Strengthening community formal and non-formal systems to prevent violence against children in East Africa: What is working?

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This article focuses on Violence against Children (VAC) as a growing public health and social development problem globally. It provides a summary of the framework and model focusing on addressing VAC which World Vision is implementing in East Africa. The systems approach and the Child Protection and Advocacy (CPA) model were considered in addressing VAC. In different ways communities are demonstrating enormous progress in preventing and responding to violence against children in East Africa through the CPA model. There is clear evidence from the community case studies that child protection committees have provided an effective inter-sectoral and interdisciplinary mechanism that links the formal and non formal structures to coordinate interventions and responses to prevent VAC. Through the Analysis, Design and Planning Tool (ADAPT), harmful practices like child marriages, female genital mutilation/cutting (FGM/C), child labour, sexual abuse, defilement, child trafficking and child neglect have been have been identified and are being responded to through formal and informal child protection mechanisms to ensure the well-being of children. Further research and analysis is however required to investigate how the community informal and formal child protection system can be strengthened to effectively address violence against children.

Key words: Sexual abuse, violence, public health, child protection system, social ecology, risk factors, protective factors, ecological perspective, formal and non-formal, child protection and advocacy.

INTRODUCTION

The United Nations has identified Violence Against Children (VAC) as a growing public health and social development problem globally through a study commissioned in 2006. Violence is understood to mean all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse. Article 19 of the Convention of the Rights of the Child directs “States Parties . . . to protect children from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.” States Parties are further directed to pursue legislative, administrative, social, and educational measures deemed appropriate, including the development of social

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programmes to support children and those who care for them. Finally, Article 19 goes on to call for other forms of prevention as well as procedures for “identification, reporting, referral, investigation, treatment, and follow-up of instances of children maltreatment” (United Nations Committee on the Rights of the Child; General Comment No. 13 (2011).

Child maltreatment includes all types of abuse and neglect of a child under the age of 18 by a parent, caregiver, or another person in a custodial role (e.g., clergy, coach, teacher etc.). There are four common types of abuse: physical abuse, sexual abuse, emotional abuse and neglect. In recent decades some extreme forms of violence against children, including sexual exploitation and trafficking, female genital mutilation (FGM), the worst forms of child labour and the impact of armed conflict, have provoked international outcry and achieved a consensus of condemnation, although no rapid remedy. But in addition to these extreme forms of violence, many children are routinely exposed to physical, sexual and psychological violence in their homes and schools, in care and justice systems, in places of work and in their communities. All of this has devastating consequences for their health and well-being, now and in the future (Pinheiro, 2006).

Violence causes more than 1.6 million deaths worldwide every year. More than 90% of these occur in low- and middle-income countries. Violence is one of the leading causes of death in all parts of the world for persons ages 15 to 44. (Krug et al., 2002). Violence against children cuts across boundaries of geography, race, class, religion and culture. It occurs in homes, schools and streets; in places of work and entertainment, and in care and detention centres. Perpetrators include parents, family members, teachers, caretakers, law enforcement authorities and other children. Some children are particularly vulnerable because of gender, race, ethnic origin, disability or social status and no country is immune, whether rich or poor. The consequences of violence can be devastating. Above all, it can result in early death. But even children who survive must cope with terrible physical and emotional scars. Indeed, violence places at risk not only their health, but also their ability to learn and grow into adults who can create sound families and communities (Pinheiro, 2006).

In East Africa violence against children affects communities at multiple levels (individual, household, institutional and societal). Moreover, establishing the precise magnitude of child abuse for many countries given the silent nature in which it occurs is still very difficult. The situation in developing countries is more challenging due to poor health information system, poor referral and reporting mechanisms, inadequate legal and police systems and sociocultural stigma that surround VAC. In many countries, violence prevention is still a new or emerging field in public health. The public health community has started only recently to realise the contributions it can make to reducing violence and mitigating its consequences (Hyder and Malik, 2007).

The deleterious effects of child abuse and neglect on a child’s well-being call for effective prevention strategies at individual, family, community, institutional and national levels based on the socio-ecological model. Effective delivery of services, models and frameworks to address the problem of VAC are not fully explored although urgently there is a global emphasis to strengthen both formal and informal child protection systems at the community and national level to prevent and respond to violence against children.

There are a number of adverse and harmful traditional practices that affect children in the East African Countries. From the recent child protection assessment reports conducted in about 40 Area Development Programmes (ADPs in National Offices in East Africa using the World Vision international Analysis, Design And Planning Tool (ADAPT) include: child marriages, female genital mutilation/cutting (FGM/C), child labour, sexual abuse, defilement, child trafficking and child neglect, domestic violence, inadequate community protection systems. The ADAPT for Child Protection has been designed to help with the identification, prioritization and root cause analysis of child protection issues. It also helps with the identification and mapping of systems that are in place to protect children. From the country ADAPT reports, a deeper understanding and analysis of the child protection issues and mapping of local child protection systems has been made (Table 1).

