



End Violence Against Children East Asia



Project Management
Semi Annual Report

PBAS EASO 206310
FY2018

World Vision Regional EVAC Program

Project profile

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Project start date (mm/dd/yyyy): October 1, 2016
Project end date (mm/dd/yyyy): September 30, 2020

Budget Summary (All reporting periods)

YTD Budget	YTD Expenses	Variance (Amount)	Variance (%)
\$85,966	\$52,922	\$33,044	38%

Q3 and Q4 only:

Are you anticipating a carry-forward into the next FY? If so, please include a planned (Q3) or final (Q4) amount and whether the underspending is due to activities that were not implemented but will be implemented in the next FY or other issues that cannot be resolved in the next FY.

N/A

Progress to date

Please summarize the main successes and challenges you have experienced while implementing the project in the past reporting period (1 page max)

NATIONAL OFFICES

CAMBODIA

Self-protection life skills of children and youth. 35 youth clubs. Keeping Children Safe toolkit; essential life skills on personal safety skills and awareness raising about the CP services. 6 Concerts on VAC conducted in villages with support from CPCs and CCWC. 17 of 127 schools and villages benefited from an awareness campaign on VAC, positive discipline practice of parents/ caregivers and school teachers. Participating schools developed action plans to include VAC awareness in class.

Child Helpline Cambodia (CHC) Ambassadors. 24 youth ambassadors and promoted the Child helpline services to 792 children and youth. Strong collaboration with local authorities and service providers for referral and intervention of cases of violence against children. Broadcasted a radio spot on self-protection from violence against children in Preah Vihear province via a local radio station.

Congressional Hope Action Team (CHAT)

Christian Church leaders mobilized to form CHAT groups consisted of 5-7 members in 6 different villages; mandate to conduct capacity building: Conducted CoH-CP awareness to 12 home churches in 12 villages of 4 communes in Rovieng AP.

CHINA

Strengthening the national CP framework in China. Developing CPMS (Minimum Standards for Child Protection in Humanitarian Action) and Child Safe Organization Framework (CSOF) material in partnership with informal forum of CP actors (LNGOs and public and private foundations and government representatives) in preparation for a workshop to be delivered in Q3/ Q4 of FY18.

Anti-Domestic Violence Law (ADVL), 2016. WV and Chinese Academy of Science in Physiology (CASIP) joint study examining implementation of ADVL for CP. Key findings reveal complications which the ADVL fails to address. WV China propose to develop models and tools to enhance the implementation of ADVL to support children and has piloted a case management project in one province relating to anti-domestic violence law. (may be revised/ scaled-up after evaluation). WV China is also exploring sexual abuse and exploitation in cyber space programmes together with CASIP and is working to analyse the progress of prevention and feasible project space on this issue.

LAOS

Child-Youth Empowerment. 5 children's clubs (established in FY17). Clubs are actively meeting and are led by 10 youth leaders meeting twice per month. Activities include; VAC awareness raising (children and adults) including use of Smart Navigator and gov trafficking manual/ anti-trafficking law (2016) and VAC manual; basic rights of children; cultural/ traditional events such as singing, drama, cotton/ bamboo weaving and story-telling. The children's clubs provide an opportunity for children to express themselves and are a platform on which to have their voices heard. They also are an opportunity to develop life skills to protect themselves and peers from violence and trafficking.

Village Child Protection Network (VCPN): Gov mandated VCPN set up in EVAC target locations (x5). Coordination is being supported by WV in partnership with MoLSW (Ministry of Labour and Social Welfare). E.g. village CP fund has been established with contributions from the project and community. Fund is managed by a committee in each village composed of 25 members. Training to VCPN on gov CP case record process, responses, referral and support and relevant law e.g. 'Protection of the Rights and Interests of Children' (2007).

MONGOLIA

Home Visiting Model: WVIM and local government in one EVAC target province has signed MOU. Authority of Family, Child and Youth Development Agency has agreed to implement HV approach nationwide in Mongolia with the support from WVIM. Home Visitor approach is now accepted nationwide.

