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## **Quarterly Bulletin of the Vienna NGO Committee on the Family**

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Dear Readers of 'Families International',

The Covid-19 Pandemic is continuing to be a major factor in all our lives, especially for families, and from various perspectives. Issue No. 116 focuses, inter alia, on childcare and the impact of Covid-19 on work and family life, in a text from UNICEF from 2020. Further recent texts from UNICEF, one dealing with Covid-19 and Children, which enquires how prepared are global education systems for future crises, and a text dealing with interventions to reduce violence against children, are also included.

This issue also focuses on 'What children look for in their parents' in a text from The International Federation for Family Development, and in a text from Make Mothers Matter, on, amongst others, gender, as well as on parents and children's issues. Both organisations are members of the Committee on the Family. Finally included, is a list of recent and upcoming events and a 'Personal Note from the Editor'.

Sincerely,

Peter Crowley Ph.D.

Editor

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From UNICEF



## Childcare in a global crisis: the impact of COVID-19 on work and family life

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The COVID-19 crisis that has engulfed the world during 2020 challenges children's education, care and well-being. Many parents struggle to balance their responsibilities for childcare and paid employment, with a disproportionate burden placed on women. Even before the COVID-19 pandemic, the situation of families had been described as 'a global childcare crisis'.<sup>1</sup> It is estimated that over 35 million children under five years old are sometimes left without adult supervision, a factor often linked to economic pressures on parents to work. With the arrival of the pandemic, 99 per cent of the world's 2.36 billion children found themselves in a country with some movement restrictions, including 60 per cent under some form of lockdown. This has made childcare an even greater challenge for parents.

Globally, the work of childcare is done predominantly by women. This includes mothers and also other female caregivers such as grandmothers, siblings and workers in the childcare sector. In 2018, 606 million working-age women considered themselves to be unavailable for employment or not seeking a job because of unpaid care work, compared to only 41 million men.<sup>2</sup> This imbalance has major implications for women's employment and income opportunities and for children's development and well-being.

UNICEF has previously called for a set of four family-friendly policies for children in the early years, comprising paid parental leave; breastfeeding support; accessible, affordable and good-quality childcare; and child benefits.<sup>3</sup> We have shown that even some of the world's richest countries fare poorly in terms of these policies, which is a reflection of their policy priorities rather than available resources.<sup>4</sup>

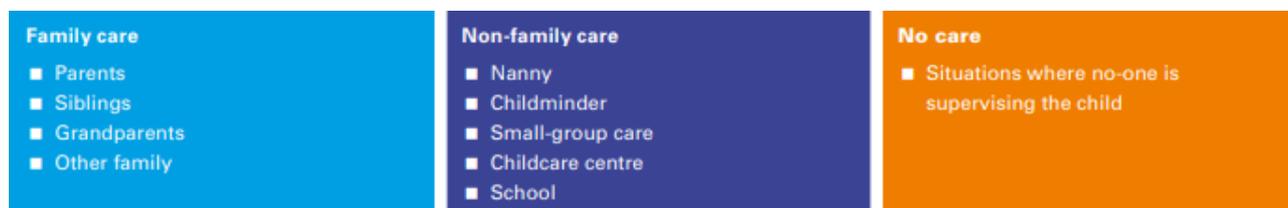
This brief takes a global perspective on one of these four aspects – childcare in the early years. In the current context of lockdown and school closures, lack of childcare is likely to be one of the worst affected services available to families. This paper paints a picture of current progress towards ensuring that all families have access to affordable and high-quality childcare, and considers the implications of the current COVID-19 crisis for childcare globally. We show how governments and employers can help parents to address the global childcare crisis through paid parental leave, followed by accessible, affordable and high-quality childcare. COVID-19 economic recovery packages have, to date, directed the vast majority of resources to firms rather than to households. This can be changed through public provision of childcare, subsidies, social protection floors and tax incentives.

## DIFFERENT FORMS OF CHILDCARE

Care for children (up to school entry) can be provided through various means both within and

outside their usual home(s) (see *Figure 1*). There are also times when children may not receive sufficient care.

**Figure 1: Types of childcare\***



**Source:** Based on ILO (2010) <sup>5</sup>

\* This brief focuses on childcare in family settings but we acknowledge that some children do not live with their family and may receive care within institutions and other settings

## THE STATE OF CHILDCARE GLOBALLY

The care that children receive should provide them with affection, protection, stimulation and nutrition and, at the same time, enable them to develop social, emotional and cognitive skills. These goals can be achieved in many ways, including through high-quality childcare both within and outside the family. Rather than viewing one form of care as inherently better for children, this paper considers the benefits and risks within particular contexts.<sup>6</sup>

Decisions about who provides childcare not only affect the child, but also the people caring for them. Parents or caregivers who stay at home to bring up young children – most commonly women – forego other possibilities. Their lives are shaped in fundamental ways by this unpaid work. Globally, women are 4 per cent more likely than men to live in extreme poverty. The gender gap is much larger in the 25–34 age group, where there are 122 women living in extremely poor households for every 100 men.<sup>7</sup> This has longterm implications for children’s well-being, including ongoing family income poverty. On the other hand, juggling the responsibilities of caring and earning can also have tremendous implications for parents. An estimate from 31 low-income countries in the early 2000s suggested that

39 per cent of working women cared for their children while also working.<sup>8</sup>

### Family care

#### Care provided by parents

Most children receive their primary experiences of caring within their families from parents, siblings and grandparents. In 66 low- and middle-income countries with available data in 2014, women spent more than three times longer on care and housework than men.<sup>9</sup> Family care has been found to have substantial benefits for children, including the development of early and secure attachments. Recent modifications in parental leave policies in some European countries, which provide time off for all working parents, with limits on how much can be transferred between parents,<sup>10</sup> are aimed at facilitating and promoting children’s early bonding with both parents and a more equal distribution of childcare between women and men. Similarly, being cared for by siblings, grandparents and other family members can facilitate the development of important bonds, and provide a nurturing and stimulating environment, especially in the early years of life.

On the other hand, not all family caring experiences are positive for children. For example, in

74 low- and middle-income countries, 80 per cent of children aged 2 to 4 years experienced violent discipline (including physical punishment and/or psychological aggression) from parents in the month preceding the survey. Its prevalence ranged from 1 in 3 children in Cuba to over 9 in 10 children in Egypt, Eswatini, Ghana, Palestine and Tunisia.<sup>11</sup> Being cared for by another child can also adversely affect the younger child through an increased risk of harm and injuries.<sup>12</sup> The primary involvement of females in early childcare is also a major factor in intergenerational transfer of gender stereotypes, and may contribute towards the formation of gender identities among young children.<sup>13</sup>

Even if family care is predominantly a positive experience for children, the implications for those caring for children also need to be acknowledged. In this context, the well-being and mental health of caregivers themselves are critical. For the parent, caring for a child can be one of life's most gratifying experiences. Still, without adequate support, parents can become stressed, exhausted and forced to make sacrifices in their social life, education and employment.<sup>14</sup> When women from low-income households start paid work, their overall workload of paid and unpaid work increases, as shown by surveys conducted in Colombia, Ethiopia, the Philippines, Uganda and Zimbabwe.<sup>15</sup> Globally, 4 out of 10 working women fall outside social protection systems: 2 in 3 in sub-Saharan Africa and 3 in 4 in Southern Asia.<sup>16</sup> These are regions with high proportions of women working in the informal sector: almost 90 per cent of women in Africa and 64 per cent in Asia and the Pacific were working in the informal sector in 2016.<sup>17</sup> These are also the regions where women are most likely to take their children to work. The requirement of multi-tasking – combining childcare and work – pushes some mothers into the informal economy,<sup>18</sup> which leads to a direct loss of earnings and traps them in low-paid work. This contributes to labour market segmentation, with women concentrated in insecure but flexible jobs that allow them to have their children nearby, although this often compromises productivity, child safety and women's

well-being. It also reinforces weak or non-existent social protection coverage afforded to many informal sector jobs.

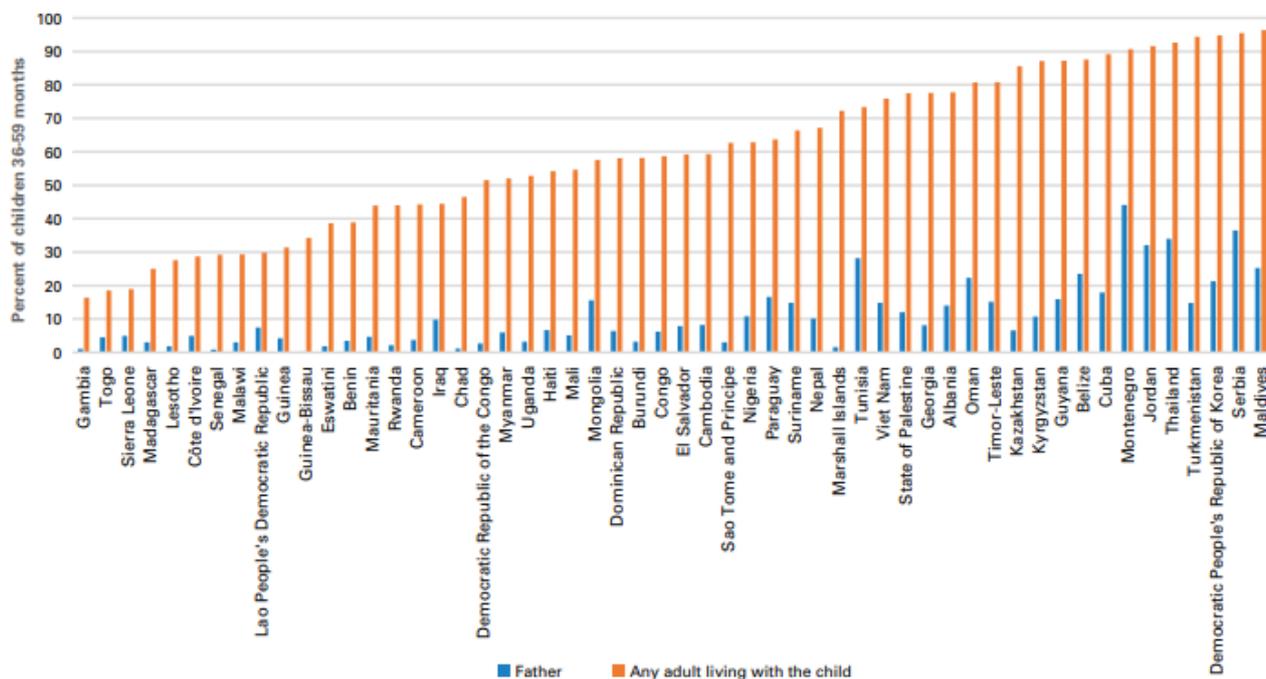
Stress, exhaustion and sleep deprivation, as well as a limited awareness of the importance of early years for child development, can hamper the quality of parental care. In 54 low- and middle-income countries with recent data, only 6 out of 10 children aged 36 to 59 months had received social-emotional and cognitive stimulation from any adult in the household during the three days preceding the survey, ranging from fewer than 1 in 5 children in Gambia, Togo and Sierra Leone to more than 9 out of 10 children in Montenegro, Jordan, Thailand, Turkmenistan, the Democratic People's Republic of Korea, Serbia and the Maldives (see *Figure 2*).

Mothers were the adults most likely to engage emotionally and cognitively with the child. In the same group of countries, fathers' involvement was rare: only 11 per cent of children were engaged emotionally and cognitively by their father. This ranged from 1 in 100 children in Guinea-Bissau, Senegal and Gambia, to 1 in 3 in Thailand, Serbia and Montenegro.

Both at the individual<sup>19</sup> and at country level,<sup>20</sup> children who were more likely to be stimulated by a mother were also more likely to be stimulated by a father, potentially pointing to care gaps between two-parent households in which both parents are heavily involved in childcare, and households with both parents spending little time on emotionally engaged childcare.

An example of the growing engagement of parents is provided in Jordan where, in the 1990s, research showed a widespread lack of awareness of the role of play and engaged care in children's development. For almost a quarter of a century, Jordan has been running the Better Parenting Programme, which trains parents in nurturing children, including combating harsh parenting practices.<sup>21</sup> An initial evaluation of the programme found improvements in knowledge and engagement, and positive changes in disciplinary practices.<sup>22</sup>

**Figure 2: Children with whom an adult household member has engaged in four or more activities to provide early stimulation and responsive care in the last three days**



**Notes:** Only countries with data available for 2014–2018 are included. Social-emotional caregiving activities include playing with the child, taking the child outside the home, or singing songs to the child. Cognitive activities include naming, counting, drawing, reading or telling stories to the child.

