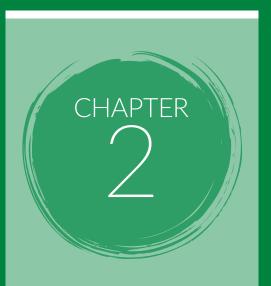
CHILD PROTECTION



Ch*IdFund_®

THE CHALLENGE

50% of children experience violence each year.

Data from the United Nations Children's Fund (UNICEF) highlight the pervasiveness of violence against children (VAC) around the world. Globally, three in four children aged 2 to 4 experience some form of violent discipline on a regular basis. 1 in 2 children under age 5 are living with a mother who is a victim of intimate partner violence². For older children, adolescents, and youth, the recent *Global status report* on preventing violence against children 2020³ shares that, worldwide, one-third of students (ages 11 to 15) have been bullied by their peers during the past month — and for girls and young women (under age 20), 120 million have experienced some type of forced sexual contact.

Individual children may experience multiple types of violence simultaneously and at different stages along the life course. And, the estimated economic damage of physical, psychological and sexual violence alone is in the magnitude of \$7 trillion, up to 8% of global GDP⁴, making VAC one of the leading burdens on the global economy.

⁴ Pereznieto, P., Montes, A., Routier, S. & Langston, L. (2014). The costs and economic impact of violence against children. New York: ChildFund Alliance and Overseas Development Institute (ODI).



¹ Hillis, S., Mercy, J., Amobi, A., & Kress, H. (2016). Global prevalence of past-year violence against children: A systematic review and minimum estimates. Pediatrics, 137 (3), 1–13.

² United Nations Children's Fund (UNICEF) (2017). A familiar face: Violence in the lives of children and adolescents. New York: Author.

³ World Health Organization (WHO) (2020). Global status report on preventing violence against children 2020: executive summary. Geneva: Author.



OUR GLOBAL PROGRESS

On a promising note, well-designed programs⁵ have achieved violence reductions of 20-50%. As part of our *Destination 2020* strategy, we used the results of our community-based child protection (CBCP) mapping to better understand the protection harms, risks, and needs within specific communities. In turn, our country offices and their local partners integrated this contextual understanding of child protection issues at the home, school, and community levels into their programs.

ChildFund's child protection-targeted programs address children's protection needs across the life stages. Parents and caregivers are supported to develop responsive and protective parenting practices to create safe homes in which infants and young children can thrive. Our programs also educate children and youth, parents, teachers and community members to recognize, report, and speak out against violence in all of its forms. Communities are then empowered to question cultural norms that perpetuate, justify, and normalize violence against children, and provide safe places to learn and play outside of the home and school — in the community and during humanitarian emergencies.

This chapter shares both the progress we see in our global M&E data and our programming evidence in keeping vulnerable children safe.

Although there is still room for positive change and sustainability, we see progress on some of our global M&E child protection indicators and data. This change is particularly seen in caregiver, child, and adolescent/youth perceptions of community safety and their knowledge of where to report harms. Although we cannot, overall, directly attribute this change to our programs, we can see through our programming evidence (see Section 3 below) how our programs have positively contributed to enhancing child safety in the home, school, and community.

⁵ World Health Organization (WHO) (2020). Global status report on preventing violence against children 2020. Geneva: Author.

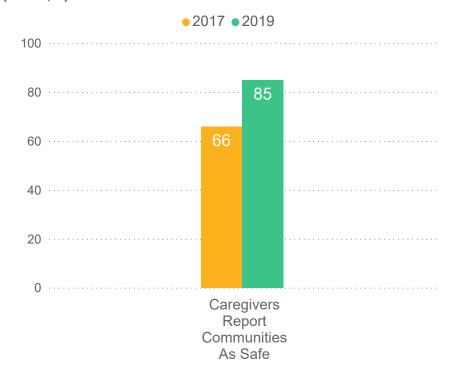
Perceptions of Community Safety

In 2017 and 2019, through our global M&E data collection, we asked caregivers if their community is a safe place for children. We posed a similar question to children 6-14 years of age and youth over 14 years to ascertain their perceptions of community safety.



