

Advancing Protection and Care for Children in Adversity

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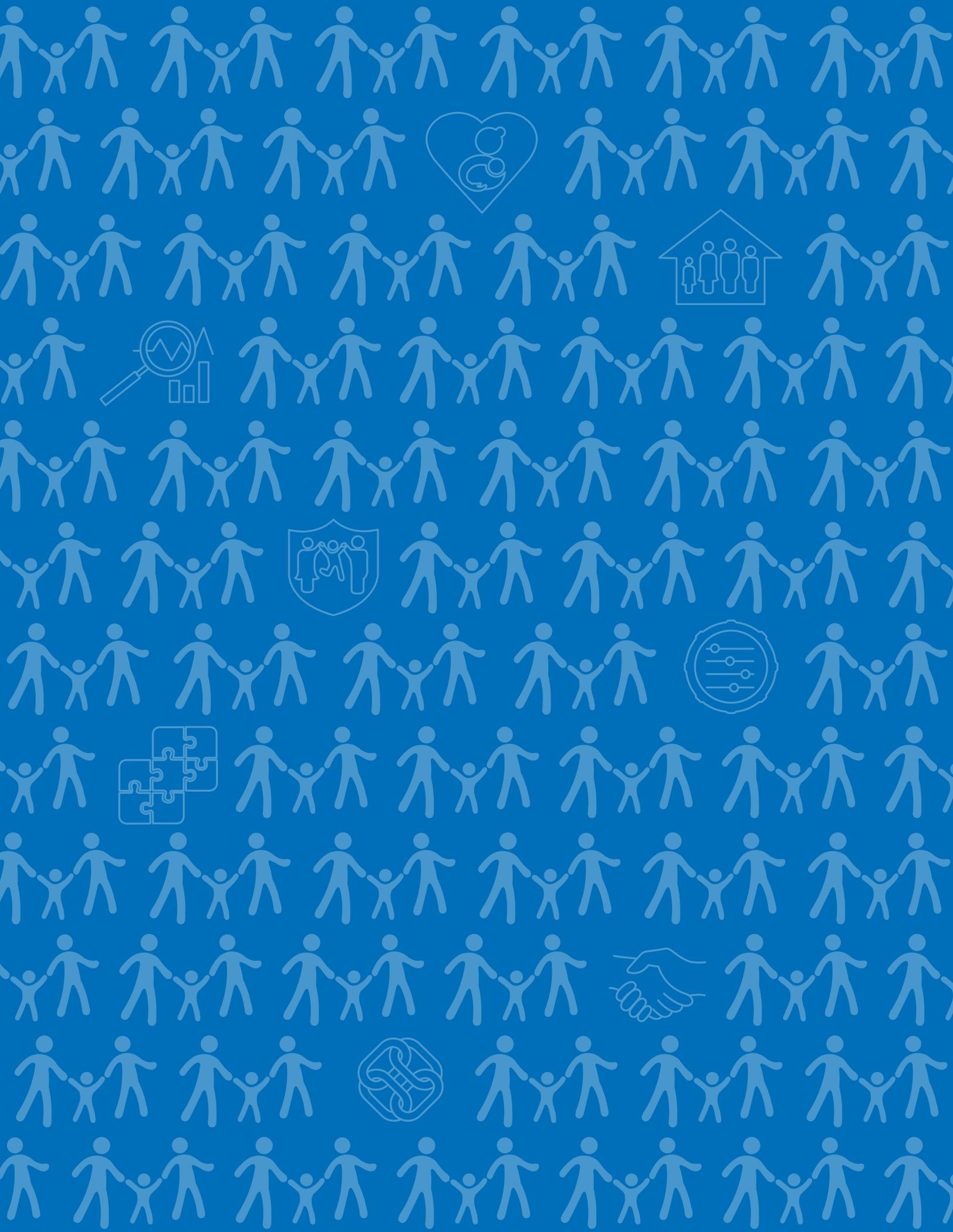


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Message from the U.S. Government Special Advisor on Children in Adversity

Dear Colleagues,

On behalf of the U.S. Government Departments and Agencies that provide assistance to highly vulnerable children around the world, I am happy to submit the eleventh Annual Report to Congress in response to *Public Law 109-95: The Assistance for Orphans and Other Vulnerable Children in Developing Countries Act of 2005*. This year, the Annual Report outlines results achieved by U.S. Government partners for Fiscal Year 2018.

I am also happy to share with you a copy of the new, five-year strategy (2019–2023), *Advancing Protection and Care for Children in Adversity: A U.S. Government Strategy for International Assistance (APCCA Strategy)*, which outlines the U.S. Government's commitment and approach to investing in the development, care, dignity, and safety of the world's most-vulnerable children and their families.

The *APCCA Strategy* is the culmination of a year-long process that reflected on the ideas, contributions, and lessons-learned from interagency partners, civil society, faith-based organizations, professional networks and associations, as well as public and private donors, on how best to develop and implement programs to assist highly vulnerable children and their families. It builds on our past experiences, and calls for continued, comprehensive, and coordinated commitments across U.S. Government Departments and Agencies. It maintains three strategic objectives: (1) *Build Strong Beginnings*; (2) *Put Family First*; and, (3) *Protect Children from Violence*.

The next five years are a critical time for action. The U.S. Government's commitment offers a unique platform, strong momentum, and a clear path forward to continue our investments in the development, care, dignity, and safety of the world's most-vulnerable children and their families. When the family unit is strong, all other goals and outcomes for children are well within reach.

The *APCCA Strategy* is ambitious. However, with the expertise and bold commitment of our U.S. Government partners, including the U.S. Departments of Health and Human Services, Labor, and State; the U.S. Agency for International Development; and Peace Corps, our mandate for action is realistic and achievable.

Thank you for your continued leadership on children's issues and support for the U.S. Government's programs to assist vulnerable children around the globe.

Sincerely,



Jai An Gessell

U.S. Government Departments and Agencies That Contribute to the APCCA Strategy



Mandate for Action

In 2005, the U.S. Congress recognized the importance of a whole-of-Government response to the world's most-vulnerable children when it passed *Public Law 109-95: The Assistance for Orphans and Other Vulnerable Children in Developing Countries Act*. This Act requires an interagency strategy to promote a comprehensive, coordinated, and effective response by the U.S. Government to the urgent needs of the world's most-vulnerable children.

