



MOST VULNERABLE CHILDREN: WORLD VISION UK PROGRAMME INCLUSION AND IMPACT

Summary of Key Points from a Literature Review, Key Informant Interviews and Case Studies in Tanzania, Cambodia and Eastern DRC

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Cover photograph: Children mapping child protection risks in their community, Beni, Eastern DRC.

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Acronyms

ADAPT – Analysis, Design and Planning Tool

ADP – Area Development Program

CAPE – Child Accountability Protection Evaluation

CBO – Community Based Organization

CP - Child protection

CPA – Child Protection and Advocacy

CRC - Convention on the Rights of the Child

DFID – Department for International Development

DRC – Democratic Republic of Congo

EARO – Eastern Africa Regional Office

FBO – Faith Based Organization

FCBM - Fragile Context Business Model

FG – Focus group

FGM – Female Genital Mutilation

ICT – Information and communication technology

IICRD – International Institute for Child Rights and Development

KII – key informant interviews

MEER – Middle East and Eastern Europe Region

MONUSCO - United Nations Organization Stabilization Mission in the Democratic Republic
of the Congo

MSC - Most Significant Change

MVC – Most Vulnerable Children

NGO – Non-governmental organization

OVC – Orphans and Vulnerable Children

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PAR – Participatory action research

PPA – Program Partnership Agreement

SW - Social worker

WV – World Vision

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Executive Summary:

The following report is the final outcome of a research consultancy being conducted by the International Institute for Child Rights and Development (IICRD) and Columbia University for World Vision UK (WVUK). The research mandate is to assess and analyze the extent to which WVUK is reaching ‘the most poor and marginalised’ or Most Vulnerable Children (MVC) through its Child Protection programming – with funding from the UK Department for International Development’s (DFID) Programme Partnership Arrangement (PPA).

This study is conducted amidst a context in which DFID, WVUK and a range of international agencies have identified “a general lack of demonstrable evidence of impact on the most marginalized.” This also entails a lack of evidence about the inclusion of MVC in programming, and data about the various factors that may facilitate or inhibit inclusion and impact.

The research applied a multi-method, primarily qualitative, participatory data gathering process to investigate four guiding questions:

Primary Research Questions:

1. **To what extent is the PPA Child Protection programme *including* the Most Vulnerable Children?**
2. **To what extent is the PPA Child Protection programme *impacting* the Most Vulnerable Children?**

Secondary Research Questions:

1. **What *barriers* prevent Most Vulnerable Children’s inclusion in the CP programme initiatives?**
2. **How do *children and their caregivers* reduce vulnerability to child protection risks?**

A **mixed methods** design was applied and included:

- ❖ A review of WV programming literature
- ❖ Review of primary data from WVUK baseline studies on child protection
- ❖ Key informant interviews with senior WV staff, and
- ❖ Three country case studies in Tanzania, Cambodia and Eastern Democratic Republic of Congo

A **social ecological framework** was applied to assess the literature and key informant interviews. As a result of the literature review and KII, five themes emerged and were applied as an interpretive lens in the case studies to add substance and guide the understanding of responses to the main research questions. These themes included:

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1. Explore the value of a categorical vs. risk/protective factors approach to community CP interventions for experiential learning.
2. Understand the complexity of vulnerable children's lived experiences and participation as an entry point for framing their capability to participate in CP interventions
3. Deconstruct the various dimensions of community ownership as a key variable in understanding inclusion and impact
4. Explore protection practitioners' engagement with cultural and social norms and beliefs as drivers in successful CP strategies
5. Identify gaps and opportunities for evidence based approaches to CP strengthening

Country case study samples and research process

Adult and child samples were purposive and included:

- ❖ Groups of children (10-20) between the ages of 12 - 18 (including groups identified as MVC for example, children with a disability living in remote locations, children working in brick factories, migrant children, child soldiers, girls working in child brothels, street children, etc.)
- ❖ Children (aged 12 – 18) involved in World Vision children's clubs or children's parliament
- ❖ Relevant CBOs such as Women's / Mother's groups, OVC support groups, FBOs.
- ❖ Community or District level Child Protection Committees or Teams.
- ❖ Relevant Local and District level government staff (e.g. Ministries of Social Welfare, Special Child Protection Police, Education, etc.).
- ❖ Relevant UN agencies such as UNICEF and MONUSCO in the Eastern DRC
- ❖ World Vision local programme staff & PPA & Child Protection coordinators at national level.

Ethnographic, narrative, group sessions with children and adults were typically run in a workshop format using experiential activities that both generated qualitative data and encouraged participants to reflect more deeply on protection issues. Data collection was verified and enriched using a layered, triangulated approach to activities, in which themes would resurface and be approached from different perspectives in different sessions. Single person interviews were conducted to compile case studies on specific issues of vulnerability and resilience and to explore MVC from different "ecological" adult and child perspectives (e.g. child, caregiver, committee member, community leader, government service provider, World Vision staff etc.).

In both Tanzania and Cambodia, urban and rural sites were included in the data collection. In Eastern DRC, the data was collected in a medium sized town in Northern Kivu province. Also,

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in Eastern DRC a CPA approach was used on citywide CP systems as opposed to the more typical CPA entry point of WV's Area Development Programs (ADP).

Having triangulated the data from the results of the research activities conducted in the three country contexts, there are some observations from the two lead researchers, grouped by research question.

Case Study Results

1. Who are the Most Vulnerable Children?

Observation

- ❖ Overall, there was generally good convergence of the views of young people, adults, and the WV staff in all three countries. Relational Mapping, Social Mapping Transect Walks (conducted in Tanzania and Eastern DRC) with children and focus groups and key informant interviews with adults revealed that many vulnerable children were being identified in relation to CPA programs. These included:

Tanzania Children out of school, street children, girls at risk of early marriage, children being physically or sexually abused, boys involved in cattle herding and girls exposed to female genital mutilation (FGM)

Cambodia Girls being sexually abused, children working in brick factories, children suffering from domestic violence, trafficking

Eastern DRC Boy soldiers, girls working in child brothels (Maison de Tolerance), street children, children living on the outskirts of Beni who were prone to abduction, and children in rural villages who periodically migrate to Beni for school or work.

In some instances, children and adults held quite different views on MVC. A gap between children's and adults' views occurred in Tanzania, where MVC were underrepresented in children's clubs and youth parliaments. For example, adults in Tanzania frequently had a more nuanced understanding of deeper root causes of vulnerability while in Eastern DRC children were better informed on groups of very vulnerable children, such as abducted child soldiers who could not participate in youth clubs.

2. To what extent is the PPA Child Protection Programme *including* the Most Vulnerable Children and what barriers limit inclusion?

Observation

- ❖ Moderate and less vulnerable children and youth are being included and referrals are being made but many MVC are still excluded. Vulnerable youth are included in the youth groups and also in activities such as campaigns, role-plays, life skills and other awareness raising processes. At present, the project is successfully engaging children and youth who face moderate levels of adversity and vulnerability. Most of the youth group members whom we talked with had faced significant adversity, although, as explained above, the adversities for some people had been offset by protective factors such as living with loving parents who knew how to care for and protect their children.

Overall, the project is successfully engaging a wider diversity of vulnerable youth than NGOs typically reach through activities such as Child Friendly Spaces. It is difficult to say, however, that the youth group members are MVCs since, as discussed below, significant numbers of the most vulnerable children and youth were unable to participate.

In the three countries, some MVC including working children, child soldiers, girls working in brothels and street children refused to participate in WV youth clubs as they considered these activities to be too “childish”, felt they would be stigmatized by other children, or had dire economic needs that precluded their participation.

3. To what extent is the PPA Child Protection Programme impacting the Most Vulnerable Children?

Observation

- ❖ The program is Significantly Impacting Children and Families. The impact of WV CP interventions can be assessed in various ways including:
 1. Level (degree) of impact;
 2. Nature (quality) of impact; and
 3. Specific groups (category) of children being impacted.

Four levels of CP systems impact were described: personal, peers and family, community and district. Personal level transformation was significant for MVC who are frequently dealing with their own healing and social reintegration. Peers, family and community level impact are crucial dimensions of WV's formal/non-formal systems strengthening focus. Within these areas, youth leadership through life skills and child rights training is making a significant impact on MVC. Similarly, children and adults are successfully identifying and referring many MVC. Finally, cultural and social norms and beliefs are being positively impacted in regards to a number of traditional

harmful practices such as FGM, early marriage and child labor.

4. How do *children and their caregivers* reduce vulnerability to child protection risks?

Observation

- ❖ Broadly, parents and youth said that caregivers (mainly parents) reduce the vulnerability of children through multiple means such as:
 - ❖ Providing safety and care to children
 - ❖ Meeting children's basic needs
 - ❖ Encouraging children to go to school
 - ❖ Encouraging children not to play cards and gamble
 - ❖ Teaching children about dangers in the community
 - ❖ Educating each other about the harms caused by domestic violence

Children reduced their own and others' vulnerability by means such as:

- ❖ Helping to clean up dirty and potentially dangerous areas
- ❖ Referring other MVC
- ❖ Helping negotiate CP discussions between vulnerable children and key adults
- ❖ Avoiding dangerous places or people
- ❖ Not being 'cheated'
- ❖ Saying 'No' to unwanted or inappropriate sex

A key component in both adults and children's strategies was mobilizing local assets and building on local indigenous (originating locally) or endogenous (produced from within a culture) protection capacity. Examples of local coping capacity included:

- ❖ Masai young peoples concept of "bravery" in meeting life challenges
- ❖ Buddhist notions of "samaki", or collective unity, in mobilizing Cambodian communities to support vulnerable children
- ❖ Congolese popular music being used to promote protection messages amongst youth in Eastern DRC

Summary Recommendations: Lessons Learned on *Inclusion and Impact of WVUK Programs on Most Vulnerable Children*

In general the findings from both the literature review, key informant interviews and three country case studies indicate that many vulnerable children are being included and positively impacted by the PPA programming. Moreover, the manner of vulnerable children's inclusion is highly significant--children are empowered and using their creativity and social networks to enable self protection, mobilize quality youth groups that use peer modeling and youth influences to guide positive behavior, and achieve meaningful participation and voice.

These results paint a clear picture that the DFID PPA funding has been successful in including many vulnerable children, in particular children experiencing domestic violence, children with a disability, children threatened by early marriage, orphaned children, and children not able to attend school. The support for MVC has also led to tangible gains in child protection systems strengthening in particular in regards to formal/non-formal systems.

The following recommendations highlight areas where future gains can be made in building on program strengths and closing gaps.

A. Definitional Challenges – Moving beyond the false dichotomy of categorical vs. risk/protective factors approaches

Findings from this study indicate that while it is important to understand the deeper risk and protective factors influencing child protection, it may in fact be unhelpful to set a false dichotomy contrasting a categorical approach with the risk/protection emphasis.

❖ **Definitional Challenges Recommendations**

- 1. Apply a three stage process to understand risk and protection for MVC:** Start with tools such as ADAPT to first assess generic groups of children who are clearly vulnerable (children suffering from violence, neglected children, children in abusive labor, sexually exploited children). Next, engage with children and adults as to the deeper causes of local risk and protective factors. Finally, facilitate an ecological approach to understanding the relationship between risk and protection across groups of vulnerable children and the life span of childhood and apply this understanding to advocacy at all levels.
- 2. Explore barriers and apply opportunities:** Barriers might be caused by a limited understanding of certain groups (e.g. including children with a disability but not street children) and apply opportunities that reduce risk and enhance protective mechanisms (e.g. developing youth life skills).
- 3. Build the capacity of WV staff, participating adults and children in community protection mechanisms and sponsorship programs, to understand**

both local groups of vulnerable children and the contextualized risk and protective factors influencing the experience of MVC.

4. **Increase the agency wide CP emphasis on understanding and building on assets** as protective factors (indigenous-cultural, community, adult and child based) as risk analyses still predominates.
5. **Ensure an integrated, CP spectrum model of programming that draws on the success and institutional capacity from earlier approaches to MVC** (prevention through crisis management) such as HIV/AIDS programming responses to OVC, to create a more robust understanding of categories and risk/protection models of support for MVC.
6. **Create a WV niche that integrates child protection into broad based government social protection programming:** Focus on categories of vulnerable populations and attempts to mitigate root causes through social/economic strategies such as cash transfers, disability insurance, child-centred community economic empowerment such as savings clubs, and youth employment.

