



CHANGING LIVES — **AN ANALYSIS OF PLAN** **INTERNATIONAL'S CHILD** **SPONSORSHIP DATA**

Condensed report

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1. INTRODUCTION

*Indigenous preschool girl draws picture
at ECCD centre (Cambodia).*
(©Plan International)

Child sponsorship has been a foundation of Plan International's work since our beginnings. We currently engage with 1.4 million sponsored children in 48¹ countries through sponsorship activities, communications and programmes. Back in 2006 we began to record the annual surveys that are conducted with all sponsored children. Since then, we have generated a unique and vast dataset from more than 12 million surveys conducted among 2.7 million sponsored children.

Plan International is a learning organisation. We seek to continuously understand more about the areas in which we work and to be held accountable for the work we do. Through previous studies we sought to assess the influence of child sponsorship, although these were limited in different ways.²

This is the first study that comprehensively uses the complete dataset of 12 million surveys for a full-scale, independent analysis of child sponsorship.

WITH THIS STUDY, WE WANTED TO SATISFY FOUR AIMS »

01 To create reliable and objective evidence on the influence of our sponsorship model on development outcomes for sponsored children and communities – such evidence will be invaluable to the work of Plan International staff.

02 To fill a gap in a field where rigorous empirical research on the influence of child sponsorship is scarce – this is despite the widespread use of sponsorship programmes by international non-governmental organisations (NGOs).

03 To test the relevance of our sponsorship-related work to the 2030 Sustainable Development Goals, as well as to highlight gaps in our approaches.

04 To use our huge child sponsorship dataset more to inform our work, track our progress, and to ensure we are accountable both to our sponsored children and communities, and to the development sector more widely.

To these ends, we commissioned RMIT³ University to conduct a quantitative study of the influence of child sponsorship. The research team probed the impact of Plan International's child sponsorship model on sponsored children and communities. It also studied different groups of children, including comparing girls and boys, children living with a disability, and children in different locations such as rural or urban settings and conflict-affected countries.

This report presents a condensed version of the full study findings by RMIT University.⁴ It also offers our responses to those findings, in which we see particular relevance for sponsorship operations, the programmes and influencing work that we do in communities, and marketing and fundraising activities.

1. Over the past couple of years, Plan International has ceased sponsorship operations in Laos, South Sudan and Pakistan. However, because the study considers data from 2006 onwards, the dataset includes surveys from children from 51 countries.
2. The previous studies include: *Include us! A study of disability among Plan International's sponsored children* (2013), conducted by Plan International in collaboration with the London School of Hygiene and Tropical Medicine using a partial sample of the child sponsorship dataset; and *Being sponsored* (2016), a qualitative study by Plan International that interviewed sponsored children and their families in four countries.
3. RMIT stands for Royal Melbourne Institute of Technology.
4. Read the full report by RMIT University here.

An 11-year-old Plan International
sponsored child (India).
(©Plan International)

2. PLAN INTERNATIONAL'S CHILD SPONSORSHIP MODEL



A girl, 13, at home with her parents and younger brother (Brazil).

(©Plan International)

Child sponsorship is a development approach that is widely used in the international NGO sector. It is estimated that these sponsorship systems raise an estimated \$3 billion each year to help some 9.1 million children and their communities.⁵

Plan International's child sponsorship model takes a community-based approach. We establish meaningful relationships with sponsored children and their families, and commit to long-term interventions in their communities. Children from vulnerable families and marginalised communities are targeted in particular.

Through their interaction with the sponsors and with Plan International, the children and their communities can access a holistic package of sponsorship activities, communications and

development interventions over an extended period of years. A child is typically sponsored until she or he becomes 18 years old.

All our sponsorship activities and programmes aim to ultimately benefit all the children who live within a sponsored community – whether they each have an individual sponsor or not. In this way, our sponsorship activities and programmes work on both an individual and a community level. The programming spans a variety of areas, such as approaches to health, education, and water and sanitation, with the aim of bringing community-wide benefits.

Sponsored children participate in sponsorship activities such as children's clubs where they can learn, play and discuss community issues; receive visits from Plan International staff to monitor their general wellbeing; receive small gifts as tokens of appreciation; possibly receive bursaries for education; and can directly communicate with their sponsor.

5. Wydick B., Glewwe P., Rutledge L. (2013) "Does child sponsorship Work? A Six-Country Study of Impacts on Adult Life Outcomes", *Journal of Political Economy*, 212: 393–436; Wydick, B., Glewwe, P., Rutledge, L. (2017) "Does child sponsorship Pay off in Adulthood? An International Study of Impacts on Income and Wealth", *The World Bank Economic Review*, 31(2): 434–458, cited in the sponsorship study.

Alongside this, we work with the community on tailored, child-centred development interventions. Thanks to the continuity of sponsorship funding, we can be responsive to community needs over several years in ways that more time-limited, donor-funded projects cannot be.

These two types of engagement – on an individual and on a community level – interact and are mutually beneficial for the children and their communities. Sponsored children's individual development ripples out across the community as they become healthier, learn more and help to bring positive change. The tailored interventions enable the community as a whole to develop and, in turn, improve prospects for all children and their families.

A NOTE ON TERMINOLOGY

Within Plan International, we refer to all children engaged in sponsorship programmes as “sponsored children”. To conduct their analysis, the research team from RMIT University differentiates between individual children with a sponsor, describing them as “assigned” children, and those awaiting a sponsor but still participating in a sponsored programme as “enrolled” children. This is important to note, since only assigned children undertake letter-writing and direct communications with sponsors, and several findings in the sponsorship study explore possible differences in outcomes between assigned and enrolled children. Where “sponsored children” are referred to, this encompasses both assigned and enrolled children.

The study also uses the phrase “sponsorship programmes” to mean the whole package of sponsorship activities and development activities (funded both by sponsorship and grants funds) that may run in a community, and not simply a discrete intervention.

“Sponsored communities” refers to any community where Plan International conducts activities with sponsored children.

In line with our commitments to children and sponsors, we interview each sponsored child at the beginning of our interaction with them and every year after that. The aim is to find out about the child's family demographic background, details about the child's birth registration (or lack of), level of education and school attendance, their health and potential disability, access to water and sanitation, and the type of house they live in. This has three purposes: to introduce the child to the sponsor and to update sponsors about the child; to inform our programme work; and to enable sponsored children and their families to discuss our work in their communities.



