



Global Parenting Initiative



In support of

Global Initiative to Support Parents

Parenting Month Panel:

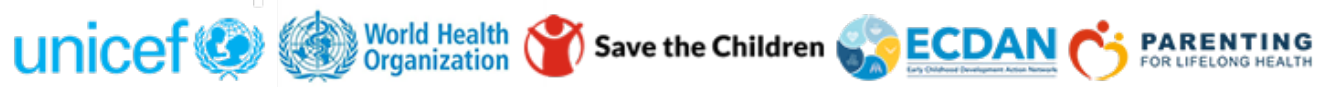
Supporting Parents in Crisis and Humanitarian Contexts

Online Panel Discussion
20 June 2023, 12:00 -13:30 UTC/GMT



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With Speakers from:



With Panellists from:





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Housekeeping

This presentation is being recorded.

Because this presentation is in webinar format, you will not be able to unmute yourself or turn your camera on.

Please use the Q&A box to leave any questions you may have for our speakers and panellists. There will only be time to answer a limited number of questions, so please feel free to use the upvote button.

If we do not get to your question, you can find answers on the GPI website later.



Global Parenting Initiative



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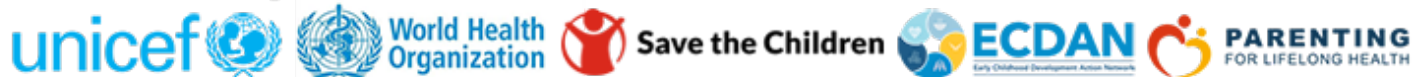
Global Initiative to Support Parents

Parenting Month Panel:

Supporting Parents in Crisis and Humanitarian Contexts



With Speakers from:



With Panellists from:



Introducing Our Speakers



Sabine Rakotomalala

**World Health Organization,
Global Initiative to Support
Parents**



Dr Isang Awah

Head of Advocacy

**Global Parenting Initiative,
Parenting for Lifelong Health**



Mari Ullmann

Technical Advisor, Parenting in
Crisis

**Global Initiative to Support
Parents**



**Dr Caoimhe
Nic a Bháird**

MHPSS and Child Protection
Advisor

UNICEF



Rebecca Smith

Global Head of Child Protection
Programmes

Save the Children International

Context and Research



Dr Isang Awah
Head of Advocacy



Mari Ullmann

Technical Advisor, Parenting in Crisis





Supporting Parents in Crisis

and Humanitarian Contexts:

Context and research



Context



1

billion

children experience violence each year (Hillis, 2019), and many further in families struggling with the challenges of parenting.

43%

of children under 5 years old living in low- and middle-income countries (LMICs) are at risk of not achieving their developmental potential (Black et al., 2017).





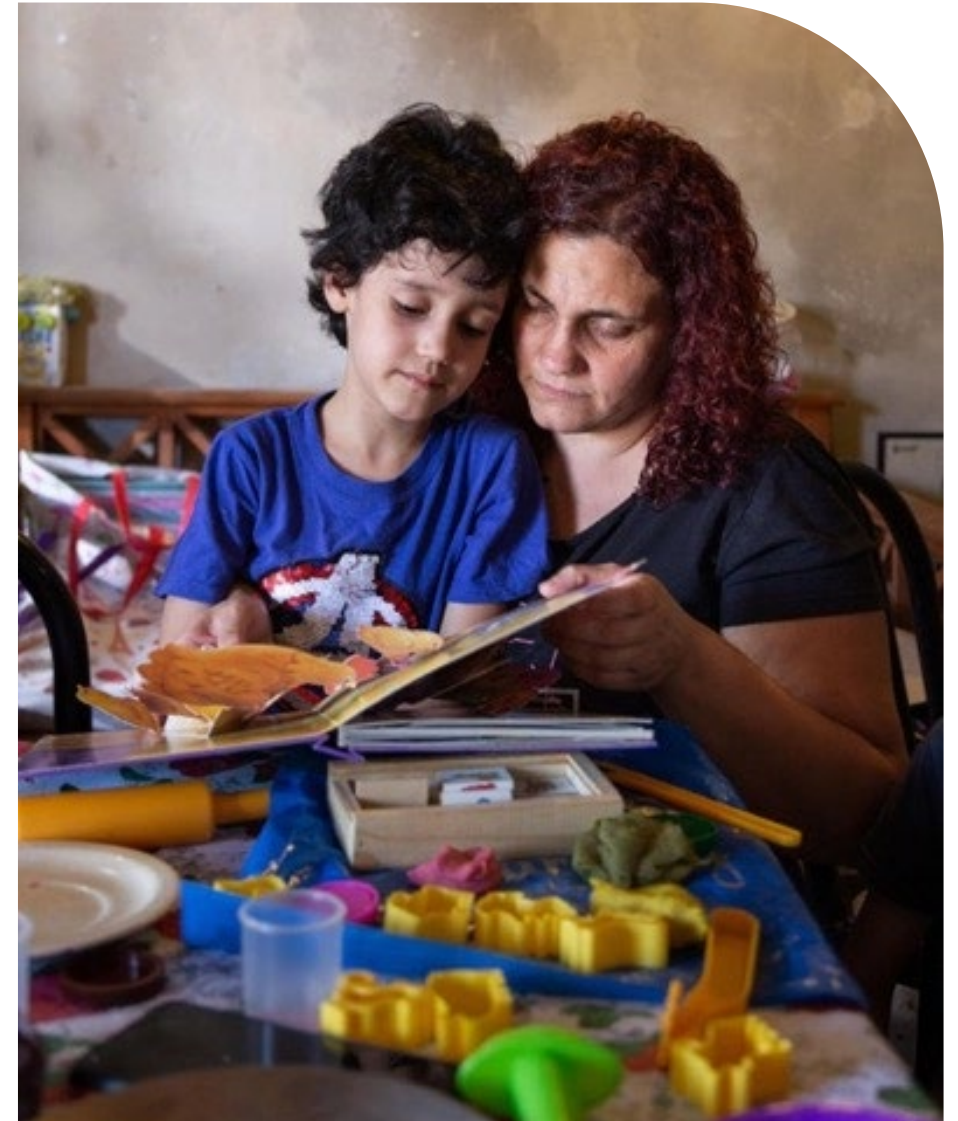
Consequences of adverse childhood experiences