This article focus on the unique interventions World Vision is facilitating in strengthening the formal and non formal mechanisms in addressing violence against children in East Africa. In this article, the primary guiding question is what is working in the communities World Vision is implementing the Child Protection and advocacy model to prevent and respond to violence against children?

**REVIEW OF RELATED LITERATURE AND THEORIES**

**VIOLENCE AGAINST CHILDREN THEORETICAL FRAMEWORKS AND MODELS**

Theories and models help us to frame our thinking and interpret findings when investigating the nature and prevalence of a problem, its etiology, or its consequences. Theories and models also help us to plan and review the structure of the service system in responding to problems. Theories and models also help us to plan and review the structure of the service system in responding to problems (Hunter, 2011). From the literature reviewed, different types of violence against children have been studied in isolation including the explanation of their

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Theoretical basis. These include physical abuse, sexual abuse, child abuse and child neglect. Although the past 20 years have seen many advances in understanding the etiology and the consequences of child abuse and intimate partner violence against women, most of our research has taken a fairly narrow focus. That is, we typically have studied different types of abuse in isolation. For example, we study child sexual abuse separately from child physical abuse, or neglect, or spousal physical assault. The field has yet to bring this work together into a more complex understanding of the context and continuum of family violence (Williams, 2003). Research has focused much less on neglect, which is defined here as failure to give children basic necessities and age-appropriate care (Petit and Curtis, 1997).

Addressing violence against children cannot be achieved through an isolated theory, model or intervention but can be accomplished through a combination of theories and models at different levels throughout the life course of a child. VAC is of a multi-dimensional, multi-sectoral and its effects are of a long term nature across the different stages of the life course of a child. In this chapter we focus on the frameworks and models which World Vision is implementing in East Africa in addressing VAC. The Child protection systems approach and the Child Protection and Advocacy (CPA) model were considered with impact in addressing VAC. There is clear evidence from the community case studies that child protection committees have provided an effective inter-sectoral and inter-disciplinary mechanism that links the formal and informal structures to coordinate interventions and responses to prevent VAC.

A child protection systems theory

World vision is applying a systems theory in empowering communities to protect children from abuse, neglect, exploitation and all forms of violence. Different elements and actors both formal and informal are working together at the community level to provide a protective environment for children. But what is a systems theory and how does it function? Laszlo et al. (1997) argue that a “system” may be described as a complex of interacting components together with the relationships among them that permit the identification of a boundary-maintaining entity or process. The concept of “system” serves to identify those manifestations of natural phenomena and process that satisfy certain general conditions. A system is a set of two or more interrelated elements with the following properties: each element has an effect on the functioning of the whole, each element is affected by at least one other element in the system. All possible subgroups of elements also have the first two properties.

The systems approach attempts to view the world in terms of irreducibly integrated systems. It focuses attention on the whole, as well as on the complex interrelationships among its constituent parts. This way of seeing is not an alternative, but a complement, to the specialized way. It is more all-embracing and comprehensive, incorporating the specialized perspective as one aspect of a general conception. The specialized approach has created an orientation toward decision making that is currently vague in many parts of the world. It is based on individualism, competition, training for a specific profession, and indoctrination into a specific culture. On the other hand, the general systems approach
encourages the development of a global, more unitary consciousness, teamwork, collaboration, learning for life, and exposure to the universal storehouse of accumulated knowledge and wisdom.

By definition, a child protection system has certain structures, functions, and capacities, among other components that have been assembled in relation to a set of child protection goals (Save the Children, 2009; UNICEF, 2008). When thinking about a systems approach to child protection, it is important to remember the highly interactive nature of the parts in relation to the whole in a given context (Wulczyn et al., 2010). Generally, child protection programming in the international development sector has experienced a significant global ideological shift over the past decade and not much inquiry has been particularly on the role of the community informal systems in the protection of children in sub Saharan Africa. A holistic approach to child protection requires the engagement of both formal and informal child protection mechanisms. Formal systems are generally defined as being related to or sanctioned by the state’s government. The community informal (non-formal) systems would include traditional and other civil society structures, mechanisms, and processes of child protection.

There is however inadequate information and lack of consensus among practitioners and the academia of what constitutes community informal protection systems, how they are organized and how they link with the government formal child system in the protection of children from abuse, neglect, exploitation and all other forms of violence to ensure their well-being. Conventionally, child protection programming has focused on singular issues, for example – child labour, children living on the streets, child headed households, violence against children, justice for children, etc. As a result responses to these issues have taken place in isolation without having a comprehensive understanding of how they relate to each other and the overall child protection system.