Positive discipline: Training (for parents) have been conducted nationwide with 7 specialists from EAVC EA project partners participating in the national ToTs.

Peace Road: Organizing awareness raising and prevention activities in emerging CP critical issues. Participating children report in FGD (Focus Group Discussions) that they have become more open to express themselves, made friends with similar interests, and starting to be more socially active. School based psychologists have started working at 3 schools in BZD with the support from WVIM (WVIM preselected vendor NGO- the project pays for 3 psychologists working hour, schools provide with office and other necessary things at school).

MYANMAR

Children's clubs: 6 groups from different villages and wards participating regularly in meeting where children learn about child protection and safe migration. Improved in self-awareness and knowledge on protection from abuse and exploitation. This is evidenced verbally at the end of the training when participants are questioned on sexual and physical exploitation and whether they understand the three 'Rs' principal – Reject, Run away, and Report.

Reintegration of TIP victims: In collaboration with Anti-Human Trafficking Task Force (ATTF), the EVAC project assisted in transportation charges for 2 young women from Yangon who were sex-trafficked in Mawlamyine. Currently, the brothel house owner was arrested and trial process in Mawlamyine are continuing. These 2 survivors had been reintegrated with their families in Yangon and agreed to come for trail.

Child Protection and Advocacy Group (CPAG): The project is building knowledge and understanding of local community on CP through providing training and workshops. E.g. child protection referral mechanism (WV's Child Protection Incident Preparedness Plan, or CPIPP) in order to report properly if incident cases happen in their community. Within 6 months of this fiscal year (FY_18) CPAG informed 5 child protection cases to local authorities and World Vision which happened in target areas.

NGO Child Rights Working Group (NCRWG): National working group founded by WVM (who is also a member) to promote the rights of the children in Myanmar. WVM continues to engage with NCRWG (mandated to provide inputs on forming National Committee, Budget and Child age etc.). E.g. WVM together with NCRWG conducted a number of Child Rights Law review meetings and developed policy recommendations for the Myanmar Child Law which is now under review in the parliament. NCRWG provided these recommendations to the government's Women and Child Rights Committee, under Upper House of Parliament during the advocacy meeting in January. The main purpose is to make sure that the new Child Rights Law is more comprehensive and in alignment with CRC. Together with WVM Protection Technical Team, Project contributed for hosting the Child Rights Law review meeting in WVM National Office and participated in policy recommendation advocacy meeting.

ITAW EVAC Campaign Launch: Like other National Offices, WVM conducted "It takes Myanmar to end physical violence against children at home and in school in Myanmar" Campaign external launching with government in Nay Pyi Taw on 22 March 2018. Union Minister, Ministry of Social Welfare, Relief and Resettlement, Child Protection Chief (UNICEF), Chairman of Women and Child Rights Committee, Government Officials, member of parliaments, INGW, NGO, NCRWG, media, staff, children and parents participated in the Campaign Launching Event. Project Manager, CDF and children from project targeted area participated in the Campaign launching Event. As member of the campaign design team, EVAC EA Project Manager contributed in developing the campaign design as well as along the process of preparation for External Campaign Launching. Project also contributed for IEC development for Campaign Launching such as fact sheet pamphlet, child safe online for advocacy purpose. It will be benefited for promoting the public awareness on ending the physical violence against children not only in the project area but also across Myanmar.

THAILAND

VAC awareness raising: Basic CP and child rights knowledge to concern staff, partners, leaders, teachers and community health volunteers, parents/ caregivers and children/ youth.

Youth Council: RTG (Royal Thai Government) has mandated for each sub-district in Thailand to establish and run a Youth Council. EVAC EA has engaged with Municipals / Local Administration / Provincial office

of Social Development and Human Security (PSDHS) to promote and support the youth council in all sub-district where the project site locates. EVAC EA has supported the capacity building for the youth council members such as through leadership skills and developing children and youth led initiative activities including proposal writing (RTG makes available \$600 for each sub-district's Youth Council to implement activities to address issues that concerns them).

