



How parenting interventions can address child labour in cocoa communities

Evidence from *a Families Make the Difference* intervention in Côte d'Ivoire

November 2025



International
COCOA
Initiative

Context and background

Although progress has been made in recent decades to reduce child labour prevalence worldwide, children's exposure to harmful work remains a persistent challenge. Child labour is most commonly found in agriculture, and the cocoa sector is no exception. In Côte d'Ivoire and Ghana, 1.56 million children aged 5-17 were estimated to be involved in cocoa-related child labour in 2020, representing 45% of children living in agricultural households in cocoa-growing areas.¹

Recognising that 95% of child labour cases in cocoa happen in a family context,² the International Cocoa Initiative has drawn on insights from child development science to better understand the factors that protect children from child labour and the harm it can cause.³ Evidence from ICI's research highlights that **promoting safe, stable and nurturing relationships around the child and strengthening parental skills are central to tackling child labour effectively**.

The “Families Make the Difference” intervention at a glance

In this context, ICI partnered with Nestlé to pilot a parenting skills programme called *Families Make the Difference* (FMD) in 11 cocoa-growing communities covered by a Child Labour Monitoring and Remediation System (CLMRS) in Côte d'Ivoire, between June and August 2024.

The *Families Make the Difference* curriculum was developed by the International Rescue Committee to help caregivers create a safer and more nurturing environment for their children. The curriculum covers topics such as positive parenting, communication, child development, and non-violent discipline, delivered over 11 sessions. Training is combined with parent support groups, where caregivers can share experiences. The programme has been tested in many different contexts, but to our knowledge, this is the first time its impact on child labour has been evaluated in a context of smallholder agriculture.

In ICI's pilot, 25 couples in each community were invited to join the *Families Make the Difference* sessions. The sessions were facilitated by CLMRS personnel, previously trained by the International Rescue Committee. In addition to leading the workshops, these facilitators also raised awareness among non-participating households within the intervention communities, using key messages from the *Families Make the Difference* curriculum to promote positive parenting practices more widely.



I used to punish my children. Now, I apply what I learned in the training. I tell them stories and legends. Today, there is harmony in my home. The programme gives us the opportunity to educate our children well.

Female FMD participant

¹ Assessing Progress in Reducing Child Labor in Cocoa Production in Cocoa Growing Areas of Cote d'Ivoire and Ghana, NORC, 2020

² Assessing Progress in Reducing Child Labor in Cocoa Production in Cocoa Growing Areas of Cote d'Ivoire and Ghana, NORC, 2020

³ What makes child labour harmful and what it means for the cocoa sector?, International Cocoa Initiative, 2023

Evaluation methodology

The evaluation aimed to assess the effects of the *Families Make the Difference* intervention on caregivers' knowledge of parenting practices, caregiver-child interactions, parental violence, child labour, and child well-being.

To measure these effects, we compared the situation in targeted communities before and after the parenting programme was implemented, as well as in a comparison group. Baseline data was collected in January 2024, and endline data in January 2025.

The study was conducted in 13 communities covered by a CLMRS: *Families Make the Difference* was conducted in four (the treatment group), while nine communities served as the control group. Within the treatment communities, 25 couples were invited to participate in the *Families Make the Difference* sessions, resulting in a mix of households that took part in the programme and others that did not.

The demographic characteristics of the treatment and control groups were comparable at baseline. A panel of 559 randomly selected caregivers and their 665 children aged 5–17 years were surveyed at both points in time.

A causal analysis was carried out to estimate the impact of the *Families Make the Difference* programme, comparing changes in key indicators between treatment and control groups over time.

Results

Attendance

Out of the 148 households in the treatment group, **just over half (52%) had at least one caregiver attend** one *Families Make the Difference* session. However, participation varied considerably across communities: in some communities, the majority of caregivers interviewed took part, while in others, under half participated. Men and women were equally likely to attend at least one session, but women participated more regularly and were more likely to complete the full programme.

Impact on the household environment

Improved knowledge

Caregivers in the treatment group significantly improved their knowledge about parenting and child development compared to the control group. Women's knowledge gains were larger than men's, with increases of 84 and 62 percentage points, respectively, compared to their counterparts in the control group.

