Girls wear pink uniforms at a school constructed by ChildFund in Butaleja District, Uganda
THE CHALLENGE

Worldwide, 58% of children and adolescents are not reaching minimum proficiency levels in mathematics and reading — with the lowest proficiency levels seen in Sub-Saharan Africa, Central Asia and Southern Asia, and Western Asia and North Africa.

Projections by the International Commission on Financing Education Opportunity indicate that 825 million young people will not have the basic literacy, numeracy, and digital skills to compete for the jobs of 2030.

Factors contributing to the learning crisis include access to learning and learning completion, particularly in low-income countries.

Access to pre-primary education is on the rise, however, it is progressing slowly. This is particularly the case in low-income countries where 78% of children are missing out on education. For example, 2018 data from the United Nations Educational, Scientific and Cultural Organization (UNESCO) Institute for Statistics (UIS) shows that in low-income countries, only 24% of children are enrolled in pre-primary education, improving to just 41% enrolled in the year prior to starting primary school.

For children attending school, completion rates are also a critical issue. Among school-age children in low-income countries, just over half (56%) of children complete primary school, 28% of adolescents complete lower secondary school and only 13% of youth complete upper secondary school. School attendance rates are also lower in countries facing emergencies such as conflict and natural disasters.

The COVID-19 pandemic has only augmented these education challenges with approximately 131 million children worldwide missing 75% of in-person school learning from March 2020 to September 2021, placing an increased need for learning support within the home context.

Successful learning is linked to economic growth and other benefits for children and their families, including reduced poverty, improved health, enhanced civic engagement, and greater life satisfaction. We know that early learning and skills acquisition are critical for lifelong learning and development — and that supportive home and school environments are essential for supporting foundational skills development. For example, research has shown that early childhood development (ECD) interventions that enhance nurturing care by promoting caregiver-child interactions have lasting benefits for children. During the period of 0-3 years of age, interactions with infants — including smiling, touching, talking, storytelling, listening to music, reading books, and engaging in play — help to build neural connections which permanently strengthen a child’s ability to learn.

Globally, ChildFund implements multiple early childhood development programs that focus on early stimulation and deliver parenting education through both home visits and group sessions. These programs have prioritized increasing quality parent-child play activities, promoting responsive parenting including ensuring children have adequate supervision, proper nutrition, hygiene, and sanitation.

Preschool attendance sets the stage for a child’s journey through education; children who have attended pre-primary education are more likely to start school on time, and to attain minimum reading and mathematics competencies in primary school and beyond. Through our programming, we have also established early childhood learning and development centers in several countries to help support preschool attendance.

For school-age children (ages 6 to 14), our programs focus on building supportive learning environments both at home and in the school environment. These programs promote high quality academic teaching and child literacy, and support students, teachers, and parents to create a safe and inclusive learning environment that keeps children protected from harm. They also promote emotional, physical, and psychological well-being — to support staying in school and learning achievements.

This chapter shares the progress we see in our global M&E data and our programming evidence focused on providing Life Stage 1 (ages 0 to 5) and Life Stage 2 (ages 6 to 14) children with the foundations, including supportive environments, that they need for lifelong learning.

At the ECD level, although there is still variation across countries, we have found, from 2017 to 2019, a 10% reduction in the proportion of caregivers leaving their children at home without adequate supervision. We have also seen improvement in the proportion of caregivers regularly interacting with children in play or learning activities. For primary-school children, globally, we can see an enhanced level of family engagement in their children’s school affairs — and we have found improvements in both student’s reading and math performance levels.

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Nurturing Care in the Home for Infants and Young Children

In 2017 and 2019, caregivers of children ages 0 to 5 shared how often they left children alone in the care of another young child, as well as their frequency engaging with their children in specific playful interactions that support learning (reading, counting, singing songs, etc.).

From 2017 to 2019 (see Figure 3-1), we saw a reduction in caregivers reporting leaving their child alone or in the care of a child younger than 10. The proportion of caregivers leaving their child alone decreased from 47% to 33% over the two-year period — a 14% decrease.