Increasingly, international organizations such as UNICEF, World Vision, Save the Children, and United Nations High Commissioner for Refugees (UNHCR) are turning to what is referred to as a systems approach in order to establish and otherwise strengthen comprehensive child protection efforts. A systems approach seeks to do the following:

1. Address child protection issues in a comprehensive and sustainable manner, including cultural, political, social, spiritual and financial factors
2. Affirm the role of parents (both mothers and fathers) and caregivers as those first responsible for care and protection of children.
3. Affirm the responsibility of States to guarantee the care and protection of children, through respecting, protecting and fulfilling their protection rights outlined in the Convention on the Rights of the Child and other international human rights instruments,
4. Affirm the role of children in protecting themselves and their peers.
5. Strengthen the protective environment for all children.

As guided by the Convention on the Rights of the Child (CRC), the systems approach differs from earlier child protection efforts, which have traditionally focused on single issues such as child trafficking, street children, child labor, emergencies, institutionalization, or HIV/AIDS. Although such efforts have produced substantial benefits, this diffused approach often results in a fragmented child protection response, marked by numerous inefficiencies and pockets of unmet need (Wulczyn et al., 2010).

An inter-agency review, entitled, “What are we learning about protecting children in the community?” (Wessells, 2009), evaluates the effectiveness of development practice within the informal, community space. It makes some comprehensive recommendations for best practices in this sphere based on an extensive document analysis. The elements which were highlighted as being responsible for increasing effectiveness include:

- a). Community ownership
- b). Slow, dialogue-oriented approach, initiating change from within the community
- c). Building on existing capacities and resources
- d). Support from leaders (formal & informal)
- e). Child participation;
- f). Good management of issues of power, diversity and inclusivity;
- g). Resourcing;
- h). Linkages between actors within the system and to wider community development.

Further still, Davis and McCaffery (2012), in a working paper: Strengthening Child Protection Systems in Sub-Saharan Africa, prepared for the: Inter-agency Group on Child Protection Systems in sub-Saharan, reveal some very important lessons learnt to improve the lives of children, families and communities within Sub-Saharan. The lessons and trends highlighted in strengthening the child protection system in sub-Saharan Africa include:

1. The paths taken are different, reflecting national and local realities, with greater attention being paid to engagement of communities, families and children.
2. Linking the formal and informal structures and building on the strength and resilience of local communities, families and children are key challenges ahead.
3. The link has been established between mapping and gap analyses in “triggering” system strengthening processes and building political space.
4. Realistic implementation strategies that show promise link the good work of secular and faith-based NGOs, community leaders, volunteers and advocacy groups with...
helping to strengthen the protective environment around so we adopt a systems approach to child protection, World Vision defines a Child Protection System as a set of coordinated formal and informal elements working together to prevent and respond to abuse, neglect, exploitation and other forms of violence against children. As a key programming principle, World Vision's approach to child protection seeks to empower children, families, communities and partners to prevent and respond to exploitation, neglect, abuse and other forms of violence affecting children, especially the most vulnerable. In doing so we adopt a systems approach to child protection, helping to strengthen the protective environment around children, as well as the children themselves. This includes a focus on the formal elements (for example, national legislation, legal services and social welfare services) and informal elements (for example, churches, community based organizations and indigenous leaders) that work together to prevent and respond to abuse, neglect, exploitation and other forms of violence against children. WV measures its success in terms of impact on the CP System as well as on children themselves (especially the most vulnerable).

A systems approach addresses child protection more holistically, brings greater focus on prevention, and strengthens the critical roles and assets of the key factors responsible for child protection. These key factors include government, civil society, parents, caregivers, families, children and youth and other community structures - which together provide formal and non formal child protection mechanisms and services.

Formal child protection actors (or mechanisms) include government statutory protection interventions, often based on identification and amelioration of childhood risk. Non-formal actors or mechanisms include: family and kinship networks, children’s peer networks, women’s groups, local traditional governance structures, children’s “natural advocates” (e.g. a supportive neighbor, sports coach, employer), and community, social and cultural capital supporting child well-being.

In light of the shared responsibilities of these groups in protecting children, World Vision International has adopted a systems approach to child protection and advocacy to inform and connect its many child protection programming efforts. World Vision's understanding of a Child Protection System includes 7 Elements and 5 types of Actors as described in Figure 1.