More caregiver-child interactions

Interactions between children and caregivers, for example, talking, reading, playing or doing schoolwork together, increased amongst those in the treatment group, both according to adults and children. Children in these communities reported a 25% increase in interactions with their caregivers from baseline to endline, compared to the control group. This increase was greater amongst female caregivers. However, this doesn't mean that these interactions were necessarily positive; for instance, some may have involved negative behaviours, such as parents hitting children during homework or chores.



The programme taught me the importance of talking with my children to understand their needs, to follow their schoolwork, and not to hit them. It also taught me that when children come with us to the farm, they should only help with small tasks, like bringing water or placing seedlings.

Female FMD participant

No change in violent discipline

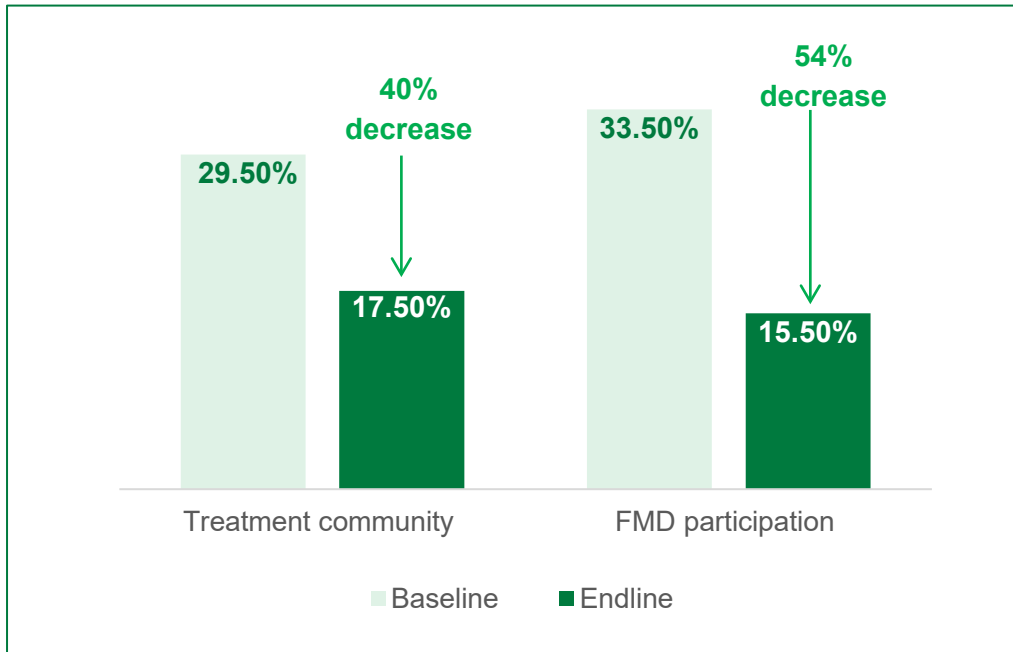
Adults in the treatment group reported using violent discipline less often compared to the control group. However, children's reports did not confirm this trend, possibly reflecting social desirability bias in adult reporting.

Impact on child labour

Significant decrease in hazardous child labour

The *Families Make the Difference* parenting skills program significantly reduced the prevalence of hazardous child labour. Hazardous child labour decreased by 40% in treatment communities. The effect was even stronger among children whose parents attended FMD sessions, with a 54% reduction. The 40% reduction in treatment communities may indicate a spillover effect, potentially linked to parallel awareness-raising activities with non-participants and the sharing of key messages by participants within their communities.

Prevalence of hazardous child labour in treatment communities and among households that participated in *Families Makes the Difference*