The U.S. Government's five-year *U.S. Government Action Plan on Children in Adversity* (2012–2017) served as the first formal framework for Federal investments on behalf of children in adversity, and provided objectives and guidance for the programs American taxpayers fund around the world to improve the well-being and address the needs of vulnerable children.

On June 17, 2019, U.S. Government partners launched *Advancing Protection and Care for Children in Adversity: A U.S. Government Strategy for International Assistance* (2019–2023), or *APCCA Strategy*, which outlines the U.S. Government's approach to investing in the development, care, dignity, and safety of the world's most-vulnerable children and their families. It builds on the progress achieved since enactment of Public Law 109-95 in delivering better outcomes for the millions of children around the world who face

serious deprivation and danger, and provides a shared basis for continued, technically sound, collaborative action. A copy of the *APCCA Strategy* accompanies this report.

U.S. Government partners involved in drafting and implementing the *APCCA Strategy* include the U.S. Departments of Health and Human Services (HHS), Labor (DOL), and State (DOS); the U.S. Agency for International Development (USAID); and Peace Corps. While the U.S. Departments of Defense and Agriculture did not formally join as partners in the new *APCCA Strategy*, the U.S. Government Special Advisor on Children in Adversity continues to engage the leadership of those Departments to ensure their investments on behalf of children align with the *APCCA Strategy*.

New U.S. Government Strategy for International Assistance

The *APCCA Strategy* ensures that the U.S. Government's investments for the most-vulnerable children and families around the world are effective in helping place our partners on a Journey to Self-Reliance by which they can sustainably finance, manage, and deliver interventions that lead to stable, resilient, and prosperous families and communities. The *APCCA Strategy* gives particular attention to strengthening families, because nurturing and loving family care is essential for children's development, protection, and safety.

Strategic Objectives. The *APCCA Strategy* builds on three, evidence-based objectives that inform the U.S. Government's policies and programs to benefit the world's most-vulnerable children: (1) *Build Strong Beginnings*; (2) *Put Family First*; and, (3) *Protect Children*

from Violence. These objectives are interrelated, interdependent, and mutually reinforcing. Success with each objective creates a multiplier effect by contributing to a solid foundation to protect children and adolescents from a wide array of risks and supporting their development, care, and safety.

Guiding Principles. The U.S. Government is committed to achieving the three strategic objectives of the *APCCA Strategy* by adhering to a set of guiding principles that underscore each objective and are critical to their successes.

Together, the strategic objectives and guiding principles promote greater coherence and accountability for the U.S. Government's diverse portfolio of foreign assistance for children in adversity.

Implementation

The U.S. Government will release an implementation plan for the *APCCA Strategy* in early 2020. The plan will detail key activities, coordination efforts, measurement plans, indicators of impact, and targeted outcomes.

The U.S. Government Special Advisor on Children in Adversity is working with U.S. Government partners to develop a system for measurement and accountability

to improve the tracking of progress in implementing the *APCCA Strategy*. With the goal of identifying key indicators and data sources, the process will include the mapping of stakeholders, programs, and activities; other data will help measure progress toward achieving the three objectives, and facilitate reporting against the *APCCA Strategy*.

The Strategic Objectives and Guiding Principles of the APCCA Strategy

Strategic Objectives



BUILD STRONG BEGINNINGS

The U.S. Government will promote nurturing care for the most-vulnerable newborns and young children, starting before birth, by funding and supporting comprehensive and integrated programming in early-childhood development (ECD) to provide for children's health, nutrition, safety and security, responsive caregiving for social and emotional well-being, and opportunities for early learning.



PUT FAMILY FIRST

The U.S. Government will support those most vulnerable children who are, or are at risk of, living outside of family care by promoting, funding, and supporting nurturing, loving, protective, and permanent family care.



PROTECT CHILDREN FROM VIOLENCE

The U.S. Government will promote, fund, and support the protection of children from violence, exploitation, abuse, and neglect by investing in preventative and responsive programming.

Guiding Principles



ADAPT APPROACHES

The U.S. Government will adapt programs and policies to a child's age, life stage, and gender, with attention to disabilities, to increase the effectiveness of the interventions it funds.



STRENGTHEN SYSTEMS

The U.S. Government will assist governments and civil society in partner countries to build and strengthen their capacities to support, manage, and finance their social-service and child-protection systems fully.



GENERATE AND USE EVIDENCE-BASED INFORMATION

The U.S. Government will use the best available data for decision-making and employ research, implementation science, and programmatic learning to design evidence-based and evidence-informed policies, programs, and practices and adapt them according to the findings.



CREATE SYNERGIES

The U.S. Government will work across Departments and Agencies to promote the best possible outcomes for children and families around the world by fostering synergies across sectors and breaking down silos where they exist.



PROMOTE STRATEGIC PARTNERSHIPS

The U.S. Government will engage and mobilize a broad range of resources and stakeholders, including governments, civil society, faith-based organizations, and donors to increase the scale and effectiveness of the U.S. Government's international efforts.

Progress and Results in Fiscal Year 2018

Multiple Bureaus and Offices across five Federal Departments and Agencies have contributed to the U.S. Government's commitment and approach to programming to benefit the world's most vulnerable children and their families. Partners involved in implementation have included HHS, DOL, DOS, Peace Corps, and USAID.

These U.S. Government partners have worked to improve collaboration and coordination, which, in turn, has led to greater efficiencies and more-productive synergies over the past year. In addition to supporting the three strategic objectives, these achievements have raised additional resources; increased attention on children in crisis and conflict settings; supported children with disabilities; addressed the specific needs of vulnerable youth; funded new, groundbreaking research and tools; and maximized effects through strategic partnerships.

Additionally, U.S. Government partners have strengthened their technical leadership and expertise to place a sharper focus on programmatic areas and investments that support the *APCCA Strategy's* three strategic objectives: *Build Strong Beginnings*; *Put Family First*; and, *Protect Children from Violence*.

A notable example of interagency collaboration and coordination is the Violence Against Children Surveys (VACS), led by the Centers for Disease Control and Prevention (CDC) within HHS, in partnership with the President's Emergency Plan for AIDS Relief (PEPFAR), USAID, and other non-governmental partners (NGOs). These surveys serve as a powerful tool for donors, decision-makers, and implementers, because they equip them with critical data to measure and address physical, emotional, and sexual violence against children around the world. An in-depth description of the VACS across U.S. Government partners appears on pages 18–20.