**Essentials of CP in World Vision**

There are essentials of child protection in World Vision. These Essentials define the particular value and contribution that World Vision can bring both to a child protection systems strengthening approach. These 3X3 Essentials are the framework for evidence-building, and the focus of the WV global investment in capacity-building and project model development. They are the areas in which World want to be known for, and the targets for influencing wider practice in the child protection, humanitarian and development community (Table 2).

### THE CHILD PROTECTION AND ADVOCACY (CPA) MODEL AS A MEANS OF ADDRESSING VIOLENCE AGAINST CHILDREN

The Child Protection and Advocacy (CPA) project model
Table 2. Essentials of CP in World Vision

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<th>3 Actors</th>
<th>3 Enablers</th>
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<tr>
<td>1. Strengthening families as the first line of protection and care for children</td>
<td>1. Establishing and increasing local level collaboration between formal and informal actors to strengthen child protection</td>
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<tr>
<td>2. Empowering children as actors in the child protection system</td>
<td>2. Integrating focused child protection efforts with other sectoral interventions (e.g. water, livelihoods, education)</td>
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<tr>
<td>3. Catalysing the unique and essential contribution of churches and other faith communities to strengthening child protection</td>
<td>3. Leveraging our long-term presence in communities for national, regional and global influence to establish the importance of child protection for development and humanitarian outcomes</td>
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is a comprehensive framework for child protection work at the community level. It suggests a set of specific interventions that focus on strengthening the child protection system (both formal and informal elements) at the community level, thus empowering local communities to strengthen the protection of children from abuse, neglect, exploitation and other forms of violence. The model strengthens both the protective environment for children, as well as children themselves, in order to improve their well-being and fulfill their rights to protection. The CPA project model was developed also to establish an evidence base for advocacy efforts at national, regional and global levels.

The Child protection and Advocacy model is framed around systems approach to child protection. Such an approach emphasizes prevention and protection, coordination between sectors and integrated responses that benefit all children. It is a robust approach which can also be used in programmatic responses to external shocks as emergency and disaster. Consideration of systemic factors and stressing prevention alongside protection and restoration strategies will have lasting impact.

The focus on individual issues has contributed greatly to the protection of children and much has been learned about what makes good child protection work. Yet, because many children face multiple protection problems, a focus on individual issues can sometimes resolve one issue while leaving others untouched. This can be the case, for example, when children have been abused at home or been associated with an armed group and are now working and living on the streets and are in conflict with the law. Fragmented child protection responses may deal with one of these problems but rarely provide a comprehensive and sustainable solution to child
These and equipping them with essential life skills access to appropriate care and protection mechanisms. The CPA group should consider choosing one or more of these interventions based on the issues, gaps and opportunities identified through the ADAPT for child protection. The group or committee may also choose other interventions to supplement these core components, based on local opportunities and needs. Sometimes the CPA components can be combined with aspects of other project models based on findings in the ADAPT, creating an integrated project at the local level. In addition to establishing and strengthening a local CPA group, the four core components in the project model as already mentioned above are: building community awareness and conscientisation, establishing and strengthening reporting and referral mechanisms, providing quality support to vulnerable families, and building life skills and resilience to protect children. Further details are provided in Table 3.

HOW IS THIS MODEL IMPLEMENTED?

A process of six phases is suggested for implementing the CPA project model at the community level. The six phases include:

Phase 1: How will we work together? (Explore how to work together?)
Phase 2: Analyzing child protection – (The working group analyses the root causes underlying child protection issues and existing systems using the ADAPT for Child Protection).
Phase 3: What do we want to do? - (The working group agrees on shared vision, objectives and approach.
Phase 4: Planning together - (The working group finalizes the collaborative structure, drafts a shared project plan and agrees who will contribute what.
Phase 5: Getting started - (Baseline surveys, action plan implementation, monitoring and reflection, and building of organisational capacity for the CPA group.
Phase 6: Learning and evaluation - (Evaluation, adjustment and celebrating success)

UNDERSTANDING RISK AND PROTECTIVE FACTORS

The CPA model seeks to address the key root causes of risk and root protective mechanisms. These include:

Key Root Causes of Risk:

1. Extreme economic deprivation
2. Discrimination
3. Social Exclusion
4. Catastrophic disasters

These are interventions that impact child protection issues and child protection system gaps which are commonly found in numerous contexts. The CPA group should...
Table 3. Summary of the core components of the CPA project model.