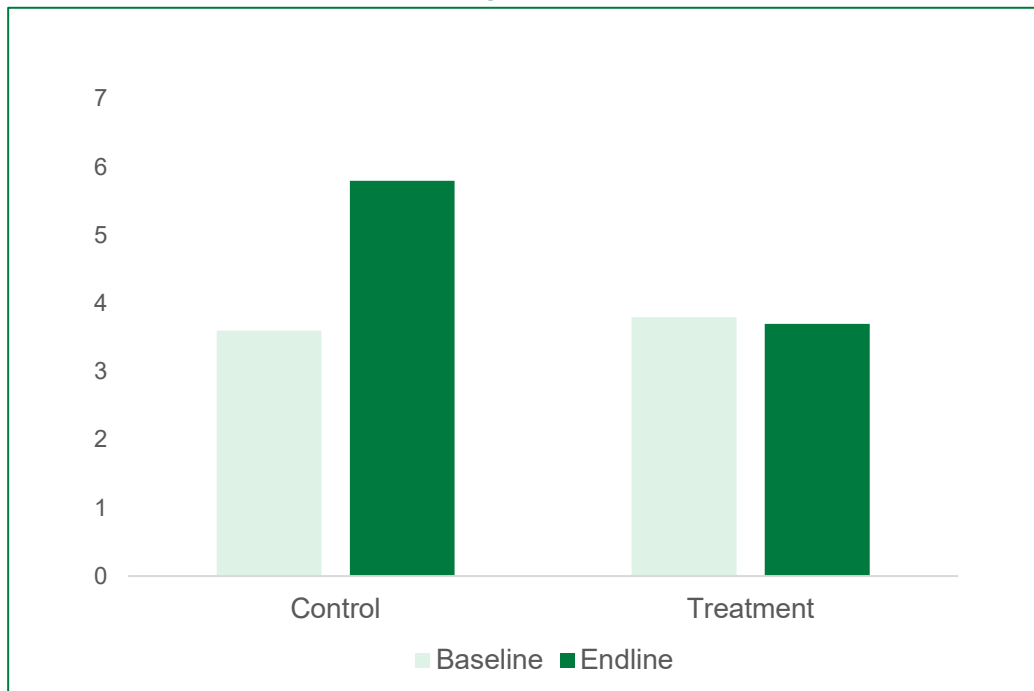


Importantly, this effect was independent of children's attendance at school, suggesting it resulted from changes within the child's immediate household environment. In fact, data suggest that households where caregivers reported more positive caregiver-child interactions also saw larger decreases in hazardous child labour.

Decrease in hours worked

Children in the treatment group worked fewer hours per week at endline compared to baseline, while working hours increased significantly among children in control communities. Overall, this represents a difference of about 2.4 hours per week between the two groups from baseline to endline, suggesting that the FMD programme helped prevent the rise in children's working time observed in control communities. As with hazardous child labour, this effect is independent of access to school, suggesting that the decrease in working time is a direct result of changes to the child's immediate environment.