A girl, 12, uses tippy tap in her community where there is a lack of basic sanitation (Brazil).

(©Plan International)

3. THE RMIT UNIVERSITY SPONSORSHIP STUDY



*A young woman at the primary school where she works
as a librarian (Cambodia).*

(©Plan International)

3.1 THE STUDY AUTHORS

The research team from RMIT University consists of Professor Simon Feeny, Professor Alberto Posso and Dr Sefa Awaworyi Churchill. They have many years' experience in empirical research in the field of development economics and applied economics. The team also included Dr Gill Westhorp, an associate of RMIT University and Director of Community Matters Pty Ltd. Dr Westhorp is a leading expert in realist research and evaluation.

3.2 INTRODUCTION TO THE SPONSORSHIP STUDY

Despite the wide use and scale of child sponsorship by international NGOs, there are surprisingly few studies into its impacts. This quantitative study differs from existing research for its sheer scale: it analyses child wellbeing in 50 developing countries across Asia, Africa and Latin America. The data come from more than 12 million surveys conducted by Plan International staff and volunteers from 2006 to 2018 among 2.7 million sponsored children, aged from under one to 18 years.

The primary question for the study was: Does Plan International's child sponsorship model contribute to development outcomes? If yes, how and to what degree does it contribute to development outcomes?

Secondary questions were also investigated. Does sponsorship have a different influence on different groups of children, (that is, boys or girls, different age groups, children living with a disability)? Does sponsorship's contribution to children's wellbeing change depending on the circumstance – for instance, does it contribute less to children living in conflict-afflicted areas; more to children in rural areas; and more the longer that Plan International is engaged in a community?

3.3 METHODOLOGY

The research team selected five development outcomes based on the availability of data in the child sponsorship surveys. These were: poverty; education; health; infrastructure (for water and sanitation); and psychosocial measures of wellbeing. Each of these areas map to one or more of the 17 SDGs.

Three datasets were used:

01 Plan International's existing child sponsorship data from the 12 million surveys, augmented with country-level data from external sources;⁶

02 data from a supplementary questionnaire devised by the research team in collaboration with Plan International staff with a focus on sponsorship and psychosocial wellbeing;

03 district-level data from the World Bank for a comparison site analysis in Malawi, Tanzania, Uganda and Vietnam.⁷

Datasets (i) and (ii) were analysed using a three-stage quantitative data analysis that considered development outcomes for a child living in a community where Plan International has sponsorship programmes. The team disaggregated the indicators for these outcomes by assigned and enrolled children, allowing differences to be detected.

Dataset (iii) assessed development outcomes at a district or commune level to test whether areas where Plan International is working are developing faster than areas where it is not.



A Plan International sponsored boy writes a letter to his sponsor (Togo).

(©Plan International)

6. These included three country-level variables: GDP per capita, from the World Bank; a governance index, also devised by the World Bank; and a conflict variable taken from the Uppsala Conflict Data Program, which defines a country as in conflict if it has experienced 25 battle-deaths a year.

7. Data were taken from the World Bank's Living Standards Measurement Surveys.



*A sponsored child
from Chadiza District
(Zambia).*
(©Plan International/
Niels Busch)

3.4 LIMITATIONS OF THE DATASETS

Data availability: Plan International's data only relate to sponsored children (both assigned and enrolled). Plan International does not collect data from non-sponsored children within the community or in comparable communities.

Response bias: The sponsorship study flagged the risk of respondents' bias in the survey responses, in that children or adults responding on their behalf could offer answers that they think Plan International would wish to hear. The research team uncovered a large bias in the supplementary questionnaire arising from adults replying on children's behalf about their wellbeing. However, for the analysis, the research team chose to rely only on a subset of data where children replied to the supplementary survey questions themselves.

Sample sizes in comparison sites: The comparison site analysis was subject to limitations due to small sample sizes of the comparison sites, and the problem of not being able to make a straight comparison between one site and another regarding Plan International's presence. Ideally Plan International's presence in a community would be the only differentiating factor between two sites being compared; however, this is unlikely to be the case.

Supplementary questionnaire data: Plan International's child sponsorship data and data from external sources as well as data for the comparison site analysis allow for analysis over time. However, the supplementary questionnaire data have only been collected in 2018 and therefore could not be used to detect changes over time in children's psychosocial wellbeing.

3.5 SPONSORSHIP STUDY – FINDINGS AND INTERPRETATIONS

This section presents the findings of the sponsorship study by each of the five development outcomes selected for analysis – poverty; education; health; infrastructure (for water and sanitation); and psychosocial measures of wellbeing. To situate the findings and their relevance in the broader development landscape, each of the five outcomes are introduced by way of the SDG to which they most closely relate.



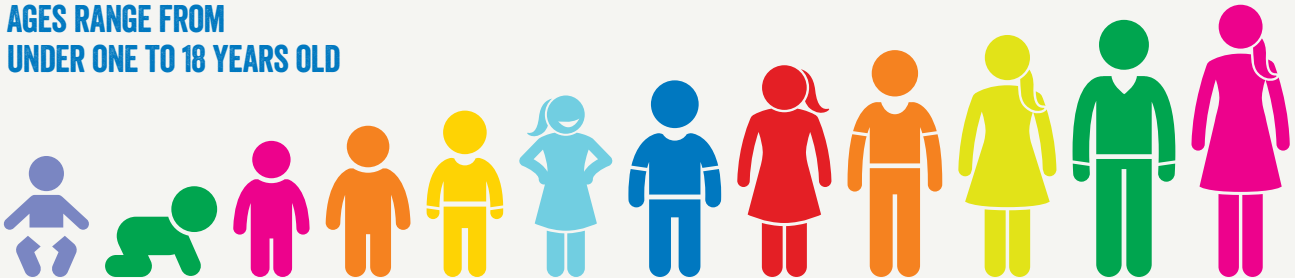
The section also describes the findings on these outcomes for conflict-affected areas, and briefly discusses those results that shed light on associations between the outcomes and Plan International's spending on and distribution of projects in sponsorship communities.

This condensed version of the sponsorship study describes the main findings in a non-technical, simplified way to ensure greater access to the content and its interpretation. This means that some of the more detailed nuances of the findings are not replicated in this version but the full statistical report by RMIT University is available here.

