

In Our Lifetime: A Global Conference to End the Institutionalisation of Children

26 November 2014, Church House, London

CONFERENCE REPORT

Summary

This conference, hosted by Lumos, brought together bilateral and multilateral donors, NGOs, Foundations and Experts, to discuss how to end the institutionalisation of children by 2050, *in our lifetime*. Institutionalisation was acknowledged to be extremely harmful to children as well as a hindrance to achieving mainstream development and humanitarian goals. Several donors made important commitments and the achievements already made were celebrated, including those by the EU, the US and the Global Alliance for Children. In particular, the US Government representative suggested a process for creating common principles or guidance and/or producing a joint statement with other donors and suggested coordinating investments in a select number of demonstration countries. The EU, the Global Alliance for Children and several other donors present expressed their interest in pursuing these next steps and encouraged other donors to participate.

- Lumos Founder and President, J.K. Rowling, opened the event by describing how ending institutionalisation is an economic as well as a moral imperative and underpins the achievement of development and humanitarian goals as well as human rights.
- The US Government, the EU and the Global Alliance for Children presented their respective work and commitments to ending institutionalisation and encouraged all donors to join with them.
- The Government of Haiti described the social programmes in place to tackle institutionalisation and further action needed.
- The Government of Moldova, alongside two young self-advocates, presented on the successes achieved nationally in reducing the institutionalisation of children and called for more action.
- Lumos CEO, Georgette Mulheir, presented the key findings of Lumos' latest report, *In Our Lifetime: The role of donors in ending the institutionalisation of children*, particularly its recommendations¹.

1. Aims and Objectives

The purpose of this conference was to bring together senior leadership from several donors, NGOs, Foundations and experts, to discuss how aid and development investments can be used more effectively to enable children to thrive in families and communities (See Participants List in Annex). It was the culmination of a series of international meetings between donors, hosted by Lumos, during 2014.

It sought to:

- Raise awareness of the harm caused by institutionalisation and the gathering momentum to replace institutions with community-based services
- Acknowledge and learn from donor progress and successes in deinstitutionalisation
- Discuss the findings of new research by Lumos, which highlights good practices by international donors,

¹ <http://www.wearelumos.org/sites/default/files/In%20Our%20Lifetime.pdf>

whilst also identifying where the direction of funding and the coordination of efforts require improvement

- Identify concrete ways in which major donors can coordinate their efforts to end institutionalisation, both at the international level and on the ground in developing countries.

2. Background

Whilst the actual number is not known, evidence suggests there are at least 8 million children living in institutions². Contrary to popular opinion, 80% of these children have parents, but have been separated from their families because of poverty, a lack of access to services, or discrimination³. This is in violation of several international human and child rights instruments⁴.

Sixty years of research demonstrates the harm caused by institutionalisation⁵. In spite of best intentions, institutions do not protect children; instead they leave children more vulnerable to violence, abuse and neglect⁶. Neither are institutions an effective means of providing education, health or other services to children; instead the outcomes for children raised in institutions are dire, dramatically reducing their future life chances and significantly limiting the potential to achieve mainstream development goals⁷. Furthermore, institutions are also far more costly compared with family-based alternatives and, therefore, an inefficient use of already scarce resources⁸.

Many donors have focused over the years on 'improving' institutions. But recent research suggests that improving the building infrastructure and training personnel does not significantly improve the protection of, and outcomes for, the children involved⁹.

Conversely, there is plenty of evidence to show what works: supporting vulnerable families, for example through help with poverty, employment, and substance abuse, to prevent unnecessary separation; providing inclusive health, education and social services to children in their own communities; and providing alternative family-based care for children who genuinely need it¹⁰.

With the right investments, it is possible to end the institutionalisation of children in Europe by 2030 and worldwide by 2050.

² Defence for Children International (1985) *Children in Institutions*, DCI: Geneva

³ Lumos (2014) *Lumos Factsheet: The Global Picture of Children in Institutions*

http://www.wearelumos.org/sites/default/files/Lumos%20Factsheet%20-%20The%20Global%20Picture%20of%20Children%20in%20Institutions_24.11.pdf ; See also, Csaky, C. (2009) *Keeping Children out of Harmful Institutions* Save the Children UK: London

⁴ Csaky, C. (2014) *Why Care Matters: The Impact of Inadequate Care of Children and on Society*. Family for Every Child: London.

