



ANNUAL REPORT TO CONGRESS THE U.S. GOVERNMENT ACTION PLAN ON CHILDREN IN ADVERSITY

April 2016



The Action Plan on Children in Adversity is the first ever whole-of-government strategic guidance for U.S. Government international assistance for children, with its stated goal to achieve a world in which all children grow up in protective family care and free from deprivation, exploitation, and danger.

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INTERNATIONAL LABOR ORGANIZATION/CROZET M.

Foreword

Dear Colleagues,

I am pleased to submit the Eighth Annual Report to Congress on Public Law 109-95, the Assistance for Orphans and Other Vulnerable Children in Developing Countries Act of 2005, and the U.S. Government Action Plan on Children in Adversity (APCA). The report, like APCA itself, is a collaborative, cross-U.S. Government effort, reflecting a wide range of input from across the community of U.S. Government agencies that cooperate on APCA to assist countries around the globe to improve the lives of children living in adverse circumstances.

Seven U.S. Government Departments and Agencies—Agriculture, Defense, Health and Human Services, Labor, State, Peace Corps and USAID, and numerous offices within these entities—partner on APCA. This year's report outlines the wide range of ways in which these Agency programs supported APCA implementation by enabling countries to invest strategically in their children—from interventions to strengthen child health and nutrition and reinforce family care, to targeted research that ensures evidence-based approaches that improve development outcomes for children in adversity, to the development of policies to sustain improvements in child welfare and protection.

You will see from this year's report that much has been accomplished to date. That said, however, there is much more work to do to make a difference in the lives of the world's most vulnerable children. Just past the midway point of the 2012–2017 Action Plan, U.S. Government agencies remain committed to addressing the needs of children in adversity through APCA's guiding framework as well as to the principles of whole-of-government collaboration to support comprehensive, effective efforts that optimize results and impact.

Our sincere thanks to you for your ongoing leadership and to the American people for their continued generosity and support for U.S. Government programs to assist vulnerable children.

Sincerely,



Rob Horvath
U.S. Government Special Advisor on Children in Adversity



MORGANA WINGARD, USAID

»» Introduction

Millions of children in low- and middle-income countries around the world are growing up in adverse environments, habitually suffering from ill health and disease, chronic undernutrition, deprivation, abuse, neglect and exploitation.¹ Children are also excessively affected by violence, with a study published in the February 2016 issue of *Pediatrics* indicating that more than half the world's children had experienced violence during the year prior to the study.² In the most severe circumstances, children live without permanent or protective care, in abusive living situations, on the streets or in inadequate institutional settings, or are subjected to sex trafficking, conscripted into armed groups, or exploited for labor. Children consistently exposed to cumulative, toxic stresses inherent to these circumstances can suffer from health difficulties and cognitive, socio-emotional, and other developmental delays and ultimately fail to achieve their full potential. Developmental deprivations and traumatic experiences of this nature can inhibit learning, constrain capacity to build relationships, and reduce a child's potential to mature into a productive adult member of society (Fergusson & Horwood, 2003). These challenges, predictably, can also significantly compromise a country's social and economic progress. Annex 1 provides key statistics on children in adversity.

This is the eighth annual report on Public Law (PL) 109-95, The Assistance for Orphans and Other Vulnerable Children in Developing Countries Act. Public Law (PL) 109-95 was signed into law in 2005 to promote a comprehensive, coordinated and effective response by the U.S. Government to the urgent needs of the world's most vulnerable children. This report is submitted on behalf of U.S. Government agencies involved in the provision of assistance to vulnerable children around the globe, the implementation of research on how to improve the development outcomes and health status of this population, and the promotion of policies to sustain improvements in child welfare. It provides a summary of the significant work undertaken by U.S. Government agencies over the past year and outlines progress made to date under the Action Plan on Children in Adversity (APCA) through Calendar Year (CY) 2015, both by Objective as well as in the six priority countries of Armenia, Cambodia, Colombia, Moldova, Rwanda and Uganda.

➤➤ APCA: A Shared Commitment by U.S. Government Agencies

Launched in December 2012, APCA is the first ever whole of government strategic guidance for U.S. Government international assistance for children, with its stated goal to achieve a world in which all children grow up in protective family care and free from deprivation, exploitation, and danger. Built on the premise that child well-being, development and safety is central to U.S. efforts around the world, the plan affirms that country level investments in children are essential to advancing national growth and progress. To this end, through APCA, the U.S. Government has committed to partnering with nations around the world to improve the well-being of their children. Annex 2 presents the six principal and supporting objectives of APCA.

Multiple offices across seven federal agencies, including the Departments of State, Labor, Health and Human Services, Defense, Agriculture, the Peace Corps and the U.S. Agency for International Development (USAID), collaborate on the implementation of APCA to respond to children facing adversity overseas. To date, USAID, through the Special Advisor for Children in Adversity, has assumed the role of coordinating the whole-of-government response for children in order to better harmonize approaches, optimize the use of existing program resources and policies, and multiply results. The U.S. Government Special Advisor for Children in Adversity is located in the USAID Center on Children in Adversity (CECA), which is housed in the Democracy, Conflict and Humanitarian Assistance Bureau within the Center of Excellence on Democracy, Human Rights and Governance.

The Action plan, which serves both as an overall strategy and framework for international assistance on children in adversity, has three principal objectives and three supporting objectives to promote greater U.S. Government coherence and accountability for whole-of-government assistance to vulnerable children. The following sections outline activities that advance one or more of these objectives.



Promote the sound development of children

►► Joint Accomplishments and Progress to Date by APCA Objective

OBJECTIVE ONE: BUILD STRONG BEGINNINGS

The U.S. Government will help ensure that children under five not only survive, but also thrive by supporting comprehensive programs that promote sound development of children through the integration of health, nutrition and family support.

Over the past several years, U.S. Government investments in health and food security have strategically targeted the most vulnerable children with a wide range of interventions to improve newborn and child health and nutrition, particularly during the 1,000 day window from pregnancy through age two. These investments have yielded impressive dividends in reducing preventable mortality and improving the well-being of children who are most vulnerable. USAID's 2014 Annual Report to Congress on Global Health Programs, for example, reports that USAID investments to end preventable child and maternal deaths in 24 high burden countries led to declines in child mortality by more than 50 percent since 1990.

As we know from research on child development, however, children also

need nurturing, supportive relationships, stable interaction with caregivers, and regular stimulation to ensure the social, emotional and cognitive development that is fundamental to enabling children to reach their full potential, thrive and grow into strong adults. To this end, during the past year, U.S. Government agencies implementing the Action Plan continued to promote both targeted research and the implementation of comprehensive assistance programs that leverage health, nutrition and child development interventions to enable vulnerable children to reach their full health and development potential and become productive members of their families and communities.

Each year, the U.S. Department of Agriculture (USDA) Foreign Agricultural Service (FAS) awards approximately \$180 million under the McGovern-Dole

International Food for Education and Childhood Nutrition Program (MGD) to private voluntary organizations, public international organizations, and foreign governments to support school-feeding programs. These programs are complemented by activities to support training and infrastructural support for improved education, nutrition, health, and sanitation. During FY 2014, USDA continued to address critical nutritional needs and support community childcare programs integrating nutrition, health and sanitation, and child development. Through 48 projects ongoing globally during 2014, USDA reached over 2.5 million children in the poorest areas of beneficiary countries, providing both meals at school and take-home rations. As described in a review of school feeding programs in developing countries, school feeding programs demonstrate consistent positive effects

on micronutrient status, school enrollment, and attendance.³ To this end, USDA programs not only increased children's access to education and encouraged continuity of attendance, particularly for girls, but undoubtedly contributed to improvements in beneficiary micronutrient status. Improved micronutrient status contributes to enhanced cognitive understanding and learning capacity.

To foster more enduring impact, USDA's MGD programs also supported a range of complementary activities. For example, programs strengthened local capacity to improve nutrition and sanitation infrastructure by building the skills of teachers and school administrators to work with students and communities to establish school gardens, latrines and wells. In some locations, MGD programs also concentrated on increasing community and school staff knowledge of child nutrition and health related to child development. Strategically targeted activities such as these were vital to further multiplying the impact of USDA investments and helping to sustain gains.

In FY 2015, U.S. Government-supported nutrition programs reached more than 12 million children. Ongoing, targeted programs through the combined efforts of Feed the Future, Food for Peace, and Global Health Nutrition contributed to measurable reductions in stunting in children under five years of age. In 19 focus countries receiving USAID support, stunting has declined from 56 percent in 1990 to 36 percent in 2014. With the aim of scaling up comprehensive child development approaches, and building on its Multi-Sectoral Nutrition Strategy for 2015 to 2025, USAID developed technical guidance to assist Missions in the development of multi-sectoral nutrition programs for optimal impact. As a result of this support, USAID Cambodia, for

example, is initiating comprehensive development programs to foster both child well-being and healthy social and emotional development. These programs will address infant and young child feeding practices and hygiene behaviors and increased use of improved sanitation facilities to reduce the prevalence of diarrhea and parasitic infections. Programs will also provide health and nutrition professionals with the knowledge and skills needed to educate parents and caregivers on diet and nutrition, hygiene, sanitation, and positive parenting practices. Further, USAID Rwanda is successfully applying USAID technical guidance to promote the comprehensive development of children, using community and family based interventions to improve access to health and nutrition care and ensure appropriate stimulation and social support.

