What Are We Learning About Community-Based Child Protection Mechanisms?

An Inter-Agency Review of the Evidence From Humanitarian and Development Settings

Inter-Agency Report

Mike Wessells
Lead Consultant

July 28, 2009
## Table of Contents

Acknowledgements ........................................ 4

Acronyms .................................................. 5

Executive Summary ........................................ 6

1. Background & Rationale ............................... 20
   1.1 Child Protection Systems .......................... 20
   1.2 The Rationale for Child-Focused Community Groups ........................................ 22
   1.3 The Lack of a Strong Evidence Base ........................................ 23

2. Overview of the Review ............................... 25
   2.1 Terms of Reference ................................ 25
   2.2 Methodology ....................................... 27
   2.3 Limitations of the Review ......................... 32

3. The Document Set ....................................... 35
   3.1 Documents Not Reviewed ........................... 35
   3.2 Reviewed Documents ............................... 35

4. Key Findings .......................................... 38
   4.1 The State of the Evidence Base ................... 38
   4.2 Functions, Forms, and Activities ............... 39
   4.3 Effectiveness ...................................... 44
   4.4 Scale ............................................. 60
   4.5 Sustainability ..................................... 61
   4.6 Gaps ............................................... 64
   4.7 Do No Harm Issues ................................. 65
   4.8 Lessons From the Health Sector .................. 68

5. Promising Practices .................................... 70
   5.1 A Human Rights and Social Transformation Approach to Ending FGM .................... 70
   5.2 Combating Child Labor Through Education ........................................ 74
   5.3 A Community-Based Child Protection Network Model ........................................ 76
6. Challenges ......................................................... 79
   6.1 Strengthening the Evidence Base. .................... 79
   6.2 Roles and Responsibilities .............................. 82
   6.3 Sustainability .............................................. 85
   6.4 Taking a Dialogical Approach to Child Protection at Community Level. ........ 87
   6.5 Effective Child Protection in Emergency Settings. ........ 90
   6.6 Funding ..................................................... 91

7. Recommendations .............................................. 92
   7.1 For Practitioners ........................................... 92
   7.2 For Donors .................................................. 94
   7.3 Recommendations for Phase 2 .......................... 94

8. References .................................................... 97

9. Annexes ........................................................ 100
   A: Terms of Reference for the Review .................... 100
   B: Review Matrix .............................................. 111
   C: ILI Typology ................................................. (attached separately)
   D: List of Reviewed Documents ............................. 112
   E: Countries Included in the Review ........................ 123
Acknowledgements

This review was made possible by generous support from UNICEF West Africa Regional Office and also from the Evaluation Division of UNICEF headquarters. It was also made possible by generous in-kind assistance of Save the Children UK, who allocated generously of time from Sarah Lilley, whose skilled oversight, facilitation and leadership were key in developing and conducting the review as well as preparing for the next stages of work. Thanks also go to the UNICEF Evaluation Division for conducting broad searches of the social science literature. The author warmly acknowledges the support of the Reference Group members, whose shared vision, inter-agency teamwork, and commitment have been instrumental in guiding and enabling the review. These Reference Group members, by agency, include:

Displaced Children and Orphans Fund (USAID): John Williamson  
Oak Foundation: Jane Warburton  
PULIH: Livia Iskandar  
International Save the Children Alliance: Gabriella Olofsson, Bill Bell, Sarah Lilley, and Lisa Laumann  
UNICEF/ESARO: Margie de Monchey & Nankali Maksud  
UNICEF/WCARO: Brigette De Lay & Joachim Theis  
UNICEF HQ: Shirin Nayernouri, Jennifer Keane, & Sam Bickel  
World Vision: Elli Oswald and Bill Forbes

We wish to thank various practitioners who participated in follow-up discussions on particular programs by phone and who offered valuable insights. These included Lucy Batchelor, Mark Canavera, Adi Dananto, William Deng, Bhanu Pathak, Manabendra Nath Ray, and Jill Donahue Thompson.

The author wishes to thank also Camilla Jones and Monica Martin, who reviewed various documents in French and Spanish, respectively. Special gratitude goes to Kathleen Kostelny, who worked closely with the lead consultant on all aspects of the review and whose unwavering support was invaluable.
**Acronyms**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBO</td>
<td>Community based organization</td>
</tr>
<tr>
<td>CPN</td>
<td>Child Protection Network</td>
</tr>
<tr>
<td>CRC</td>
<td>UN Convention on the Rights of the Child</td>
</tr>
<tr>
<td>CWG</td>
<td>Community Watch Group</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus group discussion</td>
</tr>
<tr>
<td>FGM</td>
<td>Female genital mutilation</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender-based violence</td>
</tr>
<tr>
<td>IDP</td>
<td>Internally displaced people</td>
</tr>
<tr>
<td>ILI</td>
<td>Inter-Agency Learning Initiative</td>
</tr>
<tr>
<td>INGO</td>
<td>International non-governmental organization</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
</tr>
<tr>
<td>OVC</td>
<td>Orphans and vulnerable children</td>
</tr>
<tr>
<td>PD</td>
<td>Positive Deviance</td>
</tr>
<tr>
<td>ToR</td>
<td>Terms of Reference</td>
</tr>
</tbody>
</table>
Executive Summary

Child-focused community groups are at the forefront of efforts to address child protection in emergency, transitional, and development contexts worldwide. The mobilization of such grassroots committees has become a reflexive programming response in many settings, particularly in areas affected by armed conflict or displacement. For international agencies, they are a favored approach in places where local and national government is unable or unwilling to fulfill children’s rights to care and protection. These groups are a vital means of mobilizing civil society around children’s protection and well-being. Organized with care and in a contextually appropriate manner, they make it possible to identify, prevent, and respond to significant child protection risks, mobilize communities around child protection issues, and provide a base of local support and action that can be taken to scale through linkages with other communities and with national systems of child protection. These national systems include formal, governmental mechanisms and also non-formal, civil society mechanisms, such as traditional justice systems.

Despite the wide use of this approach, there is at present a lack of robust evidence about the effectiveness, cost, scalability, and sustainability of externally initiated community-based child protection groups. The lack of systematic evidence impedes humanitarian accountability and makes it very difficult to define effective practices, develop appropriate inter-agency guidance for practitioners, and harmonize and strengthen the quality of practice. The lack of systematic evidence also impedes efforts to obtain the funding that is needed to support child protection and well-being, advocate effectively for increased investment by governments in child protection systems, and encourage policy leaders to promote the most effective practices and policies.

This study is part of a two-phase process aimed to strengthen practice and policy by taking stock of the current evidence, identifying gaps, and raising key questions to be pursued in field research in Phase 2.

Overview of the Study

The aim of this evaluation synthesis is to provide a review and summary of the available global evidence on community based child protection groups and their impact on children’s protection and well-being. It is guided by a Reference Group consisting of representatives of the Displaced Children and Orphans Fund (DCOF) of USAID, Oak Foundation, PULIH, International Save the Children Alliance, UNICEF, and World Vision. Save the Children UK is the lead agency overseeing the review, and the review team consisted of four experienced child protection workers, including speakers of French and Spanish.

This review focuses specifically on community-based groups that work on child protection and well-being, with an emphasis on groups that had been externally initiated or supported. These groups go by diverse names such as Child Protection Committees, Child Welfare Committees, Local Anti-Trafficking Groups, Community Care Groups, and Community Watch Groups. For purposes of manageability, this report refers to this family of groups as “child-focused community groups.” Child-focused community groups are defined as a collection of people, often volunteers, that aim to ensure the protection and well-being of children in a village,
urban neighborhood or other community, for example, an IDP camp or temporary settlement. By definition, these groups operate at the grassroots (e.g., village) or district level, although they are often linked to groups at the national level.

The objectives of this review are to:

1. Provide a broad mapping of the scale and coverage of community based child protection groups, including those supported by external agencies, governments and those that are community-led;
2. Document common models and approaches used by agencies to establish, support or promote child protection mechanisms, including defining roles and responsibilities of group members and training support;
3. Document common roles, responsibilities and the key activities of community groups;
4. Assess the strength and quality of the evidence base for community based child protection groups, and to identify critical gaps in knowledge;
5. Synthesise the available global evidence on the impact, reach and effectiveness of community based child protection groups in different contexts including emergency and non-emergency settings (crisis/emergency, early recovery and longer term development);
6. Provide a broad review of lessons on community mobilization which can be drawn from other sectors, in particular health and HIV and AIDS; and
7. Inform the second phase field-based research, including the prioritization of research questions, geographic scope and methodology.

The two main outputs for this review are a report and also a description and analysis of each of the reviewed documents according to a standardized matrix as outlined below.

**Methodology**

Because much of the documentation on child-focused community groups consists of unpublished program evaluation reports conducted or contracted by implementing external agencies, this review concentrates mainly on this grey literature. To ensure that lessons learned from the published literature are incorporated, it included a broad search of the social science journals via the EBSCO database and other sources.

Since this is the first global review of its kind, the review took a broad approach and sought to learn across areas that are often independent sectors in the humanitarian field. Due to differences in agency and donor-defined priorities, some child-focused practitioners address protection issues of abuse, exploitation, and violence. Particularly in regard to HIV and AIDS, practitioners address related issues such as the care and protection of orphans and other vulnerable children, and children’s safety and physical well-being. Because these diverse streams of work are complementary and worthy of consideration as a whole, this study includes the work of all child-focused community groups that address children’s protection and well-being.

The review proceeded in five stages. First, the Reference Group established broad inclusion criteria to guide the search for relevant documents. For purposes of focus and manageability, the search included only:
• Documents that are evaluations, documentations or reviews. These could be broader reviews across several countries as well as evaluations of particular projects within a single country. Excluded were manuals, tool kits, ‘how to’ guides, and general monitoring reports or program descriptions with no evaluation.
• English, Spanish, and French language documents.
• Documents written in the past 10 years.

Using these parameters, the Reference Group members collected information from many different offices of their own agencies and other agencies for evaluation reports, and forwarded documents to the lead consultant.

In Stage Two, the review team used specific inclusion/exclusion criteria to select which of the received documents would undergo full review. The documents selected pertained to:

• Groups at the community and district level but excluded groups at the national level.
• Groups that are focused on children’s (under 18 years) protection issues, excluding groups focused on adult protection issues only;
• Groups whose role consists wholly or in part caring for and protecting children, and supporting broader well-being outcomes for children. This includes multi-purpose groups that promote birth registration, access to education, access and quality health care, support child-headed households, and provide counseling and mediation, among others.
• Community-based child protection approaches which involve at least one or two community volunteers (e.g., focal points for gender-based violence (GBV)), as well as approaches that are based on larger community groups.

In applying these criteria, the lead consultant chose to err on the side of inclusivity. Of 265 identified documents, 105 were filtered out, mainly because they were how-to manuals, general program descriptions, monitoring reports, or duplicates of already selected documents. Of the 160 documents that were selected for review, 130 were evaluation reports on programs involving child-focused community groups. Over 85% were in English, and the rest were in French or Spanish. Approximately 68% of the reviewed evaluation documents concerned broader child protection issues, whereas 29% related to issues of the care and protection of children affected by HIV and AIDS. Most documents reviewed were concerned with groups that had been established through the work of external agencies. The widespread use of externally originated or catalyzed groups made it valuable to learn about the strengths and challenges of this approach. It is anticipated that Phase 2 of this project will review indigenous mechanisms and groups in greater depth.

The reviewed documents also included selected items from the social science literature search. Although these papers focused on Northern contexts, they highlighted key insights from fields such as social work, community psychology, sociology, and anthropology. To enable multi-sectoral learning, the review team also selected a small number of reviews and evaluation reports from the health sector.
In Stage Three, each selected document was reviewed using a matrix that included five categories of information: (a) Document description (e.g., title, source, language, publication status, project name, intervention context); (b) Description and analysis of the community-based child protection group or groups (e.g., processes of group formation and participant selection, form, functions and role, resourcing (training, material, financial), activities, and linkages with formal and nonformal child protection systems); (c) Evaluation methodology (e.g., design, qualitative and/or quantitative methods used, kind of outcomes measures used); (d) Key findings/lessons (e.g., demonstrated outcomes (positive or negative) on children and communities, prerequisite factors and conditions for successful impact, effects of the mode of community engagement, sustainability); and (e) Comments (e.g., on quality of methodology, cautions in interpreting data).

A key aspect of each document that was explored was how the community group was initiated and formed. This aspect was analyzed using a four-category typology developed as part of a separate project: the Interagency Learning Initiative (ILI; see Annex C). These approaches and the roles of external agencies and community members within them are:

**Category 1:** Direct implementation by agency: The agency is a service provider, and community members are beneficiaries.

**Category 2:** Community involvement in agency initiative: The agency is a promoter of its own initiative, a planner and a trainer, and community members are volunteers and beneficiaries.

**Category 3:** Community owned and managed activities mobilized by external agency: The agency is a catalyst, capacity builder, a facilitator of linkages, and a funder after community ownership has developed. The community members are analysts, planners, implementers, assessors, and also beneficiaries.

**Category 4:** Community owned and managed activities initiated from within the community: The agency is a capacity builder and funder, and community members are analysts, planners, implementers, assessors, and also beneficiaries.

Extensive cross checking, reflection, dialogue, and revision processes were used whenever possible to ensure consistency across reviewers in regard to how they completed the matrices.

In Stage Four, all matrices were reviewed holistically in order to identify recurrent themes; areas of convergence and divergence of ideas, practices, and findings; and significant gaps. In Stage Five, the review team made follow-up telephone calls to a limited number of field practitioners in order to learn more about the promising programs that had been identified as candidates for field work in Phase 2 of the project.

---

The Document Set

The set of 160 reviewed documents included three subgroups: (1) 130 evaluation reports (117 in English, 8 in Spanish, and 5 in French) or reviews of child-focused community groups that will be referred to collectively as the primary review set; (2) 4 reviews from the health sector; and (26 published papers obtained from the EBSCO social sciences data base and from other social science studies). The 160 reviewed documents, which cover work in 60 countries by many different agencies, are likely to be broadly representative of the global work on child-focused community groups.

The regional spread of documents in the primary review set was: Africa (60%), Asia (29%), Latin America (7%), and Europe (4%). Two-thirds of these documents pertained to long-term development contexts, whereas only 15% pertained to emergency contexts, and 18% pertained to transitional contexts. Whereas 29% focused on issues associated with HIV and AIDS, 68% of the papers pertained to wider child protection issues.

A significant limitation of this review is the lack of rigorous, high caliber evidence regarding child-focused community groups. The absence of a strong evidence base makes it inappropriate to draw firm conclusions about effectiveness, cost, scalability, sustainability or other aspects of child protection groups. Since this review is based largely on anecdotal evidence, its findings, lessons learned, and recommendations are best regarded as provisional. Also, there was a lack of consensus definitions about key terms such as “community” and even “child protection.” Some of its findings can be tested in Phase 2 of the research.

The review is also limited by its emphasis on externally initiated or supported child-focused community groups since indigenous mechanisms and systems of child protection at community level may be equally important. Moreover, the review was unable to isolate with certainty the effects of a child-focused community group from those of other mechanisms that may have also been present, such as children’s clubs, non-formal or formal education, and women’s groups. The review had limited geographic scope since relatively few reports came from Latin America or East and Central Europe. Since they were evaluations, many of the reviewed documents did not provide rich descriptions of roles and responsibilities. Overall, the documents did not enable the construction of typologies showing how different child-focused community groups developed in different social, political, economic, and cultural contexts.

The methodology and the time frame of the review also imposed significant limits. Although care was taken to invite review of documents in French and Spanish, only a small number of non-English documents were received. Furthermore, the short time frame for the study limited the review team’s ability to conduct a more comprehensive review of the programs.
Key Findings

The State of the Evidence Base

Overall, the state of the evidence regarding child-focused community groups is anecdotal, impressionistic, unsystematic, and underdeveloped. In the primary review set:

- The vast majority had no baseline measurements.
- 84% of the evaluations used ex post methods only.
- Only 3% of the evaluations included comparison groups with pre- and post-intervention measures.
- Measures of actual outcomes for children were rare.
- Few measures of household and family well-being were used.
- Quantitative data were typically for output or process indicators.
- Qualitative data were typically collected on convenience samples.
- Methods of analyzing data were seldom described.
- Many of the interviews and focus group discussions that comprised the bulk of the evidence were subject to numerous biases which evaluators seldom mentioned.

In addition, very little published, peer reviewed literature was identified that focused on child-focused community groups in low- and middle-income countries. This lack of strong evidence makes for a low standard of humanitarian accountability and limits efforts to improve practice.

Despite these limitations, numerous themes and trends arose consistently and frequently across a wide array of regions, agencies, and evaluators. These themes pertained more to the initiation and activities of child-focused community groups than to outcomes for children and the sustainability of those outcomes beyond the period of funded projects. Regarded with appropriate caution, the themes and the findings presented below are useful sources of learning about the current state of practice and can help guide efforts to improve it.

Functions, Forms, and Activities

Child-focused community groups were found to be a highly diverse, adaptable, and replicable approach to child protection in different contexts. One useful distinction—between Child Rights Committees and Child Protection Committees—reflected the differences between child rights and child protection as well as the partial overlap between these two. In general, child rights are very broad, and a sub-group of them are children’s protection rights to be free of abuse, exploitation, and violence. The primary work of Child Rights Committees was to raise awareness about children’s survival, development, and participation rights, monitor and report violations of children’s rights, and advocate for improved policy and legislation to support children’s rights. In contrast, Child Protection Committees emphasized children’s protection rights and complemented awareness-raising, monitoring, and reporting with direct responses such as mediation, problem-solving, referral, support for survivors, and development of local solutions to the child protection threats.
A more pervasive distinction was between child-focused groups that were broad spectrum versus focused. Broad spectrum child-focused community groups had a wide scope of work and addressed diverse child protection and well-being issues such as family separation, discrimination, sexual exploitation and abuse, displacement, family violence and gender-based violence (GBV), living and/or working in the streets, recruitment into armed groups, HIV and AIDS, and stigma related to disability, with the particular focus or foci being selected according to context. These broad spectrum groups were usually called Child Protection Committees or Child Welfare Committees, and they typically consisted of 10-20 participants, most of whom were unpaid. Most committees included women and men, and some included a smaller number of children, typically 1-3 teenagers. In ethnically diverse contexts, they included people from different ethnic, linguistic, and religious subgroups. Their functions, which varied according to context, were to raise awareness about risks to children’s protection and well-being, mobilize communities to respond to and prevent those risks, monitor child protection risks on an ongoing basis, help to develop local solutions to problems, make referrals of difficult cases, and organize psychosocial support for affected children. Most networked with elements in the formal protection system such as police, magistrates, district- and national-level committees, and social services and education officials. Many networked also with elements in non-formal systems such as traditional justice mechanisms.

In contrast, focused community groups organized around a particular issue or narrower set of child protection issues such as child labor, trafficking or HIV and AIDS and to related vulnerabilities. Typically, these groups consisted of 10-20 participants (usually unpaid), although in the HIV and AIDS programs, there were larger numbers of participants in community groups, which usually did not include children. The activities of these groups varied according to the specific issues they addressed. The primary functions of most groups were to raise awareness about specific issues of child protection and well-being, mobilize communities to respond to and prevent those risks, monitor specific child protection risks on an ongoing basis, make referrals of difficult cases, and organize psychosocial support for affected children. Like broad spectrum groups, they usually networked with formal and non-formal child protection systems, and they facilitated the development of local solutions.

Numerous factors affected whether groups took a broad or a narrower approach. Groups that had been catalyzed by an external agency typically reflected that agency’s mandate or approach, the results of a needs assessment, or both. Most broad spectrum groups had been initiated through a Category 2 approach and were guided by agencies to assess, respond to, and prevent diverse child protection issues. In contrast, focused approaches often reflected donor priorities on particular issues such as child labor, child recruitment, or HIV and AIDS. Community initiated work in the HIV and AIDS area typically focused on children affected by HIV and AIDS because those were the most visible, vulnerable children who had awakened deep concern among community members. There was some evidence that protection groups that had begun with a very narrow focus could expand that focus over time to include different protection threats. Whether and how this expansion could be intentionally fostered was unclear.
Effectiveness

Although the evidence base is very thin, the weight of the evidence indicated that child-focused community groups are effective means of improving children’s protection and well-being in different contexts. Significant outcomes for children included reduced participation in dangerous labor, reduced trafficking of children, improvement in the psychosocial well-being of orphans and other vulnerable children, increased realization of children’s participation rights, and reintegration of formerly recruited children into civilian life, among others.

Inductive analysis identified seven factors as having influenced the effectiveness of child-focused community groups:

(1) Community Ownership: Community based groups that felt collectively responsible for addressing locally defined child protection issues and experienced a sense of ownership over the group’s process and activities were more effective than were groups that had less or no sense of ownership. Key determinants of community ownership included: acceptance of collective responsibility; patient cultivation of ownership over time; use of facilitation approaches that enabled community dialogue, mutual learning, and collective decision making; a community sense that ‘this is our program’; volunteerism motivated by wanting to help address a collective problem; and mobilization of community resources. The highest levels of ownership occurred among faith-based groups that addressed issues of HIV and AIDS and had initiated supports for orphans without external intervention.

However, community ownership of child-focused groups was somewhat rare. The vast majority of projects took a category 2 approach to community engagement that stimulated partnership and volunteer efforts in the community but did not stimulate high levels of community ownership. Also, there was often a tradeoff between ownership and scope and depth of work on child protection. For example, the groups that demonstrated relatively high or very high levels of ownership focused on a narrower range of child protection issues than broad spectrum child protection groups did. This was true whether they had been self initiated or externally facilitated initially. Also, they tended not to address the ‘harder’ issues such as family violence and GBV.

(2) Building on Existing Resources: A concerning pattern was the tendency of many programs to facilitate the formation of child-focused community groups without first learning what protection mechanisms or supports for children were already present in the local context. Many programs were initiated without a careful assessment of existing capacities and assets, and some were implemented in a top-down manner that left people feeling disrespected and that marginalized local culture. Numerous evaluations attributed programs’ limited effectiveness to their failure to work in partnership with religious leaders and important cultural resources. One of community members’ main criticisms was that child rights were not part of the culture. An inherent challenge for all child protection workers is to work with communities in ways that respect local culture and support the transformation of harmful practices.
(3) Support from leaders: The support of non-formal and formal leaders such as traditional leaders, elected community officials, religious leaders, and respected elders enabled effective work by child protection groups since it built trust and legitimacy and provided positive role modeling within the community. Leaders provided needed resources such as land and played a key role in mobilizing other resources, by, for example, requesting the engagement of different groups. Leaders’ support was particularly valuable in encouraging community support for child protection activities that ran counter to traditional practices such as early marriage. In some cases, however, leaders’ engagement was politically motivated or oriented toward maintaining power and traditions.

(4) Child participation: In general, the level and quality of children’s participation were low to modest. Although children were often members of child-focused community groups, their participation was either tokenistic or limited by the tendency of adults to dominate meetings and decision making. Where children did participate more fully, their activities, creativity, and resourcefulness tended to increase the effectiveness of the child-focused community groups. Children were highly creative in their approach to communicating essential messages, as they engaged other children through drama, radio broadcasts, role plays, and talk shows. Although only a small number of programs achieved genuine child participation and enjoyed discernible improvements in child protection as a result, these findings offer encouragement in the pursuit of the long-term goal of fulfilling children’s participation rights.

(5) Management of Issues of Power, Diversity, and Inclusivity: Effective child-focused community groups tended to be ones that included representatives of diverse subgroups within the community, including women and men and very poor and marginalized people, who shared power in the discussions, decision making, and work of the child protection group. In general, few programs appeared to have managed these issues well, and they did so through ongoing capacity building and the investment of significant amounts of time and energy. More typically, programs made modest efforts to be inclusive and to balance power across groups, yet these efforts were overtaken by the weight of entrenched social injustices as men tended to dominate over women and adults tended to dominate over children in the discussions and decision making.

(6) Resourcing: To be effective, child-focused community groups needed a mixture of human and material resources. Because the reviewed documents were from international agencies, they focused on resources provided by those agencies rather than by the government, raising the important question whether work on externally supported child-focused groups created parallel systems to those organized by governments. Most child-focused community groups received limited training that lacked appropriate depth and quality, and participants often requested additional training. Needed materials included items such as bicycles, which enabled volunteers to go long distances to reach affected areas. Materials also included stipends to support volunteers whose work on child protection groups took time away from activities needed to feed their families. However, stipends tended to undermine volunteerism if they were large or introduced too early, suggesting that whether and how to provide stipends is highly contextual. In addition, stipends were viewed as undermining the sense of community ownership.
Linkages: Linkages with formal systems were instrumental both in supporting the work of community-based groups and in expanding their reach and scope of impact. Groups were often linked with district-level Child Protection Networks that helped to mobilize resources and enable effective referrals and, through the formal protection system, with the police and justice system. Linkages with non-formal systems such as traditional justice systems and religious groups were highly valuable in engaging local networks, building trust, and filling gaps in places where the government was absent or had little capacity.

Scale

As used in this review, a ‘scalable intervention’ is one that achieves positive outcomes for relatively large numbers of children and over a wider geographic area beyond a particular community. The review found that child-focused community groups are a scalable means of benefitting significant numbers of at-risk children. In emergency, transitional, and development contexts, INGOs often took programs to scale by expanding their geographic scope of coverage in a program. A commonly used approach was to facilitate the establishment of child-focused community groups first in one region and then extend this approach to a wider area that included greater numbers of communities and people. In work on HIV and AIDS, a frequently used means of scaling up has been the mobilization of district- and higher-level groups that work with many different partners who can reach down into communities on a significant scale. This social mobilization approach, which entails extensive capacity building, networking, managing of sub-grants, and strengthening of child supportive policies, has yielded positive results, particularly when it has supported the work of pre-existing child protection groups that are community initiated and owned. A third approach for achieving scale was to develop Child Protection Networks (CPNs) that were either part of civil society or part of governmental systems that had broad reach.

Sustainability

This review explored two, inter-related aspects of sustainability: outcome and process sustainability. Outcome sustainability refers to the continuation of positive child protection outcomes beyond the externally funded period, whereas process sustainability refers to the continuation of child-focused community groups or related community mechanisms beyond the externally funded period. Although outcome sustainability is of primary interest, process sustainability is also of interest because in many contexts there is need of a means of achieving child protection and well-being.

The achievement of sustainability emerged as a significant challenge for many child-focused community groups, many of which collapsed at the end of the externally funded period without alternate means of continuing the benefits to children. In general, the same factors that increased the effectiveness of child-focused community groups also contributed to the sustainability of both the child-focused groups and positive outcomes for children. By far the most important enabler of sustainability was community ownership. Impressive levels of sustainability in the HIV and AIDS area, for example, came through the unpaid efforts of faith-based organizations. Building on existing community resources also boosted sustainability. Child-focused community
groups that included or worked in partnership with religious and traditional leaders and that activated pre-existing local groups and networks such as women’s groups and youth groups tended to be more sustainable. Another effective sustainability strategy was to integrate child-focused community groups into government structures. A tradeoff, however, was that in some cases communities viewed government structures as impositions, and this limited the level of community ownership and the effectiveness of the child-focused groups.

Issues of funding and the use of stipends may also have impacted sustainability. Two widespread donor practices—the provision of short-term funding and rapid, ill timed infusion of large amounts of money into communities—impeded sustainability. A significant question is whether the provision of stipends by INGOs may impede the formation of national child protection systems if governments cannot afford to continue paying the stipends.

Broadly, these findings on effectiveness, sustainability, and scalability of community echoed the lessons from health sector reviews.

**Gaps**

Significant gaps included a relative lack of focus on GBV, family violence, protection of young children, and provision of psychosocial support, as the latter was much more central in work on HIV and AIDS than in wider work on child protection.

**Do No Harm**

Inadvertent harm was associated with excessive targeting of particular categories of vulnerable children such as orphans and also with perverse incentives. Unintended negative consequences were also caused by inadequate training. In some cases, child-focused community groups understood their role but lacked the skills needed to carry it out effectively. In other cases, the groups lacked a clear understanding of their role and overstepped boundaries. Some child-focused groups operated without an appropriate code of conduct. Another problem was the imposition of outsider concepts and approaches, particularly through the use of didactic, top-down approaches rather than dialogue oriented approaches. This imposition often triggered a backlash or left communities feeling that their own beliefs, practices, and resources had been disrespected and marginalized. Also, there was a risk that externally initiated child protection groups had weakened or undermined indigenous supports that had already been present in the communities.

**Promising Practices**

The review identified many promising programs, although only a few could be reviewed in this report due to limited space. The three promising programs were designed to end harmful practices such as female genital mutilation (FGM), reduce children’s participation in the worst forms of labor, and reduce children’s exposure to a broad spectrum of risks, respectively. Efforts to reduce harmful traditional practices in Ethiopia had the greatest positive outcomes for children when they used a slow process of dialogue and change initiated from within the community,
coupled child protection work with wider community development, built a critical mass of supporters, engaged religious leaders and other gatekeepers, and used human rights concepts and language to enable a wider sense of moral change and social transformation.

The program example on reducing child labor in the Philippines indicated the value of enrolling working children into school and simultaneously improving the quality of education, with child-focused community groups monitoring out of school children and working to improve school attendance. In the program example on reducing a broad spectrum of child protection risks in Sudan, a community based Child Protection Network mobilized communities to address issues such as child recruitment, sexual exploitation and abuse, family separation, and family violence. It showed not only how community groups can address many different child protection issues but also how challenging it is to manage issues of power and diversity and to include women as fully as men and to maintain ethnic diversity in ethnically divided communities.

Challenges

The review identified six significant challenges that need to be addressed effectively in order to maximize the contributions of child-focused community groups to children’s protection and well-being. These challenges were to:

1. Build a social norm wherein practitioner agencies regularly conduct systematic, ethically appropriate evaluations of how the actions of child-focused community groups influence children’s protection and well-being. Establishing this norm will require a focus on sustainable outcomes for children, capacity building for staff and community workers, changing agency and donor priorities, and careful attention to the Do No Harm issues associated with evaluation and research activities.

2. Enable child-focused community groups to fulfill appropriate roles and responsibilities. Addressing this challenge requires a clear definition of roles and responsibilities, not asking groups to take on too much or to assume contradictory roles such as control-oriented roles versus help-oriented roles, helping groups to understand their place in the child protection system, and providing the training needed to perform multiple functions well. It is particularly important to attend to children’s roles, striking an appropriate balance between respecting their participation rights and burdening children with excessive responsibilities.