⁵ Lumos (2014) *Lumos Factsheet: How Institutions are Harmful to Children*

http://www.wearelumos.org/sites/default/files/Lumos%20factsheet%20-The%20harm%20caused%20the%20children%20through%20institutions_24.11.pdf There are numerous individual scientific studies demonstrating the harm caused to children living in institutions. These are summarised in K, Browne (2009) *The Risk of Harm to Young Children in Institutional Care*, Save the Children UK: London

⁶ Ibid.

⁷ Delap, E. (2010) *Protect for the future. Placing children's protection and care at the heart of achieving the MDGs*. London: EveryChild

⁸ See point 2. See also, R Carter (2005) *Family Matters: A study of institutional childcare in Central and Eastern Europe and the Former Soviet Union*, Everychild: London

⁹ *Wasted Time, Wasted Money, Wasted Lives ... A Wasted Opportunity? – A Focus Report on how the current use of Structural Funds perpetuates the social exclusion of disabled people in Central and Eastern Europe by failing to support the transition from institutional care to community-based services* (European Coalition for Community Living, March 2010)

¹⁰ There are several toolkits and guidelines demonstrating best practice including the *Common Guidelines on the Transition from Institutional to Community Care* <http://deinstitutionalisationguide.eu> and the Better Care Network Toolkit <http://www.bettercarenetwork.org/bcn/toolkit/>

Key Definitions¹¹

There are many types of facilities that could be defined as children's *institutions*. These typically include, but are not limited to, orphanages, baby homes, residential schools, residential health facilities, children's homes and homes for persons with disabilities that house both adults and children. Institutions are often designed to deliver a range of services to children including education, health, and / or alternative care. As such they are found within a variety of sectors, not just in the area of child protection. It is not the type of facility or its size that determines what is an institution, but rather the conditions and culture that preside. In particular, an institution is any residential facility that houses children in which:

- Children are isolated from the broader community and/ or compelled to live together;
- Children (and their families) do not have sufficient control over their lives and over decisions which affect them;
- The requirements of the organisation itself tend to take precedence over the children's individualised needs¹².

The institutionalisation of children refers to their placement in an institution in order to access any kind of service. As such it is an active consequence of how services are delivered. Any intervention that supports services to be delivered to children through an institution is contributing to their institutionalisation.

Deinstitutionalisation refers to a complex set of actions that include at least:

- Preventing the separation of children from their families, through the development of community-based health, education and social services that are fully accessible to all children and their families
- Ensuring that every child currently in an institution is supported to move to a placement appropriate for them, where possible their own family or a substitute family in their community
- Ensuring the transfer of resources from institutions to community-based services, to facilitate the financial sustainability of community-based services
- Changing attitudes and practices of a broad range of stakeholders – politicians, donors, professionals, parents, children and society at large.

3. Presentations

This section summarises the key points made within the presentations delivered at the conference. Please refer to the Annex for The Agenda.

3.a J.K. Rowling, Author, Founder and President of Lumos

J.K. Rowling gave the welcome and opening address. She emphasised her personal commitment to this issue as well as the key role that donors play in ending the institutionalisation of children. She outlined the wealth of evidence to demonstrate the severe and lasting harm institutionalisation can cause children, even in well resources institutions. She highlighted that the overwhelming majority of children in institutions are not orphans, but rather are separated from their families because education, health, social and economic support are not available locally, particularly for children with complex needs.

She emphasised that ending institutionalisation is entirely possible, *in our lifetime*; based on experience, Lumos estimates that it is possible to eradicate institutionalisation by 2050. She urged donors to commit to this goal by helping to guide systems and structures that enable children to thrive in a family setting; this is

¹¹ This is an extract from Lumos (2014) *In Our Lifetime: The role of donors in ending the institutionalisation of children* Lumos: London

¹² The conditions described here are taken from the European Commission (2009), *Report of the Ad Hoc Expert Group on the Transition from Institution to Community-Based Care*.

a question for almost every area of development and humanitarian work - from basic services to growth and poverty reduction. She outlined the economic imperative, since it is far more cost-effective to support a child in a family than in an institution and reduces long-term costs since these children are far more likely to become independent and economically active in adulthood. She celebrated the achievements of the EU, the US Government, The Global Alliance for Children as well as many other institutions and countries around the world, and affirmed Lumos' commitment to working with donors and other partners.