Hours worked in control and treatment groups



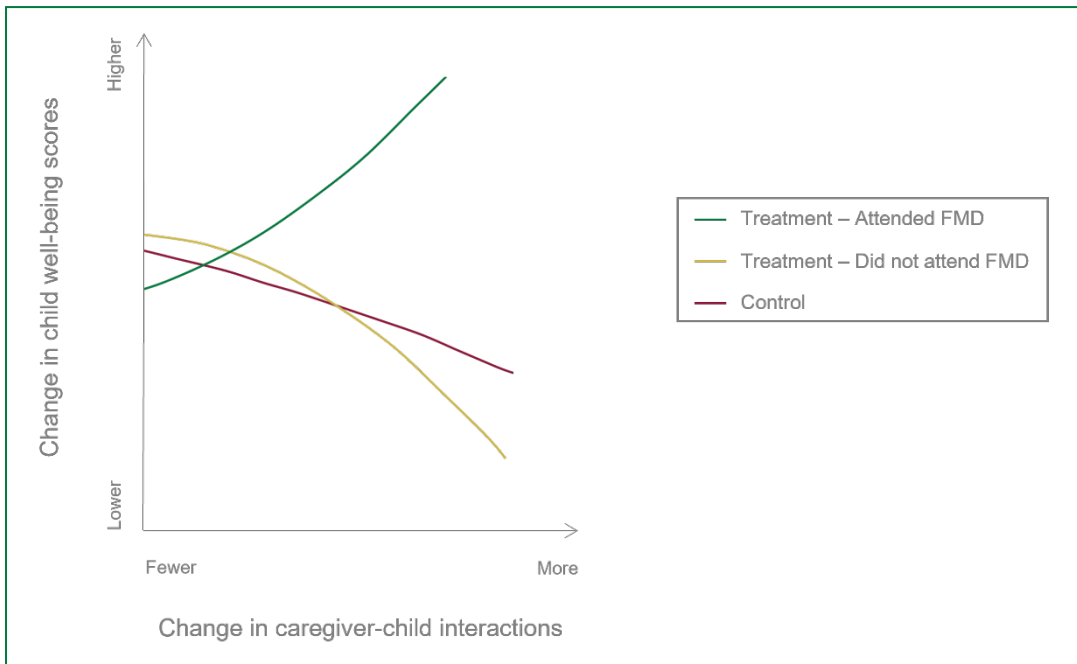
Impact on child well-being

Children's well-being decreased in both control and treatment communities, with a larger decline in the treatment group, particularly among girls. This finding is unexpected, as reduced exposure to hazardous child labour observed in the treatment group would typically be associated with improved well-being. This suggests that other factors may have contributed to this decrease.

A contributing factor for this trend is that violence by teachers increased in the *Families Make the Difference* communities during the intervention period. The share of children reporting being beaten by their teacher rose significantly within the treatment group, especially when compared to the control group. This contributed to lower well-being scores, offsetting some of the positive effects of reduced hazardous work.

Another contributing factor relates to differences in caregivers' participation in the *Families Make the Difference* sessions. For children whose caregivers attended the *Families Make the Difference* sessions, more frequent interactions were linked to higher well-being, suggesting that caregivers applied the positive parenting skills they had learned through the programme. In contrast, for children whose caregivers did not participate, both in control and treatment communities, more frequent caregiver-child interactions were associated with lower well-being, suggesting that these interactions may have included negative or harsh behaviours.

Relationship between changes in caregiver-child interactions and child well-being



The figure above shows how changes in caregiver-child interactions between baseline and endline relate to changes in children's well-being over the same period. For children whose caregivers attended the *Families Make the Difference* sessions, increases in caregiver-child interactions were associated with improvements in well-being. In contrast, for non-participants, more frequent interactions were associated with lower well-being.



What I appreciated most about the programme was learning about empathy, how to play with children, share responsibilities at home, and build harmony and understanding within the couple.

Female FMD participant

Key takeaways

- **The *Families Make the Difference* parenting skills programme strengthened caregivers' knowledge and practices.** Caregivers in treatment communities, especially women, significantly improved their understanding of parenting skills and child development compared to those in control communities. These knowledge gains were accompanied by an increase in caregiver-child interactions in the treatment group.
- **The programme significantly reduced hazardous child labour.** The prevalence of hazardous child labour decreased by 40% across treatment communities, and by 54% among children whose caregivers attended the *Families Make the Difference* sessions.
- **The programme protected children from increases in working hours.** While children in control communities worked more hours at endline, children in the *Families Make the Difference* communities worked slightly fewer hours. The programme appears to have had a buffer effect, protecting children in treatment communities from any increase.
- **Mixed results on children's well-being.** Contrary to expectations, children's well-being scores declined overall in both treatment and control groups, with a larger decrease seen in treatment communities. While children whose caregivers attended the sessions reported improved well-being, we see the opposite trend for children whose parents did not attend, both in treatment and control communities. During the same period, children reported increased teacher violence at school, a factor related to lower well-being among children.

Recommendations

- **Scale up the *Families Make the Difference* programme to reach more parents and caregivers.** The reductions in hazardous child labour and children's working time suggest that the *Families Make the Difference* should be replicated and integrated into broader programmes addressing child labour. Furthermore, the positive feedback from participants, including great appreciation for the sessions and requests for more, highlights the programme's relevance for scale-up.
- **Expand reach and participation.** Running multiple *Families Make the Difference* groups per community could help reach more households and foster broader participation.
- **Go beyond caregivers to include teachers too.** The mixed results on children's well-being highlight the need to also consider the environment at school, which is also an important influence on children's well-being. Integrating a component for teachers, for example, focused on positive engagement and non-violent discipline or involving school management committees (COGES) in the *Families Make the Difference* sessions, could help reduce violence by teachers towards pupils and discourage teachers from asking children to do hazardous work at school.
- **Link with other programmes.** To maximise its contribution to children's well-being, *Families Make the Difference* could be linked more intentionally with other interventions tackling child labour and strengthening child protection, such as Child Labour Monitoring and Remediation Systems. Closer alignment between these initiatives would promote coordination between household and community-level actions, ensure coherent messaging, and reinforce the impact of *Families Make the Difference* through complementary support services.