The U.S. President's Emergency Plan for AIDS Relief (PEPFAR), an interagency effort to combat HIV/AIDS coordinated by the Department of State, promoted the sound development of children living with and affected by HIV/AIDS by continuing to scale up the implementation of family-centered approaches to improve comprehensive child development and well-being. Giving particular focus to building the resilience of HIV-vulnerable children, their families and communities, PEPFAR programs have made strategic investments to strengthen the resilience of orphans and vulnerable children by linking them with family-based care, HIV and health services and social support, reaching and providing care and services to over 5.5 million children in 2015. To meet the diverse and complex needs of children living with and vulnerable to HIV/AIDS, programs typically include a community-based approach including early childhood enrichment activities as well as health and nutrition screening. PEPFAR assistance also includes parenting skills development

as well as educational and support groups for mothers and mothers-to-be.

PEPFAR supports Objective 1 through comprehensive programming working to promote sound development of children living with and affected by HIV/AIDS. In Nigeria, PEPFAR-supported USAID programs trained over 2,100 caregivers in early childhood development and supported over 25,300 children under five years of age with a package of interventions to promote cognitive, physical, and socio-emotional and health development. To advance knowledge and generate data on the effectiveness of socio-economic interventions to achieve outcomes for children and families in the pandemic, PEPFAR is supporting a series of intervention-linked evaluation studies through USAID focused on an integrated intervention package for very young children (ages 0–5) in Zimbabwe, Lesotho and Swaziland. The studies feature early stimulation, parenting and mentoring interventions and their potential impact on early child development and HIV infection in these countries. The results of these programs will provide data to help inform APCA programming in future years.

During the past year, Peace Corps volunteers also continued to support efforts to build strong beginnings for children by working with local communities to strengthen family access to health care and nutrition services, to improve support for caregivers, and to expand the availability of child development activities. Volunteers regularly accompanied community health workers on home visits to counsel new and expectant mothers on the importance of the first 1,000 days of a child's life cycle. Using their deep knowledge of communities, volunteers helped to identify families with undernourished children under five for child feeding, growth monitoring and training in preparation of nutritious foods.



Promote appropriate, protective and permanent family care

OBJECTIVE TWO: PUT FAMILY CARE FIRST

U.S. Government assistance will support and enable families to care for their children; prevent unnecessary family-child separation; and promote appropriate, protective and permanent family care.

Millions of children around the world have lost one or both parents or are living in fragile families or outside of family care, in orphanages or residential institutions or on the streets. Accordingly, the 2009 UN General Assembly-endorsed Guidelines for the Alternative Care of Children call for governments to prevent the unnecessary separation of children from their families by strengthening social services and social protection measures in their countries (Williamson & Greenberg, 2010).

Recognizing the critical role that families play in the development, well-being and safeguarding of children, APCA's second objective focuses on advancing family-based care for children through approaches that enable families to care for their children, prevent unnecessary family-child separation, and promote appropriate, protective and permanent family care. During 2014, U.S. Government agencies continued to support programs that provided families with the conditions, capacities, services and resources needed to ensure and

maintain protective and permanent care for children and prevent the separation of children from their families.

To advance achievement of Objective Two, USAID applied Displaced Children and Orphans Fund (DCOF) resources to support programs for the care and protection of vulnerable children in 14 countries, including all six APCA priority countries (Armenia, Cambodia, Colombia, Moldova, Rwanda and Uganda). Programs assisted children in residential care institutions and street children to return to family care when it was in the best interests of the child, and prevented the unnecessary separation of children from their families. In Cambodia, Rwanda, Burundi and Uganda, USAID used DCOF resources to support the coordinated provision of a package of activities that included economic strengthening, parenting skills development, counseling and other interventions. Targeted approaches helped to facilitate family reintegration or placement for children outside of family care, as well as prevent family separation

for children in high-risk families. These programs enabled families to generate income to meet urgent material needs such as food, clothing, shelter and school expenses; helped link families to appropriate services; and enhanced caretaker knowledge and skills to facilitate appropriate decision-making around the care of children. Careful tracing, case management and support services enabled children to return to family care from residential institutions and the street.

Dramatic progress has been made in Rwanda, where social workers and psychologists have successfully integrated 955 children and young adults⁴ into family and community-based care since 2013. A total of 68 Rwandan social workers and psychologists currently work in 20 institutions to enable children to return to their own families or integrate into other families. In Uganda, USAID DCOF-funded interventions assessed 1,548 children's cases in residential care centers, traced 428 children's families and successfully reunified 40 children.

In 2015, over 300 Cambodian children who were on the street or otherwise outside of family care were placed in families, and family tracing is in progress for over 370 additional children. As a result of APCA advocacy, the Cambodian government has, for the first time, consolidated oversight of residential institutions for children within a single Ministry and committed to the placement of 30 percent of the children in those institutions into family care. In Moldova, USAID's programs for the care and protection of vulnerable children continued, during the past year, to support the development of national policies as well as build the capacities of social welfare personnel at the local level. With DCOF funds, USAID programs for vulnerable children also generated results that helped change the lives of many children. In the first three quarters of 2015, for example, programs enabled 14,669 children across the country to stay with their families; provided 4,097 decision-makers and practitioners with the skills needed to support children and families and prevent unnecessary separation; and returned 152 children to family care from institutions.

Conflicts and natural disasters often separate families and disrupt normal care-giving for children. In response, in 2015 USAID's Office of Foreign Disaster Assistance (USAID/OFDA) supported 36 child protection programs in 16 disaster-affected countries, including Syria, The Central African Republic, Ukraine and Sierra Leone. Humanitarian assistance programs funded by USAID/OFDA ensured that adequate protection measures were in place for children in these countries, including procedures for the reunification of separated and unaccompanied children with their families, and the provision of parenting support programs. Given the key role that schools often play in the lives

of children, USAID/OFDA also provided funding to ensure that in the event of a conflict or a natural disaster, schools were able to provide children with protective and supportive environments that contribute to their social, physical and emotional well-being.

PEPFAR prioritizes family care first by: rapidly scaling up evidence-based models for family strengthening; keeping families and caregivers healthy and alive by linking them to HIV treatment and other medical care; and enabling caregivers to care for their children. Particular focus is given to using interventions designed to move families towards self-sufficiency (i.e., parental skills building, group-based savings and loans). PEPFAR's strategic approach to putting family care first reduces economic vulnerability, promotes positive parenting, and facilitates access to life-saving HIV treatment. Child welfare and protection systems strengthening interventions also help prevent unnecessary family separation by building the capacities of community development officers and a growing cadre of para-social workers to identify and address the needs of vulnerable children and families and obtain resources necessary to carry out these tasks.

Ongoing support through the Department of State's Bureau for Population, Refugees and Migration (PRM) enabled nongovernmental organizations and multilateral agency partners to deliver programs providing livelihood, education, and family reunification services across the globe. PRM programs, which included education and skills-building activities for refugee youth in Burma, non-formal education for Syrian refugees in Lebanon, and an after-school tutoring program for Malian refugee children in Niger, among others, not only strengthened economic capacities of families globally, but provided parents in target countries with the practical

tools they needed to support their children and prevent unnecessary separation.

Peace Corps volunteers in a number of countries also contributed to strengthening family care, working in their assigned communities to provide impoverished families with the skills and knowledge needed to function as a family unit. In one rural village in Liberia, a volunteer established a mentoring program that linked vulnerable children and families with university students who helped build parent and caregiver skills in child care.

Throughout the past year, the Department of State's Bureau of Consular Affairs (CA) worked diligently to establish or maintain intercountry adoption as a viable option for children in need of permanency throughout the world. The Department serves as the U.S. Central Authority for the Hague Convention on the Protection of Children and Cooperation in Respect of Intercountry Adoption (the Convention), as designated by the Intercountry Adoption Act. The Department's Bureau of Consular Affairs, Office of Children's Issues (CA/OCS/CI) carries out the Department's responsibilities as U.S. Central Authority. CA/OCS/CI ensures day-to-day oversight and implementation of the Convention in the United States and works with countries that are considering becoming party to the Convention to promote a smooth transition and continuous adoption processing. The Convention establishes protections to ensure that intercountry adoptions take place in the best interests of the child. The Department interacts regularly with adoption authorities and accredited bodies in foreign countries in the processing of intercountry adoptions, and performs its function as a Central Authority, including promoting the goals of the Hague Convention and encouraging countries to develop practices that are consistent with the Convention.



