



MOBILE TEAMS
DELIVERING CHILD PROTECTION
AND EDUCATION IN EMERGENCIES:
A CASE STUDY FROM THE NEPAL
2015 EARTHQUAKE RESPONSE

November 2016

This publication is also available online at: www.plan-international.org

First published 2016 – Text and photos Plan International 2016

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Recommended citation: Plan International (2016) Mobile Teams Delivering Child Protection and Education in Emergencies: A Case study from the Nepal 2015 Earthquake Response. Woking, United Kingdom: Plan International.

EMERGENCY:
EARTHQUAKE RESPONSE

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“Mobile teams of trained youth volunteers provided information and basic assistance to affected children and communities in the most remote areas in the days and weeks after the earthquake”

SUMMARY

This case study describes how Mobile Teams deployed by Plan International after the 2015 Nepal earthquake provided critical information and emergency child protection and education services to young children and adolescent girls and boys in the most remote mountainous areas.

In the aftermath of the 2015 Nepal earthquake, Plan International responded to the urgent needs of children in the form of emergency education, early childhood care and development (ECCD), child protection and psychosocial support. To reach the most remote mountain villages, isolated from humanitarian services due to landslides or distance, Plan International deployed Mobile Teams of community volunteers to provide children¹, adolescents² and their families with important information and multi-sectoral support to recover from the earthquake. A total of 59 teams of four community volunteers were established. These mobile teams reached a total of 18,123 girls and 17,342 boys in the districts of Dolakha, Sindhupalchowk, Sindhuli and Makwanpur during the first 6 months of the response, from May to October 2015.

This intervention was fully implemented by the local youth and through engagement with the local community. Youth volunteers were selected and trained to work in their own community and local, village administration structures were involved in the planning of the mobile services. As their experience grew, the youth volunteers were important sources of information for the communities in these remote areas.

¹ PLAN INTERNATIONAL DEFINES A CHILD AS A PERSON BELOW THE AGE OF 18 YEARS.

² THE UNITED NATIONS DEFINITION OF AN ADOLESCENT IS A PERSON BETWEEN THE AGE OF 10-19 YEARS OLD. YOUTH ARE DEFINED AS 15-24 YEARS OLD. THE AGE RANGE FOR ADOLESCENTS THAT PLAN INTERNATIONAL APPLIED IN NEPAL DURING THE RESPONSE WAS 12-18 YEARS, AND THE AGE RANGE FOR YOUTH WAS 15-25 YEARS OLD. THE ACTUAL AGE GROUP OF TARGETED ADOLESCENTS VARIED DEPENDING ON THE INTERVENTION.

The teams successfully identified and referred the most vulnerable children and adolescents to appropriate services. They directly provided basic ECCD, recreational, child protection³ and psychosocial activities⁴ with children and raised awareness on themes such as safety during aftershocks, child protection, education, health and hygiene. Specific sessions were held with adolescent girls and boys, to meet their specific protection needs. For example, married or pregnant girls were provided with health information and protection support. Activities with children were paired with support to parents to reinforce positive care practices in the aftermath of the disaster. Key learnings identified by Plan International Nepal included the importance of local recruitment of mobile team members, the critical importance of intensive capacity building and day-to-day support to the Mobile Teams, and the importance of establishing linkages to other child protection in emergencies services such as case management for effective referral.

BACKGROUND

A powerful earthquake (7.8 on the Richter scale) struck Nepal on 25th April 2015, followed by hundreds of aftershocks, including a second major earthquake measuring 7.3 in magnitude on 12th May 2015, killing almost 9,000 people and injuring more than 22,000 people. Infrastructure and housing, including heritage sites, schools and health centers, were damaged and over 30,000 classrooms were destroyed. The earthquake affected over three million children, 1.5 million children were left homeless and more than 1 million children were unable to return to school.