B. Participation – Protection through intentional, meaningful, safe engagement

A key insight from the literature review, KII and case studies was the importance placed on participation as a key assets driver to understanding risk factors and boosting protective factors. This understanding was matched by the challenge of creating an intentional programming model to meaningfully engage MVC in ways that are beneficial, appealing and safe.

❖ Participation Recommendations

1. **Build on current success in engaging children in PPA programs by further exploring which MVC are not included** (e.g. street children, children involved in migration, neglected children, girls working in abusive domestic labor).
2. **Explore options for MVC to be more involved in WV CP program design, implementation, monitoring and evaluation, and “bottom up” advocacy**
3. **Begin participation with younger children using age appropriate methods.**
4. **Develop internal WV capacity, or find other local capacity, to create specialized programs or approaches supporting a safe, supportive environment for MVC who are not attending existing youth programs.** As many of these youth are struggling with psychosocial issues and may have issues with

trusting adults (e.g. street children engaged in drug misuse, war affected children, children involved in commercial sexual exploitation) specifically build staff capacity in these areas and tailor programs to the needs of these children.

5. **Continue to further promote successful WV participation programming areas** such as child rights, life skill and social networking capacity with MVC as these interventions bring significant benefits to CPA programs.
6. **Explore the role of positive deviance in participation where MVC are leading participation initiatives such as a girl child with a disability in Eastern DRC.**
7. **Integrate some of the methods used in this study to further meaningful participation interventions and to engage young people more actively in CP monitoring and evaluation** such as: unity circle, river of live and most significant change.

C. Community Ownership - Build on World Visions Broad Community-based, Developmental Advantage to Child Protection through ADPs and the Fragile Context Model

One clear, overarching finding from the research was that in Tanzania and Cambodia CPA programs benefitted from having followed many years of broad based ADP community health, education and income generating programs.

This is fully in keeping with WV's value added as a community based poverty alleviation organization in which CPA fits within a broader mandate of social and economic well being and protection. While the Eastern DRC CPA was not based within an ADP the program still was successful in building community ownership.

❖ Community Ownership Recommendations

1. **Build on success in community ownership in communities** such as Kitembeini, Tanzania, and Beni, Eastern DRC, where many other NGO's have failed in partnering with local stakeholders, and WV is succeeding as evidenced in active child and adult participation in CP.
2. **Strategize on the specific role of CPA in ADP programs** both in terms of the value added in building community ownership and including and impacting more MVC (for example through linking CP mechanisms with other ADP structures).
3. **World Vision community ownership would be mutually strengthened by a clearer MVC program strategy articulating and operationalizing WV programming components** of basic needs, livelihoods (e.g. Economic and

Agrarian Development), social change (e.g. C-Change), child rights, youth engagement and life skills (e.g. Peace Road) and compassion (e.g. Channels of Hope).

4. **Sponsorship could become a powerful force for community ownership when focused more intentionally to MVC**, though caution should be exercised to ensure children are protected according to ethical standards, adults are aware of harmful traditional practices and sponsors' expectations are realistically tied to protection measures of success (e.g. applied across the CP spectrum from prevention to protection to rehabilitation).
5. **Build on WVI's CP Theory of Change linking advocacy for MVC, community asset building and economic strengthening such as that applied in Cambodia would strengthen community ownership model for other CP agencies and governments.** - WV clearly brings a unique body of collective experience in community based social protection.

D. Engage with Cultural and Social Norms and Beliefs – Significant challenges and essential resources.

Contrary to the literature review findings, results from research in the three case study countries showed significant success in tackling harmful social norms and beliefs increasing risk for children and in most instances revealed surprising success in harnessing local endogenous protective factors.

❖ Cultural and Social Norms Recommendations

1. **Build on WV promising practice in changing harmful traditional practices as a model of “bottom up” CP systems change through meaningful community conversations.** (e.g. reducing child marriage, supporting girls and other MVC attending schools)
2. **Support protective endogenous practices such as those promoting compassion towards and social integration of MVC and integrate these practices into local policies and by-laws** (e.g. Masai prevention of early marriage and support for pregnant teens attending school).
3. **Explore WV value added in altering harmful cultural practices through faith based interventions, expand to other contexts and faiths through Channels of Hope program.**
4. **Strengthen WV methods such as ADAPT that identify harmful traditional practices and mobilize local community members and their unique assets to mediate these risk factors.**

5. **Continue to apply lessons learned in research with non-formal mechanisms to strengthen formal CP systems at local, district and national levels**
6. **Engage young people in intergenerational activities that strengthen child and adult engagement in collectively identifying and changing harmful traditional practices and enhancing protective traditional social knowledge and practice** (e.g. building on the success of girls involved in child commercial exploitation working with local chiefs in Eastern DRC).

E. Gaps in Evidence – Areas for future research

World Vision’s community approach to child protection systems strengthening, offers a rich opportunity for interagency learning on formal/non-formal CP systems strengthening. Areas for future research include:

❖ Gaps in Evidence Recommendations

1. **Apply the recently developed WV CP theory of change to “bottom up” community based CP systems strengthening to engage children, youth and local adults meaningfully as key experts in this process.**
2. **Explore opportunities for learning from the implementation of WV’s Fragile Context Model and Area Relief Program focus on health, education, sponsorship into Eastern DRC CP interventions.**
3. **Apply population based sampling procedures for protection baseline assessments that provide greater community representation** in initial assessment and a more accurate understanding of both widespread and situation specific risk and protective factors and their interrelation.
4. **Integrate additional reflective/creative child centred and ecological participatory action research tools in WV CPA program cycle** beginning with base line assessment, initial program design and ongoing monitoring
5. **Continue to explore opportunities for building on successful programs such as Cambodia’s community economic entrepreneur program to integrate community based child protection into WV and government social protection models** with particular emphasis on economic strengthening for MVC, their families and communities.

Background:

The following report is the final outcome of a research consultancy being conducted by the International Institute for Child Rights and Development (IICRD, Dr. Philip Cook and Rebeccah Nelems) and Columbia University (Dr. Mike Wessells) for World Vision UK (WVUK). The research mandate is to assess and analyze the extent to which WVUK is reaching ‘the most poor and marginalised’ or Most Vulnerable Children (MVC) through its Child Protection programming – with funding from the UK Department for International Development’s (DFID) Programme Partnership Arrangement (PPA).

This study is conducted amidst a context in which DFID, WVUK and a range of international agencies have identified “a general lack of demonstrable evidence of impact on the most marginalized.”¹ This also entails a lack of evidence about the inclusion of MVC in programming, and data about the various factors that may facilitate or inhibit inclusion and impact. As such, WVUK indicates that the “findings of the research will be of great value to DFID, WVUK, the WV partnership and the wider NGO community by filling some crucial gaps in our understanding of vulnerability and identifying promising practices to deepen programme impact.”

The research applied a multi-method, primarily qualitative, participatory data gathering process to investigate four guiding questions:

Primary Research Questions:

1. **To what extent is the PPA Child Protection programme *including* the Most Vulnerable Children?** – The level and nature of inclusion, and participation in programme assessment, design and implementation. Which groups are or are not being included?
2. **To what extent is the PPA Child Protection programme *impacting* the Most Vulnerable Children?** –The level and nature of impact from programme implementation. Which groups are or are not being impacted?

Secondary Research Questions:

1. **What *barriers* prevent Most Vulnerable Children’s inclusion in the CP programme initiatives?** Where applicable, how does the programme enable MVC to overcome these barriers? What are different understandings of MVC; children and WV staff?

¹ World Vision UK, ‘Most Vulnerable Children: programme inclusion and impact’ Research Consultancy Draft Terms of Reference, January 2013, page 1

2. **How do *children and their caregivers* reduce vulnerability to child protection risks?** What assets and strategies do they use to mitigate risk and increase protective factors?

The **methods** applied in the study include:

- ❖ A review of WV programming literature
- ❖ Review of primary data from WVUK baseline studies on child protection
- ❖ Key informant interviews with senior WV staff (in particular CP teams)

Review of primary data from WVUK baseline studies

There were significant challenges comparing this data across countries due to a variety of issues including: lack of data for certain questions, poor quality data, differing data gathering techniques. A decision was therefore made to not include the results from this section of the review.

Three country case studies (Tanzania, Cambodia and Eastern Democratic Republic of Congo) Methods in the country case studies applied the following participatory action research (PAR) tools:

- ❖ Relational vulnerability mapping of MVC, self protection and program inclusion (using balloon and yarn game with follow up focus group discussion)
- ❖ Social mapping and transect walks (where possible) exploring MVC inclusion and barriers
- ❖ River of Life and Most Significant Change (MSC) activities discussing impact, self protection and MVC through reflective story telling and prioritization of key stories assessing impact
- ❖ Focus group discussions with MVC children not involved in WV programming
- ❖ 2-3 case study interviews with MVC involved in WV programs (minimum 5 per country)
- ❖ Focus groups discussions with adults involved in CP committees, networks and other CP structures
- ❖ Key informant interviews with adults bridging formal and non-formal CP systems (i.e. community based gov't CP/SW workers, police, community leaders, WV staff)

Conclusions summarize key findings and final lessons learned and recommendations are made on ways WV can strengthen child protection (CP) interventions to support the inclusion and impact of MVC in CPA programs.

I Introduction

I.1 Focus and Scope of Review

According to the TORs for the study, the intent of the literature review and KII is “to identify existing knowledge and research gaps related to the inclusion of, and impact on, MVC, particularly in relation to NGO child protection and child participation programming.” Given the finite time and resources of the consultancy and the extensive body of literature concerning MVC, the following review is strategic and summative rather than comprehensive. Since the full literature review is available as a separate document, this section provides an overview of its key findings and points and serves as a foundation for highlighting gaps, challenges and advantages for WV in programming for child protection.

2 A Conceptual Framework

2.1 Reciprocal Relations Between Child Development and Child Protection

Globally, work to support vulnerable children has its conceptual foundations in two closely inter-related fields--child development and child protection--that have circular influences on each other. Child development research has focused primarily on the normal course of children's development in diverse settings and has provided useful analyses of the developmental milestones and outcomes that indicate whether particular children are in the 'normal' range of healthy development. One key insight has been the importance of safety in children's healthy development. In addition, much child development research has examined what causes negative outcomes such as developmental delays, attachment insecurity, failure to achieve particular milestones, and developmental psychopathology.

Work in both areas has been influenced extensively by the social ecological approach (Boothby, 2008; Bronfenbrenner, 1979; Dawes and Donald, 2000) that recognizes the importance of the child's ongoing interactions with parents and other family members, peers, community members, social institutions such as church and school, and aspects of the macro-system such as the national media, the political environment, and the national economic system. Among a wide variety of visual representations, the Ecological framework below is valuable in relating children's social ecologies to children's rights, including protection rights. (Cook & Du Toit,

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2005).



An ecology of child development and protection

Indeed, work on child protection is typically viewed as one modality for helping to achieve children's rights, the fulfillment of which enables healthy child development.

Because child development and child protection are richly intertwined, it makes sense to attempt to strengthen the practice of child protection by drawing on key conceptual insights from child development research, building on the success now enjoyed by ecological approaches. This section presents a framework of risk, resilience, and protective factors and then explores some of the implications for practice.

A core idea inherent in the ecological approach is that exposure to risks, particularly to multiple risks, causes harm to children. Developmental research has shown that there is an exponential relationship between risk accumulation and harm to children (Rutter, 1979, 1985).

The effects of exposure to risks may be offset at least partially by exposure to protective factors, which have been described as having a buffering effect, a shielding effect, or an offsetting, mitigating effect. Like risk factors, protective factors may be present at different levels of the child's ecosystem and may include, for example, a caring parent, a friendly peer, a supportive teacher or religious leader, among many others. Protective factors may also be internal processes or functions such as a child's problem-solving competencies, ability to cope with and stay calm in the face of adversity, and engage in self-protection. As discussed below, strengthening protective factors is a key part of work on prevention in child protection.

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3 Key Literature and KII Findings

3.1 Key Trends and Debates

This section provides a summary overview of the key trends, knowledge, debates and gaps found in the literature and KII with respect to MVC and programming aimed at including or impacting upon MVC. In the interest of strategically contributing to the above consultancy, the paper focuses on current approaches, trends and issues.