3.b Rob Horvath, US Government Special Adviser on Children in Adversity

Rob Horvath expressed the US government's commitment to deinstitutionalisation and explained the historical evolution of this issue in US government policy. For over 20 years, USAID has, along with several other US agencies, invested billions in children outside of family care around the world. However, this support has often been segmented and uncoordinated. This was particularly evident in the US response to the 2010 earthquake in Haiti, which triggered an unprecedented inter-departmental shift towards coordinated policies and approaches to assisting children. This led to a whole-of-government *Evidence Summit* and a *Strategy for Children in Adversity* in 2011, and a five-year *Action Plan on Children in Adversity* in 2012.

The *Action Plan* was signed by seven federal agencies and over 30 departments. It seeks to 1) build strong beginnings, by ensuring that children under 5 not only survive, but also thrive; 2) put family care first; and 3) protect children from violence, exploitation, abuse and neglect. It prioritises six countries of which Cambodia, Moldova, Rwanda, and Uganda have since been selected and two more will be identified shortly. In all of those countries, host governments have made firm commitments to reducing the percentage of children living in institutions and increasing the percentage of children living within appropriate, permanent, and protective family care. Collaboration and partnership are central and the Action Plan is focused on supporting vulnerable families before institutionalisation / abuse / separation occurs.

On 25th November the US Government launched a new "Family Care First" initiative that seeks to convene problem-solvers from the global community to co-create and co-invest in transformational solutions aimed at reducing the percentage of children outside of family care. The first phase of this initiative focuses on the needs of children in Cambodia and a co-creation workshop is scheduled for February 2015. Mr Horvath invited all those at the conference to be a part of this process.

Finally, Mr Horvath urged all donors to work together to develop a set of common principles and guidelines on deinstitutionalisation and to join together to plan, and implement, a program in one or more countries to demonstrate how a global and unified approach truly can make a difference, *in our lifetime*.

3.c José Fernando Costa Pereira, Policy Adviser to the Africa Department of the European External Action Service, EU

Mr Costa Pereira acknowledged the importance of deinstitutionalisation and the general consensus that institutions harm more than help the youngest and most deprived people. He emphasised that the EU has prioritised this issue for many years. For example, in 2008 the EU adopted guidelines on the promotion of the rights of the child, and in 2009 it adopted the recommendations of the *Spidla Report*, outlining how the EU should promote a transition from institutional to community-based care. This led to intensive work in Eastern Europe and Central Asia in particular, where the EU combined human rights dialogue with investments in welfare reform.

He emphasised that the EU is keen to cooperate with others and acknowledges that the goal of eradicating institutionalisation is certainly possible, with international support. He commended the US Government for

initiating collaboration with other donors in this regard and welcomed the opportunity to explore common avenues for co-operation. He also invited other donors to take part.

He highlighted the particular challenges and opportunities for deinstitutionalisation in Africa. It is estimated there may be many millions of orphaned or separated children; one in nine children in Africa dies before the age of five; AIDS has substantially increased the number of children without adequate care; and orphans and separated children are especially vulnerable to kidnapping, child soldiering, sexual exploitation and have little hope of a job in adulthood. However, Africa also presents many opportunities: most African countries have signed and ratified the African Charter on the Rights of the Child, the African economy is growing, and peace and political stability are increasing.

He explained that children's rights are an integral part of the EU, as reflected in the EU Cotonou Agreement and the joint EU-Africa strategy. He emphasised the need to do more research on institutionalisation in Africa, including in areas of conflict, and highlighted that the EU is preparing a research initiative in this regard. He stressed that deinstitutionalisation requires a holistic approach and to be regarded as an integral part of mainstream efforts, including towards peace, stability, education, state-building, inclusion and protection.

He concluded by reaffirming the EU's willingness to partner with State and non-State actors, whilst keeping African ownership of the process at all times.

3.d Delegation from Haiti

Philippe Cantave, Director of Futures Group HPP/AKSE Programme in Haiti introduced and translated a video presentation by **Arielle Villedrouin, Director of the Haiti Institute for Social Welfare & Research (IBESR)**. Ms Villedrouin presented the situation in Haiti, where there are 756 orphanages, 32000 children in institutions, and a widespread lack of awareness of the harm institutionalisation can cause. The IBESR has conducted an assessment, established an accreditation system, closed more than 100 orphanages, signed a moratorium on opening more institutions, and launched a public information campaign. The IBESR welcomed the Haitian government's commitment to deinstitutionalisation and highlighted that sustainable human development is not possible in Haiti unless children can live in dignity with their families.