After the earthquake people living in the most remote mountainous areas were among the most vulnerable. As most humanitarian aid was organised at central levels, many people in remote areas had no access to basic humanitarian services including food, health, shelter, water and sanitation, or emergency protection

services. Some villages were completely cut off from roads, communication and other infrastructure after the earthquake. The emergency compounded several pre-existing barriers to access to information, including language, low literacy levels and lack of access to technology, especially among women and girls, and caste-based discrimination and exclusion. Information commonly sought after included information about distributions (date and location), eligibility of services, support from government and humanitarian agencies, and who to contact for support. Social groups that typically had less access to information and assistance included young girls and boys, adolescent girls, people with disabilities, women and 'lower caste' groups, such as the Dalit (about 13% of the population of Nepal belong to Dalit caste groups who as a result of the lowest social status face extreme discrimination and lack of access to services).

³ PLAN INTERNATIONAL'S CHILD PROTECTION IN EMERGENCIES WORK AIMS TO PREVENT AND RESPOND TO VIOLENCE, ABUSE, NEGLECT AND EXPLOITATION OF GIRLS AND BOYS IN DISASTERS. FOR EXAMPLE, THROUGH SUPPORTING COMMUNITIES TO DETECT CHILDREN AT RISK OF TRAFFICKING, AND BY ENGAGING CHILDREN AND YOUNG PEOPLE IN AWARENESS RAISING ON PROTECTION RISKS AND SUPPORTING THEIR INITIATIVES TO MAKE COMMUNITIES SAFER.

⁴ PLAN INTERNATIONAL'S PSYCHOSOCIAL WORK AIMS TO STRENGTHEN GIRLS' AND BOYS' SKILLS TO COPE WITH DAILY CHALLENGES AFTER A DISASTER, THROUGH A VARIETY OF CHILD-CENTERED CULTURAL, RECREATIONAL, INFORMATION AND GROUP ACTIVITIES.

The needs of boys and girls after the earthquake

The impact of the earthquake on children was severe. Children and their families experienced enduring stress as a result of their immense loss of their homes and belongings, livelihoods and loved ones. Children were separated from their caregivers as a result of death, injury or because they were sent off to live with extended family or seek work elsewhere. The resultant economic vulnerability of some of the families increased their risk to the pre-existing concerns of child trafficking, often resulting child labour and exploitation. The majority of schools were damaged or totally destroyed, leaving school-aged children without their daily routines or important information that they would normally receive in school on how to stay safe. In the more remote, mountainous areas access to basic information and services was restrained as the roads and communication networks in some areas remained disconnected for days or sometimes weeks.

Adolescent girls were among the most vulnerable after the earthquake, with much lower education levels than boys (only 66% of girls enrolled secondary school against 74.2% of boys) and higher risks to exploitation and abuse. Before the earthquake, Nepal was one of the highest ranking countries in early and forced child marriage. The economic impact of the earthquake made adolescent girls in rural areas even more vulnerable as families married their girls off to ease their financial burden.

Plan International has been operating in Nepal since 1978 and has strong relationships with local partners and communities. This long-term presence in the communities and knowledge of cultural context enabled Plan International and partners to respond to the most urgent needs of children and their families in its own programming areas and in new, remote mountainous areas.

