# IMPROVING THE LIVES OF CHILDREN THROUGH RESEARCH!

**CRPF Annual Publication 2015** 



## Improving Children's Lives through Research:

Summaries from Presentations at the Monthly Seminar Series of the Child Research and Practice Forum in 2013

Summaries by: Clare Gorman

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# FOREWORD



e would like to start with a powerful quote by the influential French Renaissance philosopher Michel de Montaigne that perfectly reflects one of the purposes of the Child Research Practice Forum (CRPF): "It is good to rub and polish our brain against that of others." Each month for the last four years, the forum members come to attend and to share a piece of knowledge and each return with even a bigger piece of knowledge opening new opportunities. Possibilities for increasing evidence-based decision-making in members respective enaggements, boosting the culture of working together for results and demonstrating that collaboration, that starts with a few groups of people and organizations, can impact and ultimately change Ethiopia for the better. The CRPF started in 2011 as an informal network of people from all spheres with the common objective of sharing and discussing research to contribute towards the increased realization of children's rights through better knowledge, policies and action.

This report, which is the 4<sup>th</sup> of its kind, presents the summary of the research findings presented at the Ministry of Women, Children and Youth Affairs in 2013. A range of topics of research were presented during the monthly CRPF meetings that include themes on understanding child labor migration, internal migration, child domestic workers in urban areas, street children, children's parliament, community management of acute malnutrition, violence against children, adolescent girls and determinants of child mortality.

The forum organizes the presentations of research and invites members and researchers to share knowledge and compare their ideas and views. The research results are presented in this summary form to the forum members, or any other interested people or organization, who would like to find out more or were unable to attend and for ease of future reference.

We would like to encourage all the network members to continue their diligent participation in the forum's events. We invite new interested members to join the network to unite our efforts to making a difference in the lives of future citizens of Ethiopia by first focusing on our present children to promote evidence-based decision-making and ensure the realization of child rights and wellbeing.

Research, Evaluation, Policy and Monitoring Team, UNICEF Ethiopia

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# ACKNOWLED

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We would also like to thank all steering committee members and in particular the UNICEF for covering the cost of this publication and the monthly seminar series; and Young Lives for covering the cost of producing the summaries; and Save the Children for hosting the coordinator and other management support.



# GEMENT





## The challenges of international child labor migration, voluntary repatriation, family tracing, and reunification: the case of Ethiopian minors repatriated from Yemen in 2011

Dr. Zelalem Teferra, Institute of Ethiopian Studies, University of Addis Ababa

## Introduction

Cross-border migration from Ethiopia of children below the working age of 18 years old is a relatively new but growing phenomenon. Because of the emerging nature of this trend, there is a significant lack of reliable data with which to assess the magnitude and complexity of the situation. The irregular channels through which children move and a subsequent shortage of official documentation have also led to a serious gap in the information available. There is also a scarcity of data concerning the processes involved in Assisted Voluntary Return (AVR) and the subsequent reintegration of returnees.

The objective of this paper is to help fill these gaps by describing in detail the process, challenges and prospects of repatriation, interim care, family tracing and reintegration with a view to developing lessons for future action.

## Methodology

The paper draws on the experiences of 481 migrant children voluntarily returned through the IOM-UNICEF-New Generation University College repatriation project in 2011. The children had been stranded in Yemen on their way to find work in Saudi Arabia and other Gulf States.

Qualitative methods such as participant observation, in-depth interviews and focus group discussion were used to conduct the research. The author undertook a critical review of secondary resources including academic literature, IOM and UNICEF documentation and Mixed Migration Task Force (MMTF) reports from the Yemen. The paper also draws on empirical observations by the author based on his personal participation in the project.

## Findings

In 2011 alone, the IOM registered 10,496 Ethiopian migrants in Yemen including many unaccompanied child labour migrants. Of the children who were assisted and repatriated by the project:

- The overwhelming majority came from the Amhara region, particularly from the Oromo special zone (Kamissie area).
- An assessment of literacy for 355 of the returnees indicated that 37.7 per cent were illiterate and had never received any form of schooling. In contrast, those who had attended grades 11 to 12 constituted only 0.06 per cent.

### Major factors triggering crossborder child migration

Whether forced because of rural poverty or lured by the promise of better work and salaries, there are several push/pull factors that cause child migration from Ethiopia. For the children interviewed as part of this study, the most salient reasons included:

- Families in rural areas arrange for their children to migrate as a means of earning remittances or in order to reduce household consumption.
- Family and Peer pressure
- Widely held perceptions (real or imagined) of the availability of work in the Middle East, even for children.
- Persuasion of smugglers, brokers, and private employment agencies that exaggerate the employment opportunities in the Middle East for all migrants.

## Major challenges of repatriation, reunification and reintegration

The paper argues that despite the effectiveness of emergency interim care both in Yemen and upon repatriation to Ethiopia, the absence of a well thought-out and planned reintegration scheme of returnees will continue to hamper a sustainable resolution to the problem of child cross-border migration.

- The study found that a number of the IOM reports analysed lamented the scarcity of financial resources to carry out activities under repatriation and reintegration. Although it was included in the project contract, no reintegration activity was carried out due to financial shortages.
- The study highlighted poor coordination between the stakeholders including government ministries, international organisations, NGOs and local administrations (including law enforcement bodies).

The study cited other challenges including:

- Lack of involvement of local communities in decision-making relating to curbing migration
- Too much focus on concentrating on emergency issues at the expense of dealing with long-term solutions such as reintegration.
- Lack of a post-return follow up system and monitoring





# Conclusion and recommendations

For the vicious cycle of cross border child re-migration to stop, more needs to be done to ensure that reintegration is not left out or overlooked. The interplay of global and local factors also makes it difficult to address the situation of children migrating beyond Ethiopia's borders. These include:

- The demand for cheap and unskilled labour in the Middle East on one hand, and the abundance of such a labour force in Ethiopia on the other.
- The proliferation of migration brokers including smugglers and human traffickers

Under such complex circumstances, a call for better management rather than the complete eradication of child migration is more achievable. It is essential that further work in this area focuses upon:

- Extensive awareness raising in the community and between the community and outside agencies about the potential pitfalls and dangers of child migration abroad.
- To develop and design a genuine, evidence-based reintegration strategy whereby community-based development efforts are harnessed alongside AVR.
- Particular attention should be given to the expansion of education in rural areas so that schooling can enable teenagers to postpone migration or drop it as the only option of earning a living.
- Collaboration of all stakeholders could minimise the magnitude of this problem by avoiding duplication of efforts.