3. Produce sustainable, positive outcomes in regard to a broad spectrum of child protection issues. This requires developing means of enabling community owned child-focused groups to address a wider array of issues than they have addressed previously. It will also be necessary to link with and build the capacity of national child protection systems, avoiding the tendency to create parallel systems.

4. Take a dialogue oriented, respectful approach to child protection work at community level. In place of the didactic, top-down approaches that are often used in addressing sensitive issues, it is essential to enable genuine dialogue and critical reflection on difficult issues, listen to
and learn from communities, build on local assets and cultural practices, and introduce child rights concepts in a manner that does not impose outsider approaches.

(5) Facilitate community ownership of child-focused groups even during emergencies. This will require management of the pressures for immediate results, which make it difficult to take the slow approach that is needed to build ownership, and deliberate planning for transition and longer-term work. It also requires the development and testing of ways of progressively handing over responsibility and decision-making authority to the community.

(6) Change donor practices in regard to the amount, structure, and orientation of funding for child-focused community groups. It is essential that the funding be long term and oriented toward supporting community ownership. Also, three negative practices should be ended: injecting too much funding into communities prematurely and too rapidly; excessive targeting of predefined categories of children; and use of stigmatizing labels.

Recommendations

The review ends with a set of recommendations for practitioners and donors. Practitioners should:

- Make systematic program evaluation and program learning high priorities;
- Develop and disseminate widely user-friendly, child-focused tools that facilitate systematic evaluation.
- Conduct all work on child-focused community groups in a manner that supports healthy national child protection systems.
- Use a dialogue oriented, culturally sensitive approach to facilitate and support the work of child-focused community groups.
- Plan for and take steps to promote sustainability, helping to build durable national systems of child protection.
- Develop improved systems of training and capacity-building, including follow-up support and ongoing supervision.
- Promote genuine child participation.
- Manage effectively issues of power, diversity, and tolerance.
- Fill the identified program gaps discussed above.
- Embed child protection supports within wider community development processes.
- Cultivate awareness of and take steps to respond to and prevent Do No Harm issues such as the creation of parallel systems and excessive targeting of specific groups of at-risk children.

Also donors should:

- Require systematic, robust evaluation of their programs that involve child-focused community groups.
- Support longer-term funding that will enable the development of community-owned child protection groups.
• Avoid the use of stigmatizing labels such as ‘OVC.’
• Avoid excessive targeting of particular categories of at-risk children.
• Avoid the infusion of large sums of money into a community, particularly at an early stage before a sense of local ownership has developed.

These observations and recommendations are offered with the sincere aim of strengthening community mechanisms, processes, and structures that support children’s protection and well-being.
1. Background and Rationale

In emergency, transition, and development settings, the burden of risk and vulnerability falls disproportionately on children. Widespread risks include family separation, displacement, attack, sexual exploitation and abuse, recruitment into or use by armed forces and armed groups, trafficking, disability, HIV and AIDS, and child labor, among many others. Children’s exposure to multiple, accumulating risks, often in a context in which supports and protective factors have been weakened or are absent, shatters children’s rights, impedes children’s healthy development and well-being, and causes enormous suffering.

Children’s exposure to danger and risk factors on a wide scale is often most pronounced in humanitarian emergencies such as those caused by armed conflicts or natural disasters. In low- and middle-income countries, where large numbers of emergencies occur, children are vulnerable even before emergencies due to chronic poverty and inability to meet basic needs. Even after the emergency has ended, however, the risks to children’s well-being persist. In transitional settings, the boundaries between conflict and post-conflict are often blurred, and risks frequently carry over from the emergency phase or morph into more complex forms. Development settings, too, contain myriad risks to children. Many of these risks are rooted in chronic poverty and the structures of social exclusion that cause and inter-relate with poverty, weak social structures, and poor governance. Furthermore, in both high-income and low-income societies, there are urgent issues of family violence, gender-based violence, gang violence, and risks of child labor, trafficking, sexual exploitation, HIV and AIDS, and disability related issues such as stigma, among many others. Across contexts, children face systemic protection threats that arise at family, community, and societal levels and that may be grounded in a socio-historic and political context of institutionalized inequities and social injustices.

1.1 Child Protection Systems

How to respond to, mitigate, and prevent these risks to children’s protection and well-being is a profound, if unanswered, question. Practitioners agree that it is necessary to develop or strengthen protective factors at multiple levels such as the family, community, and national levels. This idea of building protective capacities at multiple levels fits with ecological models of child development that highlight the importance of the social environment in children’s development and emphasize that actors at different levels affect children’s well-being (see Figure 1). According to this model, children’s protection and healthy development depend critically on the care and protection provided by caretakers, typically family and extended family. However, families’ ability to provide care and protection for children depend on having a secure, protective environment and access to child and family supports at the community level. The community is a crucial source of potential support since it includes friends, neighbors, traditional leaders, elders, teachers, youth groups, religious leaders and others who provide

2 Consistent with international law, children are defined as people under 18 years of age.

3 Bronfenbrenner (1979).

4 Adapted from and used by permission of John Williamson.
valuable care and protection. Also, communities are key points of intersection between the government and civil society. In the community, children typically have their first encounter with state institutions such as schools, visit places of worship and learn about religious values and institutions, interact with merchants and people from the private sector, and encounter police and other agents of legal and justice systems. To provide adequate protection for children and families, however, communities need wider supports organized by the government, which bears the primary responsibility for children’s protection and well-being. Government actors and institutions are obligated to provide for security, maintain law and order, and develop child-friendly services, regulations, and policies that promote children’s protection and well-being.

![Figure 1. Different Levels of Protection in a National System of Child Protection.](image)

As this model suggests, it is important to develop effective child protection systems that include interconnected protective mechanisms at different social levels. Ideally, child protection systems bring together formal, statutory elements and non-statutory or non-formal elements in a comprehensive, coordinated manner.

Community mechanisms are an essential component of wider child protection systems. Strategically, community level mechanisms such as child protection committees are useful in part because they interconnect different levels of national child protection systems. The

---

5 Note that the concentric circles represent different levels and do not imply that children have direct contact only with the family. The arrows indicate that children interact directly with community members, and there is also bidirectional interaction across different levels of the system.
strengthening of community-level mechanisms of child protection can be an important step in developing effective child protection systems. At the same time, community-level mechanisms of child protection draw considerable support from societal structures and mechanisms and also family and kinship structures and mechanisms. In fact, the impact of community mechanisms depends on how well they link with, support, and derive support from mechanisms at other levels such as those of the family and the national government.

1.2 The Rationale for Child-Focused Community Groups

Among the most widely used community mechanisms for child protection are child-focused community groups—often called “Child Protection Committees,” “Child Welfare Committees,” and “Child Protection Networks,” among other terms. Although the groups vary considerably in regard to their formation, composition, roles and responsibilities, and mode of functioning, this review will refer to them collectively as child-focused community groups.

The main rationale for developing such community groups is that in many contexts, local and national governments are unable or unwilling to fulfill their obligations to protect children and fulfill children’s rights. For example, following an armed conflict that had divided a country, the government may lack the presence or capacity in many areas that is needed to protect children. Also, community groups are a means of changing social norms and values, some of which may harm children. Particularly in collectivist societies, the change process requires collective dialogue, reflection, and decision making.

In addition, child-focused community groups are seen as a low cost way of reaching large numbers of children, though in less depth than, for example, a family-oriented or individually oriented casework approach. The provision of support on a wide scale is possible by building horizontal connections among child-focused community groups and vertical connections with district-level and national-level mechanisms, both formal and non-formal. A significant advantage of community groups is that communities are natural units for collective planning and action, which community groups can help to mobilize. Furthermore, community groups can draw on the community resources, helpers, and practices that can potentially support child protection. Proponents point out that by engaging communities’ sense of agency, their values, and their own human, physical and cultural resources, it is possible to mobilize communities for child protection and to create contextually appropriate, sustainable supports that outlive the life of externally funded projects. This view is embodied in the current movement in high-income countries toward community-based responses that complement statutory responses.6

It is important to note, however, that external agencies do not always follow a careful rationale in supporting the formation and mobilization of child-focused community groups. The facilitation of child-focused community groups has become a reflex in many settings, particularly in areas affected by armed conflict or displacement. This reflexive approach contradicts the principle that child protection cannot be achieved through a ‘one size fits all’ approach. The reflexive reliance on child-focused community groups can cause harm by

---

6 Matrix Documents 139, 144, 149, 150, 153, 154, 157, 159, 160.
undermining already existing child protection supports. In addition, the reflexive facilitation of large numbers of child-focused community groups may create parallel systems that undermine the development of effective national child protection systems.

Effective child protection mechanisms should be contextually appropriate and adapted to the cultural, economic, social, historic, and political specificities of the situation. It is important to be deliberate and careful in supporting child-focused community groups, which are appropriate when assessment data have indicated that they are warranted, communities have agreed to their usefulness, and they can be implemented well and in ways that minimize harm.

1.3 The Lack of a Strong Evidence Base

A fundamental assumption underlying support for child-focused community groups is that these groups are an effective mechanism for protecting children. The enshrinement of such groups in international guidelines such as the IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings and the Paris Principles illustrates this assumption. Indeed, some evidence indicates that child-focused community groups have generated positive outcomes for children. Among these are positive changes such as increased capacities of communities to fulfill children’s rights to protection, improved care and support for children affected by HIV and AIDS, improved access to education and birth registration, reduced incidence of trafficking and child labor, and removal of children from prostitution.

In general, though, there is a lack of a strong evidence base underlying the use of child-focused community groups. The evidence regarding the efficacy of child-focused community groups and of most other interventions in the child protection sector does not meet the higher standards of evidence that support interventions in more mature sectors such as health and water/sanitation. Rigorous, systematic evaluations of the effectiveness of child-focused community groups are rare, and many evaluations have struggled even to develop appropriate indicators and measures. This situation may be due in part to the high levels of complexity associated with child protection issues, the challenges of developing appropriate measures of child protection, and the difficulties in collecting hard numbers in situations such as war zones and in regard to issues such as family violence that are a source of shame and stigma.

Despite these challenges, the collection of rigorous evidence about the effectiveness, cost, scalability, and sustainability of interventions is essential if the field of child protection is to develop and attract the resources needed to address child protection issues. The lack of systematic evidence for the effectiveness of child-focused community groups demonstrates a low standard of humanitarian accountability and makes it very difficult to define effective practices or to give appropriate guidance to practitioners. Child-focused community groups have the potential to become essential components of a national child protection system. The fulfillment of this potential, however, requires having strong evidence that they are effective, scalable, low in cost, and sustainable.

A stronger evidence base is needed also for purposes of building inter-agency standards of practice and harmonizing supports at national and international levels. At present, there are no inter-agency, consensus standards regarding child-focused community groups. Agencies take many different approaches in organizing, developing, and supporting child-focused community groups. This diversity is potentially valuable in enabling learning and contextual adaptation. However, the proliferation of diverse approaches without inter-agency guidance can lead to harmful practices such as the activation of poorly trained anti-trafficking committees that deprive children of their legitimate freedom of movement. In addition, the proliferation of diverse, sometimes conflicting approaches fits no strategic purpose, wastes precious resources, and creates conflict and confusion. For example, some agencies offer community members stipends or even salaries for their work with child-focused community groups. Other agencies do not provide stipends or salaries out of concern that such practices undermine the spirit of volunteerism. When people from a village where external support is not provided learn from neighboring villages that people doing the same tasks are being paid, the stage is set for jealousies and the disruption of valuable child protection work. To mature, the child protection sector needs a stronger evidence base that enables inter-agency consensus on effective practice and serves as a foundation for good practice guidelines that harmonize diverse child protection efforts.

Concerns about fund raising and policy also motivate the desire for a stronger evidence base regarding child-focused community groups. An important question is whether the child protection sector has the systematic evidence that is needed to make the case to donors and policy makers for (a) assigning a high priority to child protection issues, and (b) supporting the child protection interventions that will have the greatest positive outcomes for children. Many practitioners believe that there is a need for increased funding to support children’s protection and well-being and that child protection should be a higher priority on donors’ and policy makers’ agendas. It is difficult, however, to make the case to policy makers and donors for additional funding and higher prioritization in the absence of compelling evidence that child protection interventions yield tangible, meaningful outcomes for children. In addition, the fact that the child protection sector receives a lower percentage of actual funding for Consolidated Appeal Proposals in emergencies than do other sectors suggests the urgent need to strengthen the entire sector by building an improved evidence base regarding its most widely used interventions.

In light of these and other concerns, it is appropriate to step back and take stock of what we are learning about child-focused community groups. This evaluation synthesis, which systematically reviews existing documentation on child-focused community groups, is undertaken in the spirit that through mutual learning and systematic evaluation of our efforts, we stand collectively to bring up the child protection sector and to strengthen practice and policy in regard to at-risk children.

---

9 Save the Children Sweden (2009).
2. Overview of the Review

The aim of this evaluation synthesis is to review, analyze, and summarize the available global evidence on child-focused community groups. Intended as a first step in addressing the evidence gap discussed above, it seeks to identify the minimum preconditions that are required in order to make a community-based approach to child protection successful, sustainable, and scalable. It is conceptualized as part of a drive toward inter-agency learning that will lead to greater consensus on and harmonization of effective approaches to community mobilization and child protection.

The primary agencies that guided the review are the Displaced Children and Orphans Fund (DCOF) of USAID, Oak Foundation, PULIH, International Save the Children Alliance, UNICEF, and World Vision. Representative(s) of each of these agencies comprise the inter-agency Reference Group that conceptualized and guided the review, working closely with Save the Children UK, the lead agency that oversaw the review. UNICEF’s West and Central Africa Regional Office (WCARO) provided the main funding with an eye toward using what is learned to guide its regional strategy of developing national child protection systems and offering guidance to country offices on how to support effective community-based child protection mechanisms.

The review is part of a two-phase process. As explained below, Phase 1 examines the evidence currently available from published and unpublished evaluations of the work of child-focused community groups. The learning from Phase 1 will provide valuable inputs into Phase 2, which includes field-based research in numerous countries (see Section 7.3). Broadly, this research aims to develop more rigorous evaluations, learn about indigenous child protection mechanisms, learn about how to support formal and non-formal child protection systems, and promote inter-agency learning about how to strengthen practice.

2.1 Terms of Reference

This review focused specifically on child-focused community groups since these are widely used as front line child protection supports and are seen by many practitioners as useful in diverse contexts. These groups have diverse names such as Child Protection Committees, Child Welfare Committees, Child Protection Networks, Local Anti-Trafficking Groups, and Community Care Groups, among others. For the purpose of this review, child-focused community groups are defined as a collection of people, often volunteers, who aim to ensure the protection and well-being of children in a village, urban neighborhood or other community, for example, an IDP camp or temporary settlement. By definition, these groups operate at the grassroots or district level as opposed to a national level. It would be an impossible task to review in a relatively short time the evidence pertaining to all child protection interventions in international humanitarian and development settings. For purposes of manageability, the review focused on child-focused community groups but did not address the full spectrum of important
child protection interventions\textsuperscript{10} that are currently being implemented in communities and at regional, national, and international levels.

As outlined in the Terms of Reference (Annex A), the objectives of this review are to:

1. Provide a broad mapping of the scale and coverage of community based child protection groups, including those supported by external agencies, governments and those that are community-led;
2. Document common models and approaches used by agencies to establish, support or promote child protection mechanisms, including defining roles and responsibilities of group members and training support;
3. Document common roles, responsibilities and the key activities of community groups; Assess the strength and quality of the evidence base for community based child protection groups, and to identify critical gaps in knowledge;
4. Synthesize the available global evidence on the impact, reach and effectiveness of community based child protection groups in different contexts including emergency and non-emergency settings (crisis/emergency, early recovery and longer term development);
5. Provide a broad review of lessons on community mobilization which can be drawn from other sectors, in particular health and HIV and AIDS; and
6. Inform the second phase field-based research, including the prioritization of research questions, geographic scope and methodology.

As a secondary objective, the process of undertaking the evaluation synthesis will also help to identify national and international organizations who are engaged in supporting community based child protection groups who may become partners in Phase 2.

A multitude of questions with regard to community based child protection groups merit investigation. For purposes of manageability, the review focused on the following key questions, recognizing that complete answers may not be at hand:

1. What evidence is available on the impact of community based child protection groups on protecting children from abuse, neglect, violence and exploitation?
2. What are the factors and prerequisite conditions associated with successful impact of these community groups? To what extent are these factors replicable in other contexts and settings?
3. What are the different approaches/models that are taken to mobilising communities for child protection and how do these approaches affect the impact on children?
4. What are the gaps or weaknesses in current approaches/models of community based child protection groups? What can we learn from these weaknesses? How have these weaknesses been addressed and overcome in practice?

\textsuperscript{10} For example, the review did not cover interventions that did not involve community groups but enabled child protection through the tracing and reunification of separated children, development of safe schools and nonformal education, the release and integration of formerly recruited children, birth registration, mitigation and prevention of gender-based violence, support for children living and/or working on the streets, ending discrimination, and protection of children living in orphanages and institutions, among many others.
5. What are common mandates, roles and responsibilities of groups? What type of support do communities receive to carry out their duties? Are expectations realistic and appropriate?

6. What are the factors associated with sustainability of community based child protection groups, including transition for those established as part of an emergency response?

7. What are the costs associated with supporting and mobilizing community based structures? What are the factors associated with scaling up child-focused community groups to cover the whole (or large parts of the) country?

8. Are there any lessons that can be drawn for the child protection sector from experiences of community based mechanisms in other sectors, particularly health and HIV and AIDS? What are the lessons common across all sectors and those specific to child protection?

The two main outputs for this review are a review report and also a description and analysis of each of the reviewed documents as outlined below.

2.2 Methodology

The published literature on child-focused community groups in humanitarian and development contexts is too small a base on which to conduct a global review. Because much of the documentation on child-focused community groups consists of unpublished program evaluation reports conducted or contracted by implementing agencies, this review concentrated mainly on this grey literature. Although many child protection programs go undocumented, the grey literature contains sufficient numerical, contextual, and geographic diversity to allow a broadly representative look at the work being done on child-focused community groups.

Since this is the first global review of its kind, the review took a broad approach and sought to learn across areas that are often regarded as different sectors in the humanitarian field. The boundaries of the term ‘child protection’ have not been defined precisely yet ought to include different areas of work. Because of the systemic nature of child protection threats, many child protection practitioners have addressed a wide array of issues pertaining to abuse, exploitation, and violence. In related areas, practitioners address the risks that are associated with HIV and AIDS by facilitating community-based care and protection of orphans and other vulnerable children, although they may not refer to their work as ‘child protection.’ To a large extent, the differences of language and approach reflect different agency mandates and also the priorities of different donors. However, it is important to keep these agency-, sectoral-, and donor-defined distinctions in perspective. In the life of a whole child, such distinctions have little value. Believing that it is best to take a holistic approach and to regard these diverse streams of work as complementary and worthy of consideration as a whole, this study included the work of all child-focused community groups that address children’s protection and well-being.

To enable learning across the various types of child-focused work, the review also included numerous reviews from the health sector that examine community-based groups and community mobilization. To ensure that lessons learned from the published literature are included, the
Reference Group decided to conduct a broad search of the social science literature, the main part of which UNICEF facilitated using the EBSCO database.

2.2.1 Document Selection

The review proceeded in five stages, with the early stages ensuring an objective, criterion-based process designed to minimize biases such as preference for particular agencies, authors, regions, or approaches. First, the inter-agency Reference Group established broad inclusion criteria to aid the inter-agency group in deciding which documents to search for and submit for review. It was decided to include only:

- Documents that are evaluations, documentation or reviews. These could be broader reviews across several countries as well as evaluations of particular projects within a single country. Excluded were manuals, tool kits, ‘how to’ guides, and general monitoring reports or program descriptions with no evaluation.
- English, Spanish, and French language documents.
- Documents written in the past 10 years.

Using these parameters, the Reference Group members collected documents from many different offices of their own agencies and other agencies and forwarded selected documents to the lead consultant.

In Stage Two, the review team used specific inclusion/exclusion criteria to select which of the received documents would undergo full review. The purpose of this stage was to filter the documents received to include only the most relevant, reliable and appropriate documents in the full review. To keep the focus on child-focused community groups, the full review covered:

- Groups at the community and district level but excluded groups at the national level.
- Groups that are focused on children’s (under 18 years) protection issues, excluding groups focused on adult protection issues only;
- Groups whose role consists wholly or in part caring for and protecting children, and supporting broader well-being outcomes for children. This includes multi-purpose groups supporting birth registration, access to education, access and quality health care, supporting child-headed households, and providing counseling and mediation, among others.
- Community-based child protection approaches which involve one or two community volunteers (e.g., focal points for GBV), as well as approaches that are based on larger community groups.

In applying these criteria, the lead consultant chose to err on the side of inclusivity. For example, the last criterion listed above was stretched to include projects in which there were neither focal points nor well defined groups but collections of community members who were influencing their communities on issues such as GBV. Similarly, although the review was designed to focus on humanitarian and development contexts in low- and middle-income countries, it seemed appropriate to include in the review selected published articles that surfaced
in the EBSCO search and in related, published sources that were pertinent for conceptual and/or empirical reasons even though most papers came from higher income countries. Most of these studies came from the disciplines of social work, sociology, anthropology, and community psychology. The date restrictions were relaxed when an important program surfaced that was outside the time restrictions, although this happened rarely.

Overall, the review emphasized externally supported child-focused community groups since these are widely used, and there is need of systematic learning about these groups and their effectiveness. Also, this is the focus of most documentation efforts. The initial plan had been to include in the review documents on indigenous or traditional child protection groups only if time permitted since otherwise they could be reviewed as part of Phase 2. As it turned out, discussions among Reference Group members elevated the priority of reviewing community-led child protection groups since these are often the most sustainable mechanisms for child protection. In addition, there is concern among child protection practitioners that externally originated or driven child protection groups may not build adequately on resources, supports and traditions that are already present within the community and may even undermine those supports. In actuality, the review emphasized externally supported child-focused community groups yet also included indigenous mechanisms and community-led groups.

2.2.2 Document Review

Stage Three consisted of a full review of each article selected for inclusion. To avoid any sense of hierarchy or preference, each document that had been selected for review was assigned on a random basis. To guide and standardize the review, a matrix (see Annex B) was completed for each document in the review set. The matrix included five categories of information:

1. Document description (e.g., title, source, language, publication status, project name, intervention context);
2. Description and analysis of the community-based child protection group or groups (e.g., processes of group formation and participant selection, form, functions and role, resourcing (training, material, financial), activities, and linkages with formal and non-formal child protection systems);
3. Evaluation methodology (e.g., design, qualitative and/or quantitative methods used, kind of outcomes measures used);
4. Key findings/lessons (e.g., demonstrated outcomes (positive or negative) on children and communities, prerequisite factors and conditions for successful impact, effects of the mode of community engagement, sustainability); and
5. Comments (e.g, on quality of methodology, cautions in interpreting data).

A key item in the matrix is the formation process, which many practitioners believe is of fundamental importance in achieving contextually appropriate, effective, sustainable child protection. In analyzing the formation process, the review used a four-category typology developed as part of the Interagency Learning Initiative (ILI)\textsuperscript{11} as a guide. Summarized in the box below and shown in full in Annex C, the typology outlines four different approaches through which outside agencies engage with and relate to communities.

\textsuperscript{11} Benham (2008).
A Typology of Approaches for Engaging with Communities

**Category 1:** Direct implementation by agency: The agency is a service provider, and community members are beneficiaries.

**Category 2:** Community involvement in agency initiative: The agency is a promoter of its own initiative, a planner and a trainer, and community members are volunteers and beneficiaries.

**Category 3:** Community owned and managed activities mobilized by external agency: The agency is a catalyst, capacity builder, a facilitator of linkages, and a funder after community ownership has developed. The community members are analysts, planners, implementers, assessors, and also beneficiaries.

**Category 4:** Community owned and managed activities initiated from within the community: The agency is a capacity builder and funder, and community members are analysts, planners, implementers, assessors, and also beneficiaries.

Preliminary findings based on the ILI typology\(^{12}\) indicated that these approaches have divergent implications for the effectiveness, cost and sustainability of humanitarian and development projects. Although the typology was not developed specifically in regard to work on child protection, it was included here since it seemed to be a potentially useful analytic tool that captures ideas about community mobilization, participation, human agency, and roles that resonates with the thinking of many child protection practitioners.

It is important to note, however, that these approaches are not ordered in a hierarchy according to preference. In fact, which approach is most appropriate varies according to the context. In the refugee camps in Goma following the 1994 Rwandan genocide, the genocidaires’ control of the camps made it dangerous and inappropriate to use the highly participatory approaches found in Categories 3 and 4. In most contexts, particularly relatively stable ones where there are local groups and partners who already engage in humanitarian support and development, it may be highly appropriate to use Category 3 and Category 4 approaches.

A method of cross checking, reflection, dialogue, and revision was used whenever possible to ensure consistency across reviewers in regard to how they completed the matrices. For the English documents, two reviewers (Wessells & Kostelny) each prepared matrix entries independently for several documents in the review set. Early in the review process, they commented on each others’ matrices, asked questions, checked their categorizations for consistency, and discussed how to best capture the richness and complexity of documents that often exceeded 70 pages on a single matrix page. Although it was not possible to develop a more elaborate coding scheme and make quantitative estimates of inter-rater reliability, they felt that they had achieved an appropriate standard of consistency. Next, working independently, they

\(^{12}\) Benham (2008).
each reviewed approximately half the documents in the review set. Each reviewer read randomly selected items in order to avoid biases and inconsistencies that might arise had one read, for example, only papers from Asia or a particular agency. Subsequently, the lead consultant (Wessells) reviewed both the matrices and the papers that had been reviewed by Kostelny, making any necessary revisions. Significant effort was directed to keeping each matrix entry to one page in order to enhance readability. For the documents in Spanish and French, the initial reviewers were afforded greater flexibility in length of matrix entry and what they included in the matrix since it was assumed that the matrix entries in English would be the sole source of information on those documents for many English speakers.

2.2.3 Analysis and Synthesis

Initially, it had been hoped that there would emerge a cohort of rigorous evaluation studies using sophisticated designs, robust outcome measures, and contextually appropriate interventions. The plan had been to use the data from these to perform a meta-analysis of the impact on children’s protection and well-being of different factors such as the level of community engagement and ownership of the process of protecting and caring for at-risk children. However, no such evidence base was found, despite the large number of documents reviewed. This necessitated a mode of analysis that is inherently more impressionistic and subject to possible biases (for further discussion, see Section 2.3). Nevertheless, clear patterns and common themes were visible.

In Stage Four, the lead consultant sifted through the matrices, working in an inductive manner. He extracted recurrent themes; areas of convergence and divergence of ideas, practices, and findings; and significant gaps. The recurrent themes and areas of convergence were assigned names in accordance with widely used terms and ideas in the document set. These ideas comprised ‘working hypotheses’ such as ‘Community owned action to support vulnerable children is more likely to be sustainable than actions directed and conducted by outside agencies.’ The working hypotheses embodied a mixture of promising practices and potentially harmful practices. An example of the latter was the working hypothesis that ‘Excessive targeting of a particular category of vulnerable children leads to jealousies and social divisions.’ Using the working hypotheses, the lead consultant then inquired further into the matrices and the document set with an eye toward obtaining confirming or disconfirming evidence.

To avoid the well known confirmation bias, the reviewers made deliberate efforts to falsify assumptions that are prominent in the field of child protection and that they, themselves hold. Examples are the assumptions that child participation promotes better outcomes for children and that leaders’ support enables effective work by child-focused community groups. Throughout the process, a self-critical, reflective stance was taken to guard against the influence of personal biases and preconceptions. Testing of ideas with other members of the review team was also used as a means of identifying and reducing bias. Just past the mid-point in the review, preliminary ideas about numerous working hypotheses were shared in a teleconference with Reference Group members, whose feedback and questions led to refinements in the analysis process and encouraged deeper probing into particular issues.
An important part of identifying recurrent themes and areas of convergence was attention to different areas of work, particularly the HIV and AIDS and health areas. Divergent approaches and practices were not regarded as problematic but as sources of comparison and potential learning. For example, if some programs used an ILI category 2 approach to community engagement whereas others used a category 3 or 4 approach to community engagement, an effort was made to discern broad differences in outcomes for children and sustainability. Where similar interventions yielded divergent results, an effort was made to identify possible causes of the divergence. If divergent outcomes seemed irreconcilable, an effort was made to weigh the evidence across many reports in hopes of identifying broad trends. Where such trends were indiscernible, the question or hypothesis under consideration was regarded as unanswerable using the current information and as warranting additional research.

Throughout Stage 4, the review team scanned for programs that might be good candidates to examine at field level in the next phase of the project. Possible candidates might include programs or engaged communities that used promising practices\textsuperscript{13} that demonstrated positive outcomes for vulnerable children. Since much can be learned from one’s failures, candidate programs might also include ones that failed to support children or that caused unforeseen harm. However, it was also recognized that Phase 2 of the project might also explore programs that had not been included in Phase 1.

\textbf{2.2.4 Follow Up}

In Stage Five, the review team made follow-up telephone calls to a limited number of field practitioners in order to learn more about the candidate programs that had been identified. The main purpose was to identify programs or sites that are most ‘ripe’ for field work and could yield the greatest value in Phase 2 of the project. Also, the interviews, which were made possible by Reference Group members, served to fill in information gaps in the written documentation. Inevitably, a review such as this raises as many questions as it answers. The follow-up discussions with experienced practitioners provided a venue for probing into these questions and various working hypotheses that had emerged earlier and hence offered another means of learning from different perspectives and identifying possible biases.

\textbf{2.3 Limitations of the Review}

In humanitarian and development settings, it is notoriously difficult to draw firm conclusions about impact since changes that appear to be due to a particular intervention may in fact have resulted from wider political and economic changes or to other interventions in a fluid environment. The best means of overcoming this challenge is to collect robust, replicable evidence from diverse sources and contexts that a particular intervention is effective, scalable, sustainable, and cost effective. Unfortunately, the child protection sector lacks such an evidence base.