Figure 3-1. Percentage of Caregivers Reporting Leaving Child Alone: 2017 vs. 2019 (Global)

In 2019, one-third (33%) of caregivers had left their child alone or in the care of a child younger than 10 years old in the week prior to the survey. This varied across the regions, and between countries:

- A higher proportion of children in Africa (45%) were left alone or in the care of another child, relative to 24.5% and 14% of children in Asia and the Americas, respectively.
  - Over two-thirds of children in Zambia (62%) were left at home alone or with another child, and over half of the caregivers in Uganda (55%) and Guinea (58%) did the same. More than 40% of caregivers in the Gambia, Sierra Leone, Mozambique, and Kenya left their child alone or with another child, while 30% or fewer in Senegal and Ethiopia did the same.
- In Asia, global data identified differences across countries. Caregivers in India had the highest percentage of children left alone or in the care of another child (34%) compared to the Philippines (28%) and Indonesia (11%).
- Regionally, the lowest proportion of children left alone or in care of another child was in the Americas, with 17% in Guatemala and Bolivia, 13% in Honduras, and 10% in Ecuador.

From 2017 to 2019 (see Figure 3-2), we saw a positive change in caregiver support for learning (“playful parenting”), with the proportion of caregivers interacting with children in a play or learning activity increasing from 67% to 86% — a 19% increase.

Figure 3-2. Caregiver Support for Early Learning: 2017 vs. 2019 (Global, %)

Our global M&E survey includes questions adapted from the UNICEF Multiple Indicator Cluster Survey (MICS) for Children Under Age 5 to assess interactions with children (see inset).

9 https://mics.unicef.org/about
In the past week, did any household member over the age of 15 do any of these activities with the child? (Choose all that apply):

- Read a book/looked at picture books with the child.
- Told the child a story.
- Sang songs or lullabies with the child.
- Played with the child indoors, outdoors, or while doing daily chores.
- Named, counted, or drew things with the child.
- Played with toys (homemade or store bought) with the child.
- Played games with the child.
- No, none of these activities in the last week.

In the week prior to the delivery of our global M&E survey, 86% of caregivers reported that household members interacted with children in at least one of seven play/learning activities, while only 18% of caregivers reported four or more activities (the UNICEF MICS standard).

Regionally, the proportion of household members interacting with children using at least one activity is similar (Africa and Asia – 86%; Americas – 87%), however, variation in engagement in four or more activities differs, with 27% of caregivers in Asia reporting engaging in four or more types of interactions with children, higher than in Africa (19%) and the Americas (5%). This low engagement level in the Americas is primarily driven by a low percentage of caregivers in Guatemala (1%), and Honduras (2%) reporting having engaged in four or more activities with their children. Similarly low levels of engagement were also reported by caregivers in Ethiopia (3%), Mozambique (1%), and India (7%).

In 2017 and 2019, with our global M&E data collection, we examined children’s (ages 6 to 14) perceptions of family support for their learning — and their school achievement in reading and math.

To assess family support for learning, we asked children whether anyone in their family had visited their school to speak with their teacher, volunteer for a school activity, participate in a parent meeting, attend a school event, or for any other reason in the previous six months.

Children’s school performance was reviewed using the Annual Status of Education Report (ASER) tool to assess minimum levels of literacy and numeracy for children ages 6 to 14.10

Globally, as shown in Figure 3-3, from 2017 to 2019, we saw family member involvement in children’s school affairs increase from 64% to 78% — a 14% increase.

10 http://www.asercentre.org
Most children had family members who had visited their school for one or more of these activities (78% globally):

- In Asia, 85% of children had family members active in their school affairs, while 81% and 78% of children reported the same in the Americas and Africa, respectively.

- The high regional average in Asia was primarily driven by children in Sri Lanka and the Philippines, 95% and 91% of whom reported that their family members were active in school affairs. In India and Indonesia, 81% of children had family members active in their school affairs.

- In the Americas, Honduras had the lowest proportion of children with active family members (53%), followed by Ecuador (61%). In Guatemala and Bolivia however, over 90% of children reported that their family members had been to their school at least once in the past six months.

- There was also variation in family participation in schools in Africa: 67% of children in Guinea, 79% in Uganda, 82-89% in Zambia, Senegal, and Kenya, and over 95% in Sierra Leone and Mozambique had one or more family members active in school affairs.

Globally, from 2017 to 2019 (see Figure 3-4), we observed children’s improvement in reading fluency and comprehension (4% increase) and achievement of basic math skills (8% increase).

Across all regions in 2019, as shown in Figure 3-5, children were more likely to achieve sufficient reading fluency and comprehension (defined as reading at story level) than meeting basic competency in math skills (defined as being able to perform division).