The following includes highlights of the results achieved by U.S. Government partners that participated in the *APCCA Strategy* from the beginning of Fiscal Year (FY) 2018.



U.S. Agency for International Development

The U.S. Agency for International Development (USAID) provides development assistance to help governments, civil society, and the private sector in our partner countries save lives, build communities, and establish self-reliance. USAID prioritizes addressing the needs of vulnerable children in its programming across sectors and Bureaus.

USAID's **Center on Children in Adversity**, within the **Bureau for Democracy, Conflict and Humanitarian Assistance** (DCHA), coordinates the whole-of-Government response to Public Law 109-95, and houses the U.S. Government Special Advisor on Children in Adversity. The Center also oversees the Displaced Children and Orphans Fund (DCOF), which finances programming for vulnerable children worldwide and works actively to identify opportunities for collaboration across sectors.

Other USAID Bureaus and Independent Offices fund programming that benefits children and families. For example, USAID's Bureau for Food Security (BFS)

leads the Feed the Future initiative, which advances global food security and helps families meet their need for a reliable source of high-quality food. Within the Bureau for Economic Growth, Education and Environment (E3), the Office of Education (ED) advances high-quality education, primarily at the basic and tertiary levels, and increases access to education in conflict and crisis settings. Within DCHA, the Office of Foreign Disaster Assistance (OFDA) coordinates the U.S. Government's response to disasters overseas; works to protect and support conflict- and disaster-affected children, families, and communities; and minimizes and responds to specific risks faced by children and other vulnerable groups. The Office of Food for Peace (FFP) within DCHA helps to reduce hunger and malnutrition and provides children and families with adequate, safe, and nutritious food in both conflict and humanitarian settings. In FY 2018, the U.S. Government, through USAID and the Department of State's Bureau of Population, Refugees, and Migration (PRM), was the single largest bilateral donor to international humanitarian organizations. In addition, USAID's Office of the Youth Coordinator oversees engagement with young people across the Agency. The Bureau for Global Health (GH) within USAID supports children in adversity with programs that address nutrition, maternal and child health, the prevention and treatment of HIV, and other indirect services, including strengthening health care that benefit children and families.

SUCSESSES/HIGHLIGHTS

In FY 2018, USAID's Displaced Children and Orphans Fund financed a range of programs to enhance the capacity of governments to assess, address, and monitor systems of care for children in Armenia; the Kingdom of Cambodia; and the Republics of Colombia, Ghana, Moldova, Rwanda, Uganda, and Zambia. In FY 2018, activities funded

by the DCOF served over 40,000 vulnerable children and families; trained more than 33,500 service-providers; and strengthened over 1,200 governmental and non-governmental organizations.

With funding from USAID through the DCOF, the Royal Government of Cambodia (RGC) has reduced the number of children who are living outside of family care. In recent years, the DCOF has supported over 45,000 children and families and contributed to new policy achievements, such as the RGC's *Action Plan for Improving Child Care Reform*. As of December 2018, the RGC had reintegrated 1,393 children with their families, or placed them in other family or community-based care as part of the *Action Plan*. The number of residential-care institutions in Cambodia has declined by 35 percent, from 406 in 2015 to 265 in 2018, and the number of children in these facilities has declined from 16,579 in 2016 to 7,634 in 2018. The lead RGC Ministry has not authorized any new residential-care institutions since 2016. The recruitment and training of foster families is also underway, which is ensuring children have a safe place to go on an emergency or longer-term basis.

With funding from USAID through the DCOF, the Government of Rwanda is building a national system of protection and care, and has already established its first official social-welfare workforce. In FY 2018, the DCOF continued to fund the capacity-development and training of nearly 30,000 para-professionals deployed in every village in the country, who serve on the front line to identify problems early; help strengthen families; and, when necessary, refer families to professional social workers and psychologists who can address challenges with care and protection. As of March 2019, 3,240 Rwandan children and young adults had returned to family care, or were living independently.

In FY 2018, USAID expanded the partner base of the DCOF through a \$24 million public-private partnership with the MacArthur and GHR Foundations. In direct support of the second objective of the *APCCA Strategy*, Put Family First, the Changing the Way We Care partnership is catalyzing efforts in advocacy and policy reform to promote safe, nurturing family care for vulnerable children around the world. The partnership is also funding care reforms in the Republics of Guatemala, Kenya, and Moldova.

Through the DCOF, USAID funds the implementation of VACS in Colombia and Moldova. In addition, DCOF finances a three-year Health Evaluation and Applied Research and Development project to strengthen the post-VACS process to assist governments and civil society to create and implement *National Action Plans* that address violence against children effectively. Activities include mapping ongoing efforts, identifying gaps, and mobilizing in-country stakeholders at multiple levels to advance a coordinated, cross-sectoral approach that responds to data and monitors progress.

In FY 2018, USAID's **Office of Food for Peace** reached approximately 76 million individuals in 59 countries, 68 million of whom were affected by one or more crises, such as natural disasters or conflict. At least 60 percent of these individuals were women and children under the age of 18. In emergency situations, this figure can approach 80 percent.

USAID's **Office of Foreign Disaster Assistance** dedicated nearly \$89 million in FY 2018 toward stand-alone child-protection initiatives and integrated protection programming, including to prevent and respond to gender-based violence and provide counseling and psychosocial support to enhance children's coping skills and mitigate the effect of experiencing violence. During FY 2018, USAID/DCHA/OFDA

funded 169 projects that included protection-sector activities, of which 130 supported field-level child protection, prevention, and response. USAID/DCHA/OFDA funded an additional 18 programs that contributed to global research, policy, and capacity-building for protecting children in emergencies. Collectively, these interventions supported nearly 3.6 million people in 25 countries, and at the global level.

In FY 2018, USAID/DCHA/OFDA also funded child-protection programming across major humanitarian responses in the Central African Republic, the Democratic Republic of Congo; the Republics of Iraq, South Sudan, and Yemen; the Federal Republic of Nigeria; Syria; and Ukraine. These programs aimed to ensure that children were safe in their communities by establishing community-based child-protection mechanisms; child-friendly spaces and safe healing and learning spaces for adolescents; case-management systems for child-protection; temporary adapted-learning opportunities; and family-tracing and reunification for unaccompanied and separated children.