# The situation of children on the move in the Southern Corridors of Ethiopia

KAB Center for Social and Economic Data

## Introduction

Children's migration, specifically from rural to urban centres, is widespread in Ethiopia. While the Southern Region of the country is no different in this respect to other parts of the country, it has recently witnessed a rapid rise in the number of children moving to its towns in search of a better life only to fall vulnerable to abuse and exploitation. Current trends suggest that the problems facing these children will continue to get worse, and will reach crisis proportions unless something is done before it is too late.

This study explores the current situation of 'children on the move' in four towns in the Southern Corridor and outlines the common risks and challenges faced by these children. Carried out on behalf of the Forum on Sustainable Child Empowerment (FSCE), it aims to contribute to solutions by:



- Exploring the magnitude and extent of the problem and its link with child sexual abuse and exploitation.
- Identifying the major underlying socioeconomic and cultural factors that drive children to move and how they end up being victims of abuse and exploitation.
- Identifying the local communities' level of awareness of children on the move and their position to help address the problem.
- Recommending strategies and approaches to address children's movements both in the sending communities and urban transit or destination areas.

'Children on the move' serves as an umbrella definition that, among other groups, includes children who have been trafficked, migrate (for example, to pursue better life opportunities, look for work or education or to escape exploitative or abusive situations at home), have been displaced by conflict and natural disaster or who seek asylum and refuge.



## Methodology

The study collected and analysed data from primary and secondary sources.

Focus group discussions (FDGs): In each of the four towns, three FDGs were held with up to 12 participants; one with community members (including religious leaders, elders, and young people); another with children in school and the third with children not in school. Kev informant interviews: Participants were drawn from key stakeholders and partners including the Women and Children Affairs Office and religious institutions. Community Based Organisations in the study areas were also interviewed. Case studies: A minimum of two cases were compiled in each of the study sites to provide an ethnographic account of migrant children. Secondary data: Existing sources of data including policies, guidelines, surveys and other research findings, principally from relevant government and non-government agencies were used as part of a desk review.

## Findings

### Magnitude and extent of the problem

Children's movement in the selected study areas is considerably high. Unaccompanied child movement is increasing in Arba Minch, Shashemene and Butajira and appears to be worsening in the latter two towns every year. Children's movement in Adama is currently becoming increasingly visible. Any declines in the number of children arriving, sometimes due to a crack down on traffickers, are short-lived.

### Social economic and cultural factors

The findings of the study indicate that there are various 'push' and 'pull' socio economic and cultural factors that lead to children moving. Drought and famine, family breakdown and the escalated cost of living are among the contributing factors in Arba Minch and its surrounding areas. In Shashemene, many of the migrant children have been brought to the town by relatives, family acquaintances or caregivers. In Butajira, the children cite unbearable workloads in their homes, the loss of parents and rural hardship among the reasons for moving. In Adama, the biggest of the four towns, factors include but are not limited to: early marriage for girls, family displacement and deceit and false promises made by adults.

Other factors include:

- Lack of information and low level of awareness of the rural community and children
- Family discord and disintegration
- Lack of access to and/or failure in education
- Attitudes and traditional practices of the community
- Influence and persuasion of former migrants
- The attraction of modern, urban areas

### Recommendations

Based on the findings of the study and the solutions proposed by study participants, the paper concludes with a set of recommendations, some of which are highlighted below.

### Preventative measures:

- Work with schools: Disseminate information among students to help them make informed decisions
- Positive parenting training for sending communities
- Educational support for children from very poor backgrounds
- Platform for child migrants to share their experiences with other children

### Reintegration/reunification:

- Help for children to return to a non-hostile environment
- Set up temporary shelters in transit towns
- Community based follow up mechanism

### Rehabilitative measures:

- Support for accommodation for those who cannot be reintegrated/reunified
- Counseling and guidance services

#### Networking and collaboration:

- Strengthen existing networks and joint efforts
- Support government action on brokers and child traffickers;
- Encourage concerned government bodies to institute legal protection for children on the move
- Build on the efforts of the local NGO such as the Association for the Promotion of Indigenous Knowledge (APIK) operating in Butajira area, working with different community groups, to ensure stability through using indigenous knowledge in addressing social problems and conflicts.
- Build on the positive experiences of NGOs such as FSCE and ECFA in providing all rounded and community based protection for children on the move in Adama town and other areas.





## Using research to build programmes for child domestic workers and other marginalised girls in poor urban areas of Ethiopia

Dr. Annabel Erulkar, Population Council, Addis Ababa

### Introduction

Few programmes in Africa have sought to address social exclusion and HIV vulnerability among the most marginalised girls in the poorest communities, including child domestic workers and migrant girls.

*Biruh Tesfa* ('Bright Future') is a programme that reduces the social isolation of vulnerable girls in urban Ethiopia and provides them with information and services to help prevent sexual exploitation and abuse. At meetings, mentors provide basic literacy, life skills, financial advice, and education about HIV and reproductive health. Since it was established in 2006, Biruh Tesfa has been scaled up to the poorest areas of 18 cities in Ethiopia, including the capital, Addis Ababa, and more than 55,000 out-of-school airls have participated. The progamme was conceptualised by the Population Council and run in collaboration with the Ethiopia Ministry of Women, Children and Youth Affairs.

This presentation explains how formative research findings were used to help design *Biruh Tesfa* and how the evidence gathered from on-going research is helping to expand the programme.

## Methodology

Early research methods were largely qualitative and included:

- In depth interviews among girls in low income areas (interviews conducted over three successive visits)
- Population based survey of adolescent boys and girls aged 10 to 19 in low income areas of Addis Ababa
- Representative sample of 1200 adolescents – Listing including probe to capture domestic workers residing in the residences
- A broad range of topics was covered in the surveys

More recently, rapid qualitative studies and service statistics have been used to inform the on-going design and development of the programme. This includes periodic qualitative assessments to identify gaps and suggest programme direction. Baseline and endline surveys are used to monitor and shape the services offered.