Regionally, a larger proportion of children in the Americas achieved reading (67%) and math (42%) competency compared to children in Asia and Africa. In Asia, 57% and 34% of children achieved sufficient reading and math skills, while in Africa, only 40% and 27% of children achieved the same.

- In Africa, less than 10% of children in Guinea achieved reading and math competency — the lowest across all countries. Similarly, fewer than 15% of children in Sierra Leone achieved reading fluency and basic math skills. Most children in Senegal (52%) and Kenya (59%) achieved reading fluency and comprehension; however, a lower percentage (42%) achieved basic math skills.

- In Asia, a majority of children in the Philippines (50%), India (53%), Sri Lanka (58%), and Indonesia (68%) achieved sufficient reading fluency and comprehension. However, as noted above, a smaller percentage achieved basic math skills, with 47% in Sri Lanka, 38% in India, 26% in the Philippines, and 32% in Indonesia.

- In the Americas, a majority of children in Bolivia and Ecuador also attained basic math competency, the only countries in our sample to do so, with 78% and 71% of children achieving reading fluency and 61% and 57% achieving basic math skills, respectively. Relative to other countries in the region, children in Guatemala had lower scores, with 43% and 16% achieving reading fluency and basic math competency, respectively.
Where are we contributing to positive change for education outcomes?

As shown in Figure 3-6, these programs have enabled children in 12 countries (5 countries in Africa, 3 countries in the Americas, 4 countries in Asia) to improve early child development stimulation outcomes for Life Stage 1 children and quality inclusive education and school learning/achievement outcomes (including literacy and numeracy skills; school attendance and dropout rates) for children in life stages 2 and 3.

Figure 3-6. Education Contributions by Region and Country

39 of our evaluated programs targeted education outcomes. Programs focusing on Life Stage 1 (ages 0 to 5) children targeted early childhood development stimulation outcomes (17 programs) and/or responsive caregiving/positive parenting (14 programs). Programs focusing on Life Stage 2 children (ages 6 to 14) and Life Stage 3 adolescents and youth (ages 15 to 24) sought to improve access to quality inclusive education (7 programs) and enhancing school learning outcomes (16 programs).
What levels of evidence and types of change are we seeing for education outcomes?

As shown in Figure 3-7, preliminary evidence was generated for 34 (87%) of the evaluated programs, promising evidence for four (10%), and one program, evaluated with a randomized control trial (RCT), yielded effective evidence.

Figure 3-7. Evidence for Positive Change in Education Outcomes

- EFFECTIVE (see also Evidence Snapshot below) — Nuestros Niños Sanos y Listos (NNSL) (Our Children, Healthy and Smart) project in Guatemala delivered parenting education through home visits and group sessions, evaluated with a RCT, contributed to significant increases in parent-child play activities and children’s cognitive and fine motor skills. Group session participants showed a 6% increase in play activities compared to the control group, while home visit participants showed a 4% increase.

- PRELIMINARY — ChildFund’s Parenting Practices for Early Childhood Development (ECD) project in The Gambia conducted awareness campaigns on the importance of responsive caregiving and delivered parenting education through monthly parenting group sessions and home visits by community facilitators to support parents and caregivers with knowledge, attitudes, and skills to nurture children’s holistic development. The project helped 1,200 parents and caregivers in 30 rural villages to enhance their knowledge and practices to promote children’s well-being, with 62% of parent/caregivers reporting “a lot of change” for making time to play and talk (gently) to their child.

- PRELIMINARY — In Sri Lanka, the Early Childhood Learning and Development (ECD) project implemented in 15 ECD centers in 6 communities focused on improving the access of children, including children with disabilities, to quality and holistic ECD services to help children achieve developmental milestones. It also sought to enhance ECD teachers’ knowledge and skills. The project increased the proportion of children achieving age-appropriate developmental milestones by 13% (from 73% to 86%).

- PRELIMINARY — The Ensuring Children’s Nutrition and Age-Appropriate Development in Mullativu Project (ECNAAD) in Sri Lanka employed a peer education approach to improve the knowledge of lead mothers, parents and caregivers on proper nutrition, hygiene and sanitation practices, early stimulation and ECD. The project helped to improve the proportion of children achieve age-appropriate developmental milestones by 62% (from 37% to 99%).

