MULTIPLYING QUALITY CARE FOR VULNERABLE CHILDREN

AN EVALUATION OF VIVA'S NETWORK MODEL

Amy L. Sherman, Ph.D., Senior Fellow

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EXECUTIVE SUMMARY

Millions of children worldwide are vulnerable to hunger, disease, and abuse. According to UNICEF data\(^1\), 40 percent of people in less developed countries (LDCs) live on less than $1.90 per day. A quarter of children in LDCs toil as under-aged laborers and 27% of girls are illiterate. Only 40 percent of births in LDCs are officially registered and roughly 20% of kids who should be in school are not. Nearly 80% are subject to violent physical discipline and 2 million children are exploited annually through sex trafficking.\(^2\)

Viva, an international NGO headquartered in Oxford, UK is implementing a sophisticated strategy for tackling the massive and complex challenges facing vulnerable children worldwide. This strategy is leveraging the power of grassroots networks to multiply the scale and reach of services for these children; improve service quality; nurture changes in cultural attitudes that devalue children; and enhance influence on public policy reforms that can bring about changes to the underlying, systemic causes of persistent child poverty and abuse.

In late 2016 Viva contracted with Sagamore Institute, a nonpartisan, nonprofit research organization in Indianapolis, IN, to conduct an evaluation of its model. Sagamore’s Senior Fellow Amy Sherman (Ph.D. in international economic development) led the project, which employed both quantitative and qualitative research methods.

“NETWORKING CREATES A CAPACITY THAT CAN DELIVER GREATER RESULTS WITH BIGGER AND BETTER OUTCOMES; THIS IS THE NETWORK’S BUSINESS CASE FOR FUNDING.”

—Peter Plastrik and Madeleine Taylor, Net Gains

KEY FINDINGS

#1. Viva’s network model embodies leading-edge research on how to effect lasting social change for vulnerable children and families.

Researchers are enthusiastic about the promise of “networked nonprofits” that understand how, through cross-sector collaboration, they can “achieve their [mission] far more efficiently, effectively, and sustainably than they could by working alone.”\(^3\) Research on such nonprofits indicates that “networking creates a capacity that can deliver greater results with bigger and better outcomes.”\(^4\)

#2. Viva nurtures collaborative networks and helps them over time to develop the capacity and sophistication necessary for acting as instruments of “collective impact.”

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\(^4\) Ibid.
Collaboration is nothing new in the social sector. But collective impact initiatives are different because they involve “a centralized infrastructure, a dedicated staff, and a structured process that leads to a common agenda, shared measurement, continuous communication, and mutually reinforcing activities among all participants.” Even while nonprofit organizations have proliferated worldwide, the amount of genuine systems change has been modest. Collective Impact researchers are gathering increasing evidence that large-scale social change “comes from better cross-sector coordination rather than from the isolated intervention of individual organizations.”

**#3. Viva’s networks are genuinely grassroots.**

Viva focuses specifically on engaging local churches and grassroots ministries in its networks. Other NGOs that are pursuing network-building approaches often establish criteria for participation that truly small-scale, “unpolished” Christian ministries cannot meet. By contrast, Viva recognizes that these highly embedded, personalized ministries bring important assets with them, such as deep local knowledge, the trust of those they serve, and long-term residency in poor communities.

**#4. Viva’s model increases the scale of local efforts to serve vulnerable children and families.**

This occurs in two ways. First, Viva mobilizes new, local investment on behalf of poor children by activating the latent social capital of churches. Millions of impoverished and vulnerable children live within walking distance of a local Christian church. In 2017, Viva helped 2,324 churches, representing over a quarter million Christian believers, engage in the lives of needy children. Second, Viva resources and accelerates extant service programs in ways that multiply their scale. 94% of the organizations interviewed for this study had increased the number of children they served specifically as a result of their participation in a Viva network. Increases typically ranged from 25% to 50%.

**#5. Viva’s model improves the quality of service to children so that their needs are addressed holistically and effectively.**

This matters since the goal is not merely to help vulnerable children to survive, but to thrive. 80% of Network Coordinators interviewed reported that half or more of their Network members had implemented new practices to improve program quality, specifically as a result of participation in Network trainings.

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6 Ibid.
Before joining a Viva network, 2/3rds of interviewees disagreed or strongly disagreed with the statement that “learning to work effectively with government agencies” was necessary for improving conditions for vulnerable children. But over 93% of them said that now, since joining the network, they agreed or strongly agreed with this statement. Similarly, Network Consultants estimated that only 1 network out of 22 thought that more than 50% of the network participants were committed to public policy advocacy before they joined Viva. That has now increased to 14 out of 22 networks when Consultants considered the current attitudes of these networks, with half or more of participants now agreeing that policy advocacy is necessary to “change things for the better for vulnerable children.” In addition, only 46% of the leaders of individual network members we interviewed said that, before they joined a Viva network, they had “invested time and energy into the task of changing cultural attitudes and practices that devalue children.” By contrast, since joining a network, 80% of these leaders’ ministries were now engaged in that work.

Viva’s collective action projects have brought about positive transformation in children, families, and the local communities where Viva Networks are active.

79% of network participants interviewed reported that, as a result of the network’s activities in their communities, “more people in the community care about the needs of vulnerable children and families.” 57% added that network efforts had led local policy-makers to pay “greater attention to the needs of vulnerable children and families.”

In Sagamore’s survey of Network Consultants representing approximately 60% of all Viva networks worldwide, we asked respondents to rate their networks’ progress, on a scale of 1-5, on various objectives. A score of 5 signifies that the network has completely achieved the goal; a 1 means that the network is far from achieving it. The median score was 4 for the statement: “Because of the Network’s work, vulnerable children in our target area are now safer from abuse (for example, from domestic violence, abuse on the streets, or abuse by police) than they were before the Network existed.” The median score was 4 for the statement: “Because of projects implemented by the Network, opportunities for vulnerable children to access education have increased.”

100% of the leaders of Network member organizations reported that they had made programmatic changes to improve quality of care for children, specifically as a result of Network involvement. This improvement in quality matters because the goal is not merely to help children survive, but thrive.

Our fieldwork in Uganda and Honduras confirmed these positive outcomes through interviews with third party observers such as school principals, government officials, and police officers. And, in interviews with individual network member organizations from across the globe, we heard several specific examples of them. These included: the establishment of dozens of new community “Child Protection Committees;” thousands of girls re-enrolling in school; officially registering the births of thousands of
children who previously lacked this critical documentation; and hundreds of churches implementing child protection policies.

**#8. The most mature Viva Networks have gained sufficient credibility and “voice” so as to influence public policy makers towards reforms that are needed to ensure that children are protected and provided opportunities for advancement.**

Having influence with decision-makers requires a positive reputation and actual “seats at the table.” Our research suggests that Viva networks are making progress in these areas. 58% of Viva networks hold formal agreements with city or national government authorities and/or implement joint projects on behalf of children with such agencies. In our survey of Network Consultants, we asked them to rate network progress on three areas related to reputation and influence (see table below). The mean scores suggest that considerable progress has been made, though there is more work to do.

**Reputation, Involvement, Influence: Mean Scores from Network Consultants**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Mean Score (out of 5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>City authorities here know of this Network and respect its work.</td>
<td>3.75</td>
</tr>
<tr>
<td>Network leaders are participants in government commissions/task forces that make decisions affecting the quality of life for vulnerable children and families.</td>
<td>3.4</td>
</tr>
<tr>
<td>This Network is able to influence city authorities to make decisions that protect the rights of vulnerable children.</td>
<td>3.25</td>
</tr>
</tbody>
</table>

In Uganda, Viva’s network played a role in the development and passage of the 2016 law banning corporal punishment of children in schools. It also helped to develop the “Alternative Care Framework” which was part of the Children (Amendment) Act of 2016 (codifying a preference for family-based care over long-term institutional care). In Honduras, the network’s Transparency Project has produced, in collaboration with the country’s Department of Education, a school curriculum for three different educational levels for use in public schools nationwide.

**#9. Viva has built committed, action-oriented, local networks with staying power.**

The only *enduring* solution for the problems faced by poor children is for their own people, their own neighbors, their own localities and governments, to take responsibility. Viva has built genuinely grassroots networks with physical proximity to the needs. These networks are training and equipping parents, government social workers, community organizations, local schools, and local police in ways that are enhancing care for children. And Viva is working to sustain their motivation and strengthen their capacity so that they remain engaged for many years. Notably, 100% of the individual network member organizations interviewed in this study stated that network participation had “positioned them for sustainability over the long term.”

Viva’s network model is not easy to articulate succinctly. Its strategy is a multi-layered approach to a multi-faceted problem. Our research suggests that Viva has forged a distinctive path within the world of international relief and development organizations. We believe Viva’s model is one with strong promise for ultimately advancing large-scale, sustainable transformation in the lives of vulnerable children in the countries it serves.
I. Introduction and Background

Viva, an international NGO headquartered in the U.K., is passionate about releasing children from poverty and abuse. Its vision is bold and ambitious: to see whole cities around the globe where all children—girls as well as boys—are educated, free from violence and trafficking, protected during emergencies, and in loving, strong families with stable incomes.

This ambitious vision is far beyond what any one organization can achieve. So Viva’s strategy is to build collaborative, grassroots, locally-led networks that engage multiple organizations in pursuit of a common mission. At the center of this strategy is Viva’s desire to mobilize and deploy the Church—whole congregations and individual Christians and ministries who share Viva’s passion for thriving youth—to live out God’s command to care for the vulnerable.

Throughout the developing world, Christian churches not only have a mandate to love children, but are also often located in the same communities where poor families reside. The Church is in a position to do much good not only because of its mission, people, and location, but also because it is often one of the most trusted institutions in the countries where Viva works. Thus, activating the prodigious potential of the Church is at the heart of a sustainable solution to the tremendous challenges facing poor children worldwide.