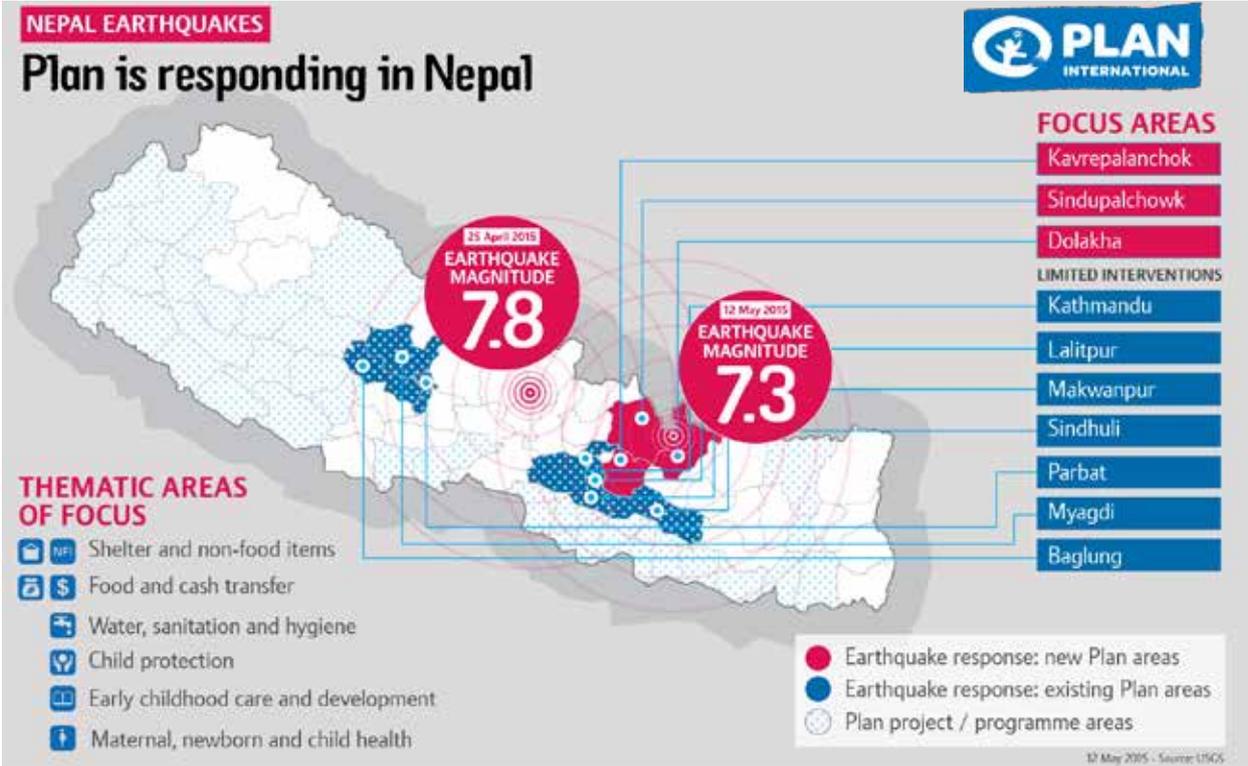


Figure 1: Visual as displayed to communities in the first six months of the response

PLAN INTERNATIONAL'S ACTION

Mobile Teams as a strategy to provide multi-sectoral support after the earthquake

The Mobile Teams was a new concept that was developed in the first two weeks of the earthquake response to address the challenge of reaching children and families in the most isolated villages with information and basic support after the earthquake. The goal of the Mobile Teams was to provide information about humanitarian assistance and basic child protection and education support to the most marginalized children, adolescent girls and boys and their families in the remote mountainous areas after the earthquake.

Key activities included:

- u Provision of information to children and families related to safety and available humanitarian services;
- u Psychological first aid: listening to people's concerns and linking vulnerable families to available services such as water, sanitation, health, shelter, food, livelihoods and education;
- u Identification of vulnerable or at-risk girls and boys such as separated children and children at risk of trafficking, and referral to appropriate social and protection services through the community leadership;
- u Community awareness raising on key child protection issues to prevent and respond to protection issues such as early marriage and trafficking;
- u Recreational, psychosocial and life skills sessions for children and adolescent girls ,and boys (6-18 years);
- u Play-based early stimulation and learning for girls and boys aged 0-5 years;
- u Parenting sessions⁵ for parents of vulnerable children to provide them with support to care for, support and protect their children.

⁵ PARENTING SESSIONS INCLUDED CHILD DEVELOPMENT, CHILD PROTECTION, HOW TO USE PLAY AND HOUSEHOLD OBJECTIVES TO PROMOTE CHILDREN'S PSYCHOSOCIAL WELL-BEING AND SUPPORT THEIR EARLY LEARNING, AND KEY MESSAGES AROUND HEALTH AND NUTRITION FOR CHILDREN AND FAMILIES.