Finding	Intervention	
Most vulnerable girls are housebound with significant domestic work.	House to House recruitment	
<ul><li>14 per cent of girls report having no friends.</li><li>44 per cent of domestic workers report having no friends.</li></ul>	Girl groups promoting interaction with other girls	
There is a lack of supporting adult or advo- cate: 51 per cent of girls surveyed don't live with their parents.	Mobilisation of girls with adult female men- tors.	
10 per cent of girls had never been to school (31 per cent of these were domestic work- ers)	Non-formal education is a core component of the group meetings.	

## Findings

In 2004, researchers used the results of baseline surveys among adolescents in low-income areas of Addis Ababa to help determine the group most in need and inform the content of its programme. For example:

Monitoring studies have led to mid-course adjustments. Among others these include:

- The introduction of identity cards
- Supplies to manage menstruation and underwear
- Programme to increase participation of girls with disabilities (with Handicap International)
- Links with shelters for abused girls

### The expansion of Biruh Tesfa

Ongoing research is also used to inform the direction of growth for the programme. For example, in 2008 *Biruh Tesfa* was expanded to 17 cities in Amhara and Tigray regions with an additional focus on HIV/AIDS prevention. This decision was informed by:

- i. Baseline surveys conducted in Gondar, Bahir Dar and Addis Ababa that found that domestic workers and socially isolated girls were twice as likely to have experienced non consensual first sex, compared to non domestic workers/girls who were not isolated.
- ii. An earlier study in Ethiopia finding that 40 per cent of commercial sex workers were former domestic workers.

### **Programme outcomes**

Continuous monitoring and evaluation is helping *Biruh Tesfa* demonstrate the impact of its work. For example, according to the final evaluation, girls in the programme sites were more than twice as likely to report having social support as girls in the control site. They were also twice as likely to score highly on HIV knowledge questions, to know where to obtain voluntary HIV counseling and testing, and to want to be tested compared to girls in the control site.

## Conclusion

*Biruh Tesfa* is one of only a few rigorously evaluated support programmes that serve vulnerable girls in sub-Saharan Africa. These positive changes demonstrate that well-designed programmes can reach and effectively support the most vulnerable girls in the poorest areas, such as child domestic workers, girls with disabilities, child sex workers, and rural-to-urban migrants. Research will continue to play an important role in the development and expansion of the programme including:

- Testing programmatic approach on educational participation and attainment, time use and life course trajectory
- Further examination of the exploitation and abuse of domestic workers
- Training selected domestic workers as teachers aides
- A costing study

## National Situation Analysis on street children in Ethiopia

Azeb Adefrsew and Daniel Tefera, Save the Children

## Introduction

Children who live on the streets are amongst the most vulnerable and marginalised groups in Ethiopia. Deprived of basic needs such as shelter and adequate food, they are also in danger of ill health and the worst forms of exploitation. While international agencies, government and non-government organisations and local community groups have all made significant attempts to address the issue, a steady stream of children continues to flow onto the streets every year.

This paper shares the findings of a nationwide study on the status of street children in Ethiopia to generate data that can be used as a benchmark for policy formulation; project design; program implementation; monitoring and evaluation; and to serve as springboard for further studies. Among other issues, it assesses the services tailored for street children and proposes a series of preventive, protective and restorative measures to reduce street children's vulnerability and marginalisation and enhance their wellbeing.



## Methodology

The study was carried out in four regions of Ethiopia and focused on 17 sites including six major cities, three regional towns and eight satellite rural towns. 2707 street children were interviewed (61.8 per cent male and 38.2 per cent female). For the purposes of the study, children were classified into three as working street children (SCWS), children living on the street (SCLS) and children living on the street with family (SCLF). Both quantitative and qualitative data was gathered and analysed through various techniques, including:

- Qualitative surveys: focus group discussions (FGDs) and in-depth interviews with children;
- In-depth interviews with key expert and community informants
- Participatory Rapid Appraisal using Capture-Recapture Method
- Quantitative methods including area and respondent sampling

### **Findings**

### Demographics

The children interviewed in the study were characterised by a wide range of demographic attributes:

Half of the children were orphans having lost one or both parents.

- Almost two-thirds of street children living on the street with their families and twofifths of street-working and street living children came from broken families
- About a quarter had four siblings or more.
- About a quarter had siblings who also work on the street.
- Almost two-fifths of the children were engaged in some form of work



## Reasons for children living or working on the street

Poverty was cited as the most common cause for children living or working on the street (65%). Among the other explanations given were:

- To feed myself 62.7%
- To support my family 19.5%
- To get money for school 4.9%

### Access to basic needs and education

Whilst exploring the basic needs and education of the street children interviewed, the researchers found that:

- Over half the total children interviewed did not have access to shelter. Over a fifth frequently changed sleeping place.
- Two-thirds did not get adequate food while over half begged for leftover food.
- Only about a quarter of the children interviewed were attending school while 40 per cent of those not in school cited poverty as the main reason.
- More female than male children were not enrolled in school (21% to 18.%)

### Health status:

The study examined the health status of street children including the prevalence of substance abuse and their sexual and reproductive health:

- 28.5 per cent were seriously sick. Of these 54.1 per cent did not receive treatment.
- 24.1 per cent reported they had sexual contact. Among these children:
  - 48.0 per cent reported that they had been coerced or forced to have sex
  - 24 per cent reported that they or their partners had been pregnant;
     60 per cent had unsafe abortion
  - 87.8 per cent had heard of HIV/AIDS while 50.9 per cent did not use any protection against HIV/AIDS and other sexually transmitted diseases.
- 23.2 per cent consumed alcohol 35.2 per cent of these drank it more than once a week.
- 24.8 per cent of the children interviewed were using addictive substances.
- 40.7 per cent reported that they face abuse; 24.2 per cent avoid or ignore the offender.

### **Coping Mechanisms**

Different types of coping techniques employed by the children interviewed included:

- Begging for money or food (47.5 per cent)
- Engaging in work (35.1 per cent)
- Sharing with friends (26 per cent)
- Stealing and using addictive substances

#### Access to support

In assessing the availability of and access to services tailored for street children the findings reveal that:

 Only a tiny fraction (one twentieth) of the total respondents reported that they were receiving services from NGOs, largely in the form of clothing and food.
 77.9 per cent reported that the services provided did not adequately address their needs. • Less than one per cent of the total respondents reported that they received food, clothing and shelter from community-based organisations. 70.7 per cent reported that the support was not sufficient to address their needs.