**Source:** Authors' presentation based on UNICEF global databases, MICS.

### Care provided by grandparents

In most parts of the world, grandparents spend substantial amounts of time caring for their grandchildren.<sup>23</sup> Many children live in multi-generational households with at least one grandparent, or have grandparents as primary caregivers in cases where their parents have died or have migrated for work. The effects of being cared for by grandparents some of the time have been associated with more positive outcomes across different economic contexts, including pro-social behaviours and school engagement,<sup>24</sup> some aspects of cognitive development,<sup>25</sup> and health and education.<sup>26</sup> For grandparents who take on child-care roles within the family there may be both positive and negative aspects. For example there is mixed evidence of psychological impacts, and this may vary by context.<sup>27</sup>

### Care provided by siblings

Around the world, it is common for older children to take on a caring role for younger children, particularly siblings. In 31 low-income countries with available data, 15 per cent of children were cared for by siblings: 12 per cent by an older sister and 3 per cent by an older brother.<sup>28</sup> In some countries, as many as half of children under the age of five are regularly cared for by a child under the age of 10.<sup>29</sup> For 47 per cent of girls in Zimbabwe, 43 per cent of girls in Colombia, 27 per cent of girls in Uganda and 25 per cent of girls in Ethiopia, caring for younger siblings is a daily duty.<sup>30</sup> These proportions can be even higher in rural areas. For example, in some parts rural Ethiopia, most girls aged five to eight years care for siblings daily.<sup>31</sup> Although older children can develop new skills and bond with their younger sibling, the role of childcare can interfere with their social

life and educational progress. Taking on household roles of this kind has been linked to increased risk of school drop-out during early adolescence, particularly for girls.<sup>32</sup> It can also create a vicious circle linked to household income: 23 per cent of children in poorer families and 6 per cent of children in richer families were cared for by their siblings.<sup>33</sup> Concurrently, children from poorer families already tend to have worse educational outcomes. This additional caring burden can lead to them falling even further behind.

### **Non-family care**

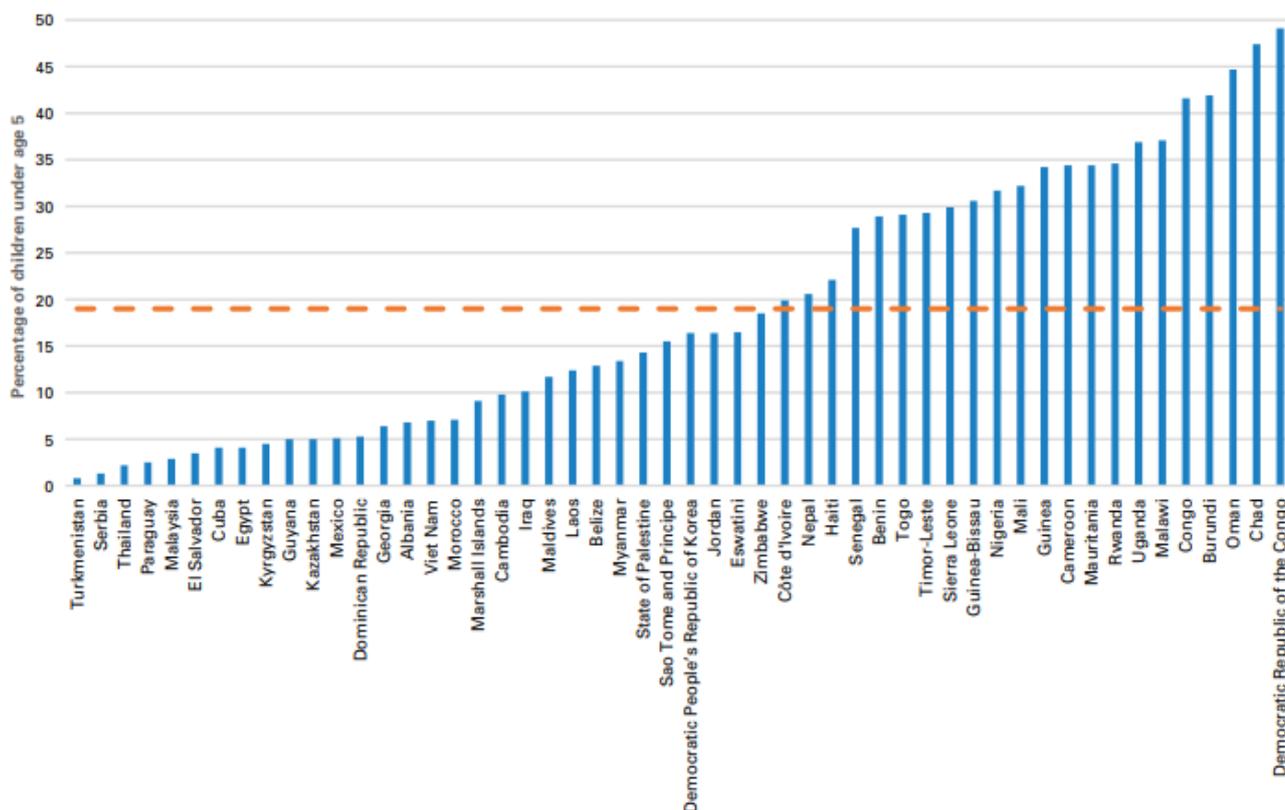
In richer households in low-income countries, a substantial amount of childcare is done by domestic workers. Globally, 70 million people are domestic workers, 70 per cent of them women.<sup>34</sup> Most domestic work is in the informal economy. Nine out of 10 domestic workers are excluded from social security systems, which means they have no rights to maternity leave or sick leave.<sup>35</sup> One in six is from a migrant background, a group that is vulnerable to exploitation and isolation. The use of organized childcare outside the home is a solution that can relieve fatigued parents and enable them to attain a more manageable balance between caring and earning. High-quality, centre-based care may also have benefits for children in particular contexts. Some of the most compelling evidence comes from the USA, where long-term evaluations of experimental interventions have demonstrated positive long-term cognitive outcomes of good quality early childcare, particularly those with an educational

component.<sup>36</sup> This may be particularly beneficial in preventing children from disadvantaged backgrounds from falling behind their peers in cognitive development in the early years.

### No care

As a result of the pressures described above, many children around the world are left without care for periods of time, even at very young ages. The neglect that children experience through the absence of care can have substantial negative effects on their development. In 52 low- and middle-income countries, an average of one in five children were without adult care for at least an hour in the week preceding the data collection, ranging from 1 in 100 children in Turkmenistan and Serbia, to 1 in 2 in Chad and the Democratic Republic of the Congo (see *Figure 3*). Some of these children were in the care of a sibling under the age of 10. Others were alone. Another study estimated that the proportion of children under five years left completely alone ranged from less than 1 per cent to over 35 per cent across 61 low- and middle-income countries.<sup>37</sup> The decision to leave children uncared for can weigh heavily on parents, who are aware of the risks but are presented with an impossible choice of nurturing their child or earning money.<sup>38</sup> Being left alone at such a young age increases the risk of undernourishment and immediate physical harm (including death),<sup>39</sup> and has negative consequences for children's long-term developmental outcomes.<sup>40</sup>

**Figure 3: Percentage of children under age five left alone or under the supervision of another child younger than 10 years of age for more than one hour at least once in the last week**



**Note:** Only countries with data for 2014–2018 are included.

**Source:** Authors' presentation based on UNICEF global databases, MICS.

## CHILDCARE POLICIES

We have painted a broad picture of what has been termed a 'global childcare crisis' in which caregivers, and in particular mothers, are 'pushed to their limits by the twin demands of caring and providing for their families'.<sup>41</sup> The clearest policy solution to this crisis is first to provide adequate and gender-balanced parental leave policies and then to improve access to organized non-family childcare, to enable both parents to balance caring and earning responsibilities more effectively and equitably. It is for this reason that Goal 4 of the 2030 Agenda for Sustainable Development includes a target to ensure that, by 2030, all girls and boys have access to good-quality early childhood development, care and pre-primary education. The purpose of this target is to ensure that children are ready for primary education. It is also important that primary

education is ready to receive children. Interactions with other children in a well-supervised group setting can support children's social, emotional and behavioural development, thus preparing them not only for 'education' but also for their lives inside and outside school. At the same time, the availability of accessible, affordable and good-quality childcare provides greater opportunities for parents and helps them to juggle their roles as carers and earners. There is a range of evidence that access to childcare<sup>42</sup> and to early childhood education services<sup>43</sup> can facilitate women's ability to do paid work, which has wider economic benefits for society.<sup>44</sup> For children, the benefits of high-input pre-school programmes with a strong educational component are stronger and more consistently found than the benefits of organized childcare more generally. Some of the most compelling evi-

dence is from highly targeted and intensive initiatives and it is not clear to what extent this evidence transfers to more universal initiatives.<sup>45</sup> Much of the early evidence on this topic was from the USA. Yet, promising programmes in one context often do not transfer successfully to other economic, social and cultural contexts. The global base of evidence is improving, but there are still gaps, particularly in terms of longitudinal evidence into adulthood.

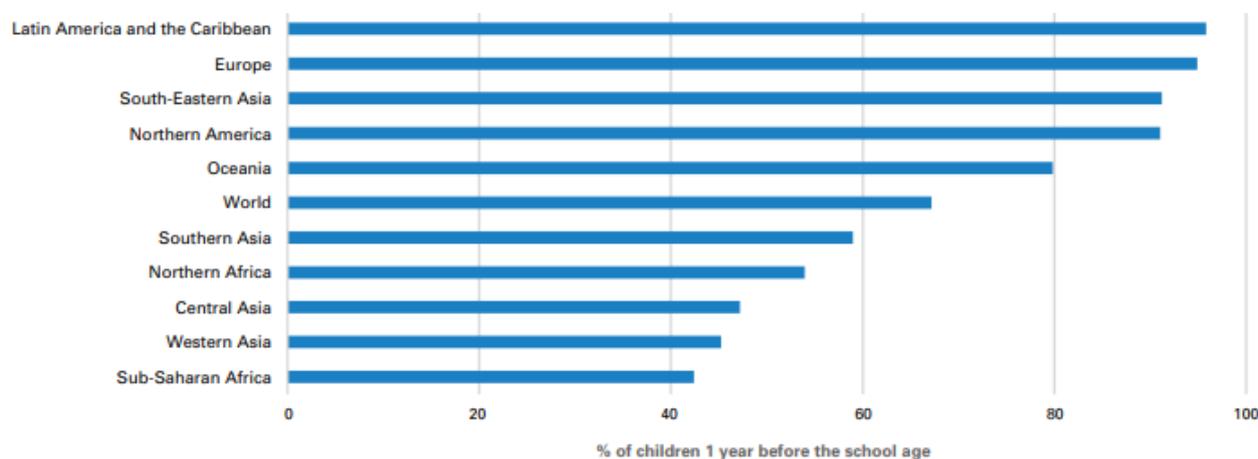
Access to early caring and educational experiences outside the home can have an equalizing effect on children’s development and life chances. The challenge now is how to ensure that such services are **accessible, affordable** and of **high quality**.

**Accessibility** An imperfect measure of accessibility is enrolment. Out of 166 countries, 74 (45

per cent) provide tuition-free pre-primary programmes of at least one year’s duration, but this drops to 15 per cent for low-income countries.<sup>46</sup> By contrast, 96 per cent of countries provide free primary education.<sup>47</sup>

**Affordability** Pre-school enrolment has been found to be strongly influenced by GDP and childcare costs.<sup>48</sup> In 2018, Latin America had the highest pre-school participation, at 96 per cent (see Figure 4). Such high enrolment is possible due to affordability. Parents who use public services typically spend on childcare less than 20 per cent of per-capita household budget.<sup>49</sup> Similar enrolment (95 per cent) was quoted for Europe. Despite the continent’s wealth, 38 per cent of parents who used organized childcare found its cost difficult to cover.<sup>50</sup> The high cost of childcare is known to be a factor in deterring women from returning to work in the USA and other high-income countries.<sup>51</sup>

**Figure 4: Enrolment in education and care one year before school age in 2018, by region**



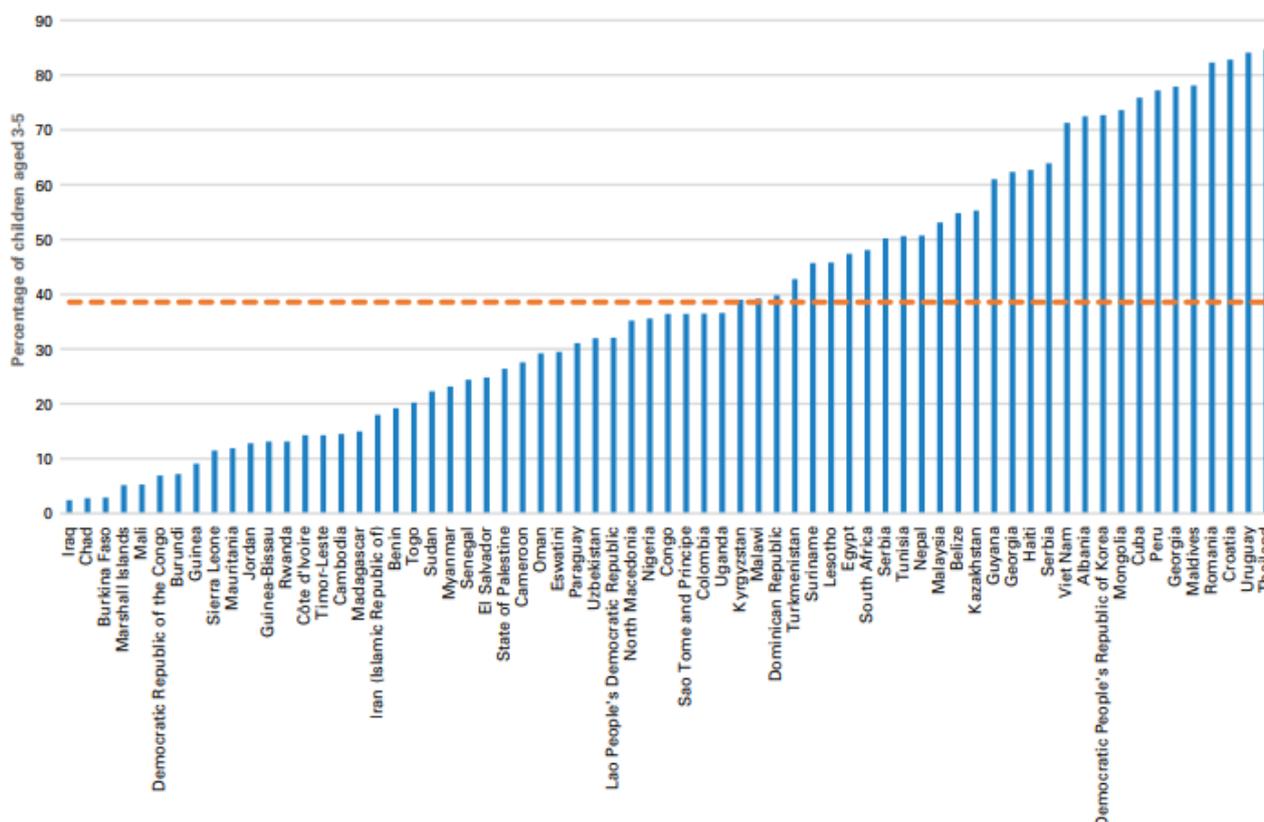
Source: UNSTATS, accessed 5 May 2020.