Protect children from violence, exploitation, abuse and neglect

OBJECTIVE THREE: PROTECT CHILDREN FROM VIOLENCE, EXPLOITATION, ABUSE AND NEGLECT

The U.S. Government will facilitate the efforts of national governments and partners to prevent, respond to and protect children from violence, exploitation, abuse and neglect.

Millions of children around the world are directly exposed to some form of violence each year such as physical, sexual and emotional forms of abuse or neglect, or witness these types of violence. Others are victims of exploitation, including sexual trafficking; forced labor or hazardous work. Still others are conscripted into armed forces or groups. A serious human rights, social and public health issue in many parts of the world, violence and its consequences for children can be devastating. Violence erodes the strong foundation that children need to lead healthy and productive lives and jeopardizes children's ability to enjoy a safe and harmonious childhood. Children who experience or witness violence are at significantly greater risk for health problems, anxiety disorders, poor school performance and violent behavior.

If the underlying causes of violence can be identified and addressed, violence against children can be prevented (Cambodia Violence Against Children Survey, 2013). To this end, during the

past year, U.S. Government Agencies collaborating on APCA supported a wide range of programs with governments and partners around the world aimed at preventing, confronting, and protecting children from violence.

The U.S. Department of Labor (DOL) Bureau of International Labor Affairs' (ILAB) Office of Child Labor, Forced Labor and Human Trafficking (OCFT) awarded approximately \$57.6 million for 17 projects to support efforts to combat exploitative child labor and forced labor in over 15 countries. In line with ILO Convention 182, the Worst Forms of Child Labor Convention, these projects worked directly with children and families to provide educational or financial assistance, and with governments at the national, district and community levels to strengthen the systems, services, policies and compliance processes required to address issues of child labor. Among other important outcomes, OCFT assistance expanded global knowledge

on child labor; strengthened protective laws and improved coordination among government bodies, policy entities and programs related to child labor; and increased the numbers of children in school who no longer work in exploitative child labor. Through ongoing programming, OCFT provided over 30,000 households with services to improve livelihoods and approximately 70,000 children engaged in or at high risk of entering child labor with education or vocational services and increased the capacity of 28 countries to address child labor.

In FY 2014, the Department of State's Office to Monitor and Combat Trafficking in Persons (TIP Office) supported APCA-relevant activities to combat child trafficking in ten countries. One program in Vietnam, for example, has begun to identify and assist child victims of trafficking in two provinces and supported a variety of workshops on children's rights and labor laws, reaching over 1,500 children to date.

In Guatemala, Honduras, Mexico, and Nicaragua, TIP Office grantees provided comprehensive services to child and adolescent victims of trafficking and those at risk of trafficking. In Mexico, the grantee established innovative partnerships with the private sector to create job training opportunities for youth. The TIP Office represented the U.S. in developing and negotiating the first Child Protection Compact (CPC) Partnership between the United States and the Government of Ghana to address child sex trafficking and forced child labor within Ghana. This new program will combine negotiated commitments of four Ghanaian government ministries with substantial targeted U.S. anti-trafficking assistance aimed at building Ghana's capacity to identify child trafficking; implementing a coordinated interagency response to result in comprehensive care and reintegration of child trafficking victims; effectively investigating trafficking allegations to prosecute traffickers; and preventing child trafficking.

The Department of State's Bureau of International Narcotics and Law Enforcement Affairs (INL) continued to support targeted programs to protect children and youth from violence in several ways, in particular by assisting governments to reduce gang membership and activity; combat human trafficking; reform criminal justice systems to account for the specific needs of children; and expand the availability of evidence-based drug demand reduction programs to facilitate substance abuse prevention, early intervention, treatment, and recovery. For example, INL provided ongoing assistance to strengthen Mexican law enforcement efforts to combat violent criminal offenses against children and women that make them vulnerable

to human trafficking. INL programs also helped train members of Mexico's Federal Prosecutor and Cyber Crimes Investigative Units to conduct child trafficking investigations using social networks and undercover investigation techniques.

PEPFAR is the largest supporter of community-based services and formal government services to protect children from violence. For example, with PEPFAR funds, USAID supported hotlines in Tanzania and Zimbabwe that facilitated reporting on child abuse; worked with the Swaziland Department of Social Welfare for improved post-rape care for children; and helped to establish one stop centers in South Africa staffed by police, counselors and clinical professionals. In addition, USAID used PEPFAR funds to train 1,688 new Social Service Extension Workers in Ethiopia who will work across the country to protect vulnerable children and families and connect them with essential services. PEPFAR funding also supported Violence Against Children Surveys (VACS) in Botswana, Nigeria, Rwanda, and Zambia implemented by the Centers for Disease Control and Prevention. VACS is a population-based, national household survey designed to estimate the prevalence of all forms of violence against children (i.e., sexual, physical, and emotional violence) ages 13 to 24. These targeted surveys both shed light on the factors associated with and influencing violence against children in these countries, and assist countries in the development and implementation of multi-sectoral plans to address violence. To complement the VACS, Uganda is currently preparing to conduct a qualitative study to identify risk and resilience factors linked to violence.

The Centers for Disease Control played a leading technical role in both the planning and implementation of VACS in APCA priority countries Rwanda and Uganda, and is planning to initiate VACS work in Moldova and Colombia during 2016. In addition to VACS implementation, the Centers for Disease Control has also been instrumental in the development of targeted, evidence-based country level strategies to address violence in children in these countries.

In Colombia, USAID continued to support systems development and institutional strengthening initiatives for entities such as the National Family Welfare Institute (ICBF) to build country capacity to address the critical issue of child soldiers and facilitate the social and economic reintegration of disengaged ex-combatant youth and child soldiers. USAID also continued to support the provision of physical, psychological, social, and economic assistance to children and adolescent ex-combatants to support their reintegration into society. Increasing numbers of indigenous and Afro-Colombian child soldiers are entering these protection programs; during the past couple of years, Afro-Colombian and other indigenous child soldier groups represented 24 percent of the children that entered the ICBF ex-child soldiers program.

Peace Corps volunteers continued to play important roles in protecting children at the community level. For example, volunteers helped to establish life skills clubs and camps that empowered children and built resilience skills. In Togo, one volunteer implemented a livelihoods project targeting young girls vulnerable to trafficking; the program enabled the girls to care for themselves and remain in school. A volunteer in the

Philippines worked with abused mothers and children in temporary shelters, helping to build knowledge and skills in areas such as bonding and attachment between a caregiver and infant; managing anger in parenting; mitigating safety risks for infants; and encouraging healthy emotional and social development in children.

Through its programming, policy, and diplomatic work, the State Department's Bureau of Population, Refugees, and Migration (PRM) contributed significantly to achievements under APCA Objective Three. With programming of nearly \$3 billion in FY 2015, the United States, through PRM, was the single largest bilateral donor to international humanitarian organizations such as the UN High Commissioner for Refugees (UNHCR), the International Committee of the Red Cross (ICRC), and the UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA). U.S. support to these partners facilitated the delivery of life-saving assistance, including health, nutrition, education, child protection, and psychosocial services and family reunification to refugees and other conflict-affected populations around the globe. PRM funding also enabled the United Nations Children's Fund (UNICEF) and non-governmental organizations to support child protection and education programming as well as related humanitarian assistance. In 2014, PRM worked closely with UNHCR to roll out the organization's Global Framework for the Protection of Children, and continued its work to ensure that all partners have policies in place to prevent and respond to sexual exploitation and abuse. PRM's support to UNHCR helped provide refugee children with greater access to

protection and services, and catalyzed changes to national laws to reduce statelessness and improve nationality options for children. PRM's diplomatic efforts with international organizations and other donors also advanced sexual and reproductive health by increasing access to maternal and child health and voluntary family planning services, saving women and children's lives and ultimately supporting stronger, healthier families and communities. Ongoing PRM funding of programs also facilitated UNICEF's work, including the reunification of families and protection of children from violence, abuse, and exploitation in the Kakuma refugee camp in Kenya, and supported activities to prevent and address traditional practices that are harmful to children, including early and forced marriage and female genital mutilation. PRM programs in Jordan provided cash assistance to reduce family dependency on child labor and allow children to attend school and, in Turkey, PRM funding helped UNICEF establish schools for Syrian refugees.

PRM also supported the work of the International Organization for Migration (IOM) worldwide, which includes child protection activities within the framework of its programs. During FY 2014 and FY 2015, PRM-funded programs continued to facilitate transportation assistance for crisis-affected populations, including unaccompanied and separated children; assessed and identified specific risks of exploitation to which children might be exposed to in camps, transit centers or temporary shelters and crisis-affected communities; helped prevent child recruitment into armed groups; and addressed child trafficking and the worst forms of child labor.

Finally, to advance African youth empowerment and development, a DOL-funded project collaborated with the Ugandan Ministry of Gender, Labor, and Social Development (MGLSD) to jointly launch 32 Integrated Functional Literacy for Youth (I-FLY) pilot programs in four project districts of the country in September 2015. These programs will not only build valuable life skills among youth and strengthen resilience and economic potential among this vulnerable group, but will reinforce and contribute to national efforts to prevent children and young adults from violence and exploitation.