Additionally, USAID/DCHA/OFDA's global programs address critical challenges and gaps in child-protection programming, which have resulted in the creation of guidance for the supervision and mentoring of child-protection caseworkers, and for community-based child-protection mechanisms; the improvement and strengthening of services for child survivors of sexual violence; and the reintegration of children formerly associated with armed groups back into **their** communities.

USAID's YouthPower program, managed in coordination with multiple Bureaus and the **Office of the Youth Coordinator** within USAID/DCHA, seeks to improve the capacity of youth-led and youth-serving institutions, and to engage young people, their families,

and communities so youth can reach their full potential. The \$75 million YouthPower Learning mechanism, a component of the larger YouthPower program and in partnership with the U.S. President's Emergency Plan for AIDS Relief, supports USAID's Missions and partners to advance evidence on effective programming in Positive Youth Development. Efforts focus on strengthening families and youth development and improving health, education, and violence-reduction outcomes for young mothers and children. In FY 2018, YouthPower Learning also advanced research on effective practices in the reduction of youth violence and bullying related to mental health. YouthPower directly supports the third objective of the *APCCA Strategy*, Protect Children from Violence, through its cross-sectoral programming focused on preventing youth violence in the Eastern Caribbean, the Republics of Indonesia, Kenya, and Nicaragua; the Hashemite Kingdom of Jordan; and the United Republic of Tanzania.

USAID's **Bureau for Food Security** also invests in activities focused on empowering youth. In the Republic of Mali, young people participate in theater to raise awareness of, and mediate, conflicts on health and sanitation, the use of forests, and the management of natural resources among communities, neighbors, farmers, herders, and fishermen. In the Republic of Zimbabwe, a program funded by USAID/BFS trains youth to work or start businesses in the agricultural sector.

The Education Team within USAID's **Bureau for Africa** designed a new Consortium on Pre-Primary Data and Measurement in Africa, which convenes

government officials, researchers, and other stakeholders to explore how to use data to improve children's learning in the years before they enter formal schooling.

In FY 2018, USAID's **Bureau for Global Health** funded efforts that reached more than 28 million children under age five with effective, life-saving, nutrition-specific interventions.* These investments target vulnerable children to help them receive the nutrition they need for physical and cognitive development during their critical early years of life. USAID/GH's interventions include those that directly affect the knowledge, attitudes, behavior, and social norms of individuals, households, and communities; they reach men, grandmothers, and other family members with simple, easy-to-apply techniques to support pregnant and lactating women and children under two years of age. In FY 2018, USAID/GH also funded programs for newborns, which targeted pre-term, low-birth-weight, and sick infants, who are most at risk of being, or most likely to be, developmentally delayed without nurturing care. As part of this effort, USAID/GH also collaborated with the World Health Organization and UNICEF to develop guidelines for family-centered, developmentally supportive care of acutely ill newborns in hospitals.

USAID's Maternal and Child Survival Program (MCSP) in the Republic of Ghana is an example of using existing platforms for the delivery of healthcare to improve outcomes in early-childhood development. Between 2016 and 2019, the MCSP Ghana Early Childhood Development project supported the Government of Ghana to teach caregivers how to stimulate and improve the language, cognitive, physical, and

* These interventions include programs and plans that are designed to address the immediate causes of suboptimal growth and development. Nutrition-specific interventions address the immediate determinants of malnutrition versus nutrition-sensitive interventions, which address the underlying and systemic causes of malnutrition. *USAID Multi-Sectoral Nutrition Strategy 2014-2025*, May 2014.

socioemotional development of toddlers. The program trained 2,268 national, regional, and District-level health staff, and reached 5,006 children. Funding to MCSP Ghana from USAID through the DCOF enabled the program to develop a global toolkit for early-childhood development for children ages zero to three, and adapted it to fit the Ghana-specific context for use by community health workers.

The **Office of Education** within USAID's **Bureau for Economic Growth, Education and Environment** funds multiple programs that provide opportunities for early learning. In FY 2018, USAID led the development of the *U.S. Government Strategy for Basic International Education*, which prioritizes expanding access to basic education for the most marginalized and vulnerable groups, particularly girls and women, to help ensure gender parity in basic education and for populations affected by conflict or crisis. E3/ED also launched the new USAID Education Policy, which applies to educational programming from pre-primary through higher education Agency-wide and encourages new partnerships with the private sector and non-state schools. In FY 2018, USAID/E3/ED launched a \$12 million program to build the skills of learners with disabilities in reading in Cambodia, the Republic of Malawi, and the Federal Democratic Republic of Nepal, and awarded \$500,000 in incentive funding to increase the number of sign-language-supported reading materials for learners who are deaf. In support of the third objective of the *APCCA Strategy*, Protect Children from Violence, USAID/E3/ED led the development, piloting, and release of a comprehensive Safer Learning Environment Toolkit, which provides guidance to assess, identify, and address violence against children in and around the learning environment.



U.S. Department of Health and Human Services

Through the **Centers for Disease Control and Prevention** and the **National Institutes of Health** (NIH), the U.S. Department of Health and Human Services has contributed to the U.S. Government's foreign assistance on children in adversity through numerous research grants and evidence-based interventions.

SUCCESSES/HIGHLIGHTS

CDC serves as the nation's health protection agency and supports work that saves lives and protects the public from health, safety, and security threats. During FY 2018, CDC provided technical assistance for planning, implementing, and linking VACS data to effective action in 12 countries, 10 of which receive PEPFAR funding. CDC completed data collection for VACS in the Republics of Colombia, Côte d'Ivoire, El Salvador, Honduras, Lesotho, and Moldova in FY 2018. Details on the VACS are on pages 18–20. This work is in direct alignment with the third objective of the *APCCA Strategy*, Protect Children from Violence.

NIH awards research grants to individual researchers and their home institutions, most often U.S. universities and research institutions, as determined by peer review. Although NIH does not provide direct foreign assistance to countries, their research supports the development of international programs—including those that serve vulnerable children and their families around the world—implemented by other U.S. Government Departments and Agencies. Numerous institutes and centers within NIH support research to generate evidence-based information in areas aligned with the strategic objectives of the *APCCA Strategy*,

particularly in the area of early childhood development and in direct support of the first objective of the *APCCA Strategy*, Build Strong Beginnings.