Globally, from 2017 to 2019 (see Figure 2-1), we saw positive changes in caregiver perceptions of their community being safe for children often or sometimes — with an increase of 19% for caregivers (see Figure 2-1).

Figure 2-1. Caregiver Perceptions of Community Safety: 2017 vs. 2019 (Global, %)



^{* 2017 - &}quot;Safe" = Safe always/most of the time/some of the time; 2019 - "Safe" = Safe always/ sometimes/often

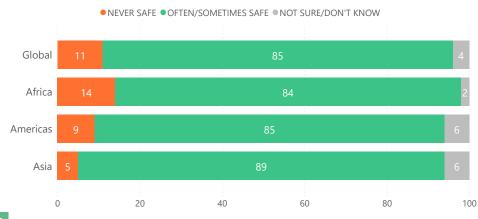


Caregivers

Globally, 85% of caregivers felt that their community was often or sometimes safe; 11% felt that it was never safe (see Figure 2-2 below).

- 84%, 89%, and 85% of caregivers in Africa, Asia, and the Americas, respectively, felt that their communities were often or sometimes safe for children.
- 14% of caregivers in Africa, 9% in the Americas, and 5% in Asia reported that their communities were never a safe place for children.

Figure 2-2. Percentage of Caregivers Reporting Community as Safe: 2019









"I became a child advocate in my community," says an adolescent girl who survived sexual harassment at the hands of a teacher — then **used** her experience to help others. "These dialogues are helping me to be **bold** and fearless. Now I have the courage and confidence to speak among elders. Now, I am a no-nonsense girl when it comes to reporting issues of abuse." — Adolescent girl, participant in our Sexual and

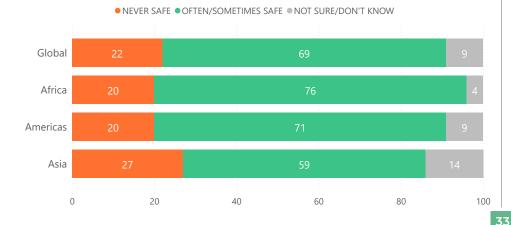
Gender-based Violence project. Read more here.

Children

Globally, 69% of children felt that their communities were often or sometimes safe (68% of girls and 69% of boys); 22% of children reported that their communities were never safe (see Figure 2-3).

- 76%, 59%, and 71% of children in Africa, Asia, and the Americas, respectively, felt that their communities were often or sometimes safe for children.
- 20% of children in Africa and the Americas, and 27% in Asia, believed that their communities were never safe places for children.

Figure 2-3. Percentage of Children Reporting Community as Safe: 2019

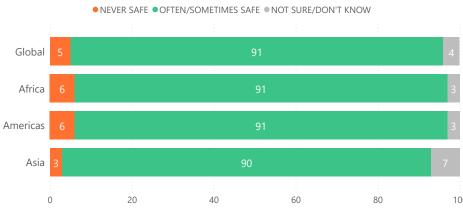


Youth

Youth had higher perceptions of community safety relative to caregivers and children (see Figure 2-4), with 91% of youth feeling that their communities were often or sometimes safe (89% of girls and 93% of boys). Only five percent reported their community as never safe for children.

Regionally, 91%, 91%, and 90%, of youth in Africa, the Americas, and Asia respectively, felt that their communities were often or sometimes safe for children

Figure 2-4. Percentage of Youth Reporting Community as Safe: 2019





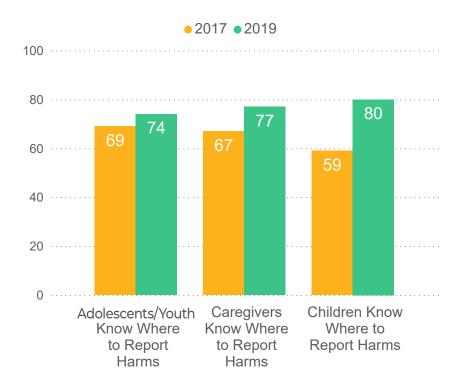
Reporting Harms

We asked caregivers of children under the age of 5, children aged 6-14, and youth over 14 years whether they feel comfortable telling someone if they knew something bad was happening to a child, if they know where or to whom they could report, and whether they would get help.