\textsuperscript{13} Promising practices are those for which evidence suggests that the intervention has positive, sustained outcomes for children. It contrasts with proven practices, which meet a higher standard of evidence that permits causal inferences about the efficacy of the intervention and that reflects research in multiple contexts by different agencies.
A significant limitation of this review is the lack of rigorous evidence regarding child-focused community groups. A major finding of this review, to be discussed further below (see Section 4.1), is the very low standard of evidence in this important area of practice. The absence of a strong evidence base restricts severely one’s ability to make conclusions with real confidence about effectiveness, cost, scalability, sustainability or other aspects of child protection groups that might be examined. Of necessity, this review is largely impressionistic and based primarily on anecdotal evidence, and the analysis process may have reflected various biases, although as explained above, numerous steps were taken to minimize these. Hence, the findings, lessons learned, and recommendations from this review are best regarded as provisional and in need of additional research. As is true throughout the field of child protection, few things can be said with certainty.

A second significant limitation is the emphasis on externally initiated or supported child-focused community groups. Although this emphasis is justifiable in light of the widespread use of externally facilitated groups, it limited learning about indigenous mechanisms and systems of child protection at community level. As will become evident later in the report, this is a highly significant limitation, yet one that can possibly be addressed in Phase 2.

Third, it is inherently difficult to isolate the specific effects of a community-based child protection group, which is typically used in combination with various other intervention approaches such as children’s clubs, non-formal or formal education, and women’s groups. In addition, these groups usually link with other protection mechanisms or groups at different levels. Moreover, the agency that facilitates the community-based child protection group typically runs other programs concurrently in other sectors such as health and water and sanitation. Most evaluation reports included in this review made little or no effort to identify this web of other supports that may have influenced the results, making it very difficult to attribute with confidence positive or negative effects to child-focused community groups.

The review is also more limited in its geographic scope than had been hoped. Although concerted effort was made to identify useful reviews from all regions, the review succeeded in obtaining large numbers of reports from Asia and Africa but not from Latin America or East and Central Europe. Despite efforts to be geographically inclusive, this geography gap makes the review less truly global than its aspirations.

The methodology and the limited time frame of the review also imposed significant limits. The primary language for the review was English, and although care was taken to invite review of documents in French and Spanish, there were only a small number of non-English documents received or reviewed. Working in dominant, colonial languages to begin with makes it difficult to include the valuable inputs and perspectives from the Arab world and from myriad countries in which most people do not speak English, French, or Spanish. Also, many of the evaluation reports selected for review contained relatively little information about the program design and implementation, making it difficult to interpret the results. Most documents provided little information about the exact roles and responsibilities of the child-focused community groups. Because of donor imposed restrictions on the time frame and resourcing of the review, it was not possible to contact each program reviewed to obtain more complete information. The short time
frame for the study limited the review team’s ability to do the more comprehensive review of the programs that would have been ideal. Hopefully, the latter limitations may be offset partially by the follow-up process on selected programs in Phase 2.

The review also faced significant challenges of definition, as even the term ‘child protection’ lacks a universally agreed definition and may for different agencies have divergent connections with children’s rights. For example, some agencies view child protection as the response to and prevention of violations of children’s protection rights, that is, to be free of abuse, exploitation, and violence. Other agencies, however, view the realization of children’s wider rights as part of work on child protection. The distinction between child protection and work to realize the wider rights of children is discussed further in Sections 4.2.1 and 6.4.

Terminology throughout this still young field is fraught with complexities. For example, the term ‘formal systems’ of child protection often refers to statutory, government mandated and/or run systems, whereas ‘non-formal systems’ of child protection typically refer to traditional and other civil society structures, mechanisms, and processes of child protection. Yet chiefs in rural African villages are part of highly formalized, traditional systems of governance, even if they are not part of the state apparatus. To attempt to resolve these and other complexities of definition would be premature here and is left as part of the process of maturation for the field.

The review had planned to consider costs alongside issues of effectiveness, scalability, and sustainability. However, only three reviewed reports contained detailed cost information. This constitutes a significant gap in the evidence base.
3. The Document Set

A total of 265 documents were received as possible candidates for review. Of these received documents, 95% were in English, and the rest were in Spanish or French.

3.1 Documents Not Reviewed

Of the submitted documents, 105 did not meet the criteria for inclusion in the full review for various reasons. Most were program descriptions without any evaluation, training manuals, program reviews that did not include child-focused community groups, and duplicates of documents already selected for review. Although these documents were not included in the full review, they were consulted since they offered valuable insights on the state of child protection practice and on the wider systems of child protection.

3.2 Reviewed Documents

The set of 160 reviewed documents are listed in Annex D. This set includes three subgroups: (1) 130 evaluation reports or reviews of child-focused community groups that will be referred to collectively as the primary review set; (2) 4 reviews from the health sector; and (3) 26 published papers obtained from the EBSCO social sciences database or other social science literature.

Since the primary review set is the main source of data and lessons learned for this review, it is instructive to consider its composition by geography, context, and technical area. Of the 130 documents, 117 were in English, 8 were in Spanish, and 5 were in French. Although this set is undoubtedly much smaller than the number of programs that organize or work with child-focused community groups, its size and diversity provide a broad picture of the work in this area. Indeed, the reports span 60 countries (see Annex E) and embody the work of many different agencies.

Most reports came from Africa and Asia, with a much smaller number coming from Central and Eastern Europe and Latin America (Figure 2). It is unclear why the documents came primarily from Africa and Asia, particularly since global agencies such as UNICEF invited submissions worldwide and the Reference Group members attempted to bring in different groups and regions. Perhaps the bulk of work on child-focused community groups is being conducted in Africa and Asia, where government presence, capacity, or resources are more limited, making reliance on community groups an attractive option. More likely, barriers of language and access impeded the collection of documents from other regions.
Next, the documents in the primary review set were sorted into emergency, transition, and development categories in order to illuminate the contextual diversity of child-focused community groups and to aid the analysis of whether those groups formed and functioned differently in divergent contexts. This division was not intended to imply a linear continuum of emergency to development contexts since situations on the ground often have elements of all three categories. Also, development occurs on an ongoing basis, even as countries cycle in and out of emergencies.

Interestingly, two-thirds of the reviewed evaluation documents pertained to programs in long-term development contexts such as Cambodia and South Africa, whereas only 15% pertained to emergency contexts such as those in DRC, Sri Lanka, and Burma/Myanmar (Figure 3). The remainder came from transitional contexts such as those in contemporary Sierra Leone and Liberia. The small percentage of documents concerning emergency contexts is surprising because the organization of child-focused community groups is one of the frontline child protection interventions in emergencies worldwide. Conceivably, programs conducted in development contexts may have been more likely to be documented and evaluated than emergency programs were. Also, the evaluation reports of emergency programs, many of which are multi-sectoral, may have included too little information on child protection aspects to have warranted submission for review. Alternately, agencies may have been reluctant to submit evaluation reports on emergency programs since emergency contexts are so complex and dynamic that even the best designed efforts often come up short.
Figure 3. The percentage of papers in the primary review set by context.

68% of the papers in the primary review set pertained to issues in the wider child protection sector, whereas 29% pertained to HIV and AIDS issues, with a small percent pertaining to health issues (Figure 4). This extensive representation of work on different issues affords excellent

Figure 4. The percentage of papers by technical area.
opportunity to learn from different program approaches.

4. Key Findings

This section presents the main findings based on the analysis and synthesis of the primary review set and also the health review papers and the social science literature.

4.1 The State of the Evidence Base

The state of the evidence regarding child-focused community groups is very weak overall. It can be described as largely anecdotal, impressionistic, unsystematic, and underdeveloped. Here are some of the characteristics of the primary review set:

- The vast majority had no baseline measurements.
- 84% of the evaluations used ex post methods only.
- Only 3% of the evaluations included comparison groups with pre- and post-intervention measures (Figure 5).
- Measures of actual outcomes for children were rare.
- Few measures of household and family well-being were used.
- Quantitative data were typically for output or process indicators.
- Qualitative data were typically collected on convenience samples.
- Methods of analyzing data were seldom described.
- Many of the interviews and focus group discussions that comprised the bulk of the evidence were subject to numerous biases which evaluators seldom mentioned.

The most widely used methods of data collection were qualitative and consisted mostly of focus group discussions (FGDs) and interviews, yet few evaluation reports presented systematic analysis of these. In addition, the primary review set included very few systematic evaluations that would successfully withstand rigorous peer review. There were no randomized controlled trials of the kind that comprise the gold standard in related areas of work such as psychosocial support\(^\text{15}\) and in many other humanitarian sectors. In addition, some evaluations were critical of the approaches and methods used in the interventions.\(^\text{16}\)

This weak evidence base is reflected also in the published literature. Although the search for published work on child-focused community groups covered thousands of social science journals, it turned up no systematic empirical studies of the effectiveness of child-focused community groups in low- and middle-income countries.

\(^{15}\) Bolton et al. (2007).
\(^{16}\) Matrix Documents 6, 8, 17, 18, 20, 22, 39, 43, 49, 78, 88, 112, 114, 128.
This situation embodies poor accountability and impedes efforts to improve practice. It also makes it impossible to draw firm conclusions about which intervention approaches work and why. Collectively, these concerns recommend caution in interpreting the evidence regarding child-focused community groups. The findings and lessons reported in this review should be regarded as provisional.

On the other hand, a group of useful findings emerged consistently from the reviewed documents. In fact, many themes regarding effectiveness, scalability, and sustainability arose frequently and consistently across diverse regions, agencies, and evaluators. Viewed with a critical eye, the emergent themes and consistent findings presented below are potentially useful sources of learning about the current state of practice and can help guide immediate efforts to improve it.

### 4.2 Functions, Forms, and Activities

Child-focused community groups were noteworthy for their diversity and adaptability to different contexts. Functional, reasonably effective groups have been established in many countries and in fluid, emergency contexts as well as in transitional and long-term development contexts. They take diverse forms and are called by different names according to factors such as the context, their functions, the aims of the implementers, and the donors’ priorities. Indeed, their diversity, adaptability, and apparent low cost have made them an attractive intervention option for many practitioners.

---

17 This comparison included the 113 papers in the primary review set for which it was possible to make accurate categorizations.
To capture the diverse functions, forms, and activities of child-focused community groups, it would be useful to create different typologies that categorize groups according to dimensions such as emergency versus non-emergency contexts; the level of development of the affected country and the resource base available to support the groups; the administrative level (e.g., village, commune or ward, district) of the group; and the extent and quality of linkages with Government and traditional structures. The reviewed documents, however, did not provide the detailed information that is needed to construct such typologies. Possibly this was because the documents were evaluations rather than rich descriptions of the groups and their exact functions and activities. Important differences did emerge, however, in regard to (1) Child Rights Committees versus Child Protection Committees, and (2) broad spectrum groups versus focused groups.

4.2.1 Child Rights Committees Versus Child Protection Committees

The differences between these community groups reflected the conceptual distinction between child rights and child protection. Although no universally agreed distinction between child rights and child protection has been achieved, there is increasing consensus that child protection rights—to be free of abuse, exploitation, and violence—are a subset of the wider child rights guaranteed under the UN Convention on the Rights of the Child (CRC). Despite this interrelation of child rights and child protection, a key difference is that work on enabling the realization of the full array of child rights (e.g., survival rights, development rights, participation rights) is much broader than work on child protection, which focuses on the fulfillment of children’s specific rights to protection.

Work on child rights and work on child protection overlap partially and complement each other. Because child protection work aims to realize particular rights of children, child protection is therefore part of a comprehensive approach to fulfilling children’s rights. It would be meaningless to have child rights spelled out on paper without having means of protecting children from abuse, exploitation, and violence. Second, survival rights are a cornerstone of child rights yet are highly relevant to child protection and well-being since children who lack access to necessities such as food and clean water are at grave risk of harm and exploitation. Third, work on wider child rights helps to create a protective environment, including legislative, regulative, and policy elements, that enables child protection and well-being. For example, the fulfillment of children’s right to education (Article 28 of the CRC) can facilitate children’s protection. Also, most child rights groups and child protection groups worked within a rights-based framework that aimed to move beyond charity approaches and to empower children as well as adults.

With these points of overlap in mind, the review included a small number of child-focused groups that addressed child rights. Predictably, this review identified significant differences of function and activity between child-focused community groups that addressed child rights and child-focused groups that addressed child protection. The former, which were typically called

---

18 Matrix Document 158.
19 Kostelny & Wessells (2008); Nicolai and Triplehorn (2003).
Child Rights Committees,\(^{20}\) addressed the full array of child rights issues. Their main activities were to monitor and report violations of children’s rights, to raise public awareness of the full spectrum of children’s rights and also to advocate for the development and implementation of child-friendly laws, regulations, and policies. In general, they did not respond directly to rights abuses by, for example, providing psychosocial support for children whose parents had been killed or by mediating domestic disputes that harmed children.

In contrast, Child Protection Committees (also called Child Welfare Committees, Child Labor Committees, or Child Protection Networks, among others) addressed child protection issues such as recruitment, sexual exploitation, loss of parents or other caretakers, child labor, lack of birth registration, and trafficking. They did not, however, address the full array of children’s rights. In addition, Child Protection Committees typically functioned in a very different manner from that of Child Rights Committees. Typically, Child Protection Committees identified, responded to, and prevented risks to children’s protection and well-being. To be sure, they

\[
\text{A Child Protection Committee: Roles and Responsibilities}
\]

In West Bengal, the source of nearly 7% of India’s millions of child laborers, Save the Children Alliance facilitated the formation of village-level Child Protection Committees. Typically, the Committees had 13-20 members, including influential people, parents, school teachers, employers, and representatives of children’s groups.

The main roles and responsibilities of the Committees were to:
- Raise awareness about child protection issues, particularly trafficking, abuse of children at work places, and use of corporal punishment;
- Take cases of abuse, exploitation or violence to appropriate authorities or facilitate a local solution;
- Provide information about where people should go if they have concerns about a child’s well-being;
- Disseminate information from the formal child protection system to children and others;
- Work as pressure groups for the appropriate implementation of laws and for improved service delivery by the government.

The Committees collaborated with police, local government, the social welfare department, and parents, teachers, and children. At village level, they connected with Children’s Groups that gave children a forum in which to raise their concerns and that in turn sent back to the Child Protection Committees information about trafficking ploys, child marriage, and child abuse.

In the last 3-4 years, the committees have helped over 1200 children to leave work and return to school, and they aided in the arrest of 100 traffickers.

*Source: Matrix Document 12.*

\(^{20}\) Matrix Documents 9, 17, 104, 108.
monitored and reported violations of protection rights, and they also educated people about child rights and conducted advocacy. Yet these were not the central elements of their work. Child Protection Committees expended greater time and effort in direct response to child protection risks. As outlined below, this work included activities such as aiding the reintegration of formerly recruited children, removing children from dangerous labor and improving working conditions, and providing psychosocial support for survivors of abuse, exploitation, and violence.

4.2.2 Broad Spectrum Groups Versus Focused Groups

Among the child-focused groups that addressed issues of child protection rather than wider child rights, there were significant differences in the scope of the protection issues addressed. Whereas some took a holistic approach and addressed a wide array of child protection issues, others took a focused approach in which they targeted a particular issue or at-risk group of children. In essence, these were differences of both mandate and function, and they entailed different approaches, as outlined below.

The reviewed documents seldom indicated directly why child-focused groups took a broad or a focused approach. In some cases, donor priorities on and targeted funding for child labor or child trafficking seemed to have led external agencies to facilitate the formation of child-focused community groups that addressed those particular issues. In addition, assessment data and agency mandates may have pointed agencies in the direction of taking either a holistic or a more selective approach. Other motivating factors are considered below and merit additional inquiry in Phase 2.

4.2.2.1 Broad Spectrum Groups

Broad spectrum child protection groups are community-based groups that addressed a wide variety of child protection and well-being issues such as family separation, discrimination, sexual exploitation and abuse, displacement, family violence and GBV, living and/or working in the streets, recruitment into and demobilization from armed groups, HIV and AIDS, and stigma associated with disability, with the particular focus or foci being selected according to context. These broad spectrum groups were usually called Child Protection Committees, Child Welfare Committees, or Child Protection Networks, and they were comprised typically of 10-20 participants, most of whom were volunteers. Most committees included women and men and also a smaller number of children, typically 1-3 teenagers, although there was considerable variation in children’s participation. In ethnically diverse communities, these groups included people from different ethnic, linguistic, and religious sub-groups. However, as discussed below, diversity of representation did not ensure equality of voice and power.

In most cases, their role was not only to monitor and report abuse, exploitation, and violence against children but also to respond to, mitigate, and prevent protection risks to children. Most broad spectrum committees saw their role as mobilizing communities to address protection

---

issues and support children’s protection and well-being. Common activities included raising awareness about diverse protection issues, educating about children’s rights, providing support for survivors of different protection threats, managing cases, facilitating local solutions, making referrals, organizing community activities (including sports, arts and crafts, and others that promote social integration) for children, organizing psychosocial support for survivors, and engaging in advocacy and influencing efforts. Most groups networked and linked with elements in the formal protection system such as police, magistrates, district- and national-level committees or groups, and social services and education officials. Not uncommonly, they also networked with elements in non-formal systems that included traditional leaders, religious groups, healers, and mechanisms of hearing grievances and handling complaints. Many networked also with other civil society structures such as community-based organizations (CBOs), non-governmental organizations (NGOs), and district women’s associations. For an example of a broad spectrum group, see Section 5.3.

4.2.2.2 Focused Groups

In contrast, other child-focused community groups focused on a particular issue or narrow set of child protection and well-being issues. Many groups focused on issues associated with HIV and AIDS, calling themselves by names such as Community Care Forums, Village AIDS Committees, and Community Care Coalitions. These groups focused on a particular set of vulnerability and protection issues such as those associated with orphaning, loss, living with dying parents, stigmatization, and economic desperation. Viewing their primary role as mitigating these factors, they often provided food and other necessities, home based care, and psychosocial support. In terms of protection, they focused primarily on issues such as family separation, lack of access to basic necessities, sexual exploitation and abuse, the marginalization of children living in foster homes, and adoption. It is important to note that this array of issues was quite diverse even if it did not match the full array of issues addressed by broad spectrum child protection groups.

Focused community groups were also visible in regard to issues such as dangerous child labor, trafficking, GBV, reintegration of formerly recruited children, and support for children who lived or worked on the streets. For example, anti-trafficking programs typically included groups such as community-based anti-trafficking committees that supported survivors of trafficking and mobilized communities around trafficking issues by educating girls, boys, and also families about safe migration, the hazards of trafficking, effective communication and coping strategies, and sexual exploitation and abuse. These programs frequently networked with police and border authorities, and they often included cross-border efforts to enable safe migration and the collection of information that enabled prosecution of traffickers.

22 Matrix Documents 15, 21, 33, 41, 44, 45, 47, 51, 63, 68, 69, 71, 72, 82, 93, 95, 96, 100, 102, 103, 105, 107, 108b, 119, 129.
23 Matrix Documents 4, 5, 53, 56, 110, 117, 118.
24 Matrix Documents 6, 101, 109, 123, 128.
25 Matrix Documents 2, 83, 98.
26 Matrix Documents 22, 28.
27 Matrix Document 38.
There was some evidence that groups that had begun with a narrow focus could expand their scope over time to include a wider diversity of protection threats.\textsuperscript{28} To some extent, this may have occurred because of the interconnected nature of different protection threats, which leads many practitioners toward a holistic approach. However, the primary review set provided little information about why groups expanded their scope and whether child protection and well-being could be improved by deliberately encouraging an expanded scope. Also, the reviewed documents provided little information on how the enlargement of a group’s scope of work affected the quality and effectiveness of its efforts.

Why particular committees focused on specific issues or groups of children is unclear. Ideally, the approach an INGO takes should depend on the context and the results of a careful assessment of needs and assets. The reviewed documents did not provide extensive information about whether and how program approaches had been guided by careful assessments. No doubt an important factor was that funding was often targeted at particular issues and groups. Also, individual agencies have particular specialties or approaches within child protection, and these may have led to focused interventions. Conceivably, an agency that had special interest in child labor may have emphasized that issue in facilitating the formation of child-focused groups, making this the issue that communities were most likely to address.

The approach that external agencies took in engaging with communities strongly influenced whether a child-focused community group took a broad spectrum or a focused approach. All of the broad spectrum groups had been initiated through a category 2 approach in which external agencies had guided the communities and groups toward monitoring, responding to, and preventing a wide variety of child protection issues. Indigenous groups that had been initiated and led by the community\textsuperscript{29} (a category 4 approach) did not respond to the full array of child protection issues. Similarly, child-focused groups whose formation had been facilitated by outside agencies using a category 3 approach\textsuperscript{30} took responsibility for addressing specific concerns such as the plight of orphans and other vulnerable children. This may have occurred because communities affected by HIV and AIDS noticed that orphans and other children made vulnerable by HIV and AIDS needed support. Alternately, the facilitators who assisted in forming the child-focused groups may have emphasized the plight of children affected by HIV and AIDS, and this may have led the community to take responsibility for addressing those issues rather than others.

\subsection*{4.3 Effectiveness}

The weight of the evidence from diverse contexts and programs suggested that well-designed, carefully implemented child-focused community groups were effective means of improving children’s protection and well-being in many different contexts. In this respect, child-focused community groups have proven to be a replicable approach that consistently yields positive outcomes for children. Among the positive outcomes for children were: reduced participation in

\textsuperscript{28} Matrix Documents 6, 56, 73 82.

\textsuperscript{29} Matrix Documents 15, 44, 68, 71, 82.

\textsuperscript{30} Matrix Documents 25, 48, 67, 69, 87, 95, 97, 110.
dangerous labor,\textsuperscript{31} reduced trafficking of children,\textsuperscript{32} increased participation in education,\textsuperscript{33} improvement in the psychosocial well-being of orphans and other vulnerable children,\textsuperscript{34} increased realization of children’s participation rights,\textsuperscript{35} reintegration of formerly recruited children into civilian life,\textsuperscript{36} and increased birth registration,\textsuperscript{37} among others. Although effectiveness intertwined with issues of scale and sustainability, these issues are addressed in separate sections below for purposes of manageability.

Across emergency, transition, and development contexts, there emerged a set of seven common factors that significantly influenced the effectiveness of child-focused community groups. These are discussed in turn below.

### 4.3.1 Community Ownership

The evidence from this review suggested consistently that a sense of community ownership contributed to higher levels of effectiveness of child-focused community groups.\textsuperscript{38} Positive outcomes for children occurred even in the absence of community ownership of programs, yet higher levels of community ownership made for greater effectiveness. Community ownership is “the sense among those involved that the problems identified are theirs and that they hold primary responsibility for addressing them.”\textsuperscript{39} The responsibility felt was collective as well as individual, and it stimulated high levels of community mobilization from inside the community and conferred a sense of meaningful participation. Whether a community-based group arose internally or had been facilitated by an external agency, it was clear in community owned programs that the community bore primary responsibility for the decisions, activities, and accomplishments of the group.

The ILI typology (see page 30 and Annex C) offers a convenient way of conceptualizing the dynamics of community ownership.\textsuperscript{40} Category 1 defines a service approach in which the community members are beneficiaries yet have low levels of ownership since they neither define the problem nor see the program as their own means of addressing it. Under such conditions, community members may feel grateful for the services yet they will probably not have a sense that the program is their responsibility. Category 2 affords an increased sense of ownership since community members are not only beneficiaries but also partners with an external agency that shares responsibility. They volunteer their labor and also community resources such as land, expertise, and facilities. Category 3 entails still higher levels of community ownership since the community owns and manages activities that an external agency had mobilized or catalyzed initially. Because community members are highly engaged in key decisions regarding the

\textsuperscript{31} Matrix Documents 4, 5, 23, 36, 56, 90.
\textsuperscript{32} Matrix Documents 48, 101.
\textsuperscript{33} Matrix Documents 4, 5, 44, 79, 86b, 90.
\textsuperscript{34} Matrix Document 10, 13, 15, 44, 71, 93, 124.
\textsuperscript{35} Matrix Documents 7, 31, 103.
\textsuperscript{36} Matrix Documents 1, 22.
\textsuperscript{37} Matrix Documents 51, 93, 97, 107.
\textsuperscript{38} Matrix Documents 15, 21, 29, 42, 44, 60, 67, 68, 69, 82, 91, 95, 124, 125.
\textsuperscript{39} Matrix Document 82, p. i.
\textsuperscript{40} Benham (2008).
program planning, implementation and evaluation, they are likely to feel responsible for the program and its outcomes. Category 4 affords the highest level of ownership since the community members on their own initiative define their shared concerns and take responsibility for action through an existing community mechanism or one they develop.

Using the ILI typology as a lens, 113 evaluation reports were assigned to the four categories.\textsuperscript{41} This categorization is approximate since the documents did not always provide sufficient information to make a definitive assignment to a category. Excluded were documents that provided too little information to reasonably gauge which category applied. If there was uncertainty about whether a program best fit a particular category (e.g., 3 or 4), it was assigned to the lower category in order to present the most conservative estimate of ownership.

Most programs fell into category 2, whereas relatively few programs fit categories 1, 3, and 4. Agencies’ use of category 2 approaches far more often than category 1 approaches indicates that in organizing child-focused community groups, child protection agencies favored partnership approaches that enabled community participation and limited power-sharing over a direct service approach.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{figure6.png}
\caption{The percentage of papers in the primary review set according to their approach to engaging with communities.}
\end{figure}

4.3.1.1 Why Category 3 and 4 Approaches Were Least Frequent

Why so few programs fit categories 3 and 4 is an important question, particularly since most agencies say they try to promote community owned child protection work. Possibly, contextual factors may have limited the use of category 3 and 4 approaches. In some contexts, security,

\textsuperscript{41} It was not possible to identify which category the program approach fit for all documents in the primary review set.
political and other considerations make it inappropriate to use these approaches. Donor practices may also have contributed to this pattern. Donors frequently provide funding over periods that are too short to enable the development of real community ownership, and this might encourage agencies to take a category 2 approach. There may also be contextual pressures for rapid results that favor category 2 approaches, which can be implemented relatively quickly and with useful results. Consistent with this contextual interpretation, none of the emergency phase program documents reviewed used a category 3 or 4 approach—all used a category 2 approach. In contrast, all of the category 4 approaches came from development settings, possibly because they are more stable and make it possible to use the slow approach that is needed to build ownership.

Issues of facilitation may also have enabled a higher frequency of category 2 approaches. Effective community engagement using a category 3 approach requires more sophisticated skills and a different set of attitudes and values than are required for a category 2 approach. Conceivably, child protection workers who facilitate the establishment of child-focused community groups may lack the full array of skills that are needed to achieve high levels of community ownership. This is less a criticism of child protection workers than a recognition of how difficult it is to enable community ownership in addressing highly sensitive, controversial issues.

Communities’ expectations about their roles and responsibilities may also have influenced how they engaged with outside agencies. If communities had previously formed partnerships with INGOs in a category 2 arrangement, this could have set up expectations that in relating with other INGOs in the future, they should take a partnership role characteristic of category 2. The reviewed documents did not supply the information needed to identify the relative importance of these or other factors in shaping the dominance of category 2 approaches and the relative infrequency of category 3 and 4 approaches.

4.3.1.2 Factors That Promoted Community Ownership

The review identified five important factors that promoted community ownership either from the outside or the inside.

- **A sense of collective responsibility.** External agencies encouraged collective responsibility by intentionally playing facilitative, capacity building roles rather than directive roles; by not presenting themselves as the problem-solvers; by stimulating community reflection not only on the problem but on who is responsible for addressing it; by eliciting ideas about which people and resources in the community could help to address the problem; and by avoiding practices that could have undermined community ownership. On the part of the community, collective responsibility was enabled by leaders’ support for a collective effort, reflection on how everyone in the community benefits from successful management of the problem, positive modeling of taking responsibility, and development of group norms of collaboration on addressing the problem.
A Community Mapping and Positive Deviance Approach to Building Community Ownership

In East Java Province, Indonesia, the trafficking of girls was a widespread yet taboo problem that in 2003, communities did little to address. In a strategy of building community trust, Save the Children Alliance framed the first meeting with village development workers as a forum to identify and address general community problems. Having built trust using this indirect approach, they took three steps to enable communities to recognize the problem and to take responsibility for addressing it.

First, the village development workers mapped the entire village, circling homes of missing girls or girls at risk. This mapping exercise highlighted the magnitude of the problem: 140 people were missing, and 90% were girls between 14 and 17 years of age. Seeing how great the problem was, the village broke their silence, began to take ownership of the problem, and asked questions such as “Why do girls leave the village and not boys?”

Second, the village development workers identified positive deviants (PDs)—people who were at risk of trafficking yet who had developed a positive coping strategy for avoiding involvement in trafficking. PD families used strategies such as: (1) engaging in diverse income-generating activities; (2) helping their daughters to establish a small business to supplement family income; (3) openly discussing the risks of working in the ‘entertainment industry;’ and (4) allowing daughters to work outside the village after investigating the employer and kind of work.

Third, the community developed its own action plan. Community Watch Committees were established in every hamlet to monitor the brokers and traffickers and map the migration flow of girls. The community launched an anti-trafficking and safe migration campaign based on PD practices. The local government disseminated rules and regulations regarding travel documentation.

Two years later, no new girls had left the village to enter the sex trade, and the community had averted 20 attempts at girl trafficking. Also, the district government had committed funds to expand training opportunities for girls. In place of the taboo, each hamlet held anti-trafficking poster contests.


- **Patient cultivation.** One of the most consistent themes was that the development of community ownership is a slow process that takes time and cannot be hurried. Often, the sense of urgency and tight deadlines imposed by agencies and donors impeded such a slow process, which requires ongoing cultivation efforts.

- **Skill in facilitation.** Building community ownership is very much about process. Effective process entailed facilitation skills such as patience, listening, transparency, understanding of the community dynamics, and good timing (e.g., knowing on the basis of practical experience when to slow down a dialogue or draw out different opinions) were useful in cultivating community ownership. In general, didactic, expert-driven, top-down discussions tended to disempower people, whereas more community centered methods stimulated a spirit of ownership. Of particular importance were dialogical process skills of (1) enabling dialogue, discovery, and mutual learning about child protection issues in the local setting, (2) facilitating dialogue and critical thinking about whose responsibility it is to address the issues and how the community can organize itself to respond in an effective manner. Of use were participatory, empowerment

42 Matrix Documents 20, 114, 128.
oriented methods (e.g., Positive Deviance, Training for Transformation, and Participatory Learning and Action) that deepened community members’ understanding of children’s situation, awakened their sense of responsibility and desire to address the issues, elicited ideas about resources to address child protection issues, engaged different sub-groups such as marginalized people, women’s groups and youth groups, and created a sense of empowerment and internal agency. These methods embodied respect for local people, who were treated not as hapless victims but as people who are entitled to have a voice and real power in decision-making. Importantly, the facilitation of ownership was not invariably external but also came from within the affected group. Natural leaders such

What Makes for a Good Volunteer?