**Variations in quality of childcare**

Before school, some children attend childcare centres. In the 3–5 year age group, 39 per cent of children from 67 countries with available data attend childcare centres (see Figure 5).<sup>52</sup> Programme quality is typically measured by caregivers’ qualifications and by the staff–child ratio. In the European Union, the average is 11 children

per staff member in pre-primary, and 6 in early childhood programmes. Some middle- and high-income countries also manage to keep a good staff–child ratio. For example, the corresponding figures are 12 and 5 in Chile and 15 and 8 in Brazil.<sup>53</sup> The quality of childcare is closely related to the working conditions of childcare workers. These workers often receive low pay and are not unionized, particularly in the private sector.<sup>54</sup>

**Figure 5: Percentage of children aged 3–5 attending an early childhood education**



**Notes:** Only countries with data for 2014–2018

**Source:** Authors' presentation based on UNICEF global databases, MICS.

### CHILDCARE IN THE COVID-19 CONTEXT

The COVID-19 crisis presents new challenges for childcare and for parents globally both in the short- and longer term. In many countries, the crisis adds an extra layer of difficulty on top of existing economic crises and other challenges. This includes humanitarian, fragile and very low-income settings.

The short-term challenges primarily stem from the measures taken by countries to attempt to control the spread of the virus. At the time of writing (May 2020), more than 80 countries have implemented partial or full lockdowns, affecting an estimated 1.4 billion children – approximately 6 out of 10 children worldwide. A further 100 or so countries have introduced restrictions on movement. These measures have often included the closure of childcare centres and schools. They have often also meant restrictions on other childcare options: for example, grandparents may no

longer be available to care for their grandchildren. Additionally, this situation leaves caregivers with little spare time to prepare good quality meals for their children. This combination of closures of services and restrictions leaves working parents of younger children in a predicament in terms of balancing family and work life, which can increase gender earning gaps as women cut back on paid work to care for children.<sup>55</sup> Research on COVID-19 is still new, largely self-reported and based on small samples, but initial results indicate that 1 in 4 quarantined parents showed some symptoms of mental ill-health compared with 1 in 20 non-quarantined parents.<sup>56</sup> Government measures to ease these pressures have varied, as described in the 'Spotlight' feature below.

## SPOTLIGHT: CHILDCARE SUPPORT IN RESPONSE TO COVID-19

In the most recent update of the Social Protection and Jobs Responses to COVID-19: A Real-Time Review of Country Measures,<sup>57</sup> nine of 195 countries report implementing childcare support in response to COVID-19. Examples of reforms include: the simplification of eligibility and access to child support and childcare benefits, including waiving health examination conditionalities (Austria) and simplified income reporting requirements (Germany); the continuation of support under special conditions, such as the provision of childcare services for essential workers during lockdown (Costa Rica); the adaptation of support to facilitate a move from day-care to home care during lockdown (Republic of Korea); the expansion of existing support, in terms of either leave or time available, coverage or amount paid (Poland, The Russian Federation); and the introduction of new support in the form of cash or vouchers, although eligibility rules may apply (Italy, Malta and Spain). These childcare provisions, as with many COVID-19 social protection responses, are temporary. Nevertheless, each provides an opportunity for the expansion or development of flexible and equitable childcare support for all families.

## LONG-TERM IMPLICATIONS

The shape of life after the initial crisis is gradually becoming clearer. In many contexts, as lockdown measures ease, parents are being expected to return to work, although schools and day-care facilities may still be closed and other

childcare options restricted. This creates an extremely difficult situation for parents and potentially a highly vulnerable one for children. We estimate that the COVID-19 crisis has already disrupted childcare and education services for at least 40 million children about to start school.<sup>58</sup>

The long-term implications of the COVID-19 crisis for childcare are not yet certain. While the implications for the mental health of both children and adults are as yet unknown, they may be substantial. What is already clear, however, is that a prolonged economic crisis is likely to follow the initial health crisis. This will place new stresses on many families with children. In low and middle-income countries, 86 million additional children are at risk of household poverty by the end of 2020.<sup>59</sup>

In the medium term, the reopening of life after the initial lockdown period does not mean that things will go back to how they were before. New measures will need to be taken to prevent further waves of infection, and this will have implications for many services, including childcare outside the home. Hygiene and distancing measures may require extra investment and/or reduced capacity, and this could make childcare less accessible and less affordable for parents. There may also be further waves of the pandemic, or similar crises in the future. It is therefore vital that governments and employers learn lessons about what has and has not worked, in terms of supporting families with children during the COVID-19 crisis.

## RECOMMENDATIONS

To address the global childcare crisis, there is a need to strengthen support for families with children in general, including the following recommendations.

1. Ensure adequate paid parental leave entitlement and related support for working mothers and fathers in the first year of a child's life to ensure that parents can spend time caring for and bonding with their child. Childcare support should immediately follow the end of parental leave entitlement.

2. Through government measures, improve levels of accessible, affordable and high-quality nonfamily

childcare, especially for disadvantaged families. It is vital that such provision does not become a victim of austerity.

3. Invest in the non-family childcare workforce, and their working conditions, to provide equivalence with other professionals working with children, and encourage the highest possible standards in both applicants and practice.

4. Deliver and align childcare services with other key family care policies, such as universal child benefits, to strengthen the childcare portfolio, and reduce

the risk of children's existing inequalities being replicated in public childcare settings.

5. Building on the data collection efforts of the SDGs, work jointly to improve the availability of comparable statistics related to childcare access, affordability and quality, for children of pre-school age, including for those aged under 3 years.

More specifically in response to the COVID-19 pandemic, the following measures should be considered:

1. Invest in government measures to support non-family childcare through, for example, public provision of childcare, subsidies, tax incentives and legal requirements for employers to provide or support childcare.<sup>60</sup>

2. In the face of the pandemic, many employers have adopted home working. However, working from home is not synonymous with flexible work. Employers should consult staff regularly to learn about their needs in times of restricted childcare options. Solutions might include flexible hours, compressed time, reduced overall time and staggered time.<sup>61</sup>

3. Even flexible time arrangements might be insufficient for single parents during a pandemic. Child allowances or partly statesubsidized paid leave should be considered in such circumstances.

4. To provide the necessary support to workers in the informal sector, governments can: extend access to social protection; ensure the rights and safety of essential informal workers; and support informal workers' organizations.<sup>62</sup>

5. Employers can also support all working parents by being flexible in response to their situations and needs, providing services when parents have to take direct responsibility for care (infants, sick children and so on) and supporting referrals to public services.<sup>63</sup>

6. During the COVID-19 outbreak, governments and employers, where relevant, should offer outreach to parents, particularly those in lowresource contexts. This could, for example, include public information campaigns and direct support and guidance on care, stimulation and play.

7. Governments should consider introducing social protection floors with basic universal social protection for families, including childcare support, building on

the expansions seen in COVID-19 economic recovery packages wherever possible.

8. When providing COVID-19-related support, governments should recognize that parents in the informal economy do not always qualify for income support and services. Recognizing the universal commitment to children's rights, under Article 2 of the United Nations Convention on the Rights of the Child, existing childcare benefits and services will need to be expanded to meet the needs of these children during the COVID-19 crisis and its aftermath.

9. The economic and social repercussions of COVID-19 promise to be wide reaching and long lasting. COVID-19 responses globally have made limited use of childcare support, despite the impact the lockdowns have had on family work and care. Governments should provide more support for parents with childcare responsibilities, reflecting both the differences in vulnerability to lockdowns (loss of employment), and the persistence and depth of the economic crisis.

10. The pandemic and its socio-economic fallout present a range of challenges to the mental health and psychosocial well-being both of children and their caregivers. Many will overcome their mental health issues if their basic needs are met, and if family, peer and community support is restored and strengthened. For those who need specialized mental health care, governments should seek to ensure this care is available, accessible and provided in a non-stigmatizing way.

These steps may help to mitigate the worst effects of the crisis on parents with childcare responsibilities and their children. The SDGs have committed all countries to ensuring that all girls and boys have access to good-quality early childhood development, care and preprimary education (Goal 4.2) and to recognize and value unpaid care and domestic work (Goal 5.4). Although these goals might be even harder to achieve during a global emergency, it is a question of priorities to safeguard investments in the future and ensure that children and their primary caregivers are not the ones to pay the highest price in times of crisis and global recession.

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**For every child, answers**



# Innocenti Research Brief

2020-24



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Office of Research – Innocenti

## Interventions to Reduce Violence against Children in Low- and Middle-income Countries

### Evidence and Gap Map Research Brief 1 | Overview of findings

This research brief was prepared by Ashrita Saran<sup>i</sup>, Ramya Subrahmanian<sup>ii</sup>, and Howard White<sup>iii</sup>

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#### ABOUT THE EVIDENCE AND GAP MAP

An Evidence and Gap Map (EGM) is a presentation of the available and relevant evidence on a topic. EGMs visualise what we know (and do not know) via a graphical display of areas with strong, weak, or no evidence.

This EGM provides an overview of interventions to reduce violence against children (VAC) in low- and middle-income countries (LMICs). It represents a first step towards developing an evidence architecture to inform policy, programme, and investment strategies to prevent VAC.

The EGM includes studies on all types of VAC: physical, sexual, and emotional. It includes studies on specific forms of VAC: corporal punishment, peer violence, intimate partner violence. A fourth category of 'unclassified' studies included research that addressed multiple or unspecified forms of violence.

The intervention-outcome framework of this EGM is based on the INSPIRE framework (WHO, 2016) which outlines seven evidence-based strategies to end VAC:

- implementation and enforcement of laws
- norms and values
- safe environments
- parent and caregiver support
- income and economic strengthening
- response and support services

- education and life skills

Evidence on strategies was further analysed to map to the following outcomes:

- direct impact on violence
- norms and values
- economic and social factors
- safety and risk factors for other harms
- health
- education
- availability of information on cost-analysis.

The evidence search included impact evaluations and systematic reviews published between 2000-2019, which assessed the effectiveness of interventions to reduce interpersonal VAC in LMICs ([World Bank, 2018](#)). The search included both academic and grey literature. A critical appraisal of all studies was carried out using standardized tools.

Using established inclusion criteria, a systematic search was conducted of English language publications available in academic and other databases online. 152 studies were identified, including 55 systematic reviews and 97 impact evaluations.

A second phase is underway to update the evidence base through a review of available studies in Arabic, Chinese, French, Portuguese and Spanish.

The production of evidence on interventions for reducing violence against children (VAC) has steadily increased over the years. Yet, gaps exist that need to be addressed when it comes to research investment priorities and future studies. This brief summarises the key findings from the [Evidence and Gap Map](#) (EGM). All technical details can be reviewed in [the main report](#).

#### WHERE ARE THE EVIDENCE GAPS?

##### By INSPIRE category:

- Most represented: Education and life skills
- Least represented: Laws, crime and justice and Safe environments

##### By type of violence:

- Most reported: Impact on physical violence
- Least reported: Sexual violence

##### By form of violence:

- Most addressed: Unclassified (multiple, unspecified form of violence), followed by intimate partner violence
- Least addressed: Peer violence

##### By outcomes:

- Most reported: Direct impact on violence, norms and values
- Least reported: Economic and social outcomes, cost-analysis, including cost-effectiveness

##### By intervention target group:

- Most covered: Adolescents
- Least covered: Urban populations, children with disabilities, ethnic minorities

##### By geographic distribution

- Most represented: sub-Saharan Africa
- Least represented: Middle East and North Africa

Overall, the EGM found uneven distribution of studies across and within regions. More studies focusing on low-income and conflict-affected settings, including cost-analysis are needed. Studies focusing on interventions linked to specific forms of violence, rather than multiple or unspecified forms of violence, could strengthen the understanding of factors that support effectiveness.

They could also help address specific gaps in the evidence base.

The roots of interpersonal violence are complex, the global scale is significant, and the consequences of such violence are enduring for children, families, communities, and societies. VAC results from the interplay of multiple risk factors spanning the course of a child's life, including their age and gender; and can lead to outcomes that last into adulthood. There is no single explanation for why some individuals behave violently toward others or why violence is more prevalent in some communities than in others.