Findings always refer to children sponsored by Plan International unless otherwise stated and sponsorship always refers to sponsorship programmes run by Plan International.

SNAPSHOT OF CHILDREN IN THE PLAN INTERNATIONAL CHILD SPONSORSHIP SAMPLE

AGES RANGE FROM
UNDER ONE TO 18 YEARS OLD



±61% ARE GIRLS



90%+
ATTEND SCHOOL
AND HAVE HAD THEIR
BIRTHS REGISTERED

71%+
CAN ACCESS
IMPROVED WATER

54%
CAN ACCESS IMPROVED
SANITATION



±40%
ARE DEEMED
MULTI-
DIMENSIONALLY
POOR

>1%
REPORT A
DISABILITY

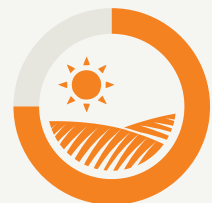


±75%
ARE ASSIGNED
CHILDREN



±25%
ARE ENROLLED
CHILDREN

>7%
REPORTED A HEALTH
ISSUE IN THE PAST
12 MONTHS



±70%
LIVE IN RURAL
AREAS



±5%
LIVE IN URBAN
AREAS



±25%
LIVE IN MIXED
URBAN/RURAL AREAS



SDG 1 is to “end poverty in all its forms everywhere”. Reflecting this SDG and its targets, the research team devised a new summary measure of poverty for sponsored children (SC-MPI). This was based on the multi-dimensional poverty index developed by the Oxford Poverty and Human Development Initiative (OPHI). The SC-MPI uses information on health, education and living standards from the Plan International child sponsorship surveys. Multi-dimensionally poor was defined as relating to a child’s health, schooling and living standards.

KEY FINDINGS ON POVERTY »

- Sponsored children are less likely to be poor every year, until they reach adolescence.
- 40 per cent of sponsored children are multi-dimensionally poor.
- Sponsored children with a disability are more likely to be poor and are more severely poor than those with no disability.

The analysis revealed that a child is multi-dimensionally poor in 40 per cent of the sponsorship survey responses. Because the SC-MPI is a new measure, it cannot be compared to other measures. Instead for context, the study notes that the World Bank estimates that around 10 per cent of the global population lived in income poverty in 2015, and the OPHI estimates that 26.5 per cent of people were multi-dimensionally poor in 2017 across 103 countries for which data are available.⁸

The 40 per cent figure from the sponsorship study therefore suggests that Plan International is being effective in its aim to target poorer children in its child sponsorship programmes.

The study found little difference in poverty levels between assigned and enrolled children. It noted that this finding could stem from Plan International’s drive to ensure that all children in a community should benefit from sponsorship programmes.

THE SPONSORED CHILD MULTI-DIMENSIONAL POVERTY INDEX (SC-MPI)

The research team created this index to provide two key pieces of information. First, whether the sponsored child is poor, based on whether they experience multiple deprivations. Second, what the intensity of their poverty is.

For the three main areas of health, education and living standards, the team created a set of 12 “child deprivation” indicators – for example, access to school, the vaccinations they have received, and the type of floor in the child’s home.

The thresholds for deprivation were derived largely from international standards such as the Millennium Development Goals. Each indicator is given a weighting. A child below the deprivation cut-off is deemed to be deprived for that indicator.

If the sum of a sponsored child’s weighted deprivations is 33 per cent or more of possible deprivations, they are considered to be “multi-dimensionally poor”. Intensity is a measure of the percentage of (weighted) dimensions in which the sponsored child is deprived.

So two sponsored children might both be classified as poor. However, one child might be experiencing a greater depth (that is, intensity) of poverty if they are deprived across a greater number of weighted dimensions.

See Appendix 3 in the full report for more details.

Disability, location and gender

Sponsored children living with a disability are more likely to be poor and are more severely poor than sponsored children who do not have a disability, according to the results.

Similarly, the findings showed that sponsored children who live in rural or mixed rural/urban areas experienced greater poverty compared to those in entirely urban areas.

Differences between the genders are less pronounced but are still noteworthy. The results showed that girls are slightly poorer than boys and are less likely to have access to improved sanitation.

8. World Bank (2018) Poverty and Equity Data Portal, Washington D.C.: World Bank, <http://povertydata.worldbank.org/poverty/home/>; OPHI (2017) *Global Multidimensional Poverty Index 2017*, Oxford, UK: Oxford Poverty and Human Development Initiative, University of Oxford, https://www.ophi.org.uk/wp-content/uploads/B47_Global_MPI_2017.pdf

Children's age and the duration of Plan International's work in communities

Age – specifically adolescence – was revealed as a turning point in the probability of a child becoming poor. All children in sponsorship programmes (assigned and enrolled) are, on average, shown to be less likely to be multi-dimensionally poor every year until they reach mid-adolescence – the age of 14 for girls and 15 for boys. At these ages, it is increasingly likely that children will become poorer.

The study noted that the reason behind this change was not apparent – whether it arises due to the variables included in the SC-MPI to measure poverty or because adolescents actually experience a decline in their quality of life after a certain age.

The amount of time that Plan International works in a community and the length of time that a child is in a sponsorship programme did not appear to influence multi-dimensional poverty significantly. While this appears disappointing on the face of it, the study notes that the finding could arise because the SC-MPI components may not always be factors that are targeted by Plan International's development programmes in a particular area.



Inclusive, quality education is the focus of SDG 4. The sponsorship study used three indicators to establish how sponsorship influences education outcomes among children. These were: whether children regularly attend school; whether a child has completed the right number of years of schooling for their age; and district-level school enrolment rates.

KEY FINDINGS ON EDUCATION »

- More children are attending school in sponsored communities than in non-sponsored communities.
- School attendance among sponsored children rises every year that Plan International runs sponsorship programmes in a community.
- Child sponsorship helps to increase school attendance by encouraging parents to register their children's births.



In broad terms, the study showed encouraging results on the influence of child sponsorship on education outcomes. The comparison site analysis showed that in most cases there was a higher rate of school attendance in areas where Plan International is running sponsorship programmes compared to areas where it is not present.

Furthermore, other findings showed that for every additional year that Plan International has supported a community through its sponsorship programmes, overall school attendance of sponsored children there increases by 2 per cent.

Birth registration and education

In many countries, including those countries where Plan International works, a birth certificate is required to enrol a child at school. Having a registered birth therefore improves a child's chances of accessing education.