Definitional Issues

Even a cursory review of the literature reveals that the issue of defining and identifying who are the “most vulnerable children” or MVC is a critical challenge that all agencies engaged in the child protection sector have faced in the past and continue to face in the present. This issue is core to the questions of inclusion and impact in that it influences which children agencies aim to include in their programming and how these agencies go about understanding and measuring the impact of child protection programming and its effectiveness at decreasing or reducing vulnerability in their lives.

The literature shows a clear and recent trend among international agencies that engage in child protection work toward systemic views of vulnerability. The recently published joint interagency statement (on which World Vision International was one of the principals) entitled ***Strengthening Child Protection Systems in Sub-Saharan Africa: A Call to Action*** wrote:

“...An individual child can be confronted by multiple needs, violations and vulnerabilities, of differing durations and severity in both stable and emergency settings. For example, a single child might suffer from severe neglect, exploitation, family separation, and sexual violence. Exposure to multiple risks can greatly increase the likelihood of harm to the individual child. Because of this, systemic approaches aim to move away from fragmented, single issue responses and instead aspire to more holistic, comprehensive and sustainable interventions that take account of the multiple risks that children confront in different contexts and at different stages of their lives.” (African Child Policy Forum, et al., 2013, p. 2)

This view, which resonates well with the ecological framework on risk, resilience, and protective factors presented earlier, provides an important part of the rationale for the paradigm shift away from focusing on particular groups of vulnerable children toward the strengthening of national child protection systems. This shift, which is global in scope, is also motivated by the desire for better, integrated practice and a stronger emphasis on prevention and early intervention. When the emphasis of child protection agencies had been on supporting particular categories of vulnerable children, the work on categories such as children living on the streets and children recruited into armed forces or armed groups frequently proceeded

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independently and with different tranches of funding. In reality, however, there was dynamic interplay between the issues, as children who lived on the streets were frequently the children who were recruited in mass roundups in market places, and some formerly recruited children lived on the streets.

This systemic view of children's vulnerability resonates with World Vision's definition of MVC (see box). In particular, the reference to extreme deprivation and violations of children's rights and to catastrophic situations and relationships, and the deliberate mention of violence, abuse, neglect, exploitation, exclusion and discrimination points to both the magnitude and the multiplicity of the risks that, collectively, can lead children to be MVC. Similarly, World Vision's four factors of vulnerability are highly systemic (Forbes, 2012; Lorey, 2012; WVI, 2012; Forbes KII, 2013). For example, extreme deprivation in the form of severe, chronic poverty can serve as a driver of multiple risks to children such as being out of school, engaging in dangerous labor, use of drugs and alcohol, etc. Similarly, vulnerability to negative impact from a catastrophe or disaster frequently relates to exposure to multiple risks such as family separation, multiple losses, inability to meet basic needs, and sexual exploitation, among others. The importance of exposure to abusive, exploitative relationships has been highlighted by research in areas such as the Occupied Palestinian Territories, showing that, amidst political violence, the children who did most poorly were children from abusive families (Garbarino & Kostelny, 1996).

World Vision's Definition of MVC:

“Most vulnerable children are children whose quality of life and ability to fulfil their potential are most affected by extreme deprivation and violations of their rights. These children often live in catastrophic situations and relationships characterised by violence, abuse, neglect, exploitation, exclusion and discrimination.”

In its literature, WVI and WVUK have outlined **four factors of vulnerability**:

1. **“abusive or exploitative relationships**: relationships which are characterised by violence or use of a child to benefit others sexually or commercially, or which consistently harm the child through intentional acts or negligence
2. **“extreme deprivation**: extreme material poverty or deprivation of caregivers
3. **“serious discrimination**: severe social stigma which prevents children from accessing services or opportunities essential to their protection or development
4. **“vulnerability to negative impact from a catastrophe or disaster**: natural or manmade events can seriously threaten the survival or development of a child, and certain children are more likely to be affected negatively and less likely to be able to recover.”

How organizations frame vulnerability ‘factors’ differs depending on the organization. Based on her assessment, Sue Coe, Development and Disability Consultant to WV, concludes that “World Vision’s definitions of most vulnerable children are in line with the directions that other agencies” – such as Plan (2007) and Save the Children – “are moving in” (Coe, 2011).

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According to Coe, the alignment of this definition “should help facilitate effective cross-organisational working, especially in the area of advocacy” (Coe, 2011).

Indeed, strengthening CP systems is largely equated with supporting MVCs within WV’s approach: “The primary beneficiaries of the CPA project model are children who are at risk of, or currently suffering in situations of abuse, exploitation, neglect, discrimination or other forms of violence within families or communities.”² The CPA project model tool explicitly supports “Using a systems approach to reduce vulnerability” through the strengthening of all components of the formal and informal child protection systems “so that one unified local level response for protecting children is developed at the community level.” The CPA project model then links “evidence coming from community level with advocacy efforts at the national level for greater protection of children, especially the most vulnerable.”

The CPA Project model has four key components:

- ❖ 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.

WV’s Analysis, Design and Planning Tool (ADAPT) for child protection “provides guidance for both national and local level child protection analysis and mapping (World Vision, 2011). Local partners can then collaborate in using the CPA project model and toolkit to develop strategies

A regional approach to defining vulnerability in the context of MVC (WV MEER)

At field level, too, the definitions of MVCs fit with the systemic perspective. In her discussion of MEER region, Coe handles the challenge of how to refer to MVC and the vulnerabilities they face by identifying both a range of categories of MVC as identified in the region under study, as well as a list of what she refers to as “underlying factors” or factors that “cut across” all of the groupings / categories of children identified in the study. These are as follows:

- ❖ Lack of opportunities and/or a denial of rights
- ❖ Lack of access to services
- ❖ Severe discrimination – this issue in particular “underpinned” a lot of the factors that led to lack of access to services. A major reason accounting for this was the stigma and discrimination all groups faced. Where the birth of children was not registered (for example in Lebanon amongst refugee groups, amongst many Roma communities, amongst disabled children) this meant accessing services is virtually impossible
- ❖ Culture” of the communities the children live within. This was often referred to as “mentality”. This included parents who withdraw girls from school early in order to marry, and withdraw boys from school in order to work on the streets.
- ❖ “...hopelessness about the future” – this was especially pronounced in the contexts where conflict was prevalent, but also amongst communities that substantially lacked social safety nets. In Lebanon and Bosnia, especially clear expressions were made about the difficulties of children seeing a good future for themselves.” (Coe, 2011)

on how best to strengthen the protection of children at the community level.”³

Similar to IICRD’s Circle of Rights process (Heykoop & Currie, 2012), WV documents / guidelines such as “Exploring our Context” (parts 1 and 2)⁴ show that a contextual analysis begins with a focus on and mapping of strengths and assets through the use of highly participatory exercises. It further moves on to using participatory methods to draw out an understanding of local perspectives on well being.

The Paramount Importance of Participation

Across the literature, the importance and value of participation is identified as being paramount to the success of any initiative to include and impact upon MVC – with the caveat that no potential harm is identified as being associated with this participation. As these harms are not always foreseen, some agencies such as WV have developed processes and forms that aim to identify and manage or prevent unintended harms. These should explicitly include an analysis of ongoing stigmas or biases from other community members that may be inflicted on them through their participation.

While there is general consensus on the import of participation, however, examples abound in which children’s participation – especially by the most vulnerable children – has been tokenistic, limited and/or absent all together. In the case of 'Puppets or Players: A Review of Child Participation Approaches in Africa,' (2008 WV Africa), for example, while goals outlined include ensuring the participation of “all girls and boys” and child participation is viewed as “a key indicator of transformational development”, some of the programs reviewed do not suggest a high degree of attention paid to MVC. Furthermore, a 2009 inter-agency evaluation of community-based child protection mechanisms (Wessells, 2009) reported that levels of meaningful participation by children has been low despite widespread agreement among child protection agencies that children's participation is of fundamental importance.

This gap between what is promoted and what is implemented in actuality has also been particularly prominent in the realm of monitoring and evaluation (Wessells, Lamin, King, Kostelny, Stark, Lilley (2012). This is unfortunate since children have creativity, insights, and lived experiences that can and should help to guide and enrich monitoring and evaluation work. While some examples of highly participatory M&E approaches, tools and case studies exist they are few. However, one valuable suite of approaches, tools, insights, and lessons may be found in the IICRD's Child-Centred Accountability and Protection Evaluation (CAPE) Project

³Child protection advocacy (CPA): Effective Interventions for strengthening the child protection system at the local level

⁴ Other WV guidelines and documents such as “What do children think?” also show a strong participatory and strength-based approach to working in community and with children.

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(http://www.iicrd.org/work/projects/child_protection/cape). These were central to the field work discussed below.

Some of the challenges identified in the literature as having negatively affected the participation of MVC in programming include:

- ❖ Their marginalization reduces their likelihood of engaging with international actors or child protection agencies as they are frequently invisible and do not attend public meetings
- ❖ They may live in locations remote from the sites in which programming is implemented
- ❖ Gender roles in the community frequently limit girls' and women's participation in activities outside of their customary domains
- ❖ Potential risks (whether actual or perceived) to them may be posed by participating
- ❖ The government (or disasters or insecurity) may block access to certain areas
- ❖ Local biases and exclusionary practices limiting inclusion or comfort levels

This trend may be changing within WV and other agencies with tools such as WV's ADAPT leading with children's understanding of protection threats and using children's perspectives to engage adults in mapping protection risks and protective mechanisms (Mikhailidi KII, 2013). These and other rights based approaches are helping strengthen child participation in hard to reach populations of MVC such as child sex workers, victims of trafficking and children living in conflict affected communities (Shields KII, 2013). Future efforts in CP will have to contend with new challenges such as the threats of ICT, as well as exploring how tools such as ICT can better engage children in monitoring and evaluating CP interventions (Cook, Heykoop, Anuntavoaskul & Vibulphol, 2012).

A Need for Community Ownership

There is general agreement and consistency across the literature and within different agencies that working through and supporting community-based child protection mechanisms (CBCPMs), especially through building on existing structures, is an important approach to effective and sustainable child protection systems change. In a global, inter-agency review of the effectiveness of community-based child protection mechanisms, Wessells (2009) notes that community ownership of child protection mechanisms such as Child Welfare Committees or traditional elders' councils was the most important determinant of the effectiveness and the sustainability of those mechanisms. However, the review observed that the majority of NGO interventions that facilitated or established community-based child protection mechanisms used a mode of engagement that did not encourage high levels of community ownership. The dominant approach emphasized power sharing between the NGO and the community, with the

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latter providing key volunteers and ideas about how to make the intervention work. At the end of the day, however, most community members saw the intervention not as theirs but as the work of the NGO, and said things such as "This is a Save the Children project" or "This is a UNICEF project."

WV's approach is consistent with the approach of developing community ownership of child protection mechanisms and internally guided social change: "CPA aims to assist communities to identify and speak out on issues and problems that vulnerable children face with a view to addressing them by working towards bringing about necessary change. This can only succeed when community ownership of the advocacy process is ensured. Strengthening community structures and systems must be at the heart of activities geared towards ensuring community ownership of the advocacy processes of child protection, for the sake of sustainability of children's well-being." Documentation and key informant interviews also emphasize that, "it is important to always ensure that the voice of the most vulnerable is heard and considered" (Mikhailidi KII, 2013; WV, Child protection advocacy).

Increasingly social protection strategies, in which social and economic aspects of programming for most vulnerable families and communities are integrated, are being seen as an important component of child focused social policy. Key informant interviews indicated that social protection can be a strategic way to encourage community ownership of child protection programs as part of whole family approach to support for vulnerable children (Kean KII, 2013). Lessons learned from social protection programmatic support for orphans and vulnerable children (OVC) should be drawn upon to inform the emerging systems strengthening approach to MVC (Kean KII, 2013).

Engaging with Cultural and Social Norms and Beliefs is at the Heart of Child Protection Work

Discussions about cultural and social norms, beliefs and practices are prominent in the literature with respect to the inclusion of and impact upon MVC through child protection programming. They show up predominantly in two distinct ways:

- ❖ **Significant challenges** to actors promoting children's rights, as cultural and social norms can be used to enforce or condone behaviors, attitudes and practices that are seen as sources of vulnerability that contravene children's rights (e.g. child marriage, female genital mutilation, violence); and simultaneously, as
- ❖ **Essential resources** in understanding and improving the local, social and cultural contexts of children's lives, including the meanings assigned by various stakeholders to particular practices, behaviors or the experiences of children.