Allison Llera, Counsellor to the Haitian Prime Minister, emphasised that supporting vulnerable families was a priority for the Prime Minister and outlined the government's efforts in this regard. This includes free primary education for 1.4 million children, support to vulnerable children for school materials and improved teacher training; a range of social assistance programmes including free hot meals to mothers in areas of flooding and famine; and five new legal measures to protect children from harm including on adoption, parenting, trafficking, pornography and the worst forms of child labour. She concluded by emphasising that the Government would like international assistance in helping the children of Haiti.

3.e Dr. Neil Boothby, Senior Adviser to the USAID Administrator, Global Alliance for Children

Dr. Boothby presented the neuroscience behind the harm caused to children in institutions and explained how deinstitutionalisation underpins the achievement of sustainable development, in what he termed *neurons – to – nations*.

He explained how the lack of individual care and attention experienced by infants in institutions causes developmental delays and even death. He gave the example of the many babies housed in orphanages in Goma in Rwanda in 1994 who died through lack of nurture, not nutrition. Each baby had an IV drip that met their nutritional needs, but the lack of an interactive adult in their lives caused around 10 babies per week to die due to the lack of neurological stimulus of their brains. He also explained the results of the Bucharest

research programme in which children in orphanages were compared with children living in local families. Those in orphanages had an average IQ of 64, which equated to a lifetime of dependence; whilst those living in the community had an average IQ of 103, which enabled them to lead an independent life.

Dr. Boothby emphasised that donors need to move beyond a focus on survival to one that incorporates human development. *Supporting children to thrive, not just to survive*. Human capital is dependent on intellectual capacity, which is only generated through a combination of nutrition and intellectual stimuli. He commended the US government's commitments to children in adversity but called for more action to translate *neurons – to –nations* into policy and to unite the many US agencies affecting children around the world behind a coordinated approach.

Dr. Boothby introduced the Global Alliance for Children, a partnership between multiple bilateral, multilateral and private donors and NGOs. Ultimately, this Alliance would like to see child protection become the third pillar of development, along with health and education. It is closely aligned to the US Government's Strategy and Action Plan on Children in Adversity and regards donor co-ordination as critical to achieving sustainable change. He commended the US Government "Family Care First" initiative and committed to match US Government funds with resources from the Global Alliance for Children.

He concluded by reaffirming that the Sustainable Development Goals would not be reached unless we invest in brain health, not just body health. Family care is not a luxury, it is an essential. To this end deinstitutionalisation is an essential investment and has to be at the core of what we do.

3.f Delegation from Moldova

H.E. Mr Iulian Fruntasu, Ambassador of Moldova to the United Kingdom expressed his gratitude to Lumos and donors on behalf of his government. He described the historical context of Moldova, which is recovering from decades of poverty and unrest stemming from the occupation by the USSR in 1940. Many children were institutionalised in order to receive education owing to a lack of access for disabled children to mainstream schools. Deinstitutionalisation is a high priority for the government of Moldova and has been for some time. The National Action Plan 2007-12 resulted in a 62% reduction of children in institutions. New types of family support services have been established as well as a national inclusive education process. There still remain residential institutions, including for children under three years of age, and addressing this is a priority concern. The next step is a national Child Protection Strategy 2014-20 and an Action Plan to continue the deinstitutionalisation process until it is entirely eradicated. H.E. closed by emphasising that the experience of Moldova highlights how Lumos' objective of ending institutionalisation is entirely achievable and thanked everyone present for their contribution to this field.

Irina Malanciuc, Director of Lumos Moldova introduced the two young self-advocates that Lumos supported to participate in the conference. She described how Lumos has operated in Moldova since 2007 during which time child participation was a key component of its work.

Dumitruta is a teenage girl who previously lived for four years in an institution for children with disabilities as this was the only way she could access education. She is now back home with her family and attends mainstream school. **Cristina** is a child rights advocate and volunteer in her school's inclusive education resource centre where she works with Dumitruta and their peers. They began their presentation with a short film written and produced by the child rights group they are part of in Moldova that describes from a child's perspective what it is like to live in an institution and the impact that deinstitutionalisation has on them and their peers.