Activating the Church is at the heart of a sustainable solution to the tremendous challenges facing poor children worldwide.

However, churches and grassroots ministries typically need training and equipping to live fully into their mandate to care for the vulnerable. In addition, extant ministries may be siloed and uncoordinated, limiting their effectiveness. Many grassroots ministries operate on an abundance of heartfelt compassion, but lack professional training in childhood development, trauma care, and proven organizational best practices that contribute to both quality care and sustainability. Clearly, building the capacity of the Church is a necessary priority.
It is also the case that even with greater reach and scale, the Church’s efforts to effect enduring, positive change for vulnerable children and families will be limited in the absence of needed structural reforms. A variety of existing social, economic, cultural, and political systems contribute to the persistence of child poverty and abuse in the developing world. Thus churches and ministries must be “at the table” with cultural influencers and policy-makers, advocating knowledgably, credibly, and persuasively for the changes needed to protect children and advance the prospects for their success.

These are the realities that have led Viva to its model of developing and strengthening locally-led networks of churches and Christian ministries who together seek the holistic thriving of vulnerable children, youth, and families. Currently Viva supports 38 partner networks in 26 countries. This model unfolds over time into four arenas: connecting, capacity-building, collective action, and city-wide influence. In brief:

- Viva helps to identify the churches and organizations who are (or could be) engaged in serving vulnerable children and connects them into a locally-led Network;

- Viva builds the organizational and programmatic capacity of Network members through training, coaching, and peer-to-peer learning and sharing;

- Viva helps members to design and implement holistic service programs (i.e., addressing youth’s physical, social, emotional, intellectual, and spiritual needs) and advocacy projects to address the root causes of the challenges facing youth; and

- Viva works to reform city systems in ways that create greater protection and opportunity for vulnerable families.

The Evaluation Project
In 2017, Viva engaged the Sagamore Institute, a nonpartisan, nonprofit research organization to conduct a comprehensive evaluation of Viva’s model and work. Senior Fellow Amy Sherman, who holds a Ph.D. in international economic development and has completed multiple, broad-ranging evaluation projects for U.S. and international faith-based ministries, led the Viva project.

After completing a thorough document review as well as a relevant literature review on best practices in this field, Sagamore scholars designed a mixed-methods evaluation strategy. Our primary interest was to ascertain the effectiveness of Viva’s model in terms of improving the well-being of vulnerable children. Four key research questions framed our exploration:
1. Does Viva’s model *increase the scale* of local efforts to serve vulnerable children and families?

2. Does Viva’s model *improve the quality of service* to children, so that their needs are addressed holistically and effectively?

3. Are Viva’s collective action projects *effective in bringing about positive transformation in children, families, and the local communities* where Viva Networks are active?

4. Are Viva Networks *gaining sufficient credibility and “voice” so as to influence public policy makers towards reforms* that are needed to ensure that children are protected and provided opportunities for advancement?

These questions are largely focused on Viva’s external outcomes. Our secondary interest concerned the health of the networks themselves. We decided we could invest less time and effort in this “internal” focus because Viva itself has such a robust, detailed assessment process measuring network health.

A variety of existing social, economic, cultural, and political systems contribute to the persistence of child poverty and abuse in the developing world. Thus churches and ministries must be “at the table” with cultural influencers and policy-makers, advocating knowledgably, credibly, and persuasively for the changes needed to protect children and advance the prospects for their success.

Our evaluation project was composed of three main parts. The first was an online survey of 10 of Viva’s Network Consultants, who answered questions about the 22 networks they oversee (see Table 1 on next page). These Network Consultants are fulltime Viva staff who serve the leaders of local networks through coaching and resourcing. Generally each Consultant lives in the region where the networks he/she oversees are located. On average, these individuals have held their positions for five years.
### Table 1. Networks Reported on by Network Consultants

<table>
<thead>
<tr>
<th>Network Name</th>
<th>Location</th>
<th>Region</th>
<th>Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangalore Network</td>
<td>Bangalore, India</td>
<td>South Asia</td>
<td>2</td>
</tr>
<tr>
<td>CRANE</td>
<td>Kampala, Uganda</td>
<td>Africa</td>
<td>3</td>
</tr>
<tr>
<td>CONNECT</td>
<td>Capetown, South Africa</td>
<td>Africa</td>
<td>2</td>
</tr>
<tr>
<td>Dehradun Network</td>
<td>Dehradun, India</td>
<td>South Asia</td>
<td>2</td>
</tr>
<tr>
<td>Delhi Network</td>
<td>Delhi, India</td>
<td>South Asia</td>
<td>1</td>
</tr>
<tr>
<td>Eastern Samar Children’s Ministries Network</td>
<td>Eastern Samar,</td>
<td>SE Asia</td>
<td>3</td>
</tr>
<tr>
<td>Mwanza Children’s Action Network (MCAN)</td>
<td>Mwanza, Tanzania</td>
<td>Africa</td>
<td>1</td>
</tr>
<tr>
<td>Peace Team Cambodia</td>
<td>Siem Riep, Cambodia</td>
<td>SE Asia</td>
<td>2</td>
</tr>
<tr>
<td>Philippine Children’s Ministries Network (PCMN)</td>
<td>Philippines</td>
<td>SE Asia</td>
<td>3</td>
</tr>
<tr>
<td>RENACSENIV</td>
<td>Venezuela</td>
<td>South America</td>
<td>2</td>
</tr>
<tr>
<td>Red VINAD</td>
<td>Costa Rica</td>
<td>Central America</td>
<td>2</td>
</tr>
<tr>
<td>Red Viva Argentina</td>
<td>Argentina</td>
<td>South America</td>
<td>1</td>
</tr>
<tr>
<td>Red Viva El Salvador</td>
<td>El Salvador</td>
<td>Central America</td>
<td>2</td>
</tr>
<tr>
<td>Red Viva Honduras</td>
<td>Honduras</td>
<td>Central America</td>
<td>3</td>
</tr>
<tr>
<td>Red Viva Oruro</td>
<td>Bolivia</td>
<td>South America</td>
<td>3</td>
</tr>
<tr>
<td>Red Viva Paraguay</td>
<td>Á’emby, Paraguay</td>
<td>South America</td>
<td>2</td>
</tr>
<tr>
<td>Red Trey</td>
<td>Havana, Cuba</td>
<td>Central America</td>
<td>1</td>
</tr>
<tr>
<td>Viva Children At Risk Network, Patna</td>
<td>Patna, India</td>
<td>South Asia</td>
<td>3</td>
</tr>
<tr>
<td>Viva Guatemala</td>
<td>Guatemala</td>
<td>Central America</td>
<td>2</td>
</tr>
<tr>
<td>Viva Network Zimbabwe</td>
<td>Harare, Zimbabwe</td>
<td>Africa</td>
<td>1</td>
</tr>
</tbody>
</table>

Source: *Sagamore Institute Survey of Viva Network Consultants, 2017.*

The second component involved on-site visits to two of Viva’s most mature Networks: Red Viva in Honduras and CRANE in Uganda. Sherman spent a week in Tegucigalpa and Sagamore Senior Fellow Laurel Cristensen spent a week in Kampala. Together they interviewed 60 individuals, including network staff, leaders of organizations participating in the networks, program beneficiaries, network partners, and a variety of “third party” observers including teachers, community leaders, school principals, government officials, and police officers.

The third component involved structured interviews composed by Sherman but conducted by Network Consultants with individual Network Coordinators (n =10) and leaders of Network member churches/organizations (n =16) from eight different, geographically distributed networks. One of those eight networks was at Phase 3, two were at Phase 1, and the rest were at Phase 2.
II. Viva’s Model: The Value of Networks and “Collective Impact”

“Today...many in the social-change sector are recognizing the potential power of networks for achieving social change. Nonprofit organizations, funders, and social entrepreneurs are now building networks for the purpose of achieving outcomes together, especially when what is involved are complex problems...”

—Network Impact & The Center for Evaluation Innovation

“[T]he potential for impact increases exponentially when leaders leverage resources of all types—leadership, money, talent—across organizations and sectors toward a common goal.”

—Jane Wei-Skillern et. al., Stanford Social Innovation Review

The scale and complexity of most of the world’s pressing social challenges dwarf the capacity of even very large, well-managed and well-financed NGOs. Increasingly, social change experts are hailing “the networked nonprofit” as a better solution. Such organizations are focused more on their animating cause than on their own institutions, understanding that through cross-sector collaboration they can “achieve their [mission] far more efficiently, effectively, and sustainably than they could by working alone.”

Networked nonprofits study the landscape, identifying the people and organizations working on the same mission. These include not only those within the nonprofit/NGO sector but also from the government and business sectors. These pioneering organizations operate with an abundance rather than scarcity mentality. This allows them to cooperate and forge alliances with other entities that might otherwise be seen as competitors for funding. Networked nonprofits focus on a form of leadership that majors on facilitation and connection. Their leaders work diligently to develop mutually beneficial, trust-based relationships with others who share the same passion and mission. And they invest time and money in the “network infrastructure”—meetings, communications, capacity building, and coordination—that is required to keep networks vibrant and effective.

Researchers are enthusiastic about networked nonprofits because they see how this approach is having a greater impact than the traditional strategy of single nonprofits each pursuing their own goals. Some of the effective networks reviewed in the scholarly literature include Habitat for Humanity Egypt, Women’s World Banking, RE AMP, Reboot, Instituto de Cidadania

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8 Ibid.
Empresaria (Brazil), and Lawrence CommunityWorks. These organizations achieved greater scale, reach, adaptability, and resilience through networking. As two of the leading researchers in the field put it simply: “Networking creates a capacity that can deliver greater results with bigger and better outcomes; this is the network’s business case for funding.”