Strengthening understanding of risk, protective, and underlying structural factors, as well as effective interventions, is essential for the development of evidence-informed policies and programmes grounded in sound theories of change. To this end, agreeing on operational definitions and methods can improve the quality of research, as well as the comparability and generalizability (i.e. wider applicability) of findings to support scaling up and adaptation across contexts. Additionally, reporting on the application of ethical standards should be made mandatory as part of funding applications and the publication of findings. This is important to promote the safety of respondents and research teams, as well as the quality of the data. The development of a tailored tool for the ethical appraisal of research on violence would be a valuable contribution.

#### 1. BACKGROUND TO THE EGM

More than 1 billion children - over half the children in the world - report having experienced some form of violence in a previous year ([Hillis, Mercy, Amobi, & Kress, 2016](#)). VAC includes all forms of violence experienced by children aged 18 years and under, whether perpetrated by parents or other caregivers, peers, romantic partners, or strangers ([WHO, 2018](#)). As defined by UNICEF, violence includes "all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment, or exploitation, including sexual abuse" ([article 19, paragraph 1, of the Convention., 1989](#)).

Violence can negatively affect physical, mental, sexual, and reproductive health, and may increase the risk of acquiring HIV in some settings ([WHO, 2017](#)). VAC is associated with poor educational outcomes, economic and food insecurity, parental unemployment, inadequate housing and other basic necessities for children and

families in low- and middle-income countries (LMICs) ([Peterman, Neijhoft, Cook, & Palermo, 2017](#)). The global costs related to physical, psychological, and sexual VAC have been estimated to be between 3 per cent and 8 per cent of global GDP ([Perezniето, Montes, Routier, & Langston, 2014](#)).

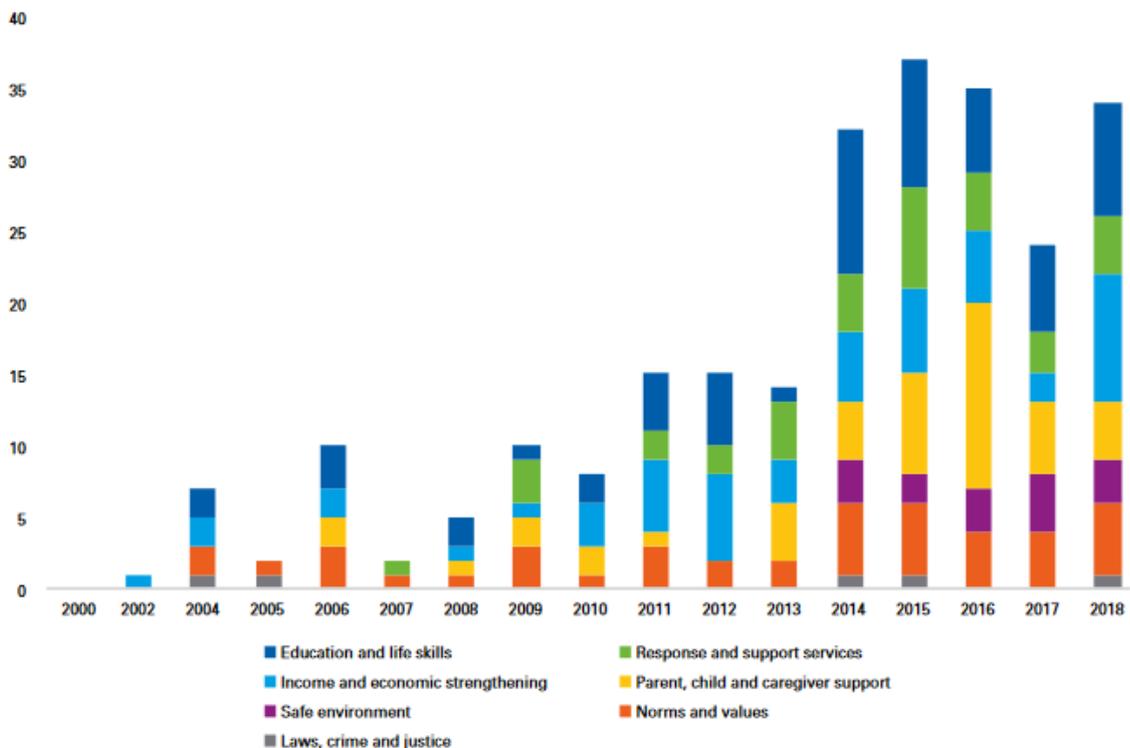
Global actors have recognised the enormous scale and impact of VAC and have advocated for greater investment in violence prevention and response. A technical package supporting seven evidence-informed strategies to end VAC ([INSPIRE](#), developed by WHO, UNICEF, and eight other international partners) has been widely adopted as an essential tool to support national investments and actions towards realizing this commitment. The [Global Partnership to End Violence against Children](#) serves as an international platform aimed at 'ending violence against children in every country, every community, and every family' ([Know Violence in Childhood, 2017](#)). It advocates widely for the use of INSPIRE to accelerate violence prevention. These developments, along with significant global commitments articulated in the Sustainable Development Goals, have provided greater impetus for

global, regional, and national actions to end violence. Although considerable research on VAC in high-income countries is available, the same is not true for LMICs. Mapping of available evidence, especially evidence on the effectiveness of interventions to reduce VAC, is a priority in LMICs ([UNICEF research brief goal area 3, 2018](#)). While this brief focuses on available evidence in English, a follow up phase is planned to cover five further languages: Arabic; Chinese; French; Spanish; and Portuguese.

## 2. MAIN FINDINGS

Figure 1 below shows the number of studies that evaluated the effects of interventions for reducing VAC (categorized as per the INSPIRE framework and published each year between 2000 and 2019). The number of studies on VAC was low in the late 1990s and early 2000s. Since 2006, there has been a steady, if fluctuating, increase in the number of published studies, with a discernible spike since 2014. The current EGM builds on this evidence base. One hundred and fifty-two studies were identified for inclusion in the EGM, of these, 55 are systematic reviews and 97 are impact evaluations.

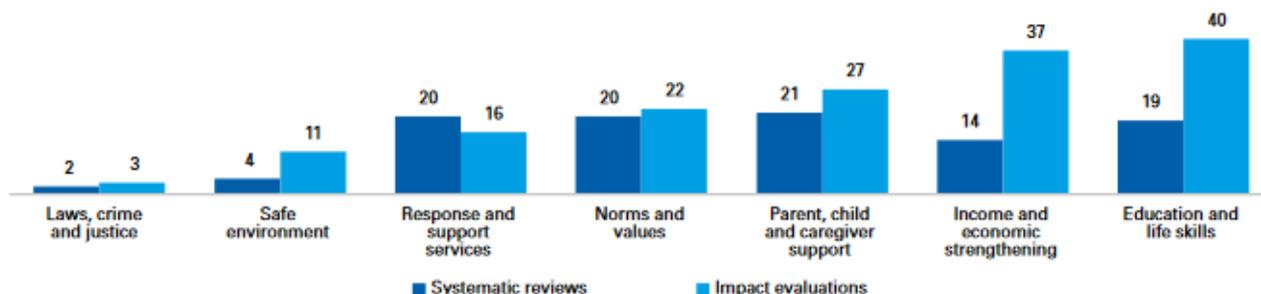
**Figure 1: Trends in publication of studies on VAC by intervention (2000-2018)**



### a. Distribution of studies by INSPIRE category

The most common were studies on: education and life skills (59); income and economic strengthening (52); parent, child, and care giver support (48); and norms and values (42). Meanwhile, studies on safe environment (15) and laws, crime, and justice (5) were the least represented.

**Figure 2: Distribution of studies by INSPIRE category**

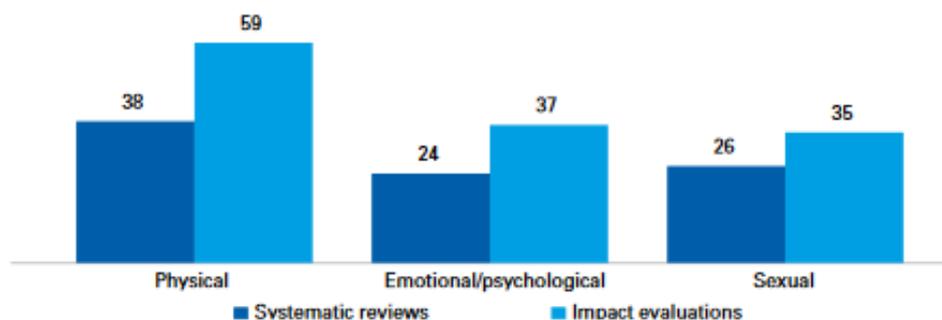


Note: The number of studies shown in each figure refers to the total number of studies falling under each category presented. Individual studies may be classified under multiple categories. For instance, if a study examines the impacts of multiple interventions, that study would add to the count for each intervention studied in that paper. The sum of studies for each figure may therefore be greater or lesser than the number of unique studies associated with that figure.

### b. Types of violence addressed in the studies

Studies addressing the impacts of physical violence are most reported (98) followed by emotional (61) and sexual violence (32).

**Figure 3: Distribution of studies by types of violence addressed**

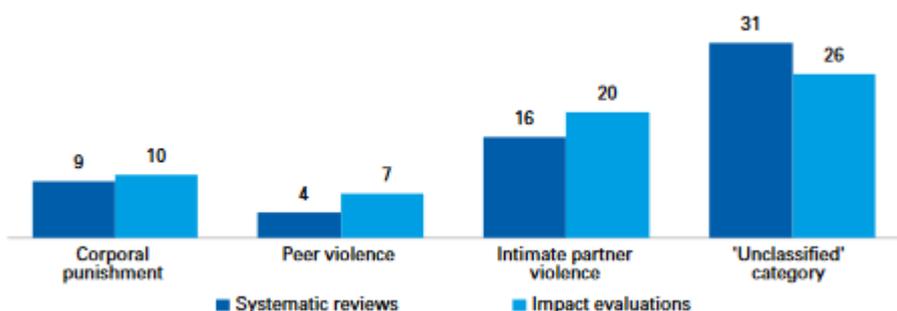


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### c. Forms of violence addressed in the studies

There are striking inconsistencies around reporting on diverse forms of VAC. This is because most studies could not be specifically classified by form of violence and had to be reported under the 'unclassified' category. Thirty-six studies cover intimate partner violence, followed by 19 studies on corporal punishment. Peer violence had the fewest number of studies (11).

**Figure 4: Distribution of studies by forms of violence addressed**

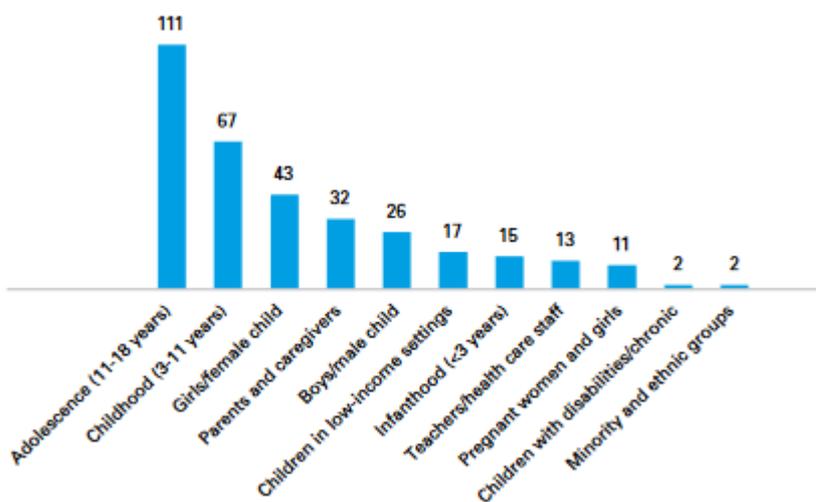


Note: The number of studies shown in each figure refers to the total number of studies falling under each category presented. Individual studies may be classified under multiple categories. For instance, if a study examines the impacts of multiple interventions, that study would add to the count for each intervention studied in that paper. The sum of studies for each figure may therefore be greater or lesser than the number of unique studies associated with that figure.

**d. Outcomes addressed in studies**

'Impacts on violence' is the most common outcome addressed as would be expected from studies focused on violence prevention. 'Norms and values' represented the next most common outcome studied. Only two studies reported cost-analysis, highlighting a lack of information on programme costs as an important evidence gap. There is a lack of studies on 'Economic and social outcomes', such as social inclusion and gender equity, social discrimination, and poverty.

**Figure 6: Distribution of studies by intervention target group**

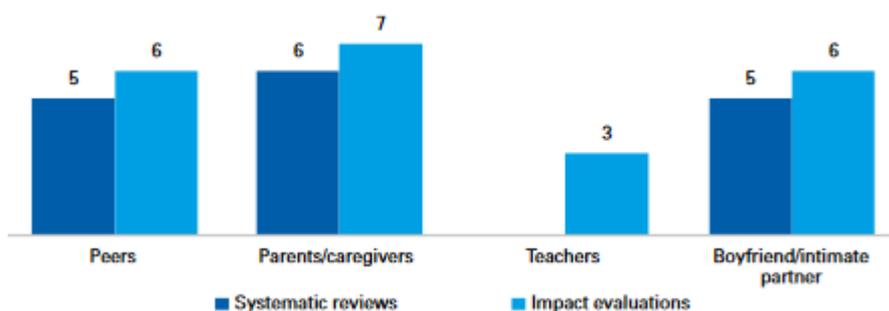


Note: The number of studies shown in each figure refers to the total number of studies falling under each category presented. Individual studies may be classified under multiple categories. For instance, if a study examines the impacts of multiple interventions, that study would add to the count for each intervention studied in that paper. The sum of studies for each figure may therefore be greater or lesser than the number of unique studies associated with that figure.