The **Eunice Kennedy Shriver National Institute of Child Health and Human Development** (NICHD) supports research that found ECD interventions that integrate nutrition and child stimulation activities are effective in improving children's health and developmental outcomes. For example, one multi-arm, clustered randomized controlled trial in rural Kenya has identified contextualized, cost-effective delivery models for ECD interventions implemented in rural settings. NICHD has also supported outcome evaluation studies of multi-faceted health programs developed for improving the outcomes of orphans and vulnerable children and youth living with HIV in several countries worldwide.

The **Fogarty International Center** and the **National Institute of Environmental Health Sciences** both support research on how best to combat electronic waste in Ghana and its effect on the development of children due to direct or indirect exposure to harmful contaminants. The research will help identify strategies to mitigate the negative and adverse health effects of exposure and to reduce and prevent such effects in the future.

The **National Institute of Mental Health** is supporting an African regional transdisciplinary center, which is studying how best to adapt and implement an evidence-based intervention for child disruptive behavioral disorders (DBDs) in Ghana, Kenya, and Uganda. Given the high prevalence of DBDs and their link to other mental health issues among children in sub-Saharan Africa, the center is examining various factors that influence child behavioral outcomes and

the uptake, feasibility, and implementation of the intervention in real-world settings. The center has also established a consortium of stakeholders representing members of the Ugandan Government, academia, and the community to ensure that research is informed by the community's needs, and that results reach those responsible for influencing and developing new policies and programs.



U.S. Department of Labor

Through the **Bureau of International Labor Affairs, Office of Child Labor, Forced Labor and Human Trafficking**, the U.S. Department of Labor (DOL) has contributed to the U.S. Government's foreign assistance to children in adversity by addressing child labor and expanding global knowledge on child labor issues.

SUCCESSES/HIGHLIGHTS

DOL awarded approximately \$42 million in new grants to combat child labor and forced labor in more than 10 countries in FY 2018. These projects will help increase vulnerable children's access to education and their families' access to financial assistance, thereby reducing reliance on child labor. At the national, district, and community levels, these projects will help strengthen systems and services that prevent and reduce child labor and forced labor and help those who have been exploited to build new futures for themselves and their families.

In FY 2018, DOL managed numerous pivotal projects that directly addressed the need to reduce and combat

child labor in alignment with the third objective of the *APCCA Strategy*, Protect Children from Violence. One example, a project implemented by the Fair Labor Association, completed a pilot-test of guidelines for eliminating child labor in agricultural supply chains. Focusing on Turkey's hazelnut production industry, this project was part of a comprehensive program involving Nestle and two, top-tier suppliers. In villages identified as at-risk for child labor, particularly for children 10 to 15 years of age, project partners set up child labor monitoring and referral units and offered children of seasonal workers a secure environment where they could benefit from health care and educational activities.

Another project, the Myanmar Program on the Elimination of Child Labor (My-PEC), supported the Government of Burma's establishment of the Myanmar National Committee on Child Labor Eradication and its approval of a National Action Plan on Eliminating Child Labor. My-PEC provided more than 640 children with non-formal education services, including literacy, numeracy, and life-skills classes, and 150 children with vocational training through both private and government training centers. Children were trained in sewing, air-conditioning and refrigerator repair, domestic wiring, and nursing. The project also published a report on child domestic work in Burma with recommendations on legislation, poverty reduction strategies, job pathways for out-of-school youth of legal working age, child protection, and awareness raising.



U.S. Department of State

The U.S. Department of State has been a pivotal interagency partner in the U.S. Government's foreign assistance to advance protection and care of the world's most vulnerable children. Through numerous Bureaus and Offices, the State Department has contributed to the well-being of children in adversity in alignment with all three of the *APCCA Strategy's* strategic objectives.

SUCCESSES/HIGHLIGHTS

The **Office of the U.S. Global AIDS Coordinator and Health Diplomacy** (S/GAC) leads implementation of PEPFAR, the largest commitment ever by any nation for an international health initiative dedicated to a single disease. S/GAC provides funding and strategic direction for all PEPFAR programming that is implemented in partnership with other U.S. Government Agencies. PEPFAR-funded activities in support of the *APCCA Strategy* objectives are described below and are noted in the relevant Agency- and office-specific sections throughout this report.

PEPFAR invests 10 percent of its bilateral funding annually to programs that address the needs of orphans and vulnerable children (OVC), defined as children and adolescents infected, affected, and vulnerable to HIV and AIDS. Through a comprehensive, family-based approach focused on strengthening families as primary caregivers and prioritizing interventions that address the most critical needs, PEPFAR served 6.4 million OVC and their caregivers in 23 countries, including 4.6 million children and adolescents under age 18 in FY 2018. Moreover, in direct support of the first objective of the *APCCA Strategy*, Build Strong

Beginnings, PEPFAR enabled more than 2.4 million babies of HIV-infected mothers to be born HIV-free, working toward eliminating new infections among children.

In alignment with the second objective of the *APCCA Strategy*, Put Family First, PEPFAR's OVC program includes interventions that strengthen households and prevent unnecessary child-family separation due to poverty and other stressors. Parenting support, household economic strengthening, and health and school access interventions reduce stress on families and empower them to provide for the essential needs of their children.

In 2018, PEPFAR also invested nearly \$190 million in the ambitious DREAMS (Determined, Resilient, Empowered, AIDS-Free, Mentored, and Safe) Partnership and continued to support the implementation of and response to VACS in PEPFAR countries. PEPFAR results announced on World AIDS Day 2018 showed that in the past year, HIV diagnoses among adolescent girls and young women continued to decline in 85 percent of the highest-burden communities that are implementing DREAMS. Additionally, in FY 2018 PEPFAR provided post-gender-based violence clinical care to 393,360 individuals, including 108,041 children and adolescents age 18 and under. Through both OVC programs and the DREAMS Partnership, PEPFAR has focused on reducing educational disparities and barriers to access for school-age children, particularly for adolescent girls, who are more likely to drop out and be at risk for HIV and other life-long health issues.

Over the past year, PEPFAR expanded its efforts in OVC and DREAMS programs to protect children from violence in furtherance of the third objective of the *APCCA Strategy* by implementing evidence-based interventions to prevent sexual violence and HIV, with

a focus on pre- and young adolescents (among boys and girls 9 to 14 years of age), by expanding community violence prevention, and by strengthening violence response to ameliorate its negative consequences. On World AIDS Day 2018, PEPFAR launched its Faith and Community Initiative, which includes a Justice for Children component aimed at protecting children from sexual violence and holding sexual perpetrators accountable.