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<tr>
<th>Core component</th>
<th>Expected impacts/outcomes of each component</th>
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| 1. Building community awareness and conscientisation | • Transformed individual and community attitudes, which ensure that socio-cultural traditions and behaviour are more protective of children.  
• Communities stop harmful traditional practices, replacing them with widely practiced positive protective practices. |
| 2. Establishing and strengthening reporting and referral mechanisms | • Effective and safe mechanisms established for children or adults to report abuse, neglect or exploitation of children. The mechanisms should link informal and formal mechanisms appropriately.  
• Referral and case management services established for children who have been abused, exploited or neglected.  
• Local to national linkages strengthened through generating evidence for child protection advocacy to influence policy, planning, budgeting and delivery of services. |
| 3. Providing quality support to vulnerable families   | • At-risk households are supported by early intervention and local support to prevent neglect, abuse and exploitation.  
• Increased resilience of children, especially the most vulnerable.  
• Vulnerable children’s voices are credible and heard to influence policy and decisions that affect their well-being.  
• Children, especially the most vulnerable, develop and apply skills to protect themselves. |
| 4. Building life skills and resilience to protect children |                                                                                                               |

Key Root Protective Mechanisms

1. Survival and livelihood needs met  
2. Caring, nurturing relationships  
3. Social empowerment, agency, and opportunity  
4. Justice and accountability

HOW DOES THE PROJECT MODEL CONTRIBUTE TO WV’S CHILD WELL-BEING OUTCOMES?

The CPA project model contributes primarily to WV’s child well-being aspiration, ‘children are cared for, protected and participating.’ However, abuse, neglect or exploitation can undermine children’s development. Therefore, a CPA project can be foundational for progress in any of the child well-being outcomes. Adverse childhood experiences (such as abuse, exploitation and neglect) have long-term consequences, even into adulthood, on well-being and behaviour. These may include poor health, difficulties in gaining employment and challenges with interacting socially. There are a number of child well-being outcomes which directly relate to effective child protection:

1. Children cared for in a loving, safe, family and
community environment with safe places to play.
2. Children celebrated and registered at birth.
3. Children enjoy positive relationships with peers, family and community members.
4. Children make good judgments, can protect themselves, manage emotions and communicate ideas.

RESULTS FROM COUNTRY CASE STUDIES

In different ways communities are demonstrating enormous progress in preventing and responding to violence against children in East Africa through the CPA and social ecological models. There is clear evidence from the community case studies that the community child protection committees/groups have built their capacity and are working to ensure that children in the communities are protected from different forms of violence. Evidence - base building and learning are a core component of CPA to inform programming and advocacy efforts. The EAR CP Theory of Change (ToC) study is being conducted in four countries (Ethiopia, Rwanda, Tanzania and Uganda) with the aims of building evidence on the path way of change to strengthen non-formal and formal mechanisms of child protection systems in the region. The study is for a two year period commissioned in 2014 and will end in 2015. Preliminary results from the study are quite impressive.

Improved reporting and referral mechanisms. Many cases of abuse, neglect and exploitation have been reported to appropriate CP agencies. Children have been successfully referred to relevant government services and in many instances community resources have been drawn upon to address child protection needs (e.g. kinship groups taking in abandoned children, neighbors assisting resolve domestic conflict, women’s groups supporting the economic needs of vulnerable girls and boys. More attention could be given to reporting cases of MVC especially girls in outlying communities at risk of early marriage and boys working in the informal gold mining sector.

Capacity of 80 child protection committees improved and can actively report and refer CP cases to relevant support structures. Strong coordination between the government and non formal structures. (Rwanda - 500 single mothers mobilised to seek absentee father who have abandoned their children started to care for their children, Ethiopia - Birth certificates secured for 910 children in Medebay Zana ADP and can now achieve their entitlements).

Improved community mobilization and awareness raising: Great gains have been made in raising awareness about child protection risk and protective factors and solutions to these challenges. Numerous examples were shared in regards to changing harmful practices and reducing violence against children. Adult members of the CPCs , local children’s “natural advocates” and children themselves are all actively involved in this process. Creative means have been found to involve community police in raising awareness about the plight of street children and girls at risk of sexual abuse and harassment.

The creation of bi-laws, such as those enforcing school attendance and protecting girls from harassment, child marriages, FGM as an innovative local policy and advocacy structure protecting the rights of children.

Reduction and elimination of certain harmful cultural practices such as FGM, witchcraft, child marriages, child sacrifice as a result of the community change methodology and other community dialogue mechanisms. Deeply rooted cultural norms, values and practices changing relatively quickly when strategically addressed.

Opening “social space” for child and youth advocates to help inform local understanding of vulnerability, protection and agency and assist as equal partners developing strategies and solutions to addressing local protection risks.

Case study from Uganda

The role of the local Child Protection and Advocacy group in addressing Violence Against Children: A Case Study from Nabukalu ADP.