Our ECD contributions for infants and young children and their caregivers include:

- Parenting education through home visits and group sessions.
- Delivering parenting education through monthly parenting group sessions and home visits.
- Community facilitators supporting parents and caregivers.
- Enhancing knowledge and practices.
- Promoting children’s well-being.
- Improving access for children, including those with disabilities.
- Enhancing ECD teachers’ knowledge and skills.
- Contributing to significant increases in parent-child play activities.
- Contributing to significant increases in children’s cognitive and fine motor skills.
- Helping 1,200 parents and caregivers in 30 rural villages.
- Enhancing knowledge and practices to promote children’s well-being.
- Increasing the proportion of children achieving age-appropriate developmental milestones.

References:

16 ChildFund International. (2018). Endline evaluation report: Assuring the essentials of optimal development for infants and young children affected by HIV and AIDS in Kenya and Zambia project, funded by the Hilton Foundation, implemented in 15 ECD centers, used activities such as community sensitization, capacity building of caregivers, village health volunteers and management committees, renovating and equipping ECD centers to raise parents’ awareness of the concepts, benefits, and standards of ECD services. The project contributed to increasing the proportion of parents sending at least one or more of their age-eligible children to an organized early learning center, nursery school, kindergarten, or community ECD by 12% (from 65% to 77%).
the caregivers in Zambia and 91% of the caregivers in Kenya reported that the group parenting sessions/home visits positively influenced how they care for their child. 93% of caregivers reported providing more toys and objects for their children to play with and 59% reported that they played more with their children. Positive changes in child behavior were also observed, with 93% of children identified as smiling, laughing, and/or playing with the caregiver.

**Our school-age learning outcomes include:**

- **PROMISING** — The USAID-funded Lifelong Learning Project (Read and Learn) delivered in the Western Highlands region of Guatemala delivered early grade reading instruction approaches and materials in bilingual contexts, provided technical assistance to the Ministry of Education to enhance teacher effectiveness and language literacy acquisition, and promoted parental and community participation in children’s education. The project contributed to first grade students in the intervention municipalities acquiring higher abilities in reading K’iche’ and Mam (local languages) compared with students in the control municipalities. Second grade students in the intervened municipalities acquired higher abilities in reading K’iche’ compared with students in the control municipalities; 58% of students in the intervened municipalities showed growth in K’iche’ language compared to 43% in the control municipalities.

- **PRELIMINARY** — In India, the Combatting Child Trafficking through Sustainable Livelihood Development project implemented networking at local levels, capacity building, awareness raising, skills training and social services with targeted groups. Rural skills training in families where there was a risk of ill-prepared migration of a young person helped improve incomes and keep children in school and at home. The project contributed to decreasing the proportion of out of school children (ages 6 to 14) by 20% (from 42% to 22%), with 1,024 previously out of school children enrolled in school.

- **PRELIMINARY** — The ABK3 Livelihoods, Education, Advocacy, and Protection Against Exploitative Child Labor in Sugarcane Areas (ABK3 LEAP) project in the Philippines delivered a multi-sector approach through: (1) direct educational and livelihood services and linkages for 54,479 children and 30,412 households; (2) capacity building of local and national institutions; (3) policy advocacy, awareness raising, leveraging government and private sector; and (4) research to provide reliable data on child labor in sugarcane areas. The project helped to increase student enrollment in junior high school by 36% (from 20% to 56%).

- **PRELIMINARY** — In India, the Promoting Access and Continuity in Education (PACE) project reached 943 children (ages 6 to 14) from tribal communities through a mix of intervention strategies to address barriers to children’s education, including: the provision of alternative education through establishing community-based learning centers (CBLCs); the establishment of community volunteer groups (CBLC committees) to improve parents’ awareness of the importance of children’s education; targeting resources to poor families; and advocacy efforts at the community and district levels to promote children’s education rights. The project helped to increase the proportion of children enrolled in school or a community-based learning center by 65% (from 26% to 91%).

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WHEN: 2015 to 2019
WHERE: Rural Guatemala - 113 communities in the departments of Huehuetenango, San Marcos, Quiché, and Totonicapán
CHILDFUND LIFE STAGE: 1 (0-5 years old); focus was ages 0 to 24 months
REACH: 5,500 children, 850 “lead mothers”
SUPPORTED BY: Japan Social Development Fund
IMPLEMENTED BY: ChildFund Guatemala, Association of Integral Development Cooperation of Huehuetenango (ACODIHUE), Cooperation for Western Rural Development (CEDRO)
EVIDENCE LEVEL: Effective

GOAL(S): • Improve caregiver interactions and feeding practices with infants and young children to enhance their physical, cognitive, and emotional development outcomes. • Increase community support of positive child development outcomes.