In light of the importance of the efforts of volunteers, defined here to include all unpaid workers, it is useful to reflect on what makes for good volunteers. In general, five factors enabled people to be effective volunteers:

(1) Careful selection: Good volunteers were often identified through a transparent selection process that favored the selection of people who were compassionate, empathetic, respected, motivated, and in a position to help affected children. If the volunteers needed sophisticated skills, the selection process focused also on finding people who had appropriate levels of the necessary skills. It was important for the selection process to weed out as much as possible people who did not have genuine concern for children’s well-being or who had other agendas such as getting elected to a political office.

(2) Motivation: The most effective volunteers were highly compassionate and motivated by wanting to help children in difficult circumstances. Some of the most active and effective volunteers were motivated by religious values and feelings of responsibility to their ethnic group. People who ‘volunteered’ out of desire for stipends tended not to be good volunteers.

(3) Respect/trust: In general, good volunteers were well respected and trusted by their communities. The trust and respect they had earned enabled them to perform sensitive roles such as providing home-based care, mediating disputes, and supporting affected children that might have been off limits to less respected people. Because they were trusted, communities may have been more receptive to the local solutions they facilitated.

(4) Capacity building: Overall, good volunteers did not have to be well educated. In work to support children affected by HIV and AIDS, some of the best volunteers were people who had only a few years of formal education and low levels of literacy. However, to be effective, the workers needed training, follow-up support, and ongoing capacity building that enabled them to fulfill their roles and responsibilities as members of child-focused community groups.

(5) Ongoing support: To sustain their work, good volunteers needed support that prepared them to perform their responsibilities without placing undue pressure on their own families by, for example, loss of income. Many volunteers benefitted from material supports such as bicycles that made it possible to reach affected people and also from social supports that enabled them to cope with the stresses associated with the care and protection of children.

Sources: Matrix Documents 15, 21, 29, 113, 129.

---

44 Matrix Document 67.
as religious leaders, elders, or talented youth stepped forward and encouraged community members to take up the cause and work together to solve the problem.

- **Identity.** Community ownership was most likely to occur when community members not only took responsibility for the problem but clearly named the program or steps to address it as their own, as was visible when community members said ‘This is our program.’ To facilitate this sense of ownership, one agency deliberately kept a low profile in supporting a child-focused community group.\(^{45}\) If, on the other hand, community members viewed a particular program as belonging to an outside agency, as in ‘This is a government activity’ or ‘This is a Save the Children program’, the sense of community ownership was lower. Unfortunately, throughout the child protection sector, there are visible pressures by donors and humanitarian agencies to have child protection workers ‘plant their flag,’ emphasizing their accomplishments over those of the community itself.

- **Mobilization of community resources.** One of the most important community resources was its volunteer spirit. Volunteers were often motivated by compassion, empathy, wanting to help, and also by self-interest, as in ‘we are all suffering or brought down because of this problem and it is in the interest of each of us to work together to solve it.’ These and other pro-social motivations were supported a sense of collective responsibility and were in turn inspired by it. Community group members included teachers, health workers, healers, traditional leaders, and religious leaders who brought diverse perspectives, networks, influence within their respective spheres, and valuable expertise to bear on the problems. Communities that took collective responsibility for addressing a problem often marshaled resources of many different kinds. In different contexts, they collected money, food and clothing for their most vulnerable children, made land available for dwelling or gardens, or supported ceremonies that aided the reintegration of formerly recruited children. The effective mobilization of these resources often made for rapid, visible improvements in children’s well-being. In turn, these rapid gains inspired additional responsibility-taking and action, creating circular feedback that promoted positive change.

Despite the many advantages of community ownership, it would be a mistake to idealize community-owned child protection groups. Since ideas about children’s well-being and definitions of childhood are culturally constructed,\(^{46}\) community-owned, indigenous processes often reflect traditional beliefs and practices. These practices usually favor boys over girls and may include harmful practices such as early marriage and female genital mutilation (FGM). Also, in the primary review set, a tension existed between community-owned processes and the scope of child protection issues addressed. The category 3 and 4 approaches in which communities had formed groups to address particular children’s issues such as those associated with HIV and AIDS tended not to take on the ‘harder’ child protection issues such as early marriage, sexual violence in the family, severe corporal punishment, and FGM. Possibly, these issues may have been regarded as private or as too controversial to discuss publicly, particularly if community members were implicated as violators of children’s rights. The necessity of

\(^{45}\) Matrix Document 95.

\(^{46}\) Boyden (2004); Hart & Tyrer (2006).
addressing these harder issues is most likely what motivated external agencies to take a partnership approach such as that embodied in ILI category 2. Moreover, high levels of child participation were not evident in community-owned groups.

The reviewed papers did not indicate whether and how it is possible to enable community-owned child-focused groups to address the full spectrum of child protection issues, including highly sensitive ones. However, some limited evidence suggested that over time, community-owned groups may take on an expanded array of child protection issues.

The review also identified numerous factors that limit or undermine community ownership. Particularly damaging was the introduction of large sums of money into a community early on, before the community had become fully aware of the nature of the problem and had developed a sense of responsibility to address it. In such contexts, people were often motivated to get involved in child protection work for reasons having little to do with and even at odds with helping vulnerable children. Also, modes of initial engagement with communities that were directive or oriented toward an agency providing direct services stimulated little if any real community ownership. Even seemingly insignificant steps such as putting up signs saying that this is a project by [name of agency] undermines the sense of community ownership by signaling that the real driver behind the project is the external agency. As discussed below (see Section 6.4), a significant if pervasive obstacle to the development of community ownership is the use of didactic, top-down approaches that emphasize outside ideas and make little attempt to build on local ideas, practices, and resources.

4.3.2 Building on Existing Capacities and Resources

For effective programming, it is important to build upon what is already there to the extent that this is feasible and consistent with international human rights standards. In the reviewed documents, programs that built on existing assets—community mechanisms, resources (including people such as natural leaders, religious leaders, traditional healers, and influential young people), and processes—were likely to boost levels of community mobilization and ownership and were less likely to be seen as alien and an imposition by outsiders. Moreover, programs that engaged with and built upon existing resources and mechanisms, including traditional mechanisms of justice, decision making, and healing, were more likely to be sustainable.

Although numerous reviewed documents pointed out the importance of existing resources and traditions, it was evident that many programs had established child-focused community groups without having first determined what protection mechanisms or supports for children were already present in the local context. Although child protection is a mostly Western

---

47 However, Section 5.1 presents an exemplar from outside the primary review set of how communities can take ownership of processes of changing practices such as FGM.
48 Matrix Documents 6, 56, 73, 82.
49 Matrix Document 91.
50 Matrix Documents 15, 62, 72, 89.
51 Matrix Documents 15, 17, 38, 62, 66, 72, 89, 90, 93, 95, 104, 106, 136.
narrative, local communities and groups worldwide take steps to care for and protect their children and young people, even if they do not call these efforts ‘child protection.’ In addition, there are often traditional mechanisms such as chiefdom-level justice mechanisms in sub-Saharan Africa that may offer supports for children at levels broader than the village level. Although these indigenous steps and mechanisms provided a potentially important base to build upon, few of the reviewed documents discussed them or provided any evidence that the programs had learned about them or attempted to build upon them. In fact, there was evidence that programs’ limited effectiveness was due to their failure to work in partnership with religious leaders, traditional leaders, and important cultural resources. Also, one of the main criticisms voiced by community members was that the child-focused community groups promoted rights that were not part of the culture. Successes in changing harmful traditional practices were few (one notable exception is presented in Section 5.1), suggesting that most programs have not developed an effective long-term process for enabling change that supports the realization of children’s rights. The challenge of enabling such change is discussed further in Section 6.4.

Fortunately, there are some prominent exceptions to this visible trend. In the HIV and AIDS work in Southern Africa, families have provided important supports for at-risk children by applying the traditional practice wherein an orphan is taken in by the mothers’ side of the family. Increasing pressures on families have led local people to adapt these traditional practices by having orphans also taken in by the father’s side of the family. In addition, communities have supported children on their own initiative by working through Faith-Based Organizations such as local religious groups. In Papua New Guinea, traditional justice structures have served as bases on which new child protection mechanisms are being established. These hopeful developments point the way toward increased efforts to build upon local cultural practices.

4.3.3 Support From Community Leaders

Community leaders are people who have significant influence within the community. They include not only formal leaders who hold officially recognized roles (e.g., chief) but also people who are non-formal leaders such as respected elders, opinion leaders, gatekeepers, and people who have wide networks of friends and other community members whom they influence. Among young people, there are non-formal leaders whom many youth look up to and seek out for advice.

Not surprisingly, the support of both formal and non-formal leaders such as traditional leaders, elected community officials, religious leaders, influential women, and respected elders enabled child protection groups to achieve positive outcomes for children. In the case of child protection groups initiated by external agencies, the support of formal leaders served to build trust and to open the doors for activities and initiatives that had not arisen within the community.

52 Matrix Document 17, 20.
53 Matrix Documents 17, 20, 104, 108.
54 Matrix Documents 130, 137, 147, 148.
55 Matrix Document 15.
56 Matrix Documents 15, 16, 21, 71, 91.
57 Matrix Documents 58, 59.
58 Matrix Documents 21, 29, 37, 68, 73, 86a, 86c, 89, 106.
In addition, formal leaders provided needed resources such as land and played a key role in using their influence to help mobilize various community groups. Formal leaders’ support also conferred a sense of legitimacy, which in turn inspired ownership and participation. However, it is important not to underestimate the value of support by non-formal leaders as well. Non-formal leaders were often opinion leaders who encouraged community support for protection activities that ran counter to traditional practices such as early marriage.\footnote{Matrix Documents 130, 137, 147, 148.} It is very likely that non-formal leaders’ support also had a positive influence by modeling, that is, by setting an example that others were likely to emulate.

Leaders’ support, however, was not without complexities. For example, in Malawi and Zambia, the engagement of leaders around the time of elections risked the political hijacking of the children’s agenda.\footnote{Matrix Document 33.} In addition, traditional leaders in most African countries wield influence in a system of patronage that often privileges particular groups or clan members, and this risked undermining the spirit of volunteerism.\footnote{Matrix Document 95.} Furthermore, traditional leaders are often keepers of traditions and may resist ending harmful traditional practices. However, some reports indicated that traditional leaders such as chiefs and religious leaders can be valued proponents of change.\footnote{Matrix Document 86a, 111.} By engaging with traditional leaders in a respectful manner that does not force Western agendas upon them, it may be possible to gain their support.

### The Value of Children’s Perspectives—Risk Mapping in Afghanistan

In northern Afghanistan in 2003-5, ChildFund Afghanistan used a child participatory approach in forming Child Well-Being Committees in 150 villages. In a village, two groups of approximately ten children (for boys and girls, respectively) between the ages of 7 and 13 years drew maps of their village showing all the dwellings and geographic landmarks and also the places that were dangerous or where accidents happened to children. To communicate the results to the village, the children prioritized the risks and presented them via a role play or mini-drama. The children identified risks which differed from what the adults had anticipated. In one village, boys identified uncovered wells as a risk since a young boy had recently died after falling into the open hole. Animated by discussion of this incident, the village members took action the following day, as they collected scraps of lumber and used them to cover the dangerous wells.

Amidst the excitement and interest generated by these performances, Afghan staff facilitated a dialogue about establishing a local committee to serve as catalysts and mobilizers whose role would be to help the village address the risks. Villages decided to form these committees and selected its members, including child representatives. Subsequently, the Child Well-Being Committees were highly active in mobilizing communities around issues of health, hygiene, nonformal education, and forced early marriage.

*Sources: Kostelny (2006); Matrix Document 86; Interview with Sayed Keshrow, May 19, 2006.*
4.3.4 Child Participation

Child participation was visible in many of the documents reviewed, and in some cases, child protection groups designated membership slots specifically for children. With few exceptions, however, the level and quality of children’s participation were low to moderate. Although children were often members of child-focused community groups, in most cases their participation was either tokenistic or limited by adults’ tendency to dominate meetings and decision making. In these contexts, children were upset over their marginalization and expressed a desire to have a greater voice and influence in decisions. Also, older teenagers tended to be the main child participants in child-focused community groups. It was rather rare for younger children to be engaged. In addition, child protection groups did not always take the careful steps that were needed to delimit children’s roles, avoiding the placement of excessive burdens on them or endangering them by not mentoring them or limiting their engagement on particularly particularly difficult issues such as sexual violence in the family. Although the specific situation of girl members of child protection groups was seldom discussed explicitly, it was clear that women often felt that the men dominated the discussions. Most likely, girls’ experiences and feelings mirrored those of women.

The relatively low level of child participation in child-focused community groups is neither surprising nor a cause for despair. In many societies, the cultural norm is for children not to be involved in decision making, and such norms and practices change slowly. Enabling child participation is a long-term, highly contextual process requiring many years, and progress is likely to be charted in terms of decades. From this longer term perspective, it is encouraging to see that at present, the efforts to promote child participation are far more widespread and intensive than had been the case a decade ago.

---

**Children as Peer Educators on Trafficking**

In Vietnam, children are at risk of trafficking, and trafficked children have been blamed for having been entrapped by traffickers. To address this problem, World Vision Vietnam trained children as ‘Child Motivators’ who taught their peers about the dangers of trafficking. The training provided information about trafficking, how traffickers work, and how children are affected. It also provided skills on how to educate peers.

In their schools, the Child Motivators organized education events in which they used creative approaches such as role plays, talk shows, quizzes, and stories such as “An’s Lesson” to engage fellow students and convey key messages. The teachers and staff were highly impressed with the children’s creativity and their effectiveness in communicating important messages. A key lesson was that children and youth respond best to awareness-raising messages that are shared by their peers. This confirms the view that in changing attitudes and behavior, who sends the message is often as important as the message itself.

*Source: Matrix Document 151.*

---

63 Matrix Documents 7, 31, 103.
64 Matrix Documents 8, 10, 22, 26, 27, 34, 37, 45, 62, 84, 99, 100, 102, 126.
Although child participation is an end in itself, it is also a process that can influence programs’ efficacy in achieving other aims. Where children did participate more fully, their activities, creativity, and resourcefulness did in some cases increase the effectiveness of the child-focused community groups. Also, children and adults had divergent perspectives on what were the main child protection risks, and children’s perspectives were useful in guiding the groups toward addressing the issues of greatest concern to children. Although only a small number of programs achieved genuine child participation and enjoyed discernible improvements in child protection as a result, these findings offer encouragement to effort that enable children’s full participation.

4.3.5 Management of Issues of Power, Diversity, and Inclusivity

Effective child-focused community groups tended to be ones that included representatives of diverse sub-groups within the community, including marginalized people. In addition, it was important that the members from different sub-groups such as women and men functioned as equals who shared power in the discussions, decision making, and work of the child protection group. When power was not shared or when diversity was tokenistic, the child protection group tended to become a microcosm and even a perpetuator of power asymmetries and inequities in the community. Conversely, when power was shared and different groups were well represented and participated fully in the decision making and work, child-focused community groups served as vehicles through which communities gained new insights into themselves, learned about the situations of different sub-groups of children, and became more responsive to all children in the community.

Very few programs appeared to have managed these issues with appropriate care and sensitivity. Those programs had clearly made it a high priority to manage these issues effectively, dedicated significant amounts of time and capacity building resources to the issues, organized the selection and training of volunteers with these specific issues in mind, and addressed the issues in a patient, ongoing manner.

More typically, programs made modest efforts to be inclusive and to balance power across groups, yet these efforts did not go far enough and were outweighed by entrenched social injustices and practices of social exclusion such as caste barriers, patriarchy, and the privileging of local elites. It was particularly challenging to maintain the full participation of people from the poorest, most marginalized groups of people, who were often faced with brutal decisions such as whether to do volunteer work on child protection or engage in gainful activities that would help to feed their families. Gender inequities also posed significant challenges, as traditional gender roles limited women’s full participation. Although the gender challenges were seldom expressed in the reviewed documents, it is likely that they arose frequently since most societies privilege men over women. The existence and magnitude of these challenges is to be expected since it takes long spans of time to change institutionalized patterns of social exclusion and

65 Matrix Documents 8, 45, 69, 85, 101, 103, 109, 123, 134.
66 Matrix Documents 8, 111. For an example, see Section 5.3.
67 Matrix Document 111.
achieve transformation for social justice. For an example that illustrates the dynamics of social change, see Section 5.1.

4.3.6 External Resources

Abundant evidence indicated that resources such as capacity building and material supports were essential in helping child-focused community groups to work in an effective manner. Effective training was essential in motivating child-focused community groups, imparting skills needed to do well the complex work of child protection. Training was essential in helping the group members to understand their role and stay within appropriate boundaries. Without appropriate training, groups tended to become seen as the ‘child protection police’ who meddled excessively in people’s affairs and to whom everyone reported all violations, even ones that ought to have been reported to other groups.

A pervasive problem was the lack of a systematic approach to capacity building that combined effectively ongoing training, mentoring, field visits and problem-solving, and group reflection.

<table>
<thead>
<tr>
<th>Community-Level Training on Child Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>In Cote d’Ivoire, sexual exploitation and abuse of women and girls are pervasive threats to child protection and well-being. To prepare child-focused community groups on how to mobilize communities to address these issues and how to enable child protection in a challenging, transitional context, Save the Children Alliance conducted a series of workshops on these topics:</td>
</tr>
<tr>
<td>• Gauging local commitment</td>
</tr>
<tr>
<td>• Causes and consequences of sexual exploitation and abuse</td>
</tr>
<tr>
<td>• Setting priorities</td>
</tr>
<tr>
<td>• Mapping community resources</td>
</tr>
<tr>
<td>• The impact of exploitation and abuse on women and children</td>
</tr>
<tr>
<td>• Creating a community-led and managed structure 1: roles and responsibilities</td>
</tr>
<tr>
<td>• Creating a community-led and managed structure 2: scheduling, reporting, accountability</td>
</tr>
<tr>
<td>• Referral pathways for sexual exploitation and abuse</td>
</tr>
<tr>
<td>• Moving forward: Strengthening child protection systems at community level</td>
</tr>
</tbody>
</table>

The workshops used participatory, dialogical methods to engage communities in problem-solving and develop a sense of community ownership and responsibility for addressing issues of sexual exploitation and abuse. They also aimed to develop the skills needed to respond to and prevent sexual exploitation and abuse. Importantly, they aimed to help the community to do its part to strengthen child protection systems at community level and to be clear about the roles and responsibilities of child-focused community groups within that system.

For related program documents, see Matrix Documents 128, 26, 98.

---

69 Matrix Document 18.
Many members of child-focused community groups said that one of the greatest hindrances to their work was lack of sufficient training, particularly in regard to highly sensitive cases. This expressed need for additional training may reflect also the general shortage of national standards on child protection, which leaves workers not knowing how to respond to difficult cases. At present, however, there is uncertainty about the extent to which it is appropriate for nonspecialists to engage on such issues (for additional discussion, see Section 6.2).

Training did not always succeed in helping committee members understand their role. Even where roles had been defined appropriately and were understood by the protection workers, there were challenges in helping workers to develop the skills needed to fulfill the roles in an effective manner. One-off trainings were not the norm, yet there were examples of such ill advised practices. Even when multiple trainings had been provided, however, they were seldom followed up by visits of experienced child protection workers to the field for purposes of supervision, problem-solving, mentoring, and ongoing learning. Attrition, which was a problem for many groups, made it difficult to maintain appropriate levels of training.

This issue of underdeveloped systems of training and capacity building merits attention because it weakened work on child protection at the community level and limited sustainability by weakening the will to continue addressing complex issues. Among volunteers, the opportunity for training (together with the receipt of training certificates) was among their primary motivations for having joined child protection groups.

The provision of material support for members of child-focused community groups was also an important determinant of the groups’ effectiveness. Especially in rural areas where volunteers had to go long distances to reach affected areas, transportation was a significant issue that was typically addressed successfully by providing bicycles to members of the child-focused community groups.

A recurrent if thorny issue was whether volunteers should receive stipends or small amounts of food or basic material goods in order to support their work. As is true throughout the child protection sector, advocates of stipends pointed out that attrition from child protection groups often occurred because participants needed to support their families and could not afford to devote significant time to child protection work without some material compensation. They also said that it is ethically appropriate and customary in child protection agencies to provide small compensation for work that is inherently complex and challenging. Opponents of stipends, however, pointed out that one of the quickest ways to kill or diminish the spirit of volunteerism is to compensate people for their work either with money or through nonmonetary means, particularly when support is provided before the process of community ownership has gelled.

---

71 Matrix Document 18.
72 Matrix Documents 18, 72, 87, 97, 125.
73 Matrix Documents 97, 107.
74 Matrix Documents 8, 41, 44, 89, 94, 96, 97, 98, 102, 107, 111, 129.
75 Matrix Documents 21, 67.
When stipends were offered at the front end, people sometimes participated in child protection groups more for the material benefits than out of concern for vulnerable children. In addition, there are concerns that the use of stipends may impede the development of effective national child protection systems since governments may be unable to secure the budget needed to pay for the stipends.

Taken as a whole, this study suggests that the question whether to provide stipends for volunteers is best answered not in either-or terms but in a manner that is contextually sensitive, flexible, and designed to overcome the problems of early introduction discussed above. Broadly, there was support for the use of stipends so long as they were small, appropriate to the local situation, presented in a spirit of appreciation and thanks for volunteer efforts rather than in the manner of a salary, and introduced following a selection process that identified the people who had genuine concern for children’s well-being and were in the best position to help vulnerable children. However, this support came mainly from reports of programs that used a category 2 or partnership approach to community engagement and action. There was little or no evidence that stipends were effective in category 3 or 4 approaches. In fact, concerns were expressed that payment of a stipend by an external agency would undermine the sense of community ownership.\(^{76}\)

### 4.3.7 Linkages

Effectiveness was also influenced by the breadth and depth of linkages established by community groups. Broadly, these linkages were with both the formal, governmental system of child protection and the non-formal system that consisted of civil society groups, CBOs, NGOs, and traditional structures and mechanisms. On the whole the linkages with the formal system were more extensive and intentionally cultivated, yet both were of fundamental importance for reasons outlined below.

Linkages with formal systems enabled community-based groups to expand their reach and scope of impact.\(^ {77}\) For example, child-focused community groups were often linked with district-level Child Protection Networks (CPNs) that helped to mobilize resources and enable effective referrals. Also, CPNs offered useful means of sharing with many different groups approaches that had proven effective in particular villages or communities. Formal system linkages enabled communities and groups to refer difficult cases to the local police and justice system. Similarly, in the HIV and AIDS arena, links with government-organized committees at district level and higher were instrumental in enabling the local groups to acquire badly needed financial and technical resources.

Although the linkages with non-formal systems were not always as visible or extensive, they were nonetheless important. For example, when child-focused community groups had the chief’s blessing and linked with traditional structures and mechanisms, community members were more likely to see their work as legitimate, important, and worthy of support. In rural areas where the government was either absent or had very little capacity, traditional structures were the

\(^{76}\) Matrix Documents 21, 29.

\(^{77}\) Matrix Documents 7, 9, 37, 47, 57, 75, 76.
primary means of referral, and they offered support for activities such as cleansing rituals that local people saw as necessary for the reintegration of formerly recruited children. Also, many communities had CBOs and NGOs that were important partners for work on child protection. Furthermore, even in countries in which people at community level regarded the government as legitimate and generally helpful, community members often viewed government systems as impositions from outside. This perception generated correspondingly low levels of community tolerance and ownership, and the problem was much worse in countries in which governments were perpetrators of human rights abuses. In the latter contexts, high levels of distrust of anything associated with the government led to near complete reliance on traditional systems and mechanisms.

An important part of nonformal systems are the casual networks of neighbors and friends that make it possible to spread key messages in their everyday interactions and to encourage participation in child protection activities. The reviewed studies of FGM indicated that these casual networks were active in a process of organized diffusion in which key messages spread informally throughout the community without going through either traditional structures and clan networks or formal channels.

The reviewed documents also indicated that it was beneficial to link work on child protection to wider processes of community development. For example, programs that addressed sensitive issues such as FGM benefitted from embedding their work on child protection in wider supports for improving health, livelihoods, and literacy. This wider emphasis on community development may have enabled the communities to see that the program would have immediate, concrete benefits to the entire community, which is essential in developing trust and community interest and ownership. In addition, this approach may have lessened the emphasis on outsider defined issues, thereby creating a context that was conducive to internal change from within the communities (See Section 5.1 for a program exemplar and additional analysis.).
In concluding this section on what enabled child-focused groups to be effective, it is worth noting that these findings resonate with those of the recent ILI study, which was based on a less extensive literature review and interviews with 21 selected practitioners.  

4.4 Scale

As used in this review, a ‘scalable intervention’ is one that achieves positive outcomes for relatively large numbers of children and over a wider geographic area beyond a particular village or community. The review found that child-focused community groups are scalable mechanisms for benefitting significant numbers of at-risk children. Together with their flexibility and adaptability to diverse contexts, this scalability has made child-focused community groups a preferred child protection approach among INGOs that work in contexts where child protection risks exist on a large scale.

In emergency, transitional, and development contexts, INGOs often took programs to scale by expanding their geographic scope of coverage by establishing child-focused community groups first in one region, and then replicating this approach over a wider area. In programs that focused specifically on the problem of child labor, a useful strategy for scaling up was to use formal education systems, which engage with large numbers of children, as a means of preventing children’s engagement in dangerous labor (for an example, see Section 5.2). Success in these scaling up efforts depended on the ability of the implementers to manage the quality of training and preparation, and to achieve consistency in program implementation. Although these were by no means easy tasks, they were accomplished reasonably well by agencies that had the requisite capacities, resources, and levels of commitment. It is important to note, however, that the reviewed documents did not discuss issues such as the political constraints and security problems that can impede efforts to go to scale.

In work on HIV and AIDS, scaling up was often achieved by organizing district- and higher-level efforts to mobilize work with many different partners who can reach down into communities on a significant scale. Typically, donor agencies identified and supported intermediary organizations that had been strategically selected because they had networks and partnerships with many different local organizations and hence were in a position to mobilize community-based efforts on a large scale. The approach entailed extensive work on capacity building, networking, managing sub-grants, and strengthening child supportive policies. It has yielded positive results, particularly when it has supported the work of pre-existing child protection groups that are community initiated and owned.

The development of Child Protection Networks (CPNs) was also a widely used strategy for reaching large numbers of at-risk children (for an example, see Section 5.3). Typically, CPNs included child-focused community groups that connected in a systematic or relatively systematic manner with groups at the district level or at higher levels. In some cases, they were part of civil

---

81 Benham (2008).
82 Matrix Documents 117, 118.
83 Matrix Documents 47, 57, 69, 71.
84 Matrix Documents 1, 22, 27, 30, 61, 66, 76, 84, 111.
society and had been initiated by inter-governmental agencies and INGOs. In other cases, they were part of governmental systems of child protection, enjoying the scalability that occurs when the government has both a presence and a reasonable level of capacity at village and community levels.

4.5 Sustainability

This review explored two inter-related aspects of sustainability: process sustainability and outcome sustainability. Process sustainability refers to the continuation of child-focused community groups beyond the externally funded period. Outcome sustainability refers to the continuation of positive child protection outcomes beyond the externally funded period.

Outcome sustainability is of primary interest since the goal of child-focused community groups is to promote ongoing benefits to children. It would be inappropriate to focus primarily on whether child-focused groups continued. In changing contexts, other mechanisms or altered social norms might have developed and promoted children’s protection and well-being even in the absence of the child-focused groups. Nevertheless, it is useful to consider process sustainability since the reviewed documents in general did not indicate whether alternative mechanisms of child protection existed following the end of the reviewed programs.

Overall, the achievement of sustainability was a significant challenge for many child-focused community groups. For example, soon after the war had ended in Sierra Leone, humanitarian agencies helped to organize significant numbers of community-based child protection committees. Several years later, however, most of the committees either no longer existed or had become inactive, yet no discernible alternative mechanisms existed for protecting children. This outcome is anything but novel in the child protection sector and in the wider humanitarian arena, where program activities and benefits for children often collapse when the external funding has ended. Fortunately, there is nothing inevitable about this situation. Indeed, the review identified numerous factors that promoted sustainability of both process and outcome.

4.5.1 Factors that Promoted Sustainability

In general, the factors that had increased the effectiveness of child-focused community groups also enabled both outcome and process sustainability. For example, the receipt of ongoing training and capacity building helped to maintain committee members’ motivation and ability to maintain their work. Successful management of issues of power and diversity was important since groups that failed to manage these issues well tended to become divisive, which in turn led to attrition or inactivity. Also, the use of contextually appropriate stipends enabled members of child protection groups to continue their volunteer efforts even while living in difficult circumstances.

Community ownership, however, was the primary factor that enabled sustainability. In fact, programs that fit ILI categories 3 and 4, which enjoyed higher levels of community ownership,

---

85 Matrix Documents 11, 14.
were more likely to achieve both content and process sustainability than were programs that fit categories 1 or 2. Impressive evidence of sustainability came from the HIV and AIDS area, where highly sustainable faith-based organizations supported vulnerable children primarily through volunteer efforts grounded in people’s religious faith. Churches were instrumental in providing social support for this volunteer work. In addition to these efforts of faith-based organizations, many communities affected by HIV and AIDS have established community initiated and owned child-focused groups and related supports that continued long after the formal program supports had ended and that enabled positive outcomes for children on an ongoing basis.

These sustainable child protection groups were composed of volunteers who empathized with the plight of vulnerable children and wanted to help, and who saw themselves as part of an important and valued community initiative. These results suggest that faith-based organizations may be potential venues for addressing a wider array of child protection issues, although the reviewed documents did not include any examples of such an approach.

A significant question that emerged is whether programs that initially engaged with communities using a category 2 approach could evolve over time towards the greater community ownership that is characteristic of categories 3 or 4. Numerous programs that had begun with a category 2 approach did so with plans to progressively hand over greater levels of responsibility and decision making to the community. Although this devolution of power and responsibility seemed to have occurred in several cases, it was not possible from the written documents to discern how complete or successful it was. This remains an important area for exploration during Phase 2.