CP Integration (LEAP 3): WVFT's national strategy places CP as a booster and is embedded across the new Technical Projects of 1) Go-Baby-Go, 2) Learning Roots Plus (LR+), Literacy Hand-in-Hand (LHH), and Positive Youth Discipline Plus (PYD+), as well as in the ITAW Campaign. Lesson learned and good practices from the 3 EVAC working sites are applicable to other WVFT project areas.

VIETNAM

VAC awareness raising: Educating parents/ caregivers on basic knowledge of positive discipline, and supporting communities to create a platform on which to apply these skills, such as by means of reflection meetings and parent clubs to increased understanding and application of positive parenting methodologies. (Most of parents are ethnic minorities – Hmong, Dzao, Tay, Nung, many of them are not fluent in Vietnamese language). 3 out of 4 target districts have implemented positive training courses with main facilitators who are child protection committee members or active parents in the communities.

Behaviour Change Communication (BCC): In Q2, the project organised 17 events bringing children, parents and other community members and involved active participation of local partners, core children and youth leaders. Content included training events for teachers and children on prevention of child sexual abuse, as well as activities designed to raise awareness among vulnerable rural communities on the anti-human trafficking, child marriage prevention, child sexual abuse prevention, and the prevention of physical and mental violence against children in schools, in families and in communities.

Advocacy: Through the delivery of WV coordinated CP training, reflection and planning meetings, village child protection committees and local leaders are prioritizing CP in their village or commune. Village leaders and other child protection committees reported or shared more violence cases in their communities and learnt how to respond to the cases. Project has seen an increase in cooperation and information sharing among actors of child protection system in Yen Bai and Dien Bien provinces to support violence victims or children at risk. In 2nd Quarter, 30 children were reported as child protection incidents, their cases were shared with key child protection actors in the province. 13 violence victims were supported within the timeframe expected according to district/ commune child protection committee's standards.

REGIONAL OFFICE

ACHIEVEMENTS

National Office support: Provided feedback and finalized all Semi Annual country reports submitted in May 2018.

Baseline: The baseline data collection for all NOs is now finalized and reports produced for all seven countries. All baseline reports can be found on Basecamp. A regional snapshot of the data has been produced but there are several important limitations which will impact on the ability to make statements about extent of VAC in the region. When compared to an endline survey, these same limitations will further impede the ability to make inferences about the impact of the project on these issues. i.e. while the projects being implemented in each country are developed around a standardized programme design with a common goal and outcomes, there is a significant amount of variation among the indicators that have been selected to monitor progress. This means it is not possible to compile NO findings into one large regional examination into the extent of VAC across East Asia. Similarly, the quality of baselines varies significantly depending on how the research was conducted; Cambodia and Vietnam employed experienced researchers from the Columbia Group for Children in Adversity, Connecticut, USA to lead their surveys, analyse data and prepare the reports. The fees for such a service are considerable, so other NOs opted to use other independent consultants or conduct their own baselines. Consequently, the scientific method and quality of analysis varies across the EVAC EA project further making problematic any effort to compile a regional view, or even to compare between countries. These variations in methodology may also impact on the ability to evaluate EVAC EA at the end of the programme cycle. If the endline surveys are not completed using the same scientific approach to data collection and analysis, it will not be possible to draw reliable conclusions as to the effectiveness (or not) of WV interventions to address the issue of VAC in participating countries.

Despite these challenges, they do however allow NOs to consider what the real issues are in the locations they have selected to implement EVAC EA. By broadening the focus from just trafficking (as was the case in ETIP), EVAC gives space for national offices to address the concerns that affect children in target communities as seen from their perspective, and also from the perspective of parents/ caregivers and other community members.

WV should recognise the limitations in the capacity of NOs to deliver such larger-scale prevalence studies in programme design and evaluation. In future, it is recommended that these studies are conducted by local third parties who specialise in evaluations, and that the same institution conducts research in all locations across all countries so there is uniformity in scientific method allowing for a broad, regional assessment. In addition, future regional projects should place more emphasis on programme uniformity across NOs if the goal is to assess projects as a regional effort.