Dumitrita then presented her personal experience of institutionalisation and her eventual return to family life and mainstream education: *“The time I spent there seemed like an eternity. I felt like I was in a dark maze where I couldn’t find the light... My biggest dream was to be with my parents and sister. Everything I dreamed of came true! I came back home and everything changed. I’ve been studying at the school in my village for two years now... My fear and other difficulties are in the past. I feel I am part not only of my family, but also of the community... I get involved in all activities related to promotion of children's rights, I participate and help realise the ideas and initiatives of our group, that influence decisions concerning children.”*

Cristina then presented what it was like for children in mainstream education to receive the influx of children with disabilities as a result of deinstitutionalisation in Moldova. *“Two years ago everything was different. Children in mainstream school did not know what ‘disability’ was and we worried about how would we interact with disabled children. Meanwhile, the children with disabilities were also afraid of this new environment... some of them could not express themselves and could not understand what we were saying to them, others avoided us and preferred to stay alone. But we started to communicate, to support and to understand each other, and to accept the differences between us. We now complete each other. We understand that we can all benefit from being together.”*

They concluded their presentation with a visual display symbolising deinstitutionalisation and calling for all children to be supported to live at home and to avoid the separation of children from their families. They also emphasised the important role that participation has in achieving deinstitutionalisation and children’s rights. *“Only by being active and supporting each other can we make the change.”*

3.g Georgette Mulheir, CEO of Lumos

Ms Mulheir presented the findings of Lumos’ latest report, *In Our Lifetime: The role of donors in ending the institutionalisation of children*¹³. This offers a snapshot of major bilateral and multilateral donor funding to show what works in terms of deinstitutionalisation and what to avoid. It emphasises that although donor funding is invested with the best intentions, sometimes it can contribute to institutionalisation.

Ms Mulheir explained why institutions are a poor investment. For most children, it costs up to ten times more to deliver services to them in an institutional setting than it does to support them at home through higher quality community-based services. Research also shows that all institutions, including those that are well resourced, do not meet children’s needs and do not offer a safe alternative to families.

Ms Mulheir highlighted that there are many examples of good donor practice including the examples presented here by the US, the EU and the Global Alliance for Children. She emphasised that the EU recent funding legislation on deinstitutionalisation arguably sets a precedent for all EU investments globally, and for other donors working around the world. She also reaffirmed the progress made in Moldova where the political commitment, combined with support from donors like the US, EU and the World Bank, have reduced the number of children in institutions, and increased the number of children with complex needs being educated in mainstream schools, in spite of economic and political instability.

She went on to highlight common scenarios in which donors support the institutionalisation of children, often inadvertently. These include: funding towards the renovation of institutional buildings often whilst investing in a parallel process of deinstitutionalisation; funding deinstitutionalisation programmes, which exclude the most vulnerable children with complex needs; and funding mainstream health or education programmes without prioritizing inclusion, thereby leaving behind children with complex needs. She

¹³ <http://www.wearelumos.org/sites/default/files/In%20Our%20Lifetime.pdf>

highlighted the impact of humanitarian support delivered through an institutional approach. For example, many interim care centres are being established in response to the Ebola crisis, without due consideration to how they will be transformed into community-based services; in Aceh, children's homes received 3.8 million US Dollars following the 2004 Tsunami, much of which was for education, which resulted in mass-separation of children from their families as institutionalisation was often the only way of attending school.

She explored the recommendations for donors resulting from Lumos' latest research including creating joint practices, guidance and coordinated action plans between donors. She emphasised that deinstitutionalisation is a complex process that involves transforming health, education and social services as well as the way governments manage their resources. It is important to get the entire process right in order for it to be effective. She also encouraged those present to disseminate Lumos' research and emphasised that if we all work together institutionalisation can be eradicated by 2050.

Ms Mulheir closed by highlighting how institutionalisation turns children into commodities. She gave the example of a Director of an institution in the Czech Republic who admitted to her that the children remained there principally because so much money had been invested in the institution building that they could not close it. In other circumstances, children are kept in institutions in order to continue employment for the personnel. To this end children are being used as commodities and at the most extreme end institutions are being set up to exploit children. Deinstitutionalisation turns children from commodities into rights bearers. It is only when children are in their communities that they truly become citizens invested with rights.