Even while nonprofit organizations have proliferated worldwide, the amount of genuine systems change has been modest. Greater networking and collaboration are needed steps. But not all partnerships are of equal value. Social change innovators praise collective impact initiatives as distinctly different kinds of collaborations. Collective Impact enthusiasts are gathering increasing evidence that large-scale social change “comes from better cross-sector coordination rather than from the isolated intervention of individual organizations.”

“Unlike most collaborations,” scholars John Kania and Mark Kramer explain in a landmark 2011 essay in the Stanford Social Innovation Review, “collective impact initiatives involve a centralized infrastructure, a dedicated staff, and a structured process that leads to a common agenda, shared measurement, continuous communication, and mutually reinforcing activities among all participants.” In other words, this strategy isn’t merely about encouraging more collaboration—it is that, but it is also more. It’s about a different kind of collaboration, one that requires nonprofit management organizations “that have the skills and resources to assemble and coordinate the specific elements necessary for collective action to succeed.”

Viva: A Truly Grassroots Network for Collective Impact
Viva’s operating model embodies this forward-edge thinking about effecting lasting social change for vulnerable children and families. Viva nurtures collaborative networks and helps them over time to develop the capacity and sophistication necessary for acting as instruments of collective impact. While some faith-based NGOs have embraced the network paradigm,

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11 Ibid.
fewer are actively engaged in collective impact initiatives. Another distinctive of Viva is that it focuses specifically on engaging local churches and genuinely “grassroots” entities in its networks. Other NGOs that are pursuing network-building approaches often establish criteria for participation that truly small-scale, “unpolished” Christian ministries cannot meet. By contrast, Viva recognizes that these highly embedded, personalized ministries bring important assets with them, such as deep local knowledge, the trust of those they serve, and long-term residency in poor communities (they are not going anywhere). Viva’s belief is that these grassroots ministries can grow in scale and quality with appropriate training and support.

Viva’s operating model embodies forward-edge thinking about effecting lasting social change for vulnerable children and families.

Research on networking and collective impact has identified several key elements that mark effective organizations in this field. Thus, even before we delve into the findings from our research on the four “outcome-oriented” research questions, we need first to review what we learned about how well Viva is doing “internally” with regard to building healthy networks that can grow into effective implementers of collective impact.

Is Viva Building Strong, Healthy Networks?

As noted earlier, Viva currently works with 38 partner networks. Viva has developed a comprehensive system for assessing the ongoing health of its networks. Every other year each Network Coordinator works with his/her staff team (and Viva’s Network Consultants) to complete a highly detailed Network Health Check (NHC). The NHC collects information regarding communications, governance, budgets, joint projects, and collaboration with government agencies, as well as the network’s capacity building programs and collective action initiatives (among other topics). This in-depth review tells Viva much about the strengths and needs-improvement areas in the various networks. As per Viva’s 2017-2018 Network Health Check, 3,476 entities (67% churches, 33% organizations) were participating in Viva networks. Together these network participants directly served over 1.68 million children in 2017.

Given the substantial data provided by the NHC, Sagamore researchers decided to limit our own exploration of the health of the networks. (Instead, our focus was primarily on the outcomes achieved by the networks.) We explored just four themes: participants’ attitudes about the value of collaboration; their actual behavior in the network (e.g., sharing information with fellow members); the clarity of the network’s purpose and the alignment of members with that mission; and the strength of network communications. Based on our findings we would rate the networks as strong in the first three areas and weaker in the fourth.
Believing in Collaboration  
Network participation seems to clearly increase the participating organizations’ convictions about the value of collaboration. We asked Network Consultants to estimate the percentage of network members that would have agreed with this proposition before joining:

“Christian organizations and churches that want to help vulnerable children and families can accomplish more by working together than they can by working alone.”

Only 9% reported that half or more of their network members would have agreed with the statement prior to network involvement. But 82% said that half or more of their network members would do so now, since joining the network.

Behavior by Network Members  
This conviction seems to be backed by concrete deeds. We asked Network Consultants about network members’ actual behaviors, such as collaborating more with other groups within (or outside) the network; sharing information with other network participants; and referring children to fellow member organizations. As shown in Table 2 below, more than half of the churches and organizations participating in the networks overseen by these Consultants are now partnering with and sharing information with one another.

Table 2. Three Behaviors of Network Participants

<table>
<thead>
<tr>
<th>Activity</th>
<th>% reporting that half or more of their Network participants were doing the activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaborating more with organizations inside (or outside) the Network</td>
<td>54.0%</td>
</tr>
<tr>
<td>Sharing information with other organizations in the Network</td>
<td>68.2%</td>
</tr>
<tr>
<td>Referring more children to other organizations within the Network</td>
<td>27.3%</td>
</tr>
</tbody>
</table>


Observations from our field work in Uganda and Honduras largely confirm the information shared by Network Consultants. We found that the leaders of network member organizations and churches we interviewed had positive views of collaboration and were coordinating with and making referrals to other network participants.

Common Mission  
In her important essay, “The Networked Nonprofit,” scholar Jane Wei-Skillern emphasizes that networked nonprofits cannot take values alignment among partners for granted. They must commit time and resources at the outset to assess whether there is
sufficient common ground on which to build a network. They must then invest in strengthening the shared values and monitoring adherence to them.  

Most of Viva’s Network Consultants appear to understand this. Over 77% reported that “working to get Network participants agreed on a common agenda for action” was a major focus of their work. In addition, 73% of Consultants say they invest major time and effort in “working to get Network participants to increasingly think of themselves as one collective entity working together for vulnerable children (as opposed to being focused on their individual organizational identities).”

Our field research in Uganda and Honduras suggested that network participants in those countries have a clear understanding of and passion for the network’s common mission.

Network Communications
Viva’s Network Consultants are in weekly communication with the Network Coordinators they support and make at least one annual in-person visit to each network they oversee. Communications between network participants and the Network Coordinators (and their staff) and communications among network participants, though, could be stronger. According to the 2017-2018 Network Health Check, only 5 networks have websites. Twelve networks report using Facebook and 15 use the cellular WhatsApp application. Only seven networks send out newsletters to their members.

Our fieldwork at Red Viva in Honduras—which is among the most mature networks within Viva—revealed that it still operates largely in a “hub-and-spoke” manner rather than in what Wei-Skillern calls a “node” manner:

[Networked nonprofits] see themselves as nodes within a constellation of equal, interconnected partners, rather than as hubs at the center of their nonprofit universes.  

In short, there is more communication between the RVH office and the leaders of network participants than there is between the various RVH members themselves. This seems somewhat less the case with CRANE in Uganda, since it sports several Working Groups of members that are highly engaged with one another on projects of shared interest. Still, CRANE rated itself only “average” in its 2017 Network Health Check on “network participants meeting each other peer-to-peer.”

13 Ibid.
Viva Networks and the 5 Conditions of Collective Impact

Viva’s goal is to help networks mature to a point where they are engaged in “city wide solutions” that emerge from effective cross-sector collaborations and advocacy efforts. Viva itself does not use the language of “collective impact.” But its description of its hoped-for “Phase 4” of network development shares many commonalities with this strategy. In Phase 4, Viva envisions networks “using a block identity to form a city consortium for wide-scale joint implementation” of initiatives to address root causes of child poverty and vulnerability.\(^\text{14}\)

Kania and Kramer suggest that there are five conditions of collective impact: common agenda; shared measurement systems; mutually reinforcing activities; continuous communication; and backbone support organizations.\(^\text{15}\) None of Viva 38’s networks has yet reached Phase 4, but CRANE in Uganda and RVH in Honduras are solidly in Phase 3 and increasingly positioned for Phase 4. We conducted our on-site field research at these two networks because of their strength and maturity—and we attempted to assess the degree to which the five conditions of collective impact were evident. In our separate report on these case study visits, we discussed this topic at length. Here, we succinctly summarize our observations below.

1. Common Agenda: “Collective impact requires all participants to have a shared vision for change, one that includes a common understanding of the problem and a joint approach to solving it through agreed upon actions....”

   Both CRANE and Red Viva Honduras (RVH) rate strongly on this condition. Both Networks have made significant progress in developing among their members a common agenda. Both show ample evidence that network members are collaborating with one another, sharing information, making referrals, and engaging in joint projects and joint advocacy campaigns all aimed in the same direction. Based on our site visits, we concluded that:

   - Member organizations of both networks demonstrated an understanding of what the overarching vision of the network was;
   - In Uganda, stakeholders within and outside CRANE demonstrated common understanding and purpose in two major program areas: girls’ education and deinstitutionalization of so-called orphans from child protection centers;
   - In Honduras, partners inside and outside of RVH shared a common vision for deinstitutionalization of Child Protection Centers and for addressing the rampant problem of corruption.


2. Shared Measurement Systems: “Agreement on a common agenda is illusory without agreement on the ways success will be measured and reported. Collecting data and measuring results consistently on a short list of indicators at the community level and across all participating organizations not only ensures that all efforts remain aligned, it also enables the participants to hold each other accountable and learn from each other’s successes and failures.”

The two networks do not score as strongly on this criteria. In our survey of Network Consultants, we asked respondents to rate their networks’ progress, on a scale of 1-5 (in which 5 meant “we have achieved this”) in achieving the identification of a common set of metrics by which the network measures its progress in achieving its overall goals. In the survey, RVH rated itself as a 4 and CRANE rated itself a 5. However, in-person interviews with RVH staff suggest that that rating may be too generous. Outside consultants that had worked with RVH had noted program evaluation as a “needs-improvement” area. Onsite interviews suggested that CRANE is doing better in terms of outcomes evaluation. But we did not find evidence in either country that network members had come together specifically to identify a set of common, overarching metrics that would serve as indicators of progress on commonly agreed objectives such as deinstitutionalization or child safety.

3. Mutually Reinforcing Activities: “encouraging each participant to undertake the specific set of activities at which it excels in a way that supports and is coordinated with the actions of others...The power of collective action comes not from the sheer number of participants or the uniformity of their efforts, but from the coordination of their differentiated activities through a mutually reinforcing plan of action.”