From 2017 to 2019 (see Figure 2-5), we saw positive changes in caregiver, child, and adolescent/youth knowledge of where to report harms if they knew something bad was happening to a child — with increases of 10% for caregivers, 21% for children, and 5% for adolescents/youth.

Figure 2-5. Knowledge of Where to Report Harms: 2017 vs. 2019 (Global, %)



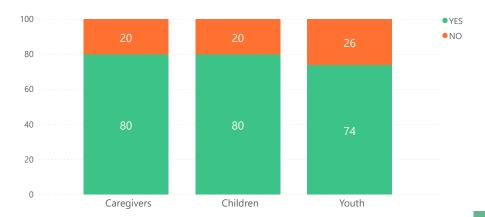


Caregivers

On average, 73% of caregivers felt comfortable talking to someone about harm being done to a child. In cases where they knew that something bad was happening to a child, 77% of caregivers knew where or to whom to go for help and 80% reported they would get help for the child (see Figure 2-6).

■ Among caregivers in Africa, 82% were comfortable telling someone, and 84% would get help. Similarly, in the Americas, 75% of caregivers reported being comfortable telling someone, and 86% reported they would get help. In Asia, however, only 62% of caregivers felt comfortable telling someone, 67% knew where to get help, and 71% reported they would get help.

Figure 2-6. Percentage Reporting They Would Get Help for the Child: 2019 (Global)





Children and Youth

Among children, 69% of children and 65% of youth reported being comfortable telling someone about a harm done to a child, a slightly lower percentage than caregivers. Similarly, 80% of children reported that they would take action and get help in cases where they knew something bad was happening to a child; however, only 74% of youth reported the same (see Figure 2-6).

- Similarly, in Africa, 77% of children felt comfortable telling someone, and 80% reported that they would get help, while among youth, 73% were comfortable telling someone and 76% reported they would get help.
- In the Americas, 71% of children and 67% of youth felt comfortable telling someone, and 87% of children and 82% of youth reported they would get help.
- As with caregivers, however, lower percentages were reported in Asia, with 59% of children feeling comfortable telling someone and 74% reporting they would get help. Among youth, 53% were comfortable telling someone, and only 65% reported they would get help.

Overall, we see a similar trend across all regions, with **fewer caregivers**, children and youth being comfortable telling someone about something bad happening to a child — but higher percentages of willingness to take action.



PROGRAMS sought to enhance the safety of children's home environments (13 programs), schools and other learning environments (16 programs), and/or communities (38 programs). Over half (31) of these programs targeted children across multiple life stages, with 14 targeting children across all three life stages.

ANTICALORA

Photo by Oscar Siagian



Where are we contributing to positive change for child protection outcomes?

As shown in Figure 2-7, these programs have enabled children in 18 countries (8 countries in Africa, 4 countries in the Americas, 4 countries in Asia) to gain new knowledge about child rights, protective factors and improvement in child protection behaviors. These behaviors include:

- children's knowledge about their rights and protective mechanisms
- number of extant child protection mechanisms in a community
- reduction of different forms of violence in the home, school, and community
- children's perceptions of feeling safe in their schools and communities.

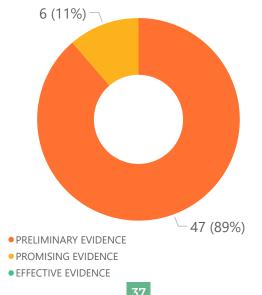
Figure 2-7. Child Protection Contributions by Region and Country



What levels of evidence and types of change are we seeing for child protection outcomes?

As shown in Figure 2-8, 6 (11%) of these programs have generated promising evidence and 47 (89%) have generated preliminary evidence for program contributions to enhancing safe environments for children at the home, school, and community levels, with no programs generating effective evidence.