The approach of building on existing community resources also contributed to sustainability. Child-focused community groups that included or worked in effective partnership with religious and traditional leaders and that activated pre-existing local groups and networks such as

Ownership, Affinity, and Community-Based Coping Mechanisms

In Southern Africa, which has been hit hard by HIV and AIDS and also by chronic poverty, large numbers of community groups have responded to the crisis, without external facilitation. In 2006, the Human Sciences Research Council conducted a national survey of the work of these groups.

It reported that many of these category 4 initiatives provided food and nutrition support, educational support, psychosocial support, home care, treatment support, and child fostering. Also, community groups offered support to caregivers, many of whom were themselves living with HIV and AIDS. These indigenous community coping responses were based on volunteerism, consensual decision-making, community reliance on its own resources, strong support by local leaders, and revitalization of traditional values. The review found that these community led supports were more sustainable, contextually appropriate, and cost effective than those organized by external agencies.

A key observation was that community led supports occurred in communities that had high levels of affinity (level of togetherness) due to common religious beliefs, ethnicity, and traditions. Many supports were based on ethnically defined obligations and systems of supporting children. Of particular importance was the concept of ubuntu, which in Zulu means ‘a person becomes a person through other people,’ which promoted high levels of solidarity and reciprocity. Other people volunteered based on their religious values or out of compassion for children who were suffering.

This preliminary evidence suggests that category 4 approaches may not be feasible in contexts in which social cohesion and affinity levels are low. It also suggests that in multi-ethnic contexts, it may be useful for child-focused groups to be organized along lines of religious or ethnic affinity.

Source: Matrix Document 15

---

87 Matrix Documents 13, 15, 29, 33, 69, 128.
88 Matrix Documents 15, 16, 21, 47, 71, 91.
89 Matrix Documents 33, 44, 68, 82, 119.
90 Matrix Documents 31, 48, 111.
women’s groups and youth groups tended to be more sustainable. This outcome links back to community ownership since groups that engaged the resources and mechanisms already present in a community were more likely to be respected and even owned by the community, which augured well for sustainability.

Sustainability of child-focused community groups was also promoted by integration into government structures. In some Asian countries, child-focused groups at the community level were part of CPNs that were elements in the state apparatus for social welfare and children’s protection and well-being. Because these groups were sanctioned by the state and had legal mandates, their longevity was assured. A tradeoff, however, was that these groups were in some cases viewed as impositions by the government, and this limited the level of community ownership and hence, their effectiveness in achieving positive outcomes for children. Nevertheless, these state owned child protection groups made visible contributions to children’s protection and well-being over long periods of time. At present, there is a visible trend toward requiring by law that each village or community will have its own child protection group. Sierra Leone has already enacted such a law, and Liberia as well has similar draft legislation pending.

4.5.2 Factors that Limited Sustainability

The manner in which humanitarian agencies engaged with communities imposed significant limits on sustainability. The use of category 1 approaches disenfranchised communities and left them dependent on outside support. Category 2 approaches went further in developing constructive partnerships and significant community engagement, yet they, too, did not build high levels of community ownership. Typically, the child protection groups developed through category 2 approaches either became inactive or disbanded after the external funding had ended and the INGO partner had left. Significant limits on sustainability also arose from:

- Reliance on outsider concepts, methods, and approaches that did not fit the local context;
- Payment of large sums for work that possibly could have been conducted on a volunteer basis;
- Introduction of incentives before reasonable levels of community ownership had been achieved;
- Favoritism toward particular clans or groups, which triggered jealousies and social divisions.

An important sustainability issue was how to enable child-focused community groups that had been formed in an emergency situation to adapt and continue their work in early recovery or transitional contexts. Overall, there was little evidence that groups that had been formed in emergencies had continued into the transitional phase. Possibly, this lack of longevity occurred because the practitioners had viewed the child-focused groups as emergency devices only and had not intended for them to continue past the emergency phase. Another possibility is that the time pressures and scope of child protection risks motivated the use of category 2 approaches.

---

91 Matrix Documents 4, 5, 128.
92 Matrix Documents 33, 82, 91.
that promote relatively low levels of community ownership and are inherently difficult to sustain. A third possibility is that there was inadequate planning devoted to transition and sustainability. Consistent with the latter interpretation, the review failed to identify well defined models that guided the evolution and development of child-focused community groups. The fact that funding is structured into separate streams for emergency and development contexts probably contributes as well to the lack of planning for transition and sustainability. Which of these interpretations is most sensible is a question that warrants additional inquiry in Phase 2.

4.6 Gaps

The review identified numerous gaps or areas in which there was a relative lack of child protection work by child-focused groups. On the whole, child-focused community groups were used more widely in rural settings than in the urban contexts that are home to a rapidly increasing percentage of the global population. In addition, the reviewed reports demonstrated greater attention to deficits—the protection threats and problems—than to people’s assets, resilience, and coping mechanisms (Section 6.4 outlines a different approach that focuses on assets, resilience, and coping by communities). The most urgent gaps, however, were the four outlined below.

4.6.1 Gender-Based Violence

Although some reports focused on GBV93 and others mentioned it, the coverage of GBV in the reviewed programs was considerably less than might have been expected based on the prevalence of GBV worldwide. This trend could have arisen from the division of community-based child protection and GBV into separate humanitarian and development sectors. These sectors tend to have separate training programs, funding streams, and program management structures at headquarters and field levels. This separation, however, is not in the best interests of children, for whom GBV is an integral part of the holistic protection threats they face.

4.6.2 Family Violence

Relatively few of the programs reviewed addressed family violence (physical or emotional),94 which is prevalent in nearly all societies and poses enormous threats to children’s protection and well-being globally.95 This gap probably reflects the challenges associated with having public groups engaged on child protection issues in the home, which is typically regarded as a private space. Such engagement is always highly sensitive, violates traditional practices in many countries, and raises thorny issues about intrusion into people’s homes. At present, it is not known whether child-focused community groups are the most appropriate or effective venues for addressing these complex, highly important issues. Practice from Northern countries, where statutory child protection systems are relatively well developed, suggests that committees run by

93 Matrix Documents 73, 74, 77, 83, 86c, 111.
95 UN Study on Violence (2006).
volunteers who are not child protection specialists should restrict their roles to those of prevention, support, befriending, and neighborliness.65

4.6.3 Protection of Young Children

Only one program67 deliberately addressed the protection of very young children (0-8 years), although the supports organized by numerous other programs may have benefitted young children. The lack of intentional prioritization of supports for young children was surprising since early childhood is associated with distinctive protection risks and young children lack the competencies and coping skills that older children have. Also, even in very challenging emergency situations, useful approaches to the protection of young children have been identified.68 This is an area that warrants much additional attention.

4.6.4 Psychosocial Support

Psychosocial support was included in most of the reviewed programs. However, there was a conspicuous gap between the programs that addressed HIV and AIDS and those that addressed broader child protection issues in regard to how central a part of the program psychosocial support was. In the HIV and AIDS programs, psychosocial support was a highly visible, central feature, whereas in wider child protection programs, it tended to be less visible and central. Programs concerning HIV and AIDS tended to conduct more training on psychosocial issues, and the psychosocial supports provided appeared to be more varied and of higher quality.

Why this gap exists is unclear. Although the psychosocial impacts of HIV and AIDS on children are severe, it would be tenuous to suggest that they are more serious than those of sexual violence, forced early marriage, abduction into armed groups, and other child protection issues. More likely, community-based groups that had become active initially around issues of HIV and AIDS were concerned over the visible plight and emotional struggles of orphans, children who live with and care for parents who are dying of AIDS, and other children affected by HIV and AIDS. In contrast, the psychosocial impact of issues such as GBV may be less visible not because they are smaller in magnitude but because GBV is a source of shame, stigma, and family dishonor. Furthermore, problems such as GBV have perpetrators at the community level who wish to hide the problem.

4.7 Do No Harm Issues

Humanitarian work typically causes a mixture of positive and negative, if unforeseen, effects.99 Throughout the child protection sector, the risks of unintentional harm are increased by the lack of a strong evidence base that indicates which interventions are effective and what side

---

65 Matrix Documents 139, 144, 149, 150, 153, 154, 157, 159, 160.
67 Matrix Document 61.
effects the interventions may have. In addition, the lack of national standards creates a guidance gap that encourages an ‘anything goes’ atmosphere.

The reviewed documents indicated that Do No Harm issues arose frequently in work on child-focused community groups. Field programs often encounter problems of confidentiality, of which there was one case in the reviewed documents. Numerous programs unintentionally created unrealistic expectations. For example, in programs that provided material aid to children, community members sometimes assumed that all children would receive aid or that additional material aid was on the way, even if the external agencies had made no such promises. However they arose, unmet expectations caused frustration and strained relations between external agencies and community members.

In anti-trafficking work, some overzealous committee members limited the freedom of movement of children who were not being trafficked. There is also some chance that externally initiated child protection groups weakened or undermined indigenous supports that had already been present in the communities.

A recurrent theme was that child protection efforts targeted excessively particular groups of at-risk children, thereby creating jealousies and marginalization at a moment when social cohesion and equity were high priorities. This targeting was often identified by experienced practitioners who were implementing the programs, leading them to take corrective steps.

---

Do No Harm Issues and Standard Setting in Northern Uganda

In northern Uganda, which had long been affected by armed conflict, Child Protection Committees (CPCs) became a popular means of supporting children. In less than a year in the period 2005-2006, over 130 CPCs were established. This rapid expansion raised concerns that the CPCs might not have the support, capacity building, coordination, and structure needed to actually protect children. Accordingly, an inter-agency review was conducted in 2007 in order to take stock of the work being done by CPCs and to develop means of supporting and improving their quality of work.

The review identified numerous Do No Harm issues facing the CPCs:
- Little or no child protection policy or code of conduct for CPC members;
- Risky actions by CPC members, for example, housing children within CPC members’ homes;
- Overstepping appropriate roles;
- Poor coordination of CPCs; and
- Replacing and breaking down parental responsibility.

An inter-agency workshop conducted as part of the review developed consensus on the importance on developing Inter-Agency Minimum Standards and Good Practice Principles for Community-Based Child Protection Structures. This review process was itself an important step toward the development of national guidelines that could strengthen practice and limit unintended harm.

Source: Matrix Document 18.

---

100 Matrix Document 24.
102 Matrix Documents 79, 107.
103 Matrix Document 128.
104 Matrix Documents 1, 28, 91.
Respected guidelines in the field address this issue by encouraging practitioners to complement focused support for particular sub-groups with general support for all children in situations such as war zones. In practice, however, it is often difficult to strike an appropriate balance between general and focused supports, particularly due to funding shortages and the availability of funding that is designated for particular sub-groups such as orphans and vulnerable children.

Harm also occurred through the inadvertent creation of perverse incentives. For example, some programs made scarce, valued items such as money or food available only to formerly recruited children or only to children in foster homes. Predictably, more children then tried to present themselves as former recruits or left their families in order to obtain items that would have otherwise been inaccessible.

Inadequate training also emerged as a significant problem. In some programs, child-focused community groups lacked a clear understanding of their role and overstepped appropriate boundaries. In others, members of child protection groups said they lacked the skills needed to manage the most difficult child protection issues. Yet because of their felt obligations to children and the expectations raised by the external agencies and their own communities, there were strong pressures to intervene even when the necessary training and supervision were lacking. These challenges point out the need for child-focused community groups to have Terms of Reference that clearly define their roles and responsibilities.

A significant problem was the imposition of outsider concepts and approaches, which often alienated communities and sapped their motivation to participate fully. This issue was most visible in regard to the promotion of children’s rights. In one case, children who had learned about their rights refused to do customary chores, upsetting their parents. A commonly heard refrain was ‘these child rights are alien to us.’ The sense that child rights were impositions made communities feel marginalized, powerless, and less willing to volunteer their time and to assume ownership of the program. Worse yet, these sentiments often triggered backlash and moved the communities farther away from supporting child rights than they would have been had there never been any externally initiated program. This difficult issue is discussed further in Section 6.4.

The question of parallel systems was seldom discussed explicitly yet was present in the background. The silence on the issue of parallel structures was itself concerning since most child protection practitioners are keenly aware that programs initiated by INGOs often create child protection mechanisms that are separate from and poorly coordinated with existing mechanisms such as government systems of child protection. In some cases, there was reference to the fact that community-based groups had been established in part because the existing government

---

105 Unicef (2007).
106 Matrix Documents 4, 5, 15.
107 Matrix Documents 34, 43, 49, 55, 72, 104, 111.
110 Matrix Document 89.
111 Matrix Documents 17, 20, 26, 104, 108.
112 Matrix Documents 20, 26, 89, 112.
structures were slow and unresponsive.\textsuperscript{113} It is questionable practice, however, to bypass government structures, which tend to be more sustainable. A related problem was that child-focused community groups were often established with little attention to non-formal child protection mechanisms that may already have been in place (see Section 4.3.2). There is a real danger that in some contexts, the external facilitation and support of child-focused community groups has caused harm by duplicating, marginalizing, or even undermining existing supports for children’s protection and well-being.

The review also raised the question whether appropriate efforts have been made to feed information from evaluations back to communities and in a form that fits the context. Conducted in an extractive mode that provides no feedback, the evaluation process may cause harm by objectifying and marginalizing communities, depriving them due respect, and weakening the spirit of participation that is vital for the development of community ownership. Most evaluation reports seemed to have been prepared mainly for donors or the headquarters of the implementing agency. In only one case was there mention of steps taken to feed information back to the affected communities.\textsuperscript{114} Understandably, the community felt empowered by this approach, which enabled significant reflection and new learning by community members and provided the evaluator with useful new information. This approach serves as a valuable reminder that most Do No Harm issues are preventable through a mixture of critical reflection, deliberate anticipation, preparation, and follow through.

### 4.8 Lessons from the Health Sector

Time constraints precluded a broad review of evaluation studies from the health sector. Nevertheless, the review did include published evaluations of promising approaches and reviews that analyzed a large number of evaluations in the health arena.\textsuperscript{115}

The health sector documents presented useful lessons learned on issues such as community mobilization and engagement. In the past, many agencies in the health sector took a category 1 approach to community engagement in which agency staff were in the role of service providers, whereas community members were beneficiaries. Often there was limited interaction with herbalists,

---

\textsuperscript{113} Matrix Documents 4, 5.
\textsuperscript{114} Matrix Document 33.
\textsuperscript{115} Matrix Documents 80, 113, 120, 121.
 healers and other resources in the traditional health sector even though local people in rural areas typically used a mixture of Western health services and traditional supports.

This provider driven approach is now giving way to community-based approaches that are related to the community-owned approaches discussed above. For example, health sector agencies increasingly use Community Directed Interventions\(^{116}\) in which community members actively discuss local health problems from their own perspective; decide collectively whether they want to implement the intervention; plan collectively how, when, where and by whom intervention will occur; review the results following the intervention; and discuss how to refine or change the implementation approach. Leaders play a key role in the approach, as religious leaders help to spread key messages. Also, the process begins with community mobilization in which health officials first meet with official community leaders, who then organized community meetings where the community decided whether and how to intervene. Community volunteers rather than health staff implemented the interventions.

Although careful training of volunteers is required, this approach led to significantly more positive health outcomes on Vitamin A supplementation, use of insecticide-treated bednets, and home management of malaria than did comparable interventions driven by a health agency.\(^{117}\)

This work appeared to have begun with a category 2 approach in that the idea for and general approach to the project came from an external agency without a long, slow process of dialogue and consultation. Typically, category 2 approaches do not promote high levels of community ownership. Via the early community decision on whether to participate, however, it transitioned rapidly to a category 3 or 4 approach, effectively handing over responsibility to the community. Parallel approaches in the child protection arena seem worthy of consideration.

Also, the health sector documents echoed many of the lessons identified above about community mobilization and the promotion of attitude and behavior change. Among these were: (1) Effective community engagement depends on the presence, quality and intensity of interaction between volunteers and agency staff or representatives; (2) Developing community ownership is a slow process that cannot be rushed; (3) Behavior change occurs most effectively through peer education and messaging by indigenous organizations that understand the cultural and religious context. Use of women intermediaries is effective, whereas top-down messaging via official Community Health Workers is not; and (4) Effective communication strategies should recognize that the medium is as important as the message. In general, the health documents emphasized the value of working through indigenous networks in all phases of work.

Themes on health sector support for children affected by HIV and AIDS also echoed those identified earlier in this report. These included:

- The orphans focus stigmatized vulnerable children.
- Poorly managed outside programs may undermine systems of extended family care.
- Too much or ill timed external support may divert the agenda of community led action.

\(^{116}\) Matrix Document 113.
\(^{117}\) Matrix Document 113.
Narrow programs cannot meet the holistic needs of children.\textsuperscript{118}

The health sector review also highlighted the limits of sectoral approaches to child protection and the importance of taking integrated, multi-sectoral approaches to children’s protection and well-being.

### 5. Promising Practices

The review covered a large number of programs from diverse agencies that held the promise of supporting children in very difficult circumstances. Although it would be impossible to review fully each program, it is useful to consider several that embody promising practices\textsuperscript{119} in regard to child-focused community groups. The first program illuminates how it is possible to end harmful traditional practices through a community-led process of dialogue and transformation, in a context in which development and child protection are intermixed. The second program illustrates how a focused child protection group has contributed to large-scale reductions in children’s participation in dangerous labor. The third program illustrates the work of a broad spectrum child focused group in a context that presents many different child protection risks and in which there is considerable ethnic diversity.

Although it would be premature to enshrine these as ‘best’ practices, they provide insight into how to address difficult child protection issues in an effective manner, and they offer useful pointers on how to strengthen practice in regard to child-focused community groups.

#### 5.1. A Human Rights and Social Transformation Approach to Ending FGM\textsuperscript{120}

In Ethiopia, FGM is widespread, as in 2005, 74\% of women aged 15-49 had undergone FGM, although the rates were lower (64\%) among women with secondary education or higher. Nationally, the rate of FGM had declined from 2000, when 80\% of women had been circumcised. During the same 5-year period, the percentage of women who thought that the practice should continue dropped from 60\% to 31\%, suggesting a readiness for movement to end the practice.

Ending the practice, however, is a significant challenge. Family decisions to circumcise their daughters are grounded in deeply rooted cultural beliefs that only circumcised girls are appropriate marriage partners. Particularly in areas where traditions remain strong, uncircumcised girls are treated as despised, stigmatized outcasts who bring shame and social exclusion to their families. In light of this strong social convention, which makes non-cutting a very unattractive option, it is understandable that families regard FGM as within their daughters’ best interests and as a necessity for having a positive future. Also, although FGM is a crime by

\textsuperscript{118} Matrix document 121.

\textsuperscript{119} ‘Promising practices’ is a more appropriate term than ‘best practices’ in light of the weak evidence base in the child protection sector.

\textsuperscript{120} Matrix Document 148.
law (as is marriage abduction), legal prohibitions had by 2005 proven ineffective since they had in some regions driven the practice underground, while in others, the laws were seldom enforced.

In Kembatta/Tembaro Zone in the Southern Nations, Nationalities and People Region, an intervention was organized by a local NGO called KMG (Kembatti Mentti Gezzima—Tope, which means “Women of Kembatta pooling their efforts to work together”). KMG began its work in 1999 as a development organization that provided integrated health, vocational, and environmental programs. In regard to FGM, KMG collaborated with government structures to mobilize the population of nearly one million people to abandon the practice. Its approach was to empower women and communities to fulfill their rights and to be free of abuse, including that associated with harmful customary practices such as FGM and forced marriage. KMG used four interconnected strategies to disseminate information and mobilize people for social change:

- Provide information to increase knowledge about FGM, enabling communities to consider non-cutting as an alternative.
- Mobilize social change through Community Conversation, a tool that promotes extensive, authentic dialogue.
- Create public pressure against FGM.
- Enforce abandonment by strengthening alliances between community-based organizations and government.

Trusted messengers were key providers of information about FGM and non-cutting alternatives. The KGM founder, Dr. Bogalech Gebre (‘Boge’) had grown up in the region, earned a PhD in epidemiology, and returned with a passion for helping people question FGM and to view it as a human rights violation. Because she was widely trusted and respected, people listened to her as she and her colleagues began educational dialogues. Wisely, they avoided assertive confrontation with communities in regard to the most difficult issues, and they worked in ways that respected local people and helped to address their primary concerns. Because local people viewed women’s rights and human rights as abstract concepts and not their own priority, she and KGM organized discussions initially on practical issues of concern to the community. Only later did the conversations move toward issues such as HIV (approximately 10% of people were infected) and AIDS, FGM, and other harmful practices. To make a practical difference in people’s lives, KGM from the outset initiated community-based projects on health and community development, including elements such as Mother and Child Health Centers, school-based reproductive health programs, livelihood projects for women, and reforestation.

To raise awareness about the harmful effects of FGM, KMG organized public workshops with women and formed in each sub-district a Women’s Support and Advocacy Group that worked to monitor and prevent FGM. In schools, students formed anti-HIV and AIDS clubs, girls clubs, media units, and circus groups that addressed HIV and AIDS and worked to abandon harmful traditional practices. The clubs disseminated information on HIV and AIDS and on FGM to school peers and also to their families, and they organized youth demonstrations against harmful practices. KMG also organized special trainings for circumcisers and traditional birth attendants, who pointed out that circumcised girls have more problems at delivery than do uncut
girls. KMG also gave all circumcisers in the area milk cows to enable them to earn an income through means other than performing circumcisions.

The Community Conversations, which were conducted twice monthly for at least one year with approximately 50 participants per meeting, provided a space for interaction, dialogue, reflection, and sharing without fear and discrimination. Using participatory tools, they helped community members to understand the impact of FGM and other harmful practices, and they promoted a broad agenda of human rights rather than focusing on a single issue. The Conversations reached specialized groups such as uncircumcised girls and also general community members, including elders, religious leaders, and leaders of the edir, the village mutual assistance group that is highly influential in regard to both financial and social issues. The conversations enabled community members to explore community problems, discuss particular issues in depth, decide how to address particular issues, and plan how to implement. Participants in these intensive conversations reported that the in-depth discussions had helped to change their attitudes toward FGM and had also motivated them to facilitate discussions in their own villages, often with their families or with their neighbors in coffee klatches. The support of edir leaders was valuable, as after five years of intervention, nearly all the edir in the districts covered had declared FGM abandoned.

Community Conversations were also conducted with uncircumcised girls, who disseminated information on FGM through school clubs, church meetings, and coffee klatches in a process of organized diffusion of ideas. These girls became activists against FGM, lobbied with parents against the practice, and even rescued girls who were about to be circumcised. In addition, women spread key messages through milk or butter witches—groups that women had formed to generate income—with Community Conversation members participating. KMG also conducted special workshops for religious leaders, who disseminated information on harmful traditional practices through their sermons and emphasized that FGM had no basis in religious doctrines.

To create public pressure to abandon FGM, new social groups were mobilized around issues of women’s rights. Also, KMG organized public weddings for uncircumcised girls at which local officials voiced support for the weddings. To reach wider audiences, KMG organized an Uncircumcised Girls Day that attracted 100,000 people and spread key messages by radio and video. Pressures to abandon FGM were increased also by hiring paralegals who assisted victims in legal procedures and in developing their cases in the courts. In addition, Community Conversation participants selected 10 participants to be part of a Harmful Traditional Practices Abandoning Committee, which worked to diffuse key messages and to promote abandonment of FGM. KMG assisted in the rescue of abused girls, whose cases attracted widespread attention.

To help enforce the abandonment of FGM, KMG conducted awareness raising workshops on human rights and gender with sub-district and district administrators, development agents, policy leaders, and justice system personnel. Sub-district leaders participated in Community Conversations and recruited participants who worked closely with school and health post administrators.
Decisions to abandon FGM cropped up sporadically at first and spread to different groups. The initial abandonment decisions were made at Community Conversation meetings and then at edirs. The edir decisions were followed by more public declarations that abandoned multiple practices such as FGM, abduction, rape, and wife inheritance (wherein a widow is obligated to marry her late husband’s brother). The sub-district and district administrators accepted and supported these public declarations and encouraged the enforcement of the laws against FGM.

Gradually, the system transformed from one in which families that did not practice cutting were ostracized and punished to one in which those same families were rewarded and seen as doing the right thing for their daughters. A 2008 review study asked people whether they would have cut their daughters eight years ago and whether they would cut their daughters today. Whereas over 95% said they would have favored cutting eight years ago, only 3.3% said they favored cutting today. Furthermore, the status of uncut girls increased sharply, as 98% of the respondents said they would be happy (32%) or very happy (66%) if their daughters remained uncircumcised. Girls who had participated in the Community Conversations said that uncircumcised girls outnumbered those who had been circumcised and that young men preferred to marry uncircumcised girls, who were no longer stigmatized. In addition, there were significant changes in the perceived legal consequences of performing FGM. Asked what would happen if someone in the local area attempted to perform FGM, three-fourths of the respondents said that the sub-districts or police would arrest the violator.

This example makes it very clear that changing traditional practices is a matter of collective decision making and action. In analyzing the results of this intervention, the researchers emphasized the importance of using a slow process that enables deep dialogue over extended periods of time; delivers messages via respected, trusted local people; allows the organized diffusion of ideas through informal means as well as recognized networks and mechanisms; builds work on FGM on a foundation of broader development efforts; engages clan and religious leaders and their organizations; supports uncircumcised girls; strengthens enforcement mechanisms, and takes a human rights education approach. The human rights approach is essential since an emphasis on the health risks of FGM alone was insufficient to produce abandonment of the practice, and legal approaches only led people to avoid getting caught. What was missing was a wider moral framework and transformation. The human rights discussions provided communities with alternate perspectives and the necessary moral framework that transformed the discussion, created awareness of human rights, and led people to appreciate that ending FGM was necessary for protecting their daughters’ well-being and fulfilling their rights.

This approach, which has proven effective in other countries as well,\(^1\) is noteworthy because it illustrates how it is possible to work from within communities to change harmful practices that had been culturally ingrained and viewed as highly resistant to change. It also illustrates the usefulness of human rights concepts and language in promoting change. In fact, the program enabled parents to continue with their strong value of wanting to do what is best for their daughters but to express that value in support of non-cutting alternatives that fulfilled children’s rights. The effectiveness of a slow, non-impositional introduction of human rights in a context of

\(^{1}\) Matrix Documents 130, 137, 147.
rich dialogue contrasts with the rapid, top-down approaches that have posed challenges in many programs, as is discussed further in section 6.4.

5.2 Combatting Child Labor Through Education

The achievement of positive outcomes for children on a large scale is a pervasive challenge in work on child protection. An instructive project in this regard is the World Vision/Philippines “ABK Project” (ABK stands for “Education for Children’s Future”), which was implemented 2003-2008. In the Philippines, people have viewed child labor as normal, and pressures to work and earn money for one’s family have led to high rates of school nonattendance and dropout. Children engaged in hazardous work such as pyrotechnics production (usually at home), sugar cane harvesting, deep sea fishing and commercial sexual exploitation.

The purpose of the project, which aimed to support the Philippine government’s national programs against child labor, was to eliminate the worst forms of child labor by improving access to and quality of education in eight provinces. Its objectives were to: (1) increase awareness of the negative effects of child labor and the importance of children’s participation in education, even on a part-time basis that enabled children to continue working; (2) change attitudes that result in delaying education, withdrawing children from school, or permitting participation in dangerous labor; (3) help institutions to implement responsive policies, programs and approaches for reducing dangerous child labor; and (4) support alternative livelihood programs for families and youth over 15 years of age.

The ABK project used a participatory process to engage and build the capacity of many Parent Teacher Community Associations and Child Labor Education Task Forces. These Task Forces included people from many sectors, including police force members who visited barangays (communities) and warned parents not to allow their children to work on sugar cane plantations. The project formed an effective partnership with the Government, which viewed it as a means of achieving nationally defined priorities in regard to child labor. The project worked closely with Government agencies such as the Department of Labor and Employment and the Department of Education. At a grassroots level, the project worked with the Barangay Councils for the Protection of Children, which part of the formal child protection system organized by the government.

The project used diverse methods of awareness raising and attitude change such as group discussions, festivals, congresses, media broadcasts, and child led activities that featured children as advocates. To reward teachers for their participation, the project supported national “Anti-Child Labor Awards” for teachers who were highly active in reducing child labor and promoting quality education. Also, the project provided material supports such as food and school materials (e.g., uniforms and books), without which many families said they could not have sent their children to school. The project also organized vocational training and income generation activities for participating youth in hopes of enabling them to avoid dangerous work and stay in school even after the project had ended.

122 Matrix Documents 4, 5.
In order to increase the quality of education and make school a more attractive option for children, the project conducted extensive teacher training and mentoring on participatory methodologies, remedial teaching, and methods of integrating child rights and child labor issues into their teaching. The trainings also encouraged teachers to give concrete examples from children’s lives on the plantation in their teaching and to use drama, song, dance, and painting as means of helping children to express their ideas and feelings. The project organized catch-up education as a means of enabling working children to stay with their age group and to avoid falling too far behind. One catch-up program—named ‘You are a bright kid’—was conducted as a summer camp designed to rekindle children’s enjoyment of learning and build their self-confidence.

At community level, the project facilitated the formation of child-focused groups called Community Watch Groups (CWGs), which consisted of local leaders, parents, teachers and others chosen by the communities. The CWG members were volunteers who received training on child rights and child labor, monitoring, and related topics. They helped to identify possible child participants in the project; monitored whether children were in school or working; advocated with parents to support the withdrawal of children from dangerous work and placement in schools; counseled families of children who had dropped out of school or attended sporadically; and worked with local schools and barangay officials to support the project. Several CWGs became integrated into the official barangay structure, thereby making them sustainable as part of the government system.

The main outcomes for children were decreased participation in dangerous labor and increased participation in education (Table 1). The scale of the achievements was impressive, since nearly seventeen thousand girls and boys withdrew from dangerous labor and began attending school regularly. Also, large numbers of children who had been at risk of dropping out of school in order to work remained in school. Since attrition rates were low, these gains continued over a three-year period.

Table 1. The numbers of children who were either withdrawn from dangerous labor or prevented from dropping out of school.