Composition of the Mobile Teams

In total 59 mobile teams were established. Each Mobile Team consisted of four local community members, mostly two young men and two young women between 18 and 24 years old from the same community. The youth members were identified locally to ensure they knew the community, understood the situation and challenges, and were able to provide regular support. Most of the Mobile Team members chose to offer their time and support as part of their own coping with the situation; supporting others helped them overcome their own experiences after the earthquake.

Each team covered one locality, called Village Development Committee (VDC) which consisted of nine wards (or: sub-areas) which in the mountainous areas were often far apart from each other. The teams were provided with a personal facilitator kit bag with recreational and communication materials, and a first aid kit. While they worked on a voluntary basis, they received a small incentive to cover the costs for transportation and meals.

The teams were supervised by the VDC facilitator, a local community member hired by Plan International's partner organisation. The VDC facilitator was in charge of supervising Plan International's activities including Child-friendly Spaces (CFS), community-based child protection

and Help Desks at community level and to ensure all interventions were connected to the Mobile Teams. The VDC facilitators were trained by Plan International to supervise all ongoing response activities including supporting the Mobile Teams. They met with the Mobile Team members on a weekly basis to discuss successes, challenges and solutions and to facilitate referrals of at-risk children. Children in need of case management services were referred to available government or non-governmental services, and where these did not exist, supported directly by Plan International, for example through cash assistance or financial support for medical referrals. On a bi-weekly basis the VDC facilitator met with program staff from Plan International and the local partner organization to report on the Mobile Team's activities, identify priority issues in the community and to communicate the support needs of the mobile teams. Based on this, Plan International's technical team developed follow-up trainings and coaching sessions for the Mobile teams, and supported the development of key messages and activities for children and adolescents in the communities. For example, intensive messaging to identify and prevent trafficking was conducted when this became a key concern.

Outreach to the most vulnerable girls and boys

The main focus of the Mobile Teams were the most marginalized children. As such, adolescent girls and children 0-5 years were specific target groups because of their vulnerability after the earthquake. Many of the adolescent girls dropped out of school and were married off as a survival strategy for families in economic despair. Married girls could not leave their homes, due to household responsibilities and other restrictions, and were thus hard to be reached by the Mobile Team activities. The Mobile Teams therefore conducted home-to-home visits and worked often with small groups of adolescent girls. Special efforts were also made to reach children who would not normally attend community activities, such as children with disabilities, married adolescent girls and young mothers, and children in vulnerable households at risk of trafficking and child labour. During the monsoon season, from June until September, the Mobile Teams were critical in providing information and services to children who would otherwise not be reached.

Community engagement

Plan International puts children and communities at the centre of its humanitarian response. As a community development organization, Plan International believes that engaging local communities in delivering assistance leads to more relevant, appropriate and effective results. In Nepal, many affected youth, men and women between 18 and 24 years old, were highly motivated to contribute to relief and recovery efforts in their communities. In Plan International's response, many youths volunteered as community facilitators in their local communities. Involving youth in the Mobile Teams did not only lead to more effective reach of marginalised children, but also contributed to internal sources of information and support in the community, and increased community access humanitarian services.

Curriculum

The ECCD, life skills and child protection activities were based on Plan International's prior experience in Nepal and in other international humanitarian responses. For example, the ECCD and parenting sessions were based on the Nepali national ECCD and parenting curriculum. It was adapted to include key aspects related to emergencies with a stronger emphasis on psychosocial support and other areas more relevant to acute emergencies.

Running of Activities

When the Mobile team arrived in a village, they split up in pairs or as individual Mobile Team members to simultaneously lead activities with children 0-5 years and parents, children 6-12 years and adolescent girls and boys of 13+ years old. Activities included local songs and dances, drawing, reading, writing, arts, drama exercises and discussions about topics relevant to the participants. Key messages on how to stay safe, health and hygiene were integrated into the activities. Sessions lasted 3 to 4 hours each day, taking into account long walking distances. Sometimes Mobile Team members slept in the villages so they could continue activities for a few days. The next day they moved to the next village to run their activities. This meant that children and families did not receive services every day, but at least on a weekly basis at scheduled times. The mobile services were in most locations providing more support than what was normally available in the community.