HOW WE STUDIED THE PROGRAM: • External evaluation using a cluster randomized control trial to compare the effects across 3 study arms (home visits, group meetings, control) in 113 communities. • Data were collected on 2,022 children and their households.

HIGHLIGHTS: • Nuestros Niños Sanos y Listos (NNSL) targeted communities in the northern Guatemalan highlands with high poverty and malnutrition and where over 50 percent of children ages 3 to 59 months experienced stunted growth. • NNSL improved young child participants’ cognitive fine motor and language skills, ensuring they will be better prepared to learn once in school. • NNSL placed mothers and caregivers at the center of their children’s development by giving them the tools to stimulate and monitor their children’s physical, cognitive, social-emotional, and linguistic skills. • Two different intervention delivery modalities were used and compared: group meetings (used in 38 communities) and home visits (used in a different set of 38 communities). • The rigorous impact evaluation showed that both home visits and group meetings were effective in improving parental practices supporting child stimulation, increasing the variety of play material and the play activities conducted by the caregiver and improving children’s fine motor and language skills, with group meetings being slightly more cost-effective. • Greater program intensity (i.e., more sessions attended across both modalities) was found to increase program impact.

ENGAGING LEAD MOTHERS TO IMPROVE DEVELOPMENT OUTCOMES FOR YOUNG CHILDREN: • ChildFund and our local partners hired social workers, who, in cooperation with indigenous community governing structures, identified and trained female volunteers. • These volunteer lead mothers educated caregivers on the importance of early stimulation and activities to engage their children.

SDG CONTRIBUTIONS

NNSL SAMPLE OUTCOME EFFECTS: • As a percentage change (analyzed with an Intention to Treat model), group meeting participants showed a 6% increase in caregiver-child play activities compared to the control group, while home visits showed an increase of 4%. • Children in the group meetings showed a 2% increase in cognitive and fine motor skills compared to the control group, while children in the home visit group showed an increase of just under 1.5%.

22 The use of volunteer mothers from the communities to deliver these services (home visits) is part of similar Government-funded programs - for example, the Cuna Más program in Peru.
EDUCATION (SCHOOL LEARNING) | SRI LANKA

ATLAS | Improving Child Centered Education through Active Teaching Learning Approaches in Schools

WHEN: 2015 to 2018

WHERE: Sri Lanka - 8 districts in 6 provinces (Trincomalee, Nuwara, Eliya, Matale, Puttalam, Anuradhapura, Hambantota and Batticaloa districts)

CHILDFUND LIFE STAGE: 2 (6-14 years old)

REACH: 25,000 children, 859 teachers, 183 schools

SUPPORTED BY: ChildFund New Zealand, ChildFund Sri Lanka

IMPLEMENTED BY: ChildFund Sri Lanka, VOICE Area Federation, Abhimana CDA, T-Field Child Development Federation, Ruhunu Wellassa Area Federation, Child Development Fund, Vavunathivu Development Organization

EVIDENCE LEVEL: Preliminary

GOAL(S): Improve the learning outcomes of children of primary grades through child-centered teaching and learning.

HOW WE STUDIED THE PROGRAM:
• One-group pretest-posttest study design.
• Data were collected with school observations, focus group discussions with primary teachers and parents, interviews with principals and staff of local partner organizations, and consultations with children.

HIGHLIGHTS:
• Children’s engagement in classroom learning activities increased by 24% (from 60% to 84%).
• Children’s overall grade-level academic competencies increased by 14% (from 40% to 54%) — 30% in reading (from 51% to 81%) and 31% in math (from 39% to 70%).
• 100% of the children said that they liked coming to school because of the teaching methods.

LESSONS LEARNED:
• Vertical scaling-up would introduce the ATLAS methodology beyond grades 1-5 to include all grades (grade 6 onwards) to continue the child-centered teaching methodology and classroom positive learning culture as children advance from one grade to the next.

