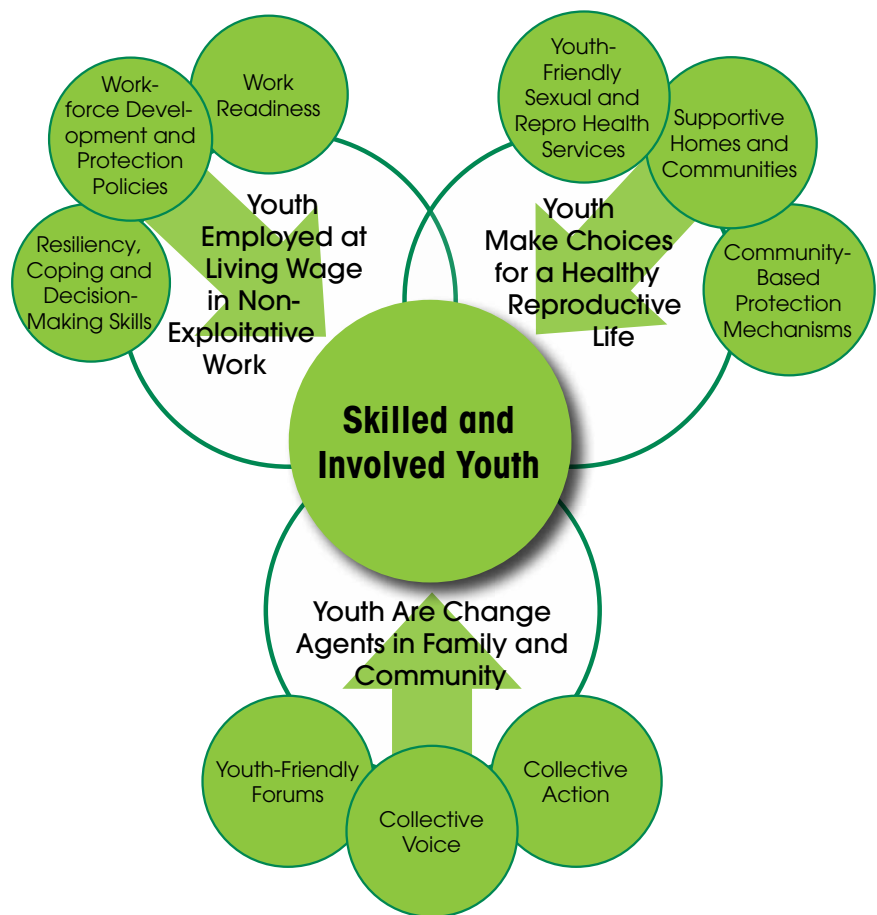
[23] We also found that male respondents were significantly more likely than females to report participation or leadership (or both). In India, for example, 15 percent of boys reported participation and/or leadership, compared to 10 percent of girls. In Mexico, almost twice as many boys participated in some formal group as did girls (23.7 versus 13.5 percent). Among these respondents, 19 percent of boys—and zero percent of girls—reported holding a leadership position. These findings undoubtedly reflect prevailing gender norms in our programming areas; more importantly for ChildFund, they indicate that we and our local partners must make greater efforts to help alter those norms so that girls and boys have equal opportunity in this and other realms.

When youth work productively together, they can do much more than learn about and resolve problems that matter to them. This domain relates to **youth as change agents in their families and communities**. The very act of participating helps them gain confidence, find their voice, and develop skills including cooperation and leadership. Intuitively, we know that these soft skills are valuable to all individuals in their personal and work lives, and to communities at large. But when ChildFund sought national and global research that quantified youth participation and leadership, the absence of data echoed our own difficulty in measuring the impact of acquiring and using these skills.

In our household surveys, ChildFund attempted to measure membership and office-holding in formal clubs or organizations to better understand whether youth in our programs were taking greater leadership in their communities. The data we collected were limited in what they could tell us. In fact, the indicator did not prove effective in its ability to reflect accurately what was happening on the ground. In Philippines, Mexico and Sri Lanka, it failed to register statistically significant change. Most confounding was that in Ethiopia and India, the indicator revealed a significant *decline* in youth participation and leadership in our programming areas over time.[23]

ChildFund believes that youth participation and leadership are not one-way or one-dimensional phenomena. They require the respect and acceptance of those whom the youth seek to engage, including communities and adults; this in turn often requires change in how adults view and value youth contributions. Our indicators in this arena were overly limited to what was easy to quantify: membership in formally constituted organizations, or office-holding in those organizations. A review of the literature around civil society and social movements suggests that we should look more broadly at the many ways that young people can and do take action in their communities, and expand our definition of what counts as achievement in this arena[24]—as in fact we do in the remainder of this section.