While these two perspectives are in tension, both discussions reach the conclusion that it is critical for external child protection agencies to work closely with communities and children in a participatory manner in order to try and understand local beliefs, values, and practices and the meanings assigned to local practices. Both approaches also recognize that cultural beliefs and practices are not fixed and unchanging but are dynamic and evolving, particularly as population movements, the global economy, and electronic media such as the internet and cell phones expose young people to a mix of ideas from different countries and social and cultural systems.

The reviewed literature frequently identified the challenge of working in the area of child protection where local beliefs and practices directly contravened international children's rights standards and child protection agencies' strategic priorities and objectives. The challenge is referred to in various ways – as “culture” (Coe, 2011) or “mentality” (Coe, 2011), “harmful traditional practices” (Dagne, 2009), “community mindsets” or “local bias”, “individual and community attitudes... behaviors... and traditions” (Wamimbi, Kean, Maingi, Odedo, 2011). This paper draws from the terminology offered in the WVI report, “Strongim pikinini: Enabling children to reach their full potential”, which refers to these norms as both “cultural” and/or “social” in recognition of the fact that “not all negative practices are cultural but rather have become socially acceptable regardless of the initial source or origin” (WVI, 2005).

The WV literature that was reviewed noted that local people frequently did not identify as harmful certain practices that cause harm and that are prohibited by international child protection and child rights standards. Indeed, the gap between local views and practices and international child rights standards is often a salient starting point for child protection programming.

Protection workers' and agencies' internal biases and assumptions can affect their understanding of vulnerability factors and well being in a given context, and hence, their approach to CP programming

Practitioners promoting a contextualist approach to CP (Myers and Bourdillon, 2012) express concern about the potential bias of external child protection practitioners and agencies related to their potential leaning towards a universalist approach, as well as to their personal beliefs and experiences. These authors caution that engaging communities on issues of their culturally and/or socially accepted beliefs and practices is not only a delicate matter that requires a high level of sensitivity and investment of time and resources; it also requires a high degree of serious self-reflection amongst practitioners themselves about both their personal and organizational assumptions and agendas that might mean one naturally biases or favors their own assumptions rather than looking at the various local experiences and meanings assigned to a particular practice, tradition or behavior.

Gap in Evidence about Impact of Child Protection Programming on MVC

Widely recognized by development and child protection agencies alike, this gap can partly be understood in the broader context in which the definition of vulnerability – and hence the nature of evidence gathered – has been changing and evolving. This lack of an evidence base of high caliber, however, contributes to the invisibility of the most vulnerable children and the ongoing silence around their concerns or needs (Coe, 2011).

This gap reveals the limitations of risk-based indicators alone in understanding and measuring changes with respect to positive changes within both the informal and formal child protection systems. As outlined in the preceding sections, there is a need to combine risk-based indicators with indicators of strengths and protective factors. Without both, the risk exists of having programming focus too much on deficits and reducing risks while not addressing also the strengthening of protective factors.

A significant gap is also evident in the lack of participatory M&E approaches, methodologies and tools, enabling the collection of data that children, families and communities have identified as meaningful to them. While some approaches are being actively piloted and used (e.g. the IICRD CAPE project, 2012), these tools and approaches are still far too rare amongst the broader child protection sector (Nelems, 2012).

Knowledge gaps, lessons and evidence of promising / good practices were documented in the literature in regard to:

- ❖ **Effective approaches in addressing vulnerabilities in certain contexts**, such as conflict settings, post-conflict environments, and humanitarian emergencies
- ❖ The specificity of **certain types of vulnerabilities**, which supports an analysis amongst child protection practitioners and agencies about what to look for when monitoring

The full range of knowledge and gaps specific to each of these contexts and vulnerabilities is not presented here due to limitations of space and resources. However, several examples identified in the literature are highlighted to showcase the types of knowledge and gaps identified in these two domains.

Challenges

- ❖ **Knowledge about effective approaches** in addressing vulnerabilities in certain contexts (e.g. humanitarian contexts)

- ❖ **Knowledge and gaps identified** about the specificity of certain vulnerabilities – what to look for and how to assess vulnerability and protective factors (e.g. abuse related to widely accepted local practices such as FGM, risk associated with lack of services, neglected children)
- ❖ **Knowledge about emergent child protection** such as the effect of Internet and Communication Technologies (ICT) on children’s lives and abuse directed at lesbian, gay, bisexual or transgendered young people

The case studies that were undertaken through this research consultancy provide some data with respect to WV staff capacity to support a more nuanced and critical analysis of vulnerability in a range of contexts, as well as the appropriateness of WV’s programmatic response to childhood vulnerability. These findings are presented and discussed in the following section of the report with particular emphasis on the themes of definitional challenges, child participation, need for community ownership, addressing cultural and social norms and beliefs, and gaps in evidence.

Country Case Study Research Methodology

Direct research with children and their communities was conducted in three countries in which World Vision was providing child protection programming supported by the DFID funding. The countries chosen, Tanzania, Cambodia and the Eastern Democratic Republic of Congo (DRC), were selected based on geographic and cultural diversity and as examples of WVUK promising practice in community based child protection. Eastern DRC was chosen to represent a community-based approach to child protection in a complex emergency context.

As a result of the literature review and KII, a series of themes were explored to add substance and guide the understanding of responses to the 4 main questions⁵. These themes include:

- ❖ Explore the value of a categorical vs risk/protective factors approach to community CP interventions
- ❖ Understand the complexity of vulnerable children's lived experiences and participation as an entry point for framing their capability to participate in CP interventions
- ❖ Deconstruct the various dimensions of community ownership as a key variable in understanding inclusion and impact
- ❖ Explore protection practitioners' engagement with cultural and social norms and beliefs as drivers in successful CP strategies
- ❖ Identify gaps and opportunities for evidence based approaches to CP strengthening

Case study samples

Adult and child samples were purposive and included:

- ❖ Groups of children (10-20) between the ages of 12 - 18 (including groups identified as MVC for example, children with a disability living in remote locations, children working

⁵ Four Research Questions:

1. To what extent is the PPA Child Protection programme *including* the Most Vulnerable Children?
2. To what extent is the PPA Child Protection programme *impacting* the Most Vulnerable Children?
3. What *barriers* prevent Most Vulnerable Children's inclusion in the CP programme initiatives?
4. How do *children and their caregivers* reduce vulnerability to child protection risks?

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in brick factories, migrant children, child soldiers, girls working in child brothels, street children, etc.)

- ❖ Children (aged 12 – 18) involved in World Vision children’s clubs or children’s parliament
- ❖ Relevant CBOs such as Women’s / Mother’s groups, OVC support groups, FBOs.
- ❖ Community or District level Child Protection Committees or Teams.
- ❖ Relevant Local and District level government staff (e.g. Ministries of Social Welfare, Special Child Protection Police, Education, etc.).
- ❖ Relevant UN agencies such as UNICEF and MONUSCO in the Eastern DRC
- ❖ World Vision local programme staff & PPA & Child Protection coordinators at national level.

Vulnerability and Domestic Violence (Elizabeth, 12 year old girl from Boko, Dar Es Salam)

I grew up in Boko, on the outskirts of Dar Es Salaam, my life has not been easy as my mother and father often quarrel and would take their anger out on me. My father left us 4 years ago and now my mother beats me, tells me I am to blame for him leaving and threatens that if I tell anyone she will abandon me. I am often sad that she hates me. I have been a member of the WV children’s parliament for 2 years and enjoy playing games with my friends, especially netball. I have also learned to speak in public (something I would never have done before) and raise awareness about children’s rights with other vulnerable children. I cannot change everything but I can change some things. This year I helped a young girlfriend, Sabrina, who was pregnant to speak with the community Social Welfare Officer and her parents to find a way to keep her baby and continue with her schooling. I am still frightened about my own situation and have asked the WV staff not intervene with my mother but we are talking with my auntie to find a way forward.

Training was provided to WV staff assisting with the research drawing on the research experience of IICRD and Columbia University. Specific child centred, participatory research tools were drawn from global good practice in child protection PAR with children and included IICRD’s Child Accountability Protection Evaluation (CAPE) methods (see www.iicrd.org/work/projects/child_protection/cape). Other ethnographic methods were applied to focus on contextual child protection issues.

Ethnographic, narrative, group sessions with children and adults were typically run in a workshop format using experiential activities that both generated qualitative data and encouraged participants to reflect more deeply on protection issues. Data collection was verified and enriched using a layered, triangulated approach to activities, in which themes would resurface and be approached from different perspectives in different sessions. Single person interviews were conducted to compile case studies on specific issues of vulnerability and resilience and to explore MVC from different “ecological” adult and child perspectives (e.g. child, caregiver, committee member, community leader, government service provider, World Vision staff etc).

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Having triangulated the data from the results of the research activities conducted in the three country contexts, there are some observations from the two lead researchers, grouped by research question. For each set of observations, corresponding recommendations are offered. In both Tanzania and Cambodia, urban (Dar es Salaam, Phnom Penh) and rural (Kiteimbeini, Kohkolor) sites were included in the data collection. In Eastern DRC, the data was collected in Beni, a medium sized town in Northern Kivu province. Also, in Eastern DRC a broad based community development approach was used as opposed to the more typical CP entry point of building on WV's Area Development Programs (ADP).

Who are the Most Vulnerable Children?

A first step in the research involved identifying who the most vulnerable children are in order to the better understand their inclusion and impact from WVUK programs.

I. Understanding of MVC.

Observation – Overall, there was generally good convergence of the views of young people, adults, and the WV staff particularly in both Tanzania and Cambodia urban and rural centres. Relational Mapping, Social Mapping Transect Walks (conducted in Tanzania and Eastern DRC) with children and focus groups and key informant interviews with adults revealed that many vulnerable children were being identified in relation to CPA programs. These included:

Tanzania

Children out of school, street children, girls at risk of early marriage, children being physically or sexually abused, boys involved in cattle herding and girls exposed to female genital mutilation (FGM)

Cambodia

Girls being sexually abused, children working in brick factories, children suffering from domestic violence, trafficking

Eastern DRC

Boy soldiers, girls working in child brothels (Maison de Tolerance), street children, children living on the outskirts of Beni who were prone to abduction, and children in rural villages who periodically migrate to Beni for school or work.

In some instances, children and adults held



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quite different views on MVC. A gap between children's and adults' views occurred in Tanzania, where MVC were underrepresented in children's clubs and youth parliaments. For example, adults in Tanzania frequently had a more nuanced understanding of deeper root causes of vulnerability, including socially excluded girls working in abusive hidden domestic labour, whereas young people in clubs tended to refer to more socially visible groups of MVC such as street children selling sweets and cigarettes.

However, adults' understandings of MVC were not always nuanced or even accurate. For example, members of Phnom Penh's Child Protection Committees (CPC's) and Child Protection Networks (CPN's) said consistently that girls and boys faced the same vulnerabilities and there was no difference between them in regard to who was most vulnerable. This view sits poorly with staff observations and a wealth of evidence from diverse settings indicating that patterns of risk and vulnerability are highly gendered. Also, the social mapping by youth 14-17 years indicated greater risk of sexual abuse for girls than for boys.

In the Eastern DRC, children and adults also had differing views on MVC. Adults focused more on groups of children without birth registration, children affected by domestic violence and children who were excluded due to disability, while children identified children suffering from extreme exploitation such as child soldiers, street children and girls engaged in commercial sexual exploitation. Interestingly, while the children participating in WV clubs did not themselves belong to these groups of MVC, they knew exactly where these MVC children lived, how and where they had been abducted, and the overlap between groups of MVC (e.g. many street children were both at risk of abduction and some were former child soldiers).



Masai boy herding goats in Tanzania

Furthermore, in many cases they were already beginning to reach out to these MVC to encourage their participation in WV activities.

Recommendation

- ❖ **Capacity building should be provided to world vision staff and adults leading CP committees on exploring deeper root causes of vulnerability.** Ongoing capacity building should be provided to world vision staff and adults leading CP committees on exploring deeper root causes of vulnerability, focusing on: gender, social exclusion (including geographic exclusion), children on the move, harmful

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cultural practices, especially neglected children (e.g. children affected by HIV/AIDS) and children affected by armed conflict (boy soldiers and girls working in child brothels). Children's knowledge of MVC should be included in this process.

Based on the findings from Tanzania, Cambodia and Eastern DRC, a parallel focus should be on primary protective mechanisms. These might include: Access to sustainable livelihoods, access to a web of caring relations, broader social and geographic inclusion, education of children and their care providers, life skills and child rights training.