Promote the best interests of the child

OBJECTIVE FOUR: STRENGTHEN CHILD WELFARE AND PROTECTION SYSTEMS

The U.S. Government will support partners to build and strengthen holistic and integrated models to promote the best interests of the child.

Changes to improve conditions for children living in adverse circumstances can only be long-lasting if country laws and policies reform and governments commit ongoing human and financial resources to their full implementation. To this end, U.S. Government agencies gave continued attention, during the past year, to strengthening host country policies, systems and capacities in order to manage, monitor and sustain improvements in child welfare and protection.

USAID-funded programs for vulnerable children supported activities in 10 countries, including all six APCA priority countries, focused primarily on strengthening child welfare and protection systems that link children with essential services, protect children's rights and promote the best interests of the child. During the past year, activities advanced the development and implementation of national plans to reduce the numbers of children separating unnecessarily from their families and

entering residential care facilities. For example, in Uganda, USAID is applying DCOF resources to roll out and operationalize the National Alternative Care Framework by working with government counterparts to establish district level alternative care panels responsible for inspecting residential child care institutions and serving as gatekeepers for new admissions. In Armenia, USAID assistance to vulnerable children is enabling the Ministry of Labor and Social Affairs and the Ministry of Education and Science to develop and implement policies to close residential child care institutions, reunify and place child residents in family care, and support families to care for their children. In Rwanda, USAID DCOF-funded programs are facilitating the development of a national system of care reform, including strengthening the organizational and human capacity of the National Commission for Children as well as building the capacities of government social workers and psychologists to address child welfare

issues across the country. Programs contributed to improved national policies; strengthened inter-ministerial coordination; enhanced social welfare workforce capacities; increased monitoring and inspection of residential care facilities; expanded measures to ensure that children are not removed unnecessarily from their families and that those in need of alternative care are placed appropriately; and, when in the best interests of children, promoted their reunification, placement and reintegration into family care.

Recognizing the importance of school feeding programs within national child welfare systems, USDA/Foreign Agricultural Service/MGD gave targeted attention during the year to further the sustainability of USDA/Foreign Agricultural Service/MGD school-feeding programs. In particular, to ensure ongoing financial commitment to and operational management of school feeding programs after U.S. resources come to an end, MGD



*Ensure children's
needs are met*

programs provided critical capacity building assistance to strengthen the country systems and capacities needed to effectively finance, manage and monitor school feeding programs.

Concentrating on strengthening the protection of children living with and affected by HIV/AIDS, PEPFAR-supported USAID programs continued to work closely with governments and local organizations to build robust child welfare and child protection systems and services as well as to improve country capacity to prevent and respond to child abuse. PEPFAR and USAID further gave attention to building child welfare workforce cadres with the purpose of strengthening families, preventing family separation and facilitating family based permanent care for children. As a result of PEPFAR assistance during the past several years, 17 countries in sub-Saharan Africa now have in place national plans of action for vulnerable children, including those affected by HIV/AIDS.

PRM continued to fund a wide range of UN-implemented programs to strengthen international systems for the protection of children. PRM continued to support the roll out of UNHCR's Global Framework

for the Protection of Children, which helps to strengthen child protection mechanisms in humanitarian emergencies as well as in refugee and conflict settings around the globe; as well as the establishment of UNHCR programs to protect unaccompanied minors, including in Latin America by strengthening systems for asylum and enhancing systems for the protection of displaced persons.



BETH RUBENSTEIN, COLUMBIA UNIVERSITY

Ensure that more children grow up within protective family care, free from deprivation, exploitation, and danger

OBJECTIVE FIVE: PROMOTE EVIDENCE-BASED POLICIES AND PROGRAMS

The U.S. Government will devote resources to building and maintaining a strong evidence base on which future activities to reach and assist the most vulnerable children can be effectively planned and implemented. This evidence base will assist in the cost-effective utilization of program funds as well as the monitoring and evaluation of program effectiveness and long-term impact on children.

U.S. Government agencies gave significant focus to building an evidence base that can be used to not only inform the planning and implementation of programs for vulnerable children but to facilitate effective targeting of programs for optimal impact on children's well-being.

In Cambodia, USAID began work in field testing an approach to enumeration that will generate nationally representative estimates of children outside of family care, with the expectation that this methodology will serve as a model for other countries. In Rwanda, Uganda and Cambodia, USAID DCOF-funded programs in applied research aimed at identifying interventions that most effectively reach children at significant risk of family separation; pilot activities include interventions to strengthen the child care capacities of caregivers. During the past

year, USAID also initiated a package of multi-year applied research activities to better understand how interventions such as household economic strengthening and positive parenting may reduce the risks of children separating from their families. Because the economic conditions of families are fundamentally important not only to preserving the family unit but to enabling separated children to reintegrate successfully, USAID is using DCOF funds to support research to generate improved understanding of how household economic strengthening can help prevent unnecessary family separation and support the reintegration of children into family care. The lack of understanding about how to use economic strengthening to support children's reintegration was identified in a 2013 global review⁵ as a significant knowledge gap. Accordingly, the findings of this research are expected not only to inform future U.S. Government

programming, but programming to strengthen family care across governments and organizations. Finally, USAID-commissioned evaluations of programs in Moldova, Uganda and Cambodia that supported Objective 2 provided vital data on programming to date; this data is now helping to inform the detailed planning of USAID assistance activities in these countries.

In Rwanda, USAID initiated design of an innovative public private partnership to test the effectiveness and scalability of a Family Strengthening Intervention for improved early childhood development. The alliance that is now being forged with the Harvard School of Public Health, the Network of European Foundations, ELMA Philanthropies, and the World Bank will promote shared interests in expanding effective and evidence-based early childhood and youth development programs within Rwanda's social



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protection system. With the goal of informing early childhood and social protection policy and practice, partners will apply rigorous evaluation methods to monitor implementation of a pilot activity to assess home-based models of care for children. Findings from this operational research initiative will influence the countrywide expansion of evidence-based early childhood development services within Rwanda's social protection system, while also contributing important scientific knowledge about preventing violence affecting children and adolescents living in adverse circumstances.

For several decades, the U.S. National Institutes of Health (NIH) have funded a broad range of research which supports APCA priorities and approaches and promotes evidence-based programming. Examples of research activities relevant to the APCA priorities include long-term studies of the impact of early institutionalization and psychosocial deprivation on the health and developmental outcomes of Romanian and Russian children and adolescents. Other research at six sites in five countries in Africa and Asia (which includes Cambodia) is examining the effects of exposure to traumatic life events, for children residing

in either family or institutional settings, on interpersonal relationship outcomes in areas of HIV risk behaviors, reproductive health, and family formation, among other variables. In Uganda, NIH completed a research study evaluating the efficacy and cost-effectiveness of a family-based economic empowerment intervention for children orphaned by AIDS. Data from this study are now being analyzed to assess the relationships between caregiver wellbeing and home quality and child cognitive development. Preliminary analyses affirm that the daily functioning level of HIV+ caregivers is an important predictor of children's cognitive and behavioral development. NIH is also supporting a study building on previous longitudinal research of former child soldiers and other youth exposed to war in Sierra Leone. Long-term effects of war experience on adult and family mental health, parenting, social relationships and family violence are being assessed. Children of these participants are also evaluated in terms of their physical, cognitive and emotional development. This research will identify parental factors, family processes, and societal mechanisms to target in interventions to help war-affected children and families achieve their full potential for healthy and productive lives.

To continue to fill critical gaps in the evidence base on vulnerable children, DOL continued to provide support to the ILO to conduct National Child Labor Surveys, including in APCA priority country Armenia.



Improve child welfare

OBJECTIVE SIX: INTEGRATE THE ACTION PLAN WITHIN U.S. GOVERNMENT DEPARTMENTS AND AGENCIES

The U.S. Government will institutionalize and integrate the components of this plan in its diplomatic, development and humanitarian efforts overseas.

U.S. Government agencies took important steps during the past year aimed at further integrating Action Plan priorities and principles into agency operations.

USAID demonstrated its ongoing commitment to institutionalizing the principles of APCA through the consolidation and strengthening of child safeguarding provisions for Agency personnel as well as through the codification of regulations applicable to USAID-funded implementing partners that advanced APCA Objective Three, to “Protect Children from Violence, Exploitation, Abuse and Neglect.” Specifically, USAID added mandatory requirements on child safeguarding to Agency policy provisions requiring partner organizations working under grants or cooperative agreements to adhere to a number of child safeguarding principles in order to reduce the risk of child abuse, exploitation or neglect within USAID-

funded programs. Among these, partners must prohibit employees from engaging in child abuse, exploitation or neglect; institute procedures requiring personnel to report on allegations; and have in place systems for investigating, managing, and taking appropriate action on any such allegations. USAID’s child safeguarding policy also mandates organizations to consider child safeguarding within project planning and implementation in order to determine potential risks to children associated with USAID-funded activities and operations, and to apply measures to reduce these risks. These new mandatory child safeguarding provisions for grants and contracts complement the USAID Counter Trafficking in Persons (C-TIP) Code of Conduct by expanding the range of actions under the C-TIP Code of Conduct to specifically include abuse, exploitation or neglect of children. Simultaneously, the Agency issued a mandatory policy that prohibits all USAID personnel from engaging in child

abuse, exploitation or neglect. USAID treats such allegations as suspected cases of employee misconduct that must be reported to the USAID Inspector General.