Adolescent girls

To meet the specific needs of adolescent girls, who were often not in school, but married or restricted to their house, and sometimes also pregnant, specific activities were designed. For adolescent girls, Plan International designed an existing curriculum of recreational, psychosocial and skill building activities. Existing life skill methodologies developed in Nepal were adapted to the emergency settings, highlighting relevant topics in life after the earthquake such as health and hygiene, sexual and reproductive health rights, and protection risks such as early marriage and protection referral services. Weekly sessions were conducted by trained youth members of the Mobile Teams, who at the same time functioned as peer mentors for the girls. The trusting relationship they built with the girls led to increased reporting of intended child marriages, which would then be discussed with parents or mediated with community leaders with support of Plan International's local partner organization and the local child protection committee.

Training and supervision

Plan International provided a basic 3-day training for both the VDC supervisor and the Mobile Team members. Training topics included Plan International's child protection policy, key messages that different sectors developed after the earthquake, communicating with children, the basic principles of psychological first aid, child development, the basics of health/nutrition and how to work with and facilitate parenting groups and sessions. Plan International provided the facilitators with tools to work with different groups of children.

Initially, the Mobile Teams did not have a role division and team members carried out activities together. However, because the teams covered a wide variety of thematic activities that required specific technical training, it was soon decided to assign different roles to each team member, who would receive specific training for his/her role. For example: working with young children and their parents (0-5 years old) in early childhood care and development; recreational activities and psychosocial support for primary school aged children; life skills and sexual and reproductive health for adolescent girls and boys; information sessions on Health and Hygiene, etc. Each individual team members received specialised training sessions from Plan International's technical advisors on child protection and psychosocial support, health and hygiene, life skills and Adolescent Sexual and Reproductive Health, ECCD and parenting sessions.

Approximately every two months the teams received a follow-up training, directly from Plan International. The first training was kept very simple and just explained the basic concepts of their roles and responsibilities. The second follow-up training was very important. During the second training, the Mobile Team members were more experienced, understood the issues and challenges and came up with more ideas and input during the training.

Linkages with other humanitarian actors

At the start of the intervention the team members supported a community service mapping exercise led by the VDC facilitator, to list all available humanitarian services and their eligibility criteria. The Mobile teams were in regular contact and collaborated closely with schools, local Government offices and other humanitarian actors.

This Mobile Teams were closely linked to Plan International’s child protection and education actors and Plan International’s child protection interventions such as community Help Desks, CFS and Temporary Learning Spaces (TLS). In each VDC a help desk was installed to provide communities with information about humanitarian services and how to access them. The help desks functioned also as an accountability mechanism through which Plan International actively collected community feedback about the services provided. The Mobile Teams contributed to feedback collection and helped the help desk staff to reach out to populations in far-flung areas.

The Mobile Teams referred families in need of basic services directly to the Government, community and NGO services, or to the HIS. As the Mobile Teams were from the communities and visited all areas (wards) on a weekly basis, they played a crucial role in helping Plan International and partners to target the most vulnerable families for Plan International’s emergency interventions in shelter, water and sanitation, education and livelihoods.



When the Mobile Teams identified a child protection concern, they referred the case to the VDC facilitator, who was responsible for follow-up: a home visit to the family, assessment and documentation of the needs of the child and the family. For cases that were not eligible for Government’s protection services, Plan International provided direct (financial) support, for example by covering transportation costs for trafficked children, covering psychological or medical costs, or by supporting family reintegration of trafficked children who were intercepted at anti- trafficking booths.

Positive impact

Reaching the unreached

According to self-evaluations by the Plan International team, the most positive impact of the intervention was to reach the unreached; girls and boys who after the earthquake, didn't have access to education, ECCD, psychosocial support and child protection, received support. Special attention was paid to community members who traditionally experienced specific barriers in accessing community services, such as the Dalit and other 'lower caste' groups as well as women and families who struggled to leave work to seek support. The Mobile Team's ability to reach out to these specific groups and other marginalised populations in remote areas helped them to access to information and obtain services provided by the government and non-Governmental agencies.