Plan International encourages families to register a child's birth. The research team used two methods to analyse the links between birth registration, sponsorship and school attendance. Their results suggested that by encouraging birth registration, child sponsorship helps to increase school attendance.

Assigned vs enrolled differences

The study also found that a higher proportion of children assigned to a sponsor are attending school compared to those who are enrolled. This difference could be because having a sponsor may encourage school attendance in a way that being enrolled and awaiting a sponsor does not. Assigned children may be encouraged to go to school in the communications they have with their sponsors. Children who receive letters from sponsors were seen to have higher levels of school attendance.

The difference could also be related to the regular monitoring of assigned children that Plan International staff carry out as part of reporting back to the children's sponsors. Response bias could also play a part in producing the finding, with children or their parents reporting higher attendance because they know it is a sponsorship expectation.



Pupils waving at Plan-supported school (Timor-Leste).
(©Plan International)

Gender and disability

No significant difference was seen between assigned girls and assigned boys regarding school attendance. This could signal that sponsorship may benefit girls more, given that in most countries where Plan International operates, girls in general are less likely to attend school than boys.

However, the study found that attendance levels among children living with a disability are notably lower. More than 35 per cent of children living with a disability in sponsorship programmes are not attending school regularly.

As the study noted, this finding derives from a very small percentage of the child sponsorship sample – less than 1 per cent of the sample report that they have a disability. To put this small proportion into context, around 15 per cent of the global population has a disability, according to the World Health Organization (WHO).⁹

Age of children

Younger children seem to benefit more from being assigned to a sponsor in terms of school attendance levels than older children, according to the study.

Children who are assigned to a sponsor before they are six years old have a higher level of school attendance than those who are assigned after the age of six. Children are also more likely to be in school every year until the age of 10, when the probability of attending school begins to decrease, according to other findings in the study.

It recommended that Plan International ensure that activities to encourage school attendance continue beyond this point in age, so that older children complete their schooling.

Completion and quality

The child sponsorship data did not include measures of school completion, so the research team plugged this gap partially by including it in the supplementary questionnaire. The results showed no evidence of a link between a child being assigned to a sponsor and of completing school.

The study also highlighted that there was no mention of the quality of education in any of the data – despite this being a key plank of SDG 4.

9. WHO (2011) *World Report on Disability*, Geneva: World Health Organization, https://www.who.int/disabilities/world_report/2011/report/en/

BIRTH REGISTRATION AND BETTER DEVELOPMENT OUTCOMES

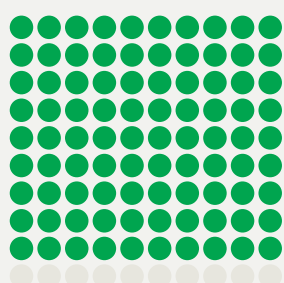
Mechanism

Birth registration is seen by the sponsorship study and by Plan International as a mechanism to promote better development outcomes such as access to better education, health and child protection. It is not viewed as a development outcome in itself.

Each sponsored child and their family are interviewed at the start of their engagement in Plan International's sponsorship programmes. At that time, families may be encouraged to register their children's births if they have not already done so.

Findings

The study's findings on rates of birth registration were overall encouraging, compared to global averages:



90%
OF CHILDREN IN
THE SPONSORSHIP
SAMPLE HAVE
HAD THEIR BIRTHS
REGISTERED



**AMONG SPONSORED CHILDREN,
GIRLS ARE MORE LIKELY THAN BOYS
TO HAVE THEIR BIRTHS REGISTERED
– BY COMPARISON, THE GLOBAL
FIGURES SHOW NO DIFFERENCE
IN INCIDENCE OF REGISTRATION
BETWEEN GIRLS AND BOYS.***



**ACCORDING TO
UNICEF* GLOBALLY
65%**
OF CHILDREN UNDER
FIVE HAVE HAD THEIR
BIRTHS REGISTERED

The study suggests that this finding on gender could reflect a **conscious effort by Plan International to register girls' births**, mindful that repercussions of non-registered births for girls can be severe. For instance, girls with no record of their birth would have less access to health and education, and be more vulnerable to early marriage and trafficking.

Influential aspects of sponsorship

A child being assigned to a sponsor has a slightly higher probability of having their birth registered, compared to a child who is enrolled, although the difference seen was small.

For every year that a child is assigned to a sponsor, the likelihood that their birth is registered increases, according to the results. These showed that for every year that a child is assigned to a sponsor, the chances that the child's birth is not registered falls by 1 per cent.

The younger a child is when she or he begins a sponsorship programme also improves their chances of having a registered birth. The findings showed that for a child who joined the sponsorship programme before the age of six, there was a 1 per cent fall in the probability of them not having a registered birth.

The rate of birth registration was also found to increase the longer that Plan International works in a community.

* UNICEF (2013) *Every Child's Birth Right: Inequities and Trends in Birth Registration*, New York: United Nations Children's Fund. Birth registration levels can vary enormously across countries.



Ensuring healthy lives and promoting wellbeing at all ages is the main aim of SDG 3. To measure health outcomes, the research team used birth registration and whether sponsored children have reported health issues within the past 12 months. It also did a comparison site analysis of district-level data on children who suffered sickness in the past 30 days and the percentage of children under five who received a measles vaccination.

KEY FINDINGS ON HEALTH »

- Most of the children in the sponsorship sample enjoy good health.
- Girls and boys both experience health benefits from sponsorship.
- Having a sponsor has a more positive impact on children's health in rural areas, compared to children in urban areas.

Health issues

Only 6.6 per cent of the sponsored child sample reported having a serious health issue in the past 12 months. This positive finding might stem from Plan International's commitment to follow up with children and families if the children are unwell.

However, small differences were seen between assigned and enrolled children, with assigned children appearing to report better health. Among the child sponsorship data sample, fewer assigned children (5.8 per cent) have reported serious health issues in the past 12 months than enrolled children (8.8 per cent). Supporting this finding, assigned children are also more likely to report feeling healthier than enrolled children when asked how they perceive their own health.

The sponsorship study asked whether this could be because assigned children are more likely to take part in sponsorship activities (or to take part in greater numbers), which may lead to more reports of better health.