2. MVC's were Defined Primarily through Categories Rather than Factors of Risk and Protection.

Observation – Overall, Community Child Protection Committees and youth club members tended to define MVC by categories, as did the WV child protection staff. Frequently mentioned categories were children in families that have domestic violence, children who are sexually abused, children who are out of school, children involved in heavy or dangerous labor, and street children. Less frequently mentioned categories included migrant children, children with disabilities (including mental disabilities), children who use drugs and alcohol, children affected by HIV and AIDS, children involved in gangs, child soldiers, and girls involved in commercial sexual exploitation. The limits of this categorical approach to defining MVCs became apparent in discussions with youth. As noted in three Case Studies, a boy and a girl with a physical disability in Tanzania and Eastern DRC, respectively, and a Cambodian orphaned girl initially appeared to be MVC based on categorical criteria. Subsequent observation, however, indicated that they were quite normal, well functioning and resilient, in some cases even without participation in the youth group and other WV activities.

Recommendation

❖ Develop capacity of WV staff in balancing risk and protective factors.

There should be ongoing capacity building in regard to conceptions of vulnerability, with attention given to the balance between risk and protective factors. If initial trainings emphasize vulnerable categories of children, it will be useful to have the ADP staff and youth connect with diverse members within various sub-groups and to reflect on the differences within each category, linking them to the risk, resilience, and protective factors framework using an ecological approach. Also, ensure the use of CP definitions focusing on violence and exploitation, and include more difficult to identify situations relating to neglect and extremely marginalized children.

3. Risk and Deficit Factors are More Widely Applied and Understood than Protection Factors.

Observation – While many children, families, community leaders and WV staff could readily identify key groups and children needing special protection, the same understanding was often lacking in recognizing how protective mechanisms might prevent or ameliorate

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these risks. In many instances, protection was described in relation to educational activities such as awareness raising or child rights campaigns. Seldom were children's own self protection capacities, family love and support, or positive cultural practices mentioned (e.g. naming ceremonies when even vulnerable children are recognized). This contrasted with perceptions from WV CP staff in the three countries, where staff reported there was good local awareness about the importance of self protection.

Migration, vulnerability and assisting other MVC (Kimtry, 17 year old girl involved in migration, Svay Pak, Phnom Penh, Cambodia)

I dropped out of school when I was thirteen because I needed to support my family. When I was fourteen I wanted to work in Malaysia, so I spoke with a broker who took me to the border and handed me to another broker. I was taken to a house in Malaysia and held there for 10 days, our passports were taken and we were never allowed to go out, I was very fearful. I was then taken to a clothing factory where we had to work many hours and were mistreated, there were many men and few women and I was very afraid. Eventually, I was sick and very sad and wanted to go home. I was told my family had to pay the broker \$200. My family could only raise \$150 and we are still paying the debt to the loan shark who loaned us the money. I was only released because my brother came to negotiate my return. Many youth from Cambodia go to work in other parts of the country or in Thailand or Malaysia, many are like me with little or no information. I think we need more information on safe migration. I have since gone to work in Thailand after hearing about a kind longen fruit farmer where my sister worked, and I have shared this information with my two younger nieces who will come with me this year. There are a group of youth who have experience migration in our community who are now educating other young people who want to migrate.

Recommendation

- ❖ **Develop capacity building materials to assist CP stakeholders understand local protective mechanisms.** Apply an ecological, contextual approach to explore this in unique CP situations with a “systems” understanding that interrelates risk and protection.

Consideration should be given to developing a “core list” of protective factors, including social protection, to mirror the core risk factors that WV currently applies. Results from this research suggest these might include, but not be limited to: 1) Support for children's basic needs and economic interventions for most vulnerable families, 2) Caring and nurturing relationships; 3) Justice and accountability; and, 4) Social empowerment and agency.

To What Extent Is the PPA Child Protection Programme Including MVCs and What Barriers Limit Inclusion?

I. Moderate and Less Vulnerable Children and Youth are Being Included and Referrals are Being Made but Many MVC are Still Excluded.

Observation – Vulnerable youth are included in the youth groups and also in activities such as campaigns, role-plays, life skills and other awareness raising processes. At present, the project is successfully engaging children and youth who face moderate levels of adversity and vulnerability. Most of the youth group members whom we talked with had faced significant adversity, although, as explained above, the adversities for some people had been offset by protective factors such as living with loving parents who knew how to care for and protect their children.

Overall, the project is successfully engaging a wider diversity of vulnerable youth than NGOs typically reach through activities such as Child Friendly Spaces. It is difficult to say, however, that the youth group members are MVCs since, as discussed below, significant numbers of the most vulnerable children and youth were unable to participate.

Similarly, in Eastern DRC some MVC including child soldiers, girls working in brothels and street children refused to participate in WV youth as they considered these activities to be too “childish”, felt they would be stigmatized by other children, or had economic needs that precluded their participation.

The experience of a former child soldier (Martin, 17, Beni, Eastern DRC)

I was born in Bukavu and my mother and father still live there. Because of poverty and the inability of my family to pay school fees, I went to live with my uncle in Beni. I attended form 4, 5 and 6 but then I had to drop out due to my uncle's increasing economic hardships. I worked in his home for a while but his wife hated me and when she wrongly accused me of theft one day, I was forced to run away. I began to sleep on the streets and made friends with other children living there. I eventually went to work in one of the local informal coltan mines with some of the boys. The work was hard, toiling in the dirty water and hot sun all day. One day rebels from a local Mai Mai (home militia) group came and abducted us. They walked us deep into the forest telling us not to be afraid that we would be cutting wood for which we would be well paid. Eventually we reached a small village and were welcomed by the local Chief who told us we would be fighters and that his medicine would protect us. I was trained to help make the medicine. They said the medicine would work but I knew it wouldn't protect us from death as many boys would go on missions to fight the government armed forces and few would return. Finally, three of us decided to try and escape knowing that we would also soon be sent to fight. We were caught however. One boy was killed immediately in front of the other boys and the remaining boy and myself were put in a large pit for one month with almost nothing to eat. After a month we were allowed out and given permission to roam the village. One night government soldiers attacked the village and we fled walking on foot for many days through the jungle until we reached a road. Many people refused to help us, as they feared us, however, finally a car picked us up and took us to a local Quartier Chef (community head man) in Beni. The Chef was kind and introduced us to the NGO Benevolence Pour L'Enfance (Bonenfance) where I am now enrolled in the “rebound” program learning to be a mechanic. They have also reunited me with my parents and I hope to go home again one day. They have also helped resolve the problems with my uncle, I feel that I am now treated like a human being, I am not alone, there are many children like me and we give thanks for the opportunity to rebuild our lives.

Recommendation

- ❖ **Exercise caution in stating programmes include all MVC.** Be cautious in saying that the programme is reaching MVCs. To speak of the current youth group members as MVC may be an overstatement, and a humble approach is appropriate. Since it is natural that the inclusion of MVCs should take a relatively long time, it is useful to work in a phased approach that progressively engages MVCs as part of a long-term change process. Although the project is moving in the right direction, structural barriers will need to be addressed through long-term work in order to include the MVC.

“*Rok prek kvah la ngeach*” (“one scratch one peck”)– Khmer expression for the most vulnerable families who live from one meal to the next

2. MVC Frequently Must Work or Move for Reasons Pertaining to Livelihood and Cannot Engage in Youth Clubs as Currently Configured.

Vulnerability, resilience and child work (Daran, 14 year old boy with a physical disability working in a brick factory, Svay Pak, Phnom)

We came to Phnom Penh twelve years ago when I was two. We were forced to leave our farm and my father also left us. For the first 8 years we lived in the brick factory and I have been working there since I was four. Life has been very hard and my leg often bleeds when I lift the heavy bricks in the very hot conditions in the factory. Sometimes the hot bricks fall on us. Now we have a small house across the road from the factory and I am going to school as well as working. I use the little money I save from my work to take extra tutoring in English and Khmer literature – I want to be a teacher when I am older. I was invited to join the youth club but my education is more important so I don't go. World Vision has supported our family a little with sponsorship and in addition to the brick income my auntie collects rags. We are a strong family who love each other and we will prevail.

Observation – In many communities, the largest numbers of MVC were out of school, spent their time far from communities tending animals, working in brick factories, as domestic workers or seasonal migrants, or lived on the streets. In some cases in the Eastern DRC, girls were left with few opportunities except to work in child brothels, what might be called “thin agency”. Direct participation and inclusion in project activities was not an option due to social exclusion and economic necessity, and the wish of both the children and their families that the children spend their time doing activities such as tending cattle/goats that would help to support the families and meet basic needs. As discussed below, the CPA in its present form is unable to include or to provide highly significant benefits to the MVCs.

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Recommendation

WV CPA programming would be strengthened by addressing systematically the profound structural barriers to direct inclusion of MVCs. Primary among these barriers is severe, chronic poverty, which the ADP process can potentially help to address. Other barriers include the nature and timing of activities, physical location, and appropriate facilitation that promotes a welcoming environment for highly stigmatized groups of children (e.g. street children). It is suggested that WV develop and test a model wherein child protection and livelihood activities (including value chain analysis and macro-system considerations) are more thoroughly integrated and are implemented in a manner that enables children in very poor families to attend school regularly and achieve reasonably well academically. This is crucial since being out of school was observed to be a gateway to a host of other problems such as engaging in heavy or dangerous work and using drugs. It would be useful to engage staff and community members in a reflection about why the MVCs are not being reached and the steps that would be needed to achieve more complete inclusion in the programming.

Baby Moses and the charity of sister Katungo (Mrs. Katungo, 38, Beni, Eastern DRC)



Sister Katungo is a quiet, composed 38 year old single mother of 6 children and one infant, baby Moses. She lives in a tidy shack by a small river in Southern Beni, in a new community of squatters whose homes infringe on a surprisingly pretty meadow and pine forest. She explains how she came to adopt little Moses. “My eldest son was sick and a friend had come to bring him some medicine. As she was leaving she shouted and came running back to tell me that there was a young child wrapped in rags abandoned in the reeds on the edge of the river. I asked if she could take the baby to the clinic but she was afraid and said, “you are a nurse, you can help the child”. I also asked some boys playing football to assist but they wouldn't come as they thought it might be a demon. The baby was just hours old and I took it to the Quartier Chef. We brought the baby to the hospital where they cut the umbilical cord and cleaned him. I asked if the hospital or Chef could care for the baby but they said there was no home and that I should keep the baby and they would try and help. The Chef alerted the local Child Protection Committee and World Vision staff and they came and helped by giving me a little food and seeds to grow more crops. Over time the Committee has been very helpful and given me baby clothes and the Chef has negotiated that Baby Moses, we named him this after finding him abandoned in the river, will receive free medical care for his life as support from the Government run local clinic. The protection committee has provided important support and advocacy for me and I am happy to have Moses as my son”.

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3. Families Mediate Child and Youth Participation.

Observation – Families mediated young people's engagement to some extent. Where the family took an interest in the activities and regarded them as positive, the youth tended to join the youth group. However, youth were much less likely to participate in a youth group if their family saw it as a waste of time or as not adding value. The design of the current research did not permit a careful assessment of the views of families whose children did not participate directly in the project activities.

Recommendation

- ❖ **Involve families in discussing barriers to children's participation.** To gain a better understanding of barriers, engage in a process of ongoing dialogue with and learning from families and children who do not participate directly in the program activities. For reasons outlined below, it will be useful to identify whether the main barriers are economic, structural, cultural, conflict related, or other.

To actually support these MVC to overcome barriers, WV should consider providing some form of economic support for most vulnerable families so that their children can engage more directly in WV CPA programs.

Governments should also be involved in a broader social protection approach using cash transfers as an incentive to reduce barriers and encourage inclusion.

4. WV CPA is Developing a Potent Triangle of Protection, Child Rights and Compassion.

Observation – Community child protection committee and youth club members often referred to the importance of child protection being rooted in child rights, emphasizing their new found role as rights based advocates and actors within a larger human rights framework. They also emphasized the importance of World Vision tools such as ADAPT in combining the social justice dimension of rights with a compassionate emphasis on working with the most vulnerable children.

Recommendation

- ❖ **Consider a more intentional use of a community-protection based child rights conceptual framework in combination with a strong message of compassion.** The latter component was especially successful in Tanzania as part of a Christian faith based message and could be applied across all denominations in conjunction with a child rights based approach.