The **Office of Children's Issues** in the **Bureau of Consular Affairs** (CA) undertook numerous measures this past year to strengthen intercountry adoption and improve the safeguards for children, and birth and adoptive families. CA performs central authority functions for the State Department under the Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption (Adoption Convention).

In direct support of the second objective of the *APCCA Strategy*, Put Family First, CA provided input to the Hague Permanent Bureau on ways to minimize illicit intercountry adoption practices; worked to strengthen and improve oversight of adoption service providers, including designating a new accrediting entity; and facilitated public information on the effects of volunteering on children who are living in residential care centers.

Through numerous multilateral and bilateral engagements, CA also worked to ensure that intercountry adoption is a viable option. Through regular contact with in-country government partners, CA provided key information on the U.S. intercountry adoption process by addressing concerns and improving understanding. Such efforts help to strengthen foreign governments' legislation, policies, and systems to care for and protect children.

Similarly, CA undertook numerous reviews to improve understanding of foreign laws and practices, particularly in countries of origin, as well as countries newly acceding to the Adoption Convention, to more effectively promote information exchange and processes that are in the best interest of children.

The **Bureau of Population, Refugees, and Migration** addresses the unique needs of displaced and stateless children through global humanitarian assistance programs and humanitarian diplomacy. More than half of the world's refugee populations are children under age 18, and many spend their entire childhoods in countries of asylum. Displaced children face heightened risks for abuse, violence, exploitation, and separation from their caregivers.

In direct support of the three strategic objectives of the *APCCA Strategy*, PRM works across the U.S. Government, as well as with international and non-governmental organizations, to empower children and caregivers by creating safe and protective environments; ensuring access to essential psychosocial services, health care, nutrition, and education; supporting national systems; and increasing children's participation in issues affecting their lives. PRM gives maximum flexibility to humanitarian partners to ensure the most urgent needs of children are met through a holistic response. This includes mainstreaming early childhood development activities and prioritizing family care models.

In FY 2018, the U.S. Government, through OFDA and FFP, along with State/PRM, was the single largest bilateral donor to international humanitarian organizations by integrating child protection into the U.S. Government's humanitarian response. Programs provided family reunification services for refugees and other conflict-affected populations around the globe.

The U.S. Government also provided support to the United Nations High Commissioner for Refugees for technical and operational assistance to the field, including the roll-out of the *Guidelines on Assessing and Determining the Best Interests of the Child* to ensure best practices and access to essential tools and resources.

The **Office to Monitor and Combat Trafficking in Persons** (TIP Office) leads the Department's global efforts to combat human trafficking through the prosecution of traffickers, the protection of victims, and the prevention of human trafficking. TIP Office programs support the removal of victims from trafficking situations, provide housing through shelter services, assist with reintegration and family reunification, offer comprehensive services and training for child protection officers, and provide legal support to advance justice for victims.

In FY 2018, TIP Office programs led to the identification of more than 1,852 child victims of trafficking or children vulnerable to trafficking in direct support of the third objective of the *APCCA Strategy*, Protect Children from Violence. TIP Office partner organizations identified more than 235 victims and referred them to government authorities and organizations that provided necessary care. In an effort to raise public understanding of human trafficking and, more specifically, child trafficking, TIP Office partner organizations reached more than 1,726,628 people through awareness-raising efforts.

In South Sudan, the TIP Office has supported work to address the unlawful recruitment or use of child soldiers, aiming to reduce the risk of recruitment and re-recruitment. The program actively engages children, families, communities, and the government to facilitate the safe, effective return of children associated with armed forces and groups.

Through Child Protection Compact (CPC) Partnerships, funded by up to \$5 million in U.S. foreign assistance to a partner country, the TIP Office has been documenting the commitments of governments to achieve shared objectives through the prosecution and conviction of child traffickers, provision of comprehensive trauma-informed care for child victims, and prevention of child trafficking in all its forms. Currently, the TIP Office has CPC Partnerships with the Governments of Ghana, Jamaica, Peru, and the Philippines.

Through one of its newest initiatives, the Program to End Modern Slavery (PEMS), the TIP Office has been funding work to reduce the prevalence of modern slavery in target regions or sectors. PEMS' largest implementer, the Global Fund to End Modern Slavery, has been working to combat online child sex trafficking in India and to assist with reintegration of children in Vietnam. The University of Georgia Research Foundation, also a PEMS implementer, has been focused on child labor trafficking in Guinea and Sierra Leone.



Peace Corps

The Peace Corps plays a unique role on several key U.S. Government interagency programs, given its focus on building relationships with communities, families, and vulnerable children through its Volunteers, many of whom serve as a critical link to available comprehensive primary health care and social services. Peace Corps Volunteers often partner with the local community

to facilitate training on positive parenting, economic strengthening, and care management to strengthen households for vulnerable children.

SUCCESSES/HIGHLIGHTS

In FY 2018, the Peace Corps reached 19,828 caregivers, including parents or guardians, with training on preventing childhood illnesses and 18,584 pregnant or lactating mothers, caregivers, and community health providers with training on maternal and newborn care. With PEPFAR support, Peace Corps reached 133,000 individuals, mostly youth, with HIV-prevention messages; and, 24,600 orphans and other vulnerable children and their caregivers with HIV-related services.

With an emphasis on the first objective of the *APCCA Strategy*, Build Strong Beginnings, Volunteers use behavior change methodologies targeted toward increasing adoption of accelerator behaviors for pregnant and breastfeeding mothers and their children. During the past five years, Volunteers implemented Care Group models to prevent child maternal deaths, especially for households with children under age five. Care Group models cultivate a cadre of peer health educators who receive training on child health and nutrition. Through a multiplying effect, they have promoted healthy behavior associated with nutrition, hygiene, and the prevention of childhood illnesses to reduce morbidity and mortality of children under age five.