- Poor mental health
- Poor child development, school failure
- Alcohol and drugs
- Youth violence & risky behaviour
- Poor maternal & child health & nutrition
- Inter-generational transmission of violence, offending

All these outcomes are hugely costly to multiple systems

Good news: Much evidence & knowledge on how to improve parenting skills - so a **logical choice for early intervention**

WHO/ UNICEF: INSPIRE (2016)





Why support parents?



improving growth and nutritional status



optimizing early childhood development



interrupting the cycle of violence and neglect, including perpetration of future violence



enhancing mothers' and children's mental health



improving positive interactions of caregivers and adolescents



increasing attendance at routine health visits



promoting positive social norms about protecting and nurturing children



What are parenting programmes?

- Structured intervention directed at parents/caregivers
- Aim to improve parent-child interaction and the quality of parenting a child receives -- and so reduce harsh & abusive parenting and child problem behaviour.
- Focus on parents learning & practising new skills and behaviours
- Most evidence-based programmes are based on similar content & principles, e.g., Parent Management Training, Día a Día, Strengthening Families, Triple-P, Parenting for Lifelong Health.





A rise in humanitarian crises



- Increase in incidents of natural disasters, health emergencies, and armed conflicts
- 108.4 million forcibly displaced people worldwide (UNHCR)
- 35.3 million refugees (UNHCR)
- 62.5 million internally displaced people
- 76% hosted in low- and middle-income countries
- Globally, an estimated 268 million children and adolescents across 73 countries are affected by crises
- Out of the 224 million crisis-affected children and adolescents of school age, about 72 million (32%) are out of school.



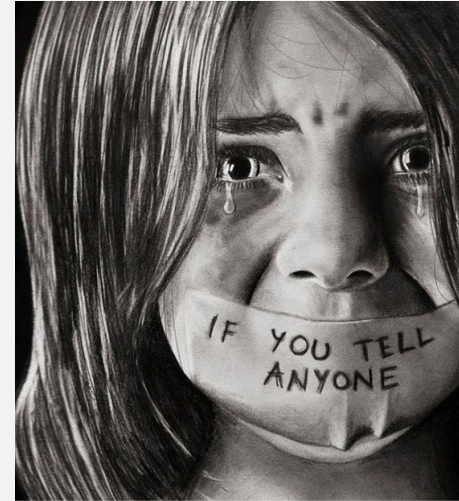
Parenting during a crisis

- During humanitarian crises, families experience and witness death, displacement, hardships and financial stress, separation, and very often, violence
- Parents and caregivers must provide 24/7 care, alongside increased stress, fear, and trauma
- There's a lack of accessible services
- Exposure to trauma, hardships, and poor parental mental health usually lead to changes in parenting behaviours.





Children pay the highest price of humanitarian crises



'Armed conflict, natural disasters and other emergencies expose millions of girls and boys to unthinkable forms of violence, exploitation, abuse and neglect.'

<https://www.unicef.org/protection/protecting-children-in-humanitarian-action>



Families can be supported with interventions

- COVID-19 Parenting Response
- Parenting in Conflict Resources
- Parenting in Climate Crisis Resources
- UNODC parenting in crisis booklet
- MHPSS Resources etc.
 - *Parenting tip sheets*
 - *Social media squares*
 - *Printable PDFs*
 - *Videos*
 - *Audio messages*
 - *Quiz*
 - *QR codes*
 - *Faith-based resources*





Feedback on the Ukraine Parenting

resources



The Wartime parenting tips that the volunteers have shared with us have been so helpful to me:

I began breathing calmly in harsh emotional moments, and my kids felt it as I was learning to keep calm. I began doing physical exercise daily, and this helped us focus on something else rather than on hard news. We are practising and praising our kids for their achievements.

MOTHER, WESTERN UKRAINE



PARENTING TIPS FOR CHALLENGING TIMES
PRACTICAL WAYS TO HELP US COPE

- Even when it feels hard, try to have some daily routines for yourself.
- Routines help children feel safe. If you can, do daily routines like meals or schoolwork.
- Helping someone else can make you feel better too.
- Our children learn calm and kindness from us.

Parents & caregivers are HEROES
protecting our children in a crisis

*"Do not fear, for I am with you... I will strengthen you and help you."
(Isaiah 41:10)
God promises to be with us and help us. He can help you cope.*

WVO

PARENTS AND CAREGIVERS ARE HEROES: PROTECTING OUR CHILDREN IN A CRISIS.

COPING WITH STRESS, UPSET AND ANGER

- Find someone who you can talk to about how you are feeling.
- Losing your temper? Give yourself a 10-second pause.
- Breathe in and out slowly five times. Then try to respond in a calmer way.

Be proud of yourself every time you try this.

World Health Organization | unicef | UNHCR | UNODC | PARTNERSHIP FOR LIFE LONG HEALTH





Further research needed



- Parenting interventions effective in supporting parents and caregivers, and skilling them to support children
- Evidence from humanitarian settings is limited
- Research in humanitarian contexts is especially challenging
- Strategies could be adopted to address challenges associated with research in humanitarian settings
- Need to build a robust evidence base for interventions that can be delivered at scale during crises.

In support of

Global Initiative to Support Parents

Developing a global agenda to support parenting in crisis



Core questions

1. **What are the needs** of parents, caregivers and their children at different stages / within different types of emergencies?

- In acute onset or protracted crisis
- In conflict, displacement, disaster
- For target populations (adolescent parents, children with disabilities)

2. **Which policies, services and programs are effective** in meeting these needs and how to deliver in crisis settings?