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To What Extent is the PPA Child Protection Programme Impacting the MVC?

I. CPA is Significantly Impacting Children and Families.

The impact of WV CP interventions can be assessed in various ways including:

1. Level (degree) of impact;
2. Nature (quality) of impact; and
3. Specific groups (category) of children being impacted.

In all three countries degree of impact was generally expressed across various levels of the social ecology. Primarily this began with *personal change* such as increased sense of self esteem, increased life skills and personal self protection skills such as saying no to physical abuse. This is a critical first step for many vulnerable children for whom personal transformation is a key first stage in changing broader child protection systems. The second level of impact was frequently expressed in *the context of peers and family* and included changing caregiver attitudes to corporal punishment, child work and the importance of school. Impact on peers was one of the most important results of youth activities leading to a number of astonishing changes such as children with a disability successfully advocating for non-disabled children to attend school in the DRC, Masai girls intervening to prevent early marriage, and children in Phnom Penh educating vulnerable children on the dangers of trafficking in the context of employment migration. Finally, both children and adults shared examples of significant change at the level of *strengthening the relationship between formal and non-formal CP systems* as well as higher levels of systems change. These changes included: improved number and quality of protection referrals as well as indications of community ownership of local CP programs. In this case quality referred to criteria such as earlier referral in the cycle of abuse, children's safety being ensured during the process of referral cases, and children being consulted on their best interests during the referral process. Community ownership of protection programs was evident in all three countries and was exemplified in active and sustained participation of children and adults, activities being suggested and implemented by local committees and community members specifically mentioning the success of WV where other INGO's had failed (e.g. in Kitembeini, Tanzania). While there were fewer *higher level examples of systems change*, the examples shared were potent, such as new district level bi-laws on the right of all children to attend schools in Masai communities, provincial agreements between police and community child protection committees in rural Cambodia, and high level cooperation between World Vision, the Ministry of Social Welfare and MONUSCO in Eastern DRC on cases of sexual exploitation.

Nature and quality of impact was captured in The River of Life/Most Significant Change (MSC) activity as well as in focus groups with adults and children and KII.

By way of an example, the most significant changes resulting from the impact of PPA identified with children in Dar Es Salaam were:

- ❖ Children now are aware of themselves and their value in the community.
- ❖ Children know their rights
- ❖ Children now know the effect of drug abuse
- ❖ Children can advise their friends and other children freely without fear.
- ❖ Even those children, who could not attend school, went back to school after World Vision went to them and provided some support.
- ❖ Children now know where to report when they are mistreated.
- ❖ Children have confidence now in themselves.

As can be seen from the Tanzania MSC examples, quality was often described in regards to knowledge especially in regards to rights and life skills that promoted protective participation. It was also frequently identified as improved quality of relations with peers and key adults. Finally, quality was often described in ways that enhanced access or recourse to protective systems such as schools, clinics, community CP councils and government child welfare mechanisms.

Finally, in terms of categories of impact, many children with multiple risk factors were being clearly being affected by CP interventions. Across the three countries the degree of impact was expressed in various research activities such as balloons and yarn, social mapping and focus group discussions with children and adults. Categories of MVC impacted by the PPA are: children affected by violence and abuse, children with a disability, children in exploitive work situations, girls at risk of early marriage, girls who had been raped, children not attending school, abandoned infants and unregistered children.

Other noteworthy examples of impact were also described by children and adults across the three countries in relation to: self protective abilities of children and youth, youth leadership, enhanced Capacities of both Government and Civil Society Actors, positive parenting, shifting cultural norms and behaviors, strategies for better reaching MVC's not in WV programs and enhancing early childhood programs for MVC and their families.

Observation – The PPA programming is having a highly significant impact on the abilities of children and youth to protect themselves.

- a) In the social mapping, children and youth were consistently able to identify the places and activities that were dangerous or likely to be harmful to children. Probing indicated that they actually used risk reduction strategies such as not walking alone in high risk places and working with key local adults to refer cases of MVC (e.g. cases of domestic violence, girls at risk of early marriage and working children).
- b) In the Most Significant Change activities, youth indicated consistently that they understood how to protect themselves from dangerous adults, traffickers and

- outsiders who had wanted to 'trick' children. Some children indicated that they had kept a distance from and had actually evaded such people. Girls reported that they had developed a better understanding of sexual boundaries and which behavior (e.g., touching by an uncle) was inappropriate, and they said they had demonstrated increased ability to say 'No' to unwanted sexual advances. In Eastern DRC children specifically mentioned dangerous places, dangerous times of the day and risks posed by dangerous groups of children (e.g. children misusing drugs).
- c) Youth explicitly linked their safety and ability to protect themselves to child rights and life skills training, about which they had learned much in the youth groups.
 - d) Parents said consistently that they had seen increases in children's understanding of how to protect themselves and that their children were less likely to play and spend time in dangerous places such as mined areas.

Recommendations for enhancing self protection

- ❖ It is recommended that the programme **continue the self-protection training and awareness raising activities** through the youth groups, role plays, parent training, and related activities.
- ❖ **Special emphasis should be placed on child rights and life skills** (especially self esteem, communication and self and collective agency enhancing skills) in the context of self protection for MVC.
- ❖ For purposes of ongoing learning, examine **further whether or the extent to which these effects extended to the MVC** who had been unable to participate directly in many activities.
- ❖ In light of WV success in enabling children's self-protection, more emphasis should be placed on **documenting the uniqueness of the WV CPA approach** to developing these aspects of programming for purposes of sharing widely with governments, NGOs, communities, etc. who are interested in CP systems strengthening. This could help others work in a more intentional manner on self-protection, and it could help make self-protection a deliberate part of system strengthening, which too often leaves out or marginalizes steps/capacities by children.

“World Vision is successful in bringing child protection to our communities because they listen to our needs, they combine protecting vulnerable children with other assistance like helping with our cattle, providing fresh water and health care, they are the only NGO that has come and is still welcome here” (Village Elder, Kitembeini, Tanzania)

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2. The PPA Programme has had Significant Effects in Developing and Promoting Youth Leadership.

Observation - This leadership has been not only on issues of child protection but also on broader issues of youth agency in regards to environmental quality (via community cleanup campaigns, for example) and nutrition. However, youth leaders rotate or age out, and this sometimes leaves gaps. Also, although there are female youth group leaders and a very active group of children with a disability in Eastern DRC, most youth club leaders are able bodied and male, thereby reproducing to some extent the gender and ability disparities that are evident in the wider society. Similarly, in Eastern DRC it was reported that Youth Parliament leaders were depleted due to lack of success in recruiting new members.

Recommendations supporting youth leadership

- ❖ **Continue and document fully the youth leadership** that the youth clubs develop and nurture.
- ❖ **Prioritize leadership by young women** and also the ongoing cultivation and transition of rising youth leaders.
- ❖ **Extend youth involvement beyond 18 years** to allow older, more experienced mentors to support younger MVC. Also, consider supporting a small cohort of youth leaders to continue their CP training into post secondary, CP related educational fields (e.g., social work, psychology, community development) as the person to community benefit could be very large with more trained professionals.

3. The Programming has built the Capacities of both Government and Civil Society Actors in Responding to Child Protection Issues.

Observation – WV’s work with community based protection mechanisms has interwoven the formal and non-formal aspects of the local child protection system in ways that are having meaningful impacts on children. Well triangulated reports from both children and adults indicated that there has been an increased likelihood that people will report violations against children and that appropriate actions are taken in regard to the reports. Discussions with CP committee members, and also interviews with key informants such as local chiefs, indicate that people are regularly reporting cases such as domestic violence, sexual abuse, lack of registration drug use, and other violations. In all communities in Tanzania, Cambodia and Eastern DRC, community leaders and committee/network members said that when a case of physical abuse was reported, selected Committee members visited the family, educated them about the harms to children caused by violence, and offered advice. If this did not stop the domestic violence and the violence was moderate

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to severe, the committee/network referred the case to the police or social welfare officer, who negotiated an agreement with the perpetrator not to engage in further domestic violence. Triangulated reports indicated that this multi-layered intervention process had successfully reduced domestic violence, although this research did not attempt to measure directly the prevalence or severity of domestic violence. In Eastern DRC collaboration between WV, partners, social welfare & traditional Chiefs led to increased reporting & new extension of CP structure down to grassroots level.

The importance of advocating for the prevention of early marriage (Naserian, 17 year old girl in Kiteimbeini, Tanzania)

Naserian, is a seventeen year old girl who lives with her mother. After completing her middle school from the local Masai Girls Secondary School, she became pregnant at 15, and like many similar girls was forced to discontinue her studies. Though her family placed great pressure on her to marry the father of her son, she refused because she still wanted to continue with her studies and wasn't ready for marriage. She eventually convinced her mother and extended family, with some support from WV staff and the local Social Welfare Officer, and she is now waiting for her child to reach one and a half when she can join with the special college of social welfare (her mother will care for her baby). In addition, Naserian was seen as a positive role model by the community protection committee, and has been asked to join as a youth member. She now advocates on behalf of other girls who are pressured into early and may not be strong enough to stand up for their rights to stay in school. She is proud of her Masai heritage but believes change can and must occur in traditional culture to keep them healthy.



Despite the successes of this layered child protection system, CP committee members also reported that referred cases were often impossible to track and in some situations referred cases could not be adequately managed due to lack of CP supports (e.g., proper counseling) and lack of rehabilitation and reintegration programs. This situation decreased the ability of staff and community members to track the cases, provide follow up, and advocate as needed for appropriate action on the part of government actors. While Government SWO's were effectively involved in Tanzania and Eastern DRC, in Cambodia it was less clear how this local child protection system was supported by the Government. There is a risk of creating a parallel system of child protection that relieves the Government of its responsibility to protect children. In addition, there were reports from participants that many people did not usually report offences to authorities and instead handled the matters themselves. In the longer term, it would benefit the child protection system strengthening work to examine more systematically how people who are not actively participating in the PPA programming actually use the formal reporting system. Finally, in the conflict-affected

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context of the Eastern DRC, there were some instances where root causes of MVC vulnerability, such as widespread conflict, were clearly outside the sphere of influence of the community protection committees. In this context, CP interventions should take a dual track including high-level advocacy (e.g. in Eastern DRC with UN-MONUSCO and the National and Provincial Government) and community advocacy that focuses on prevention and rehabilitation for MVC.

Recommendations to synergize formal and non-formal protection mechanisms

- ❖ World Vision should continue its strong **work with community protection mechanisms and apply learnings from successful advocacy strategies**, such as those used in Tanzania, to contexts, such as Cambodia, that lead the Government to accept greater responsibility for child protection, link district level structures with those at commune level, and fully integrate the community child protection mechanisms into efforts to strengthen the national child protection system.
- ❖ **Use ethnographic methods** to learn from people who are not directly participating in PPA programme activities how they respond when various harms to children arise. This would allow the mapping of the actual response pathways that are used, which may not correspond to the pathways intended by child protection systems designers.
- ❖ **Develop a CP systems strategy for conflict-affected regions** that accommodate both the involvement of youth clubs and adult committees as well as focused advocacy with appropriate provincial and national government and UN agencies.

“As a teacher I didn’t use to think that I was responsible for vulnerable children’s needs. Now I and some of the other teachers, approach these children, try and find out about their problems and then mediate on their behalf (Teacher working with WV Community protection Committee in Beni, Eastern DRC)”

4. The PPA Programming has had Significant Effects on Positive Parenting.

Observation – Youth, CPC members, other parents, and WV staff all reported that the training on positive parenting in Cambodia had made attitudes toward education and child rights more favorable, motivated parents to keep their children in school, encouraged nonviolent conflict resolution within the family, and taught parents how to keep children away from harm. Youth commented on how their parents' encouragement and moral support had helped them to stay in school. Not surprisingly, much work on parenting

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remains to be done around questionable cultural practices such as child beating for disciplinary purposes and favoring boys for higher education.

Recommendation

- ❖ **Extend the work on positive parenting, and strengthen the elements pertaining to changing cultural norms.** This could be done using the slow, dialogue oriented, internally driven processes discussed above in regard to changing harmful practices such as FGM/C. Such processes are nascent in the programme but are not yet explicit or intentionally developed. It would be useful to deliberately strengthen them and make the measurement of norms change part of the ongoing impact evaluation strategy. Also, emphasize a lifespan approach that begins at birth and extends to young adults.