With PEPFAR support, Volunteers have also worked with parents, social workers, and community health workers, in addition to children and adolescents at-risk for HIV, to provide educational and psychosocial support through life skills and economic strengthening activities. Focused on engaging men and boys, through

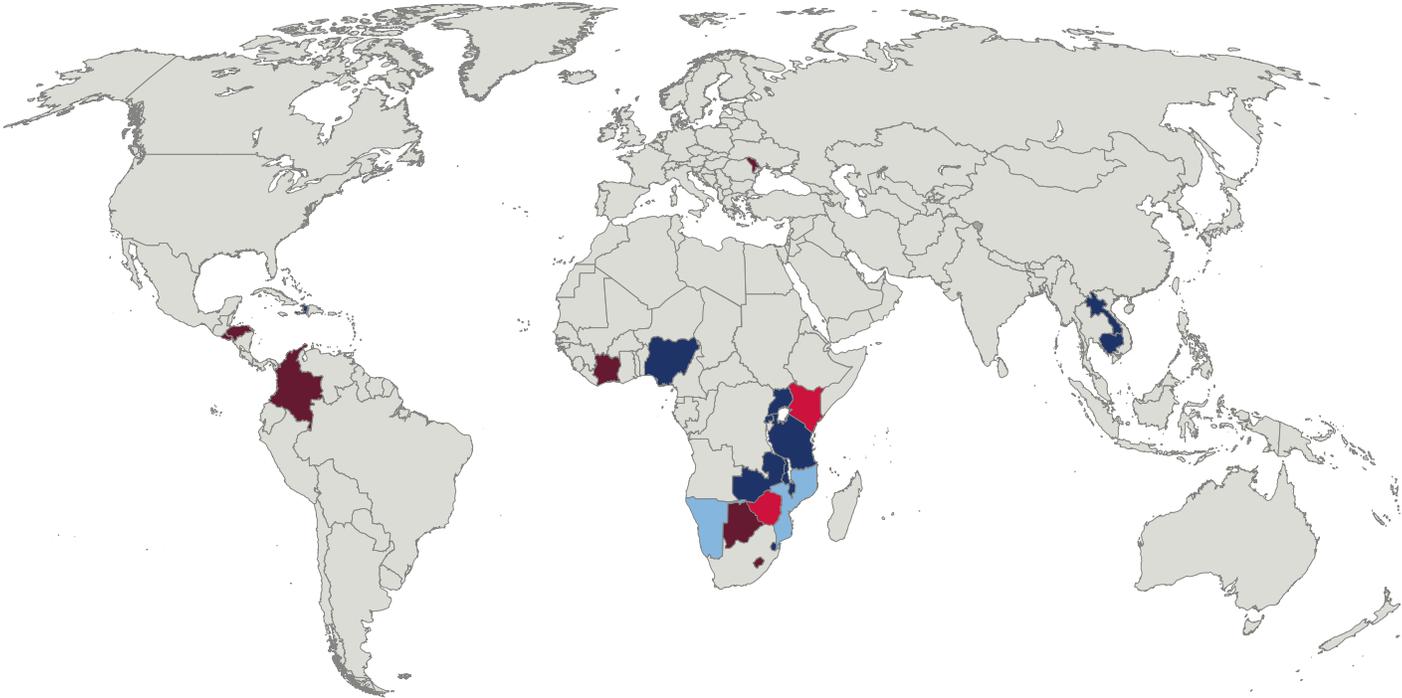
PEPFAR the Peace Corps has supported *Men as Partners* and the *Grassroots Soccer SKILLZ* curriculum to ensure men are working toward the same goals of healthy and resilient households. Finally, the Peace Corps has worked with caregivers to facilitate Village Savings and Loans associations to incorporate financial literacy and enable communities to generate income.

As part of the PEPFAR program, Peace Corps Botswana has been implementing the Journey of Life curriculum to promote psychosocial support workshops for students and caregivers within their communities. Collectively, the Volunteers, community counterparts, and social workers are trained to facilitate sessions with primary school students and their caregivers to solicit community dialogue and reflection regarding the needs of children and families.

Peace Corps Rwanda has been an active partner of USAID's Prevent Child and Maternal Deaths

program, with staff and Volunteers engaging in maternal, newborn, and child health technical training. Through training on behavior change methods such as Care Groups, Volunteers work with leader mothers to build strong beginnings by addressing the first 1,000 days among caregivers with children under five years of age. A Volunteer partnered with the director of the community health workers and a nutritionist from the local health center to implement a program based on the Care Group model, targeting mothers with children identified as malnourished. The mothers were trained on an 11-week curriculum focused on nutrition, hygiene, preventing childhood illness, and gender equality. A comparison of the responses from a pre- and post-evaluation survey showed that mothers were better informed on child health and nutrition following the education intervention. Additionally, clinical assessments showed that children in the community had grown in weight, height, and mid-upper arm circumference.

Status of Violence Against Children Surveys in FY 2018



**VACS Completed/
Implementing Response**



- Cambodia
- Eswatini
- Haïti
- Kenya (2010)
- Lao PDR
- Malawi
- Nigeria
- Rwanda
- Tanzania
- Uganda
- Zambia
- Zimbabwe (2011)

VACS Repeating



- Kenya (2019) (report forthcoming)
- Zimbabwe (2017) (VACS completed/implementing response)

VACS Report Forthcoming



- Botswana
- Colombia
- Côte d'Ivoire
- El Salvador
- Honduras
- Lesotho
- Moldova

VACS in Progress/Planning



- Mozambique
- Namibia

In the Spotlight: Protecting Children from Violence

Surveys on Violence Against Children

A first step in preventing violence against children is to understand its magnitude, nature, and consequences. An estimated one billion children, half of all the children in the world, are victims of violence every year. This violence is connected to many public-health problems, and makes children and families more vulnerable.

VACS, implemented by HHS/CDC in partnership with multiple U.S. Government programs, including those funded by PEPFAR and USAID, and local and international NGOs, measure physical, emotional, and sexual violence against girls and boys. The surveys yield rich data to catalyze action to prevent and respond to violence. PEPFAR and USAID make critical financial and technical contributions to implementing the VACS and responding to their results with targeted, actionable programming and policy solutions. PEPFAR's funding of the VACS and its response focuses on African countries and the Republic of Haiti, while USAID's complementary financing of the VACS focuses primarily on Eastern Europe, Latin America, and Southeast Asia. In addition to the U.S. Government, other partners, including bilateral and multilateral organizations, as well as civil society and the private sector, provide important technical contributions to the surveys. These partners also facilitate the wide dissemination of the data at the regional and global levels.

National governments lead the implementation of the VACS, with technical support from HHS/CDC. In FY 2018, the U.S. Government and its partners provided VACS technical assistance in more than 20 countries, which helped guide programs and policies to prevent violence before it starts. Findings from VACS provide reliable evidence to enable governments to make better decisions about allocating limited resources to develop, launch, and evaluate violence-prevention programs and strengthen child-protection systems.