<table>
<thead>
<tr>
<th>Category</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Withdrawn</td>
<td>8,398</td>
<td>8,599</td>
<td>16,997</td>
</tr>
<tr>
<td>Prevented</td>
<td>6,912</td>
<td>7,411</td>
<td>14,323</td>
</tr>
<tr>
<td>Total</td>
<td>15,310</td>
<td>16,010</td>
<td>31,320</td>
</tr>
</tbody>
</table>

Children who participated in the project expressed their pleasure in having access to school. For example, a 14-year-old boy said “The ABK project helped me a lot. I used to work cutting

sugar cane but now no more. I do not want to go back to cutting sugar cane.” Other children said that when they had been working, they had been too tired to concentrate and hence were not motivated to attend school but that the project enabled them to attend school and to learn. In addition, the project improved children’s physical safety by reducing participation in dangerous labor. For example, teachers reported that students were no longer burned in accidents related to fireworks production. Children who continued to work part-time while also attending school reported that their employers supported their school attendance and that working conditions had improved.

The project also encountered diverse challenges. For example, some sexually exploited children were unreachable because the bordello matron ‘protected’ them. Also, the project did not address other protection issues, such as the presence of rival gangs that had led some children to drop out of school. There was a lack of standardization in the monitoring tools, which CWG members described as being complex and difficult to use. Although the provision of material supports to participating children decreased the level of discrimination against them, children who had not received material support felt jealous. As one community member put it, “Now all of a sudden everyone wants to be poor!” In addition, the livelihoods aspects of the project were not developed fully, and this raised concern that the changes achieved during the project might not continue beyond the life of the project.

Despite these challenges, this project shows how child-focused community groups can play a valuable role within a wider, multi-faceted effort to eliminate dangerous child labor by identifying working children and children who have dropped out of school. It also illustrates the importance of developing a child protection system that includes both formal and non-formal elements. The Barangay Councils for the Protection of Children, which were part of the formal child protection system, were in some communities slow to engage on the issue of child labor. The formation of CWGs enabled a more rapid response and provided a means of engaging parents, teachers, and other citizens in nongovernmental structures. In this respect, the CWGs did not duplicate existing structures in the formal system. However, a question in this project and in all efforts to build national systems of child protection is how to delineate the roles and responsibilities of different parts of the system in an effective, complementary manner and how to coordinate the work of different actors within the system.

5.3 A Community-Based Child Protection Network Model

A frequently used means of strengthening child protection on a scale is to establish child protection groups at a district level that support child protection work at lower, grassroots levels. This exemplar illustrates the work of a district-level group and also points out the ongoing challenges involved in its work.

In Southern Sudan, the Comprehensive Peace Agreement that ended the war was signed in January, 2005, yet many child protection issues and poverty continued unabated. Among the

---

125 Matrix Document 4, p. 37.
126 Matrix Document 111.
diverse child protection issues were family violence, family separation, recruitment into armed forces, sexual exploitation and abuse, early marriage, deprivation of access to basic necessities, child labor, and discrimination against women and children. Cases such as rape of young girls were often reported to police or to a government social worker, yet there was also need of stronger protection mechanisms that mobilized communities and made links with traditional processes of justice.

Working in five states in Southern Sudan, Save the Children Alliance facilitated the establishment of Community-Based Child Protection Networks (CBCPNs) at county level. Initially, staff dialogued with local authorities and traditional leaders, explaining the concept behind the network and discussing child protection concerns that might be addressed. Afterwards, the local authorities and traditional leaders, together with the staff, explained the idea of the network to men, women, and children. To ensure representation from women as well as men, staff practiced affirmative action, explaining that there should be equal numbers of women and men. Similarly, in urban centers where different ethnic groups lived, the staff urged that the members should come from different ethnic groups. Each CBCPN consisted of approximately 15 members who came from different payams (sub-county areas) and who demonstrated understanding of child protection issues. The community involvement in establishing the CBCPNs was crucial in enabling community ownership and accountability, addressing community defined needs, and providing a transparent process. Whenever possible, the CBCPNs built upon previously established Care Committees.

Following the decisions about membership, the CBCPNs established their own rules of operation with guidance from Save Alliance. They selected their own leaders such as a local chief, and they gave themselves local names such as ‘Protectors of Children’s Rights’ or ‘Community Child Protection Team.’ Then they received training on topics such as child protection, child rights, family tracing and reunification, alternative care arrangements, family mediation, and counseling. The members also learned about and agreed to adhere to a Child Safeguarding Policy and an appropriate Code of Conduct.

Following the training, the CBCPNs conducted activities such as mobilizing children and community members, advocating for children’s rights within the community, training community members on child rights and different rights violations, advising on good parenting skills, identifying vulnerable women and children, mediating in family disputes involving children, family tracing and reunification, referring cases for appropriate services, and following up on various cases. In collaboration with members of Children’s Groups, the CBCPNs facilitated dialogues about children’s rights and prevalent protection issues in their communities. Among the messages they promoted were “Stop early marriage for underage girls in the community” and “No child labor and abuse in the Children’s Center.” Twice each month, members of the CBCPNs met and shared information on their work and messages, enabling learning across villages. To enable participation in these meetings, the participants received small stipends in the form of transportation allowances and camping kits.

Beyond awareness-raising, the CBCPNs identified protection cases and responded directly. For example, the CBCPNs identified vulnerable children and specific child protection cases
through the Children’s Groups, direct reports from community members, by visiting locations (e.g., markets) where vulnerable children congregated, and through the police and other service providers that recognized the role of the CBCPN in the community. In regard to reintegration of formerly recruited children, the networks aided family tracing, made referrals to livelihood supports, and helped to distribute reintegration packs that included clothing and non-food items. For children whose parents could not be located, the CBCPNs facilitated foster care and made follow-up visits to make sure the fostered children were well cared for and free of abuse and marginalization.

A Case of Referral and Response
In Aweil East, members of the Children’s Group saw that a friend, a 14-year-old girl, had stopped attending school. They decided to visit the girl’s home to see whether there was a problem. The girl informed them that her parents were negotiating her marriage with an older man and that she was distressed over the situation. Not confident that the parents would listen to the children’s views, the children reported the situation to the local CBCPN. The CBCPN members discussed their concerns with the girl’s parents, who agreed to end the marriage negotiations and get the girl back into school.

The work of the CBCPNs achieved numerous positive outcomes for children. They reunified over 500 separated children with their families, and they placed 96 children in appropriate foster care arrangements. There was decreased incidence of early marriage, and more girls attended school on a regular basis. In addition, some 1500 child protection cases were resolved successfully.

Significant challenges to the CBCPNs arose in regard to confusion about their roles and responsibilities. The CBCPNs tended to address too many issues and lacked a clear sense of prioritization, or in some cases, an action plan. Furthermore, in some locations, the CBCPN members thought that reporting difficult cases to Save the Children would somehow resolve the problem, and they took this approach rather than seeking community-based solutions. In these respects, a clear Terms of Reference was needed. Also, relatively little attention had been given to sustainability, and there was need for additional capacity building, stronger links with the Sudanese Government, and an explicit transition strategy.

A significant ongoing challenge was the management of diversity. Although the program had worked hard to achieve appropriate diversity and multi-ethnic representation at that start of the project, issues of inclusivity arose on an ongoing basis. For example, one CBCPN in a multi-ethnic, urban area drifted over time into a situation in which all the members came from a single, majority ethnic group. Also, the members of Children’s Groups came mostly from well off families whose children attended school, and this approach excluded the poorest, most marginalized children. These challenges are not unusual and serve as a poignant reminder of the
importance of taking deliberate steps to manage issues of diversity and inclusivity on an ongoing basis.

6. Challenges

A complete discussion of the myriad challenges in forming, supporting, and sustaining child-focused community groups is beyond the scope of this paper. At the same time, it is useful to explore further numerous fundamental challenges that have implications throughout the wider child protection sector.

6.1 Strengthening the Evidence Base

A high priority that has emerged from this review is to strengthen the evidence base regarding which practices associated with child-focused community groups enable effective, scalable, sustainable, cost-effective child protection. To strengthen the evidence base, it is necessary to make systematic evaluation a higher priority, focus more sharply on outcomes, and manage the ethical issues associated with documentation efforts.

6.1.1 Making Systematic Evaluation a High Priority

Improving the evidence base requires that agencies make systematic program evaluation a high priority. The shortage of robust evaluations in the reviewed documents indicates that evaluation has been a low priority, even an afterthought, in work on child-focused community groups. This low prioritization of evaluation may be due to the common attitude among child protection practitioners that systematic evaluation takes too much time and is a second- or third-tier priority when children are being subjected to harm. In addition, most donors have not made systematic evaluation of child protection programs a high priority. The irony of this approach is that it is not an either-or choice as to whether to do good child protection work or to conduct systematic evaluations. Without conducting systematic evaluations that identify which interventions work, it is impossible to determine whether one’s approach to child protection is actually effective and to know how to strengthen child protection practice. From this standpoint, the regular conduct of systematic evaluations is an essential part of quality work on child protection. In fact, systematic evaluations are a necessary part of the foundation of quality child protection work.

A significant challenge, then, is to make the regular conduct of systematic evaluations a social convention throughout the child protection sector. Although there is no recipe for establishing such a convention, the inter-agency process that underlies this review is an essential first step. Through inter-agency dialogue, critical reflection, and mutual learning, it is possible for multiple agencies to elevate the priority of systematic program evaluation and to commit themselves to a deliberate process of testing the efficacy of child-focused community groups. To enable change on a wider basis, Phase 2 will engage additional agencies, beyond the current Reference Group
in this process of dialogue and transformation in the way in which child protection is done. Furthermore, efforts will be made to build synergies with the work of related initiatives such as the Care and Protection of Children Learning Network.127

A key part of this transformation will be to build the capacities of agency staff and field workers in regard to evaluation design, methodology, data collection, data analysis, and interpretation. This review indicated very low capacities for evaluation, as many of the evaluation methods used were unsystematic and lacking in rigor. Even the most rudimentary principles of evaluation were violated in most of the reviewed documents. Among the most pervasive problems were the failure to establish baseline measures, the sole reliance on convenience samples, unsystematic approaches to the collection and interpretation of qualitative evidence, inattention to evaluation design, and the failure to define clear objectives, among many others. To enable systematic evaluation, it is important for agencies to build in a systematic manner staff capacities for evaluation and to develop academic or other partnerships that will provide the necessary technical expertise on evaluation.

Ultimately, however, changes in management and organizational culture need to occur in order to support regular, systematic evaluation. Management support is essential in making effective evaluation and program learning and improvement part of the responsibilities of child protection workers. Also, management support is necessary for enabling effective use of the information and lessons learned through evaluation to strengthen programming. As habits of systematic evaluation are strengthened within an agency, its informal ‘culture’ may shift in ways that make it become seen as a vital part of improving child protection practice and achieving humanitarian accountability. This project aims to facilitate this shift.

6.1.2 Outcomes Versus Process

It would be a mistake if this report were viewed as a call for more evaluation when in fact it is equally a call for a different approach to evaluation that focuses on outcomes for children. Most of the reviewed documents focused on processes such as the formation of child-focused groups and the conduct of training for preparing volunteers. Although process indicators are useful for purposes of monitoring and adjusting program operations, they cannot answer questions about outcomes and impact such as whether children’s lives improved as a result of the program and whether those outcomes were sustainable beyond the funded period of the program.

The definition and measurement of outcomes is highly challenging. For one thing, the meaning of terms such as “child protection” and “child well-being” is culturally, socially, and politically constructed and varies across ethnic groups, countries, and regions. Appropriately, this lack of universality has led to the development of culturally grounded measures of children’s protection and well-being that fit the understandings and practices of local people.128 To develop such measures requires large amounts of time and extensive methodological expertise. However, donor and agency pressures to achieve immediate results often take precedence over the slower approach that is needed to collect meaningful data regarding outcomes. Furthermore, the use of

128 Bolton et al. (2007).
culturally grounded measures makes it difficult to make comparisons across countries and to answer broader questions such as whether the facilitation of child-focused community groups yields benefits to children consistently across diverse contexts. Collectively, these time pressures and the desire for generalizable data have encouraged the use of standardized measures that have been developed in high-income countries. Such measures, however, have seldom been validated in local context, raising questions about the validity of the data and inferences drawn from them.

An appropriate response to this challenge is to use a mixture of culturally appropriate outcome measures and universal outcome measures. Also, cultural similarities in regions such as West Africa may make it possible to define children’s outcomes in ways that simultaneously fit the local context and are generalizable across countries.

6.1.3 Ethical Sensitivity

Attention to ethical issues is of paramount importance in the collection, storage, and use of information from program evaluations of child-focused community groups. Maintaining the confidentiality of sensitive information that could potentially be used to harm children is a high priority, as is obtaining informed consent, with all its complexities. As important as these issues are, they are by no means the primary issues in the ethics of documentation and program evaluation at field level. Frequently seen problems include:

- Raised expectations through data collection
- Collecting information and not feeding it back to the community
- Reliance solely on non-participatory methods that objectify children and fail to support their participation rights
- Use of aggressive methods that heighten children’s feelings of vulnerability
- Not organizing psychosocial support in data collection situations in which it is likely to be needed

Ethical issues arise also in connection with the use of comparison groups, which are necessary in trying to identify whether a particular intervention caused changes in children’s protection and well-being. Particularly contentious has been the use of randomized controlled trials that assign on a random basis some children to a condition in which they receive an intervention or to a ‘control’ condition in which they do not receive the intervention. An analysis of these issues is beyond the scope of this report. Nevertheless, it is worth noting that the use of approaches such as a wait-list methodology enable comparisons across conditions in an ethical manner.

A core part of ethical sensitivity is to collect information on Do No Harm issues associated with the evaluation itself. Analysis and reflection on the unintended negative consequences of evaluation work puts one in a better position to avoid causing harm. This approach, which recognizes that we learn as much from our mistakes as from our successes, is particularly

---

130 Boyden (2004).
important for ensuring that the movement to establish a norm of systematic program evaluation does not itself cause unintended harm to children.

6.2 Roles and Responsibilities

The reviewed documents indicated how difficult it has been for agencies, partners, communities, and governments to define appropriate and realistic roles and responsibilities for child-focused community groups and to enable the groups to fulfill those roles and responsibilities in an effective manner. Three sub-challenges emerged in this review.

6.2.1 Defining Appropriate Boundaries

Child-focused community groups ought to have a Terms of Reference that define their scope of work in ways that are appropriate to the local context. Defining the scope of work is inherently challenging since there are no global, consensus standards on the work of child focused community groups. In this review, the lack of consensus was evident in regard to views about the appropriate boundaries and roles of child-focused groups.

In emergency and transitional contexts in low- and middle-income countries that had relatively weak formal systems of child protection, INGOs often used a Category 2 approach to facilitate the formation of broad spectrum child-focused groups. Some of those groups attempted to respond directly to very sensitive issues such as GBV and family violence that are often regarded as private. In contrast, the review of the EBSCO and other social science literature indicated that in industrialized countries, child-focused community groups do not have such a broad scope of work and typically restrict their roles to befriending, supportive home visits, and prevention work. The direct response work is typically left to trained social workers and other agents of the formal child protection system. These divergent approaches could reflect differences of context and availability of formal child protection mechanisms.

However, there may also be divergent views among professionals in regard to how much they think child-focused committees should take on. This question about scope of work is complex because in emergency settings where few supports for children are visible and pre-existing supports may have been weakened, it is often difficult to see other options than child-focused community groups for addressing urgent yet sensitive child protection issues. This lack of perceived options may be one factor that has made child-focused community groups something of a default alternative. Nevertheless, it is possible that other alternatives might emerge from a more careful identification of indigenous supports and potential community help resources. This possibility should be explored further in Phase 2.

It will also be useful in Phase 2 to identify steps that different programs have taken to help child-focused community groups avoid taking on too much yet do their part in addressing highly

---

131 Matrix Documents 18, 94.
132 Matrix Documents 139, 144, 149, 150, 153, 154, 157, 159, 160.
sensitive issues. For example, the UNICEF program on paralegal committees in Nepal\textsuperscript{133} has encouraged committees to work as a group, with no one member taking on a very difficult case. Also, if the committee receives notice of a criminal case (e.g., involving alleged child abuse), they refer it to district level support groups for advice rather than attempting to deal with it at community level.\textsuperscript{134} Within the community, they facilitate the process of the case, putting the child or family in touch with lawyers, supporting health or medical needs, or enabling travel to courts. Such steps entail ongoing training regarding appropriate roles but also effective connections with other levels of the national child protection system.

### 6.2.2 Fulfilling Appropriate Roles and Responsibilities

Even if appropriate boundaries have been defined, a persistent challenge has been for child-focused community groups to stay within the boundaries, filling their appropriate roles and carrying out their defined responsibilities in a skillful manner. This is challenging in part because agencies often ask child-focused community groups to take on contradictory roles. For example, they may assume nonconfrontational roles such as raising awareness and being friendly supporters. Depending on the situation, though, they may also take on the more confrontational, control-oriented role of responding directly to cases of sexual exploitation or abuse. The failure to minimize role conflicts or to help members of community groups to acquire the skills needed to negotiate these divergent roles sets them up for confusion, conflict, or failure.

Child-focused groups have also tended to become seen as the ‘child protection police,’ which implies that they take a watchful yet punitive approach, meddle in people’s private affairs, and are the body that should receive reports on any perceived problem of child protection. Most likely, this problem is due to the fact that committee members often did not understand their roles clearly (see Section 4.3.6). Poorly trained members probably thought that it was their responsibility to receive and respond directly to cases that would more appropriately have been handled by the police or by referral to other groups. In addition, group members may in some instances have seen their roles as directive and controlling rather than as facilitating the development of local solutions. Alternately, community members might have had unrealistic expectations that led them to encourage committee members to step outside their appropriate roles. Overzealous committee members may have been unable to resist such community pressures for help. Possibly, a combination of these factors may have led to the problem.

The tendency of child-focused community groups to take on too much is problematic since groups or members that step outside their appropriate roles may violate laws or mandates of other child protection actors. Also, they are at risk of harming people unintentionally because they lack the training, guidance, and experience that would be appropriate to expanded roles. Harm may occur due to the weakening of child protection systems. In fact, stepping outside appropriate roles can undermine child protection systems by creating parallel systems, wasting resources, bypassing appropriate channels for response, and causing confusion and turf battles. To prevent such problems, it is essential that child-focused community groups receive training on their appropriate place in the child protection system, what their roles are, where the

\textsuperscript{133} Matrix Documents 24, 25.
\textsuperscript{134} Interview with Bhanu Pathak, July 8, 2009.
boundaries lie, and the difficulties and harm that can result from overstepping their appropriate roles. They should also have the understanding and skills needed to work effectively and to coordinate with other parts of the child protection system. To reduce inappropriate community pressures, it is vital also to conduct awareness-raising work to help community members understand the specific roles of child-focused groups.

Appropriate training and follow-up of child-focused community groups is a necessity not only for helping groups to stay in their appropriate role but also for carrying out effectively their responsibilities within that role. If part of their role is to make referrals, the group members need to understand when and how to make appropriate referrals. Or, if part of their role is to organize supports for survivors of abuse, exploitation, and violence, they need appropriate training and follow-up on how to fulfill those responsibilities well. A pervasive challenge, particularly in regard to broad spectrum groups that address a wide array of child protection issues, is to make the training and follow-up effective. At present, there are no consensus models on how to train child-focused community groups and a notable lack of data on which training approaches are most effective.

In developing effective training, it is important to keep in mind the different functions performed by child protection groups and avoid a ‘one-size-fits-all’ approach. For example, training for awareness raising—one of the primary activities of child-focused groups—is very different from training to support survivors of abuse or to make effective referrals. Deliberate attention should be given to matching the training content and approach with the particular roles and functions of the child-focused groups. Taken collectively, the reviewed documents left the impression that many child-focused community groups focused more on community awareness-raising than on the more challenging aspects of child protection work such as intervention, mediation, mitigation, referral, and facilitation of local solutions. Possibly, awareness-raising was what most community groups felt comfortable doing, and no doubt it was easier work than, for example, helping communities develop locally appropriate means of handling highly sensitive issues. A high priority ought to be the development and documentation of better systems of training, follow-up and capacity building that enable child-focused community groups to perform their multiple functions in an effective, appropriate manner.

6.2.3 Children’s Roles and Responsibilities

Enabling meaningful participation by children without asking them to take on inappropriate roles and responsibilities has been an ongoing challenge in work on child-focused community groups. One aspect of this challenge is tokenistic participation that occurs when children belong to child-focused community groups but adults make the key decisions and do not share power with children. In an effort to devolve more power to children, child-focused community groups have sometimes engaged in the ethically inappropriate practice of burdening children with excessive responsibility in regard to very difficult issues such as gender-based violence. Children have limited life experience and usually have fewer skills of managing the complexities associated with difficult issues, the mishandling of which can cause harm. From this standpoint, it would be inappropriate to ask a 12-year-old member of a community group to take on a role
and responsibilities identical to those of adult members. It is important to tailor the roles to children’s level of development and to avoid placing too great a burden on them.

At the same time, it is inappropriate to place children in an infantilized role that does not fit with their evolving competencies, sense of agency, and participation rights. Particularly in low- and middle-income societies, where children perform roles that in high-income societies are typically performed by adults, it is highly important to engage children as actors who can take on significant responsibility. In such contexts, children often derive a sense of satisfaction and meaning from their contributions to their families and communities. In regard to difficult issues such as family violence, children can play an important role in raising community awareness about the possible impact of family violence on children. However, direct intervention on issues of family violence is best left to adults, particularly those who have advanced skills of child protection, family mediation, and nonviolent conflict resolution. An ongoing challenge is learn how to engage children of different ages in ways that are meaningful, developmentally appropriate, and tailored to the context.

6.3 Sustainability

In this review, sustainable child protection processes and outcomes occurred when communities felt a sense of collective responsibility for resolving a particular problem and took collective, self-defined action to address the problem via child-focused community groups. When this sense of collective responsibility and ownership were strong, the child-focused community groups were effective in achieving positive outcomes for children, and the groups tended to persist beyond the period of external funding. This finding applied equally to broad spectrum and focused child protection groups.

However, numerous challenges surfaced in this review in regard to achieving sustainability. These related to issues of ownership, the scope of issues addressed, linkage with wider child protection systems, and evidence of sustainable outcomes.

6.3.1 Ownership and Scope of Issues Addressed

Both process and outcome sustainability were associated with category 3 and 4 approaches to engaging with communities, yet these approaches were seldom taken. Their relative infrequency may have occurred because these approaches entailed slow processes of intensive discourse and community-led decision making that were at odds with widespread donor practices of making funds available for relatively short periods of time and demanding immediate results. In addition, communities may have had previous relations with external agencies that reflected category 2 approaches. These previous experiences may have led communities to have self-fulfilling expectations that they would enter partnership relations with INGOs in which the community did not assume high levels of collective responsibility and ownership. Also, the staff of external agencies may have lacked the attitudes, values, and skills of facilitation needed to implement these approaches. Whatever the cause, it should be a high priority to enable community

---

135 Matrix Document 158.
ownership over child-focused community groups and the achievement of positive outcomes for children.

A central challenge was that of producing sustainable, positive outcomes in regard to a broad spectrum of child protection issues. This review indicated that there is a tradeoff between community ownership of child-focused groups and the scope of the issues addressed by the groups. In particular, community owned groups tended to address important but self-selected issues that did not include the ‘hardest’ child protection issues such as family violence. It is possible that there exist means of facilitation and capacity building that would enable community owned groups to expand their scope of work to include the most challenging issues. However, these means have not been identified at present. As discussed above, it is also possible that child-focused community groups are being asked to take on too much and that the emphasis should be on developing alternate means of addressing these issues within national child protection systems.

6.3.2 Effective Linkage with Child Protection Systems

The development of effective linkages between child-focused community groups and national systems of child protection is a high priority in improving the sustainability of local child protection mechanisms and achieving positive outcomes for children. How to develop effective linkages between child-focused community groups and wider child protection systems, however, is a significant challenge. In unstable contexts in which systems have been weakened or destroyed, it is an enormous challenge to organize effective child-focused community groups at the same time wider systems are being established. The prospects of establishing effective linkages are greater in relatively stable countries having reasonably functional systems of governance. In such contexts, the government may have mechanisms at district, sub-district, and community levels that address issues of child protection and well-being directly and that could connect with and support child-focused community groups. However, even in stable contexts, issues of responsiveness, capacity, ownership, and potential conflict with traditional practices can impede the development of effective linkages.

The reviewed documents indicated that government formed structures and mechanisms at community and district level varied widely in their efficacy and responsiveness. When they were slow and unresponsive, there was an understandable tendency to create community-based groups that could move with greater speed and flexibility, thereby risking the creation of a parallel system. To avoid this problem, it is important to take a capacity building approach that supports the development of a more responsive national system. A difficulty, however, is that an external agency that sees its role as strengthening community-based mechanisms of support may not be equipped to build the capacities of the wider, formal system of child protection. How to build effective national systems of child protection is one of the greatest challenges facing the child protection sector at present.

Even when external agencies have decided not to build wider child protection systems and to focus on the task of strengthening community-based child protection mechanisms, they have a responsibility to link community-based groups with the wider child protection system. If they do
not fulfill this responsibility, child-focused community groups may be unaware of what the
government is doing or plans to do, or of what systems exist at the district level or higher. If they
do not see the relevance of what happens at other levels to their own work in their community,
they may have little motivation to connect with other levels. External agencies should take a
capacity building approach that helps members of community-based groups to understand the
wider child protection system, to understand and appreciate their distinctive role within it, and to
develop the skills, values, and attitudes that enable the groups to develop effective linkages with
the wider child protection system.

Additional impediments to sustainability may arise because of conflicts between traditional
practices and those prescribed by government defined legal and justice mechanisms. For
example, government laws against early marriage may exist yet may not be enforced if early
marriage were widely accepted and viewed as normal. In developing a functional national system
of child protection, it is essential to build synergies between governmental and traditional,
indigenous systems when it is possible to do so. When it is not possible—for example, when
harmful practices remain deeply entrenched—it is useful to follow the example of the studies of
FGM reviewed in this report (see Section 5.1) and encourage a slow, dialogical process of
internally driven transformation that changes social norms and allows sustained protection for
children.

6.3.3 Evidence of Sustainable Outcomes

A noteworthy challenge for the future is to strengthen the evidence base regarding outcome
sustainability. Although most of the reviewed documents focused primarily on process
sustainability, stronger emphasis should be on whether the positive outcomes achieved by child-
focused community groups are sustainable, even if the groups themselves no longer exist or have
morphed into or merged with some other structure. Throughout the child protection sector, there
is little tendency to ask whether positive changes in children’s lives persist three, five, or more
years beyond the end of the funded period. A related challenge (to be addressed in Phase 2) is to
identify which indicators and measures of children’s protection and well-being are most
meaningful and important.

6.4 Taking a Dialogical Approach to Child Protection Work at Community
Level

This review highlighted how challenging it is for child-focused community groups to address
highly sensitive issues of child protection and well-being. This challenge reflects not only the
complexity of the issues themselves but also the difficulties of discussing and changing harmful
practices that are widespread yet viewed as normal and in the best interests of children. The
program example presented in Section 5.1 on the reduction of FGM suggests that ending such
practices is a slow process in which change comes from within the community through processes
of dialogue and critical reflection. Although outside agencies can play a facilitative role, they are
most effective when they embed work on child protection in work on wider development
projects and when they avoid imposing outsider concepts through, for example, didactic, top-
down processes.
The reviewed documents indicated that current approaches to facilitating and supporting child-focused community groups have not incorporated these lessons in addressing sensitive problems that are resistant to change. This review indicated that at present, there is an overreliance on didactic, top-down approaches and a failure to start with where communities are.

6.4.1 Importance of a Dialogical Approach

Many of the reviewed documents indicated that programs had sought to raise community awareness about children’s rights. As discussed above (Section 4.2.1), there is a significant difference between child rights and child protection, yet there is also overlap in work to support the realization of children’s protection rights and children’s wider rights. Except for Child Rights Committees, most child-focused community groups did not use child rights as their entry point to work on child protection, and they focused more on child protection issues rather than on wider child rights. Nevertheless, many groups had received training on child rights and introduced child rights language and concepts at community level as part of their work on child protection and well-being. In doing so, the group members used mostly didactic approaches and did not take adequate steps to build rights concepts onto indigenous understandings and concepts about what is good for children.

Probably the biggest problems with this didactic approach to promoting children’s rights are that it communicates disrespect for local culture and fails to stimulate the genuine dialogue and self-critical reflection that lead to social change. Didactic, top-down approaches are antithetical to a dialogical approach, which enables ongoing dialogue, information exchange, analysis of different views, and critical reflection and decision-making by the community about what is in the best interests of its children. The efficacy of dialogical approaches that are driven by local people is apparent from the results of recent studies of how to reduce harmful practices such as FGM. Human rights concepts are fundamental to the process of social change yet are useful when the community has developed its own ways of speaking about these concepts and there has emerged a cadre of internal change agents who stimulate and guide the process of social change.

Didactic approaches are also weak because they present children’s rights in a decontextualized manner that connects poorly with people’s everyday lives and experience. For example, during telephone interviews, one experienced practitioner told how a child protection worker spoke in an abstract manner about child rights during a heavy downpour to refugees who lacked basic necessities such as shelter. No connection was made between children’s rights and the obvious fact that it was raining and the refugees had no shelter. In such situations, community members are likely to regard child rights as abstractions that do not apply to them.

6.4.2 Learning From and With Local Communities

The didactic, top-down approach to raising awareness about child rights is only one small part of a much larger problem wherein child-focused community groups have tended not to learn

---

136 Matrix Documents 130, 137, 147, 148.
137 Personal communication with Stephen Hanmer, June 2, 2009.
about and build upon existing cultural assets such as religious leaders, traditional healers, and cleansing rituals, among many others. As discussed above (Section 4.3.2), many reviewed programs showed little evidence of having attempted to identify, engage with, and build upon local cultural resources. This limited the impact of the externally facilitated child-focused groups because there were low levels of community ownership and the sense among local people that the supports being developed were alien to their culture.

Why child-focused agencies have tended not to learn about and build upon existing cultural and social mechanisms is a question that merits additional inquiry and reflection. One possibility is that the press of time and the urgency of achieving immediate results undermined the use of a slower process of learning about and engaging with what is already there. However, many child-focused community groups were implemented in long-term development settings where a slower process was feasible. Another possibility is that many child protection workers lacked the ethnographic skills that are needed to learn systematically about and document properly local beliefs, practices, and resources. This hypothesis has merit in that many child protection workers may be mechanistic in their use of skills such as asset mapping and may not analyze well how to use such tools or to interpret the data they yield in a particular context.