## Conclusion and recommendations

Street children are among the most highly vulnerable and marginalised sections of the population. Preventive, protective and restorative interventions are urgently needed to address the devastating effects of the complex and multi-dimensional problems that they face.

### General

- Interventions targeting street children should be participatory in design and implementation. Programmes should be gender sensitive and integrate the needs of children with disabilities, HIV and other marginalised groups.
- Interventions will require the input of a wide range of stakeholders including parents, schools, NGOs, CBOs, local administration offices and the community at large.
- A comprehensive and easy to use database should be developed to help create a viable referral and support system which takes into consideration the diverse the needs of street children.

### Preventative

- Policy and structural changes to protect and support orphans and vulnerable children in all service sectors
- Economic empowerment of vulnerable parents and guardians

- Social protection measures for families living in extreme poverty, parents with debilitating health problems, aging family members and extremely poor families caring for orphans or vulnerable children
- Parenting skills for vulnerable parents and guardians child health and nutrition, positive parenting and child protection

### Protective

- Raising the awareness of service providers and the general public on the protection of street children
- Training law enforcement bodies and local officials on how to provide protective and supportive services for children
- Establishing accessible and affordable reporting mechanisms
- Developing outreach programmes for supporting and protecting children on the street

### Restorative

- Intensive specialised support for children and families who lived on the street for over two years including behaviour management, trauma and addiction counselling and life skills training
- Training for counsellors and social workers on how to manage stress and burnout
- Psychosocial support that helps children and families regain their sense of worth and release their full potential.





# From childhood in the countryside to street work in Addis Ababa

Dr. Emebet Mulugeta and Sissel H. Eriksen

## Introduction

Whether trying to keep safe, find work, manage money, or go to school, life for children working on the streets is not easy. How do children who make the independent journey from rural areas to Ethiopia's capital adjust to their new life? How do they negotiate their way to settle, work, and survive?

The authors explore the causes of children's migration from the countryside to Addis Ababa; the process of transition; the challenges of settlement; work, everyday existence and the connections that the children keep with their families. They also discuss the factors that keep the children going despite the challenges they encounter.

## Methodology

This small-scale study was based on qualitative data gathered from in-depth interviews with 45 children. Out of those interviewed, 30 came from the rural areas. Purposive sampling focusing on selected major formal and informal business centres in Addis was used and in some cases, was complemented by snowball sampling. The material was collected using an elaborated interview guide. The interviews were conducted in Amharic, tape recorded, transcribed and translated in English. The interviews and field notes were coded according to the different concepts and themes that recurred in the material.

The purpose of the study was explained to the children invited to participate. They were told that they could refuse to answer or could withdraw from the study whenever they did not feel like continuing. All the children gave oral consent to participate in the absence of their parents' permission.

## Findings

Of the children interviewed:

- All were between the ages of 8 to 16 years old, half of whom were between the ages of 11 and 13.
- All came from villages where the mainstay of livelihood is subsistence farming.
- 21 of the children had both parents that were alive and except for two, they all came from large families.
- All the children work; 13 of them go to school and 11 attend evening classes.

### **Migration to Addis**

Both 'push' and 'pull' factors gave rise to the children's migration from rural areas to the city.

Push:

- To send children away in order to minimize the economic burden for the family
- A request from the child's family to contribute to household income

Pull:

- Towards family members or friends living in Addis Ababa
- The promise of a better life and the belief that the city holds an abundance of better work and education opportunities

### **Living conditions**

For many of the children interviewed, the ties that brought them to Addis helped them to have a more or less smooth transition. The children lived in crowded areas, close to the markets where they work. While some moved in with relatives, others moved in with friends and contributed to rent and food. Many skipped meals: breakfast, lunch and even dinner. Not all the children had access to toilets, even a shared one. Many didn't have tap water, or a kitchen.



### Livelihoods

The children interviewed found their jobs through networks of friends, relatives or people from their village. They learned about trades from watching other children. Jobs included shoe shining, domestic service and selling goods. The children interviewed spent part of their earnings on food, house rent, clothing, school fees and uniforms. After these expenses, all the children, except for four of them, managed to save some money.

### **Keeping in touch**

Many of the children interviewed had managed to maintain a strong bond with families in the villages. In many cases, mobile phones (borrowed or owned) enabled families to keep in touch. The children were also able to nurture their bond through their visits for the *Meskel* holiday, when they were expected to go back to their villages.

### **Contentedness and aspirations**

Despite the various difficulties the children encounter, all but four expressed the view that they were happy and wanted to stay in Addis Ababa. Some of the children reported feeling pressure to provide for their families. The children's responsibility to their families was a constant worry. The children interviewed were content with the fact that they are able to work and help their families. They had visions and plans for their future; they had aspirations to change their lives as well as those of their families.

### Conclusion

The authors argue that their study challenges the concept of migrant children as vulnerable victims. Instead, they suggest that the children in their study demonstrated resilience and fortitude despite the challenges they face. They argue that within the limits imposed by their environment, they always exercised agency. They were active players in the migration process. They arranged their housing, started their work; managed their earnings, spent their money according to their plans, which mainly revolve around meeting their basic needs, supporting families and investing in their education, and some on animals to be raised by families in their villages. When facing challenges, they utilised their personal and social resources.



## Lessons learnt: Integration of Infant and young child feeding into Community-based Management of Acute Malnutrition (CMAM)

Thewodros Zewde Shay Save the Children

## Introduction

Interventions aimed at improving child feeding (IYCF) services at community level have been vital in the effort to increase the survival and development chances of infants and young children.

Save the Children worked with six partners<sup>1</sup> to explore the feasibility and efficacy of integrating IYCF into Community-based Management of Acute Malnutrition (CMAM). The aim of the partnership was to improve the feeding practices of mothers and guardians with children suffering from acute malnutrition, in order to decrease the prevalence of the problem. The paper captures the lessons on what worked, what didn't and why and has been written so that other nutrition programme managers and implementers can learn from the experience. It also puts forward suggestions for effectively integrating IYCF in to other health programmes besides the CMAM.