3. **How can we work together** across sectors to elevate this issue and make a compelling case for increasing provision of parenting support in crisis contexts?



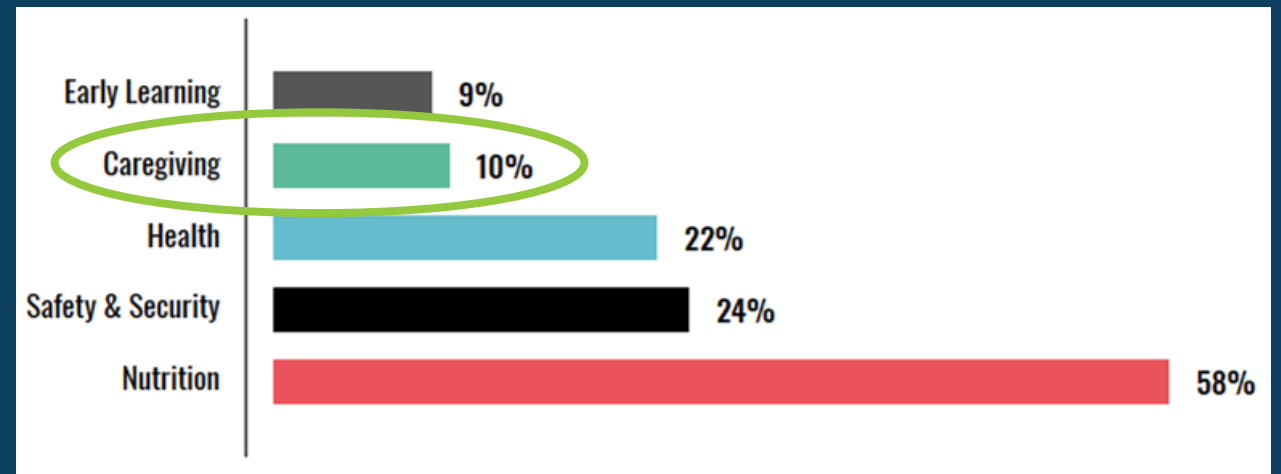
Analysis of Nurturing Care Interventions in Humanitarian Plans

Only
10%

mentioned any interventions to
support parents/caregivers

Bouchane et al. in GEM Report 2019

An analysis of humanitarian and refugee plans active in 2018 revealed that out of 26, 11 made *no mention* of any component of interventions related to responsive caregiving.





**It's about motherhood.
It's about love.
It's about not giving up.**

- Waad Al-Kattab, Syrian refugee filmmaker and parent

Emergency Support and the MHPSS package



Dr Caoimhe Nic a Bháird
MHPSS and Child Protection Advisor



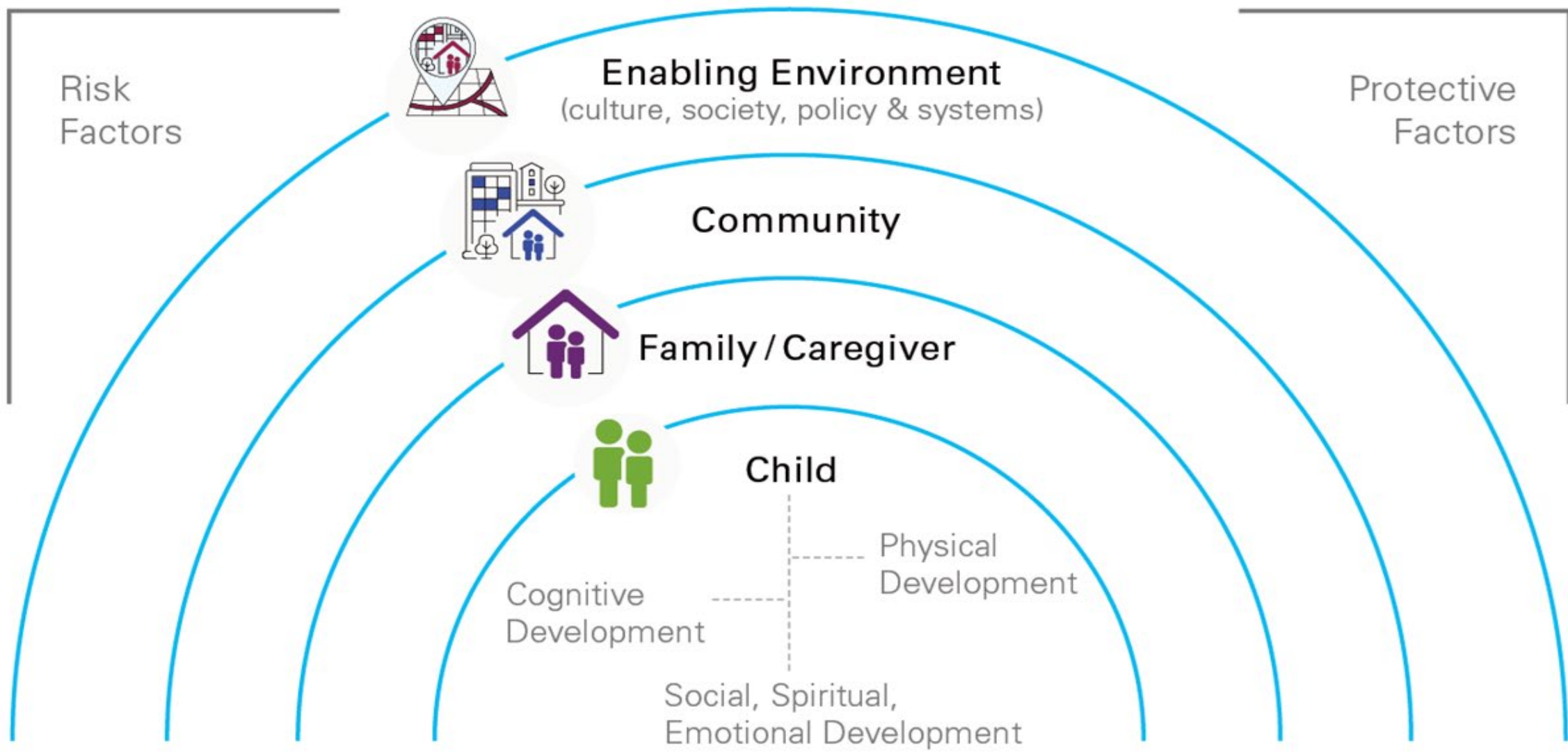
Care for the caregiver, care for the child