In updating its global education strategy during the past year, USAID incorporated language underscoring the importance of safeguarding children’s well-being and eliminating gender-based discrimination and violence in educational environments. The revised strategy makes specific reference to APCA Objective 3 as one of the U.S. Government’s key strategies promoting the integration of school-related gender based violence interventions into education programs.

USAID/OFDA field-level programming, investments in emergency child protection capacities at the global level, and efforts to strengthen the policy environment, made significant contributions to the achievement of



DAVID ROCHKIND, USAID

Strengthen families

APCA objectives, in line with USAID/ OFDA's humanitarian mandate and commitments. For example, USAID/ OFDA supported 12 global programs designed to advance policies, practices, and research on effective child protection interventions in emergencies. The programs led to: the development of a toolkit for improved monitoring of country level child protection response; regional and country specific workshops to help adapt child protection minimum standards to local contexts; the design of technological innovations to improve child protection programming, monitoring, and reporting; and the establishment of program models for safe healing and learning spaces in emergencies. USAID/OFDA also required humanitarian partners to adopt and operationalize codes of conduct that are consistent with the Inter-Agency standing committee's six core principles for protection from sexual exploitation and abuse.

To underscore its strong commitment to reducing the risk of child abuse or exploitation, Peace Corps also instituted a global Child Protection code of Conduct for both volunteers and employees that advances Peace Corps support of

APCA Objective 3, to "Protect Children from Violence, Exploitation, Abuse and Neglect." The policy, which applies to Peace Corps global operations, not only outlines organizational guidance on appropriate conduct while working or engaging with children, but establishes the lines of accountability, process and pathways for reporting instances of child abuse or exploitation by an employee or volunteer.



Invest in children

➤➤ APCA Priority Countries

While APCA applies to U.S. Government assistance globally, it identifies a targeted starting point for these efforts within at least six priority countries. By the end of 2015, with the collaborative selection of Armenia and Colombia, all six priority countries were identified based on several criteria, including: magnitude and severity of the problems to be addressed; interest by the partner country government in participation, including commitments regarding monitoring and evaluation, as well as transparent reporting; potential to leverage bilateral, multilateral, and foundation investments; potential to leverage U.S. developmental investments; regional diversity among the countries selected, to maximize learning opportunities; and level of economic development, with a focus on low- and middle-income countries.

Activities in APCA priority countries—Armenia, Cambodia, Colombia, Moldova, Rwanda and Uganda—are already underway. U.S. Government agencies have determined, however, that to further strengthen coordination and improve impact of country programs they will, in the months ahead, work to develop a coordinated strategy and process for collaborative country planning for each of these countries.

Annex 4 provides brief summaries of priority country policy context and key results to date on priority country implementation.



MARTIN HAYES, USAID

Ensure child protection

» Interagency Collaboration: A Reflection on U.S. Government Partnership and Progress

Just past the midway point of the five year Action Plan, interagency representatives convened in mid-December to undertake a strategically oriented discussion in order to jointly consider progress to date on the APCA partnership and consider the U.S. Government partnership moving forward. Participants reflected on the effectiveness of APCA interagency work, talked about challenges and opportunities in implementing the Action Plan, and considered how to improve collaboration to better leverage efforts on APCA, particularly in priority countries.

While affirming the interagency's continued commitment to APCA as both a strategy and partnership, Agency representatives uniformly articulated the many continuing challenges to APCA implementation, including budgets guided by different funding streams and related legislative and administrative

requirements, inadequate human and resources bandwidth, and different Agency missions and program mandates. Participants emphasized, however, that despite these constraints and without dedicated funding for APCA, Agencies have effectively applied existing limited resources to advance the achievement of Action Plan priorities. In moving forward, interagency representatives agreed to continue improving cross-governmental coordination and leveraging of efforts on APCA. Agency representatives also agreed on the importance of expanding partnerships beyond the U.S. Government, to include other donors working in the sector as well as the emerging Global Partnership to End Violence Against Children in support of the UN's Post 2015 Sustainable Development Goals (SDGs).

Looking ahead to post-2017, interagency members reinforced the importance of building on APCA as a strategic framework, embedding APCA as an enduring policy within Agencies, and using APCA as a driver to institutionalize interagency collaboration, including beyond priority countries.



USAID/CAMBODIA HARVEST

Build strong children

»» Fiscal Year 2014 Programming Levels

Recognizing that individual agencies have organization-specific systems that attribute funding and track outcomes in different ways, U.S. Government agencies were asked to self-report on activities and results achieved relevant to APCA objectives in the last year. The request for data on APCA programming was disseminated across the agencies that implement APCA. The agencies in Table 3 responded to the data call.

The portfolio of international assistance for children varies dramatically across partners: 100 percent of resources spent by some offices can be attributed in their entirety to the APCA framework, while others spend only a portion of their budget on APCA-related work so can only estimate amounts that support APCA implementation. In some cases, APCA-specific funding levels

cannot be determined or disaggregated. Some offices participate in APCA implementation but do not administer APCA-specific funding. For example, DOS/PRM cannot disaggregate assistance for children from its broad humanitarian assistance activities, NIH funds the most highly meritorious research proposals based on a peer review process, and DOS/CA does not administer U.S. foreign assistance resources or programs.

Based on these responses, U.S. Government contributions addressing APCA objectives totaled an estimated \$743,664,068 in Fiscal Year 2014. Annex 3 summarizes U.S. Government funding in support of APCA objectives.



Promote child well-being

»» Public-Private Collaborators on APCA

APCA agencies and partners work with a wide variety of collaborators beyond the U.S. Government, with the aim of leveraging efforts to optimize program resources and impact. Key collaborators include:

The Children in Adversity Policy Partnership (CAPP): CAPP is a coalition of US-based implementing & advocacy organizations dedicated to accelerating bold and strategic U.S. policy action concerning children in adversity.

The Global Alliance for Children (GAC): GAC is an alliance of foundations, multilateral and bilateral agencies, governments, implementers, universities, corporations and individual experts working to ensure that all children have an equal chance to realize their developmental

potential. Established in response to APCA, GAC includes 11 core members, including USAID and DOL as well as additional country-based partners. GAC also maintains working relationships with civil society and faith-based organizations, corporations, and private donors. Members of the Alliance collaborate to measure, by establishing the evidence base needed to inform the efforts of government leaders, civil society and donors; coordinate, by creating a global platform for cooperation among funders, experts, implementers and government leaders; demonstrate, by designing and implementing integrated solutions that meet APCA's three core objectives in priority countries; and advocate, by engaging in global advocacy and increasing public awareness of the damaging impact adversity has on child development.

Together for Girls (TfG): TfG is a global public-private partnership dedicated to ending violence against children, with a focus on sexual violence against girls. Using the VACS as an entry point, Together for Girls partners provide comprehensive data on the magnitude and consequences of violence that provides an important foundation for action, mobilizing countries to lead a response and inform solutions that are evidence-based and supported by global partners. The TfG partnership, which includes the Centers for Disease Control and Prevention Division of Violence Prevention; PEPFAR, USAID, and the U.S. Department of State's Office of Global Women's Issues, strengthens forward leaning collaboration and alliances in child protection, gender equality, violence prevention and HIV/AIDS prevention.

►► Annex I. Table I: A Global Profile of Children in Adversity

Millions of children throughout the world face adversity—conditions of serious deprivation and danger. Each year in low- and middle-income countries, close to seven million children die before reaching their fifth birthday. More than 25 times that number—nearly 200 million children—survive,

but fail to reach their developmental potential as a result of extreme poverty, violence, exploitation, abuse, and inadequate access to health care, education, and protection. Children in the most dire straits include those without protective family care or living in abusive households, on the streets or

in institutions, trafficked, participating in armed groups, and/or exploited for their labor. Many more live within fragile families and face a multitude of risks posed by extreme poverty, disease, conflict, and disaster.