## Methodology

1 World Vision, Nutrition Policy Practice, Emergency Nutrition Network, TUFT's University, Addis Ababa University and Federal Ministry of Health Four IYCF models (Messaging, 1-to-1 Counselling, Support Group Discussions (SGD) and Action-Oriented Group Discussions (AOGD)) were selected and implemented for 12 months in the existing CMAM programmes of East Badawacho woreda of Hadiya zone, SNNPR. Demboya woreda in Kembata-Tembaro zone, SNNPR, acted as the control site. The four models were chosen to integrate with four CMAM components: Community Mobilisation, Targeted Supplementary Feeding Programmes (TSFP), Outpatient Therapeutic Programmes (OTP) and Stabilisation Centres (SC).

The study consisted of:

*Baseline:* i) Two non-randomised interventional studies; ii) household questionnaire) and iii) focus group discussion, key informant interviews and in-depth interviews.

*Implementation:* i) Routine Program Monitoring Data-Trend Analysis; ii) Mid-term observation and iii) Health Extension Workers (HEWs) Competency Knowledge assessment test.

*End-line:* i) A variation of 'before' and 'after' studies (Self-comparison) and Impact Assessment Quantitative Study (household questionnaire); ii) Semi-quantitative Pro-

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gramme Impact Assessment, and iii) Endline Observation.

### **Lessons learned**

The lessons learned from the IYCF-CMAM project (see Table) were compiled from the major findings and observations of the baseline survey, team supervision (checklist based), monthly IYCF-CMAM reports, post-training assessments and an endline survey preliminary report. Insights were also gathered from discussions and feedback from two Mid-term and Annual Review Meetings at regional level for partners and other stakeholders.

### **Conclusion and recommendations**

While most mothers in the study demonstrated a good understanding of IYCF, their age-appropriate feeding practices were still very poor. More work is needed to bring about change in the behaviour of mothers practicing recommended IYCF practices. HEWs need to know how to integrate the IYCF programmes with other health and nutrition interventions.

"Bet Yaferawn Sichi" ("Feed what is available at home") is an Amharic phrase which was heard from many of the HEWs interviewed; yet the study found nothing to suggest this type of message encouraged behavioral change among CMAM mothers. HEWs need to investigate what food mothers have at home and how they can support them accordingly. Recommendations for effective IY-CF-CMAM integration processes include:

- Quality CMAM programming: IYCF activities require the integration of all CMAM components. The weekly OTP day must only be used for the provision of OTP services. Services such as immunisation and long-term family planning should be scheduled separately.
- *Mothers' arrival time at OTP:* Many of the women in the study were not arriving to the OTP before noon. HEWs and Health Assistants have a role helping mothers to remember their appointments.
- A monitoring and evaluation tool for *IYCF:* While standardised CMAM programme registration cards are used at the national level, there are no such tools for IYCF programmes.
- Use of Alive and Thrive Ethiopia programme tools: These were found to be very helpful when communicating messages regarding feeding practices to the mothers in the study.
- Other entry points for best integrating IYCF: Expanded Programme on Immunisation (EPI) can be an effective entry point for the integration of IYCF before malnutrition happens. Further operational studies in the integration of IY-CF-EPI are required.



### Table one: Summary of key lesson learned

Category	Success	Problem	Impact
Planning Integration	After training, the majority of HEWs were able to plan and integrate the four IYCF models into their weekly OTP programme	Some of the HEWs didn't try AOGDs and SGDs.	HEWs were able to address IYCF issues as part of their routine work.
Three As (Assess- Analyse-Act)	It became an easy approach to apply for HEWs compared with GALIDRAA.	Requires repeated counselling experience to diagnose mother's IYCF problems and to act on the problems identified.	It was used as good approach to ensure a quality 1-to-1 counselling service at health post level.
Brief Case or Tool A use	At least two brief cases were distributed to each of the 39 health posts.	Sometimes, HEWs forgot the briefcase or hung it on the wall of the health post for display.	Mothers could further understand the key messages or recommendation through picture observation.
National CMAM Programme	Existence of OTP programmes in all health posts Existence of SC programmes in three of seven health centres	TSFP integrated with community based nutrition/ child health days Provision of other health services on OTP days (e.g. Immunisation)	Increase workload for the IYCF-CMAM integration activity.
Mothers' Knowledge of IYCF	Most mothers have increased awareness about IYCF.	Majority of the mothers complain that they don't have food varieties to prepare complementary foods as to the recommendation.	The overall number of mothers who differently practiced the optimal IYCF methods since the project was calculated at around 9 per cent.
M and E tools for each IYCF models	Different registration and reporting formats were developed and tried in each IYCF component	With the exception of some reporting formats, most formats were not used by the HEWs.	It was quite difficult to collect important information as required.
IYCF-CMAM Supervision Checklist	A standard type of IYCF- CMAM supervision checklist was adopted and used during implementation	-	Using the scoring technique, it was possible to identify those health posts that performed well and those that did not.

## Violence against children within the family and community based settings in Ethiopia

The Oak Foundation

## Introduction

As in most countries around the world, children in Ethiopia face various types of physical, psychological and sexual violence, often at the hands of close members of their family, school and community. Despite determination by the Ethiopian Government to lay down the appropriate policy and legal foundations to protect children against violence, many vulnerable children continue to live under difficult circumstances without the protection of the law.

The African Child Policy Forum (ACPF), in collaboration with Oak Foundation, carried out a research project to inform national and regional efforts on the protection of children from violence in Africa. The collaborative research initiative targeted four Eastern African countries: Ethiopia, Kenya, Zambia and Uganda.



The objectives of the study were to:

- Augment information and data on violence against children within the family and the wider community, to raise public awareness of the extent of the problem and thus improve prevention measures.
- Inform child protection policies, laws, mechanisms and strategies that are crucial for the prevention of violence and the protection of children.
- Build knowledge to advocate with policy and decision-makers at all levels to help prevent violence in the family.
- Identify and propose possible strategies for engaging families in addressing the issue of violence against children.