Country-Level Highlights from FY 2018

In the **Kingdom of Eswatini**, VACS findings were instrumental in the Government's establishment of the first-ever policy to make domestic violence and sexual abuse against children illegal, the securing of appropriations for a national database that tracks cases of violence, and support for a national radio education campaign.

In the **United Republic of Tanzania**, VACS findings helped PEPFAR and local partners establish policies and guidelines for codes of conduct for teachers and child protection in schools, and a Standard National Child-Protection Training curriculum for staff at numerous ministries and institutions on preventing and caring for children who have been victims of violence.

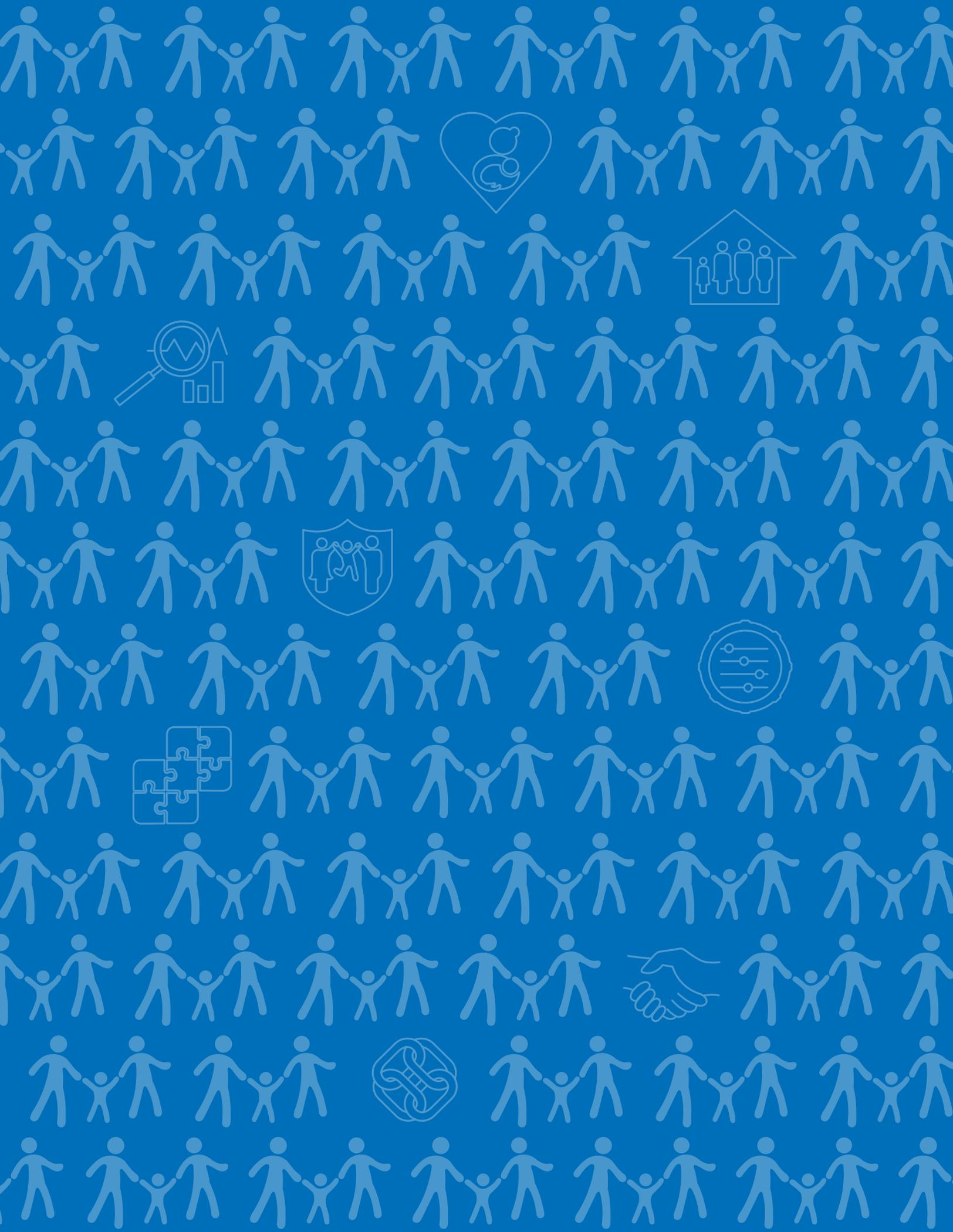
In the **Republic of Uganda**, PEPFAR used VACS findings to implement IMpower, a rape-prevention intervention, on a large scale in three Districts with 20,000 adolescent girls and young women. PEPFAR also used these findings to expand programs in District Action Centers, which provide post-violence services to child survivors of violence, and to roll-out the "Every Hour Matters" Campaign, which raises awareness about the importance of receiving sexual-violence services as soon as possible. PEPFAR also funded improvements to the Uganda Child Helpline, a 24-hour phone line for reporting cases of child abuse, particularly sexual abuse, and referring those in need to the appropriate legal and psychosocial services and medical care.

In **Eswatini, Kenya, Tanzania, Uganda, and Zimbabwe**, VACS findings helped develop and strengthen PEPFAR-funded One-Stop Centers for post-rape care, including the provision of counseling, medical care, and legal support.

In **Honduras, Rwanda, and Zimbabwe**, host-government partners held VACS Data to Action workshops in FY 2018 to build in-country capacity, which resulted in national frameworks and programmatic action to address the burden of sexual and other forms of violence against children and youth. In Zimbabwe, PEPFAR also hosted a series of regional workshops with implementing partners and local leadership to review VACS results and help local planning to strengthen programs to prevent the violence and the transmission of HIV.

In **Zimbabwe**, VACS findings informed the U.S. Government's support to a National Action Plan and multiple regional trainings with community service-providers and case-care workers in Districts that are part of the DREAMS program under PEPFAR, to help align resources and the response to violence against children and youth.

In **Haïti, Kenya, Malawi, Nigeria, Rwanda, Uganda, Zambia, Zimbabwe**, the **Kingdom of Lesotho**, and the **Republics of Botswana and Côte d'Ivoire**, VACS findings highlighted the association between experiencing sexual violence and HIV status among adolescents and young adults. PEPFAR is using these findings to refine its programming in these countries.



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