**f. Perpetration of violence**

Few studies assessing the impact of interventions on violence perpetration were found. These included studies on parents/caregivers (13), romantic and intimate partners (11), peers (9), and teachers (4) as perpetrators.

**Figure 7: Distribution of studies linked to perpetration of violence**



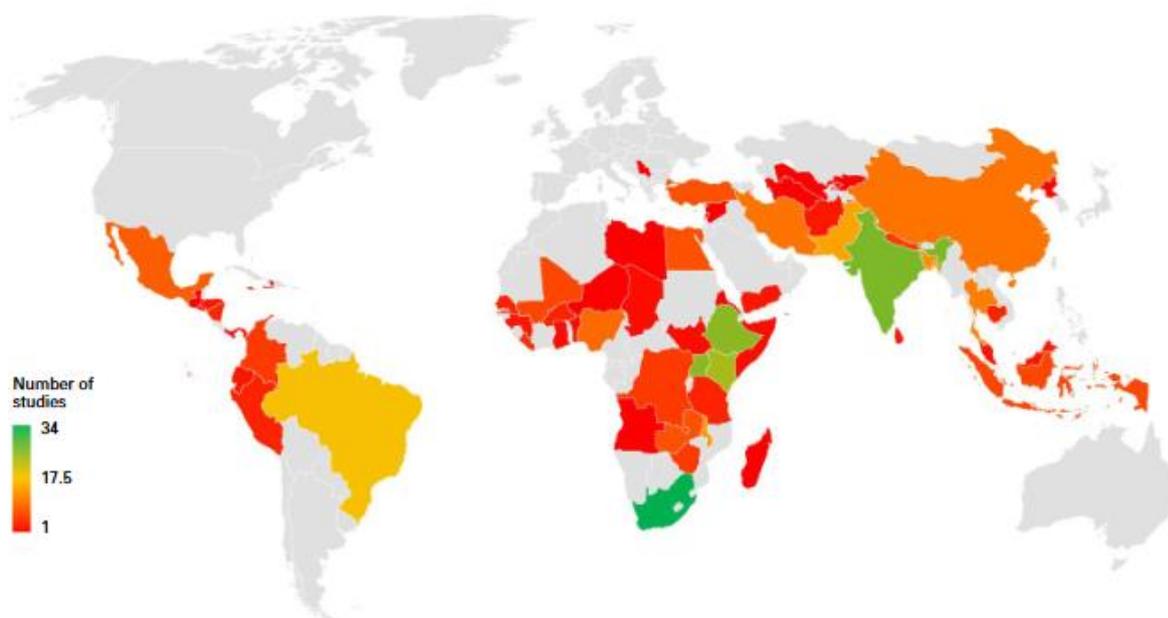
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**g. Geographic distribution of evidence**

The distribution of impact evaluations is uneven across regions. Sub-Saharan Africa has the highest concentration (59), followed by South Asia (13), Latin America and the Caribbean (11), East Asia and Pacific (8), Middle East and North Africa (4), and Europe and Central Asia (3). This pattern continues for systematic reviews, with a concentration in sub-Saharan Africa (36), South Asia (27), East Asia and Pacific (28), and Latin America and Caribbean (24)

Within regions, the distribution is further concentrated in a few countries. For example, within sub-Saharan Africa, South Africa (34) is the country with the highest number of studies, followed by Uganda (25) and Ethiopia (25). In South Asia, India has the highest number of studies (26)

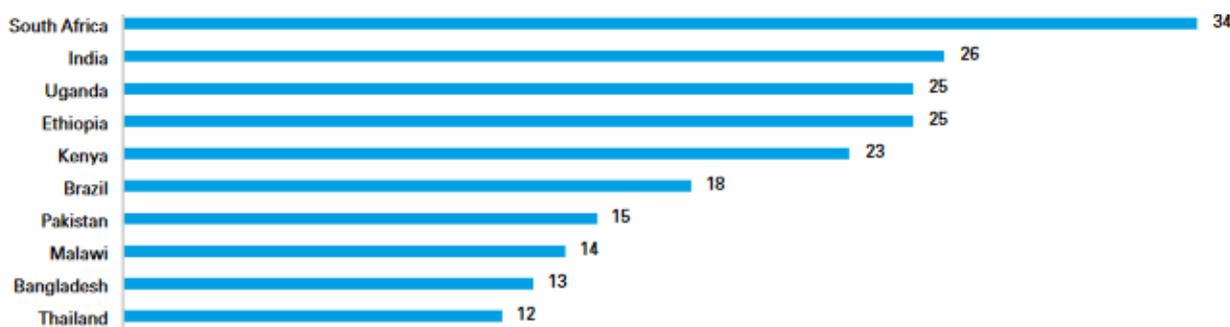
**Figure 8: Geographic heat map of impact evaluations and systematic reviews**



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© GeoNames, Microsoft, Navinfo, TomTom, Wikipedia  
Map generated by Ashrita Saran, Campbell South Asia

Note: The designations employed in this publication and the presentation of the material do not imply on the part of the United Nations Children’s Fund (UNICEF) the expression of any opinion whatsoever concerning the legal status of any country or territory, or of its authorities or the delimitations of its frontiers. This map is stylized and not to scale

**Figure 9: Countries with the highest number of impact evaluations and systematic reviews**



**h. Confidence in study findings**

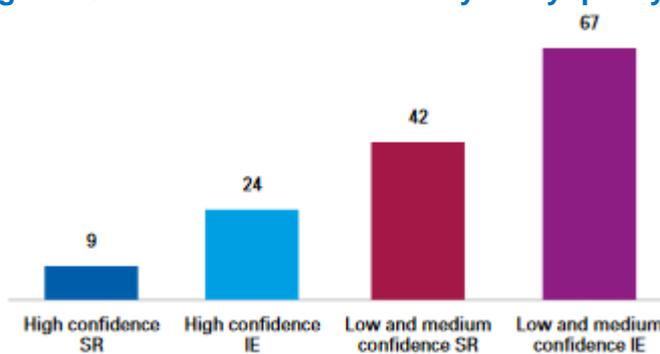
Studies were assessed for the level of confidence that could be placed in their findings using a 16-item checklist for the quality appraisal of systematic reviews and a six-criteria checklist for the assessment of quantitative impact evaluations. These checklists provide a broad assessment of weaknesses in methodologies used to conduct and report the findings on systematic reviews and impact evaluations.

Most of the impact evaluations and systematic reviews identified had methodological limitations. They were found to reflect low and medium confidence in study findings.

Only 9 systematic reviews are of high confidence, 25 of medium confidence, and 18 of low confidence. This means that 83 per cent are either of low- or medium-confidence. A similar picture emerges for impact evaluations, where only 30 of the 97 included were rated as high confidence. Seventy per cent were rated as low- or medium-confidence (47 and 20 respectively).

There is an urgent need for studies to be better designed and implemented, and their findings to be better reported.

**Figure 10: Distribution of studies by study quality\***



\*ONGOING STUDIES ARE NOT CRITICALLY APPRAISED FOR STUDY QUALITY AND HENCE NOT SHOWN HERE

**i. Funding bodies**

More than 90 agencies funded the 152 studies included in the EGM. The top seven funding agencies were: Department for International Development (now Foreign and Commonwealth Development Office or FCDO) (15 studies); USAID; World Bank; UNICEF; Oak Foundation; European Union; and National Institutes of Health. Most of the funding agencies were international and non-profit organisations.

**Figure 11: Top seven funding agencies of VAC impact evaluations and systematic reviews**



### 3. IMPLICATIONS OF THE FINDINGS

Funders, policymakers, practitioners, and research communities can use the EGM to strengthen evidence-informed strategies to end VAC:

**1. Identify and address gaps:** This EGM should form the basis for identifying evidence gaps related to key intervention areas and forms of violence so that investments in new research can be better targeted geographically, thematically, and for particular vulnerable populations. Similar findings were noted in UNICEF Innocenti's [MegaMap on Child Well-being Interventions in LMICs](#), produced with Campbell Collaboration.

**2. Strengthen investment in research:** This EGM can be used to better target investments to strengthen research quality and design to address evidence gaps at three levels:

- a. more and better-quality primary research;
- b. more high-quality and mixed-method impact evaluations to better understand what works, what doesn't, factors that determine effective implementation, and what can be generalized and adapted to other contexts, and;
- c. more evidence synthesis, such as systematic reviews, to compare findings across multiple studies and identify remaining gaps.

**3. Improve the quality of research:** The EGM quality appraisal highlights the importance of adhering to standardized international checklists for study design, ensuring rigorous ethical protocols, engaging with experienced VAC researchers, and building on lessons learned about safety, ethical, and methodological standards.

**4. Use evidence to strengthen strategic and programmatic investments:** The Map is a starting point, guiding people to the available evidence. Further analysis and deliberations with stakeholders across and within regions are required to ensure that the evidence is used to in-

form strategy and efforts to scale up programmes, based on context-specific considerations and conditions.

### 4. HOW THE EGM CAN BE USED BY STAKEHOLDERS

- The Map helps stakeholders across funding organizations, international, regional, and national government organisations, practitioners, and researchers to access studies documenting evidence-informed programmes and practices that can contribute to achieving the prevention of VAC across sectors.

- Notable gaps remain in the evidence base across geographical context and related to vulnerable groups of children. Consultation exercises to identify priority evidence needs should be carried out, working with stakeholders to fill those gaps by producing more primary studies, including impact evaluations for key interventions across the INSPIRE categories.

- Where available evidence is of low quality, researchers should work with other stakeholders to strengthen the quality of research through appropriate technical guidance and capacity strengthening. Deeper engagement with researchers and practitioners engaged in designing and implementing violence prevention across national contexts will also help provide greater learning and context to complement studies, especially around implementation and institutional factors.

- The value of an EGM is to supplement other forms of primary and secondary research and to regularly take stock of the availability of evidence, research quality, and adherence to ethical standards. Funders and research organisations should Invest in updating EGMs to track the production of evidence in areas of interest.

#### About this UNICEF research brief

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For every child, answers



## Innocenti Research Brief

2020-21

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Covid-19 & Children

### COVID-19: How prepared are global education systems for future crises?

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#### KEY FINDINGS

This research brief is one of a series exploring the effects of COVID-19 on education. It focuses on how school closures affect children and the resiliency of education systems to respond to such disruptions and mitigate their effects.<sup>1</sup>

- Unexpected school closures are shown to negatively influence children's learning outcomes. Whether and to what extent students may make up the learning losses varies over time. Some factors may include closure duration, quality of education before and after closure, proximity of the closure to a child's schooling transition, and whether the child experienced a traumatic event.
- Beyond the negative consequences on learning, school closures expose stu-

dents to additional risks. Hundreds of millions of children rely on schools for free or low-price meals throughout the year. At the same time, school closures can expose children to violence (including sexual violence and forced marriage) at home and in their communities. Children's need for psychosocial support also increases.

- As it is likely the world will face more crises forcing schools to close, strengthening the resilience of education systems is a priority to mitigate the damage school closures have on children's learning and well-being. Countries must build capacity to deliver quality education remotely, using a blended approach (with increased capacity of teachers) and targeting vulnerable and marginalized children who are often forgotten.

#### CONTEXT

The ongoing COVID-19 pandemic has led to an education emergency of unprecedented global scale. At its peak, more than 190 countries had temporarily closed schools in response to the health emergency, forcing over 90 per cent of enrolled learners around the world into either distance learning or temporarily out of school (UNESCO, 2020). Although previous health emergencies – such as the H1N1 influenza pandemic in 2009 and the Ebola outbreak from 2014-2016 – have caused short and long-term school closures in several countries, the COVID-

19 crisis caught most of the world's education systems unprepared. Countries, and the regions and cities within them, had to decide how to continue providing access to education and related services, with many rapidly developing systems and content to implement wide-scale distance learning for the first time.

#### EFFECT OF SCHOOL CLOSURES ON DISEASE TRANSMISSION

In their review of multiple studies Jackson et al. (2013) show that school closures can signifi-

cantly reduce the rate of spread of seasonal influenza among schoolchildren. In a study of early school closures for summer breaks during the H1N1 epidemic in China, Hong Kong Special Administrative Region (SAR) in 2009, Wu et al. (2010) found that transmission fell by approximately 25 per cent. The optimal timing, duration and type of school closures (complete vs partial; select grades; etc.) are debatable and vary with factors such as the age-specific attack rate of the virus<sup>2</sup>, the stage of community spread<sup>3</sup> and whether other social distancing measures are employed simultaneously to help limit transmission outside of schools (Gemetto et al., 2014; Fumanelli et al., 2016).

Considering coronavirus outbreaks specifically, Viner et al. (2020) find that school closures due to Severe Acute Respiratory Syndrome (SARS) in China, Hong Kong SAR, China and Singapore did not contribute to controlling the epidemic. In a study based on a simulated transmission model (applied to the United States of America and the United Kingdom of Great Britain and Ireland), Ferguson et al. (2020) predict that closing school as an isolated policy would only reduce total COVID-related deaths by 2 to 4 per cent, lower than by other measures. However, it is important to note that countries are not employing school closures in isolation to combat the COVID-19 crisis, but rather, alongside other social distancing measures that limit children's interactions with others in the absence of school. Epidemics are often caused by diseases that are not well understood, and correspondingly, governments often lack scientific evidence to know for certain if a specific intervention will help keep children and their families safe. Decision-makers inevitably face challenges in balancing the response to public health emergencies, ultimately aiming to limit the impact and toll these crises can take on human life, the global economy and children's learning outcomes.