A third possibility is that external child protection agencies and workers lack the full range of attitudes, values, and skills that are needed to work in a respectful, engaged, dialogical manner with local people. In fact, they may have had negative attitudes that demonized or dismissed local culture or framed it as the problem that needs to be changed. Alternately, they may have seen themselves as the “experts” who were in the best position to address harmful cultural practices. Such stereotypes and arrogant attitudes can blunt the motivation to take the dialogical approach that has been shown to be most effective in enabling communities to address effectively the most sensitive child protection issues. Even if the motivation were present, however, external agencies and community child protection workers may lack the skills needed to facilitate or engage effectively in a dialogical, protracted process of social change. A significant challenge, then, is how to select, prepare, and support agency staff and community workers who can effectively take a dialogical approach that enables community change and who can help also to build the wider child protection systems.

The didactic approach was also problematic since it tacitly disrespected local people and marginalized their voices, assets, and practices. It embodied a failure to start off by listening to the community, learning about its understandings of children and what they need to be well (as defined in local terms). The failure to listen to communities signals that outsiders, not local people, are in a position to identify and address problems, thereby disenfranchising the community and undermining their sense of ownership of problems of abuse, exploitation, and violence against children.

To learn from and with communities in a dialogic approach, it will be important to avoid inappropriate practices that were visible in the review and to:

- Listen to the community about how it conceptualizes children and the roles of young people, parents, and communities.
- Learn what the community already does to protect and care for children.
- Learn about and build upon community assets and strengths in protecting children.
- Enable deep dialogue and critical reflection within communities about what is harmful to children and what enables children’s protection and well-being.

Work to end harmful practices also requires avoidance of the extremes of either dismissing local cultural practices as harmful or romanticizing them. An appropriate balance ought to be achieved wherein agencies (1) identify, engage with, and build upon local cultural resources and practices where they are useful and not harmful, and (2) identify and work to change harmful practices through a dialogic process guided by community members. The achievement of this balance will require cultural awareness, a spirit of appreciative inquiry, and a critical approach guided by human rights standards. This combination of elements will enable the creation of a new generation of practice that does not impose its approach on communities and is oriented toward enabling positive change from within communities.

6.5 Effective Child Protection in Emergency Settings

Emergency situations pose myriad challenges to organizing effective child protection. In addition to issues of security, logistics, and access to the affected populations, children may face an expanded array of child protection threats at a moment when child protection systems are in disarray. From a programmatic standpoint, the lack of functioning child protection systems and the need for child protection on a large scale favor the establishment of child-focused community groups.

A significant challenge is how to organize child protection in highly complex, fluid and dangerous environments. Although this review has pointed out the merits of a highly participatory approach, there are situations in which high levels of community participation in child protection are infeasible and inappropriate. In contexts in which many spies are operating, disappearances are occurring, and levels of fear are high, it would be unwise and unethical as well as impractical to facilitate the establishment of child-focused community groups. Decisions about whether and how to help establish and support child-focused community groups must always be contextual.

A pervasive challenge in emergencies is the pressure for immediate results. Particularly if the skill levels of local child protection workers were low, the sense of urgency may favor the recruitment of outside child protection workers who have little knowledge of the local culture or context, which makes it difficult to start with where local people are. Time pressure may also favor the recruitment of national staff who had not been screened carefully and lack the skills that are needed. The sense of urgency also makes it difficult to manage issues of power and diversity in the formation and maintenance of child-focused community groups. Amidst a rapidly changing environment with large-scale displacement and population movements, it can be very challenging even to identify the various lines of affinity and difference, much less to manage these issues effectively over time.
The sense of urgency also makes it difficult to work in a manner that promotes sustainability. The pressures to establish community-level protections quickly lead external agencies to take a category 2 approach in engaging with local communities. Although this approach is useful in establishing rapidly protections that are reasonably broad in scope, it has the drawback of not developing the higher levels of community responsibility and ownership that lead to the highest levels of effectiveness and sustainability. Sustainability is not a high priority for some emergency-focused agencies, which seek to save lives on an immediate basis. This short-term approach, however, risks wasting resources by not taking steps even during the emergency phase to help develop the child protection systems that are needed over the long run. These challenges of sustainability are increased by the fact that donors frequently make funding available for periods that are too short to enable the slower, longer process of building community ownership.

New ways of managing this challenge need to be developed. In this review, there was suggestive evidence that it might be possible to engage with communities initially in a category 2 approach and then evolve toward a category 3 approach by, for example, progressively handing over responsibility and decision-making authority to the community. However, there are no proven models for facilitating this transition. Possibly, it might be easier to enable such a transition if both the community and the external agency agreed in the first few weeks of the emergency that it is desirable to move in this direction. Subsequently, they might establish agreed benchmarks for when to make the transition, and develop together a capacity building plan that will enable the community to reach the benchmarks and take on added responsibility in an effective manner. In essence, this approach seeks to make the transition a matter of deliberate, collaborative action rather than assuming that somehow the transition will occur without planning.

6.6 Funding and Donor Practices

This review began with the observation that the child protection sector is underfunded, party due to the lack of compelling evidence regarding which interventions are effective, scalable, sustainable, and cost effective. However, the review disclosed that the shortage of funding was only one part of a much larger, less visible set of challenges.

A highly significant challenge at present is the emphasis on short-term funding. A central theme of this review is that community ownership is necessary for achieving effective, sustainable outcomes for children. Yet the development and nurturance of community ownership is a slow process that extends over years. In numerous cases, the loss of funding occurred despite evidence of success and the existence of urgent, unmet needs or right at the moment when the process of community ownership was beginning to develop. If child-focused community groups are to mature as an intervention approach, it is vital that longer-term, multi-year funding be made available to support their work.

Challenges arise also from the widespread use of three negative practices:
• Injecting too much funding into communities prematurely and too rapidly
• Excessive targeting of predefined categories of children
• Use of stigmatizing labels

In work on HIV and AIDS, all three of these problems were particularly visible, and they interacted in ways that harmed children. For example, U. S. Government funds earmarked for ‘OVCs’—a highly stigmatizing label—were often injected into communities before community ownership of child protective efforts had developed. In some cases, the big money sparked the proliferation of ‘briefcase NGOs’ that garnered funding, when the funding could have been used more effectively had it been given to representative, respected community groups.\(^{139}\) Also, the arrival of large amounts of money undermined community ownership by marking the project as external and diverting attention from the communities’ sense of responsibility and their mobilization of their own resources. The introduction of too much funding early on encouraged the hijacking of work on child protection by people whose primary motivation was money rather than children’s well-being. In essence, big money invited people to ask ‘what do we get?’ rather than ‘how can we contribute’ and ‘what can we do?’

The excessive targeting of orphans and other children whose vulnerability was associated with HIV and AIDS created jealousies and social divisions.\(^{140}\) The irony is that this targeting assumed that orphans were the most vulnerable children in the community, when there may have been children who were more vulnerable than orphans. In fact, there is evidence that in difficult situations in which there are multiple sources of children’s vulnerability, orphans are not the most vulnerable children.\(^{141}\) Because categories such as ‘orphans’ are not homogeneous and may include a mixture of highly vulnerable children and others who are better off than most children, it is advisable to use contextual definitions of vulnerability. As discussed previously, it is also good practice to support a wide array of at-risk children and to avoid the privileging of any particular group. In essence, this approach makes it possible to target aid for selected groups in a manner that does not trigger jealousies and that provides support for a wider array of affected children.

To address these challenges will require significant changes in donors’ practices along the lines suggested below.

### 7. Recommendations

It is appropriate to conclude with a mixture of broad recommendations for practitioners and donors and ones that offer guidance specifically for Phase 2 of this project.

#### 7.1 For Practitioners

\(^{139}\) Matrix Document 91.
\(^{140}\) Matrix Documents 28, 65, 93.
\(^{141}\) Futures Institute, 2009.
Eleven recommendations are aimed at practitioners who wish to improve the quality and sustainability of their practice.

1. Make systematic program evaluation and program learning high priorities and use the results to guide program revisions that strengthen the positive outcomes for children. Evaluations should include baseline and post-intervention data, measures of outcomes for children, children’s perspectives, and participation by children, families, and communities. On a regular basis, agencies should conduct more robust evaluations that include planned, well structured comparisons of groups that did and did not receive the intervention, respectively, and that used systematic methods of sampling and data analysis. Information from evaluations should be fed back in appropriate form to affected communities. Mechanisms should be established to support the peer review of evaluations through an inter-agency, collaborative process.

   Program evaluations should seek to document explicitly program successes and also challenges and Do No Harm issues. The documentation of Do No Harm issues fits with the idea that we often learn as much from our mistakes as from our successes.

2. Develop and disseminate widely user-friendly, child-focused tools that facilitate systematic evaluation. Support effective use of these tools by conducting inter-agency workshops and mentoring on program evaluation.

3. Conduct all work on child-focused community groups in a manner that supports healthy national child protection systems. At all phases of work, develop effective linkages with the national system.

4. Facilitate the formation and strengthening of child-focused community groups by using a dialogue oriented, culturally sensitive approach that starts with where people are, maps existing capacities and resources, and builds upon the latter in a process that promotes community ownership, minimizes problems of imposition and backlash, and gradually addresses the full spectrum of child protection threats.

5. Plan for and take systematic steps to promote sustainability. Work in emergency and transitional contexts should be done with an eye toward supporting community ownership and long-term development. Programs should link and collaborate with the government, strengthening the sub-regional structures that support the work of child-focused community groups. An important step is to develop and use realistic sustainability plans right from the start of the project.

6. Develop improved systems of training and capacity-building, including follow-up support and supervision mechanisms, that enable child-focused community groups to perform their multiple functions in an effective manner. Improvements are needed particularly in regard to preparing child protection groups to understand their appropriate roles and functions and to avoid taking on inappropriate responsibilities.
7. Promote genuine child participation, taking care to manage problems of backlash and keeping in mind that full child participation is a long-term goal.

8. Make it a high priority to manage effectively issues of power, diversity, and tolerance. This requires careful attention at the group formation stage and also ongoing monitoring and steps to enable representation and power-sharing by different groups. Because gender inequities pervaded many aspects of the work of child-focused community groups, gender issues warrant particular attention.

9. Depending on the context, fill the identified program gaps, assigning higher priority to issues such as family violence, GBV, psychosocial support, and protection for very young children. This could entail, for example, identifying and learning from effective approaches to addressing one or several of these issues and disseminating lessons that can help to guide effective practice.

10. Embed child protection supports within wider community development processes. This holistic approach supports children’s well-being and also helps to build community trust and set the stage for addressing highly sensitive issues.

11. Cultivate awareness of and take steps to respond to and prevent Do No Harm issues such as the creation of parallel systems and excessive targeting of specific groups of at-risk children.

### 7.2 For Donors

1. Require effective evaluation of programs involving child-focused community groups. This should include the provision of funding to support the more robust, systematic evaluations that are needed to help identify the most effective, sustainable practices and approaches.

2. Support longer-term funding that will enable the development of community-owned child protection groups.

3. Avoid the use of stigmatizing labels such as ‘OVC.’

4. Avoid excessive targeting of particular categories of at-risk children and ensure that funded projects do not develop narrow thematic groups that fit poorly with community priorities. Make funding available for a wider array of affected children.

5. Avoid the infusion of large sums of money into the community, particularly at an early time before a sense of community ownership has developed.

### 7.3 Recommendations for Phase 2

Phase 2 will make it possible to test and refine many of the key findings from Phase 1. Effective work in Phase 2 requires preparation and extensive inter-agency collaboration with
members of the Reference group and also with agencies that do not belong to the current Reference Group. It also requires a sharpened sense of priorities regarding field work. This section offers suggestions about the preparation and the conduct of the field work in Phase 2. These are offered not as prescriptions but as inputs for discussion and additional planning.

7.3.1 Key Questions

This review identified a number of key questions, which are summarized in the adjacent box, that warrant additional inquiry in Phase 2.

7.3.2 Preparation

1. Finalize this report, incorporating suggestions from the Reference Group members.

2. Collect additional information from Latin America on child-focused community groups and mechanisms.

3. Continue the process of interviews with field representatives of the programs that seem promising candidates for the field work to be conducted in Phase 2.

4. Organize and conduct a face-to-face meeting of representatives of agencies that organize work with child-focused community groups. Ideally, the meeting will include agency representatives from the Reference Group and also from agencies that do not currently belong to the Reference Group but are in a position to support effective field work and further development of this project. Key outputs from this meeting should be defined objectives and priorities (e.g., key questions, likely candidate programs, contexts and geographic areas for work, etc.) for data gathering in Phase 2 and ideas about possible operational partners that could facilitate the work.

This review identified numerous programs that could be candidates for field work in Phase 2 (see Table 2, which is organized in alphabetical order by agency). These suggestions were based on criteria such as pertinence to key questions identified in the review, demonstrated positive outcomes for children, success in community mobilization or building community ownership, and diversity of context, issues, and technical approaches. However, these are preliminary suggestions only and require systematic follow-up to determine their suitability and value added.
It is anticipated that participants in the face-to-face meeting will bring additional ideas about programs that might be candidates for the field work in Phase 2.

### Table 2. Possible candidate programs and questions to explore further in Phase 2.

<table>
<thead>
<tr>
<th>Agency Source or Implementing Partner</th>
<th>Country, Program, &amp; Matrix Document Number</th>
<th>Topics/Issues of Interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>DCOF</td>
<td>Southern Africa, Study of the Response of Faith-Based Organizations to OVCs, Matrix 71</td>
<td>Partnerships with FBOs as a means of developing community-owned child protection groups; can community owned groups that start with a focused approach expand to a broad spectrum approach? How can child protection groups build on what communities already do to protect their children?</td>
</tr>
<tr>
<td>Save the Children UK</td>
<td>Sudan, Community Based Child Protection Network Model, Matrix 111 (See also Matrix 106)</td>
<td>What are effective ways of managing issues of power, diversity and tolerance over time? How can an ILI category 2 program evolve toward categories 3 &amp; 4? How do effective programs engage with build upon local traditions and mechanisms?</td>
</tr>
<tr>
<td>Save the Children UK</td>
<td>Cote D’Ivoire, Evaluation of community monitoring committees and the protection of child victims of trafficking in West and Central Africa, Matrix 128 (See also Matrix 26, 98)</td>
<td>How can high levels of community ownership of child protection groups be developed? What enables child-focused community groups to address harder issues such as forced early marriage? How can effective links be established with national child protection systems? How can children from different ethnic groups be included more fully?</td>
</tr>
<tr>
<td>Save the Children UK</td>
<td>India (W. Bengal), Community-based child protection mechanisms; Matrix Nos. 12; 23</td>
<td>What enables the effective community mobilization around domestic labor? How can an ILI category 2 program evolve toward categories 3 &amp; 4? How can the scope of issues addressed be enlarged?</td>
</tr>
<tr>
<td>Save the Children U. S.</td>
<td>Indonesia, Uganda, Protecting Children from Exploitation &amp; Trafficking: A Positive Deviance Approach; Matrix 48.</td>
<td>What are effective ways of mapping what local people do to protect themselves and how can these be built upon programmatically? Can PD methodology be used to address other highly sensitive issues?</td>
</tr>
<tr>
<td>Unicef</td>
<td>Nepal, Paralegal Committees, Matrix Nos. 24-25</td>
<td>Paralegal committees and justice; how have the committees been able to stimulate work on difficult issues such as violence against women that are institutionalized and endemic in the socio-cultural setting? Can category 2 programs evolve into categories 3 &amp; 4?</td>
</tr>
<tr>
<td>World Vision</td>
<td>Philippines, ABK Initiative: Matrix Nos. 4-5</td>
<td>Linking community groups with government-led child protection systems. Role of community-based groups in achieving positive outcomes on a scale for children at risk of or engaged in child labor; can focused groups expand to address a wider array of issues? Can category 2 programs evolve into</td>
</tr>
<tr>
<td>World Vision</td>
<td>Sierra Leone, Integrated Child Protection Programme, Matrix 36</td>
<td>Can focused child protection groups expand their attention to address a wider array of child protection issues? What factors enabled the effective community mobilization?</td>
</tr>
<tr>
<td>World Vision</td>
<td>Cambodia, Reducing GBV Project, Matrix 73</td>
<td>What supports effective community mobilization around the sensitive issues of GBV?</td>
</tr>
</tbody>
</table>

5. Prepare a written research plan for Phase 2 via a consultant working with a sub-group of interested agencies.

### 7.3.3 The Field Work

1. Conduct field research that uses ethnographic methodology to identify and document indigenous mechanisms that support children’s protection and well-being. Also identify how the establishment and maintenance of externally initiated, child-focused community groups has affected these indigenous mechanisms.

2. Address priority issues identified in the face-to-face meeting through focused field work, using contextually appropriate, ethical methodologies. Consider using an academic-practitioner partnership approach to developing the methodology and analyzing the data.

3. Organize an inter-agency peer review team to examine the data and the written report from Phase 2, making suggestions for follow-on work.

As envisioned here, Phase 2 would entail a highly collaborative process. This is appropriate since this project has taken a highly collaborative approach from its inception. Nothing short of a fully collaborative approach will make it possible to elevate the child protection sector to a higher level.

### 8. References


ANNEX A: TERMS OF REFERENCE

A review of global evaluation evidence on externally-supported community based child protection groups

Overview

Community based child protection groups are at the forefront of efforts to address child protection in many places where local and national government is unable or unwilling to carry out its role of fulfilling children’s rights to care and protection. Community groups are particularly active in response to health, HIV and AIDS and in conflict or emergency affected settings.

Community child protection groups are increasingly widespread in humanitarian and development contexts, and are also being recognised more and more by agencies and government as vital in the establishment of effective national child protection systems. As a consequence there is momentum to scale up in many places across the world.

Despite the growing prevalence of community based approaches to protection, there has been relatively little evaluation of their impact on child protection, their sustainability and scalability. Whilst there is recognition that community involvement is vital, questions are being raised as to the effectiveness and impact of community based child protection groups and around the identification of best practice in supporting them. Not enough evaluated and documented experience exists on how to successfully transition community based child protection groups that are established during emergencies to post-conflict and development situations.

With the growing focus on the role of community action within national child protection systems, and increasing and sometimes uncritical community mobilisation by agencies as a child protection response, there is a risk of community-based approaches of uneven quality being replicated and scaled up without adequate knowledge of their effectiveness or the support they need to maintain good practice. Given the investment already made in community based child protection groups, and the potential for scaling up and replication, there is now an urgent need for a robust assessment of their strengths, limitations, sustainability, scalability and the requirements for support of community based approaches to protection.
Definition of community based child protection group

There is currently no single agreed definition of a community based child protection group. Various models and approaches to community based child protection groups have emerged reflecting different country contexts and agency approaches.

Community based child protection groups are also known by a variety of names in different places, for example Child Protection Committees in Myanmar, Child Welfare Committees in Sierra Leone and Anti-Trafficking Networks in India, Defensorias in Peru.

For the purpose of this note, community based child protection groups are defined as a collection of people, often volunteers, that aim to ensure the protection and well-being of children in a village, urban neighbourhood or other community, for example an IDP camp, or temporary settlement. The term, as used in this note, describes a community group that operates at the grassroots or district level as opposed to a group at the national level. It is recognised that community based child protection groups have to link with mechanisms and services at the district or provincial level.

Why we need a global review of community based protection groups

Community based child protection groups, if they are systematically developed and linked to services and other mechanisms, have the potential to become a critically important component of a national child protection system. However, despite their potential importance and the scale of donor and agency investment in them, there has been little systematic attempt to evaluate their effectiveness in protecting children, their sustainability and scalability.

The evaluations will be used to:

Identify impact of community based protection groups on child protection (evidence-based)

Child protection is one of the least funded sectors at national and international level. In order to convince both national governments and international donors to support community based child protection groups there is a need to demonstrate impact and value for money. In the future, this could also include examining the benefits of community based child protection groups relative to other child protection interventions.
Support implementation of best practice

There is some evidence that community based child protection groups have generated positive outcomes for children, for example positive changes in attitudes and behaviour towards children’s right to protection, improved care and support for children affected by HIV and AIDS, improved access to education and birth registration, reduced incidence of trafficking and child labour, removal of children from prostitution, and other positive outcomes. There is also evidence untrained committees can cause harm.\textsuperscript{142} Assuring the quality and appropriateness of community interventions is often difficult and given the challenges facing community protection groups, often made up of volunteers, and scarce resources for training and support, it is not surprising that even with the best intentions, interventions might have unintended or harmful impacts, or impacts that are not sustained. There is therefore a need to identify the minimum pre-conditions that are required in order to make a community based approach to child protection successful, sustainable and scalable. This would include looking at the attention paid by external agencies to pre-existing community assets and strengths in the protection of children.

Drive forward inter-agency consensus and harmonisation on good practice approaches to community mobilisation for child protection

Many different agencies are mobilising community based groups for child protection in both humanitarian and longer term development contexts and it is apparent that approaches to mobilisation vary. In humanitarian contexts in particular, there is evidence that this variation can lead to tension between different communities, particularly around the area of financial support for volunteers. Identifying and measuring the long term impact of community based child protection groups will be complex, not least because there are different expectations of what a community based child protection group should be achieving and what success for the groups and for children’s outcomes looks like. A global review is therefore needed to explore this and drive forward consensus and greater coordination of approaches between agencies.

Aims of the evaluation synthesis

In order to fill the critical gaps in evidence there is an urgent need to undertake new field-based research. However, before embarking on a full-scale inter-agency multi-country evaluation it is necessary to first consolidate and review the existing documented evidence base. Whilst individual agencies have undertaken assessments at different points, there has never been a global inter-agency review to bring this learning together.

\textsuperscript{142} i.e. Anti-trafficking committees who deprive children of their legitimate freedom of movement
The aim of the evaluation synthesis is therefore to provide a review and summary of the available global evidence on community based child protection groups. The evaluation will be used to inform the development of UNICEF WCARO’s regional strategy on building national child protection systems, as well as provide immediate evidence to inform technical guidance to country offices on how best to support community based protection mechanisms. In addition, the evaluation synthesis is intended as the first phase of the overall inter-agency evaluation project and will provide the foundation for the second phase field-based research. Several countries in the region will be selected for further study. Funded under a separate, non-UNICEF mechanism, WCARO will directly benefit from the second phase field-based research.

The objectives of the first phase evaluation synthesis are therefore:

8. to provide a broad mapping of the scale and coverage of community based child protection groups, including those supported by external agencies, governments and those that are community-led;
9. to document common models and approaches used by agencies to establish, support or promote child protection mechanisms, including defining roles and responsibilities of group members and training support;
10. to document common roles, responsibilities and the key activities of community groups;
11. to assess the strength and quality of the evidence base for community based child protection groups, and to identify critical gaps in knowledge;
12. to synthesise the available global evidence on the impact, reach and effectiveness of community based child protection groups in different contexts including emergency and non-emergency settings (crisis/emergency, early recovery and longer term development);
13. to provide a broad review of lessons on community mobilisation which can be drawn from other sectors, in particular health and HIV AND AIDS; and
14. to inform the second phase field-based research, including the prioritisation of research questions, geographic scope and methodology.

As a secondary objective, the process of undertaking the evaluation synthesis will also help to identify national and international organisations who are engaged in supporting community based child protection groups who may become partners in phase two of the work.

Key questions for the review

There are a large number of questions with regard to community based child protection groups which merit investigation. However, to ensure that the review is manageable it must be confined in scope. Therefore it will focus on answering the following key questions:

9. What evidence is available on the impact of community based child protection groups on protecting children from abuse, neglect, violence and exploitation?
10. What are the factors and prerequisite conditions associated with successful impact of these community groups? To what extent are these factors replicable in other contexts and settings?

11. What are the different approaches/models that are taken to mobilising communities for child protection and how do these approaches affect the impact on children?

12. What are the gaps or weaknesses in current approaches/models of community based child protection groups? What can we learn from these weaknesses? How have these weaknesses been addressed and overcome in practice?

13. What are the different approaches/models that are taken to mobilising communities for child protection and how do these approaches affect the impact on children?

14. What are the factors associated with sustainability of community based child protection groups, including transition for those established as part of an emergency response?

15. What are the cost associated with supporting and mobilising community based structures? What are the factors associated with scaling up community based child protection groups to cover the whole (or large parts of the) country?

16. Are there any lessons that can be drawn for the child protection sector from experiences of community based mechanisms in other sectors, particularly health and HIV AND AIDS? What are the lessons common across all sectors and those specific to child protection?

**Methodologies**

**Child protection sector evidence**

The main methodology will be a systematic review and synthesis of evaluation evidence on community based child protection groups in all countries. This will focus on evaluation reports and documents.

To map the scale and coverage of externally supported community based groups, each agency will undertake a self-assessment questionnaire, to be developed by the reference group and finalised with the consultant.

In order to follow-up and find out more about the mapping results and individual evaluations, telephone interviews will be undertaken with key agency staff including child protection programme managers where necessary and appropriate. The extent of telephone interviews required will be determined based on initial document review.

The review will use an agreed typology of the most common approaches/models of community based child protection groups as a framework for analysis. A suggested typology will be developed in advance by the reference group and finalised with the consultant prior to the analysis commencing.
It is likely that the review will draw together a large number of evaluation reports and documents from across organisations. Therefore selection of evaluations to include in the synthesis will be based on some common inclusion criteria. The criteria will be developed by the reference group and then finalised with the consultant.

Once the evaluation reports have been sifted and selected, it is likely that there will be just a few evaluations for most of the models/approaches and contexts. In order to ensure that any lessons drawn out are valid, a framework and criteria for assessing the strength of evidence will be developed and agreed by the reference group and then finalised with the consultant. The criteria will set out the quality of evidence that is acceptable before lessons and conclusions can be reached.

The synthesis will include documents from sources such as:

- Agencies’ published and unpublished evaluation reports
- The World Bank evaluation database
- The Emergency Capacity Building (ECB) evaluation database
- The Joint Learning Initiative on Children and HIV AND AIDS
- Documentation from inter-agency working groups
- Reports from donor agencies

Many agencies’ evaluations are not published therefore unpublished documents will need to be collected from within individual agencies and shared for the review as far as possible.

The review will include English, Spanish, French and Portuguese-language documents (to be confirmed depending on consultant’s qualifications).

Health and HIV AND AIDS sectors

The methodology for synthesising evidence from the health and HIV AND AIDS sectors will also be a systematic review. However, in order to remain manageable this part of the work will focus on reviewing only a small number of meta-evaluations rather than individual evaluation reports. This should be possible given the larger quantity of evidence in these sectors. Advice on this element of the review will be sought in advance from health and HIV AND AIDS Advisers within Save the Children, UNICEF and DCOF.

Expected output
The output of the evaluation synthesis will be:

1) A report that includes:

   a. an executive summary of the review's key findings
   b. a broad mapping of the scale and coverage of community based child protection groups globally, including WCAR;
   c. a description and mapping of the most common approaches/models to community based child protection groups based on the typology developed with the reference group;
   d. an assessment of the quality and strength of evidence on the impact of community child protection groups on children's protection;
   e. a summary of the key lessons learned for effective practice from both the child protection sector and also the health and HIV AND AIDS sectors, including a list of principles of good practice;
   f. identification of common knowledge gaps; and
   g. recommendations for ways forward for the second phase of field-based research.

**Dissemination of findings**

A dissemination plan for the review findings during phase one will be consist of sharing the report electronically with all UNICEF country offices and partner agencies. The report will also be posted in key websites, including UNICEF intranet, the Better Care Network and agency specific websites. A more formal dissemination component of the project will be funded during phase two. A key dissemination activity will be for the findings to inform the design and inter-agency discussion for phase two of the evaluation. Dissemination activities may also include:

- Printing and distributing copies of the full report and summary
- Presentation of the review findings at one key global meeting (opportunities to be identified)
- Development of an inter-agency powerpoint presentation to be delivered by reference group members and individual agencies at appropriate meetings and events
- Online seminar using the Elluminate platform
- Short video presentation of key lessons to share via youtube

Dissemination activities will be agreed by the reference group members and further funding will be sought for these as part of the resources for phase 2 of the evaluation.

**Timetable**

The review will be expected to start in mid-April.
Activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>April</th>
<th>May</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selection of consultant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop typology and framework for review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop inclusion criteria for documents to review</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop criteria for evidence strength</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collate documents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Review documents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Follow-up telephone interviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Draft report</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reference group provides feedback on draft report</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finalise report</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Resources

No more than 42 days of consultancy will be required to complete the review activities. The fee for the work will be up to $400-$500 per day, according to experience of each of the consultants.

Activities undertaken by the consultants

<table>
<thead>
<tr>
<th>Activities undertaken by the consultants</th>
<th>Number of days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Finalize typology and framework for review</td>
<td>1</td>
</tr>
<tr>
<td>Finalize inclusion criteria for documents to review</td>
<td>1</td>
</tr>
<tr>
<td>Finalize criteria for evidence strength</td>
<td>1</td>
</tr>
<tr>
<td>Collect and review documents</td>
<td>27</td>
</tr>
<tr>
<td>Telephone interviews</td>
<td>3</td>
</tr>
<tr>
<td>Draft report</td>
<td>6</td>
</tr>
<tr>
<td>Finalise report</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>42 days</td>
</tr>
</tbody>
</table>
Budget

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Total $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior consultant’s fees</td>
<td>30 days @ $500 per day</td>
<td>$ 15,000</td>
</tr>
<tr>
<td>Supporting consultant’s fee</td>
<td>12 days @ $400 per day</td>
<td>$ 4,800</td>
</tr>
<tr>
<td>Telephone costs</td>
<td></td>
<td>$   200</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>$20,000</strong></td>
</tr>
<tr>
<td>Project management (in-kind contribution from SC)</td>
<td>10 days @ $450 per day</td>
<td>$ 4,500</td>
</tr>
<tr>
<td><strong>Total (inc. in-kind)</strong></td>
<td></td>
<td><strong>$24,500</strong></td>
</tr>
</tbody>
</table>

**Qualifications of consultant**

The consultant must have:

- Graduate degree in social sciences
- Minimum of ten years experience in child protection and community development
- Field experience observing or directly working with community based child protection groups using different approaches
- Excellent research, evaluation and analytical skills
- Proven skills in writing clearly and concisely in English
- Ability to read English
- Ability to meet deadlines

It is desirable for the consultant to have:

- Ability to read French, Spanish &/or Portuguese

**Roles and responsibilities**

Sarah Lilley from Save the Children will manage the project – including the two consultants - on behalf of the inter-agency reference group.
The **Senior Consultant** will be responsible for:

- Developing the inclusion criteria in collaboration with the reference group
- Developing the typology and framework for the review in collaboration with the reference group
- Developing the criteria for evidence strength in collaboration with the reference group
- Working with the supporting consultant to review and analyze evaluation reports and other documentation provided by the reference group
- Arranging and undertaking telephone interviews where appropriate
- Writing the draft and final report
- De-briefing the reference group on the review findings

The **Supporting Consultant** will be responsible for:

- Collating documents
- Supporting the Senior Consultant in reviewing and analyzing evaluation reports and other documents
- Arranging and undertaking telephone interviews where appropriate
- Working with the senior consultant to review and analyze evaluation reports and other documentation provided by the reference group
- Working with the Senior Consultant to draft first report and to ensure inclusion of material from non-Anglo-phone countries.