Indicators ¹	Year	Percent ²	Number	Geographic Coverage	*
Population					
Population children (aged 0–4)	2010	9.3%	644,517,000	Global	1a
Population children (aged 0–17)	2010	31.9%	2,212,511,000	Global	1b
Poverty					
Children living in extreme poverty (less than \$1.25 per day) (aged 0–17)	2010	28.9%	568,700,000	Developing countries	2
Objective 1: Build strong beginnings					
Children who are stunted (aged 0–4)	2009–2013	25.0%	161,129,250	Global	6
Children who are disabled (aged 0–17)	2002–2004	15.5%	342,939,205	Global	8
Children with blood lead levels above 10 µg/dl (aged 0–4) ³	2004	16.0%	79,355,840	Developing countries	9b
Children living with HIV (aged 0–14)	2014	0.14%	2,600,000	Global	12
Objective 2: Put family care first					
Children who have lost one or both parents due to all causes (aged 0–17)	2014	6.3%	140,000,000	Global	18
Children who have lost one or both parents due to AIDS (aged 0–17)	2014	0.6%	13,300,000	Global	19
Children in institutional care (aged 0–17)	2003–2006	0.3%	2,000,000	Global, excluding West and Central Africa and South Asia	14
Children out of school (primary aged) ⁴	2013	9.0%	59,256,395	Global	25
Objective 3: Protect children from violence, exploitation, abuse, and neglect					
Children uprooted due to conflict or natural disaster	2014	1.6%	35,615,136	Global	20
Children who have experienced violent discipline at home (aged 2–14)	2005–2013	80.0%	1,129,164,800	Developing countries	27
Children who have experienced sexual abuse—female (aged 0–17)	1980–2008	18.0%	170,864,100	Global	31a
Children who have experienced sexual abuse—male (aged 0–17)	1980–2008	7.6%	77,288,656	Global	31b
Women aged 20–24 who were married or in union before age 18	2005–2013	27.0%	64,255,680	Global, excluding China	32
Children in hazardous work (aged 5–17)	2012	5.4%	85,344,000	Global	36

* Please see the comprehensive notes for further detail on calculations, sources, indicator definitions, and trends on Table I: A Global Profile of Children in Adversity, available at: <https://www.childreninadversity.gov/about/why/an-urgent-need>

¹ Please visit <http://www.childreninadversity.gov> for additional indicators of children in adversity.

² The percent given represents the percentage of the child population affected within the specific age group, gender, and geographic coverage given for the indicator (with the exception of indicators 1a-1d, for which the percentage given is the percentage of the global or developing country population that is in the 0–4 or 0–17 age group).

³ At lead levels above 10 µg/dl, acute lead toxicity can result in mental retardation, convulsions, coma, and death.

⁴ Household poverty and the cost of education can be significant factors in a parent's decision to place a child in institutional care, exploitive labor situations, or early marriage.

➤➤ Annex 2. Table 2: APCA Objectives

The U.S. Government Action Plan on Children in Adversity, which serves as an overall strategy and framework for international assistance on children in adversity, includes three principal objectives and three supporting objectives. The plan promotes U.S. Government coherence, coordination and accountability for whole-of-government assistance to vulnerable children.

Principal Objectives	Supporting Objectives
<p>Objective 1: Build Strong Beginnings The U.S. Government will help ensure that children under 5 not only survive, but also thrive by supporting comprehensive programs that promote sound development of children through the integration of health, nutrition, and family support.</p>	<p>Objective 4: Strengthen Child Welfare and Protection Systems The U.S. Government will support partners to build and strengthen holistic and integrated models to promote the best interests of the child.</p>
<p>Objective 2: Put Family Care First U.S. Government assistance will support and enable families to care for their children; prevent unnecessary family-child separation; and promote appropriate, protective, and permanent family care.</p>	<p>Objective 5: Promote Evidence-Based Policies and Programs The U.S. Government will devote resources to building and maintaining a strong evidence base on which future activities to reach and assist the most vulnerable children can be effectively planned and implemented. This evidence base will assist in the cost-effective utilization of program funds as well as the monitoring and evaluation of program effectiveness and long-term impact on children.</p>
<p>Objective 3: Protect Children The U.S. Government will facilitate the efforts of national governments and partners to prevent, respond to, and protect children from violence, exploitation, abuse, and neglect.</p>	<p>Objective 6: Integrate the Action Plan within U.S. Government Departments and Agencies The U.S. Government will institutionalize and integrate the components of this Plan as reflected in its diplomatic, development, and humanitarian efforts overseas.</p>

➤ Annex 3. Table 3: FY 2014 Financial Contributions to the U.S. Government Action Plan on Children in Adversity

Department/Agency	Reporting Bureau/Office	Reported FY 2014 Attribution Level
USDA	Foreign Agricultural Service (FAS)/Office of Capacity Building and Development (OCBD)/Food Assistance Division (FAD)/School Feeding and Humanitarian Assistance Branch (SFHAB)	\$65,814,828*
HHS	National Institutes of Health (NIH)	\$15,704,060**
DOL	Bureau of International Labor Affairs (ILAB)/Office of Child Labor, Forced Labor, and Human Trafficking (OCFT)	\$57,615,563***
DOS	International Narcotics and Law Enforcement Affairs (INL)	\$25,564,750
DOS	Office to Monitor and Combat Trafficking in Persons (TIP)	\$1,412,106
DOS	Bureau of International Organization Affairs (IO)/Office of Economic and Development Affairs (EDA)	\$132,000,000****
DOS	Bureau of Population, Refugees and Migration	\$146,125,865*****
DOS	U.S. President's Emergency Plan for AIDS Relief (PEPFAR)	\$247,501,833*****
PEACE CORPS	Office of Global Health and HIV	\$9,043,063*****
USAID	DCHA/DRG/Center for Excellence on Children in Adversity (CECA)	\$19,500,000
USAID	DCHA/Office of U.S. Foreign Disaster Assistance (OFDA)	\$23,382,000

* USDA funding levels represent combined commodity and freight costs to support the McGovern–Dole International Food for Education and Child Nutrition Program.

** The NIH funding level reflects funding of meritorious, peer-reviewed research proposals that address issues of relevance to APCA overall.

*** DOL funding level reflects grant awards for projects to combat child labor and forced labor globally.

**** The Department of State/IO's contribution to UNICEF is not directed for core regular resources. UNICEF activities include, inter-alia, those that support objectives 1–5. These contributions are also critical to UNICEF's ability to adapt its programs to the ever-evolving global challenges facing children and for its response to the increasing number and scale of humanitarian crises. Most of the funded activities complement but some may fall outside of the targeted APCA framework.

***** This total represents targeted funding that supports APCA objectives. It does not include Department of State/PRM's loosely directed contributions to UNHCR, ICRC, UNRWA, and other international organization partners whose programming integrates many of the tenets of the APCA objectives but which cannot be disaggregated from multi-sectoral activities.

***** PEPFAR is an interagency effort comprised of Department of State, Peace Corps, U.S. Agency for International Development, Health and Human Services, and Department of Defense. The Peace Corps estimate excludes any PEPFAR funding for work with children in adversity since that is included within the PEPFAR total. The estimate does include both the cost of volunteers as well as the cost of small grants provided to volunteers for working on projects to address the needs of children in adverse situations.

»» Annex 4: Priority Country Implementation

UGANDA

Policy Context

Uganda's National Development Plan (NDPII) prioritizes human development—encompassing health, education, child protection and social protection—as one of its key outcome areas. To advance the national plan and underscore government commitment to the well-being of children, the Office of the Prime Minister, with support from USAID, convened a national-level State of the Ugandan Child Forum in October 2015. To prepare for this forum, the U.S. Government commissioned a national level study, “The State of the Ugandan Child: An Analytical Overview,” to collect data and evidence from all sectors about the state of the child in Uganda. USAID also supported development of the National Action Plan for Child Well-Being, an effort carried out through the efforts of Civil Society, U.S. Government Agencies, Donors and other international organizations focused on children's issues. The National Action Plan contains priority activities, measurable actions, indicators and targets across the human development sphere. The forum brought together over 740 participants over two days to catalyze country and external commitment and action to address agreed-upon critical needs in education, health, child protection, and child development, particularly female children. Five regional level Forums brought together over 2,200 participants and garnered local input and commitment to the goals as well as country wide endorsement of the action plan.

Key Activities/Results

USAID DCOF-funded implementing partners are working in 12 districts to strengthen government capacities to inspect and monitor residential child care institutions, to prevent unnecessary family separation, to reunify and place children in family care and to strengthen families' capacities to provide adequate care for their children. Programs have facilitated the establishment of two district-level Alternative Care Panels to inspect institutions using government endorsed inspection tools. Last year, panel members inspected 58 institutions and established case files for over 1,500 children to track and prepare them for family placements. USAID DCOF programs also catalyzed the establishment of community savings groups and supported development of a cadre of country trainers to provide psychosocial support and training in positive parenting.

USAID/PEPFAR-funded Orphans and Vulnerable Children (OVC) Regional Programs focus on household economic strengthening and food security, enhancing protection and legal services for vulnerable children, and empowering and strengthening families with the ability to access, and utilize, critical services for women and children to improve health, nutrition education and psychosocial support. These programs also aim to reduce abuse, exploitation and neglect, particularly in Uganda's central, western, eastern and northern regions. Regional programs reached almost 280,000 vulnerable children between October 2014 and March 2015 with comprehensive social and economic protection services. Almost 73,000 OVCs

received food and nutritional support, 35,500 families were assisted with birth registration, almost 6,000 children were reintegrated with their families, and 7,400 children were removed from child labor. The programs use a household economic strengthening approach that layers health and education instruction and has reached over 28,000 households. 53,000 children were supported with access to education and over 71,000 with access to health services.