Situation

Nabukalu Sub County in Bugiri District is regarded by many people in Eastern Uganda as the food basket of that sub region. The community is the leading producer of rice, maize, beans and other crops that are grown for domestic consumption and commercial purposes. “Most of the food you find in Bugiri Market comes from here, our food actually goes up to Kenya and Kampala, you see big trucks on our road here all those people are looking for crops to buy. So here if you don’t farm you cannot survive; it is the main source of livelihood here”, Wasswa aged 45 from Nakivampa parish.

Because of socio-cultural practices, the community is characterized by societal practices such as child labour, school drop-out rates, early child marriage, teenage pregnancies, domestic violence etc were very common child protection issues in Nabukalu community. When World Vision Uganda and Bugiri District local Government leaders identified the community as one that required intervention, it was only prudent that child protection programming be integrated in the development process.

The past two decades in Uganda have witnessed marked progress in the Child Rights sector most especially in the establishment of policy, legislative and
institutional framework for the realization of child rights. In addition, there have been considerable efforts by the Government of Uganda in implementing national level programmes both at ministerial level and in collaboration with bilateral donors and other stakeholders (Figure 2).

Despite this, children’s day-to-day realities in Nabukalu are still riddled with challenges. According to the WV U assessment report of 2012, over 65% of children below 17 years of age live in multi-dimensional poverty, being deprived in crucial areas of their rights (nutrition, health, water, sanitation, shelter, education, information and protection).

Response

During the Child Protection assessment conducted using the ADAPT, the key driving factors identified protection include polygamy, poverty, domestic violence, peer pressure, preference of boys to girls, culture, lack of family planning. Children with disabilities, orphans, children from poor households and children with parents that had separated are the Most Vulnerable Children (MVCs). To respond to these challenges teachers, Village Health Teams, the Police, Community Development Officers, Local Council Chairpersons, Councilors, CSO representatives, religious leaders and other community members constituted themselves into a Child Protection and Advocacy group as a community-led platform for strengthening both formal and informal systems and structures for child protection as a collective action and response network.

The committee meets quarterly unless an emergency session is called. Generally cases are brought to the committee who then discuss each case and either take direct action or refer a case to the appropriate government authority and sometimes community resource – for example a rape case to the clinic and police, with psychosocial support being provided by the Nabukalu community women’s group.

The CPC has focused concerted attention on community CP awareness raising and mediating local disputes, gradually becoming more involved in serious CP issues such as rape and child sacrifice. This has started to win the trust and support of children who are increasingly reporting abuse and other protection violations.

RESULTS

Since its establishment in May 2012, the Nakivampa Parish CPA team alone has carried out 23 community dialogues in five schools and reached over 2,800 boys and girls with information on child protection. The CPA group has been trained on Referral and Reporting module and recently on Community Change methodology.

“What has enhanced CPA work in Nabukalu is the fact that we work together as team, the community members,
Collaborate and coordinate joint actions. World Vision's Protection committees at parish level and they The work of the CPA group closely interfaces with Child Nabukalu sub county council speaker and also CPA first time this kind of mix of people are coming together are able to take critical decisions as a team; this is the key roles have been training the group, supporting coordination and reflection meetings and crucially, mentoring and nurturing the group in effective leadership practices and building enduring partnerships. As a result, the group has finalized processes to register as a Community Based Organization (CBO).

The CPA group has directly reached 150 households in 6 parishes of parents/guardian engaging children in child labour and discussed with them dangers of this practice and how it affects children’s well being. Bugiri District Local Government council committed to draft an ordinance that penalizes individuals engaged in promoting child prostitution and defilement. This was as result of a research study that was conducted by the CPA group in collaboration with other civil society actors in Bugiri District. According to the findings, 20 out of 40 sex workers in Naluwelele and Busowa Townships in Bugiri District are girls below 18 years, with 15 of the 40 sampled respondents confessing to have started sex work when they were below 15 years of age.

“As CPA group, in one year alone, we have referred over 15 cases of child abuse to police and seen these perpetrators successfully prosecuted in courts both here in our area magistrate court in Bugiri town and in the high court in Iganga and our members have even gone up to the high court as witnesses in some of these hearings. Besides that, majority of the cases have concluded at the police are either because of lack of evidence or lack of interest in the case by the parents after negotiating a settlement. Some of the people we have supported arrest are high ranking community leaders like teachers. Two surveys have been conducted in Nabukalu community, one on child prostitution and another on child labour. In both activities, respondents were purposively selected and qualitative and quantitative data was obtained using tools like questionnaires and interview guides for key informant interviews.

Evidence

Monitoring and conducting support visits to CPA groups is an integrated component of the CPA project. Most of this evidence was obtained during reflection meetings with CPA groups, in the process of triangulating the data given by CPA members we consult to other stakeholders like teachers. Two surveys have been conducted in Nabukalu community, one on child prostitution and another on child labour. In both activities, respondents were purposively selected and qualitative and quantitative data was obtained using tools like questionnaires and interview guides for key informant interviews.