4. Discussion

There was a brief Q & A session following the presentations in which several key issues were raised. For example:

- Billy DeMichele from Scholastic Inc. asked what proportion of children in institutions were there because of a child protection concern in their own families. Dr Boothby responded by highlighting that whilst a small number are in institutions in response to a protection concern, the overwhelming majority are there to service another need particularly education or health and recommended that greater investment in a screening committee at the local level would ensure that more children were helped to remain in their families. Georgette Mulheir emphasised that if services are made available in the community then in most cases children can go home. A small number cannot however, and for those children foster care, adoption and other family-based care alternatives need to be available. There tends to be a tiny group of children with such complex needs that they cannot cope in a family. For example, some children have been so traumatised that they have complex behavioural needs that are best responded to by professionals in the community. Above all, there needs to be an effective system for assessing the needs of each individual child and monitoring, following up and adapting their placement accordingly.
- Douglas Soutar from the IDDC commended the US Government's work and achievements to date on deinstitutionalisation and asked whether it might ratify the Convention on the Rights of the Child in the future. Rob Horvath responded by highlighting how, whilst he is not a diplomatic representative of the US Government, he can confirm that work continues internally to achieve this.
- Tricia Young of the Child-to-Child Trust commended Lumos' work on child participation with children affected by institutionalisation and asked to what extent it has influenced policy. Irina Malanciuc responded by highlighting how Lumos' programme in Moldova has supported children to be part of the deinstitutionalisation process, not just the subject of it. It supported children in institutions to engage in decision-making and once they were moved across into inclusive schools in the community these children were supported to participate in mainstream advocacy groups. They worked at the regional level on government policy regarding education and took part in national consultations. Georgette Mulheir highlighted the particular emphasis Lumos places on supporting children with intellectual

disabilities to participate. Part of this is helping adults remove the barriers that these children come up against when they want to communicate.

E. About Lumos

Lumos is an international NGO that works in partnership with governments, professionals and carers, communities, families and children, to transform outdated systems that separate children from their families. Together with our partners we replace institutions with community-based services that provide children with access to health, education and social care tailored to their individual needs. This supports families to provide the loving care their children need to develop to their full potential and build a positive future. Lumos was founded in 2005 by Lumos' President, J.K. Rowling.

For more information, to receive a copy of *In our Lifetime: The role of donors in ending the institutionalisation of children* or for any other enquiries please contact

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ANNEX

A. AGENDA

10:45 Arrival and Registration

11.00 Welcome and Opening Address: Why donors are vital in ending the institutionalisation of children. **J.K. Rowling, Author, Founder and President of Lumos**

11.10 US Government support for Children in Adversity: How deinstitutionalisation was made a cross-cutting priority and what the US intends to do next to support deinstitutionalisation globally. **Rob Horvath, US Government Special Adviser on Children in Adversity**

11.20 EU Successes and Aspirations: How deinstitutionalisation was made a priority for funds within Europe and what the EU intends to do next to support deinstitutionalisation globally. **José Fernando Costa Pereira, Policy Adviser to the Africa Department of the European External Action Service, EU**

11:30 Tackling the challenge of institutionalisation in Haiti. **Allison Llera, Counsellor to the Haitian Prime Minister**

11.40 Working Together: Successes and lessons learned on donor cooperation and alignment in the deinstitutionalisation of children. **Neil Boothby, Senior Adviser to the USAID Administrator, Global Alliance for Children**

11.50 What works: Effective Deinstitutionalisation in Moldova. **Joint presentation by two Moldovan young people with opening by H.E. Mr Iulian Fruntasu, Ambassador of Moldova to the United Kingdom and Irina Malanciuc, Director of Lumos Moldova.**

12.10 Break

12.25 In Our Lifetime: New research into the role of donors in ending the institutionalisation of children. **Georgette Mulheir, CEO of Lumos**