Protection, Mental Health and
Psychosocial Support for
Caregivers in Emergencies

Dr Caoimhe Nic a Bháird,
Child Protection in Humanitarian Action, UNICEF

unicef 
for every child





Responsive care & nurturing environments

- Emotional security
- Social skills
- Coping ability



Nurturing care in humanitarian emergencies

Need to protect & promote:

- Caregivers' own wellbeing
- Their abilities / resources to support children

25



Addressing caregivers' MHPSS needs

MHPSS = Mental Health & Psychosocial Support

- Re-establish sense of safety
- Strengthen social connections
- Regain a sense of control
- Develop a sense of hope
- Recognizing & responding to distress in self & children





Mental Health and
Psychosocial Support

MINIMUM SERVICE PACKAGE



IASC Inter-Agency
Standing Committee

- Set of **high-priority** MHPSS activities
- Based on available **evidence, best practice guidelines & expert consensus**
- **Inter-agency, inter-sectoral**
- Designed to facilitate a **faster, more effective, better coordinated** response
- PDF or web platform at mhpssmsp.org



MHPSS MSP

28 3.7 Promote caregivers' mental health and psychosocial wellbeing & strengthen their capacity to support children

3.3 Disseminate key MHPSS messages
(caregiver message bank)

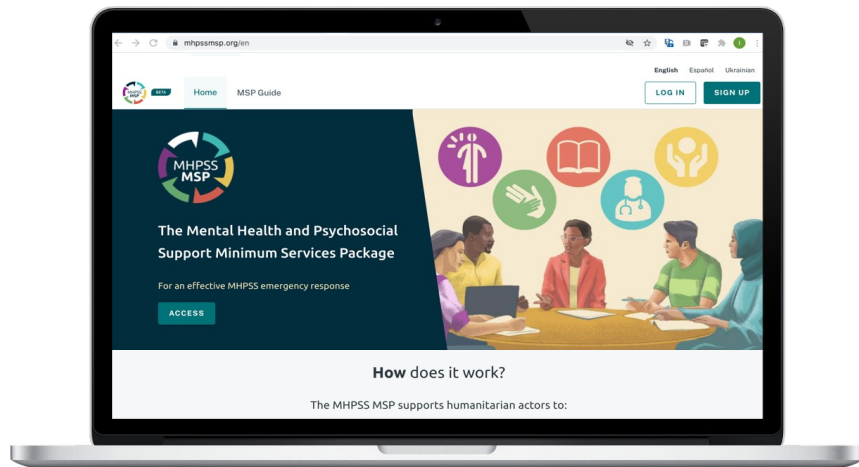
3.5 Provide **Early Childhood Development (ECD)** activities to support young children & their caregivers


3.6 Provide **group activities** for children's MHPS wellbeing (with explicit caregiver component)

Section 3: MHPSS programme activities		
<i>Orient humanitarian actors and community members on MHPSS</i>		
3.1	Orient humanitarian actors and community members on MHPSS and advocate for MHPSS considerations and actions	
3.2	Orient frontline workers and community leaders in basic psychosocial support skills	
<i>Strengthen self-help and provide support to communities</i>		
	3.3 Disseminate key messages to promote mental health and psychosocial well-being	
	3.4 Support new and pre-existing group-based community MHPSS activities	
	3.5 Provide early childhood development (ECD) activities to support young children and their caregivers	
	3.6 Provide group activities for children's mental health and psychosocial well-being	
	3.7 Promote caregivers' mental health and psychosocial well-being and strengthen their capacity to support children	
	3.8 Promote the mental health and psychosocial well-being of education personnel and strengthen their capacity to support children	
	3.9 Provide MHPSS through women and girls safe spaces	
<i>Provide focused support for people impaired by distress or mental health conditions</i>		
3.10	Provide mental health care as part of general health services	
3.11	Provide MHPSS as part of clinical care for survivors of sexual violence and intimate partner violence	
3.12	Initiate or strengthen the provision of psychological interventions	
3.13	Provide MHPSS through case management services	
3.14	Protect and care for people in psychiatric hospitals and other institutions	

For each activity:

- A brief introduction
- A checklist of actions
- Key guidelines, standards and tools



CORE ACTIVITY	
Actions	
✓	
✓	
Additional actions for consideration (depending on context and available resources)	
✓	
✓	
Guidelines, standards and tools	
	Click here to access relevant guidelines, standards and tools.

mhpssmsp.org

Thank you!

Caoimhe Nic a Bhaird
cnic@unicef.org

MHPSS MSP Helpdesk
mhpss.msp@gmail.com



Panel Discussion



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**INTERNATIONAL
RESCUE
COMMITTEE**