Gender and health issues

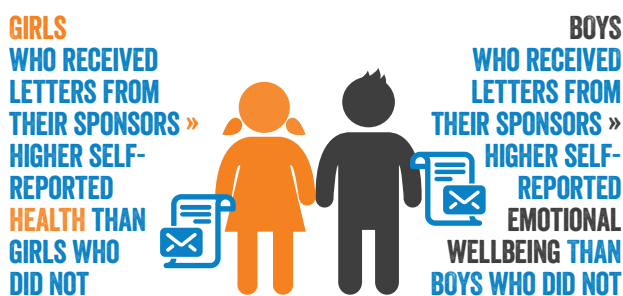
Overall, the results showed that both girls and boys experience health benefits, with neither gender appearing to benefit consistently more than the other.

Small differences were nonetheless found in reported serious health issues between girls and boys. The summary statistics of the child sponsorship data showed that slightly more boys (7 per cent) are likely to report a serious health issue relative to girls (6.3 per cent).

The study also found that the positive association between health and being assigned to a sponsor is less strong for assigned girls than for assigned boys.

Different age-related turning points were also found for girls and boys in reporting serious health issues. Boys are more likely to report serious health issues after the age of 16, while for girls this turning point is slightly later at 18 years.

Analysis of the supplementary questionnaire on communications with sponsors produced interesting results on children's perceptions of their health:



Location and disability

The research team looked at whether sponsorship has more of an impact on development outcomes for children in rural areas compared to urban areas. Health had the greatest difference among the outcomes when comparing rural and urban areas.¹⁰

The results from the main child sponsorship data analysis showed that health issues were more prevalent in rural/mixed communities than in urban communities (6.8 per cent reported health issues in rural/mixed areas compared to 2.7 per cent in urban).

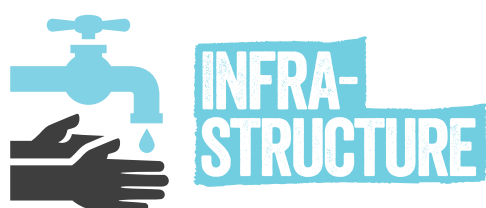
However, when the results were differentiated by whether a child was assigned to a sponsor or enrolled, this showed that health benefits were greater for assigned children in rural areas than in urban areas.

This difference in health benefits could arise because Plan International targets marginalised communities, often in rural areas, where health infrastructure is frequently poorer. In such contexts, interventions by Plan International would bring greater added value and thus have a noticeably larger impact.

10. The other outcomes were: not attending school, birth not registered, no access to improved sanitation, no access to improved water.

Children were also less likely to present health issues in communities where more health projects are being run. However, the comparison site analysis found few associations between Plan International's presence and the incidence of child sickness or access to improved sanitation.

Results showed that 23 per cent of children with a disability reported a health issue in the past 12 months. The study did not examine this finding further.



SDG 6 calls for access to clean water and sanitation for all people. The study used access to improved water and sanitation to measure sponsorship's impact on infrastructure, probing the child sponsorship data and the district-level data for a comparison site analysis.

KEY FINDINGS ON INFRASTRUCTURE »

- In most districts where Plan International runs sponsorship programmes, children have more access to improved water than in districts without sponsorship programmes.
- Children are more likely to have access to improved water and sanitation in communities where Plan International has worked for longer.
- Most sponsored children with a disability have access to improved water and sanitation.

There were broadly positive findings on access to improved water and sanitation. The comparison site analysis found improvements in access to improved drinking water sources¹¹ in districts where Plan International runs sponsorship programmes as compared to districts where it does not.

The longer that Plan International works in a community, the more likely it is that children have access to improved water and sanitation. This finding reflects the validity of the long-term, community-based development approach adopted by Plan International.

As the study notes, building the infrastructure needed for improving water supply and sanitation takes time.

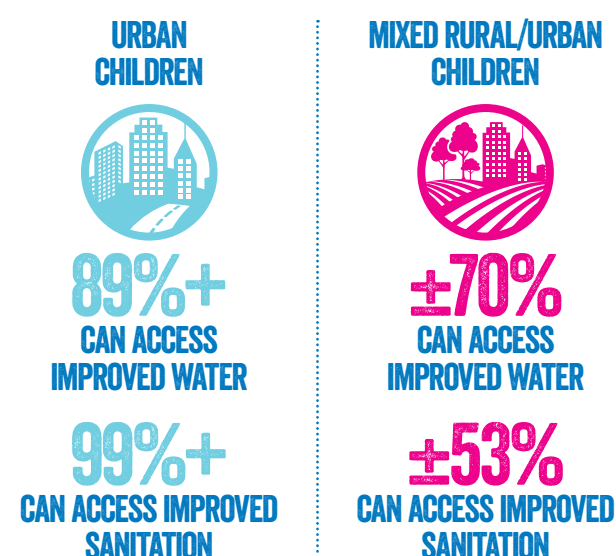
The overall findings seemed to confirm Plan International's priority to target poorer communities. These showed that 71 per cent of sponsored children have access to improved water sources. This compares to 91 per cent globally, according to WHO. For improved sanitation, 54 per cent of sponsored children have access, compared to 77 per cent globally.¹²

Gender, disability and location

Slightly more assigned children have access to improved water than enrolled children – 72 per cent compared to 69 per cent. The same emerged for access to improved sanitation – 55 per cent of assigned children, compared to 51 per cent of enrolled children. A higher proportion of boys (57 per cent) have access to improved sanitation than girls (53 per cent) but there was no significant difference between boys and girls regarding access to improved water.

Most children living with a disability have access to improved water and sanitation. More than 70 per cent of children living with a disability can access improved water and more than 60 per cent have access to improved sanitation, which was considered an encouraging finding.

Children in urban areas are more likely than those in rural areas to have access to improved water and sanitation. More than 89 per cent of urban children can access improved water and 79 per cent can access improved sanitation. For children in rural/mixed areas, the figures were almost 70 per cent and 53 per cent respectively.



11. According to the classification by WHO, improved drinking water sources include sources that are protected from outside contamination. This includes for example, piped water or protected wells and springs.

12. WHO (2015) WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply, Sanitation and Hygiene, WHO website, https://www.who.int/water_sanitation_health/publications/JMP-2015-keyfacts-en-rev.pdf?ua=1



The study examined the impact that sponsorship communications might have on psychosocial development outcomes for sponsored children. SDG 3 on health and wellbeing includes a target for mental health and wellbeing.