Holistic humanitarian assistance

The integrated, multi-sector approach ensured that vulnerable children and families received support to all their needs, no matter what 'sector'. The Mobile Teams also formed a good way to provide services in areas where establishing physical spaces to gather children and organise activities, were not feasible due to distance and unavailability of resources. The provision of critical information as a first response was seen as very relevant and effective, as many families were able to link to humanitarian services. Active outreach to more marginalised children led to effective identification of child protection cases and referral.

Community and youth engagement

Plan International's engagement with local youth and village leadership structures helped to make the Mobile Team services culturally appropriate, relevant and most importantly, trusted by the community. The close cooperation between the youth and the children and caregivers in the community, made it possible to more easily detect and confidentially report child protection concerns such as trafficking, early marriage and child abuse. Mobile Team members played an active role in community awareness raising on this issue and mediating between families and local leaders when a girl was prepared to get married at a too early age⁶.

Tacking rooted child protection concerns

In addition to recreational, psychosocial and awareness activities for children and adolescents, the Mobile Teams parenting sessions for parents and caregivers. Priority child protection issues after the earthquake were identified and discussed with parents. To be able to address more sensitive issues, such as child marriage or child labour and trafficking, the parent circles started off with first several basic information sessions to create trust between the facilitator and parents, after which the more sensitive topics were introduced. During a project evaluation children expressed that they felt a difference in parent's behaviour as a result of the parenting sessions. They reported that their parents were more concerned about school attendance and more aware of how to respond to their children's concerns.

⁶ LEARN MORE ABOUT THE MOBILE TEAMS? WATCH THE VIDEO [No MOUNTAIN TOO HIGH – ENDING CHILD MARRIGE IN NEPAL](https://www.youtube.com/watch?v=BpTlqJvN9F8) (YOUTUBE <https://www.youtube.com/watch?v=BpTlqJvN9F8>)

Challenges

Testing a new approach

The Mobile Teams were a new approach to delivering assistance, as an innovative solution to emerging needs and challenges after the earthquake. Operating in mountainous terrain posed physical challenges to the mobile teams to reach children in the more remote affected areas by foot, especially in the monsoon season.

There were also technical challenges associated with this new approach. At the start of the response, programming guidelines, training materials, key messages and other tools for the Mobile Teams were not in place and had to be newly developed. The Mobile Teams had no prior experience in delivering mobile information and conducting the activity curriculum with children, adolescents and parents.

Evaluation with the Mobile Team members showed that initially they felt overwhelmed by the needs in the communities were highest, while they had no prior experience

in the work. The Mobile Teams expressed the desire to receive more support and ongoing training from the local partner organisation and from Plan International. To address this challenge, internal capacity building efforts were intensified and additional technical staff were recruited to work closely together with partner staff to support the Mobile Teams.

Training and supervision

Community mobilisation and engagement with children were particularly challenging aspects of the work of the newly established Mobile Teams. An important learning was that most of the learning came from practice and experience. Therefore, Plan International and partner staff joined the Mobile Teams during activities in the communities, and that they held follow-up meetings and coaching sessions to address any challenges and supervise the work of the members.



Managing expectations

In some areas the teams faced some trust issues with the communities as they were not used to many service providers in the communities and the Mobile Teams were also new to them. As a result, in the initial period the community had expectations of receiving material support from anyone who visited the communities, as they had lost their homes and all their belongings. It was at times challenging for the Mobile Teams to implement non-material assistance such as psychosocial, child protection, ECCD and parenting activities.