**WAR
child**

**Karachi
Relief
Trust**



UNODC

United Nations Office on Drugs and Crime

Introducing Our Panellists



**Genevieve
Haupt Ronnie**

Community of Practice
Lead

**Global Parenting
Initiative,
University of Cape Town**

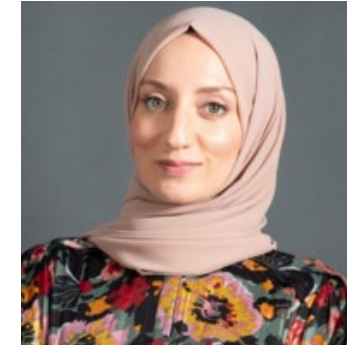
Panel Moderator



Yvonne Agengo

Senior Technical Advisor
Child Protection

**International Rescue
Committee**



Dr Aala El-Khani

Independent Consultant

**United Nations Office on Drugs
and Crime**



Anthony Guevara

Researcher

War Child Holland



Khayam Husain

Trustee

Karachi Relief Trust

Question 1

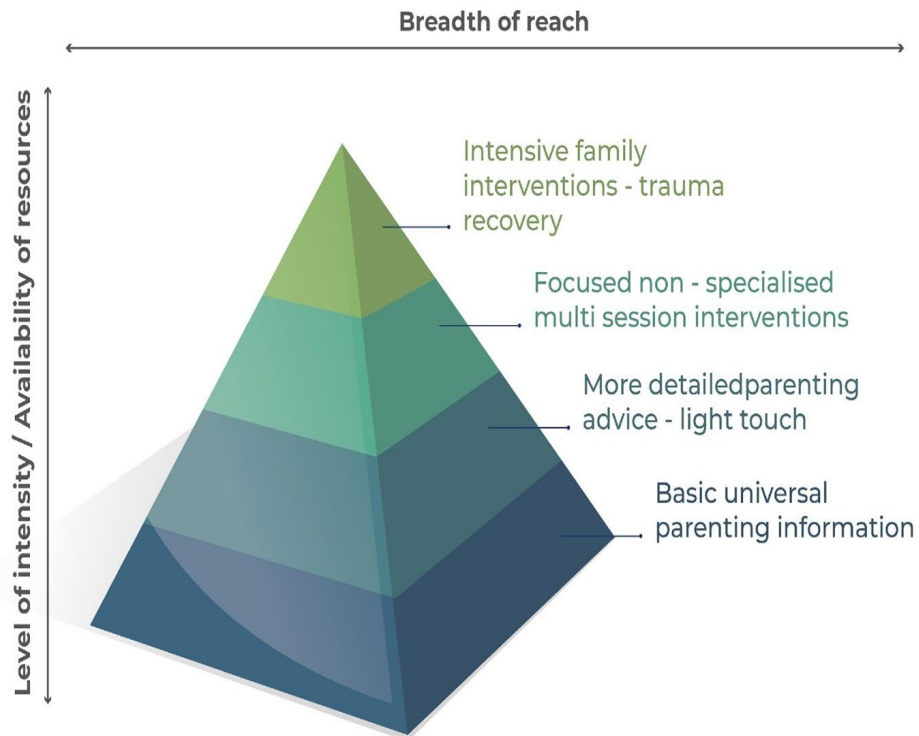
Context including, challenges and successes



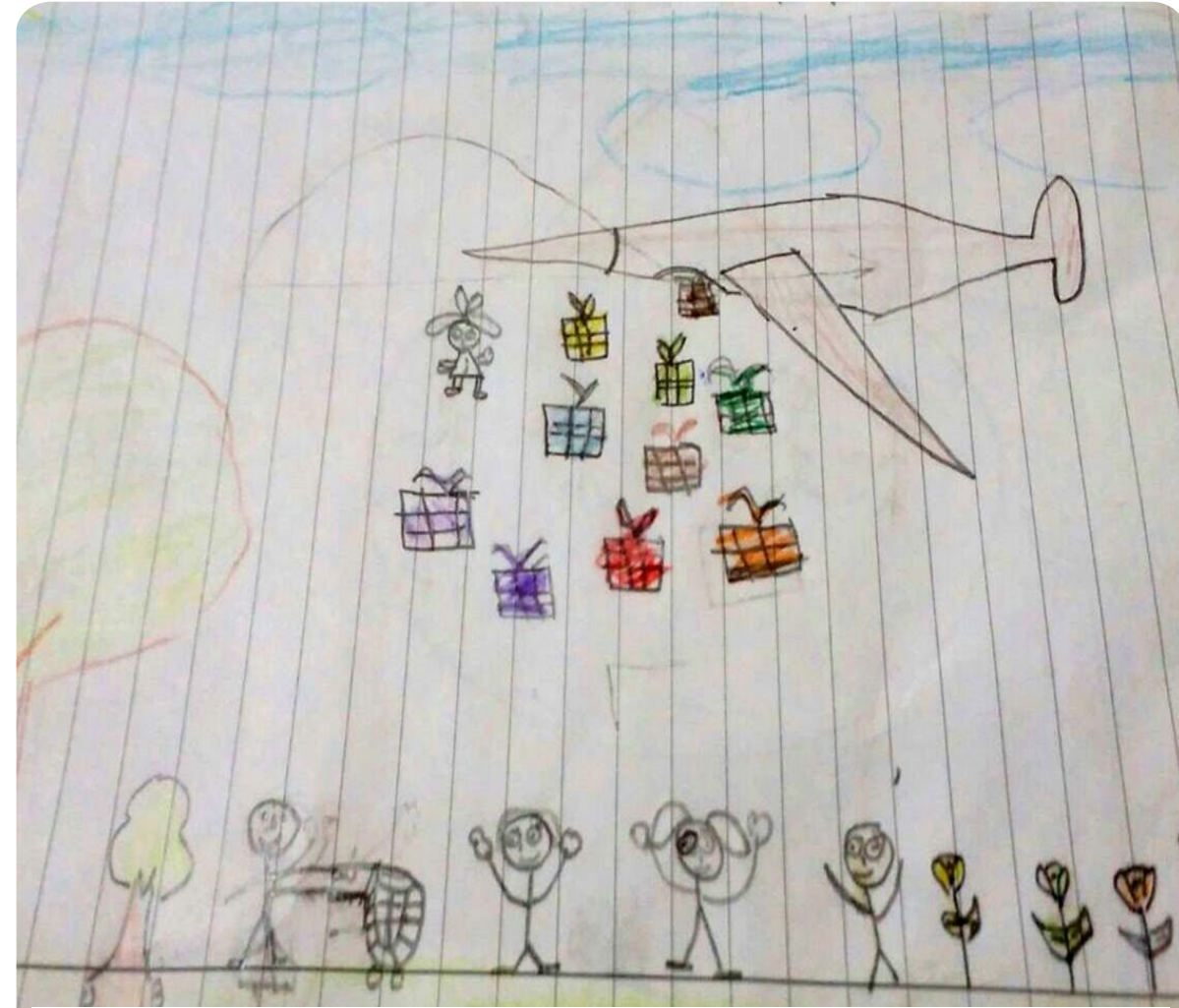
Utilizing family skills resources during war and displacement