In the case of the Ebola epidemic across West Africa, schools remained closed for five to nine months in the three worst affected countries: Guinea, Liberia and Sierra Leone. At the peak of that crisis, decision makers were also uncertain whether complete or partial school closures would yield the best results in curtailing the spread of disease (Gillard, 2020).

## EFFECTS OF PREVIOUS HEALTH EMERGENCIES ON LEARNING

Although schools have closed during previous health emergencies, very few studies have captured the effects of school closures on learning during an epidemic or pandemic. Some studies did find that closures had affected learning. In an observational, cross-sectional ethnographic study on how the Ebola crisis had affected a community intervention in Sierra Leone, Kostelny (2018) reported evidence of numerous cognitive harms related to full year school closures, particularly that children had forgotten what they had learned. Being held back, some children lost interest in learning and dropped out of school altogether.

In response to the Ebola crisis, schools in Sierra Leone shut preventatively for more than nine months. Through focus group discussions (FGDs), Risso-Gill and Finnegan's cross-sectional qualitative assessment (2015) of children's recovery found that missing out on formal schooling also generated concern and anxiety among children of all ages (featuring in 45 per cent of FGDs). Older children reported that they lost interest in finishing their education, with girls particularly thinking that schools would never reopen, leaning them towards marriage and building their own families instead.

## EVIDENCE ON THE EFFECT OF OTHER SCHOOLING DISRUPTIONS ON CHILDREN'S LEARNING

A wide range of literature provides evidence that summer break – a planned disruption in schooling – contributes to learning loss; a systematic review found that, on average, one month of school-year learning is lost while schools are closed for the summer (Cooper, 1996). This suggests that lengthy, unexpected school closures may exert similarly negative effects. Though not directly comparable to the pandemic and primarily drawn from high-income countries, evidence from other events that have disrupted schooling, including weather, strikes or protests, policy changes and humanitarian emergencies, can provide additional insights into how unexpected school closures deleteriously affect children's educational outcomes.

In the United States of America, short unexpected schooling disruptions due to bad winter weather have negatively affected primary-school children's learning achievement. Data from Maryland public schools found that the number of

days schools closed due to snow negatively affected student achievement in state examinations (Marcotte and Hemelt, 2008). In winters with five unexpected “snow days”, the number of third graders performing satisfactorily on state reading and math assessments was nearly 3 per cent lower than in years with no school closings; meanwhile in winters with a high number (10) of days of unexpected closings, 5 per cent fewer students passed.<sup>4</sup>

Various studies also document lost learning from school closures and lost instructional time caused by teacher strikes and student protests (Eyles, et al, 2020). Baker (2013), for example, finds that long teacher strikes lasting 10 instructional days or more in grades 5 or 6 in Ontario, Canada, had a negative, statistically significant impact on test score growth, with the largest impact being on math scores.

In 2005, schooling disruptions during Hurricanes Katrina and Rita in Louisiana provide evidence that lost schooling contributes to reduced student achievement in the short-term, but that these losses can be made up for over time. The hurricanes displaced approximately 196,000 public school students in Louisiana, with the median evacuee missing five weeks of school before either returning to their previous school or enrolling in another school (Pane et al., 2008). Sacerdote (2012) found that the math scores of student evacuees from New Orleans dropped 0.17 standard deviations relative to other Louisiana students in the first year following the hurricanes. However, within two years, these students were performing as well academically as they had previously. By 2009, they had gained about 0.18 standard deviations above their baseline position in the state test score distribution, illustrating their long-term resilience. Moreover, the higher performing nature of schools that evacuees attended after the hurricane may have facilitated these positive gains.<sup>5</sup>

Disruptions in schooling may also affect advancement within education, particularly in the near-term or for students on the margin. Sacerdote (2012) found that New Orleans evacuees in 10th grade experienced a 4.2 percentage point decline in the rate at which they attend any two- or four-year college. However, for students in the eighth-grade cohort who were further out from transitioning to college, there was no such statistically significant effect. Pischke (2003) found that a 1966 German policy reform, which exposed some students to two-thirds of a year less

of schooling over a two-year period, led to an immediate negative effect of increased grade repetition in primary school. This, however, did not negatively impact longer term outcomes, namely the percentage of students attending the country’s highest secondary school track and students’ later earnings in life.

A new study by Andrabi, Daniels, and Das (2020) analyzing the impact of the 2005 Pakistan earthquake also suggests that even temporary school closures can result in significant medium-term lost learning.

Schools in the affected area were closed for an average of 14 weeks, a little more than three months. However, four years later, children in affected areas were not just three months behind: they were the learning equivalent of 1.5 years of schooling behind children in a similar context whose schools were not closed. The direct effect of the school closures alone cannot account for such large deficits in later test scores, suggesting affected children learned less each year after they returned to school because of the short-term interruption. One possible explanation is that the curriculum and instruction did not adapt to the children’s lower learning levels upon re-entry into school and hence, affected children fell further and further behind.

## SECONDARY EFFECTS OF SCHOOL CLOSURES ON CHILDREN

Beyond the negative consequences on learning, school closures expose students to additional risks. Schools provide multiple secondary services in addition to education. Hundreds of millions of children rely on schools for free or low-price meals throughout the year (UNICEF and WFP, 2020). At the same time, school closures can expose children to violence (including sexual violence and forced marriage) in their homes and communities (Odhiambo, 2020). Children’s need for psychosocial support also increases.

In Sierra Leone during the Ebola crisis, vulnerable students (especially girls) found it difficult to continue their education and became exposed to numerous risks. Studies by Plan International (2015) and UNDP (2015) document this increased exposure to domestic and sexual violence for girls. Students who needed to participate in household work or income-generating activities either fell behind or simply never returned to school. Teenage pregnancies – a vector for early marriage as well as school dropout – spiked during the Ebola crisis. For example, in a

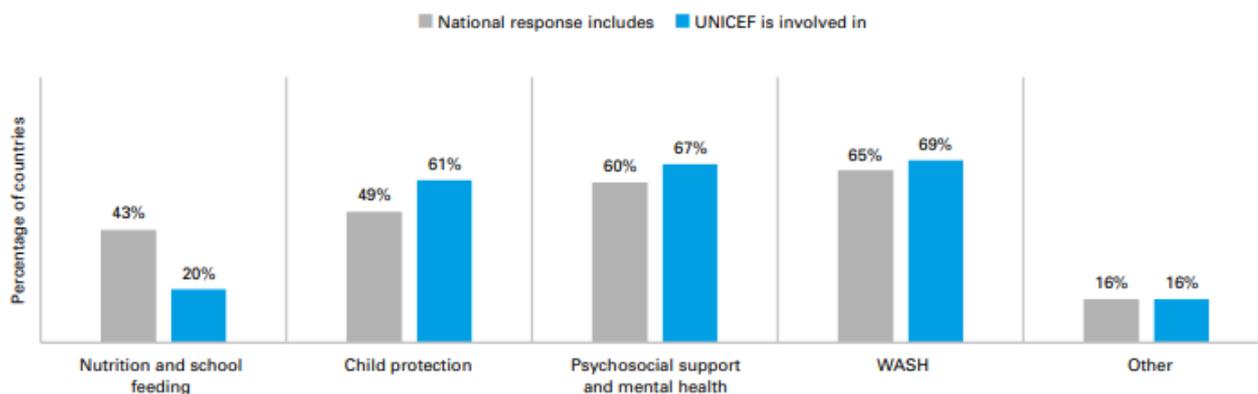
quasi-experimental evaluation of an economic empowerment program for young women in Sierra Leone, Bandiera et al. (2019) found that in the absence of the program, Ebola-related disruptions to schooling and economic activity significantly increased the time young women spent with men and increased pregnancy rates. School enrollment among younger girls in the sample decreased by 16 percentage points when schools reopened after the crisis, with many girls having reallocated their time to income-generation while schools were closed.<sup>6</sup>

In the current COVID-19 crisis, vulnerable children remain the most at risk. While interventions to address this are underway, many children are undoubtedly still left behind. With an estimated 370 million children missing out on school meals, in a recent survey of 134 UNICEF programme countries, only 43 per cent of countries reported that interventions in the area of nutrition and

school feeding are part of their national response to COVID-19 as of 21 May 2020 (UNICEF and WFP, 2020; UNICEF, 2020b). Many of the children who benefit from school feeding programmes could already be nutrient-deficient, vulnerable or at-risk.

Half of surveyed countries reported that child protection is part of their national response, while 60 per cent are providing some psychosocial and mental health support to children during the period of school closures. Measures to address gender concerns in the education response are limited; just 12 countries reported that the gender reference group or Ministry of Education gender unit was consulted on the education response plan (UNICEF, 2020b). Furthermore, only 16 countries reported that they are providing information and channels for girls to access support or services for violence or abuse during school closures (2020b).

**Figure 1: Child health and well-being in the education response to COVID-19**



Source: UNICEF Education Tracker of National Education Response to COVID-19 (2020b).

### CONTINUITY OF EDUCATION DURING SCHOOL CLOSURES

Despite challenges and setbacks, learning can and does continue in times of crisis. Technology offers a wide variety of methods to support distance education. The kinds of technology most appropriate varies due to differing access among populations in a country or region, particularly vulnerable groups. UNICEF has developed a decision tree that outlines an avenue for considering which combinations of interventions may be needed, from paper-based approaches to online classrooms (UNICEF, 2020a).

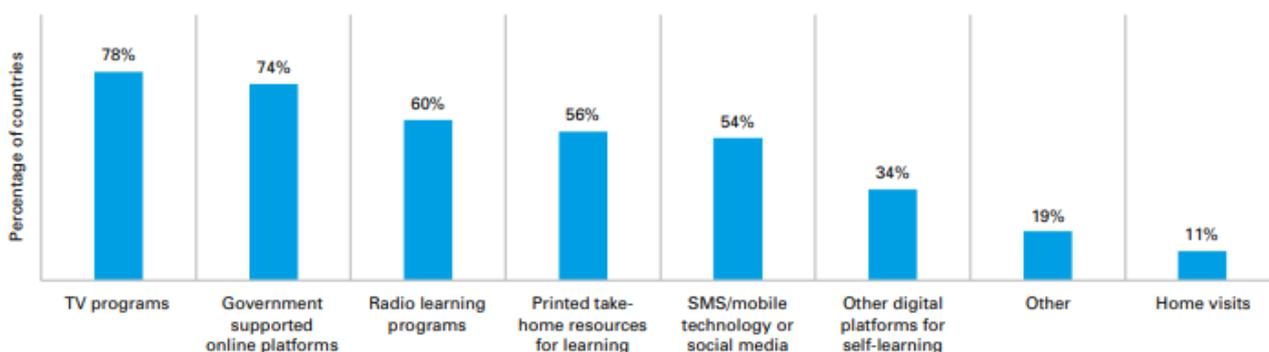
During the Ebola crisis, the Sierra Leone government, with support from UNICEF and other partners, created the Emergency Radio Education

Programme (EREP) to continue learning during the school closures. To reach vulnerable children, the government delivered 50,000 solar-powered radios to the poorest households across the country with USB ports for content provision in areas lacking radio signal coverage. The use of an existing supply chain for delivering voting materials proved effective in delivering the radios and supporting educational materials to households. EREP household surveys showed that weekly listenership ranged from 40 to 80 per cent and was lowest during weeks that were normally school holidays. Families that did not engage with the radio content often cited that, since the content was not examinable, it was of no value. This challenge – that governments cannot

make distance education mandatory and examinable because it may discriminate against those who lack proper access – lingers during the current COVID-19 crisis. Learning was not measured as part of the radio programme, but focus groups with various stakeholders after the crisis found that the radio programme was perceived as “a poor substitute for schools, but was taken seriously by the government and the communities, so it served a purpose of maintaining some link to education during the crisis” (World Bank, 2016). Another study found that almost half of children’s groups in Sierra Leone did not find the radio programmes to be useful (Plan International, 2015). In contrast, UNICEF’s programme monitoring found that the radio programme was reportedly useful to some learners, who could understand the radio content better than teachers speaking in overcrowded, noisy classrooms. During the current COVID-19 crisis, the recent survey of UNICEF programme countries found that 93 per cent are incorporating distance education in their national response to the COVID-19 emergency. As depicted in Figure 2, TV education programming and governmentsupported online platforms are the most common methods

employed, but most countries draw upon a combination of several methods to reach children with education (UNICEF, 2020b). However, 31 per cent of these programme countries reported that distance learning is not reaching vulnerable and marginalized children. Specific measures that countries reported taking to reach these children include: improving access to equipment or connectivity for learners in hard-to-reach locations or the very poor (28 countries); providing instruction, devices or materials accessible to children with disabilities (23 countries); providing distance learning content or materials in minority languages (20 countries), and providing alternative learning methods and support for children on the move (14 countries). Drawing on [MICS6](#) data on access to internet and broadcast media, two recent UNICEF blogs highlighted that relying on the internet alone will not ensure inclusive, equitable education; rather, television and radio broadcasts have the potential to reach a majority of the world’s children, especially the most vulnerable, but paper-based approaches remain a necessary alternative in some settings (Bell et al., 2020; Hereward et al., 2020).

**Figure 2: Countries’ use of distance learning methods in COVID-19 response**



Source: UNICEF Education Tracker of National Education Response to COVID-19 (2020b).