**Reference group and management**

Members of the inter-agency reference group:

- UNICEF WCARO, Joachim Theis and Brigette De Lay
- UNICEF NY, Shirin Nayernouri and Jennifer Keane
- UNICEF ESARO, Margie de Monchy and Nankali Maksud
- Oak Foundation, Jane Warburton
- USAID DCOF, John Williamson
- Pulih Foundation, Livia Isländer
- International Save the Children Alliance, Bill Bell, Sarah Lilley, Gabriella Olofsson and Lisa Laumann
- World Vision, Bill Forbes and Elli Oswald

Additional members of the reference group may be added.

The reference group will support the project through:

- Collating internal documents from within their own agency and sharing with the consultant
- Collating and sharing other relevant documents that they are aware of e.g. inter-agency reports
- Providing the consultant with contact details of relevant agency staff for telephone interviews
- Contributing to the development of the inclusion criteria
- Contributing to the development of the typology and framework for the review
- Contributing to the development of the criteria for evidence strength
- Reviewing and commenting on the draft and final report

There will also be a wider consultation group of individuals from within these agencies who will comment on the ToR and draft report.
## ANNEX B: MATRIX OUTLINE

### Document Title:

<table>
<thead>
<tr>
<th>Document Description</th>
<th>Child Protection Committee</th>
<th>Evaluation</th>
<th>Key Findings/Lessons</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Source:</strong></td>
<td>Formation</td>
<td>Method of study</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Status:</strong></td>
<td>- I.L.I approach (category)</td>
<td>- Qualitative:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Language:</strong></td>
<td><strong>Form</strong></td>
<td>- Quantitative:</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Country:</strong></td>
<td>- Name</td>
<td>- Documentation</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Implementing agency:</strong></td>
<td>- No. of participants:</td>
<td>- Ex-poste only</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Project name:</strong></td>
<td>- Status of participants (e.g., community leaders, parents, government workers; volunteers vs. paid)</td>
<td>- Pre- vs. post- with no comparison group Y/N</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Context:</strong></td>
<td>- Gender:</td>
<td>- Pre- vs. post- with comparison group Y/N</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Function</strong></td>
<td>- Child participation:</td>
<td>- Children’s outcomes measured Y/N</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Resourcing</strong></td>
<td>- Affinity:</td>
<td>- Community outcomes measured Y/N</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Activities</strong></td>
<td>- Role:</td>
<td>- Quality of processes measured Y/N</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Protection issues addressed:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Sectors engaged:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Intended to be ongoing:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Y/N</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Actually ongoing:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Y/N</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Training/cap. bldg. provided:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Follow up/supervision:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Financial/material support:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Costs:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Case management:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Community awareness-raising</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Referrals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Other:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Linkages</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- With formal protection system:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- With nonformal systems:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## ANNEX D: LIST OF REVIEWED DOCUMENTS

### 1. Africa

#### 1.1 Emergency—Africa

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programming for Children Involved in Armed Conflict: Case Study Review of Guinea, Sudan and Nepal</td>
<td>1</td>
</tr>
<tr>
<td>Oxfam-Novib Child Protection Programme: Capacity Building for Civil Society Networks in Somalia/land</td>
<td>17</td>
</tr>
<tr>
<td>Community-Based Child Protection Programme Evaluation and Review</td>
<td>20</td>
</tr>
<tr>
<td>Going Home: Demobilising and reintegrating child soldiers in the Democratic Republic of Congo</td>
<td>22</td>
</tr>
<tr>
<td>Assessment of UNICEF Supported Programmes for Reintegration of Children Formerly Associated with Armed Groups and Forces In Sudan</td>
<td>28</td>
</tr>
<tr>
<td>The First Line of Protection: Community-Based Approaches to Promote Children’s Rights in Emergencies in Africa</td>
<td>94</td>
</tr>
<tr>
<td>Protecting Children’s Rights Using Community Based Approaches</td>
<td>106</td>
</tr>
<tr>
<td>Community Based Child Protection Network Model</td>
<td>111</td>
</tr>
<tr>
<td>Evaluation of Child Protection in Dadaab, Kenya</td>
<td>112</td>
</tr>
<tr>
<td>Final Report: Review of the Support Package to Enable Student Retention in Northern Uganda</td>
<td>118</td>
</tr>
</tbody>
</table>

#### 1.2 Transitional—Africa

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Based Reintegration: Programme Evaluation</td>
<td>10</td>
</tr>
<tr>
<td>Capacity &amp; Vulnerability Assessment of Child Protection in Sierra Leone</td>
<td>11</td>
</tr>
<tr>
<td>Mapping of District Profiles</td>
<td>14</td>
</tr>
<tr>
<td>An Inter-Agency Child Protection Committee Review in Acholi, Lango and Teso Regions in Uganda: Findings, Recommendations, and the Way Forward</td>
<td>18</td>
</tr>
<tr>
<td>Reintegration of Children Associated with Armed Groups in the West of Cote D’Ivoire</td>
<td>26</td>
</tr>
</tbody>
</table>
### External Project Evaluation of Integrated Child Protection Programme
1.3 Development—Africa

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long-Term Evaluation of the Tostan Programme in Senegal: Kolda, Thies and Fatick Regions: Working Paper</td>
<td>2</td>
</tr>
<tr>
<td>Child Protection and HIV AND AIDS Impact Review 2007</td>
<td>8</td>
</tr>
<tr>
<td>Report on and Proposals for Enhanced Systems of Child Rights Monitoring and Reporting</td>
<td>9</td>
</tr>
<tr>
<td>“We are volunteering”: Endogenous community-based responses to the needs of children made vulnerable by HIV and AIDS</td>
<td>15</td>
</tr>
<tr>
<td>Research Results from Child-Focused, Faith- and Community-Based Responses to HIV</td>
<td>16</td>
</tr>
<tr>
<td>Expanding and Strengthening Community: A Study of Ways to Scale Up Community Mobilization Interventions to Mitigate the Effect of HIV AND AIDS on Children and Families</td>
<td>21</td>
</tr>
<tr>
<td>Title</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Mid Term Review: The Cross-Border Project Against Trafficking and Exploitation of Migrant and Vulnerable Children (XBP)</td>
<td>27</td>
</tr>
<tr>
<td>Save the Children (UK) Foundations for the Future Phase II External Evaluation Report</td>
<td>78</td>
</tr>
<tr>
<td>Understanding Community Responses to the Situation of Children Affected by AIDS: Lessons for External Agencies</td>
<td>29</td>
</tr>
<tr>
<td>Reporting Back: Community Feedback on the Report of a Retrospective Study on Community Mobilization for Orphan Care and Support in Malawi and Zambia</td>
<td>33</td>
</tr>
<tr>
<td>Child Protection Project in Northern and Upper East Regions, Ghana (Assessment Report)</td>
<td>35</td>
</tr>
<tr>
<td>Evaluation of the Separated and Abandoned Children’s Project: Closing the Faucet of Shame</td>
<td>38</td>
</tr>
<tr>
<td>Community Child Protection Workers in Malawi</td>
<td>40</td>
</tr>
<tr>
<td>World Vision International, Models of Learning 4 Country Community Care Coalition Study: Synergy Report of key findings and recommendations</td>
<td>41</td>
</tr>
<tr>
<td>Evaluation of HIV &amp; AIDS Projects in Four “Hope Child” Countries in East and Southern Africa</td>
<td>42</td>
</tr>
<tr>
<td>A National Audit of Child Care Forums in South Africa</td>
<td>44</td>
</tr>
<tr>
<td>FOCUS Evaluation Report 1999</td>
<td>45</td>
</tr>
<tr>
<td>Lessons Learned in Scaling up Community-based OVC Care and Support Models across Africa</td>
<td>47</td>
</tr>
<tr>
<td>SC UK Mozambique Annual Impact Review 2005: Covering programming for vulnerable children with an emphasis on support to livelihoods and social assistance</td>
<td>51</td>
</tr>
<tr>
<td>A Tracer Study of KURET Vocational Graduates in Kenya</td>
<td>53</td>
</tr>
<tr>
<td>Together: How Communities in C’ote d’Ivoire are Protecting their Children</td>
<td>55</td>
</tr>
<tr>
<td>A Midterm Review of the SCOPE-OVC Program in Zambia</td>
<td>57</td>
</tr>
<tr>
<td>Developing Interventions to Benefit Children and Families Affected by HIV AND AIDS: A Review of the COPE Program in Malawi</td>
<td>60</td>
</tr>
<tr>
<td>Child Protection Assessment in the Context of HIV &amp; Aids: An Assessment Conducted in Eastern &amp; Southern Africa</td>
<td>63</td>
</tr>
<tr>
<td>Child Protection Networks</td>
<td>66</td>
</tr>
<tr>
<td>Community Mobilization To Address the Impacts of AIDS: A Review of the COPE II Program in</td>
<td>67</td>
</tr>
<tr>
<td>Title</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Malawi</td>
<td></td>
</tr>
<tr>
<td>Orphan Care Evaluation, Mchinji District, Malawi</td>
<td>68</td>
</tr>
<tr>
<td>A Review of the COPE Program and Its Strengthening of AIDS Committee Structures</td>
<td>69</td>
</tr>
<tr>
<td>Study of the Response by Faith-Based Organizations to Orphans and Vulnerable Children</td>
<td>71</td>
</tr>
<tr>
<td>Evaluation of Lihlombe Lekukhalela (child protectors) 2005</td>
<td>72</td>
</tr>
<tr>
<td>Fighting Against the Abuse, Exploitation and Trafficking of Malagasy Children</td>
<td>76</td>
</tr>
<tr>
<td>Independent Midterm Evaluation of Combating Child Labor and Exploitation through Education in Guinea (CCLEE)</td>
<td>79</td>
</tr>
<tr>
<td>Thusani Bana</td>
<td>81</td>
</tr>
<tr>
<td>Community Action and the Test of Time: Learning From Community Experiences and Perceptions: Case Studies of Mobilization and Capacity Building to Benefit Vulnerable Children in Malawi and Zambia</td>
<td>82</td>
</tr>
<tr>
<td>Community-Based Care and Protection of Children Affected by HIV AND AIDS and Poverty Programme: A Case Study</td>
<td>87</td>
</tr>
<tr>
<td>Title Impact Assessment of the Most Vulnerable Children (MVC) Community Based Care, Support and Protection in Musoma Rural</td>
<td>88</td>
</tr>
<tr>
<td>Evaluation of The Umtata Child Abuse Resource Centre</td>
<td>89</td>
</tr>
<tr>
<td>Mobilising Community Action Against AIDS in an Aid Dependent Environment</td>
<td>95</td>
</tr>
<tr>
<td>Support for a Comprehensive HIV AND AIDS Programme in Maluti a Phofung Municipality of Thabo Mofutsanyana District, Free State Province</td>
<td>96</td>
</tr>
<tr>
<td>An evaluation of the Comprehensive HIV AND AIDS Programme of Save the Children (UK) in Maluti-a-Phofung, Free State Province</td>
<td>97</td>
</tr>
<tr>
<td>Mobilizing Community Resources to Protection Children from Sexual Exploitation and Abuse in Western Cote d’Ivoire</td>
<td>98</td>
</tr>
<tr>
<td>Global Impact Monitoring Report: Community Based Care &amp; Protection Programme South Africa</td>
<td>105</td>
</tr>
<tr>
<td>An evaluation of the Comprehensive HIV AND AIDS Programme of Save the Children (UK) in Maluti-a-Phofung, Free State Province</td>
<td>107</td>
</tr>
<tr>
<td>Save the Children Swaziland: Impact Monitoring Report</td>
<td>108a</td>
</tr>
<tr>
<td>Save the Children Swaziland: Impact Monitoring Report</td>
<td>108b</td>
</tr>
<tr>
<td>Title</td>
<td>Matrix</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>An Assessment of the Impact of Implementing the MVC Programme and the Operation of the MVC</td>
<td>114</td>
</tr>
<tr>
<td>Funds and the Potential for Scaling Up to Provide National Coverage of Social Protection for</td>
<td></td>
</tr>
<tr>
<td>Children</td>
<td></td>
</tr>
<tr>
<td>Achievements and Challenges in the Implementation of The Community Based Care, Support and</td>
<td>115</td>
</tr>
<tr>
<td>Protection of the Most Vulnerable Children Program (MVC)</td>
<td></td>
</tr>
<tr>
<td>Taking Better Care? Review of a decade of work with orphans and vulnerable children in Rakai,</td>
<td>119</td>
</tr>
<tr>
<td>Uganda</td>
<td></td>
</tr>
<tr>
<td>Etat des lieux sur les comités de surveillance communautaires et la protection des enfants</td>
<td>128</td>
</tr>
<tr>
<td>victimes de la traite en Afrique de l’Ouest et du Centre</td>
<td></td>
</tr>
<tr>
<td>Evaluation of community monitoring committees and the protection of child victims of trafficking</td>
<td></td>
</tr>
<tr>
<td>in West and Central Africa</td>
<td></td>
</tr>
</tbody>
</table>

2. Asia

2.1 Emergency—Asia

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programming for Children Involved in Armed Conflict: Case Study Review of Guinea, Sudan and</td>
<td>1</td>
</tr>
<tr>
<td>Nepal</td>
<td></td>
</tr>
<tr>
<td>End-of-Term Internal Evaluation: Integrated Emergency Community-Based Child Protection for</td>
<td>3</td>
</tr>
<tr>
<td>Children Affected by Conflict in the North and East of Sri Lanka (2007-2008)</td>
<td></td>
</tr>
<tr>
<td>Child Protection: A community based model of child protection</td>
<td>31</td>
</tr>
<tr>
<td>Global Impact Monitoring - Afghanistan Child Rights and Protection Program</td>
<td>39</td>
</tr>
<tr>
<td>Earthquake Response in Azad Jammu &amp; Kashmir, Pakistan</td>
<td>43</td>
</tr>
<tr>
<td>Report of an Evaluation of the Terre des Hommes Programme for Protecting and Promoting the</td>
<td>75</td>
</tr>
<tr>
<td>Psychosocial</td>
<td></td>
</tr>
<tr>
<td>Well-Being of Tsunami and Conflict Affected Children in the Batticaloa and Ampara Districts of</td>
<td></td>
</tr>
<tr>
<td>Sri Lanka</td>
<td></td>
</tr>
<tr>
<td>NGO Consortium for the Psychosocial Care and Protection of Children: October 2004 – September</td>
<td>85</td>
</tr>
<tr>
<td>2007</td>
<td></td>
</tr>
<tr>
<td>NGO Consortium for the Psychosocial Care and Protection of Children October 2004-September</td>
<td>86a</td>
</tr>
<tr>
<td>2007: Internal Evaluation</td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td>Matrix</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>NGO Consortium for the Psychosocial Care and Protection of Children October 2004-September 2007: Internal Evaluation</td>
<td>86b</td>
</tr>
<tr>
<td>NGO Consortium for the Psychosocial Care and Protection of Children October 2004-September 2007: Internal Evaluation</td>
<td>86c</td>
</tr>
<tr>
<td>Achievements and Challenges in the Implementation of The Community Based Care, Support and Protection of the Most Vulnerable Children Program (MCV)</td>
<td>116</td>
</tr>
</tbody>
</table>

### 2.2 Transitional—Asia

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Para-Legal Committee Evaluation: Report on Field Work Undertaken</td>
<td>24</td>
</tr>
<tr>
<td>Paralegal Committees in Nepal: Brief Overview</td>
<td>25</td>
</tr>
<tr>
<td>Strengthening Child Protection through Child and Family Welfare System Capacity Development in Timor Leste</td>
<td>30</td>
</tr>
<tr>
<td>Protecting Children from Exploitation and Trafficking: Using the Positive Deviance Approach in Uganda and Indonesia</td>
<td>48</td>
</tr>
</tbody>
</table>

### 2.3 Development—Asia

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent Final Evaluation of “Combating Child Labor through Education in the Philippines: ABK Project</td>
<td>4-5</td>
</tr>
<tr>
<td>Community Based Trafficking Prevention Initiatives</td>
<td>6</td>
</tr>
<tr>
<td>Regional Anti-Trafficking Network Anantapur-Kadapa-Chittoor: A Case Study</td>
<td>7</td>
</tr>
<tr>
<td>Community Based Child Protection Mechanisms: Save the Children experience in West Bengal</td>
<td>12</td>
</tr>
<tr>
<td>Evaluation of Project “Comprehensive Intervention on Child Domestic Work”</td>
<td>23</td>
</tr>
<tr>
<td>Title</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Global Impact Monitoring (GIM) Report: Child Protection Project in Cuddalore, Nagapattinam and Kanyakumari Districts of Tamil Nadu, India</td>
<td>34</td>
</tr>
<tr>
<td>Evaluation of the Child Protection Network Project</td>
<td>37</td>
</tr>
<tr>
<td>Review of Addu Child Protection System</td>
<td>49</td>
</tr>
<tr>
<td>The Magadi Child Labour Elimination Project (no document title)</td>
<td>56</td>
</tr>
<tr>
<td>ToR—Evaluation of the Village Courts Child Protection Programme</td>
<td>58</td>
</tr>
<tr>
<td>Reflection and Impact Review Workshop—Women and Children’s Access to Community Justice (Child Protection) Programme</td>
<td>59</td>
</tr>
<tr>
<td>Reducing Gender Based Violence Project: Final Evaluation</td>
<td>73</td>
</tr>
<tr>
<td>RGBV M&amp;E/Learning Support Consultancy October 2006-April 2007 Reflection Paper</td>
<td>74</td>
</tr>
<tr>
<td>Concerted intervention to reduce violence, abuse and exploitation against children at the community level: A Pilot Project of Save the Children UK</td>
<td>77</td>
</tr>
<tr>
<td>Child Protection Network: Findings and Recommendations of the external evaluation</td>
<td>84</td>
</tr>
<tr>
<td>Global Impact Monitoring Report: Child Protection</td>
<td>90</td>
</tr>
<tr>
<td>SCALE-UP HOPE Program</td>
<td>93</td>
</tr>
<tr>
<td>Project on Community-Based Initiatives Against Trafficking in Children in Vietnam: Impact Monitoring Report</td>
<td>101</td>
</tr>
<tr>
<td>Support for a Comprehensive HIV AND AIDS Programme in Maluti a Phofung Municipality of Thabo Mofutsanyana District, Free State Province: Final Report to the Ford Foundation</td>
<td>102</td>
</tr>
<tr>
<td>Orphans and Vulnerable Children (OVC) Policy and Practice in Southern Africa: Addressing the rights of the most vulnerable children</td>
<td>103</td>
</tr>
<tr>
<td>Save the Children Cross-Border Project Against Trafficking and Exploitation of Migrant and Vulnerable Children: April 2006 to March 2009</td>
<td>109</td>
</tr>
<tr>
<td>Hope for Domestic Child Labour: The Domestic Child Labour Elimination Project</td>
<td>110</td>
</tr>
<tr>
<td>Mekong Delta Regional Trafficking Strategy: Final Report</td>
<td>123</td>
</tr>
<tr>
<td>End of Project Evaluation: World Vision’s Mekong Delta Regional Trafficking Strategy</td>
<td>151</td>
</tr>
</tbody>
</table>
### 3. Latin America

#### 3.1 Emergency—Latin America

#### 3.2 Transitional—Latin America

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colombia Impact Study: Project to support displaced populations, Phases 1999-2002 and 2003-2005</td>
<td></td>
</tr>
<tr>
<td>Informe Final Evaluacion PDA El Rosario</td>
<td>126</td>
</tr>
<tr>
<td>Final Evaluation Report Area Development Programme El Rosario</td>
<td></td>
</tr>
<tr>
<td>Informe Final Evaluacion Intermedia PDA Esmeralda</td>
<td>127</td>
</tr>
<tr>
<td>Final Implementation (mid-term) Report Area Development Programme Esmeralda</td>
<td></td>
</tr>
</tbody>
</table>

#### 3.3 Development—Latin America

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Putting Children’s Rights on the Local Agenda: The Experience of the Demuna Model in Peru</td>
<td>70</td>
</tr>
<tr>
<td>Capítulo 5: EDNA-SNPI</td>
<td>131</td>
</tr>
<tr>
<td>Chapter 5: EDNA-SNPI</td>
<td></td>
</tr>
<tr>
<td>Defensorias Comunitarias</td>
<td>132</td>
</tr>
<tr>
<td>Community Defence Centres</td>
<td></td>
</tr>
<tr>
<td>Defensorias Briefing Note</td>
<td>133</td>
</tr>
<tr>
<td>Informe Final de Evaluacion SINAI-AF</td>
<td>134</td>
</tr>
<tr>
<td>Final Evaluation Report SINAI-AF</td>
<td></td>
</tr>
<tr>
<td>Informe Final Encuentro DNAs PRODELI</td>
<td>135</td>
</tr>
<tr>
<td>Final Report DNA PRODELI Meeting</td>
<td></td>
</tr>
<tr>
<td>Sistematizacion-2</td>
<td>136</td>
</tr>
<tr>
<td>Evaluation-2</td>
<td></td>
</tr>
</tbody>
</table>
4. Europe

4.1 Emergency—Europe

4.2 Transitional—Europe

4.3 Development—Europe

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation of Projects Under the Community-Based Services Programme: Final Report</td>
<td>32</td>
</tr>
<tr>
<td>“Learners for Life”: Life Skills and Employment Opportunities for Vulnerable Youth in Georgia</td>
<td>50</td>
</tr>
<tr>
<td>Analysis of the Child Protection System in Albania</td>
<td>52</td>
</tr>
<tr>
<td>Capitalization Report: Prevention of Juvenile Delinquency in Kosovo</td>
<td>54</td>
</tr>
</tbody>
</table>

5. Health Sector

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Best Practices in Community Engagement Strategies</td>
<td>80</td>
</tr>
<tr>
<td>Inside Out? Strengthening Community Responses to Children Affected by HIV AND AIDS</td>
<td>91</td>
</tr>
<tr>
<td>What Have We Learnt? A review of evaluation evidence on community interventions providing care and support to children who have been orphaned and rendered vulnerable</td>
<td>92</td>
</tr>
<tr>
<td>Community Directed Interventions for Major Health Problems in Africa</td>
<td>113</td>
</tr>
<tr>
<td>Taking Community Empowerment to Scale: Lessons From ThreeSuccessful Experiences</td>
<td>120</td>
</tr>
<tr>
<td>The Role of the Health Sector in Strengthening Systems to Support Children’s Healthy Development in Communities Affected by HIV AND AIDS</td>
<td>121</td>
</tr>
</tbody>
</table>
6. **EBSCO and Other Social Science Papers**

<table>
<thead>
<tr>
<th>Title</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empowerment in Child Protection Work: Values, Practice and Caveats</td>
<td>122</td>
</tr>
<tr>
<td>Female Genital Mutilation Abandonment Program</td>
<td>130</td>
</tr>
<tr>
<td>Sudan: An In-Depth Analysis of the Social Dynamics of Abandonment of FGM/C</td>
<td>137</td>
</tr>
<tr>
<td>Breaching Cultural Silence: Enhancing Resilience Among Ugandan Orphans</td>
<td>138</td>
</tr>
<tr>
<td>Beyond the State: Conceptualizing Protection in Community Settings</td>
<td>139</td>
</tr>
<tr>
<td>Evidence-Based Practice in Community-Based Child Welfare Systems</td>
<td>140</td>
</tr>
<tr>
<td>A Neighborhood Watch Program for Inner-City School Children</td>
<td>141</td>
</tr>
<tr>
<td>An Evaluation of the Child Rights Information Network: Examining Information Management in a Global NGO</td>
<td>142</td>
</tr>
<tr>
<td>Community Treatment Program for Juveniles: A Best-Evidence Summary</td>
<td>143</td>
</tr>
<tr>
<td>ChildServ: Lessons Learned from the Design and Implementation of a Community-Based Developmental Surveillance Program</td>
<td>144</td>
</tr>
<tr>
<td>Changing Structures: Necessary But Not Sufficient</td>
<td>145</td>
</tr>
<tr>
<td>Changing Systems by Changing Individuals: The Incubation Approach to Systems Change</td>
<td>146</td>
</tr>
<tr>
<td>Social Dynamics of Abandonment of Harmful Practices: A New Look at the Theory</td>
<td>147</td>
</tr>
<tr>
<td>Ethiopia: A comparative Anaysis of the Social Dynamics of Abandonment of Harmful Practices in Four Locations</td>
<td>148</td>
</tr>
<tr>
<td>How Strong Communities Restored My Faith in Humanity: Children Can Live in Society</td>
<td>149</td>
</tr>
<tr>
<td>Nenan Dane_zaa Deh Zona Family Services Society: Dane Wajjah Report: People Telling Their Story</td>
<td>150</td>
</tr>
<tr>
<td>Extending the Scope of Child Protection Training</td>
<td>152</td>
</tr>
<tr>
<td>‘She Made Me Feel Human Again’: An Evaluation of a Volunteer Home-Based Visiting Project for Mothers</td>
<td>153</td>
</tr>
<tr>
<td>An Evaluation of a Volunteer-Support Program</td>
<td>154</td>
</tr>
<tr>
<td>A Comparison of Multi-Disciplinary Groups in the UK and New Jersey</td>
<td>155</td>
</tr>
<tr>
<td>Expecting the Next Child</td>
<td>156</td>
</tr>
<tr>
<td>Title</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Child Protection at the Community Level</td>
<td>157</td>
</tr>
<tr>
<td>Rethinking Child Protection from a Rights Perspective: Some Observations for Discussion</td>
<td>158</td>
</tr>
<tr>
<td>Engaging the Community in Child Protection Programmes: The Experience of NEWPIN in Australia</td>
<td>159</td>
</tr>
<tr>
<td>Child Protection in the Community: A Community Development Approach</td>
<td>160</td>
</tr>
</tbody>
</table>
ANNEX E

Countries Covered in the Review

<table>
<thead>
<tr>
<th>Country</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>5</td>
</tr>
<tr>
<td>Albania</td>
<td>1</td>
</tr>
<tr>
<td>Angola</td>
<td>2</td>
</tr>
<tr>
<td>Armenia</td>
<td>1</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>1</td>
</tr>
<tr>
<td>Benin</td>
<td>1</td>
</tr>
<tr>
<td>Bolivia</td>
<td>1</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>1</td>
</tr>
<tr>
<td>Cambodia</td>
<td>7</td>
</tr>
<tr>
<td>Canada</td>
<td>1</td>
</tr>
<tr>
<td>China</td>
<td>1</td>
</tr>
<tr>
<td>Colombia</td>
<td>1</td>
</tr>
<tr>
<td>Costa Rica</td>
<td>2</td>
</tr>
<tr>
<td>Cote D’Ivoire</td>
<td>9</td>
</tr>
<tr>
<td>DRC</td>
<td>3</td>
</tr>
<tr>
<td>Egypt</td>
<td>1</td>
</tr>
<tr>
<td>El Salvador</td>
<td>1</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>6</td>
</tr>
<tr>
<td>Georgia</td>
<td>1</td>
</tr>
<tr>
<td>Ghana</td>
<td>1</td>
</tr>
<tr>
<td>Guinea</td>
<td>2</td>
</tr>
<tr>
<td>Honduras</td>
<td>2</td>
</tr>
<tr>
<td>India</td>
<td>8</td>
</tr>
<tr>
<td>Indonesia</td>
<td>2</td>
</tr>
<tr>
<td>Liberia</td>
<td>3</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>2</td>
</tr>
<tr>
<td>Kenya</td>
<td>4</td>
</tr>
<tr>
<td>Kosovo</td>
<td>1</td>
</tr>
<tr>
<td>Lebanon</td>
<td>1</td>
</tr>
<tr>
<td>Madagascar</td>
<td>3</td>
</tr>
<tr>
<td>Malawi</td>
<td>10</td>
</tr>
<tr>
<td>Maldives</td>
<td>1</td>
</tr>
<tr>
<td>Mali</td>
<td>1</td>
</tr>
<tr>
<td>Mozambique</td>
<td>4</td>
</tr>
<tr>
<td>Myanmar</td>
<td>3</td>
</tr>
<tr>
<td>Namibia</td>
<td>1</td>
</tr>
<tr>
<td>Nepal</td>
<td>6</td>
</tr>
<tr>
<td>Nigeria</td>
<td>1</td>
</tr>
<tr>
<td>Pakistan</td>
<td>3</td>
</tr>
<tr>
<td>Palestine</td>
<td>1</td>
</tr>
<tr>
<td>Country</td>
<td>Rating</td>
</tr>
<tr>
<td>------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Papua New Guinea</td>
<td>2</td>
</tr>
<tr>
<td>Peru</td>
<td>3</td>
</tr>
<tr>
<td>Philippines</td>
<td>3</td>
</tr>
<tr>
<td>Romania</td>
<td>1</td>
</tr>
<tr>
<td>Senegal</td>
<td>2</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>9</td>
</tr>
<tr>
<td>Somalia</td>
<td>2</td>
</tr>
<tr>
<td>South Africa</td>
<td>11</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>2</td>
</tr>
<tr>
<td>Sudan</td>
<td>5</td>
</tr>
<tr>
<td>Swaziland</td>
<td>6</td>
</tr>
<tr>
<td>Tanzania</td>
<td>4</td>
</tr>
<tr>
<td>Thailand</td>
<td>2</td>
</tr>
<tr>
<td>Timor Leste</td>
<td>1</td>
</tr>
<tr>
<td>Tunisia</td>
<td>1</td>
</tr>
<tr>
<td>Uganda</td>
<td>9</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>3</td>
</tr>
<tr>
<td>Yemen</td>
<td>1</td>
</tr>
<tr>
<td>Zambia</td>
<td>6</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>6</td>
</tr>
</tbody>
</table>