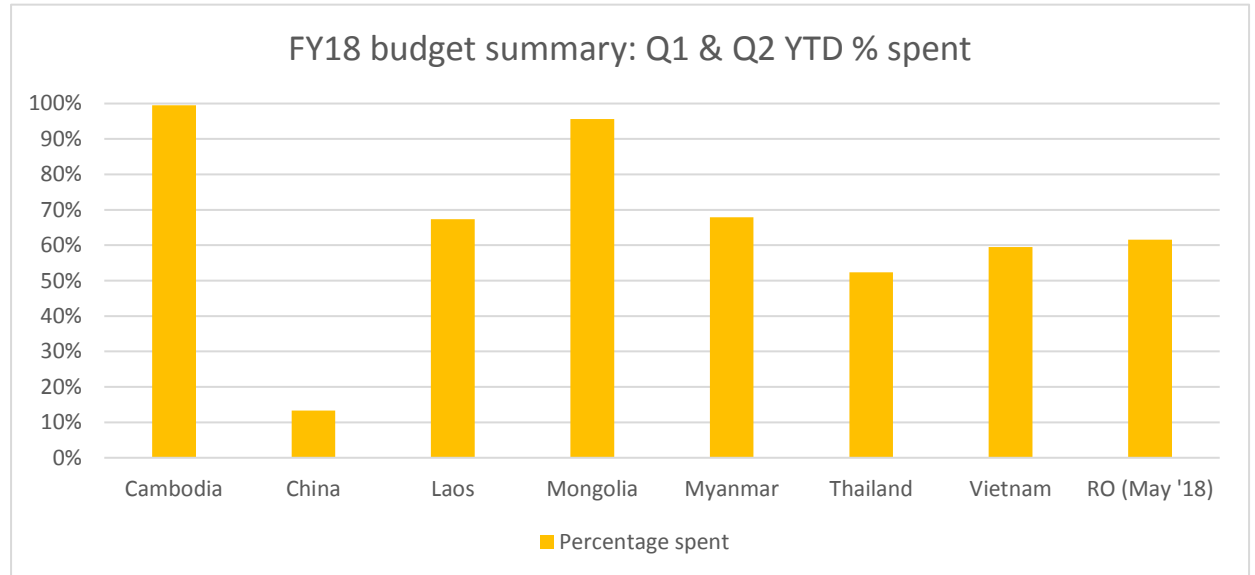
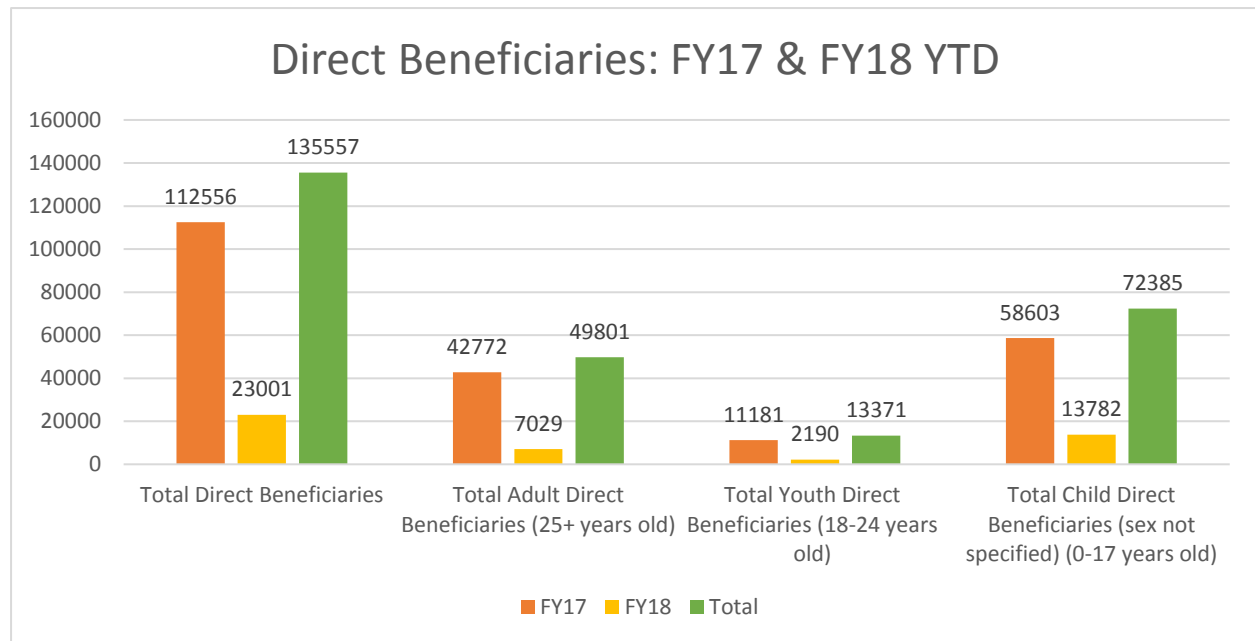
Communications material/content development: In process: 10 Things you need to know about VAC in the home. Publication will be available before end of June 2018 to coincide with the June Mobilization for the ITAW Campaign.