KEY FINDINGS ON PSYCHOSOCIAL WELLBEING »

- Having a sponsor and communicating with the sponsor is positively linked to children's development outcomes, especially their psychosocial wellbeing.
- Children who receive letters from sponsors have greater self-reported health, are more empowered, are more likely to belong to a social club, and have higher levels of school attendance.
- Sponsorship communications are linked to higher levels of emotional wellbeing in boys.

The main child sponsorship survey does not cover this area so Plan International did not have long-term data on this. The research team therefore created a supplementary questionnaire that would consider psychosocial wellbeing. The research team selected certain key development indicators for psychosocial wellbeing to help to frame their questions:



Children play game at school (Cambodia).
(©Plan International/Stephan Rumpf)

Measures of jealousy arising from not being assigned to a sponsor were also assessed, but separately, by asking children if sponsorship communications prompted feelings of sadness.

The supplementary questionnaire was conducted in 2018 in 49 countries where Plan International operates. All results were analysed but the study focused on a sub-sample of 6,112 children in 32 countries who answered the questions themselves rather than having an adult answer on their behalf. This was because a large bias was found where adults answered questions on wellbeing on the children's behalf.

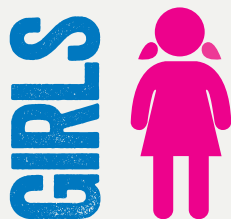
Overall, the findings suggested that children's engagement in Plan International's sponsorship activities – that is, being assigned to and communicating with a sponsor – has a positive and statistically significant relationship with development outcomes, especially psychosocial wellbeing. Children who communicate more with their sponsors were found to have more positive outcomes than those who did not.

Assigned vs enrolled – nuanced by gender

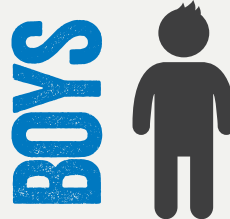
The findings revealed that assigned boys and girls are both more likely to report being healthier than those who are enrolled. Children who receive letters – as part of the usual communications connected to having a sponsor – have greater self-reported health, are more empowered, have higher levels of school attendance and are more likely to belong to social clubs overall than children who do not receive letters.¹³

A more nuanced picture of differences emerged once the assigned and enrolled children were differentiated by gender.

13. The study was careful to point out that these findings should not be interpreted as causal. The research team did not have time-series data needed to run realistic causality tests, whereby they could observe communications in a given time period and feelings of empowerment at a later date.



- Girls who receive letters have higher levels of self-reported health and are more likely to be in a social club than girls who do not receive letters. But those receiving letters have lower levels of school completion.
- Girls are more likely to receive a letter than boys – although this difference was only of two percentage points.
- When family members answered on girls' behalf, they describe the girls as faring consistently less well than boys across all indicators (except for empowerment and social clubs).



- Assigned boys reported a statistically significant higher level of emotional wellbeing than enrolled boys.
- Boys who receive letters are more likely to describe themselves as calm, happy and full of energy compared to boys who do not receive letters.
- When family members answered on boys' behalf, their wellbeing is also depicted as worse than the boys' own opinions of their wellbeing.

Following up on these findings, the study concluded that sponsorship communications and child monitoring could be mechanisms for raising boys' wellbeing.

Sponsorship communications and jealousy

Only a small percentage of sponsored children receive communications on a regular basis but most of those who do get a letter will respond. Around 8 per cent of children in the supplementary questionnaire sample received a letter and of those, 93 per cent replied.

To probe the possible influence that these communications may have, the research team tested if having contact with a sponsor produced feelings of jealousy. However, the team did not have data on non-sponsored children (that is, neither enrolled nor assigned), so could not gauge those children's feelings towards sponsored children in their locality. To work around this, the team created a proxy for jealousy using two variables: how far a child agrees with statement (i) "I am sad about having less contact with sponsors than other children"; and with statement (ii) "others are sad because of my contact with a sponsor".

Between 30 per cent and 35 per cent of children expressed sadness about having less contact with their sponsor than other children did with theirs. Approximately 35 per cent said that their interaction with a sponsor was making other children sad.

Those children who were sad about having less contact with their sponsor were also likely to have lower levels of emotional wellbeing. In light of these findings, the study suggested that Plan International could consider how expectations surrounding sponsorship communications are managed.



A young girl, 10, enjoys school where she is learning how to keep safe (Vietnam).
(©Plan International)

CONFLICT-AFFECTED AREAS

Part of the sponsorship study remit was to consider countries affected by conflict and by low levels of governance. Development outcomes are generally considered to be much harder to achieve in such places. The research team tested whether child sponsorship contributes less to development outcomes in conflict-affected areas – a hypothesis that will help to assess Plan International’s potential contribution to SDG 16 on peace, justice and strong institutions.¹⁴

Not surprisingly, conflict was associated with poorer development outcomes for children in sponsorship programmes. Access to improved sanitation and water was worse. Poverty – both its incidence and depth – was also worse.



Incidence of poverty among sponsored children is around 3 per cent higher in conflict-affected areas when compared to areas that are not affected by conflict. Poverty is less common and less acute in non-conflict areas. It would be fair to conclude therefore that sponsorship contributes less to development outcomes, in terms of poverty and infrastructure, in conflict-affected countries.

But sponsorship did appear to have a more positive influence on birth registration and school attendance in conflict-affected areas. For both, the results showed that sponsored children, and in particular those assigned to a sponsor, are more likely to be birth registered and more likely to stay in school in conflict settings when compared to enrolled children in the same settings.



Smiling boy at ECCD centre in Kibaha District (Tanzania).

(©Plan International)

PROGRAMME SPENDING AND PROJECT DISTRIBUTION

Plan International has a policy of targeting vulnerable children and communities in its sponsorship programmes. This approach may help to explain the handful of differing findings on programme expenditure and distribution of projects in relation to development outcomes.

The first of these findings is in relation to project spending and the number of projects in the areas of health. The analysis of child sponsorship data found that more spending on projects is associated with lower rates of birth registration, but at the same time having a greater number of projects is associated with children being less likely to present health issues. This could reflect a need to have a range of different projects in communities to tackle health issues.

In education, an opposite pattern emerged. More spending on projects is associated with higher school attendance levels. But, at the same time, children are less likely to attend school in communities with a greater number of projects, the analysis showed. This could suggest that in order to boost school attendance levels, what counts is having well-funded projects, rather than lots of them.