This report presents the results of the national surveys in Ethiopia, recording data and information on violence against children in family and community settings. It attempts to understand the types and extent of violence against children in families and communities by documenting:

- The type, prevalence, magnitude, perpetrators, causes and effects of violence against children.
- Children's and public perceptions of such violence.
- The legal and policy framework and its implementation.
- Existing interventions and good practice to prevent and address the problem.

## Methodology

Data for the study was generated via a household survey conducted in eight regions of the country. The survey involved children, young adults, parents and various stakeholders. It was completed by children aged 11-17, young adults aged 18-24 and parents or children's carers. The sample included 588 children, 572 young adults and 588 parents or carers. Children's direct responses to questions about various forms of physical, sexual and psychological violence within their home were recorded. The young adults, on the other hand, were asked to reflect on what they experienced in their home before they turned 18.

Both structured and semi-structured questionnaires were used in the information-gathering process. While the survey yielded most of the quantitative information, focus group discussions, case studies and unstructured interviews were used to compile the qualitative data.

## Findings

The study yielded many findings which are presented under four broad headings and include:

### Physical violence against children

The study revealed that physical violence against children was quite widespread – particularly flogging or lashing and being coerced to perform arduous chores. The number of children who encountered violence in the community was higher than those who experienced it within the home. Young adult respondents also reported that they faced more physical violence when they were between the ages of 10 and 13 than at a later age. The common types of physical violence faced by girls were flogging and performing arduous work; while for boys it was flogging and pinching, arm-twisting, dragging and hair-pulling.

As a result of their abuse, some respondents suffered negative consequences – mainly bruises, missing out on school or being confined to the home. Among those who faced confinement, 38.4 per cent were physically harmed and about 10 per cent missed school as a result of the violence. About 11 per cent of those who suffered fumigation (for example, forced inhalation of chilli powder) required medical care and 19 per cent were scarred.

Responses from both child and young adults pointed to fathers, mothers and older brothers as the most common perpetrators of physical abuse. Parents disclosed that they themselves or other family members used violence to punish and discipline their children. The main perpetrators of physical violence in the community were teachers and fellow students, followed by neighbours and community members, including peers.

### Psychological violence within the home

The study also explored different forms of psychological violence and found that most children (both girls and boys) were shouted or screamed at more than they were exposed other types of psychological violence. While children experienced psychological violence across all age groups, young adults indicated that they had faced this type of abuse most when they were aged 14-17.

Mothers were the main perpetrators of almost all types of psychological abuse. More than half of all parent respondents (56.2 per cent) admitted that they shouted or screamed at their children, while 22.6 per cent also reported that other family members shouted or screamed at their children.

### Sexual violence against children

The study considered the prevalence of various forms of sexual violence against children. Both children and young adults reported that girls were more likely to face most types of sexual violence than boys. Children and young adults agreed that more boys were exposed to pornography, while among the child respondents, boys were also more likely to see someone expose his/her genitals. Older children (aged 16-17) were relatively more likely to be exposed to sexual violence than those in the other age groups.

Unlike perpetrators of physical and psychological abuse, the majority of those who committed sexual violence against children were non-relatives or distant relatives. When it came to reporting incidents, sexual violence – unlike cases of physical and psychological violence – was mainly reported to immediate family members.

Of the sexual offences which occur in the community, most child and young adult respondents said that being approached or talked to sexually and being fondled were the most common. The study found that girls were relatively more exposed to sexual violence than boys. Among young adults, more girls faced rape or forced sex, sexual favours, commercial sex work and sexual trafficking. Among younger children (11-13 years old), the most common forms of abuse were being forced to watch or look at pornography and sexual provocation.

### Negligent treatment of children

The study also examined negligent treatment of children. The gender distribution shows that, among those child respondents who were neglected, 72.2 per cent of boys stated that they were neglected and hungry. Fathers were the main perpetrators of this type of abuse, followed by mothers and stepmothers.

## Conclusion and recommendations

The report concludes with the following major recommendations that highlight the key perspectives emerging from the findings of study.

- Interventions, which aim to create awareness and understanding of violence against children and the rights of children

   at household, community, institutional and policy levels – are vital.
- Greater attention towards the reporting of all forms of violence against children are needed. This includes: addressing the underlying causes of under-reporting, making reporting more 'child friendly', introducing interventions aimed at building the capacity of law-enforcement bodies and revising legal frameworks and investigation procedures.
- Better coordination and partnerships that help plug the gap in the provision of services to children who face violence are required. This would include a review of legal procedures and mechanisms that facilitate collaboration and proper definition of the roles and responsibilities of the various bodies or organisations engaged in child protection.
- Further studies particularly at regional, zone and district levels – are needed to help strengthen and define the activities of organisations and bodies engaged in child protection. This includes in-depth studies which are more appropriate for dealing with the sensitive issues concerning psychological and sexual violence, which are not easily unravelled by conducting surveys.



# The role of social norms and practices in the transformative development of adolescent girls

Nicola Jones, Bekele Tefera, Janey Stephenson, Taveeshi Gupta and Paola Pereznieto with Guday Emire, Betlehem Gebre and Kiya Gezhegne, Overseas Development Institute

## Introduction

The Ethiopian Government's commitment to promoting gender equality has resulted in dramatic improvements in girls' lives. Compared to figures in 1994, more primary school-age girls are in school, maternal mortality ratios have improved and life expectancy at birth for girls has risen.

These improvements notwithstanding, girls remain particularly vulnerable to constrained life choices, largely because of prevailing gendered social norms. They are less likely to have access to and complete formal education, more likely to be married as children (to men who are, on average, five years older), and are growing up in a culture in which gender discrimination permeates social institutions.

This report examines the key drivers of shifting and persisting social norms surrounding early marriage in the Amhara region of Ethiopia, and its effects on adolescent girls' educational opportunities and broader wellbeing. It focuses on how gendered social norms are shaped by individual agency, socioeconomic conditions, demographic factors and social institutions.