To date, USAID systems strengthening programs increased staffing of social welfare positions from 41 percent to 57 percent in district and sub-county staffing across 80 of Uganda's 112 districts, achieved through collaboration with district governments to secure ongoing budget support for these positions. Thousands of social service workers, para-social workers, and volunteers responsible for social welfare services at the parish level have been trained. Para-social workers act as child protection advocates in their communities, sharing guidance on alternative discipline techniques, advocating for girls' education and against early marriage, and referring children to the appropriate service. As a result of this assistance, families and children have increased knowledge of their rights, where to get help and how to report child protection concerns. Programs also supported the dissemination of national standards for the care of orphans and other vulnerable children, including the Uganda National Framework for Alternative Care, and provided initial training on supportive supervision. Finally, programs established and/or strengthened community child welfare committees and trained

key district officials, which increased the ability of local government to coordinate social services within its administrative areas. These committees have furthered partnerships between different development sectors, both within local government and between government and civil society, and has increased accountability by all actors to provide a more comprehensive response to child welfare and protection needs. USAID's Office of HIV/AIDS (USAID/OHA), with central PEPFAR funding, complemented the above work by supporting capacity building of child welfare and protection staff and structures at district and sub district level.

With PEPFAR support, USAID commissioned the Centers for Disease Control and Prevention to be the technical lead on implementation of a 2016 Violence Against Children Survey (VACS). The VACS will yield prevalence data on violence against children in households, schools, and the wider community. A government-chaired working group that includes the Centers for Disease Control and Prevention, USAID, UNICEF and other stakeholders will guide this important endeavor. The final report is expected in October 2016.

The Department of State's Bureau of Consular Affairs (CA) continued its efforts to clarify applicable intercountry adoption and guardianship laws, policies, and procedures in Uganda for U.S. prospective adoptive parents and adoption service providers. In January 2016, CA met with Ugandan government officials in Kampala to further discuss the intercountry adoption process and how governments can work together to

increase protections and safeguards so that adoptions take place when in the best interests of the child. CA noted that intercountry adoption, with the appropriate safeguards, can provide safe and loving homes for children in need of permanency. In February 2016, CA and United States Citizenship and Immigration Services (USCIS) met once again with Ugandan officials to discuss the Pre-adoption Immigration Review (PAIR) program as an option to increase protections and safeguards in the intercountry adoption process. The PAIR program requires an early review of the suitability and matching of adoptive parents and children before a final adoption decree is issued. Ugandan officials expressed interest in pursuing discussions about the possibility of implementing a PAIR process.

As part of an initiative on African Youth Empowerment and Development, a DOL-funded project successfully collaborated with the Ministry of Gender, Labor, and Social Development (MGLSD) to jointly launch 32 Integrated Functional Literacy for Youth (I-FLY) pilot programs in four project districts of the country in September 2015.

U.S. Government Collaborating Partners

USAID, DOS, NIH, PEPFAR, Peace Corps, Centers for Disease Control and Prevention, DOL

MOLDOVA Policy Context

Illustrating its steady commitment to advancing national reforms to promote child welfare, Moldova's Strategy on Child and Family Protection for

2014–2020, approved in 2013, aims to build the conditions necessary for raising and educating children in a family environment; prevent and eliminate child abuse, neglect and exploitation and promote non-violent practices in raising and educating children; and harmonize family life and professional responsibilities to ensure appropriate child development. To support programming to address the broad range of issues that affect children in Moldova, the government has also developed strategies on children with disabilities, children in conflict with the law, child trafficking, children and family issues, and children from minority groups.

Moldova has made impressive progress closing institutions and returning children to responsive family care. For example, institutionalization declined in Moldova from 17,000 in 1995 to 3,909 children in 2014. The number of residential care institutions also declined from 270 in the 1990s. Currently, 46.5 percent of Moldova's children live in single parent households, since many parents seek employment in other countries.

Key Activities/Results

There is clear, continued government commitment to making real progress toward the action plan objectives that has remained stable throughout changes in government.

While Moldova's Early Child Development Index score for three to five year olds is reasonably high at 84 percent, only 36 percent of children younger than six months are exclusively breastfed and 11 percent of children

in the poorest quintile are stunted. APCA partners have therefore engaged in a “strong beginnings” intervention that includes a package of simple child development messages and interactive activities for household caregivers. The package emphasizes the important role parents and other family members play in enhancing positive development outcomes and offers culturally relevant ways of ensuring responsive care and stimulation during a child’s first 1,000 days of life. The aim is to make progress on age/stage-related developmental milestones and on indicators of physical growth, including stunting.

USAID DCOF-funded activities in Moldova aim to strengthen family care for 100,000 children who lack adequate family care, prevent 4,000 children from unnecessary family separation, and enable 3,000 children outside family care to have such care. USAID is also supporting Centers for Disease Control and Prevention implementation of a VACS, which will provide much needed evidence to address APCA Objective Three.

The U.S. Special Advisor for Children’s Issues (Special Advisor) met with Moldovan government officials in December 2015, in Chisinau, to press for continued progress and cooperation amongst all parties to advance APCA in Moldova. In addition, the Special Advisor met with Moldova’s central adoption authority to encourage coordination with Moldova’s judiciary to prevent and address unnecessary delays that are contrary to the best interests of children in the processing of intercountry adoptions.

UNICEF has expressed a strong commitment to leading an effort to address violence against children and aims to foster a plan of action with the National Council of Child Rights.

U.S. Government Collaborating Partners

USAID, Centers for Disease Control and Prevention, Peace Corps, DOS

RWANDA Policy Context

Recognizing the need for coordination and consistency in interventions for all children, including orphans and vulnerable children (OVC), in August 2011, the Government of Rwanda (GOR), through the Ministry of Gender and Family Promotion (MIGEPROF), approved the Integrated Child Rights Policy (ICRP), a comprehensive national document detailing Rwanda’s vision and commitment to all children. The vision of the ICRP is to create an environment in which a child’s development, survival, protection, welfare and participation are ensured through a well-coordinated and multi-sectoral approach, their dignity and right to reach their full potential are guaranteed, and their responsibilities are fulfilled. The GOR is actively transforming Rwanda’s current alternative care model into one that prioritizes family-based care. The new system provides assistance to families at-risk of separation from their children and encourages communities to support through adoption or fostering—as opposed to institutional care, children living outside of families. In 2012, the GOR issued a Cabinet Brief, a Strategy for National Child Care Reform, with the goals of transforming the child care and

protection system to one that is family-based and that encourages all Rwandans to take responsibility for vulnerable children.

There is also political will to reduce poverty and violence affecting children and promote early child development. The country’s social protection program, Vision 2020 Umurenge Programme (VUP), is robust and is benefitting from efforts to make social protection child-friendly.

Key Activities/Results

PEPFAR-funded USAID assistance reached 79,579 OVC with a number of services, including education and vocational training, health care, psychosocial support, shelter and care, and protection. PEPFAR/USAID supports a family-centered and case management approach to strengthen families and improve the well-being of children. Specific activities include savings groups, food security, child protection, parenting skills, community-based health insurance groups, water and sanitation (WASH), and early child development activities. In addition, programs invest in civil society organizational capacity building for sustainability. Communities are involved in all aspects of OVC programming, including identification of children, selection of volunteers and service delivery. The Centers for Disease Control and Prevention, with funding from PEPFAR, is also working with the Government of Rwanda on its first VACS

USAID programs for vulnerable children, with DCOF funds, have successfully integrated a total of 955 children and young adults into family and community

based care. Programs are also currently tracing an additional 1,222 children, unilaterally sent home by residential institutions, in order to assess their circumstances and provide appropriate assistance. USAID further supports targeted programming to build the capacity of the National Commission for Children as well as operational research to identify the most effective case management approach to reintegrating institutionalized children into family care.

DOL continued working to reduce the incidence of exploitive child labor in the production of tea in eleven of Rwanda's rural districts. In Fiscal Year 2014, DOL programs enrolled 671 children engaged in (or at-risk of entering) exploitative child labor in schools and similar education services; trained 200 teachers on child labor and its negative impacts; and supported 419 economically-fragile households to create Village Savings and Loans Associations to gain access to much-needed credit. DOL programs also helped establish a Child Labor Monitoring System and improved enforcement of labor laws relevant to child labor.

U.S. Government Collaborating Partners

USAID, Centers for Disease Control and Prevention, DOL, PEPFAR, Peace Corps, DOS

CAMBODIA Policy Context

Oversight of residential care for children in Cambodia has been problematic because residential care institutions (RCIs) were registered with any one of

several ministries, if they registered at all. In December 2015, a sub-decree on the Management of Residential Care Institutions was launched, consolidating the government's oversight authority with the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY). Now all RCIs are required to register with MoSVY and to comply with the government's Minimum Standards on Alternative Care. MoSVY plans to inspect each RCI every six months, and it has committed to a goal of reintegrating 30 percent of children from residential care institutions to families and communities in five provinces by the end of 2018.