Youth who demonstrate leadership and/or social engagement skills

	ChildFund	
	2009-10	2012-13
Ethiopia	27	8
India	21	13
Mexico	7	12
Philippines	18	15
Sri Lanka	17	14

HELPING YOUTH HELP OTHERS: RESULTS FROM EAST AND SOUTHERN AFRICA

Expanding the definitions of 'participation' and 'leadership' shows more realistically the actual breadth and depth of youth engagement in our project. ChildFund and our local partners often do promote formal clubs and organizations, but we also engage young people in non-formal movements, groups, teams, forums and events—and prepare them to demonstrate leadership ad hoc, such as helping friends resolve a dispute or organizing neighbors to perform a task. ChildFund observes, as this section will show, that boys and girls who themselves come from a background of deprivation, exclusion and vulnerability are often eager to help younger children who struggle with the same deficits, or to build stronger connections between their marginalized communities and the wider world. In their desire to do good and do well, we find reason to be optimistic that they are approaching adulthood with skills and tools to disrupt generational poverty.

In Kenya, Uganda and Zambia, ChildFund helped more than 1,200 community groups, of which about 400 were made up entirely of youth, to form a network of social service provision for children and youth affected by HIV and AIDS. Our *Enhancing Community-Based Care project*[25] met the physical and psychosocial needs of such children with services ranging from emotional support to promotion of children's rights, from HIV and AIDS education, to advocacy and resource mobilization. Members of the youth groups that provided social services gained skills and knowledge to improve the well-being of younger children. In many cases, these youth came to consider themselves 'activists' for vulnerable children.

In just one example, members of the Kenyan youth group called Riwa gained training from ChildFund's local partners in an array of social and vocational skills: counseling and peer education, business management and proposal writing. They used the latter skills to launch several income-generating activities and to secure funding from a government-run youth fund. With these resources, the young women and men of Riwa mentored and supported vulnerable children in their community. They sponsored needy children to attend primary and secondary school, and offered workshops to build youngsters' self-esteem and life

[24] Those who attempt to measure and evaluate civic engagement are, in the words of the social change Building Movement Project, challenged to 'define engagement and social change, identify the wins associated with complex initiatives, and meet the demands of an outcome evaluation climate that seeks immediate and generalizable results from initiatives that are nonlinear and multifaceted.' Building Movement Project. (n.d.) *Evidence of Change: Exploring Civic Engagement Evaluation*. Retrieved December 2013 from Building Movement Organization: http://buildingmovement.org/pdf/ EvidenceofChange_BMP.pdf..

[25] The Enhancing Community-Based Care and Support Systems for Children and Youth Living with HIV/AIDS Program, 2003-2009, was funded by AusAid.

skills. Riwa also established a local Children's Committee to advocate for child rights, and offered weekly education sessions on reproductive health and HIV. Riwa members networked with teachers, local government and even the police to ensure comprehensive services and protection for the children they served. Said one member, "we have to be the role models for the younger children."

ChildFund's monitoring and evaluation in all three countries found positive effects on care and support systems for children and youth, and on the physical, economic and psychosocial well-being, and greater societal inclusion of children who received support. Because young people act on their perceptions of relationships, including what they perceive adults expect of them, we elicited information about young people's interactions with adults. The proportion of respondents who perceived positive changes in community attitudes toward youth nearly doubled, from 31 to 60 percent (Figure 13). Those who reported having no support from non-family adults plummeted from 60 to 12 percent. Related survey questions found that teachers were most often named as sources of guidance and help, but other important sources were religious figures, local NGO workers, health workers, peer educators and community leaders. Qualitative inquiry added to this picture by eliciting youth reports of positive changes in their relationships with teachers, and community leaders. Young people in Kenya and Uganda described their greater ability to engage with policy and decision makers, while more Zambian youth reported having engaged government officials or community leaders. Our project promoted the participation of community youth groups to inspire and pave the way for the societal engagement of other children and youth, and our evidence suggests that this did occur.

Along with and perhaps more usefully than numeric measures of participation, young people's own voices can provide rich, qualitative information on the breadth and depth of their activities, the value they place on engagement, and their views of its impact on their own lives. In Ethiopia, where an estimated 16 percent of all children have lost one or both parents to AIDS, ChildFund's Community Safety Nets[26] project brought comprehensive, child-focused care and support services to 50,000 orphans and vulnerable children and youth whose lives were affected by the disease. Young people were star actors in the project. They were members of the Vulnerable Children's Committees that organized quality services, but their premier role was as youth mentors to HIV-affected children.

Knowing that young children look up to and want to imitate older children, ChildFund developed a cadre of volunteer youth mentors who learned to provide an array of services to orphans and vulnerable children. Mentors tutored and helped with homework, they organized activities and games, and they transmitted life skills to children, in groups and one-on-one.