On this criteria, CRANE rates strongly. Through its various network organizations and partners, CRANE’s programming is holistic and mutually reinforcing. Programs address both the needs of children and of whole families. Joint initiatives provide assistance in a variety of arenas: education, income-generation, and child safety. RVH’s performance is more mixed. In some communities network members and churches, with RVH’s help, have been able to provide programs addressing child safety, as well as healthy recreational and character-building activities, in the same locale. This seems to occur when a single church is able to implement multiple programs simultaneously. But not all churches have this ability. We did not see examples of where, in one community, several different churches have each taken responsibility for leading one of these programmatic initiatives (i.e., each doing their own small part to contribute to the whole). However, at various Child Protection Centers, Viva’s program training and coaching have allowed individual CPCs to implement multiple initiatives (e.g., deinstitutionalization, new child protection policies, and Viva Adulta—a program helping older teens make the transition out of residential care) that are mutually reinforcing. Network participation was clearly helping these members to provide more holistic care for the children/youth they served.
obstacles to receiving healthcare and other social services. A 2013 study by the Inter-American Development Bank found that unregistered children are less likely to enroll in school or receive proper immunizations. Without proof of age, children can face military conscription or be forced to stand trial as an adult. The problem is especially severe among Guatemala’s street children. Viva Guatemala has raised awareness of this issue among churches and mobilized them into action. Through the I Exist program, some 4000 children have been officially registered; 377 midwives have received training on the importance of formal birth registration; and 36 hospital-based offices of RENAP (the National Office of Registration) have been equipped in methods to registered previously unregistered youth.

4. Continuous Communication: Kania and Kramer note that in all the effective Collective Impact programs they had studied, monthly or even bi-weekly meetings among leaders were the norm. Such regular gatherings deepen relationships and trust and help nurture a common vocabulary.

This is an area of strength for CRANE but modestly less so for RVH. Both networks are so heavily involved in overseeing programs that network relationship-building and communications are not always a priority.

5. Backbone support organizations: “Creating and managing collective impact requires a separate organization and staff with a very specific set of skills to serve as the backbone for the entire initiative. Coordination takes time, and none of the participating organizations has any to spare. The expectation that collaboration can occur without a supporting infrastructure is one of the most frequent reasons why it fails....The backbone organization requires a dedicated staff separate from the participating organizations who can plan, manage, and support the initiative through ongoing facilitation, technology and communications support, data collection and reporting, and handling the myriad logistical and administrative details needed for the initiative to function smoothly...”

Though neither CRANE nor RVH would necessarily describe themselves as “backbone organizations,” they do effectively conduct many of the functions of such groups. Both organizations enjoy staff who possess the needed competencies. Program managers are well-organized and highly dedicated. They are respected coaches and facilitators. Network staff
oversee data collection and reporting for the various programs. The Network Coordinators are skilled in liaising with government officials. CRANE and RVH staff effectively coordinate joint projects. They celebrate victories, sustain motivation, and provide “relational glue” for the network members.

Overall, Viva’s trajectory of network development—from connecting to capacity building to collective action to city wide solutions—embodies the promise of collective impact. Sagamore’s research found that network participants are growing stronger in their programmatic and organizational capacity. We also saw that as these networks mature, participating churches and Christian ministries are learning to partner with entities across social sectors, including secular NGOs and government agencies. They are engaging not only in direct service but also in advocacy for policy reforms and enforcement of existing child protection laws. They are seeking a place at the table where decisions affecting the wellbeing of vulnerable families are taken. In short, Viva’s overall strategy is sound and it is making progress in nurturing networks in their development from Phase 1 to Phase 4. At the same time, most networks are still in the middle stages of maturity, so Viva has not yet achieved its long-term vision.

As we describe in greater detail in the next section, Viva has demonstrated that its network model is living up to its promise of “bigger and better outcomes.” In its highly developed networks, Viva is serving thousands of children and has become a recognized, credible voice with genuine influence among city and national governments.
III. Findings: The Four Key Research Questions

As noted earlier, Sagamore’s assessment of Viva focused less on the internal health and strength of its networks and more on the differences those networks are making on behalf of vulnerable children and families. This approach is layered because Viva is essentially an intermediary organization (that is, focused more on capacity building than on direct service). Based on Sherman’s earlier research on U.S. faith-based intermediaries, we did explore with individual network members their opinions on the benefits network membership brought them. But our overarching framework centered on how well Viva was achieving the kinds of “value-added” success that the network model/collective impact model promises; namely, bigger and better outcomes in terms of the social change desired. We found that, largely, Viva’s model is delivering.

**Research Question 1: Does Viva’s model increase the scale of local efforts to serve vulnerable children and families?**

**Finding:** Yes

Given the vast need for quality care for vulnerable children worldwide, as well as the Bible’s clear mandate for the Church to vitally engage poor communities to bring wholeness and flourishing, Viva’s strategy focuses on identifying the active and latent assets (human, organizational, and financial) of local churches to activate them for new direct service programs meeting children’s practical needs. In short, Viva’s first contribution to the mission of bringing care to these children is that its work increases the amount of local investment in efforts to serve them. Consultants reported that 100% of the Viva networks they oversee include churches that had not offered services to vulnerable children before joining the network—and are now offering such services. This engagement of local churches is a boon both to needy children/families and to the churches themselves, as they reap the blessings that come from joining Christ more fully in His mission to bring flourishing to the poor.

100% of surveyed Viva networks included churches that had not, prior to joining the network, offered services to vulnerable children.
Field work in Uganda confirmed that Viva networks had helped to activate latent social capital in local churches and deploy it for the cause of greater care for vulnerable children. In Honduras, Network Coordinator Maria Luna reported that network involvement had spurred some churches to “do ministry that otherwise might not happen.” (More commonly, though, Red Viva Honduras has been more focused on helping extant ministries to expand and improve their services.)

Data gathered through the Consultants’ survey and the structured interviews with Network Coordinators and members affirmed the role Viva networks are playing in helping member organizations to increase their reach and scale (see Table 3).

Table 3. Network Participation and Increased Scale of Services to Children

<table>
<thead>
<tr>
<th>Consultants Survey</th>
<th>Coordinator Interviews</th>
<th>Member Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>64% of surveyed Network Consultants reported that half or more of the members of the networks they oversaw had, as a result of involvement with Viva, increased the number of vulnerable children/families served.</td>
<td>60% of Network Coordinators reported that half or more of the participant organizations in their networks had increased the number of vulnerable children/families served as a result of their participation in the network and/or network trainings.</td>
<td>94% of leaders of individual network member organizations reported that, specifically as a result of their involvement in the Network or Network trainings, they had increased the number of vulnerable children served.</td>
</tr>
</tbody>
</table>

Table 4 on the next page shows the percentage increase in scale of 16 network members from a variety of Viva networks around the globe. Fifteen out of the 16 (94%) indicated that their organizations had increased the number of children they served “specifically as a result of their participation in the Network and/or the trainings [their] organization had received through the Network.” In some cases, the increases were extremely large: a 2583% increase in one case, 895% in another, 500% in another, and 284% in a fourth. Most often, the increases were in the 25% to 50% range.

94% of interviewees indicated that their organizations had increased the number of children they served “specifically as a result of their participation in the Network.” Most often, increases were in the 25% to 50% range.
Table 4. Increases in Scale by Interviewed Network Members

<table>
<thead>
<tr>
<th>Network Member</th>
<th>Ministry Focus</th>
<th>Location</th>
<th>% Increase Since Joining Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agape Ministries India</td>
<td>Cross-cultural church planting through children’s ministry</td>
<td>Bangalore, India</td>
<td>100%</td>
</tr>
<tr>
<td>Radiant Life Charitable Trust</td>
<td>Primary &amp; Secondary Education</td>
<td>Bangalore, India</td>
<td>284%</td>
</tr>
<tr>
<td>Centro Educativo Semillas</td>
<td>Church w/associated school</td>
<td>Costa Rica</td>
<td>Not reported</td>
</tr>
<tr>
<td>Centro Cristiano en Guadalupe</td>
<td>Church w/an Education Center</td>
<td>Costa Rica</td>
<td>5%</td>
</tr>
<tr>
<td>Shifalaya Church</td>
<td>Church</td>
<td>Delhi, India</td>
<td>25-49%</td>
</tr>
<tr>
<td>New Life India</td>
<td>Church-based Education Center in a slum</td>
<td>Delhi, India</td>
<td>25%</td>
</tr>
<tr>
<td>El Bethel Church</td>
<td>Church</td>
<td>Nepal</td>
<td>20%</td>
</tr>
<tr>
<td>Love Light Society</td>
<td>Home for abused children</td>
<td>Nepal</td>
<td>500%</td>
</tr>
<tr>
<td>Asha Kiran Trust</td>
<td>NGO focused on women and children</td>
<td>Patna</td>
<td>25%</td>
</tr>
<tr>
<td>Agape Cottage Foundation</td>
<td>NGO with children’s home</td>
<td>Patna</td>
<td>10%</td>
</tr>
<tr>
<td>MWAOMI</td>
<td>NGO focused on women and children</td>
<td>Tanzania</td>
<td>0%</td>
</tr>
<tr>
<td>AICT Makongoro</td>
<td>Church</td>
<td>Tanzania</td>
<td>50%</td>
</tr>
<tr>
<td>Mukisa Special Children’s Trust</td>
<td>NGO focused on children w/disabilities</td>
<td>Kampala, Uganda</td>
<td>2583%</td>
</tr>
<tr>
<td>Evangel Church, Kabimbiri, Makono</td>
<td>Church</td>
<td>Kampala, Uganda</td>
<td>895%</td>
</tr>
<tr>
<td>Apostolic Church of Zimbabwe</td>
<td>Church</td>
<td>Zimbabwe</td>
<td>50%</td>
</tr>
<tr>
<td>Rugare Orphan Care Organisation</td>
<td>NGO</td>
<td>Zimbabwe</td>
<td>20%</td>
</tr>
</tbody>
</table>