These apparently opposite patterns that emerged through the study suggest that Plan International might need to understand more about the nature, type and scope of projects and the project outcomes themselves.

14. See section 5 in the study for the separate hypotheses considered. Findings from the other three hypotheses on girls, rural areas and duration of engagement have been included in this condensed version under the main outcomes (poverty, education, health and infrastructure).

SUMMARY OF KEY FINDINGS BY THEME

Sponsorship programmes and activities were linked to many positive development outcomes, according to analysis of the child sponsorship dataset, the supplementary questionnaire data and the comparison site analysis. But the research team did not interpret the findings reached as causal, and significant differences did emerge across the outcomes.

KEY MECHANISM

Sponsorship helps to increase school attendance by encouraging birth registration. Children who have a sponsor are more likely to be registered at birth and also more likely to attend school.

COMMUNICATIONS

Sponsorship communications are positively associated with better self-reported health, emotional wellbeing and more involvement in social networks.

AGE

Younger children benefit more from sponsorship than older children. Adolescence is a turning point when positive development outcomes begin to change, notably on poverty, health and school attendance.

GENDER

Sponsorship brings benefits for both girls and boys, particularly on education. Differences do exist, however. Girls benefit more in terms of birth registration, and boys slightly more on health and levels of poverty.

LOCATION

Sponsorship brings more health benefits for children in rural areas than for children in urban areas. In conflict settings, children with sponsors are more likely to be birth registered and more likely to stay in school compared to enrolled children.

ASSIGNED VS ENROLLED

Assigned children were more likely to report better health, have higher levels of school attendance, slightly more access to improved water and sanitation, and slightly better psychosocial wellbeing.

DISABILITY

Sponsored children with a disability are more likely to be poor than those with no disability. Most children with a disability have access to improved water and sanitation.

PLAN INTERNATIONAL'S PRESENCE

Most sponsored communities see improvements in access to improved water sources and had higher levels of school attendance compared to communities where Plan International does not run a sponsorship programme.

DURATION OF INVOLVEMENT

School attendance, birth registration and access to improved water and sanitation all improve the longer that Plan International is working with a sponsored community.

PROGRAMME FUNDING AND DISTRIBUTION

Well-funded projects, rather than larger numbers of them, were linked to higher levels of school attendance. But areas with more projects saw children with fewer health issues. Spending patterns reflected Plan International's policy of targeting poorer communities.



3.6 IMPLICATIONS AND RECOMMENDATIONS FOR PLAN INTERNATIONAL'S WORK

The sponsorship study findings were in many cases driven by identifying differences in development outcomes between assigned and enrolled children. Other gaps worthy of attention emerged in outcomes for sponsored children in relation to factors such as age, disability and the length of time that Plan International runs sponsorship programmes in a community.

These gaps and differences shaped the study's formal recommendations for Plan International's future work.

DATA COLLECTION AND RESEARCH

The child sponsorship dataset was described as a wealth of valuable information that merited further exploration in different ways. The research team noted that it had focused on average associations across the 50 countries in which Plan International works.

RECOMMENDATIONS »



- *Plan International should use the child sponsorship dataset more to inform its programmes and to answer questions of importance for the organisation.*
- *Country-level analysis should be undertaken given that outcomes are likely to vary significantly across and within countries.*

A control group that would ideally consist of non-sponsored children (that is, neither assigned nor enrolled) who live in the same communities where Plan International sponsorship programmes take place would have strengthened the study.

RECOMMENDATION »



- *Plan International should collect data on non-sponsored children in the communities where it works to provide a fuller picture of the impacts of sponsorship.*

The study also pointed to other areas for further data collection and data-driven research.

RECOMMENDATIONS »



- *Given that Plan International expects the whole community to benefit from development interventions, more attention should be paid to why assigned children are sometimes associated with better development outcomes than enrolled children.*
- *To facilitate better ongoing assessment of programmes, Plan International should continue to use the supplementary questionnaire. Doing so would provide high-quality panel data for testing Plan International's programme theory and for determining the impacts of sponsorship on psychosocial wellbeing.*

SUBSIDIARY DATA-RELATED SUGGESTIONS

- **Health:** Plan International should collect anthropometric data (for example, height and weight measurements) from sponsored children, to detect stunting and malnutrition – both detrimental to child development if suffered during the early years. This suggestion arose from the reflection that there were other targets within SDG 3 to which Plan International may be contributing but which are not being measured. The study also noted that having objective measures of child health would be important if there is reporting bias on health and wellbeing by sponsored children and/or their family members.
- **Education:** Plan International staff should monitor school completion and achievement, not just attendance. This suggestion stemmed from the reflection that there was no evidence to show that being assigned was associated with school completion, and that education encompassed more than attendance alone. The study also noted that for Plan International to show true commitment to SDG 4, more attention would need to be given to measuring the quality of education – a difficult task, it acknowledged.
- **District-level outcomes:** Plan International should do further, qualitative research in districts to determine the factors behind the biggest declines and improvements in development outcomes. This suggestion arose from the comparison site analysis that found large differences in development outcomes and their changes across districts.

Age and adolescence

In the areas of multi-dimensional poverty, education and health, the research team found that positive development outcomes change as children get older. The period around adolescence was found to be a turning point at which children's wellbeing improved at a decreasing rate until their late teens when overall declines began to be seen. Sponsored children were less likely to be classified as multi-dimensionally poor until the age of 14, when the probability began to increase. They were less likely to be out of school every year until they reached 10 years old, at which point that likelihood began to rise. They were less likely to present health issues until the age of 17, after which that probability began to rise.

RECOMMENDATION »



- *Plan International should provide or enhance programmes to identify and help vulnerable teenagers to ensure that wellbeing outcomes are sustained as children transition into adulthood.*

Sponsorship communications

A low level of communication from sponsors to sponsored children was noted. This minimal communication could help to avert jealousy among children in a community without a sponsor. But the study also warned that it could produce negative feelings among assigned children who are expecting more contact than receiving and replying to a welcome letter. This was especially pertinent because the study has shown that there is a positive relationship between communications and development outcomes.