“We care for the child from the womb of the mother across the life of the child. We visit the mother when she is pregnant and when the child is born to discuss child protection and educate on good parenting, proper nutrition, and the need for education”
(Community Chief and Chair of CPN, Koh krolor)

5. CPA Programs have, in a Relatively Short Period of Time, Begun Shifting Cultural Attitudes, Norms and Behaviors.

Observation – Interventions with community CP committees are beginning to show impressive changes in beliefs and behavior with regards to protections threats such as early marriage and FGM. In Masai communities in Kitembeini, Tanzania, for example, community leaders spoke of changes to these behaviors as a result of three interrelated factors:

- a) Increased trust in World Vision’s overall capacity to assist communities economic and social well being through the ADP,
- b) A focus on compassion exhibited through WV’s low key, faith based approach, and
- c) An emphasis on social justice for girls emphasized in rights based approaches and messages of non-discrimination, and best interests of the child linking vulnerable children’s life, survival and development. This has lead to community leaders and local children’s advocates intervening and providing holistic care to prevent early marriage and FGM as well as children attempting to negotiate change amongst parents of their more vulnerable peers.

Similar success was evident in Eastern DRC where community partners reported achievements in child protection campaigns resulting in changed social norms on child marriage and prevention and treatment of gender based sexual violence.

Recommendation

- ❖ **Intentionally support internally driven community social change processes** that address social injustice.

6. Community Committees and Networks Need a Theory of Change to Strengthen their Role within the CP Spectrum from Prevention to Protection to Rehabilitation.

Observation –Tanzania, Cambodia and Eastern DRC each had different approaches to their role in CP. In Tanzania, Community Committees worked primarily in prevention and protection capacities, though they gave increasing attention to rehabilitation efforts, often with challenging outcomes due to a lack of rehabilitation and reintegration services for children. In Cambodia, the CPNs and CPCs said consistently that they devoted nearly 90% of their effort to prevention. They also engaged in mitigating the suffering of child survivors of violations such as sexual abuse, and they often did this through partnership with other organizations. Often, referrals were made to groups outside the community, raising the question how reintegration could be promoted within the community. In Eastern DRC, committees addressed a wide part of the CP spectrum from prevention (e.g. birth registration), to identification and referral to some cases of rehabilitation for MVC such as abandoned children.

Overall, however, there was a need for better balance of response and prevention work at community level, which are synergistic and necessary in strengthening commune-level systems and also wider child protection systems. This also raises the issue of staff capacity to develop and manage the spectrum of skills required for protection committees to assume responsibility for the complexities across the spectrum of CP interventions.

Recommendation

- ❖ **Additional effort should also be devoted to promoting an intentional theory of change.** This should be structured in a way that assists CPA efforts to identify their entry point to CP, usually prevention, and plan for increased capacity in community-level protection of MVC and rehabilitation and reintegration of child survivors. Being intentional about developing the appropriate balance will be an important part of WV ongoing work to protect children.

Special attention should be devoted to developing child protection committee's capacity to manage these responsibilities and this awareness should be included in various WV program entry points addressing CP such as ADAPT, Peace Road and Channels of Hope.

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Without a coherent theory of change, there is a risk that programming will become a collection of activities or will be conducted in a relatively nonstrategic manner that does not deliver the value for money equal to what might have been achieved through a more strategic approach. A theory of change should identify root causes such as severe poverty, local protection factors that can ameliorate root causes, structural injustices such as discrimination, corruption, and land evictions, and changing economic circumstances that engender migration. Careful analysis of these factors and the positioning of other agencies in addressing them is necessary for effective WV positioning and enhancement of overall programming impact.

WV staff and also CPN and CPC members seemed to assume that education about child rights and self protection, education about positive parenting, youth leadership, community awareness raising, and the activities of the CPNs and CPCs would change the behavior of children and youth, decrease risks, and strengthen protective factors. However, it was not clear which of these activities or which sequence of activities was most valuable in effecting change. Nor was it clear whether the programme impacts depended on or interacted with other elements associated with the ADP activities. The external research team agreed that the protection elements of WV programming are likely to be more effective because they stand on a platform of wider ADP activities that meet basic needs and deliver the tangible, material benefits that impoverished people need to see. Also, WV had already won the trust of communities, which makes it easier to talk about and collaborate on limiting or ending sensitive issues. It is vital for WV and the wider child protection sector to learn how to interface child protection activities with other supports in a manner that boosts programme impact for vulnerable children. The explicit development and testing of a theory of change could contribute significantly to this endeavor.

Follow up Recommendation

- ❖ **Building on the World Vision’s recently developed CP Theory of Change, conduct a follow-on theory of change workshop for WV staff.** The use of a reflective methodology, coupled with engagement with diverse stakeholders in the child protection sector, could sharpen ideas about WV’s strategic positioning and about how to contribute in the most complementary, effective manner to strengthening the national child protection system in Cambodia.

7. It is Not Clear to What Extent the PPA Programming Benefits Children who are Not Directly Included in Youth Groups and Other Programme Activities.

Observation - It seems likely that children such as those who are out of school and who tend animals, work in brick factories or migrate benefit from the community mobilization around children's protection and from the work of the community child protection mechanisms on issues such as physical and sexual violence. These benefits, however, are probably quite limited since their economic circumstances require that they stay out of school and continue to do dangerous work that limits their development. Here, too, it would help to have a theory of change that indicates explicitly how to benefit such children.

Recommendations for increasing impact to MVC not included in WV CPA programs.

- ❖ **Collect additional data on the possible programme benefits** to the children and youth who are not directly included in current activities.
- ❖ **Develop possible means of strengthening ADP linked livelihood components** for very poor children and families.
- ❖ **Explore opportunities to better tie WV economic strengthening programs to government social protection programs** to better support MVC and vulnerable families and communities.
- ❖ **On an ongoing basis, document the synergies and interactions between livelihood programming and child protection programming**, as this remains an important area of learning and development for the global child protection sector.

8. PPA Programmes have few Early Childhood Development (ECD) Components, which can Play a Key Role in Cognitive, Social, Emotional and Physical Development and Provide a Foundation for Subsequent Positive Development.

Observation - Work with children and youth could potentially be strengthened by the addition of an ECD component, thereby nurturing supportive conditions and protection

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throughout the years leading to adulthood. Such an ECD component would be a key source of prevention and might be strategic “positive” entry point to work with families and communities in addressing many of the root causes of risk.

Recommendation

- ❖ **Add an expanded ECD component to the programme**, linking it both to the theory of change and to measures of impact that track the achievement of developmental milestones and well-being.

How do Children and Their Caregivers Reduce Vulnerability to Child Protection Risks?

Children, youth, and adult care providers in WV Tanzania, Cambodia and Eastern DRC CPA programs are engaging in many activities to reduce vulnerability.

A. Asked to identify most significant changes, youth 14-17 years in Tanzania, Cambodia and Eastern DRC said 'parents can protect their children'.

Observations - Broadly, parents and youth said that caregivers (mainly parents) reduce the vulnerability of children through multiple means such as:

- ❖ Providing safety and care to children
- ❖ Meeting children's basic needs
- ❖ Encouraging children to go to school
- ❖ Encouraging children not to play cards and gamble
- ❖ Teaching children about dangers in the community
- ❖ Educating each other about the harms caused by domestic violence
- ❖ Encouraging children not to migrate
- ❖ Monitoring risks via the community
- ❖ Reporting violations to chiefs and government CP workers (Social Welfare Officers, police etc.)
- ❖ Using extended family such as grandmothers to advise and counsel children

However, gaps in parental care were also visible. In one case study, a 12-year-old boy from Kohkolor who lived with his family on a remote farm and tended cattle said he did not attend school and 'I have no friends.' Lacking in cognitive competencies and very likely having a mild mental disability, he seemed at risk relative to most other children. Similarly, teenage girls and women reported that sexual abuse within families (frequently, the perpetrator was an uncle or stepfather) was a serious problem. Families tended not to report such violations since they desired to maintain family harmony or continue the financial support of the family member and to avoid family shame. Other conspicuous gaps occurred in regard to street children who were either not with an adult carer or who were with parents who exploited their children by having them work as beggars.



Children in Kohkolor, Cambodia use River of Life tool to discuss "most significant change" activities and stories. The most significant story would then be performed by groups of girls and boys and presented to each other.

Children reduced their own and others' vulnerability by means such as:

- ❖ Helping to clean up dirty and potentially dangerous areas
- ❖ Referring other MVC
- ❖ Helping negotiate CP discussions between vulnerable children and key adults
- ❖ Avoiding dangerous places or people
- ❖ Not being 'cheated'
- ❖ Saying 'No' to unwanted or inappropriate sex
- ❖ Helping each other understand the hazards of drug use and to avoid using them
- ❖ Learning from each other about how to do migrant work safely
- ❖ Seeking social support and integration in the youth clubs
- ❖ Promoting child rights in the community
- ❖ Raising awareness about harms to children through community skits and role plays
- ❖ Engaging in problem solving discussions in the youth groups

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In Eastern DRC, children with a disability provided a formidable example of “positive deviance”⁶ in helping other MVC children attend school. This is an important finding as it underscores the dynamic nature of vulnerability in which children who are at risk in some situations can assist in supporting other MVC in other contexts. This has important implications for CP programming in regards to not only inclusion of MVC but also realizing the protection capacity of MVC in prevention and across the referral chain.

Recommendations

- ❖ **Continue to gather evidence on protective mechanisms used by children and adults**, including learning from positive deviance in situations where children are thriving in the midst of great adversity.

A key component in both adults and children’s strategies was mobilizing local assets and building on local indigenous (originating locally) or endogenous (produced from within a culture) protection capacity. Examples of local coping capacity included:

- ❖ Masai young peoples concept of “bravery” in meeting life challenges
- ❖ Buddhist notions of “samaki”, or collective unity, in mobilizing Cambodian communities to support vulnerable children
- ❖ Congolese popular music being used to promote protection messages amongst youth in Eastern DRC

- ❖ **Identify and build on local indigenous assets to promote protection and strengthen positive social norms, values and beliefs.**

While children were having considerable success in mobilizing local assets and reaching and supporting MVC, often without the knowledge of community members and WV staff, in some instances the protection strategies suggested by children such as awareness raising and life skills training were not adequate to reach MVC such as girls involved in sexual exploitation and child soldiers.

- ❖ **In situations where MVC are in highly dangerous or socially segregated contexts WV should employ a dual approach using high level advocacy and front line involvement of vulnerable children in analyses of and responses to these threats.**

⁶ Positive Deviance is an approach to behavioral and social change based on the observation that in any community, there are people whose uncommon but successful behaviors or strategies enable them to find better solutions to a problem than their peers, despite facing similar challenges
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Summary Recommendations: Lessons Learned on Inclusion and Impact of Most Vulnerable Children in WVUK Programs

In general the findings from both the literature review, key informant interviews and three country case studies indicate that many vulnerable children are being included and positively impacted by the PPA programming. Moreover, the manner of vulnerable children's inclusion is highly significant--children are empowered and using their creativity and social networks to enable self protection, mobilize quality youth groups that use peer modeling and youth influences to guide positive behavior, and achieve meaningful participation and voice.

These results paint a clear picture that the DFID PPA funding has been successful in including many vulnerable children, in particular children experiencing domestic violence, children with a disability, children threatened by early marriage, orphaned children, and children not able to attend school. The support for MVC has also lead to tangible gains in child protection systems strengthening. This has been particularly effective in strengthening local, "informal", endogenous systems of support such as individual life skills of children, knowledge and operation of child rights, family kinship networks, youth peer support and the creation of viable community protection structures such as CP committees and community leadership advisory groups.

These local systems have likewise been effectively linked to "formal" government statutory protection systems, where they exist, in the form of social welfare agencies, police, schools and health clinics. In some instances, systems at a higher level have also been reinforced through innovative means such as district level by-laws that are informed by community identified priorities for child safety in areas such as early marriage and school attendance for MVC.

The work in Eastern DRC is also particularly noteworthy in applying a systems approach to support for MVC in an emergency context where interventions with more limited social and community "reach" are frequently the norm and where WV does not build CP programs on the ADP model.