Dr Aala El-Khani

United Nations Office on Drugs and Crime



Family multi-level caregiver support delivery model



“Planes dropping gifts and not bombs-a happy ending to my nightmare”- Syrian refugee child



KARACHI RELIEF TRUST

**Global Parenting Initiative
School-in-a-Box Program
Parenting Tips**

Karachi Relief Trust

KRT, a volunteer-based NGO has its forte in “filling the gaps’ during disasters. This is done primarily with provision of food aid (cooked and dry rations bags), hygiene kits, and medical relief. Subsequently, post -disaster rebuilding/ rehabilitation of destroyed villages is carried out (see photo of destroyed mud house and reconstructed permanent village cluster).

Realizing that schools were closed for extended period of time, due to the Supeflood, KRT launched the “School -in-a-Box” to bring some structure in the children’s lives with a “routine.” Simple psychosocial activities, arts and crafts, story telling and numeracy activities were conducted.

Success was visible with children and parents staying engaged and looking forward to the daily activities. The intervention allowed KRT an opportunity to sow “seeds of change” with increased leverage over the community.

One big reason of success has been partnering with other organizations.

With the “Parenting Tips” the intervention encouraged community involvement and engagement. Since the Tips were translated in local language, the dissemination became easy.

With the infrastructure badly damaged, the biggest challenge was the logistics. Other challenges included safety and security, training volunteers and funding.



Destroyed by Flood



Reconstructed by KRT

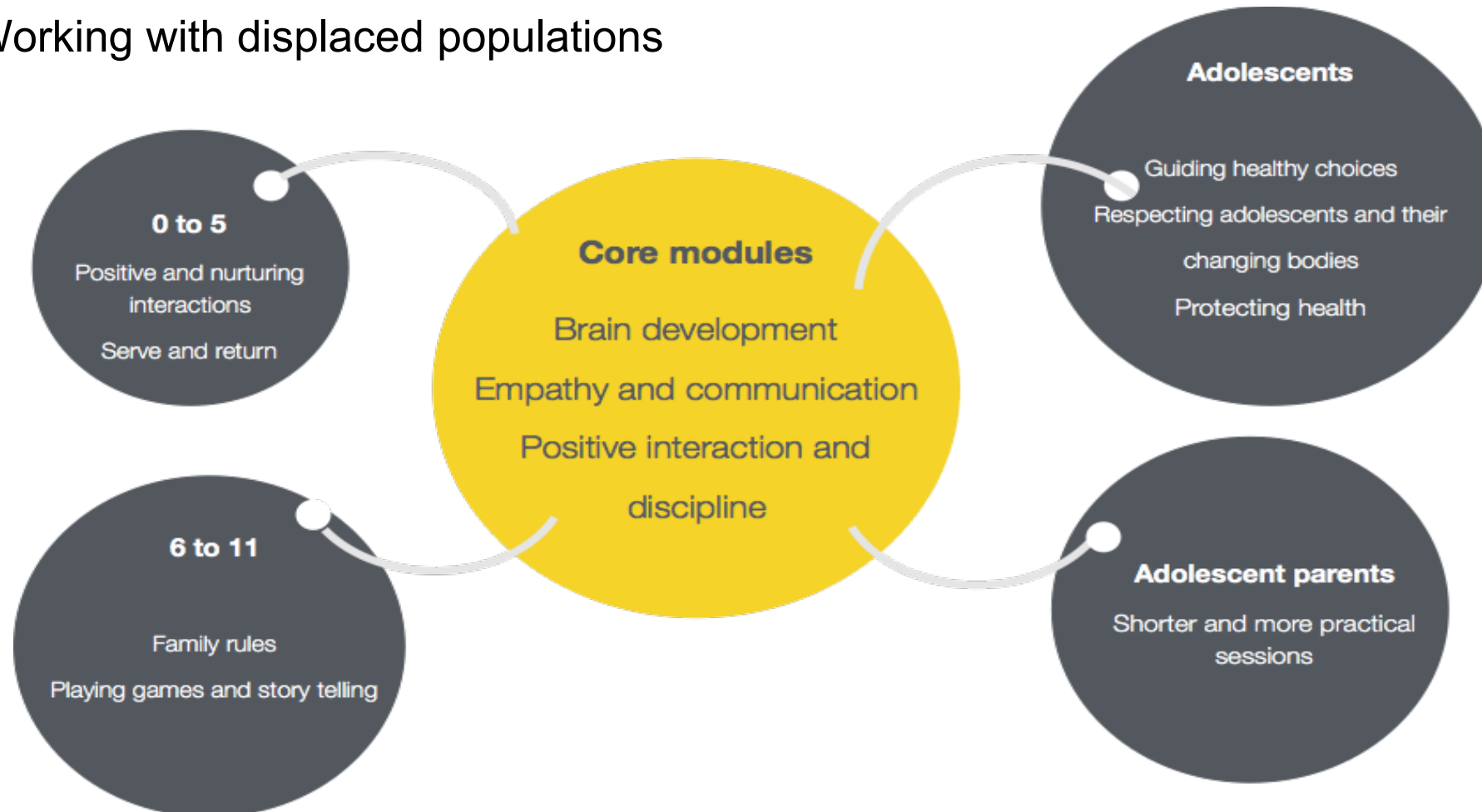
Meeting conducted to discuss parenting tips with PTC members and parents