Source: Structured Interviews with Network Member Organization Leaders, Dec. 2017-Mar. 2018. n= 16

Collaboration and Increased Scale

In their first phase, Viva networks focus largely on connecting. Viva hopes that by gathering church and NGO leaders involved in ministry to vulnerable children in a network, participants will become more informed about what others are doing, more engaged in collaborating with and learning from other groups, and supported through mutual encouragement in ways that could help them to avoid “burnout” in this hard (and sometimes overwhelming) work. Interviewees reported that all of these objectives are being met. As shown in Table 5 below, 94% indicated that Network participation had led them to work less in isolation and more in concert with others inside and outside the Network. Over half (56%) reported that prior to their joining the Network, they knew very little about what other churches or Christian ministries were doing in terms of providing services for vulnerable children/families.
Table 5. Influence of Network Participation: CONNECTING

<table>
<thead>
<tr>
<th>STATEMENT</th>
<th>Not Accurate</th>
<th>A Little Accurate</th>
<th>Mostly Accurate</th>
<th>Very Accurate</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>“BEFORE we started participating in the Network, we knew very little about what other churches or Christian ministries were doing in terms of providing services for vulnerable children/families.”</td>
<td>12.5%</td>
<td>31.3%</td>
<td>18.8%</td>
<td>37.5%</td>
<td>0%</td>
</tr>
<tr>
<td>“As a result of our involvement in the Network, our organization is working less in isolation and more in concert with other organizations in and/or outside the Network.”</td>
<td>0%</td>
<td>6%</td>
<td>43.8%</td>
<td>50%</td>
<td>0%</td>
</tr>
</tbody>
</table>

Source: Structured Interviews with Network Member Organization Leaders, Dec. 2017-Mar. 2018. n = 16

Viva desires to see Christian pastors and ministry leaders more fully embrace a collective identity and the conviction that positive change for vulnerable children best happens through collaborative projects and collective advocacy. Viva hopes that over time network participants will come to recognize the need to co-labor with one another and with relevant parties outside the network (such as government agencies and secular NGOs). These are keys to achieving larger-scale positive, sustainable change for vulnerable children.

Our research found that participation in a Viva network influences considerable change in attitudes held by the members. The most visible attitudinal changes concerned members’ opinions regarding the value of collaboration/collective action and advocacy. Interviewers presented leaders of 15 network member organizations with a series of statements. For each statement, respondents were asked their agreement level with the statement BEFORE joining the network, and their agreement level with it AFTER their becoming involved in the network. As shown in Table 6, only two interviewees had strongly agreed (SA) with the idea that “Christian organizations and churches that want to help vulnerable children and families can accomplish more by working together than they can by working alone” before joining the Network. But 14 reported that they now strongly agree with this.

Table 6. Attitude Change: “Christian organizations and churches that want to help vulnerable children and families can accomplish more by working together than they can by working alone.”

<table>
<thead>
<tr>
<th></th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
<th>NS</th>
</tr>
</thead>
<tbody>
<tr>
<td>BEFORE</td>
<td>6</td>
<td>4</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>AFTER</td>
<td>1</td>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


16 One of the 16 interviews was cut short and the questions on attitudinal changes were not asked.
Similarly, only two interviewees said they’d strongly agreed with the statement that “Collective Action is the key for achieving long-term, sustainable improvements in the lives of vulnerable children and youth” before joining the network. But 12 reported that they now strongly agree with this (see Table 7).

Table 7. Attitude Change: “Collective Action is the key for achieving long-term, sustainable improvements in the lives of vulnerable children and youth.”

<table>
<thead>
<tr>
<th></th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
<th>NS</th>
</tr>
</thead>
<tbody>
<tr>
<td>BEFORE</td>
<td>5</td>
<td>4</td>
<td>4</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>AFTER</td>
<td>3</td>
<td></td>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Network participation also influences changes in members’ opinions regarding the necessity of partnering with government agencies and secular NGOs in order to “change things for the better” for vulnerable children and families. Two-thirds of interviewees said that before joining the network, they would have disagreed or strongly disagreed with the statement that “learning to work effectively with government agencies” was necessary for improving conditions for vulnerable children. But over 93% of them said that now, since joining the network, they agreed or strongly agreed with this statement. A similar shift has occurred with regard to opinions about partnering with secular NGOs. Interviewees reported that prior to joining a network, they were less likely to be favorable towards such partnerships; now they are more open to this. Eighty percent today agree or strongly agree that such collaboration is important in order to improve conditions for children. Before network involvement, 66% disagreed or strongly disagreed with this notion.

These changed attitudes and behaviors regarding collaboration matter intrinsically for the maturation of the network model but also because they may be associated with increases in scale. According to information supplied by nine of the Network Consultants, increased collaboration was associated with increased scale. These nine consultants reported that 50-74% of their networks’ members had increased their collaboration with other organizations (within our outside of the respective networks). These same Consultants also reported that 76-100% of the member organizations in their networks had increased their scale. Furthermore, the two Consultants who reported increased collaboration by 76-100% of network members also reported that 76-100% of network members had increased their scale.

Before joining a Viva network, 2/3rds of interviewees disagreed or strongly disagreed with the statement that “learning to work effectively with government agencies” was necessary for improving conditions for vulnerable children. But over 93% of them said that now, since joining the network, they agreed or strongly agreed with this statement.
**WHAT DOES VIVA DO? WHAT DIFFERENCE DOES IT MAKE?**

- **CONNECTS**
  - More churches mobilized to serve kids.
  - *More kids served.*
  - More organizations trained.
  - *Higher quality care for kids.*

- **BUILDS CAPACITY**
  - Kids benefit from health, education, economic, disaster relief, and child protection programs.
  - *Root causes of problems get addressed.*
  - The Church, civil society, and government work together to reform systems.

**THE BOTTOM LINE:** Networking produces bigger, better outcomes.
RESEARCH QUESTION 2: Does Viva’s model improve the quality of service to children, so that their needs are addressed holistically and effectively?

FINDING: Yes

In each phase of network development (though especially in Phase 2) Viva offers participants a range of training workshops and seminars focused on improving program quality and strengthening organizational health and sustainability. In both Honduras and Uganda, Sherman and Christensen found that, based on interviews with network members, the principal value of the network concerned the quality improvement in programming that arose from training/coaching provided. Even veteran organizations and agencies with backgrounds in providing services to vulnerable children benefitted from the training offered. This was echoed in the reports from Network Consultants and in the Coordinator and individual member interviews (see Table 8 below). For example, Network Consultants reported that in 12 of the 22 networks they oversee, at least 50% of network members had given them specific examples/illustrations of how they’d improved the quality of their care for children as a result of Network participation.

Table 8. Improvement in Program Quality by Network Member Organizations

<table>
<thead>
<tr>
<th>Consultants Survey</th>
<th>Coordinator Interviews</th>
<th>Member Interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Network Consultants reported that in 12 of the 22 networks they oversee, at least 50% of network members had given them specific examples/illustrations of how they’d improved the quality of their care for children as a result of Network participation.</td>
<td>80% of Network Coordinators reported that half or more of their Network members had implemented new practices to improve program quality, specifically as a result of participation in Network trainings.</td>
<td>100% of the leaders of Network member organizations reported that they had made programmatic changes to improve quality of care for children, specifically as a result of Network involvement.</td>
</tr>
</tbody>
</table>

Meeting Gaps, Decreasing Duplication

Viva networks are improving care for children in a broader sense as well, by identifying service gaps and filling them. Our research found that Viva networks are engaged in identifying needs and service gaps and that this has led to new programs being launched by network members to address the gaps. To a lesser extent, Viva networks have also contributed to a decrease in service duplication:
100% of surveyed networks reported that they had identified gaps in needed services for vulnerable children and 95% indicated that they had launched new initiatives to address those gaps.

41% of Network Consultants reported that the networks they work with had decreased inefficient duplication of services in the areas where they work.

80% of Network Coordinators reported that half or more of their Network members had implemented new practices to improve program quality, specifically as a result of participation in network trainings.

Peer-to-Peer Learning Strengthens Program Practice

Generally, we found that most interviewees credited Viva networks for the improvements in program quality they’d experienced. Peer-to-peer learning and sharing also plays a role:

- Over 2/3rds of Network Consultants indicated that at least 50 percent of the churches and organizations participating in the networks they oversaw were now sharing information (about program practices/methodologies, services, or needs) with other network members.
- 80% of Network Coordinators reported that half or more of their Network participants had “gained new ideas and/or improved practices from other Network members.”
- 81% of individual Network members interviewed reported that their organizations had “gained new ideas and/or improved practices from other Network members.”

In Uganda and Honduras we had the opportunity to ask for examples of ways network members had improved the quality of their services for children. Some of these are listed below:

- In Uganda, John Baptist, Director of Amera Uganda, reported that CRANE’s training on child development helped him to learn the signs of PTSD in the children and to address those issues;
In Honduras, Isaac and Olga Bonilla of Asociación Fe, Esperanza and Amor (a Child Protection Center) reported that training from RVH had improved their understanding of child-family relationships;

In Honduras, Arelly Cantor from Hogar Corderitos de Dios noted that RVH trainings had strengthened her staff members by teaching them how to identify past abuse, better understand principles of early childhood development, and learn why reintegration with biological parents can be beneficial to children.

Organizational Sustainability

Sagamore’s research indicates that network participation is contributing to members’ organizational sustainability. This is occurring at two levels. The first is the personal level. Individual leaders of network member organizations report gaining emotional support and camaraderie from the network. Their feelings of isolation have been decreased. Additionally, 100% of the Network Coordinators reported that half or more of the leaders of member organizations in their networks would say that network involvement has helped them to avoid burn-out. Second, at the institutional level, member organizations have strengthened their financial, accounting, and reporting practices. This contributed to 100% of the individual network member organizations interviewed stating that network participation had “positioned them for sustainability over the long term.” Eighty-one percent of the network members interviewed said network involvement had led to an increase in the number of volunteers their organizations enjoyed.