## Methodology

The primary research took place in three rural kebele towns chosen because of their diversity in terms of demographics and geographical proximity to migration hubs such as Sudan and Yemen. A number of qualitative methods were used to collect the data:

- Group community mappings/historical timelines: To understand shifts over time in social norms and possible drivers; to contextualise findings and to unpack minority status.
- Small group discussions with girls and boys (respectively): To explore perspectives on social norms, and the reference groups who monitor these; to understand the role of peers/friends/siblings and to test scenarios.
- In depth interviews with boys: Use of participatory approaches including reactive tools and visual tools to unpack perceptions on gender.
- Focus group discussions with adults: To explore adults views on social norms for adolescent girls – and the extent to which they are or are not changing over time and why.
- Intergenerational tools: To explore shifts in the relative importance and framing of a particular social norm across generations.
- Outlier case studies: To explore examples of adolescents who fall at one end of the spectrum or other (full compliance, or non-compliance/transformation) and to unpack what contributed to their experiences.
- Key informant interviews: To gain expert insights into why a social norm is sticky, flexing or transformative; to explore local blockages to political ideologies which sought to operate directly on norms – for example, religious authorities, elders, etc.

### Findings(included but are not limited to)

### **Getting married**

- There has been an increase in the average age of marriage. Changes in people's perceptions about the appropriate age for marriage can be attributed to education, local legal monitoring, and greater awareness of illnesses associated with early pregnancy such as fistula.
- Legal constraints have, to some extent, pushed many of these marriages underground, leaving girls more unprotected.
- Early marriage is still an important 'coping mechanism' for families, with girls married off to reduce costs to the family and sometimes to obtain bride price.

### **Being married**

- Many young married girls report that they were unable to continue their education without the support of their husbands.
- While there was general agreement that domestic abuse had decreased, domestic abuse thrives in relationships where the wife has no access to an independent income.
- A growing number of girls are avoiding early marriage, mainly through parental support, as well as local government and NGO efforts. Some girls spoke about divorce as a route to freedom after an early marriage.

#### **Drivers of Change**

- Mobile phones (while are usually borrowed from parents) have reduced girls' isolation and opened up new horizons.
- School clubs in Kobo and Kelala seem to be making a difference, some supported by NGOs or teachers.
- Despite greater access to information on sexual and reproductive health, adolescent girls are still, in general, restricted in making decisions about their own sexuality.
- Domestic violence is still seen as normal practice and is generally endured, if not condoned.
- Some girls have the support of a family member or teacher to continue their schooling.

- The position of power for religious leaders has both positive and negative consequences for young girls.
- Role models were also found to be an inspiration for young girls to migrate. However, there are no efforts by local authorities or the community to ask these 'role models' to encourage girls to stay in school.
- The importance of engaging men and boys in promoting gender equality and increasing girls' opportunities emerged strongly in the fieldwork

### **Inhibitors of change**

- While some parents are supportive of education, other parents send their children to school out of fear of the legal or financial penalties. The cost of education materials is seen as an additional financial burden.
- Existing norms on filial piety are often prioritised over girls' rights and wellbeing.
- Despite significant improvements in education supply, girls' drop-out rate is still very high, especially at higher levels of primary and secondary school. Key reasons include:
  - Parents consider girls' education as a waste of time. Some girls believe this as well.
  - Girls spend less time on homework and study, so perform worse in school.
  - Distance to secondary school causes safety concerns for girls.
- Despite progress on information, family and community structures have not changed enough to give adolescent girls a supportive context to enhance their own wellbeing.
- Information for girls out of school is inadequate. With a focus on HIV and family planning, information on issues such as menstruation is limited.
- Discussions indicated that migration has a big impact on young people's aspirations. Participants report that some returnees become commercial sex workers to support themselves. Migration seems to act as a force that increases the likelihood of early marriage for some girls, but reduces it for others.

## Conclusion

Ethiopia has made tremendous progress recently in enhancing women and girls' rights. The findings suggest that gendered social norms for adolescent girls in Amhara are shifting, albeit in a highly uneven manner. As a result, adolescent girls in the region continue to face numerous challenges that result in a poor quality of life.

### **Policy implications**

- Policy and programming from national to local levels need to be informed by dynamics that limit girls' ability to claim and benefit from their entitlements.
- Work with communities including with men and boys, elders and other opinion-makers – is critical to change the attitudes that hinder girls' development.
- Targeted interventions for adolescent girls are needed, including:
  - Youth groups for girls (in/out of school) as safe spaces for social support. Non-formal secondary education for girls who have dropped out
  - Skills training and community crèches to support girls' abilities to take advantage of limited income-generating opportunities.
  - Greater understanding of adolescents involved in international migration to inform safe migration programming.

## Recommendations

- Given the key role of education in shifting gender norms, ensure continued and expanded support to enable girls to attend school and receive quality education.
- Encourage progressive role models for adolescents so that they can imagine future lives that are different from those of their parents.
- Enhance and provide support services for girls who are married.
- Invest in school clubs for girls at risk of child marriage.
- Engage more boys and men in conversations about gender equality and family planning, and encourage new masculinities.
- Empower communities to have a 'bottom-up' approach to changing gender norms.

## An analysis of the trends, differentials and key proximate determinants of infant and under-five mortality in Ethiopia

Gebeyehu Abelti, Terefe Bogale, Tesfayi Gabreselassie and Roger Pearson MoFED and UNICEF

## Introduction

The impact of childhood mortality rates on a country's progress towards social, economic and health development cannot be underestimated. It is a critical element in the calculation of overall mortality, since the highest risk of death and proportion of deaths occur during childhood. Along with fertility and migration, it is one measure that helps determine population size and growth rate, the age-gender distribution and the spatial spread of the population. The extent to which the right to life is enjoyed can also be summarised by tracking trends and disparities within these figures.

The United Nations enshrined the right to life in the Declaration of Human Rights (UN, 1948) and for children this is reaffirmed in the Convention of the Rights of the Child.

Millennium Development Goal Four (MDG 4) is a target to reduce under-five mortality rates, at global level, by two-thirds over the years 1990 to 2015. The Ethiopian government has prioritised MDG 4 as one if its own national development targets. More recently, the Growth and Transformation Plan of Ethiopia has outlined the strategic measures that can significantly contribute to reducing childhood mortality.

This report details the findings of an analysis of the trends and differentials of childhood mortality in Ethiopia and presents a comprehensive picture of the major determinants shaping the country's outlook. Drawing upon data from Ethiopia Demographic and Health Surveys (EDHS), it also provides recommendations for sustaining the improvement already being achieved.