POSITIVE CHANGES IN CHILDREN’S LEARNING OUTCOMES %

![Positive Changes in Children’s Learning Outcomes](chart)

SDG CONTRIBUTIONS

"The ATLAS project gives a new methodology that contributes to the national level objectives of education and increases the achievement level of children" — Primary Education Director
Providing a foundation for lifelong learning and development is a major focus of our life stage programming, and we see progress in our contributions to building nurturing environments to support learning for very young children, as well as primary school children. With more than 35 programs showing at least preliminary evidence of positive change for education outcomes across all three regions of the world, there is a global impact in moving critical education outcomes forward. These outcomes include caregiver knowledge and skills to support early learning and development; school enrollment and attendance, including pre-primary attendance in ECD centers; and child developmental milestones and school performance.

Specifically, the contributions of our programs targeting education further the realization of SDG targets:

- **4.1** to “ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes”

- **4.2** to “ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education”

- **4.6** to “ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy”

FOR INFANTS AND YOUNG CHILDREN (LIFE STAGE 1), we see the promise of our programs that have 1) worked with community-based organizations to promote responsible and protective parenting by delivering parenting education through home visits and group sessions; 2) targeted enhancing parent-child play activities to increase children’s cognitive, language and fine-motor skills, preparing them for early childhood learning and primary school; and/or 3) been delivered at ECD centers to influence the number of children attending early learning centers. Moving forward, using lessons learned from these programs, we will continue to:

- Listen to caregivers’ needs and to design and implement programs that increase their capacity to care for and nurture their children during the critical early years of life.

- Empower community volunteers, ECD teachers, and/or Child Protection Committees to support vulnerable families — both in educating and protecting very young children in the communities in which we work.

- Augment policy support for early childhood education and protection needs by engaging community leaders and government representatives to help them better understand the
challenges of nurturing very young children — and the critical need to create systems of support for them; this includes advocating for communities and governments to consider the needs of children aged 0-5 when designing and delivering nurturing care and protection systems.

- Test, refine, and build an evidence base for our two standardized intervention packages focused on positive parenting and building nurturing and protective home environments for children ages 0 to 5; these program models are Responsive and Protective Parenting (RPP) and Growing With You.

- Explore ways in which we can use ECD centers to both support the delivery of caregiver skills development and training and provide very young children with access to pre-primary education.

**FOR CHILDREN AND YOUNG ADOLESCENTS (LIFE STAGE 2),** we note our contributions to furthering safe and supportive learning environments for children both at home and at school. Through this work we have not only increased the likelihood that children will attend school and reach academic performance goals, we have also promoted social change in both the home and community. Moving forward, we will continue to:

- Design, implement, and evaluate programs that promote high quality academic teaching and child literacy, as well as enhance essential life and psychosocial skills for children.

- Help caregivers and families to create supportive and safe home environments for learning; this includes supporting the child’s physical, cognitive, social, and emotional development as they grow older and enter early adolescence; our emphasis on family engagement therefore remains relevant as children grow older — and has increased importance given the large numbers of children who are still learning from home due to the COVID-19 pandemic.

- Design tailored programs that promote high quality academic teaching, child literacy and numeracy, as well as enhance essential life skills for children.

- Build upon our programs showing promising evidence for improved learning outcomes and reduced out-of-school rates for children — especially for children at risk of migration and exploitative labor.

- Test, refine, and build an evidence base for our two standardized intervention packages focused on safe learning environments for school-aged children — ChildFund’s School-Based Violence Prevention (SBVP) and Safe and Protected Children program models.

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24 ChildFund’s Responsive and Protective Parenting (RPP) program model aims to ensure that from pregnancy through age 5, children enjoy improved development and early learning outcomes and are protected at home and in their communities. The model seeks to achieve this by building and reinforcing the nurturing care capacity of local partners/community-based organizations (CBOs) and Sub-National Government Partners, local stakeholders, and caregivers; the model is being implemented (3-year duration) in Africa, Asia, and the Americas.

25 ChildFund’s Growing with You program model supports the growth and development of infants and children under 6 years. The model’s curriculum strengthens the knowledge and positive practices of parents and primary caregivers and strengthens protective environments at the family and community level; the model is being implemented (5-year duration) in the Americas and Africa.

26 The SBVP program model seeks to improve learning outcomes for children ages 6-12 by enhancing the skills of children, their caregivers, and their educators to prevent, mitigate, and respond to violence against them thus, creating safe home and school environments to support learning; the model is being implemented (2-year duration) in Africa and Asia.

27 Implemented in schools and community spaces, the Safe and Protected Children program model aims to ensure that children and youth aged 6 to 14 grow up in safe and protective families, schools, and communities; the model is being implemented (5-year duration) in the Americas.