100% of interviewees from network member organizations reported that network participation had “positioned their organization for sustainability over the long term.”

The increased health of individual leaders and the increased sustainability of these member organizations are boons for vulnerable children, because both can contribute to improvements in program quality. Healthier, more resilient leaders of youth programs mean greater consistency of adults in the participating children’s lives. More volunteers can mean better adult-to-child ratios, leading to each child garnering greater attention. And healthier organizations mean that programs children have come to rely on can last longer and/or be enhanced.
**Research Question 3:** Are Viva’s collective action projects effective in bringing about positive transformation in children, families, and the local communities where Viva Networks are active?

**Finding: Yes**

We explored this topic in the survey of Network Consultants as well as through interviews with Network Coordinators and leaders of organizations involved in eight networks. We asked about three possible network achievements:

- Increasing the numbers of community members who care about the needs of vulnerable children;
- Getting local officials to pay more attention to the needs of vulnerable children and families; and
- Encouraging additional government spending on programs to benefit vulnerable children and families.

The results are shown in Table 9 below.

**Table 9. Three Network Achievements**

<table>
<thead>
<tr>
<th>Achievement</th>
<th>% Reporting Mostly or Very Accurate (Network Consultants)*</th>
<th>% Reporting Mostly or Very Accurate (Individual Network Members)</th>
<th>% Reporting Mostly or Very Accurate (Network Coordinators)</th>
</tr>
</thead>
<tbody>
<tr>
<td>More people in the community care about the needs of vulnerable children and families</td>
<td>94%</td>
<td>79%</td>
<td>70%</td>
</tr>
<tr>
<td>Local policy-makers are paying greater attention to the needs of vulnerable children and families</td>
<td>25%</td>
<td>57%</td>
<td>30%</td>
</tr>
<tr>
<td>More government funds are being expended on programs to serve vulnerable children and families</td>
<td>6%</td>
<td>28%</td>
<td>10%</td>
</tr>
</tbody>
</table>

*Data from only the Network Consultants reporting on networks at Phases 2, 3 or 4.*
The most consistent finding concerns networks’ achieving the first goal: increasing the degree of community care for/engagement with vulnerable children. Strong majorities of each group reported this. Consultants and Coordinators provided similar responses on the second achievement—encouraging local policy-makers to pay greater attention to the needs of vulnerable children. Their responses suggest that roughly 1/4th to 1/3rd of Viva networks accomplish this.

We do not know with certainty the reasons underlying the differences shown above among the Consultants, Coordinators, and individual network members. Our hypothesis is that the Consultants and Coordinators’ responses were likely more conservative than the estimate provided by the leaders of individual network organizations because the former were answering based on a review of all the communities served by their many members, whereas the network members were reporting based on their involvement only in the community they served.

Since we had to rely on self-reported data, we attempted to strengthen our inquiries by asking these leaders for specific examples. For example, we asked Network Coordinators for examples of specific kinds of achievements (see Table 10).

**Table 10. Examples of Achievements Reported by Network Coordinators**

<table>
<thead>
<tr>
<th>Achievement</th>
<th>Examples</th>
</tr>
</thead>
</table>
| Increasing community members’ care for vulnerable children                  | -Communities launching “Child Protection Committees” in 40 neighborhoods in Kampala, Uganda  
   -Community members in a Bangalore (India) community visiting child cancer patients in hospital |
| Local policy-makers being more attentive to needs of vulnerable children     | -Two local agencies partnering with a Network church to host informational meetings on child protection (Costa Rica) |
| Increased government funding of services for vulnerable children            | -Increased local government funding for education in some communities (Paraguay)  
   -Government funding for public toilets for women in a slum area (Delhi) |
| Plugging gaps in services                                                  | -A new initiative serving persons with disabilities (Costa Rica) |
| Churches getting more involved in ministering to vulnerable children       | -Churches providing books to children in slum communities and school scholarships for needy children (Dehli, India)  
   -A church raising 80% of the funding needed for implementing a Viva Christmas program (Tanzania)  
   -A church starting a program teaching mothers sewing and gardening skills (El Salvador) |


We also asked leaders of individual network member organizations to provide specific examples of network-inspired, increased community care. These included:
- More adults in the community volunteering in programs benefitting children (Costa Rica, Delhi);
- Decreases in incidents of child marriage (Delhi);
- Community members being more willing to report incidents of child abuse to the police (Zimbabwe).
- Local government officials, social workers, and police officers participating in Network trainings related to the rights of children and to child protection (multiple countries).

We also asked Network Coordinators for specific examples of how their networks had encouraged local pastors to engage their congregations more intentionally and vigorously on behalf of children in need. We learned that in Bangalore, network churches had opened up their summer camp programs to children in the community (before they focused only on children from within the church). In Delhi, the Coordinator reported that churches were now supporting children in the slums with new nutrition and scholarship programs. In El Salvador, one church in the network had launch a family gardening program. In Zimbabwe, two network churches had partnered in opening up a new Child Protection Center for orphans and vulnerable children. Churches in the Dehradun (India) network had started new youth mentoring programs focused on building life skills. In Costa Rica, three churches in the network that were from the same community had coordinated their outreach work to the poorest children: one provides an education program, another a program for teen mothers, and the third a nutrition program.

**Increased Safety**

Improving child safety is a major focus of Viva’s work. For example, many networks provide training to member organizations (and in some cases non-members) on establishing Child Protection Policies. Viva has also designed and shared with network members templates for programs that teach children self-protection. Some networks are involved in trafficking awareness and prevention programs. Others have contributed to the writing or passage of legislation protecting children from corporal punishment in public schools.

In Sagamore’s survey of Network Consultants representing approximately 60% of all Viva networks, we asked respondents to rate their networks’ progress, on a scale of 1-5, in improving child safety. A score of 5 signifies that the network has completely achieved the goal; a 1 means that the network is far from achieving it. The median score was 4 for the statement: “Because of the Network’s work, vulnerable children in our target area are now safer from abuse (for example, from domestic violence, abuse on the streets, or abuse by police) than they were before the Network existed.”
In interviews with leaders of individual network members, interviewers asked: *In your opinion, what has been the Network’s most significant achievement in terms of improving life for vulnerable children and youth?* Answers to this question varied, but the most common centered on the idea of child protection. Some interviewees said that they had seen abuse of children decrease as a result of the Network’s work. Others spoke of the increased awareness of or attention to child physical and sexual abuse and the need for protection policies. A third, related response centered on the training Networks had provided to children themselves about their rights and how to protect themselves.

Police officers from a community on Tegucigalpa’s outskirts reported that they had seen a decline in violence and crime and attributed some of this to the fact that fewer youth were joining gangs or getting into trouble because of their involvement in the sports program (Viva Deportiva) led by a Red Viva Honduras member church.

In targeted communities in Uganda where CRANE’s member churches are active, 36 children’s “safe clubs” and 31 neighborhood-based Child Protection Committees have been established.

We also explored this issue in the interviews with Network Coordinators. Sixty percent said that the best contribution their network had made to vulnerable youth was that so many members—and schools and other organizations outside the network—had adopted formal Child Protection Policies.
Our field work in Uganda and Honduras allowed us to learn about specific network initiatives that were improving children’s safety. In Honduras, Network Coordinator Maria Luna reported that RVH has succeeded in getting church leaders to acknowledge the realities of child abuse, domestic violence, and sexual abuse and to be willing to focus on these topics for the protection of children. Luna says the Good Treatment Campaign has led to greater openness by churches to provide sex education for youth, to decreases in corporal punishment, and to increases in affirmations of the children’s inherent dignity as persons made in God’s image. Luna’s contentions were substantiated in our interviews with pastors from churches participating in RVH. We found that 10 churches and 10 Christian ministries had adopted the prevention of child sexual abuse awareness program. Eleven RVH member organizations (a mixture of churches and Christian ministries) had launched the Good Treatment Program. Additionally, an association of 27 churches was actively in the process of implementing the Viva-drafted “Child Protection Policy“ and the activities associated with that policy.

In Uganda, CRANE reports that over 380 parents are participating in church-sponsored “family strengthening groups.” Among other things, these groups teach parents about disciplinary methods that do not involve corporal punishment.

CRANE has helped its member churches to launch 36 children’s “Safe Clubs” (where children learn self-protection measures) and 31 neighborhood-based Child Protection Committees. In interviews with leaders of CRANE member organizations, Christensen heard that these activities had led to fewer incidents of child abuse. In the Katanga community, Christensen also interviewed a local police officer who reported that he had received fewer reports of child abuse as a result of these CRANE programs.

CRANE has also played a role in strengthening a public initiative to improve child safety; namely, the SAUTI national hotline for reporting child abuse. Betty Wuzu Queen of SAUTI told Christensen that CRANE had helped her to get information about the hotline to all its 189 member organizations and churches.

**Increased Access to Education**

According to information provided through the Network Consultants’ survey, more vulnerable children are gaining access to education as a result of joint projects implemented by Viva networks. Consultants were asked to rate their networks’ progress, on a scale of 1-5, toward this goal. The median score was 4 for the statement: “Because of projects implemented by the Network, opportunities for vulnerable children to access education have increased.”
Fieldwork in Uganda allowed us to see this impact up close. There, CRANE has made it possible for many more girls have access to education, and more of them are staying in school longer:

- 18 CRANE partners with Creative Learning Centers (CLC) are providing tutoring and “catch up” assistance to girls who have dropped out of school. 40 CLC teachers have been trained and supported by CRANE. In 2017, 2,242 girls were able through the help of a CLC to return to school.