Figure 2-8. Evidence for Positive Change in **Child Protection Outcomes**







"Our inclusion in activities and decision-making at home and in the community will allow us to enjoy the same rights as other children without disabilities. As children and young people with disabilities, we will help to organize and strengthen people with disabilities in our communities. We will also share our skills and talents to help our community or barangay deliver programs and services for our fellow children and youth with disabilities. And lastly, we will reach out to our fellow children and young people with disabilities so that we will be able to provide support to them."

— Excerpt from manifesto developed as part of EMBRACE project in the Philippines

CHILD PROTECTION



■ PROMISING — The Enhance Child Welfare through Better Community Awareness, Strengthen the Capacity of Government Structure, and Economic Opportunities towards Overall Child Development⁶ project in Ethiopia used activities such as community conversation and dialogue, the formation and support of girls' clubs at school, and a marketplace campaign to mobilize the community to respond to harmful traditional practices (HTPs). The project helped to protect children from HTPs by increasing the engagement with and influence of the duty bearers and local social actors and contributed to reducing the prevalence among children ages 5 to 17 of emotional abuse to 36% (compared to 77% at control sites) and physical abuse to 2% (compared to 11% at control sites). Program results were used to support the implementation of national and local laws, policies, and actions plans that address problems in child protection.

PROMISING — The ten-year Child Development Program⁷ in India program provided children across all three ChildFund life stages with a long-term, comprehensive package of services across sectors (child protection, health, education, livelihood) to enhance their overall development; the program also worked with key stakeholders to improve the quality and coverage of services for children and their families. The program contributed to reducing the proportion of children experiencing humiliation by teachers in schools in the program's intervention area to 16% compared to the control area (22%) and helping to raise

⁶ Girma, T. (2016). End-term evaluation survey of "enhance child welfare through better community awareness, strengthen the capacity of government structure, and economic opportunities towards overall child development" project in Fentale district. Addis Ababa: Abamela Business Plc.

⁷ Ganesh, P. & Innacy Saint Rock, Q. (2018). Outcome evaluation of ChildFund India-supported child development program. Cape Town: Centre for Social and Scientific Research (CSSR) and QLA Solutions.

awareness about the complaint mechanisms available in schools for child protection issues to 54% (compared to 29% in the control area). The level of awareness of existing Village Child Protection Committees was much higher in the intervention area (51%) compared to the control area (8%).

■ PROMISING — The USAID-funded Parents and Teachers Joining Forces for Children through Social Spaces (PUENTES) project in Honduras⁸ piloted, in an urban setting, a comprehensive, curricular school-based violence prevention approach targeting violence in the home and at schools called Miles de Manos (MdM) or "Thousands of Hands." MdM, which consists of three components — family, school, and integration or "bridge" — that had previously been tested by ChildFund Honduras with its local partners in rural areas. The PUENTES project helped to enhance the safety of both children's home and school environments — increasing caregivers' use of positive discipline techniques in the home by 5% (from 60% to 65%) and increasing students' reporting of feeling safe and secure in school and at home by 21% (from 70% to 91%).

■ PRELIMINARY — The Enhancing Local Capacities to Make Better Communities for Children and Youth with Disabilities (EMBRACE) project in the Philippines⁹ promoted social inclusion and protection for children and youth with disabilities (CYWDs) by building their capacities through education and trainings and organizing them into child advocacy groups. The project helped 680 CYWDs (ages 15 to 24) lead the

#WeAreIncluded Convention of children and youth with disabilities, and the development of a manifesto written by 57 CYWDs with their caregivers and stakeholders. (See excerpt on left)

■ PRELIMINARY — The Integrated Community Based Child Protection and Youth Project in Kajiado County in Kenya¹⁰ engaged adolescents and youth as advocates in their own protection, and strengthened the school-based child protection mechanism to support them. The project contributed to adolescents and youth feeling enhanced empowerment to participate in their protection needs — an increase of 30% (from 41% to 71%).