### **FUTURE PREPAREDNESS AND RESILIENCE**

The education sector has rebuilt after natural disasters and delivered education during conflicts or in refugee settings; it is also increasingly adapting to climate change. However, COVID-19 is a global health emergency of unprecedented scale, presenting unique challenges that many countries are unprepared to address. While distance education is now varied and offered on a

much wider scale than during Ebola or other crises, only 30 per cent or fewer of UNICEF programme countries reported on children’s use of distance education. If these evidence gaps are not addressed, a significant opportunity to learn about and improve the quality and implementation of the distance learning methods will be lost. As the world will likely face more health crises in the future, strengthening the resilience of education systems is a priority to mitigate the damage

school closures have on children's learning and well-being. Countries must build capacity to deliver quality education remotely, targeting vulnerable and marginalized children who are often forgotten. Once the current crisis subsides, contin-

uing to strengthen distance learning and incorporate aspects into everyday schooling for all children and youth will help countries be better prepared to respond to future crises that disrupt schooling.

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<sup>1</sup> This brief is based on a review of literature from the commonly used journal repositories and search engines Elton B. Stephens Company (EBSCO), Journal Storage (JSTOR), and Google Scholar, using search terms related to schooling disruptions during pandemics and natural disasters.

<sup>2</sup> The attack rate is defined in epidemiology as the number of people who became ill divided by the number of people at risk for (i.e. exposed) to the illness (Pettygrove, 2016). Age-specific attack rates can highlight whether the disease differentially affects people in different age groups (WHO, 2007).

<sup>3</sup> Community spread "means people have been infected with the virus in an area, including some who are not sure how or where they became infected" (CDC, 2020).

<sup>4</sup> Similar evidence from Massachusetts, however, found a different result: student absences due to winter weather on days when schools did not close negatively impacted math achievement, but missed

school days where the entire school closed due to weather did not (Goodman, 2014).

<sup>5</sup> Pre-Katrina New Orleans students attended schools with an average math score 0.45 standard deviations below the state average, but after the hurricane, these same evacuees attended schools with math scores only 0.08 standard deviations below the state average. The increase in test scores by 2009 was largest for students who remained outside the New Orleans metropolitan statistical area posthurricane and the test score gains were concentrated within the cohort of students who were initially within the lowest two quintiles of academic performance (Sacerdote, 2012).

<sup>6</sup> Overall in Sierra Leone an estimated 13 per cent of students did not re-enroll when school reopened after the crisis; however, by 2016/2017, primary and secondary school enrollment rates had returned to, and exceeded, pre-Ebola levels (Selberbick, 2020).

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**For every child, answers**



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## What children look for in their parents

### Concept and applications of positive parenting

1 September 2020



Most men become parents at some point in their lives, but most of them will have to overcome different challenges raising their children across all developmental stages. The consequences of how they do it will affect the whole society. That is why it is so important to move from parental stress to family wellbeing. [1] Positive parenting exemplifies this approach by seeking to promote the parenting behaviors that are most essential for fostering positive youth development. [2]

#### Concept of positive parenting

Seay, Freysteinson and McFarlane reviewed 120 pertinent articles and came up with the following universal definition: "Positive parenting is the continual relationship of (a) parent(s) and (a) child (children) that includes caring, teaching, leading, communicating, and providing for the needs of a child consistently and unconditionally." [3] Combining this definition with the rest of the most common ones, the following notes can be listed: positive parenting involves guiding, leading, teaching, caring, empowering, nurturing, and it is basically sensitive to the child's needs, consistent, non-violent, affective,

emotionally secure and warm, it provides unconditional love, it recognizes the positive, it respects the child's developmental stage, it rewards accomplishments, it sets boundaries, it shows empathy for the

child's feelings and the child's best interests. To understand the benefits of it, positive discipline has to be considered first. [4]

Positive parenting is a continual relationship that includes caring, teaching, leading, communicating, and providing for the needs of a child consistently and unconditionally. Its approach also implies the attachment theory, the influence of child guidance; the use of principles of behaviorism; social learning and child development. There is plenty of research supporting the effects of positive parenting on adaptive child outcomes, and various mechanisms through which positive parenting promotes a child's prosocial development and nurtures children's self-esteem; creativity; belief in the future; ability to get along with others; and sense of mastery over their environment.

*Ignacio Socias Director of International Relations, International Federation for Family Development.*

*Extract of the paper presented in the Expert Group Meeting organized by the Division for Inclusive Social Development of the United Nations Department of Economic and Social Affairs in June 2020.*

*Original available at <https://bit.ly/3gHq8uW>*

Current research demonstrates that quality relationships with adults and peers make a tremendous difference for young people. A sense of connection or belonging is an important protective factor. Students who perceive a sense of community at school and/or home are less likely to engage in risky behaviors, like smoking, using drugs or engaging in violence. They are also more likely to be successful academically. Young people who grow up in families that they perceive as both kind and firm are more likely to thrive. Positive Discipline teaches parents and teachers how to be kind and firm at the same time and how to invite a sense of connection from the youngsters they are involved with. The approach is neither permissive nor punitive. Positive Discipline is an effective way for parents, teachers and students to learn life skills and build a sense of community and connectedness based on mutually respectful relationships. [5]

The Positive Discipline model is based on the work of Alfred Adler and Rudolf Dreikurs, who introduced the idea of parenting education to United States au-

diences in the 1920s. [6] It implies mutually respectful relationships at home, at school and in the community and provides the skills necessary to create healthy interpersonal connections in an environment where each person's contribution has meaning, is valued, and expected. [7]

Some other concepts and realities have also to be considered: the influence of Positive Psychology, where it comes from the relation with the attachment theory, the influence of the theory of Child Guidance; the use of principles of behaviorism; and the principles of social learning and child development.

### **Review of the literature**

Getting into more detail, the research clearly shows that young people do better when they perceive both firmness and kindness from their parents. Children who rate their parents as authoritative—both responsive and demanding—engage significantly less in socially risky behaviors. [] Other studies have correlated the teen's perception of parenting that is

both kind and firm with improved academic performance. [8]

As mentioned before, a young person's sense of community, connection or 'belongingness' at home and at school also increases academic success and decreases socially risky behavior. Interventions at school and at home can decrease the 'socially risky' behaviors and increase a young person's likelihood of succeeding at school and in their social environment. Interventions that teach skills for social belonging in elementary school have lasting positive effects. [9]

The techniques used in Positive Discipline have been shown to have a relevant impact on schools. [10] A study of a school-wide implementation of classroom meetings in a lower income Sacramento elementary school over a four-year period showed that suspensions decreased from 64 annually to 4 annually, vandalism decreased from 24 episodes to 2, and the teachers reported great improvement in classroom atmosphere, behavior, attitudes and academic performance. [11]

Parenting styles were first established by Diana Baumrind more than half a century ago. [12] They are made up of parents' attitudes about childrearing and parenting and represent how parents interact with their children. These attitudes take into account the dimension of parental responsiveness – the way to pay attention to a child and how he is acknowledged as unique – and parental demandingness – tied to how parents supervise and discipline. No doubt the style positive parenting is most aligned with is the authoritative and less similar to the authoritarian, the permissive, or the uninvolved.

Parenting style as it is perceived by the young people in the family is clearly associated with their academic success and with their chance of engaging in 'socially risky' behaviors. There is overwhelming evidence that young people who see their parents as both kind – supportive/responsive – and firm – demanding – have more success socially and academically. Different studies have examined the association between parenting 'style' and behavior from different perspectives.

The general conclusion is that when young people perceive that their parents are warm and responsive – kindness – and have high expectations – demandingness/firmness –, they are at significantly lower risk for drug and alcohol use, less likely to smoke and less violent. [13] They are also more likely to succeed academically. [14] Studies also show that parenting styles that are authoritarian/directive – high on demandingness, generally in an intrusive way and low on responsiveness –, permissive – high on warmth but little or no directiveness – and/or unengaged/inconsistent are clearly associated with worse outcomes. [14] In a study over time, it has been found that "the benefits of authoritative parenting are largely in the maintenance of previous levels of high adjustment, the deleterious consequences of neglectful parenting continue to accumulate." [15]

In our times, supportive parenting has been associated with more positive school adjustment and fewer behavior problems when the children were in sixth grade. Moreover, supportive parenting actually mitigated the negative impact of familial risk factors – i.e., socioeconomic disadvantage, family stress, and single parenthood – on children's subsequent behavioral problems. [16]

John and Julie Gottman have investigated the impact of positive parenting by developing a five-step Emotion Coaching program designed to build children's confidence and to promote healthy intellectual and psychosocial growth. [17] Gottman's five steps for parents include: awareness of emotions; connecting with your child; listening to your child; naming emotions; and finding solutions. They have reported that children of Emotional Coaching benefit from a more a positive developmental trajectory relative to kids without emotional coaches.

Moreover, an evaluation of Emotional Coaching by Bath Spa University found several positive outcomes for families trained in Emotional Coaching, such as parental reports of a 79% improvement in children's positive behaviors and well-being. [18]

Another way of thinking about the role of positive parenting is in terms of resilience. When children – including those who begin life with significant disad-

vantages – experience positive and supportive parenting, they are far more likely to thrive. It is in this way that positive parenting minimizes health and opportunity disparities by arming children with large stores of emotional resilience. [19]

Generally speaking, there are many aspects of positive parenting that nurture children's self-esteem; creativity; belief in the future; ability to get along with others; and sense of mastery over their environment. [20] The United States Center for Disease Control and Prevention also points to the opportunities that positive parenting offers to teach children self-reliance and decision-making skills and to develop self-esteem. [21]

Some additional benefits of positive parenting include stronger parent-child relationships – it increases trust between children and parents because of the positive interactions that it promotes; more effective communication, as communication is an essential part of positive parenting, more in the sense of being able to listen to children and even encouraging them to talk about their feelings; self-esteem and happiness, as the focus on positive action, trust, and communication will lead to a greater level of happiness and help your children develop a sense of self-esteem – it can even bring happiness and reduce stress in parents. [22]

### **Practical applications**

There are various mechanisms through which positive parenting promotes a child's prosocial development. Eisenberg et al. suggest that positive parenting impacts children's temperament by enhancing emotion regulation – e.g., Effortful Control, enabling children to focus attention in a way that promotes emotion modulation and expression. This ability to use Effortful Control was found to predict reduced externalizing problems years later when children were adolescents. [23]

Those studies and many others have proven the benefits of positive parenting. A research project published in the *Journal of Clinical Adolescent Psychology* showed that positive parenting led to much lower instances of childhood depression compared to harsher styles of discipline. The study also showed that parents who experienced harsh discipline as

children had higher instances of mental health issues in adulthood. They were more likely to pass these problems on to their children. This study shows that positive parenting can affect multiple generations. [24]

The study on 'Parent Personality and Positive Parenting as Predictors of Positive Adolescent Personality Development Over Time' found evidence for an indirect link between parent personality and later adolescent personality through positive parenting. The results suggest that parents may play a significant role in the development of adolescent personality traits that promote competence and personal well-being across the life course. [25]

In Hong-Kong, the results of a government student indicated that a positive parenting programme was effective in decreasing child behaviour problems, dysfunctional discipline styles, and improving parenting sense of competence, as well as marital relationship. The overall findings strongly confirm its efficacy in reducing conduct problems in children and in promoting more harmonious family relationships. [26]

Finally, parenting can become a kind of power struggle with kids trying to get away with bad behavior while avoiding punishment. The positive behaviors and desired actions leave less room for negative behavior. [27]

### **Conclusions and recommendations**

Positive parenting is backed by empirical evidence supporting its many benefits. It is therefore understandable why the UN General Assembly has repeatedly encouraged "to invest in parenting education as a tool to enhance children's well-being and prevent all forms of violence against children, including through promoting non-violent forms of discipline." []

Positive parenting begins early, even from the moment a person realizes he or she is going to become a parent as preparing for a child's arrival will have an impact. But positive parenting does really apply to all developmental periods.

Positive parents raise their children in a way that empowers them to reach their full potential with an effective, joyful attitude. It is an effective, evidence based approach that is neither punitive nor permissive. It involves clear rules, expectations, and consequences for behavior; and consistent follow through.

Parenting education can be critical to support parents because of the impact of parent-child interactions on developmental outcomes; and the opportunity that parenting education provides for optimizing what parents do with their children.

Therefore, I suggest the following recommendations:

1. Ensure the adequate investment in the design and execution of parenting education programmes "as a tool to enhance children's well-being and prevent all forms of violence against children, including through promoting non-violent forms of discipline."
2. Focus those programmes on all developmental periods, starting by early childhood development.
3. Prevent punitive or permissive behavior through the Positive Discipline model through strengthening parent knowledge about how their actions affect child development.
4. Teach parents skills to help their child's healthy development and school readiness.

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## MMM ACTIVITIES TO PROMOTE MOTHERS' ROLE AND RIGHTS

### MMM #RaiseAPen Campaign to support girls' education in Afghanistan and beyond

[Watch the mobilisation video on YouTube.](#)

Partnering with its associate members active in Afghanistan, the Farkhunda Trust for Afghan Women's Education and Mothers For Peace, Make Mothers Matter has joined forces with international personalities, organisations and civil society to launch **the #RaiseAPen campaign to support Afghan mothers in their call for a continued right to education for girls.**

The campaign comes at a crucial moment in Afghanistan's history. No one wants to reverse years of progress. With the #RaiseAPen Campaign, Make Mothers Matter wants to ensure that this call is heard and acted upon.