- CRANE has placed 34 more teachers in schools where girls that have gone through a CLC are attending. These learning support teachers work with the girls in the mainstream schools to ensure they are provided the support needed to successfully complete school.

Viva Children At Risk Network, Patna India

In Patna, India there are many children but not many Christians. In this multi-ethnic city, Christian interventions can be seen with suspicion. So Viva Patna has learned to partner effectively with secular NGOs who share a passion for child protection. Alongside the national NGO “Prayas,” for example, Viva implemented the “Good Treatment Campaign” to transform schools into safe places for children. The Network also partnered with two community organizations, three churches and two secular NGOs outside the Network to implement a Child Mentoring Program that reached approximately 600 youth. Network Consultant Devash Lal says that these kinds of joint projects have “provided access and acceptability of Christian ministries into communities in spite of the somewhat hostile atmosphere against Christianity.”
**RESEARCH QUESTION 4:** Are Viva Networks gaining sufficient credibility and “voice” so as to influence public policy makers towards reforms that are needed to ensure that children are protected and provided opportunities for advancement?

**FINDING:** Yes, particularly among mature networks

We explored this topic through a variety of venues. We collected data on the attitude shifts (on topics like engaging in policy advocacy) that network members have made since joining a Viva network. We also looked at members’ behaviors, for example, whether they were (since joining the network) investing time in work to change cultural attitudes/practices that devalue children. We asked about the network’s reputation in the eyes of city authorities, whether network members were actively part of committees or task forces with government representatives, and whether the network had power to influence decision makers on policies affecting vulnerable children.

**Attitude Change**

Before networks can begin to influence policy, members must be convinced of the necessity and value of advocacy and partnering with government agencies (and other organizations inside and outside of the network) to effect positive change. Sagamore’s research found that participants are significantly influenced by their involvement in the network: participation leads to changed attitudes.

We asked Network Consultants to estimate the percentage of participants in each of the networks they oversee who would agree with several statements. This section of the survey was set up in a before/after structure. First, Consultants estimated the percentage of network participants who would have agreed with the statement before their involvement with the network. Then they were asked how many would agree with the same statement now that they were involved in the network. Tables 11-12 on the next page display the results.

**Network Participation Increases Enthusiasm for Policy Advocacy**

We first explored attitudes towards engagement in advocating for policy reforms or enforcement. Most Network Consultants reported that network members had significantly shifted their attitudes regarding their commitment to be involved in public advocacy efforts to bring about needed reforms for vulnerable children.
Network Consultants estimated that only 1 network out of 22 thought that more than 50% of the network participants were committed to public policy advocacy before they joined Viva. That has now increased to 14 out of 22 networks when Consultants considered the current attitudes of these networks, with half or more of participants now agreeing that “If churches and Christian organizations are really going to change things for the better for vulnerable children, we must be involved in policy advocacy” (see Table 11 below).

Table 11. Attitudes Toward Advocacy Before and After Network Involvement

About what percentage of the current Network participants would have agreed with this statement below **BEFORE** they become involved in the Network? “If churches and Christian organizations are really going to change things for the better for vulnerable children, we must be involved in policy advocacy and enforcement.” About what percentage would agree now?

<table>
<thead>
<tr>
<th>BEFORE</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;10%</td>
<td>9</td>
<td>40.9</td>
</tr>
<tr>
<td>10-24%</td>
<td>7</td>
<td>31.8</td>
</tr>
<tr>
<td>25-49%</td>
<td>5</td>
<td>22.7</td>
</tr>
<tr>
<td>50-75%</td>
<td>1</td>
<td>4.6</td>
</tr>
<tr>
<td>&lt;75%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong> Networks</td>
<td>22</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AFTER</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;10%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10-24%</td>
<td>6</td>
<td>27.3</td>
</tr>
<tr>
<td>25-49%</td>
<td>2</td>
<td>9.1</td>
</tr>
<tr>
<td>50-75%</td>
<td>9</td>
<td>40.9</td>
</tr>
<tr>
<td>&gt;75%</td>
<td>5</td>
<td>22.7</td>
</tr>
<tr>
<td><strong>Total Networks</strong></td>
<td>22</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Sagamore Institute, Survey of Viva Network Consultants, 2017. n =10.

These estimates from Network Consultants aligned well with what we heard from the interviews with individual Network members. As shown in Table 12 below, participation in the network had encouraged them to think differently about collaboration and advocacy. Before Network involvement, only 30% agreed that advocating for policy reforms and enforcement was necessary for improving children’s lives. This increased to 100% after network engagement.

Table 12. Attitudes Before and After Network Involvement (Individual Network Members)

<table>
<thead>
<tr>
<th>Statement</th>
<th>% Agreement BEFORE</th>
<th>% Agreement AFTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Necessity of collaborating with other churches &amp; ministries</td>
<td>20%</td>
<td>100%</td>
</tr>
<tr>
<td>Collective Action is best strategy for helping children</td>
<td>40%</td>
<td>100%</td>
</tr>
<tr>
<td>Advocacy is required to improve children’s lives</td>
<td>30%</td>
<td>100%</td>
</tr>
</tbody>
</table>


Network Participation Changes Attitudes toward Partnering with Government

We also asked Network Consultants to estimate the percentage of participants in each of the networks they oversee who would believe there is value and necessity in partnering with
government agencies to meet vulnerable children’s needs. Here, too, network involvement made a significant difference. Consultants estimated that only two of the networks overseen would have had more than half their members agree with the idea of partnering with government before they joined the network. This increased to 14 networks when Consultants considered where members stood on this issue after joining (see Table 13).

Table 13. Attitudes Toward Partnering with Government Before/After Network Involvement

About what percentage of the current Network participants would have agreed with this statement below BEFORE they become involved in the Network? “If churches and Christian organizations are really going to change things for the better for vulnerable children, we must learn how to work effectively with government agencies.” What percentage would agree now?

<table>
<thead>
<tr>
<th></th>
<th>BEFORE</th>
<th>Frequency</th>
<th>%</th>
<th>AFTER</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;10%</td>
<td>6</td>
<td>27.3</td>
<td></td>
<td>&lt;10%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10-24%</td>
<td>8</td>
<td>36.4</td>
<td></td>
<td>10-24%</td>
<td>5</td>
<td>22.7</td>
</tr>
<tr>
<td>25-49%</td>
<td>5</td>
<td>22.7</td>
<td></td>
<td>25-49%</td>
<td>3</td>
<td>13.6</td>
</tr>
<tr>
<td>50-75%</td>
<td>2</td>
<td>9.1</td>
<td></td>
<td>50-75%</td>
<td>8</td>
<td>36.4</td>
</tr>
<tr>
<td>&gt;75%</td>
<td>0</td>
<td>0</td>
<td></td>
<td>&gt;75%</td>
<td>6</td>
<td>27.3</td>
</tr>
<tr>
<td>DK</td>
<td>1</td>
<td>4.6</td>
<td></td>
<td>Total Networks</td>
<td>22</td>
<td>100</td>
</tr>
</tbody>
</table>

Here the estimates from Network Consultants did not align as closely with the data gathered from interviews with individual network members. The latter indicated greater openness to partnering with government even before joining the network. Nonetheless, network participation did have the effect of nurturing greater enthusiasm for such collaboration. As shown in Table 14, whereas only 33% of the interviewees held positive views about partnering with government before joining the network, fully 93% held such attitudes after getting involved in the network.

Table 14. Network Members’ View on Government Collaboration, Cultural Change

<table>
<thead>
<tr>
<th>Statement</th>
<th>% Agreement BEFORE</th>
<th>% Agreement AFTER</th>
</tr>
</thead>
<tbody>
<tr>
<td>We need to partner with government</td>
<td>33%</td>
<td>93%</td>
</tr>
<tr>
<td>Our organization is actively involved in efforts to change cultural attitudes &amp; practices that devalue children.</td>
<td>46%</td>
<td>80%</td>
</tr>
</tbody>
</table>


Encouraging Change in Cultural Attitudes that Devalue Children

Nearly 60% of Network Consultants surveyed reported that churches and Christian organizations participating in their networks had increased their actions to encourage cultural change. Of the 22 networks these Consultants oversee, only 3 were estimated to have half or more members before joining the network who were engaging in efforts to change cultural attitudes/practices that devalue children. This increased to 11 networks where half or more of the members were engaging in such efforts after joining a network (see Table 15).

Table 15. Investing in the Work of Changing Attitudes

<table>
<thead>
<tr>
<th>BEFORE</th>
<th>Frequency</th>
<th>%</th>
<th>AFTER</th>
<th>Frequency</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;10%</td>
<td>3</td>
<td>13.6</td>
<td>&lt;10%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10-24%</td>
<td>12</td>
<td>54.6</td>
<td>10-24%</td>
<td>4</td>
<td>18.2</td>
</tr>
<tr>
<td>25-49%</td>
<td>4</td>
<td>18.2</td>
<td>25-49%</td>
<td>7</td>
<td>31.8</td>
</tr>
<tr>
<td>50-75%</td>
<td>2</td>
<td>9.1</td>
<td>50-75%</td>
<td>6</td>
<td>27.3</td>
</tr>
<tr>
<td>&lt;75%</td>
<td>1</td>
<td>4.6</td>
<td>&gt;75%</td>
<td>5</td>
<td>22.7</td>
</tr>
<tr>
<td>Total Networks</td>
<td>22</td>
<td>100</td>
<td>Total Networks</td>
<td>22</td>
<td>100</td>
</tr>
</tbody>
</table>

Source: Sagamore Institute, Survey of Viva Network Consultants, 2017. n =10.
We also asked Network Consultants what progress the various networks had made in implementing joint projects aimed at shifting cultural attitudes that devalue children. Based on their reports, Viva networks are making progress such campaigns and it appears those efforts are bearing fruit. Consultants were asked to rate the progress of their Networks on these two goals, on a scale of 1 to 5 where 1 = “we are far from achieving this” and 5 = “we have achieved this.” The results are depicted below in Table 16:

### Table 16. Network Progress: Changing Cultural Attitudes/Practices Devaluing Children

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Ave. Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Network has effectively implemented campaigns or advocacy events that seek to change public attitudes towards vulnerable children.</td>
<td>0%</td>
<td>6%</td>
<td>19%</td>
<td>31%</td>
<td>44%</td>
<td>4.12</td>
</tr>
<tr>
<td>Because of the efforts of the Network, we’ve started to witness changed attitudes on the part of adults in the communities where we work: they are more committed to the idea that society should make it a priority to improve the lives of vulnerable children.</td>
<td>0%</td>
<td>6%</td>
<td>44%</td>
<td>25%</td>
<td>25%</td>
<td>3.7</td>
</tr>
</tbody>
</table>

*Source: Sagamore Institute Survey of Viva Network Consultants, 2017. n = 10*

Network participation has influenced members towards greater engagement in actions to change negative cultural attitudes and practices. Before they’d joined a Viva network, 46% of the leaders of individual network members we interviewed said they had “invested time and energy into the task of changing cultural attitudes and practices that devalue children.” By contrast, since joining a network, 80% of these leaders’ ministries were now engaged in that work. These ministry leaders reported that these efforts had borne fruit in the communities they served. Seventy-nine percent said that the statement, “Because of the Network’s efforts, more people in the community where we work care more about the needs of vulnerable children and families,” was “mostly” or “very” accurate.

79% of interviewed network members reported that, as a result of network activities in the communities they serve, more residents now care about the needs of vulnerable children.

Getting more pastors to commit their congregations to the work of loving and serving vulnerable children is also a powerful force for creating healthier local ecosystems for kids in
need. We asked Network Coordinators to estimate how effective, on a scale of 1-5, their networks had been in convincing pastors towards this end. The mean score was 3.4, indicating that good progress has been made but that there is still work to do.

**Reputation, Involvement, Influence**

Having “voice” with decision-makers requires a positive reputation and actual “seats at the table.” Thus, we asked Network Consultants to tell us about their networks’ progress in gaining the attention and respect of city authorities. As shown in Table 17, Consultants reported that nearly 44% of their networks had achieved such recognition and respect and roughly another 19% were well on their way towards doing so.

**Table 17. “City authorities here know of this Network and respect its work.”**

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – We are far from achieving this</td>
<td>6.3%</td>
</tr>
<tr>
<td>2</td>
<td>18.8%</td>
</tr>
<tr>
<td>3</td>
<td>12.5%</td>
</tr>
<tr>
<td>4</td>
<td>18.8%</td>
</tr>
<tr>
<td>5 – We have achieved this</td>
<td>43.8%</td>
</tr>
</tbody>
</table>

*Source: Sagamore Institute Survey of Viva Network Consultants, 2017. n = 10*

We also asked Consultants to tell us about the progress the networks they oversee have made in gaining membership on decision-making task forces and influencing authorities on decisions “protecting the rights of vulnerable children.” We asked them to rate their networks’ progress on these items on a scale of 1-5 where 5 meant “we have achieved this.” The mean scores are depicted in Table 18. These scores suggest that considerable progress has been achieved but that there is room for improvement.

**Table 18. Reputation, Involvement, Influence: Mean Scores from Network Consultants**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Mean Score (out of 5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>City authorities here know of this Network and respect its work.</td>
<td>3.75</td>
</tr>
<tr>
<td>Network leaders are participants in government commissions/task forces that make decisions affecting the quality of life for vulnerable children and families.</td>
<td>3.4</td>
</tr>
<tr>
<td>This Network is able to influence city authorities to make decisions that protect the rights of vulnerable children.</td>
<td>3.25</td>
</tr>
</tbody>
</table>

*Source: Sagamore Institute Survey of Viva Network Consultants, 2017. n = 10*
IV. Conclusion

Viva is implementing a sophisticated strategy for tackling the massive and complex challenges facing vulnerable children worldwide. This strategy is leveraging the power of grassroots networks to multiply the scale and reach of services, improve service quality, nurture changes in cultural attitudes, and enhance influence on public policy reforms that can bring about changes to the underlying, systemic causes of persistent child poverty and abuse. This strategy is not easy to articulate succinctly. It is a multi-layered approach to a multi-faceted problem. In this sense, Viva is at a disadvantage to direct service ministries that can report simply such messages as “we feed hungry children, and last year we fed 1 million.” By contrast, Viva’s message has multiple story lines. Each of these themes, though, demonstrates that Viva’s model has strong promise for generating meaningful, lasting transformation in the lives of millions of vulnerable children worldwide.

One is the theme of mobilization. Put simply, Viva activates new, local investment on behalf of poor children. Millions of impoverished and vulnerable children live within walking distance of a local Christian church. If those local churches catch a vision for implementing effective compassion for these children—and if the programs they start offer high-quality care and smart, holistic interventions—a sea change in the quality of children’s lives is possible. In 2017, Viva helped 2,324 churches, representing over a quarter million Christian believers, engage in the lives of needy children. Because of its activation of the Church’s latent assets, its resourcing and acceleration of extant service programs, and the synergies it produces through collective action, Viva has multiplied the scale of services available to vulnerable children. As noted earlier, 94% of the organizations interviewed for this study had increased the number of children they served specifically as a result of their participation in a Viva network.

The second is the theme of culture. Our research indicates that Viva has often helped leaders of local churches and organizations to recognize the importance of addressing cultural attitudes as well as concrete needs. Until each member of society values children, sees them as precious, and is committed to the idea that they have inalienable human rights, there will be no long-term shift in children’s vulnerability. Providing direct service matters. Advocating for government’s investment in children’s programming matters. But without fundamental, society-wide conviction that children deserve safety, access to healthcare, education, and economic sufficiency, and the opportunity to fulfill their potential, those investments will fall far short of their potential. Thus, when roughly 80% of Viva network members report that, as a result of the networks’ efforts, “more people in the community care about vulnerable children and families,” something even more important than direct service is happening.
The third, and related, theme is about **longevity**. It is local institutions—churches, community organizations, city and national governments—that are going to remain where they are. International NGOs come and go. They can accomplish great things…but what happens when they leave? The only *enduring* solution for the problems faced by poor children is for their own people, their own neighbors, their own localities and governments, to take responsibility. Our research (including our review of the copious documentation Viva has produced on its activities) indicates that Viva has built committed, action-oriented coalitions of grassroots and regional/national entities. These are networks of groups with physical proximity to the needs. These networks are training and equipping parents, government social workers, community organizations, local schools, and local police in ways that are enhancing care for children. Viva is working to sustain their motivation and strengthen their capacity so that they remain engaged for many years. Notably, 100% of the individual network member organizations interviewed in this study stated that network participation had “positioned them for sustainability over the long term.”

**Viva is implementing a sophisticated strategy for tackling the massive and complex challenges facing vulnerable children worldwide.**

The fourth is the theme of **coordination**. More people doing more things for vulnerable children is good. More people doing more things in a strategic, coordinated fashion is better. As “collective impact” researchers John Kania and Mark Kramer explain, “large-scale social change comes from better cross-sector coordination rather than from the isolated intervention of individual organizations.”¹⁷ More children benefit when service duplication is reduced and gaps in services are identified and filled. Children with special needs are less likely to fall through the cracks if a network of caregivers is operative: the ministry that cannot meet the child’s need can refer her to a known, trusted peer who can. Policy reform benefitting children becomes more likely when a network of organizations from multiple sectors speaks with one voice demanding change.

The fifth is the theme of **quality**. A compassionate heart is not the only thing needed to ensure that children in need get the help they deserve. A well-informed head and skillful hands are required, too. Children enjoy a higher quality of care when the caregivers are in communities of practice, learning from one another and from equippers who bring them new knowledge and skills. And this matters, because the goal is not merely to help children survive but to help them thrive. Our research found that Viva networks are helping to improve churches’ and ministries’ service programs, encouraging holistic care that meets the spiritual, emotional, mental, relational, and physical needs of kids.

The sixth theme concerns voice. Problems only get attention when they are recognized. Even then, those who have capacity for doing something about the problem may ignore it. Until, that is, they cannot ignore it because too many people (or the right kinds of people) are demanding action. Individual organizations can have a voice, but a network has a stronger, louder, and more credible one. As a high level government official in Honduras told us:

> With individual NGOs, you don’t know whether they are speaking only for their own agenda. A network is speaking for a united cause. Forming a network is a good idea for having a voice within the government because the government realizes that this is not just one group but a large, united, strong voice speaking for many groups. I have to pay attention when a person is representing 15 or 20 organizations.  

Over half of Viva’s networks worldwide have achieved sufficient reputation and recognition from policy makers that they have formal, documented agreements with city and national authorities (and some with law enforcement agencies). These agreements vary in kind: some are about service provision, some about regulatory reform or enforcement, some about joint project implementation, and some about new legislative initiatives. This is a remarkable achievement for networks that primarily consist of small churches and grassroots ministries. Together, these humble network participants have gained a collective voice loud enough to be heard. In some countries, this collective voice has helped bring about substantial, far-reaching changes (such as the legislated end of corporal punishment in Ugandan public schools; the beginning of system-wide deinstitutionalization/family reintegration in Honduran Child Protection Centers; and school-based child protection programs reaching over 26,000 schoolchildren in La Paz, Bolivia).

Taken together, these six themes indicate that Viva has forged a distinctive path within the world of international relief and development organizations. From our exploration of its work, we believe Viva’s model is one with strong promise for ultimately advancing large-scale, sustainable transformation in the lives of vulnerable children in the countries it serves.

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18 Interview by Amy Sherman with Nolvia Herrera, Chief of the Department of Protection and Restitution of Rights, DINAF, Tegucigalpa, Honduras, February 22, 2018.