In January 2016, the Cambodia National Council for Children (CNCC) launched a national plan to promote child development from 2016–2018. The plan promotes child protection and welfare in line with principles articulated in the United Nations Convention on the Rights of the Child (CRC), which was ratified by the Royal Government of Cambodia in 1992. One of CNCC's main functions is to monitor Cambodia's implementation of the CRC. The Royal Government of Cambodia is also expected to launch its Action Plan on Violence against Children in the spring of 2016. This coordinated national response results from the findings of the Violence Against Children Survey (VACS) administered by the U.S. Centers for Disease Control and Prevention, the Government, the United Nations Children's Emergency Fund (UNICEF) and partners in 2013 (APCA Objective 3). Results were released in 2014, marking the first time Cambodia had national statistics on sexual, physical, and emotional violence against children.

The Royal Government of Cambodia does not process intercountry adoptions with other countries at this time. The Department of State continues its efforts to work with the Government of Cambodia in order to promote a smooth transition to processing intercountry adoptions under the Convention when intercountry adoptions resume in Cambodia.

Key Activities/Results

As a result of USAID DCOF program support, vulnerable children and their families in five target provinces have access to specialized, high quality child protection and social welfare services. Specifically, USAID DCOF funding for preventive child protection services benefited a total of 5,618 children (including 2,488 girls, equivalent to 44 per cent), 2,225 youth and 3,379 families during the first three quarters of 2015. As a result, separated children in five target provinces are able to access mechanisms for family reunification, community reintegration and alternatives to institutionalization, as well as receive quality care. Programs supported a total of 860 children (including 319 girls) outside of family care with case management services; this number includes 305 children successfully placed in family based-care.

The U.S. government is also working to improve children's development outcomes in Cambodia by improving the diets and feeding practices of children within the first 1,000 days of their lives and by reducing the prevalence of diarrhea and parasitic infections among this target group. U.S. government programs enable health and nutrition professionals

to educate caregivers about hygiene, sanitation, and positive parenting practices to foster healthy social and emotional development and promote secure attachment to a primary caregiver. The U.S. government is also working with the private sector to develop and market sanitation, hygiene, and household water-treatment products such as water filters and latrines. Through these efforts, the U.S. government is reaching approximately 30,000 Cambodian mothers and children living in households below the poverty line. These interventions are contributing to reductions in undernutrition and micronutrient deficiency among mothers and children under five and improvement in children's growth and developmental outcomes.

In March 2015, staff from the Department of State's Bureau of Consular Affairs, Office of Children's Issues (CA/OCI), traveled to Cambodia and met with the Ministry of Social Affairs, Veterans and Youth (MOSVY) Inter-country Adoption Administration (ICAA); the Ministry of Justice (MOJ); a group of adoption receiving country representatives; and UNICEF to discuss Cambodia's desire to memorialize understandings regarding how State Parties seek to process Convention cases. The Department raised the importance of maintaining intercountry adoption as a small but important part of the overall action plan for seeking permanency for Cambodia's children. During the meetings, the Cambodian Director of the Inter-country Adoption Administration shared Cambodia's accomplishments in enacting laws and regulations related to intercountry adoption and requested the

Department's review of these regulations and proposed procedures. The ICAA noted that UNICEF has worked with MOSVY's Child Welfare Department (CWD) to develop a child protection case management system and that the pilot of this system is now operating in five provinces.

The Department of State's Special Advisor for Children's Issues led a discussion with multiple other receiving countries on intercountry adoptions and Cambodia during the Fourth Special Commission of the Hague Convention on Protection of Children and Cooperation in respect of Intercountry Adoption (Special Commission), held June 8–12, 2015 in The Hague. The goal was to discuss how countries might collectively promote an intercountry adoption system that successfully protects the best interests of the child as Cambodia looks to begin processing Convention cases for the first time. At the meeting, several countries expressed interest in joining the United States in sending a letter to MOSVY to seek clarification on questions and areas of mutual interest regarding Cambodia's law, regulations and procedures.

The Special Advisor for Children's Issues met again with Cambodian adoption officials in Phnom Penh from October 7–11, 2015 and hand-delivered to MOSVY a joint letter endorsed by the Central Authorities of Belgium, France, Luxembourg, the Netherlands, the United Kingdom, and the United States, requesting clarification of Cambodia's envisioned Convention adoption process. The Government of Cambodia's response to the issues raised in the letter is necessary for the United States to fully

understand several key issues, including the role that Cambodia seeks to take with regard to the supervision and monitoring of ASPs authorized by the Cambodian government.

DOL continued to fund a 4-year, \$10 million program, Cambodians EXCEL: Eliminating eXploitative Child Labor through Education and Livelihoods, which aims to combat child labor in agriculture, fishing, and domestic service. Targeting 28,000 child laborers and at-risk children with education services, and 14,000 households with livelihood services, DOL interventions address a complex set of factors causing child labor, including poverty, limited access to education, cultural acceptance of child labor, debt, migration, and lack of regulation in the informal sector. The program is scheduled to end in 2016.

U.S. Government Collaborating Partners

USAID, DOS, Centers for Disease Control and Prevention, DOL

ARMENIA Policy Context

USAID named Armenia as a priority country in late 2015, and is now working with the Government of Armenia (GOAM) to eliminate the establishment of new residential institutions, eliminate the admission of new children to residential care institutions targeted for transformation or closure, and eliminate the transfer of deinstitutionalized children to other residential care facilities unless it is a last resort. The Government has committed to take required policy actions to ensure the newly established and/or expanded

alternative community-based services are fully funded from its national budget. As a result, over the next several years, USAID's support will enable the Government of Armenia to incorporate alternative family- and community-based services into annual budget plans, to develop monitoring tools to oversee the process of transition for each target institution, and to establish systems of quality control to monitor child care services.

Armenia is a Tier 1 country according to the Department of State's 2015 Trafficking in Persons Report. While this is the highest ranking, Armenia continues to be a source and, to a lesser extent, destination country for men, women and children subjected to sex and labor trafficking. The sex and labor trafficking of Armenian women and children within the country is an increasing problem. Children staying in child care institutions remain highly vulnerable to trafficking.

Key Activities/Results

USAID DCOF-funded programs are assisting the Government of Armenia to reform its national child care system by strengthening community-based family support services, establishing a national system for alternative family-based care, and supporting the establishment of a legal and regulatory framework to support child-care reform. Activities have to date enabled the Ministry of Labor and Social Affairs to revise its national alternative childcare framework; contributed to the development of a legal framework to improve adoption practices and foster care; supported the Ministry of Education and Science

to develop normative legislation on inclusive education in order to prevent the unnecessary institutionalization of children with disabilities and enable children to attend mainstream schools; and assessed children in targeted residential care facilities to begin preparations with families for child reunification and reintegration.

During FY 14, DOL continued to provide support to the International Labor Organization to conduct a National Child Labor Survey. The survey will increase the knowledge base around child labor by collecting new data, analyzing existing data, and building capacity to conduct research in this area. With preparatory work initiated this past year, planning is underway to conduct the survey in the year ahead.

U.S. Government Collaborating Partners
DOD, DOJ, DOS/INL, DOS/PAS and Peace Corps

COLOMBIA Policy Context

The Government of Colombia (GOC) has developed a multisectoral Early Childhood Development (ECD) strategy and implementation plan. In 2010, the GOC introduced the comprehensive ECD strategy, "From Zero to Forever." The national strategy, endorsed by all relevant sectors, seeks to ensure that every child in Colombia, particularly the most vulnerable, is guaranteed the constitutional right to free healthcare and education in the early childhood years. From Zero to Forever includes a set of national and district-level actions

to promote inter-sectoral work to promote comprehensive early childhood interventions. The strategy focuses on comprehensive child development; promotes inter-governmental collaboration through a joint commission that brings together the Ministries of Culture, Social Prosperity, Education, and Health as well as the National Institute of the Family; and emphasizes approaches that address territorial and cultural differences.

Key Activities

A comprehensive roadmap covering six sectors of assistance is in place. The roadmap proposes priority actions to support the healthy development of children. To enhance coordination of efforts, the roadmap also proposes to integrate all data from different government agencies into a single database, into which 1.5 million children will be registered. The program has already conducted numerous studies to assess the cost effectiveness of existing interventions.

APCA interagency partners will conduct a joint visit during the first half of 2016 to complete planning for APCA implementation in this newly designated priority country.

U.S. Government Collaborating Partners
Centers for Disease Control and Prevention, USAID, NIH, DOL, DOS

U.S. Agency for International Development

1300 Pennsylvania Avenue, NW

Washington, DC 20523

Tel: (202) 712-0000

Fax: (202) 216-3524

www.usaid.gov