



Strategic Impact
Evaluation Fund

NEWSLETTER

October 2025

Reducing violence against children through text messages

Approximately 75% of children aged 2 to 4 worldwide are regularly subjected to violent discipline at home, and programs that provide parents with alternative behavior management tools through in-person home visits have been shown to reduce the use of violence (see, for example, this [SIEF-funded trial in Rwanda](#)). In a recent [seminar](#), SIEF-funded researchers presented their findings from a [trial in Jamaica](#) testing whether a digitally delivered program could also decrease violence. Results show that messages delivered through text messages improve caregiver knowledge (0.52 SD) and attitudes around violence (0.2 SD). Caregiver violence against children decreases (0.12 SD). As a result of the program, children experience fewer emotional problems (0.17 SD), while caregivers experience less depression (0.12 SD), anxiety (0.16 SD), and parental stress (0.16 SD) nine months later.

The challenges of scaling early childhood programs through community health workers

Three decades of research have demonstrated that homebased parenting programs that emphasize nurturing care, play, and stimulation advance children's brain development in ways that last throughout their lives. The challenge lies in scaling up what has worked at a small scale, and SIEF's [most recent Evidence to Policy note](#) reports results from [trials in India and Pakistan](#) that tested the effectiveness of programs implemented by community health workers. In Pakistan, the program was embedded into existing monthly home visits of Lady Health Workers, a pre-existing and well-regarded program. In India, it was delivered by a new cadre of workers hired and employed by a non-governmental organization. While the programs may have led to some improvement in children's diets, there were no discernable impacts on physical or developmental outcomes when the children reached 18 months of age. Researchers attributed the lack of impact to implementation challenges, as evidenced by the low frequency of visits and the limited emphasis community health workers placed on family involvement during the visits.



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