CHALLENGES

Handover: From Amy to Phil meant there was a period of 2 months where EVAC EA had no regional coordination. Subsequent months have also been slowed while Phil familiarizes with duties. This has had a direct impact on budget which is currently at 33% underspend – see below.

Budget: In March 2018, EVAC EA regional programme had an underspend of 33% due to 1) slow-down of activities due to handover; 2) reduced staff cost for Regional Coordinator (from international contract to national contract); 3) over-commitment by WVA to regional PBAS means YTB budget is artificially inflated. (This was corrected in April which is Q3 so not captured in this reporting period).

FY18 DATA



Project's achievements through outcomes and outputs

Please note: when citing ITT target data or ITT achievement data, please reference the ITT cell (column and row) where the data can be found.

OUTCOME summary expected in **Q2 and Q4 only**

OUTPUT results expected **all reporting periods**

Outcome 1 (Q2 and Q4 only)
Children and youth, especially the most vulnerable, are empowered with the skills and knowledge to reduce their personal risk to trafficking and related forms of violence.
Progress toward this outcome: <ul style="list-style-type: none"> • Please briefly describe this quarter's progress toward the outcome, including successes and challenges. • Have beneficiaries under this outcome changed their attitudes and behaviors related to the critical CP issue? If so, in what ways? If not, what challenges or hurdles exist? • Identify best practices, if applicable. • Identify risks to project, if applicable.
N/A

Outcome 2 (Q2 and Q4 only)
Families and caregivers are provided with access to adequate and appropriate services in order to care for and protect their children.
Progress toward this outcome: <ul style="list-style-type: none"> • Please briefly describe this quarter's progress toward the outcome, including successes and challenges. • Have beneficiaries under this outcome changed their attitudes and behaviors related to the critical CP issue? If so, in what ways? If not, what challenges or hurdles exist? • Identify best practices, if applicable. • Identify risks to project, if applicable.

Outcome 3 (Q2 and Q4 only)
Communities are strengthened and working together to create a safe and protective environment for all children
Progress toward this outcome: <ul style="list-style-type: none"> • Please briefly describe this quarter's progress toward the outcome, including successes and challenges. • Have beneficiaries under this outcome changed their attitudes and behaviors related to the critical CP issue? If so, in what ways? If not, what challenges or hurdles exist? • Identify best practices, if applicable. • Identify risks to project, if applicable.
N/A.

Outcome 4 (Q2 and Q4 only)

Systemic barriers are reduced to addressing violence against children.
Progress toward this outcome: <ul style="list-style-type: none"> • Please briefly describe this quarter's progress toward the outcome, including successes and challenges. • Have beneficiaries under this outcome changed their attitudes and behaviors related to the critical CP issue? If so, in what ways? If not, what challenges or hurdles exist? • Identify best practices, if applicable. • Identify risks to project, if applicable.
N/A