Case studies from Ethiopia

Communities addressing Child marriages through birth Certificates: A case of Medebay Zana ADP in Ethiopia

Situation: In 2011, the World Vision International Child Protection Analysis, Design and Planning Tool (ADAPT) was utilized to identify and analyse child protection issues at Medebay Zana AP. The major problems identified were child marriages, child labor, divorce, law enforcement challenges and lack of birth registration. Different child protection stakeholders identified lack of birth registration as a leading driver of child marriage in Medebay Zana community because parents provide false age of their children and there is no basis for legal
prosecution in the courts of law.

The Government of Ethiopia has sufficient national legislation prohibiting child marriage and is a state party to regional and international legal instruments like the Beijing platform for action which has four focus areas including girl child, Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa, which clearly defines the framework of marriage for women. The current birth registration service delivery process is characterized by weak operational framework and low community awareness on the importance of birth registration.

According to Child Safe Space project baseline of 2014, there is almost 0% children with official birth certificate status. As a result of this, it is still difficult to know exactly the number of eligible children accessing health care services and number of children enrolled in schools at appropriate age. It is also difficult for children to inherit their family property. Therefore, mobilizing and creating massive awareness on birth registration is found to be of prior importance as it is clearly mentioned in Article 7 of the United Nations Convention on the Rights of the Child (UNCRC) which was endorsed by General Assembly in 1989.

Response: To address the birth registration problem, World Vision Ethiopia through the Child Safe Space Project (CSSP), conducted an assessment on child protection practices among the target community using the ADAPT tool and the community prioritizing birth certificate as key response mechanism to help in ending child marriage. The Child Protection Committee worked with other stakeholders to put strategies to link birth registration process with institutions like school, health centers and faith based organizations.

In the context of Medebay Zana community, most of child marriage incidents are taking place on school going girls starting from grade 7 and onwards. Thus mobilizing school community and school girls to have birth registration at this critical age has proved to serve as a short term strategy in reducing the incidence of child marriage. This is being done by giving equal opportunity for boys and girls at the same grade level. The partners have also targeted children at the age of 4 and 5 to have birth registration. This strategy has effectively enhanced functionality of the birth registration system in the community. The partners are also mobilizing communities, supporting birth registration card printing at no cost and advocating the importance of birth registration to community gate keepers and government officials.

Results

In 2014, the number of children having birth registration reached to 910 (of which 51% girls) and this directly provides a credible safety net for children and shields them from abuse and exploitation. In addition to this, school going children are well aware of the importance of birth registration and the existing reporting and referral mechanisms in case they or their peers are abused. By doing this, local government and community leaders have appreciated the importance of birth registration and a popular movement across different stakeholders is driving birth registration for all the children.

The process of birth registration in itself has given a good understanding on effect of child marriage to children, family and community. The children with birth certificates have automatically been placed on a safe place and their families also understand about birth registration rights. Among many, a child with a birth registration will have a certificate showing her age to the public and those perpetrators of early marriage cannot overstate the ages of the girls as a cover up to take them as wives. Birth certificates can also be used in courts of law during legal proceedings as evidence to prove the age of the child (Figure 3).

Evidence

A copy of birth registration exists at district justice office and data on child registration is available in the registration book. Children can explain the whole process before having birth certificate. There is also high demand coming from community members to have birth certificate for their children.

Community Care Coalitions (CCCs) Caring for the Most Vulnerable Children - Samre ADP Ethiopia

Situation

The Child Safe Space Project (CSSP) intervention was initiated after an assessment conducted prior to the project implementation in 2012. The assessment identified child protection, care and limited participation/ involvement of children in matters that affect them as key issues affecting child well-being. In addition, the assessment also revealed that limited community based care and support to the most vulnerable community groups, as a major problem. Although Community Care Coalitions (CCCs) were introduced and had been operational in 23 Kebeles prior to the inception of the project, they were not strong and did not play an active role in mobilizing the community for care and support to the most vulnerable children and families.

Response

In response to the above situation, the Child Safe Space
Project planned to strengthen CCCs to play a leading role as agents in community care and support to the most vulnerable. The project, therefore, supported capacity building for CCC leaders on CCC model, and sensitized them on the role of CCCs in rendering care and support for the most vulnerable. The project also organised experience sharing visits for CCC leaders with the neighbouring District on model CCC lessons. The visits, in turn, motivated them to mobilize their community to render care and support to the most vulnerable children. In addition, the CCCs were supported with simple office furniture to strengthen their institutional capacity and enhance their operations. Review meetings were also conducted with leaders after a certain period.