## Methodology

While EDHS for 2000, 2005 and 2011 were used for trend and level analysis, the EDHS for 2011 was also used for the analysis of key determinants of infant and under five mortality. Two dependent variables were used in the analysis:

- Infant mortality the probability of dying before the first birthday;
- Under-five mortality the probability of dying between birth and the fifth birthday.

Based on the availability of reliable data in Ethiopia and on studies in other countries with a similar profile, three categories of these variables were chosen:

- *Child characteristics:* Birth interval, gender and number of siblings
- *Mother characteristics:* literacy, age at birth, media exposure, and number of children born
- *Household characteristics:* wealth, religion and ethnicity, residence, access to safe water and toilet facilities

The analysis took place in two stages:

- *Stage one:* Trends and differential analysis of infant and under-five mortality by background characteristics.
- *Stage two:* Multivariate analysis for assessment of determinants of infant mortality rates and under five mortality rates.

The analysis was based on 32,388 births (31,618 single births and 770 multiple births) in the five years preceding the dates of surveys.

## Findings

The results from the level and trend analysis indicated that all the five childhood mortality indicators (neonatal, postnatal, infant, child and under-five mortality) have been steadily declining over the last decade in Ethiopia. For instance, the infant mortality rate has declined from 97 deaths per 1000 live births in 2000 to 77 deaths per 1000 live births in 2005, to 59 deaths per 1000 live births in 2011. This is equivalent to a 39 per cent reduction from 2000 to 2011. Similarly, under-five mortality has shown a continuous reduction over time; from 166 deaths per 1000 in 2000 to 123 deaths per 1000 in 2005, and to 88 deaths per 1000 in 2011. This is equivalent to a 47 per cent reduction in the level of under-five mortality from the year 2000. However, the contribution of neonatal mortality to infant mortality, both by region and at national level has increased over time.

The significant determinants of infant mortality were found to be: gender, birth size, birth interval, mother's education, mother's marital status and access to an improved toilet facility. Likewise, under-five mortality is influenced by the same characteristics. Region of residence was also a significant predictor of infant and under-five mortality. However, the significant difference between the reference (Addis Ababa) and other regions was more prominent for under-five mortality than it was for infant mortality.

Findings of note include:

### **Child characteristics:**

- Male children are 14 per cent more likely to die before their first birthday than girls. This increases to 17 per cent before their fifth birthday.
- While birth order is not significant, the interval between each birth is. Children born after an interval of four years or more are 58 per cent less likely to die before their first birthday compared the firstborn. 52 per cent are less likely to die than firstborns before their fifth birthday.
- Birth size also plays a significant role in infant and under five mortality; unexpectedly the analysis found that smaller babies are more likely to survive than average to large babies.

### **Mother characteristics**

• A mother's education is the most important determinant of infant and under-five mortality. Babies born to mothers who attended secondary or higher education were found to be 42 per cent more likely to reach their first birthday

compared with babies whose mothers did not. This rose to 48 per cent for children reaching their fifth birthday.

• Children whose mothers are married have a lower risk of mortality.

### Household characteristics

- While place of residence is not found to be a significant predictor for infant and under-five mortality, region is. The analysis found a significant increase in two regions, Amhara and Gambella, compared with Addis Ababa.
- Five regions were identified as having a significantly higher number of deaths among under-fives. These were Afar, Amhara, Benshangal-Gumuz, SNNP and Gambella.
- Although access to improved sources of drinking water was not found to be a significant predictor, access to toilet facilities was. Children of households with improved toilet facilities have a lower risk of dying than children that do not.

## Conclusion

Ethiopia is striving to achieve the MDG goal 4 of reducing the under-five mortality rate by two-thirds (67 per cent) from the estimated level in 1990 by the end of 2015. The analysis shows that the trend is on track to meet that target. Compared to the 1990 infant and under-five mortality estimates

(118 and 198 deaths per 1000 live births, respectively), the overall declines are 50 and 56 per cent respectively.

## Recommendations

- With the exception of child's gender, the challenge of shorter birth intervals, and the low level of mothers' education are variables that, with concerted efforts, can be improved by further strengthening interventions.
- More communications are needed on the negative impacts of shorter birth intervals on the health of children and mothers and on the use of contraceptives for spacing and/or for limiting pregnancies. Contraceptives must be made fully available and accessible.
- Greater attention needs to be placed on reducing neonatal mortality rates by focusing on maternal and child health at the time of birth by increasing the proportion of births that are attended by skilled birth attendants.
- Further research is needed to understand why under-five mortality rates appear to be so high in Beneshangul-Gumuz.

## About the Child Research and Practice Forum (CRPF)

The need for a link between research, policy and practice on the issues of children in Ethiopia resulted in the establishment of a Forum through which practitioners, policy makers and researchers come together to discuss findings of research to improve practices and provide inputs into policy design. The idea was proposed during a consultation workshop to prepare a study on orphans and vulnerable children (OVC) that was undertaken by Young Lives. Workshop participants raised the concern that research on all aspects of children's lives was often not shared and made publicly available so that it can be useful for practitioners and policy makers. The idea was further developed through a series of discussions and consultations with Young Lives' Partners, leading to the establishment of the Forum. The Forum now has a coordinator hosted by Save the Children and a 12 member Steering Committee composed of representatives from the African Child Policy Forum (ACPF), CHAD-ET, Consortium of Christian Development Associations (CCRDA), Forum on Sustainable Child Empowerment (FSCE), Norwegian Church Aid, OAK Foundation, Plan Ethiopia, Save the Children, UNICEF and Young Lives.

The overall goal of the Child Research and Practice Forum is to create a stronger connection between research, policy and programmes related children in Ethiopia. It has the following specific objectives:

- 1. Communicate new research from Ethiopia, the region and globally and other new documents related to children to a wide audience
- 2. Promote the usage of existing (online and physical) resource centers
- 3. Facilitate dialogue and consultation between researchers, policymakers and practitioners working on children's issues
- 4. Provide practitioners with the skills to use research to strengthen their programmes for children

Towards this end, the Forum has launched a monthly seminar series, which is conducted every last Thursday of the month at the Ministry of Women Children and Youth Affairs Office. The monthly seminar is open to policy makers, researchers and interested individuals to participate both as presenters and as participants.