On the whole, the World Vision UK PPA CP initiatives are potent learning examples of the resilience of children and the capacity for community to be actively involved preventing child abuse, neglect and exploitation and where protection violations have occurred to effectively identify, refer and in some instances lead in the rehabilitation of vulnerable children. WV PPA projects reviewed in this research bring an important social protection value added that promises to strengthen community empowerment in support of MVC. Many of the rural and urban CP programs included in this study were able to support most vulnerable families and their children through widespread poverty alleviation tied to WV's broad based and long term

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ADP strategy⁷. This warrants further research as more attention is being given to social protection policy that conceptually ties support for most vulnerable children to most vulnerable families and communities. This makes inherent sense as many of the drivers that create vulnerability for children are rooted in deeper systemic barriers of poverty and social exclusion facing their families and communities. World Vision stands to make a significant contribution to the social protection discourse in drawing in the organizational niche delivering a community development model of CP that includes aspects of economic development, combined with an operational focus on empowering MVC and their families.

The following recommendations highlight areas where future gains can be made in building on program strengths and closing gaps.

Definitional Challenges – Moving beyond the false dichotomy of categorical vs. risk/protective factors approaches?

Findings from this study indicate that while it is important to understand the deeper risk and protective factors influencing child protection, it may in fact be unhelpful to set a false dichotomy contrasting a categorical approach with the risk/protection emphasis.

❖ Definitional Challenges Recommendations

1. **Apply a three stage process to understand risk and protection for MVC:** Start with tools such as ADAPT, to first assess generic groups of children who are clearly vulnerable (children suffering from violence, neglected children, children in abusive labor, sexually exploited children). Next, engage with children and adults as to the deeper causes of local risk and protective factors. Finally, facilitate an ecological approach to understanding the relationship between risk and protection across groups of vulnerable children and the life span of childhood and apply this understanding to advocacy at all levels.
2. **Explore barriers and apply opportunities:** Barriers might be caused by a limited understanding of certain groups (e.g. including children with a disability but not street children) and apply opportunities that reduce risk and enhance protective mechanisms (e.g. developing youth life skills).

⁷ As noted earlier, Eastern DRC is the exception, without ADP programmes, but has found other ways to provide social protection to MVC families.
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3. **Build the capacity of WV staff, participating adults and children** in community protection mechanisms and sponsorship programs, to understand both local groups of vulnerable children and the contextualized risk and protective factors influencing the experience of MVC.
4. **Increase the agency wide CP emphasis on understanding and building on assets** as protective factors (indigenous-cultural, community, adult and child based) as risk analyses still predominates.
5. **Ensure an integrated, CP spectrum model of programming that draws on the success and institutional capacity from earlier approaches to MVC** (prevention through crisis management) such as HIV/AIDS programing responses to OVC, to create a more robust understanding of categories and risk/protection models of support for MVC.
6. **Create a WV niche that integrates child protection into broad based government social protection programming:** Focus on categories of vulnerable populations and attempts to mitigate root causes through social/economic strategies such as cash transfers, disability insurance, child-centred community economic empowerment such as savings clubs, and youth employment.

Participation – Protection through intentional, meaningful, safe engagement

A key insight from the literature review, KII and case studies was the importance placed on participation as a key assets driver to understanding risk factors and boosting protective factors. This understanding was matched by the challenge of creating an intentional programming model to meaningfully engage MVC in ways that are beneficial, appealing and safe.

❖ Participation Recommendations

1. **Build on current success in engaging children in PPA programs by further exploring which MVC are not included** (e.g. street children, children involved in migration, neglected children, girls working in abusive domestic labor).

2. **Explore options for MVC to be more involved in WV CP program design, implementation, monitoring and evaluation, and “bottom up” advocacy**
3. **Begin participation with younger children using age appropriate methods.**
4. **Develop internal WV capacity, or find other local capacity, to create specialized programs or approaches supporting a safe, supportive environment for MVC who are not attending existing youth programs.** As many of these youth are struggling with psychosocial issues and may have issues with trusting adults (e.g. street children engaged in drug misuse, war affected children, children involved in commercial sexual exploitation) specifically build staff capacity in these areas and tailor programs to the needs of these children.
5. **Continue to further promote successful WV participation programming areas** such as child rights, life skill and social networking capacity with MVC as these interventions bring significant benefits to CPA programs.
6. **Explore the role of positive deviance in participation where MVC are leading participation initiatives such as a girl child with a disability in Eastern DRC.**
7. **Integrate some of the methods used in this study to further meaningful participation interventions and to engage young people more actively in CP monitoring and evaluation** such as: unity circle, river of life and most significant change.

Community Ownership - Build on World Visions Broad Community-based, Developmental Advantage to Child Protection through ADPs and the Fragile Context Model

One clear, overarching finding from the research was that in Tanzania and Cambodia CPA programs benefitted from having followed many years of broad based ADP community health, education and income generating programs.

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This is fully in keeping with WV's value added as a community based poverty alleviation organization in which CPA fits within a broader mandate of social and economic well being and protection. While the Eastern DRC CPA was not based within an ADP the program still was successful in building community ownership.

❖ Community Ownership Recommendations

1. **Build on success in community ownership in communities** such as Kitembeini, Tanzania, and Beni, Eastern DRC, where many other NGO's have failed in partnering with local stakeholders, and WV is succeeding as evidenced in active child and adult participation in CP.
2. **Strategize on the specific role of CPA in ADP programs** both in terms of the value added in building community ownership and including and impacting more MVC (for example through linking CP mechanisms with other ADP structures).
3. **World Vision community ownership would be mutually strengthened by a clearer MVC program strategy articulating and operationalizing WV programming components** of basic needs, livelihoods (e.g. Economic and Agrarian Development), social change (e.g. C-Change), child rights, youth engagement and life skills (e.g. Peace Road) and compassion (e.g. Channels of Hope).
4. **Sponsorship could become a powerful force for community ownership when focused more intentionally to MVC**, though caution should be exercised to ensure children are protected according to ethical standards, adults are aware of harmful traditional practices and sponsors' expectations are realistically tied to protection measures of success (e.g. applied across the CP spectrum from prevention to protection to rehabilitation).
5. **Build on WVI's CP Theory of Change linking advocacy for MVC, community asset building and economic strengthening such as that applied in Cambodia would strengthen community ownership model for other CP agencies and governments.** - WV clearly brings a unique body of collective experience in community based social protection.

Engage with Cultural and Social Norms and Beliefs – Significant challenges and essential resources.

Contrary to the literature review findings, results from research in the three case study countries showed significant success in tackling harmful social norms and beliefs increasing risk for children and in most instances revealed surprising success in harnessing local endogenous protective factors.

❖ Cultural and Social Norms Recommendations

1. **Build on WV promising practice in changing harmful traditional practices as a model of “bottom up” CP systems change through meaningful community conversations.** (e.g. reducing child marriage, supporting girls and other MVC attending schools)
2. **Support protective endogenous practices such as those promoting compassion towards and social integration of MVC and integrate these practices into local policies and by-laws** (e.g. Masai prevention of early marriage and support for pregnant teens attending school).
3. **Explore WV value added in altering harmful cultural practices through faith based interventions, expand to other contexts and faiths through Channels of Hope program.**
4. **Strengthen WV methods such as ADAPT that identify harmful traditional practices and mobilize local community members and their unique assets to mediate these risk factors.**
5. **Continue to apply lessons learned in research with non-formal mechanisms to strengthen formal CP systems at local, district and national levels**
6. **Engage young people in intergenerational activities that strengthen child and adult engagement in collectively identifying and changing harmful traditional practices and enhancing protective traditional social knowledge and practice** (e.g. building on the success of girls involved in child commercial exploitation working with local chiefs in Eastern DRC).

Gaps in Evidence – Areas for future research

World Vision’s community approach to child protection systems strengthening, offers a rich opportunity for interagency learning on formal/non-formal CP systems strengthening. Areas for future research include:

❖ Gaps in Evidence Recommendations

1. **Apply the recently developed WV CP theory of change to “bottom up” community based CP systems strengthening to engage children, youth and local adults meaningfully as key experts in this process.**
2. **Explore opportunities for learning from the implementation of WV’s Fragile Context Model and Area Relief Program focus on health, education, sponsorship into Eastern DRC CP interventions.**
3. **Apply population based sampling procedures for protection baseline assessments that provide greater community representation in initial assessment and a more accurate understanding of both widespread and situation specific risk and protective factors and their interrelation.**
4. **Integrate additional reflective/creative child centred and ecological participatory action research tools in WV CPA program cycle beginning with base line assessment, initial program design and ongoing monitoring**
5. **Continue to explore opportunities for building on successful programs such as Cambodia’s community economic entrepreneur program to integrate community based child protection into WV and government social protection models with particular emphasis on economic strengthening for MVC, their families and communities.**

“WV used to apply the concept that what is good for the community is good for the vulnerable child, now by learning from communities and children at risk we are seeing the opposite, what is good for vulnerable children is good for the community” (WV CPA team member Tanzania)”



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Annex - References:

African Child Protection Inter-Agency Group (2013). *Strengthening Child Protection Systems in Sub-Saharan Africa: A Call to Action*. Nairobi, Kenya: African Child Protection Inter-Agency Group publication.

Bronfenbrenner, U. (1979). *The ecology of human development*. Cambridge, MA: Harvard University Press.

Coe, S. (2011). *Most vulnerable children: World Vision's response in Middle East and Eastern Europe*. Seattle, USA: World Vision publication.

Cook, P. & DuToit, L. (2005). Overcoming adversity with children affected by HIV/AIDS in the Indigenous South African cultural context. In M. Ungar (Ed.), *Handbook for working with children and youth*. New York, NY: Sage Press.

Cook, P., Heykoop, C., Anuntavoraskul, A., & Vibulhol, J. (2012). Action research exploring information technologies (ICT) and child protection in Thailand. *Development in Practice*, 22, 574-587.

Dagne, H. G. (2009). Ethiopia: A comparative analysis of the social dynamics of the abandonment of harmful practices in four locations. Innocenti Centre Working Paper. Florence, Italy: UNICEF.

Dawes, A., & Donald, D. (2000). Improving children's chances: Developmental theory and effective interventions in community contexts. In D. Donald, A. Dawes, & J. Louw (Eds.), *Addressing childhood diversity* (pp. 1-25). Cape Town: David Philip.

Forbes, W. (2012). *Building the foundation: A working paper on the critical role of child protection in World Vision achieving its special priority on the Most Vulnerable Children*. Seattle, WA: WVI publication.

Garbarino, J. & Kostelny, K. (1996). The effects of political violence on Palestinian children's behavior problems. *Child Development*, 67, 33-45.

Heykoop, C. & Currie, V. (2012). *The Circle of Rights*. Victoria, Canada: IICRD publication.

Lorey, M. (2012). *Introduction to Most Vulnerable Children*. Seattle, WA. WVI Powerpoint presentation.

Myers, W. & Bourdillon, M. (2012). Concluding reflections: How we might really protect children. *Development in Practice*, 22, 613-620.

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Nelems, R. (2012). A review of participatory approaches in child protection monitoring and evaluation. Victoria, Canada: IICRD publication.

Plan International (2007). Each and Every Child: Understanding and working with children in the poorest and most difficult situations. Woking, UK: Plan International.

Rutter, M. (1979). Protective factors in children's response to stress and disadvantage. In M. Kint, & J. Rolf (Eds.), Primary prevention of psychopathology, Vol. 3. Social competence in children (pp. 49-74). Hanover, NH: University Press of New England.

Rutter, M. (1985). Resilience in the face of adversity. British Journal of Psychiatry, 147, 598 – 611. Child Protection Working Group (CPWG)(2012). Minimum standards for child protection in humanitarian action. Geneva: Author.

Wamimbi, R., Kean, S., Maingi, J., & Odedo, R. (2011). Vulnerable child advocacy – Impact and lesson. Kampala, Uganda: WVEARO publication.

Wessells, M. (2009). What are we learning about protecting children? An inter-agency review of the evidence on community-based child protection mechanisms in humanitarian and development settings. London: Save the Children.

Wessells, M., Lamin, D., King, D., Kostelny, K., Stark, L., & Lilley, S. (2012). The disconnect between community-based child protection mechanisms and the formal child protection system in rural Sierra Leone: Challenges to building an effective national child protection system. Vulnerable Children and Youth Studies, 7(31), 211-227.

World Vision (2011). ADAPT: Analysis, Design and Planning Tool. Monrovia, California: World Vision International.

World Vision International (2012). Child protection strategy. Seattle, WA: WVI publication.

Young, H. (2008). Puppets or players? A review of child participation approaches in Africa. Arusha, Tanzania: World Vision publication.