BeThere: A Caregiver Support Intervention

- A preventative group intervention for primary caregivers of children aged 3–12 affected by conflict and adversity, with ideally 10–12 caregivers per group
- 9 weekly sessions of up to 2 hours, combined with home practice
- Aims to strengthen parenting and child wellbeing via two pathways:
 - Indirectly, by improving the mental health and psychosocial wellbeing of caregivers (sessions 1–4)
 - Directly, by strengthening knowledge and skills of evidence-based parenting methods (sessions 5–8)
- Successes and challenges: Development process, male caregiver engagement

Context: Central African Republic Working with displaced populations



Question 2

Key considerations when working in emergency or humanitarian settings that would be useful for our work



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Key Considerations:

1. Parenting within a protection programme
2. Pre-conflict engagement of local Govt
3. Operational challenges, safety & security considerations
4. Understand social norms and context in adaptation





CONTACT US



Prevention, Treatment and Rehabilitation Section,
 United Nations Office on Drugs and Crime,
 PO Box 500, A 1400 Vienna, Austria
 Email: unodc-ptrs@un.org
 Website: www.unodc.org/unodc/en/drug-prevention-and-treatment/index.html



Information for adults looking after a child or children through conflict and displacement

How To Look After a Child Through Conflict & Displacement | English
 UNODC - United Nations Office on Drugs and Crime
 13.9K subscribers

<p>9. HER ÇOCUK İÇİN GÜVENLİK NOTLARI</p> <ul style="list-style-type: none"> • Bu güvenlik notu, planlı ziyaretler veya acil durumlar için kullanılmalıdır. • Her aile için ve gözetimci için ayrı ayrı bir güvenlik notu hazırlanmalıdır. • Gözetimci, çocuğun ihtiyaçlarını belirlemek için aileyle çalışmalıdır. • Bu güvenlik notu her çocuk için ayrı ayrı hazırlanmalıdır ve aileyle paylaşılmalıdır. 	<p>10. ÇOCUKLARINIZLA GÜVENLİK İZLEMLERİ YAPMAK</p> <ul style="list-style-type: none"> • Gözetimci, çocuğun aileyle temasını ve güvenliğini izlemelidir. • Çocuğun aileyle temasını ve güvenliğini izlemek için düzenli olarak görüşmeler yapılmalıdır. • Çocuğun aileyle temasını ve güvenliğini izlemek için düzenli olarak görüşmeler yapılmalıdır.
<p>11. ÇOCUKLARINIZI ÇOCUK KAÇIRANLARDAN KORUMAK</p> <ul style="list-style-type: none"> • Çocukların kimlik bilgilerini korumak için önlemler alınmalıdır. • Çocukların kimlik bilgilerini korumak için önlemler alınmalıdır. • Çocukların kimlik bilgilerini korumak için önlemler alınmalıdır. 	<p>12. ÇOCUKLARINIZLA GÜVENLİK BEKLEMLERİNİ DÜŞÜRMEK</p> <ul style="list-style-type: none"> • Çocukların güven duygularını güçlendirmek için önlemler alınmalıdır. • Çocukların güven duygularını güçlendirmek için önlemler alınmalıdır. • Çocukların güven duygularını güçlendirmek için önlemler alınmalıdır.
<p>13. ÇOCUKLARINIZI İDDİETLERDEN KORUMAK</p> <ul style="list-style-type: none"> • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. 	<p>14. SEVİLMİYEN BİRİŞİ OLUŞUĞUNDA ÇOCUKLARINIZLA SÖZLEŞMEK</p> <ul style="list-style-type: none"> • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır.
<p>15. SEVİLMİYEN BİRİŞİ NAYBETTİĞİMİZDE ÇOCUKLARINIZIN İHTİYAĞI BAĞA ÇABALMASINA YARDIMCI OLMAK</p> <ul style="list-style-type: none"> • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. • Çocukların iddialarını ve suçlamalarını karşılamak için önlemler alınmalıdır. 	



MANCHESTER
1824

The University of Manchester

INTERVENTIONS
ORIGINAL RESEARCH PAPER
 Daily bread: a novel vehicle for dissemination and evaluation of psychological first aid for families exposed to armed conflict in Syria
 A. Elkhanji*, K. Cartwright, A. Redmond and R. Calam
 The University of Manchester, Manchester, UK
 Global Mental Health (2016), 3, e15, page 1 of 7. doi:10.1017/gmh.2016.9

Key Considerations for Humanitarian/Emergency Contexts

- Caregiver mental health and wellbeing are crucial
- This is especially the case in highly volatile settings where parents are highly distressed
- Importance demonstrated through numerous studies
- Mental health and psychosocial wellbeing are critical also for the uptake of new skills

Key Considerations in Emergencies

1. **Ensuring the Safety and Security** : Establish safe spaces, temporary shelters, or relocation sites to protect affected families, especially children from further harm.
1. **Immediate Psychological First Aid** : Train parents on providing immediate psychological first aid to their children.
1. **Open Communication** : Encourage parents to create an open and supportive environment for their children.
1. **Psychoeducation** : Provide parents with information about common reactions to trauma.
1. **Establish Routines and Structure** : Encourage parents to establish regular routines and structure.
1. **Identifying Signs of Distress** : Train parents to recognize signs of distress in their children
1. **Access to Support Services** : Counseling and support groups, both within the humanitarian setting and in the long -term recovery phase.
1. **Promote Resilience** : Help parents understand coping strategies and promote social connections.
1. **Most Importantly: Engage in activities that bring JOY and a SENSE of NORMALCY.**



Closing reflections

What do you think are two key priorities to address in this field going forward?



Priorities for the (research) field going forward

- Understanding mechanisms of change
 - How do interventions achieve their effects?
- Implementation Science
 - Translating evidence-based approaches into practice
 - How can we ensure quality of care at scale?