**Results and evidences**

The continued effort of the Project and District Social Affairs Office in strengthening CCCs through capacity building trainings and materials supports resulted in improvement in care and support activities rendered to the most vulnerable children by CCC. According to the report of District Social Affairs Office, as shown in the figure below, CCCs have mobilized resources in cash and in kind from the community to support the most vulnerable in their community. The total amount of resources and labour is estimated to be worth of Birr 115,740 (nearly $5,787). These resources have been mobilized to support the neediest children in the community.

Through the resources and labour they have mobilized, in 2014, CCCs have provided care and support services in cash, kind or labour (for farming activities) reaching a total of 794 most vulnerable individuals that includes 130 Most Vulnerable Children (MVC) and 82 persons with disability as detailed in Table 4 and Figure 4.

In this regard, World Vision is supporting such locally driven actions, which is contributing to ensuring the wellbeing of children and families in Ethiopia.

**RECOMMENDATIONS**

Enhance meaningful child participation by working more closely with most vulnerable children as key stakeholders in understanding and developing strategies to prevent and respond to VAC based on their own lived experiences and perceptions. Child should be represented on the child protection committees and be involved in roles that are appropriate to their level of development and avoid placing too great a burden on them that they cannot handle.

Engage communities, in particular child protection committees, more deeply in the DME process as partners in community learning. This will bring about improved quality and community ownership of the interventions. Child protection committees need to be equipped with DME tools that they can locally utilize in improving programme delivery.

Evidence base building and learning should be embedded as a core component of the programme to ensure knowledge management and reflection for all those involved in programme delivery to strengthen both

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**Table 4. Number of needy people supported by CCCs in FY’14.**

<table>
<thead>
<tr>
<th>Group</th>
<th># Supported needy people</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In cash</td>
</tr>
<tr>
<td>Elderly</td>
<td>26</td>
</tr>
<tr>
<td>Persons with disability</td>
<td>6</td>
</tr>
<tr>
<td>MVC</td>
<td>44</td>
</tr>
<tr>
<td>PLHIV</td>
<td>23</td>
</tr>
<tr>
<td>Total</td>
<td>99</td>
</tr>
</tbody>
</table>
formal and non formal. This will enable the actors to understand what is working and what is not working and develop appropriate mechanisms early enough on how to move forward and to effectively address violence against children in the community. Starting with community assessment to indentify and analyze CP issues and concern is important in designing appropriate strategies to address violence against children.

Improving advocacy and coordination capacity of the child protection committees. Capacity building initiatives should focus on the CPCs in the different areas that include advocacy and policy, case management, reporting and referral, coordination, monitoring and evaluation.

Engaging faith leaders in the CP strategies. Faith leaders often provide the first line of child protection on all forms of violence. They are important actors in shaping the individual and community social norms and values.

Invest in community dialogue processes to address social norms: Addressing and challenging the root causes of harmful practices, for example deeply rooted cultural beliefs leading child marriages, FGM, witchcraft, domestic violence and other forms of violence will require investing in community mobilization strategies that lead to sustained dialogue to change individual and community attitudes and behaviour.

Conclusion

There are key determinants that will support strengthening of community systems to prevent violence against children in the community. Starting with participatory community child assessments to identify and analyze the issues and concerns around VAC provides a basis for providing sustainable community interventions and ensures community ownership. This allows for exploration and reflection on norms, values and practices underlying vulnerability factors to violence against children.

The choice of any community models and interventions should be based on the premise that VAC is of a multi-dimensional, multi sectoral and its effects are of a long term nature across the different stages of the life course of a child.

The child protection committees provide an effective inter-sectoral and inter disciplinary mechanism that links the formal and informal structures to coordinate interventions and responses to prevent VAC. Strengthening of the organizational capacity of the CPC to address and manage approaches that are appropriate in ensuring the well being of children is a critical success factor. Further development of multi-disciplinary competencies in child protection will allow for dynamic community planning and action in addressing VAC.

Understanding the social ecology of the risk and protective mechanisms by the different actors will enable them provide integrated service delivery and ensure a protective environment at all levels.

The systems theory has informed the development of the child protection systems approach although not much literature is available about the effectiveness of the child protection systems approach in preventing and responding to violence against children. Most of the research on VAC has taken a fairly narrow focus. A number of studies have focused on different types of abuse in isolation. For example they have focused on child sexual abuse separately from child physical abuse, or neglect, or spousal physical assault. Further research is therefore required in bringing together into a more complex understanding of the context and continuum of
violence against children and the ways in which community inter sectoral responses can be strengthened and organized to effectively address violence against children.

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