To this effect, a **High-Level virtual event is organised on 25th November with key decision makers to discuss the way forward.**

### MMM oral interventions at 44<sup>th</sup> and 45<sup>th</sup> sessions of the UN Human Rights Council

#### 44<sup>th</sup> Session (June–July 2020)

- At the meeting with the Special Rapporteur on the right to education, MMM called for the **importance of informal education** in families to be recognised and **parents to be better supported**, especially in the context of COVID-19. – read the [full statement](#) on [Informal education must be recognized, parents better supported](#).
- MMM contributed to the discussion on the annual report **“Women's human rights in the changing world of work”** of the UN Working Group on Discrimination against Women and Girls by offering [three additional recommendations](#) – with a particular focus on the issue of unpaid care work.
- Build on the 2013 resolution of the International Conference of Labour Statisticians, which, in effect, **recognises unpaid care work as**

For further information, see [Together with mothers in Afghanistan for the right to education for their daughters.](#)

*Ultimately, standing for girls' education in Afghanistan is standing for girls' education everywhere.*

Share our [mobilisation video](#) – Engage – #RaiseAPen – Raise your voice.

More on [#RaiseAPen, a Global Campaign for women and girls' Right to Education in Afghanistan](#). Read also [“No sustainable peace in Afghanistan without education for women & girls”, says former UN Special Envoy Staffan de Mistura.](#)

**“work”, to give unpaid carers a status and rights** (e.g. social protection, maternity protection, healthcare, training, care-credits in pensions, etc.)

- **Recognise and validate the skills that one develops when doing unpaid care work**, especially when raising and educating children or running a household, and which include valuable management and life skills. Any temporary withdrawal from the workforce linked to caring responsibilities is a “work experience”.
- **Prioritise care in policymaking**, and implement a **paradigm shift in our economic system and thinking**, which is blind to women's unpaid work, **to prioritise well-being, sustainability and equity.**

**It is time that the world of work adapts to people and families, and that the economy serves the wellbeing of people and the planet – not the other way around.**

Visit [World of work must adapt to people and families – not the other way around](#) for more information and the [full statement](#).

### 45<sup>th</sup> Session (September 2020)

*“The pandemic has shown us who is doing the work that really matters: nurses, teachers, care workers. As we recover, we need to remember this. It is time to end the inequities of unpaid care work and create new economic models that work for everyone.”*

António Guterres, UN Secretary-General,  
Town Hall with Young Women from Civil Society  
Organizations on 31 August 2020

- During the discussion on the **impact of COVID-19** on Human Rights, MMM echoed the UN Secretary-General on the importance of care, and reiterated its call to governments to move towards a more caring economic model.

We fully agree but place MOTHERS alongside teachers, nurses and care workers. **Mothers have also played a key role in keeping their children, families and communities together.** The crisis has shown what really matters: It has all been about care and education, and the people performing these duties. Whether paid or unpaid, they must be better recognised and supported by a new economic system that prioritises the well-being of people and the planet.

Read the full statement on [Care – and mothers – must be at the center of systemic changes to our economy](#).

- MMM also contributed to the discussion on the progressive realisation of **the human rights to safe water and sanitation** by bringing to the attention of the Council the **importance of women’s access to water and the necessity to consider women’s unpaid care work in the realisation of the right to water.** The time poverty resulting from the lack of accessibility must be addressed.

Read the full statement on [Women’s unpaid care work must be considered in the realisation of the right to water](#).

### MMM’s Joint contribution to the European Commission Public Consultation on the Child Guarantee

On 7 October 2020, MMM, together with its partners at the Alliance for Investing in Children and with the European Parents’ Association, responded to the Public Consultation on the Road Map for the Child Guarantee, an initiative meant to ensure that all children in Europe who are at risk of poverty, social exclusion, or are otherwise disadvantaged, have access to essential services of good quality.

These contributions highlighted the importance of such a guarantee and also called on the European Commission to incorporate a rights-based approach through the inclusion of the pillars 1 and 3 of the 2013 Investing in Children Council recommendation. This means incorporating parents’ access to resources and children’s access to decision making.

#### Parents’ inadequate access to resources

This point has been emphasised in the findings of the feasibility study as a main driver of child poverty. It is true that poor children grow up in poor families and although children’s access to affordable quality services and participation in culture and leisure activities are crucial for their development and for ensuring equal opportunities for all, there is a need to support parents and primary caregivers in their role and ensure they have adequate income to sustainably provide this support.

Their participation in the labour market through decent jobs, fair minimum wages, access to adequate unemployment benefit and minimum income, as well as non-stigmatising in-kind support and tailored benefits are crucial components of preventing and tackling child poverty and social exclusion.

This is particularly important in the context of COVID-19, which is generating increased child and family poverty and social exclusion due to reduced working, growing unemployment, low levels of income support and rising prices. The Alliance for Investing in Children proposed that parents’ access to resources under each service area of the Child Guarantee Recommendation is incorporated.

We underlined the need for measures that support parents in their free choices during their lifetime. Parents, particularly mothers, who will see their career development at risk if they choose to devote time to take care of their children, or whose skills are not recognised when trying to re-enter the labour market (after career breaks) or whose pension gap is going to increase exponentially if they take time to care for their children, have not been allowed to make real free choices (for mothers, this is the so-called “motherhood penalty”). Mothers have fought for many years to be able to spend time with their children at home before returning to work, and only recently, has it become possible in a number of countries, for fathers to benefit from parental leave as well.

Research in neuroscience demonstrates that the early years of a child’s life are crucial in establishing good mental health, to develop their cognitive capacities and to build emotional skills. All parents need to be active in this critical period. If we want a society that is inclusive and where nobody is left behind, we need to work with and accompany parents. This is also a sustainable approach.

*Families as a whole need to be given the possibility of getting out of the transgenerational trap of poverty.*

It is important to consider families as a source of social cohesion and as a resource for society as a whole, and to value and respect their role and their choices. Policy measures have to ensure that vulnerable families can make an informed choice. When a family is informed and accompanied, access to services such as health, housing, job opportunities, training, and other resources becomes easier for them. Additionally, they can then use the resources, infrastructures, and knowledge to better help all the family members to step out of precarious situations.

In addition parents should be able to freely choose between **formal or informal early childhood education and care** (ECEC). The focus should not only be on improving formal care settings (which is very important) but also on establishing a supporting infrastructure for parents and families in the form of home-visiting programmes or other community-based ECEC where not only

educators but also parents, social workers, and health professionals come together to accompany children and their parents during these first years. This has been recognised as an effective way of working and improving the precarious situation of families at risk.

If we want to talk about costs, **investing in families has a strong economic return!**

For the full response, see [MMM's joint contribution to the European Commission Public Consultation on the Child Guarantee.](#)

### **MMM responds to European Commission Public Consultation on gender pay gap and equal pay**

On 27 May, Make Mothers Matter responded to the EU Commission’s public consultation on “Transparency on pay for men and women”. The objective of the consultation was to gather views of stakeholders on (i) gender-based pay discrimination, and (ii) pay transparency measures as a tool to support awareness and enforcement of the “equal pay for equal work or work of equal value between women and men”. An EU directive proposal on the topic is foreseen for the end of 2020.

MMM underlined the need to tackle the gender pay gap (GPG) from a “chain reaction” perspective encompassing not only the immediate effects but also the root causes of the problem. To do so, it is crucial to promote pay transparency measures, but also to address the unequal share of unpaid care work between men and women. This work mostly done by women, in particular mothers, has a negative impact on their professional career and leads to the motherhood penalty. The gendered division of unpaid care work also hinders the opportunity for mothers to advance in their professional career and improve their skills.

Indeed, women **with children under 7** years of age in the EU on average **spend 20 hours per week more than men on unpaid work**. In addition, **more than 1 in 3 women reduce their paid hours to part-time due to care responsibilities, while only 1 in 10 men do the same. More than 32% of the potential female workforce**

(aged 20–64) in 2019, is absent from the labour market in the EU, because they are looking after children or incapacitated adults.

The unequal division of unpaid care work between men and women and the devaluation of care work contributes to continuing gender segregation in education and in the labour market. The gender wage inequality is not only a pay gap between men and women but also between mothers and fathers and between women without children and mothers. In addition, we highlighted the existence of a significant connection between unpaid care work and women's poverty. This vulnerability to poverty is exacerbated when mothers are single.

The GPG cannot be tackled if it is not visible – pay transparency is a step in that direction. More pay transparency would “reveal potential gender bias or discrimination in pay structures, and contribute to raising awareness and improving understanding of the causes of the gender pay gap.”<sup>1</sup> To enforce pay transparency, MMM recommended several measures to be included in the Directive proposal and, where appropriate, voluntarily implemented by European enterprises. These measures include compulsory pay audits, assessment plans and the employee's right to obtain pay information.

### **About Make Mothers Matter – MMM**

*Make Mothers Matter believes in the power of mothers to make the world a better place, advocating for their recognition and support as changemakers.*

*Created in 1947, MMM is an international NGO with no political or religious affiliations, transparently voicing the concerns of mothers at the highest level: the European Union, UNESCO and the United Nations (general consultative status).*

*Compiled by Irina Pálffy-Daun-Seiler, MMM Representative to the United Nations in Vienna, with input from Valérie Bichelmeier, MMM Representative to the United Nations in Geneva, and Johanna Schima, Secretary General of the European Delegation of MMM.*

<sup>1</sup> J. Hofman, M. Nightingale, M. Bruckmayer, and P. Sanjurjo (2020), *Equal Pay for Equal Work: Binding pay-transparency measures, Study for the Committee on Employment and Social Affairs, Policy Department for Economic, Scientific and Quality of Life Policies, European Parliament, Luxembourg, p.*

Unpaid family care work is indispensable. Someone must respond to the material, educational and emotional needs of the members of a family, not only children but also people affected by a handicap, illness, or old age. As the population of Europe is ageing, the need for care will only increase and the care gap as well. Make Mothers Matter strongly believes that gender equality will not be achieved until unpaid care work is **recognised, reduced, and redistributed**.

Make Mothers Matter recommended that other measures aiming at tackling the root causes of the GPG are considered by the European Commission at EU level and, where appropriate, voluntarily implemented by European enterprises. These include: the integration of care credits in pension schemes, the recognition and validation of competences and skills acquired by doing unpaid family care work, the adoption of a lifecycle approach that integrates flexible pathways, upskilling and reskilling, and the accessibility, affordability and quality of childcare centres.

For the full response, see [MMM responds to EU Commission's public consultation on gender pay](#).

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## Recent and Upcoming Events

### 2021

#### February

- 8. – 9.: 15. International Conference on Marriage and Family (Lisbon, Portugal); <https://waset.org/marriage-and-family-conference-in-february-2021-in-lisbon>
- 8. – 9.: 15. International Conference on Child Health Nursing and Child Care (Amsterdam, Netherlands); <https://waset.org/child-health-nursing-and-child-care-conference-in-february-2021-in-amsterdam>
- 11. – 12.: 15. International Conference on Child Language Acquisition (Barcelona, Spain); <https://waset.org/child-language-acquisition-conference-in-february-2021-in-barcelona>

#### March

- 4. – 5.: 15. International Conference on Attachment and Child Development Perspectives (Rome, Italy); <https://waset.org/attachment-and-child-development-perspectives-conference-in-march-2021-in-rome>
- 8. – 9.: 15. International Conference on Maternal Child Nursing Care and Practice (Bangkok; Thailand); <https://waset.org/maternal-child-nursing-care-and-practice-conference-in-march-2021-in-bangkok>

### **A Personal Note from the Editor: Peter Crowley Ph.D.**

Dear Readers of 'Families International',

In March 2009, with issue No. 69, I had the honour and privilege of becoming Editor, succeeding Dr. Eva Matt. Having been the sole Editor, from then until issue No. 104 in December 2017, I personally felt it was time to endeavour to expand the Editorial Committee of FI, in order to widen its horizon and bring new creative ideas and approaches into consideration, as well as endeavouring to guarantee the continuation of its publication.

Over a period of three years of expansion and restructuring of the Editorial Committee, we were kindly joined by Christin Kohler, M.A., and Isabella Nening, M.A., and then by Karin Kuzmaov, B.A., B.A. and finally by Julia Birner, who all first became Assistant Editors, and having each edited an issue of FI, Christin, Isabella, Julia & Karin then became Deputy Editors. With the first issue No. 117, due for publication in March 2021, these creative, highly qualified and generous colleagues will become Editors of FI, and whoever is responsible for an individual issue, will have the title of, Executive-Editor. I will then become Deputy-Editor, in an advisory capacity. This present issue No.116 is hence the final issue that I will be the Editor of. The Chairperson of the Committee, who ultimately bears responsibility for texts the Committee publishes, is automatically also a member of the Editorial Committee. I would thus like to take this opportunity to thank the current Chairperson, Wolfgang Engelmaier M.A., in particular, for his support of this extension and restructuring of the Editorial Committee. Please allow me also to express my appreciation and thanks to Theresa Schwarz, who has so expertly done the layout for FI for many years, concluding with the present issue.

It has truly been an honour and privilege to have been Editor of Families International for such a long period of time, and to have edited, in all, forty three issues. I have greatly appreciated the texts and contributions we received from presenters at numerous International Forums, which the Committee organises at the United Nations, Vienna International Centre, along with numerous substantive contributions from member organisations, as well as for the possibility to include such substantive texts from various agencies of the United Nations.

I am confident that FI has a long and bright future ahead, for the wellbeing of families, in the very creative, competent and generous hands and minds of Christin, Isabella, Julia and Karin.

With appreciation, gratitude, respect and best wishes to our readers,  
Yours sincerely,

Peter Crowley Ph.D.

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## **Impressum**

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