Eleven-year-old Biruk T. described how his mentor helped him rise to 4th place in his class—and more. "Had I not been attending the tutorial classes," he said, "I would have never improved my performance on such [a] scale. But the tutoring is not limited to dry school lessons. We are [also] told about… diseases like HIV/AIDS, personal care and protection. The lessons make me happy and improve the feeling I have about myself. Tigist E. agrees. "We are not simply learning our school lessons," she explained. "We participate in debates, recite poetry, perform drama, and other activities. We attend trainings on child rights. These help us express our ideas and feelings…I developed courage and confidence." In fact, Tigist represented her peers as a member of the Vulnerable Children Committee in her village.

Youth mentors detected the effect of their contributions on children and indeed on themselves. Degu A. said, "the best experience is the attitude change that I observed not only among the children but also among their parents and us, the mentors." Tigist A. reflected, "As a youth mentor I feel that I should be a role model to the children. I have to be truthful and honest. Mentorship helped me to develop such behavior in me and others. I now have the capacity to distinguish my strength and weakness. I am trying to impart such capacity among the children that I help. In fact, the alert and active participation of some children amazes me, and it encourages me too."

Participants mentioned only one negative aspect of the youth mentoring component: there simply weren't enough mentors to meet needs. To help fill the gaps, Getahun B. developed a system in which his older mentees—those aged 9 to 11—tutored the younger mentees in their school lessons. This age-stepped system, he said, "made the children change agents" in their own right.

Qualitative information such as this provides nuanced evidence that many young people have the will and the talent to help change the lives of others, and may be particularly helpful in reaching out to children, who naturally look up to those just a bit older than themselves. The youth who mentored children were clear that they themselves benefited from the training they received—in life skills, planning and organizing activities, active listening and more—and were able to apply it to their own lives even as they transferred it to the orphans and vulnerable children they mentored.

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[26]   This project ran from 2008 – 2011 and was funded by USAID.

NEED FOR ONGOING ASSESSMENT – YOUTH MAKING HEALTHY REPRODUCTIVE CHOICES

ChildFund's programs stress the importance of equipping young people to live healthy reproductive lives. We help them gain ready access to the youth-friendly information and services they need to make thoughtful choices about consensual sexual relations, self-protection and childbearing, and to defend themselves from abuse. Our interventions help youth's families and communities understand the risks and consequences of early sexual activity and parenthood, and the prevalence and gravity of non-consensual relations. We support communities to challenge taboos and traditions that may militate against reproductive well-being. ChildFund and our local partners also work with health service providers to understand and meet the needs of youth, and at community and national levels to promote policies that strive to prevent sexual exploitation, and to hold perpetrators accountable.

Our household surveys attempted to gather data on teenage pregnancy in our programming areas as just one indicator of reproductive well-being, but results were inconclusive. Accurately measuring adolescent pregnancy poses challenges, as questions on the topic have cultural and sometimes legal ramifications. These challenges affected our data-gathering and, in fact, affected the national-level data that we sought for comparison. ChildFund is currently testing different and better measures to gauge healthy reproductive choices.

Yet we do have a growing body of anecdotal evidence that our work is positively affecting adolescent reproductive health and rights. In many settings, early marriage of daughters is seen as a way for families to alleviate their acute poverty, but it is profoundly detrimental to girls' physical, emotional, mental and economic well-being. ChildFund and our local partners raise awareness of the negative consequences of child marriage and the positive alternative of keeping girls in school.

In the Gambia, for example, Ramatoulaye D. was going to be pulled out of school at the age of 14 and married off to a much older man who already had a wife and child. Her father saw the arrangement as his only economic option. Ramatoulaye's teachers and ChildFund's local partners supported her to persuade her father that education—not early marriage and a bride price—would be the far wiser investment for the family, and the key to his daughter's happiness. Today Ramatoulaye is a straight-A student and class president, but also an activist for children's rights and responsibilities. She served as her country's representative at the *Day of the African Child* conference in Ethiopia, and she recently told her story to the news channel CNN International—amplifying her own local advocacy and ChildFund's global advocacy efforts to help girls resist early marriage and stay in school.[27]

The age range from 15 to 24 sees boys and girls emerge from the relative shelter of home and school, enter the public arena more fully, and practice taking on adult roles in the larger society. They begin to shoulder responsibilities for work and income, and may even start families of their own. Intergenerational tensions often cast a shadow on young people, and throw into question their competence and contributions, but ChildFund finds that with genuine opportunities to engage in the life of their communities, youth can effectively channel their energy and creativity for positive personal growth and social change.

CONCLUSIONS

This report highlights the hardships that children face as they grow up in marginalized communities around the globe. The array of locales is large, but the theme is consistent: communities can make a difference when they come together and invest time and effort in the people and services children need if they are to achieve the milestones that define healthy development.