■ PRELIMINARY — In Ethiopia, the 18-month Safe School Environment for Children project¹¹. reached 4,301 girls ages 10 to 16 and 1,000 community members through the delivery of classroom-based trainings for teachers and students on gender based violence, child protection, and life skills and community dialogues (on topics such as joint decision-making for men and women, harmful traditional practices, and domestic violence) to raise gender awareness at the community level. The project contributed to the reduction of gender disparity and incidences of gender-based violence and harmful traditional practices: school-based violence was reduced by 40% (from 42% to 2%) and abuses to girls outside homes (community-based violence) by 43% (from 49% to 6%). Abuses at home were reduced by around 8% (from 9% to just under 1%).

¹⁰ ChildFund. (2020). Endline evaluation report: Integrated community-based child protection and youth project in Kajiado county. Washington, D.C.: Author.

11 ChildFund Ethiopia. (2019). Internal evaluation report on "building child friendly resilience project –BCR II project". Addis Ababa: Author.



⁸ ChildFund International. (2017). Puentes project: Final report. Washington, D.C.: Author. "Puentes" is Spanish for "bridges."

⁹ Aguilar, V., & Patriarca, E. (2016). Inclusion and protection of children and youth with disabilities in the Visayas Regions: The EMBRACE project experiences end-of-project evaluation.



Program Evidence Snapshot

CHILD PROTECTION | KENYA

Jukumu Letu ("Our Responsibility") Child Protection Project¹²



WHEN: 2018 to 2021

WHERE: Tharaka South and Igambangombe Sub-Counties in Tharaka Nithi County, Kenya

CHILDFUND LIFE STAGES: 2 (6-14 years old) & 3 (15-24 years old)

REACH: Approximately 19,500 children

SUPPORTED BY: ChildFund Korea

IMPLEMENTED BY: ChildFund Kenya

EVIDENCE LEVEL: Preliminary

GOALS: • Increase the responsiveness of child protection (CP) mechanisms. • Build the capacity of community-based CP champions.

• Increase participation of children in their own protection. • Decrease the number of girls adversely affected by harmful cultural practices, such as female genital mutilation (FGM).

HOW WE STUDIED THE PROGRAM:

- A one-group pretest-posttest study design.
- Data were collected with child and caregiver surveys, stakeholder key informant interviews and case studies¹³.

12 Ondoro, K. & Osir, B. (2020). Mid-term evaluation of the Jukumu Letu child protection project in Tharaka South and Igambangombe sub-counties. Nairobi: African Research and Development Ltd. (ARD).

13 According to research conducted by Plan International Kenya, CTZ and the Kenya Bureau of Statistics, female genital mutilation is at 95 percent especially in Tharaka South and 58 percent in other parts of Tharaka Nithi county. https://kw.awcfs.org/article/fgm-a-thorny-issue-for-tharaka-nithi-girls/

HIGHLIGHTS:

- Increased reporting of CP issues and awareness of existing child protection systems: Children who are aware of CP reporting mechanisms for incidences of child abuse and violence increased by 33% (from 35% to 68%). There was also a 15% improvement in children reporting cases of abuse (from 10% to 25%).
- Increased children's involvement in their own protection: The highest increases were in children's voices being considered on protection issues affecting them (about 91%), children empowered to actively speak out about child abuses (about 90%), and creation of avenues for children to air grievances and give their opinion on issues affecting them (about 82%).
- Changing community perceptions of FGM: There was a considerable decline in the positive perception of FGM. An aggregate of 97% of respondents affirmed that most community members will accept alternative rites of passage for girls instead of FGM compared to 16% previously, with change being highly attributed to education (99%).

LESSONS LEARNED:

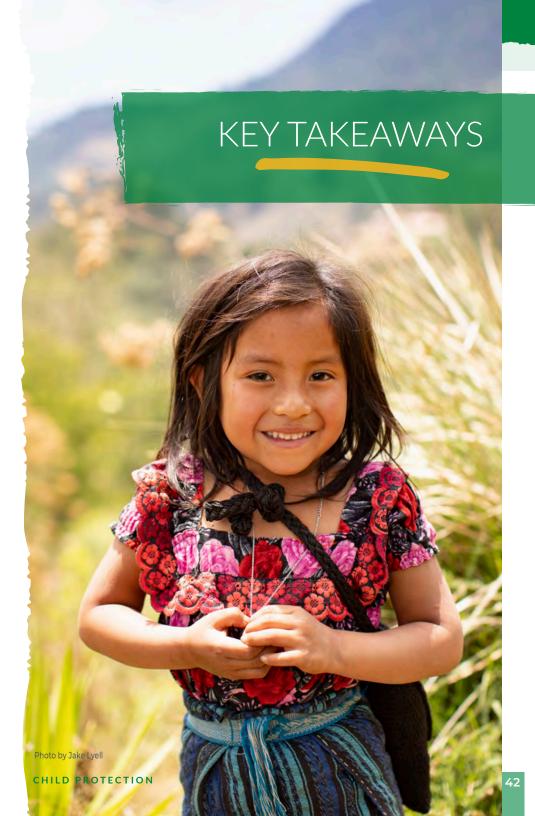
• Given that most of the children preferred to report cases of abuse to caregivers, or close relatives, more targeted community awareness sessions and training should be directed to caregivers on child rights, child protection and care, existing systems, and reporting channels.





"Positive change has been brought about by the efforts of projects like the "Jukumu Letu" educating parents on the rights of children frequently in meetings and the negative [effects] associated with harmful traditional practices such as FGM has on girls"

> In-depth interview, female participant



Working across our three life stages, we see progress in our contributions to making children's worlds safer — more caregivers, children, and youth are perceiving their communities to be safe, with an increased likelihood to report harms — and we have over 50 programs showing at least preliminary evidence of positive change for child protection outcomes in all three regions of the world.

The main **SDG** contributions of this body of work are:











Specifically, the contributions of our programs in the child protection arena further the realization of **SDG** targets:

- ■1.3 to "implement social protection systems,"
- **5.2** to "eliminate all forms of violence against women and girls,"
- ■16.2: to "end abuse, exploitation, trafficking, and all forms of violence against children"

LIFE STAGE

FOR INFANTS AND VERY YOUNG CHILDREN (LIFE STAGE I), we see the benefits of working with local partner organizations to enhance caregivers' knowledge and skills to provide discipline without violence, and in educating families and communities on the risks of violence to children and to know when and how to report abuse to social service providers. Thus, we will continue to:

- Design, implement, and evaluate our programs that provide direct support to caregivers to build upon their innate desire and capacity to keep their children safe; and
- Empower communities to protect young children involving community volunteers, ECD teachers, or Child Protection Committees in supporting vulnerable families, including connecting children in trouble to the help they need.

LIFE STAGE

FOR CHILDREN AND YOUNG ADOLESCENTS (LIFE STAGE 2), we see the positive effects of building safe learning environments for them — and we will continue to:

- Build support systems that encourage all children to attend school and actively participate in their own learning and development;
- Provide children with the social and emotional skills that foster healthy and non-violent relationships;
- Train educators and work with the education system at community, district and national levels to reduce tolerance for peer-to-peer bullying and violence; and
- Provide children access to safe learning and play environments, such as Child-Friendly Spaces, during times of crisis. This has been an important component of our COVID-19 response work (see Chapter 6 on our Humanitarian Response work). For children in situations where schools are not operating, these spaces provide them with psychological support and provide them with the skills they need to feel safe and secure.

LIFE STAGE

FOR ADOLESCENTS AND YOUTH (LIFE

STAGE 3), we see progress in educating them on the different forms of abuse, exploitation and violence that they experience as they move toward adulthood — and providing them with the life skills and opportunities they need to keep themselves safe. Moving forward, we will continue to:

- Design, implement, and evaluate interventions that reflect the divergence of gender roles and protection challenges. This includes providing adolescent boys with social and emotional skills that foster healthy, non-violent relationships and supporting girls and young women in advocating for their right to make decisions about their lives;
- Provide opportunities for youth to exercise their agency and advocate for their protection rights. Through our programs, we will continue to empower adolescents and youth to speak up and take action against violence that affects them and their communities; and
- Reach marginalized groups such as youth with disabilities, youth from ethnic or religious minorities, and youth who identify with non-traditional gender or sexual identities to ensure that their voices are heard.