Key Priorities:

1. Provide comprehensive services to accompany parenting support = reduce the stressors
2. Reaching more parents
3. Engaging male caregivers
4. Reduction of IPV/VAC co-occurrence

Going Forward: Two Key Priorities

1. Scaling Up/Capacity Building : After successfully piloting in Brep, Chitral one of the most remote areas in Northern Pakistan (see photo of the valley), scaling up strategy is required. This includes formation of Community Based Organization where the head of the CBO would be the de-facto CEO for implementation.

Integration with Existing Programs: Ownership of the program would rest with the CBO. Integrate the parenting tips program with existing humanitarian and development programs in the area. Collaborate with organizations working in child protection, education, and mental health sectors (such as CfC) to embed parenting support within their initiatives.

Organize community workshops and support groups to provide direct guidance to parents.

Adapt the parenting tips program to the local cultural context, considering cultural norms, practices, and beliefs.

2. Use Design Thinking Approach : Urban minds view rural areas as 'look down upon' and similarly, villages themselves believe that they need crutches to solve their problems. Design thinking promotes a human-centered collaborative approach. It is essential for us to involve parents in the design and development of interventions. Take their perspectives, experiences, and cultural nuances to effectively impactful solutions. The result would be more meaningful in helping their children deal with trauma after the disaster.





Audience Q&A

Please leave your questions in the Q&A box, and feel free to upvote any questions you would like answered.



Q&A

How best can we adapt this information to be appropriate in different cultural settings?

Use design thinking approach: By involving parents in the design and development of interventions, their perspectives, experiences, and cultural nuances can be effectively incorporated, resulting in more meaningful and impactful solutions for coaching parents in helping their children deal with trauma after a disaster.

Pakistan suffered from severe flooding last year. As a result, many families suffered physical and mental damage as well. How can a teacher help their students to cope up with the trauma of this incident if we don't have any support from physiatrist?

You can find relevant actions and resources in MSP Activity 3.8 *Promote the mental health and psychosocial well-being of education personnel and strengthen their capacity to support children*

<https://mhpssmsp.org/en/activity/activity-introduction-12#page-1>

Q&A

Is there any document or booklets that could help us as we interact with children in communities?

You might find Save the Children's online course on Psychological First Aid (PFA) for Children helpful <https://kayaconnect.org/course/info.php?id=781>

IFRC also has a manual on PFA for children

https://drive.google.com/file/d/1PYs6MGov4BMQ24nHn1qQtP_gypgMPcuo/view

PLH Parenting tips and the wider MHPSS Message Bank also include key messages you can incorporate into your work <https://app.mhpss.net/resource/cf-mhpss-message-bank> and <https://ukraineparenting.web.ox.ac.uk/eng>

Is there any way that a person can volunteer in Karachi Relief Trust if you live in another country?

Yes! You can reach out to them on their Facebook page or website www.karachirelief.org

How many families has the Karachi Relief Trust reached?

During their relief operation, they reached around 30,000 families

Q&A

How did you coordinate with other NGOs and local Government in your relief work on the ground in your relief work in Pakistan?

At Karachi, we developed an app and brought over 70 NGOs onto it. It helped in extending our reach and avoided duplication.

Is the BeThere programme available online?

You can find more information about the BeThere intervention on War Child Holland's website (<https://www.warchildholland.org/intervention-bethere/>). Also, feel free to reach out to me directly if you have any additional questions (anthony.guevara@warchild.nl)

Can local NGOs with a similar vision collaborate with GISP to implement parenting programmes in their communities?

We're always interested in hearing from organisations with a similar vision! For more information, you can email GISP at info@support-parents.org, Parenting for Lifelong Health at info@parentingforlifelonghealth.org and Global Parenting Initiative at information@globalparenting.org.

Closing Remarks



Rebecca Smith
Global Head of Child Protection Programmes



Adapting Parenting Programmes in Humanitarian Contexts & Migration and Displacement

Safe Families is appropriate in humanitarian contexts after certain provisions are considered, after the sudden onset of a crisis, once the context is sufficiently stable and the basic needs of parents and children are met.

Considerations:

- Migrating and displaced families are often in transit (and therefore less likely to complete a traditional parenting programme) and under significant stress
- The impact of loss and grief on children and their caregivers
- Being unfamiliar with the location and how to access services

Before you begin:

- Services should be mapped and referral pathways in place for: child protection, child safeguarding, gender based violence, mental health and psychosocial support.
- Review of secondary information, child protection assessments and a gender analysis.
- A risk assessment to assess and mitigate risks of bringing children and parents together.
- Promote an integrated approach by sharing messages and developing referral pathways between different programme areas.



Don't measure what
you aren't expecting
to change!

THANK YOU

JOIN THE FAMILY STRENGTHENING TASKFORCE

The Alliance for Child Protection in Humanitarian Action

- Sara Hommel: SHommel@savechildren.org
- Sabine Rakotomalala: sabinev@who.int



Scan to visit the
Family Strengthening
Taskforce Website

Contact our speakers

How can I get in touch?



Sabine Rakotomalala

sabinev@who.int



Dr Isang Awah

isang.awah@spi.ox.ac.uk



Mari Ullmann

mari@support-parents.org



Dr Caoimhe Nic a Bháird

cnic@unicef.org



Rebecca Smith

rebecca.smith@savethechildren.org



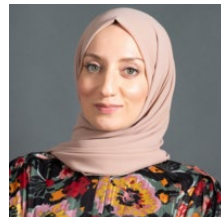
Genevieve Haupt Ronnie

genevieve.hauptronnie@uct.ac.za



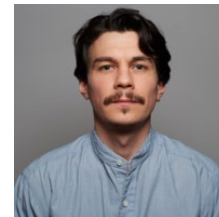
Yvonne Agengo

yvonne.agengo@rescue.org



Dr Aala El-Khani

aala.el-khani@un.org



Anthony Guevara

anthony.guevara@warchild.nl



Khayam Husain

khayam.husain@acpl.com.pk

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