12.35 Discussion and next steps.

13.00 End

B. PARTICIPANT LIST				
Title	First name	Last name	Role	Organisation
Mr	Kazem	Behbehani	Former trustee	Lumos
Mr	Neil	Blair	Chair of the Board of Trustees	Lumos
Dr	Neil	Boothby	Senior Advisor to the USAID Administrator . Chair of the Global Alliance for Children	USAID/ Global Alliance For Children
Ms	Caroline	Brookes	Office Manager	Lumos
Mr	Manolo	Cabran	Senior Associate	Maestral
Mr	Philippe	Cantave	Director of Futures Group HPP/AKSE Programme in Haiti	USAID Haiti
Ms	Mara	Cavanagh	Executive Assistant to Georgette Mulheir, CEO	Lumos
Mr	Jose Fernando	Costa Pereira	Policy Advisor to the Africa Department of the European External Action Service	European External Action Service
Ms	Viorica	Cropivnitchi		Lumos
Ms	Dumitrita	Cropivnitchi	Self-advocate from Moldova	Lumos
Ms	Corinna	Csaky	Director of Policy and Research	Lumos
Mr	Maxence	Daublain	Chargé de mission – Children’s rights, Discrimination and Gender	DG Development Cooperation, European Commission
Mr	Peter	Davey	President Elect	Rotary Great Britain and Ireland
Mr	Billy	Di Michele	VP, Creative Development	Scholastic Inc.
Mr	Konstantin	Dimitrov	The Ambassador of the Republic of Bulgaria to the United Kingdom	Embassy the Republic of Bulgaria
Prof	Pat	Dolan	UNESCO Chair in Children, Youth and Civic Engagement	UNESCO
Ms	Rebecca	Eastmond	Philanthropy Advisor	JP Morgan
Mr	Michael	Fembek	Head of Project (Zero Project)	Essl Foundation
H.E. Mr	Iulian	Fruntasu	Ambassador of Moldova to the United Kingdom	Embassy of Moldova to the UK
Ms	Vicky	Gillings	Head of Communications	Lumos
Ms	Eugenia	Godoroja	Child Participation officer	Lumos
Mr	Andres	Gomez de la Torre	Head of Programmes	CAFOD
Ms	Caroline	Greenhalgh	Borne Manager	Chelsea and Westminster Health Charity
Mr	Bailey	Grey	Policy & Advocacy Adviser (Child Protection)	UNICEF UK
Prof	Nora	Groce	Leonard Cheshire Chair and Director	Leonard Cheshire Disability
Ms	Kerry	Hall	Remote Expert Service Support Coordinator	Lumos

Ms	Georgina	Hewes	Policy Adviser	Save the Children
Ms	Louise	Holmes	Fundraising Director	Lumos
Mr	Robert	Horvath	U.S. Government Special Advisor on Children in Adversity	USAID
Ms	Allison	Llera	Counselor to the Haitian Prime Minister	Haiti Government
Mr	Hommy	Khosrowpanah	Project officer	Medicor Foundation
Mr	Todor	Krastev	Head of the Labour Social Affairs Office	Embassy of the Republic of Bulgaria
Ms	Merel	Krediet	Advocacy and Campaigns Assistant	Lumos
Ms	Hillary	Maguire		
Ms	Nancy	Maguire		Coram Voice
Ms	Irina	Malanciuc	Moldova Country Director	Lumos
Ms	Cristina	Meriacri	Self-advocate from Moldova	Lumos
Ms	Evdochia	Meriacri		Lumos
Mr	Alfonso	Montero	Policy Director	European Social Network
Ms	Georgette	Mulheir	CEO	Lumos
Ms	Irina	Papancheva	EU Policy and Advocacy Advisor	Lumos
Mr	Nolan	Quigley	Advocacy and Campaigns Manager	Lumos
Ms	Claudia	Ramsbacher		Essl Foundation
Ms	Kate	Richardson	Director of Programmes	Lumos
Mrs	Esther	Robinson-Bello	Personal Assistant to the Charge d'Affaires	Embassy of Haiti
Ms	J.K.	Rowling	Founder and President	Lumos
Ms	Roxana	Rycroft	Interpreter Romanian-English	Lumos
Sir	Roger	Singleton	Managing Director	Lumos
Ms	Jenny	Skene	Research Assistant	Lumos
Mr	Douglas	Soutar	Board Member	IDDC
Ms	Nicky	Stonehill		StonehillSalt PR
Mr	Benjamin	Ward	Deputy Director Europe and Central Asia Division	Human Rights Watch
Ms	Belinda	Wava		Embassy of Haiti
Ms	Tricia	Young	Director	Child to Child
Ms	Annalisa	Brusati	Child Protection Technical Advisor	International Rescue Committee
Ms	Iliana	Sarafian	Programme Officer - Early Childhood Programme	Open Society Foundation