Lack of health and protection services

A big challenge in the referral of child protection cases was the lack of specialized services at district level. In total 1024 children were identified for urgent and specialised support, while often these services were not available. Main gaps were seen in ambulance services for health emergencies, aids for children with disabilities and protection support for children rescued from trafficking. The Government had their own pre-disaster vulnerability criteria and (financial) support packages for children in need of protection, which were also available in the earthquake response. However, they did not meet to the exacerbated levels of child protection concerns after the earthquake, such as a rapid rise of trafficking, child labour and early marriage. Moreover, most protection services such as shelters were provided by local, non- Governmental organisations. In cases where government support was not available or sufficient, Plan International provided short- to medium term cash assistance to vulnerable families. The community Child protection committees were involved in planning the support to the

child and the family and Plan International's local partner monitored how the money was spent.

Lack of access to formal education

Additionally, while Plan International was able to provide ECCD, psychosocial and child protection services, the Mobile teams were not equipped or skilled enough to provide the types of formal education they could get at a Temporary Learning Space. So, many of these children still were not accessing formal primary and secondary education.

Exit strategy

Although the Mobile Teams were set up as a temporary emergency intervention, the teams remained throughout the first year of the response. First, after six months the Mobile Teams transitioned into outreach teams for ECCD centers and they helped to link families in nearby villages to ECCD services. A similar approach could have been taken to coordinate with Government primary school teachers or teaching assistants to provide formal primary education for children who cannot access schools or Temporary Learning Centers in emergencies. However, this strategy was not employed as schools were heavily overstretched.

Plan International continued to support the mobile teams in their child protection and ECCD work throughout the recovery phase in 2015-16 as mobile teams reached positive results to create access of children in ECCD and child protection services.

Key lessons learned:

Preparedness:

- 3 Pre-position clear and written Terms of Reference and job descriptions that reflect the multi-sectoral approach of the Mobile Teams and communicate this to children, parents, communities and other service providers;
- 3 Pre-position mobile kits with child development, parenting, recreational and awareness raising materials. Develop step-by-step activity manuals as part of preparedness;
- 3 Pre-position/develop child-friendly key messages related to protection, health, hygiene and disaster risk and train the Mobile Teams on methods to communicate these effectively to affected children and communities as soon as possible after the disaster.

Human resources:

- 3 It is essential to recruit community mobilisers from the same community, who are trusted by children and their parents, represent the diversity of the community and who are sensitised to support the most marginalised people without discrimination;
- 3 In the composition of the team, consider cultural factors such as age and gender roles, social status and language; ensure Mobile Team members know and/or are part of existing community structures and can confidently speak about child rights and child protection issues;
- 3 Engagement of youth is beneficial in the Mobile Teams approach as it contributes to their sense of belonging and contribution to the community and they have potential to carry forward the work through e.g. youth clubs;
- 3 Provide ongoing training, supervision and intensive support in the first weeks;
- 3 It is essential to provide Mobile Team members with adequate support to carry out their work. Provide a facilitator kit with basic stationary, means of communication such as a mobile phone, budget for transportation and meals if required, as well as access to staff care and psychosocial support;

Programming:

- 3 In large emergencies when people are displaced or have lost their homes and belongings, it is recommended that the Mobile Teams work alongside distribution teams and other services to ensure that the most vulnerable children and families are reached as soon as possible, and to ensure effective linkages with broader relief and assistance programmes;
- 3 Supporting young people to provide critical assistance to their communities can be very empowering for them and can be seen as an effective youth engagement strategy;
- 3 Ensure the Mobile Teams are connected to Plan International's child protection in emergencies team who can provide more structured support to the most vulnerable children including adolescent girls or refer to case management services when required.
- 3 Ensure that the communities and children can easily (visually) recognize the Mobile Teams and that they are well informed about the location, timing and target groups for the services provided by the Mobile Team.
- 3 Where relevant, explore possibilities with the Government to include teachers or teaching assistants in the Mobile Teams that can start some formal primary education for children who cannot access schools or Temporary Learning Centers;
- 3 Facilitate parenting groups and support these to take ownership for the continuation and sustainability of the parenting groups during the recovery and development phases.



About Plan International:

Plan International strives to advance children's rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it's girls who are most affected. As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children.

We support children's rights from birth until they reach adulthood, and enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge. For over 75 years we have been building powerful partnerships for children, and we are active in over 70 countries.