RECOMMENDATIONS »



- *Plan International should devise a policy that specifies expectations over letter-writing and receiving gifts, aimed at both sponsors and the children they are sponsoring.*
- *To prevent inevitable negative feelings arising in communities where some children but not all are receiving letters and gifts, Plan International could consider adopting a "community sponsorship" model.*

Disability and poverty

The child sponsorship data showed that children living with a disability were considerably under-represented in the Plan International sponsorship sample. Less than 1 per cent reported having a potential disability, while 15 per cent of the global population have a disability.¹⁵

RECOMMENDATION »



- *In light of this, the study strongly recommended that Plan International begin to prioritise children with a disability as participants in sponsorship programmes.*

Examining how, when and why children move in and out of poverty in specific communities could be highly useful for Plan International, it was suggested. The study noted that the multi-dimensional poverty index (SC-MPI) created by the research team included indicators on which Plan International activities are unlikely to have a direct impact, such as housing materials and cooking fuel.

RECOMMENDATION »



- *The study recommended that Plan International refine the SC-MPI so that it better reflects those aspects of child poverty on which the organisation can have an impact.*

15. WHO (2011) *World Report on Disability*.



Children have more time for school since the water pump was installed (Philippines).
(©Plan International)

4. PLAN INTERNATIONAL'S **RESPONSE** TO THE SPONSORSHIP STUDY FINDINGS AND RECOMMENDATIONS

Plan International's new global strategy "100 Million Reasons" and the new global campaign "Girls Get Equal" both demonstrate the emphasis that we place on gender equality. The strategy underscores a set of organisational values that we adhere to, with transparency and accountability at its core.

This study into the influence of our sponsorship model on development outcomes for sponsored children and communities offers us the chance to delve deeper into some of the developmental issues that we are committed to improving. By publishing the results of the study – both in this condensed format and in the full version available online – we aspire to be more accountable to the sponsored children, their communities and the sponsors.

We are happy to accept the sponsorship study's findings and recommendations as a reliable source of evidence about the influence of Plan International's sponsorship model. Overall, we believe that the study and its findings signal how Plan International is progressing towards becoming an organisation that continuously improves based on evidence.

While some of the findings demonstrate that our sponsorship model has contributed to improved development outcomes, we acknowledge that we are not always as successful as we aim to be. Therefore, we must also use those findings that highlight gaps and shortcomings as a catalyst to inform how we take action to improve our work for all sponsored children, and especially for girls.

This requires a multi-faceted approach. We will revisit the work we do in multiple areas through which we engage with sponsored children and communities. This includes sponsorship operations, programme delivery and influencing and advocacy. For example, in relation to the differing patterns found with regards to the influence of project spending and the number of projects on development outcomes, we will need to do more to understand better how projects are implemented and received, and how to improve measurements.

We have just celebrated 82 years of existence. All through those 82 years, sponsorship has been at the heart of Plan International's work. It resonates with current and former generations of sponsors, sponsored children and Plan International staff across the world. Over this time, our sponsorship model has allowed us to build trust and long-term relationships with sponsored communities. This has given us firm foundations from which to work on the developmental needs of individual communities and children.

Our sponsorship model has evolved during this time, adapting to a modernised development aid sector in order to provide more appropriate and relevant interventions for those with whom we work. The findings of the sponsorship study will be part of this process of evolution and will enable us to shape a vision for the future of Plan International's sponsorship model.

In light of the study findings and recommendations for improving sponsorship and sponsorship communications, we commit to:

- *review the sponsorship promise and commitments to sponsors, sponsored children, their families and communities;*
- *develop a vision for the future of sponsorship in Plan International that builds on the findings from 12 years of sponsorship data.*

We want to optimise the benefits of being sponsored. For example, we will look closely at the call to prioritise children living with a disability as participants in our sponsorship programme in order to better reflect the world's child population who live with disabilities.

Our strategy envisages a world where girls can learn, lead, decide and thrive. It expands our mandate beyond the age of 18 years to include issues affecting youth, especially young women. Accordingly, it is important to recognise that the study has highlighted that development outcomes decrease as children reach adolescence and get older. It is widely known within the development sector that adolescents, and especially girls, face unique barriers to their opportunities. Nonetheless, it is noteworthy that these barriers also affect sponsored children.

Therefore we commit to:

- *look more closely at the nuances of programming across different age cohorts;*
- *we will address issues affecting sponsored children as they reach adolescence so that the benefits they gain in their early years are not lost;*
- *we will work to ensure that these are sustained and enhanced through adolescence into adulthood.*



In light of the study findings and recommendations for enhanced programming work with sponsored children and communities, we commit to:

- *use sponsorship data and strategic learning to closely monitor the wellbeing of sponsored children, especially adolescents, to identify gaps in current programming;*
- *use the newly generated evidence and knowledge to deliver appropriate development programmes to sponsored children and communities, and consider more specialised programming for adolescent children whom the study found need more support;*
- *include sponsored children in our global campaign activities to empower sponsored adolescents, especially girls.*

We aim to continuously improve our work for children based on high-quality evidence. We therefore affirm the sponsorship study's recommendations on improved data collection and use. These note how we can improve our use of evidence from the sponsorship dataset in order to make better results-based decisions for our programmes, and to contribute to a data-driven development sector that can show progress towards the SDGs.

In light of the study's recommendations for improved data collection and use, we commit to:

- *develop a research programme that plans for further sponsorship data analysis, such as follow-up studies to RMIT University's work, including a country-level analysis to reflect the wide variations among countries instead of average associations;*
- *revise the sponsorship questionnaire in a way that allows Plan International to collect more meaningful and high-quality data in order to monitor our influence and progress in the areas of health, education and empowerment;*
- *explore research partnerships to optimise the use of the sponsorship data for learning linked to the progress of the SDGs.*

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The condensed sponsorship study report has been written and abridged by Anna Brown, based on the full study.

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About Plan International

Plan International is an independent development and humanitarian organisation that advances children's rights and equality for girls. We strive for a just world for children and young people, working with them and our supporters and partners to tackle the root causes of discrimination against girls, exclusion and vulnerability.

We support children's rights from when they are born to when they reach adulthood. Using our reach, experience and knowledge, we drive changes in practice and policy at local, national and global levels and enable children and young people to prepare for and respond to crises and adversity. We have been building powerful partnerships for children for over 80 years, and are active in more than 70 countries. We are independent of governments, religions and political parties.

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Children pictured in the report provided consent to do so.
Not all children pictured in the report are necessarily
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