- Empowered parents and other caregivers are taking action for better services such as health care, pre-school and child protection. Together they are questioning norms that accord power and privilege to some and not to others, and they are adopting new ideas that promise healthier social environments for children's healthier development.

- When we work with others, it works better. Even so, we collectively have much more to do before we achieve hard-to-change outcomes such as an end to malnutrition and universal completion of primary education. This kind of work requires multi-actor collaboration toward synchronized objectives. It requires reaching adults, families, and entire communities. It requires system-level change.

- Young children who are deprived, excluded and vulnerable, when given equal chances to gain academic and life skills, are closing the gap between their own achievements and those of their better-off peers. Even in resource-poor settings, parents and teachers and traditional leaders are improving services such as educational quality and community protection—and children are not only benefiting but helping to make the change.

27   CNN International, "The Gambia: How one teenager stood up to child marriages," http://thecnnfreedomproject.blogs.cnn.com/2014/01/10/the-gambia-how-one-teenager-stood-up-to-child-marriages/.

- Older children and youth, equipped with opportunity and support to participate in teams, clubs and informal groups, are proving that they can be effective change agents. They are giving back in ways that are meaningful to them, whether mentoring younger children or connecting their communities to the larger world. In so doing, they are earning the respect of adults, and indeed they are becoming the empowered future caretakers of the next generation.

- Continual learning on how to better measure, understand and evaluate programs. In this, we are always guided by our principles, and indeed we are becoming more principled in the way we do our monitoring and learning. We partner with local organizations as a matter of principle, for example, and we track our partners' effectiveness in program development and delivery, and their contribution to building stronger civil societies in the communities we serve. Children are active participants in our interventions as a matter of principle, and we are expanding our practical knowledge of how their own strengths and skills can contribute to their improved lives and societies. ChildFund has always valued our culture of learning around big, important themes that matter to us. Now, guided by our principles, we are filling in the smaller pieces more systematically.

We are adopting a standards-based approach to understanding the effects of our work. We set aspirations, or ideal future states, as our standards, then measure how far we are from achieving them and how far we have come. We may set as a standard that *all infants and young children receive quality stimulation and school readiness in pre-schools*, then use selected indicators and methods to measure how much progress ChildFund—and our local partners, families, and others working for the well-being of children—has made over time. A standards-based approach helps us learn from and think analytically about our programs, rather than focus disproportionately on individual indicators. Our long experience of measuring, both well and not so well, our results, is teaching us how to more usefully reflect on what we have measured and how we have measured it.

We are getting better at understanding how we contribute to broad social change, and at analyzing those contributions so we can refine our programs and approaches. We are getting better at testing specific models and interventions that we have designed and improved over long periods, to determine if we can attribute change to them, separate from other factors in a child's or community's life. By becoming more systematic about attributing social change to our models, we will be better able to contribute to collective knowledge in the field—and we will have evidence-based impetus to scale up and replicate the models to reach more children in more countries.

At the same time, and in all we do, ChildFund values listening to the voices of the children and youth who experience deprivation, exclusion and vulnerability—and resilience, assets, empowerment and success—in their own ways. We are good at doing research that brings out the voices and perspectives of children and youth. We are good at facilitating their participation in and decision-making about development in their communities. And we are good at empowering them to help each other participate. With every measurement and analysis we undertake, we strive to better hear and understand their voices.

ChildFund anticipates that the more ably and consistently we can understand the interplay of influences, including our own interventions, on the well-being of children, their families and the environment surrounding them, the more effective we will become in fulfilling our purpose as an organization: that children have the capacity to improve their lives; that young adults, parents and leaders bring lasting and positive change to their communities; and that societies value, protect and advance the worth and rights of children.

WHERE CHILDFUND INTERNATIONAL WORKS

Belarus

United States

Afghanistan

Mexico
Guatemala   Honduras   Dominica/
                              St. Vincent

Ecuador

Senegal
The
Gambia   Guinea
Sierra Leone
Liberia   Togo   Uganda

India

Thailand   Vietnam
             Cambodia

Philippines

Ethiopia
Kenya

Sri Lanka

Indonesia

Brazil

Bolivia

Angola   Zambia

Mozambique

Timor-Leste

Afghanistan	Brazil	Ethiopia	Honduras	Liberia	Senegal	Thailand	United States
Angola	Cambodia	The Gambia	India	Mexico	Sierra Leone	Timor Leste	Vietnam
Belarus	Dominica	Guatemala	Indonesia	Mozambique	Sri Lanka	Togo	Zambia
Bolivia	Ecuador	Guinea	Kenya	Philippines	St. Vincent	Uganda	

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