Strategies Addressing Violence Against Children (VAC) Across the East and Southern African Region (UNICEF/ESARO)

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VAC: Prevalent and Pervasive in Homes & Schools

• HOMES:
  – Regionally, 80 to 90 per cent of children suffer physical punishment in homes, with 30% more experiencing severe physical punishment resulting from the use of implements (UNSG Regional)

• SCHOOLS:
  – Botswana secondary school students, 67 percent of respondents, experienced unwanted touching, pressure for dates and other forms of sexual harassment
  – Swaziland & T Tanzania < 50% of all children have suffered some form of physical abuse during their primary and secondary schooling year

1, References to studies in the next three slides can be found in *Eastern and Southern Africa Region, UNICEF Mapping & Gap Analysis of Violence Against Children and Women, 2011.*
VAC: . . . in Legal Institutions & Labour²

• LEGAL INSTITUTIONS:
  – Zimbabwe, the age of criminal responsibility is 7, children who commit crimes, particularly boys, are subject to corporal punishment and imprisonment.

• CHILD LABOUR
  – 1 in 3 children are involved in child labour with boy/girl comparisons as follows—Ethiopia (59% boys and 46% girls), Rwanda (36% and 35%), Somalia (45% and 54%), Uganda (37% and 36%) and Tanzania (37% and 34%).

2. Ibid, 2011
VAC . . . through social norms, health

• EARLY MARRIAGE:
  – Malawi and Mozambique over 50% girls, now 20-24, were married before the age of 18.
  – Kenya and Zambia HIV infection rates among married girls are 48 to 65 percent higher than among sexually active unmarried girls.

• HEALTH:
  – Studies suggest that HIV/AIDS and violence against children (VAC) have a dangerous, complex relationship and may each increase the risk and impact of the other.

3. Ibid, 2011
Emerging Trends in ESAR

• At least one in three female children experience sexual violence
• Men/boys, boyfriends, husbands and male relatives are primary perpetrators
• Exposure is associated with STDS, unwanted and pregnancy complications, and depression
• Physical violence from parents and authority figures is a common experience—homes and schools are high-risk & dangerous
• Under-reporting—children don’t know what is/isn’t violent
• Inadequate or non-existent service access
UNICEF/ESARO:
VAC Prevention, Response & Child Protection

- Community
- Social Welfare
- Health
- Education
- Police & Justice
UNICEF/ESAR0
VAC Prevention & Response Framework
• Builds on a national response system focusing on Child Protection writ large
• Requires multi-sectoral planning and implementation
• Links essential child-friendly and accessible services through a strong referral system
• Nat’l help lines
VAC Prevention & Response Referral System

Prevention
- Community mobilization
- Behavioural change
- Social norms
- Awareness raising & advocacy
- ‘Safe space’ promotion

Referrals

Response
- Police child friendly (CF) services
- Courts & CF victim units
- Health CF care & treatment
- SW risk assessments & re-integration
ESAR: Addressing VAC

• Eight (8) ESAR countries are focusing on VAC:
  – Swaziland, Tanzania, Kenya, Zimbabwe, Malawi, South Africa, Mozambique and Uganda

• ESAR partnerships:
  – CDC, ECSA-HC, PEPFAR, UNAIDS, Population Council

• ESAR regional leadership:
  – Mapping of programme experiences & evidence
  – Regional funding strategies for prevention & response that build on existing infrastructure and partnerships
  – Regional TA for research and planning
2011 : Building Evidence of VAC & Systems Response

• CDC/UNICEF VAC Study
  – Completed: Swaziland (2007), Tanzania (2009)
  – Planned: Malawi (2012)

• Alternatives to large scale VAC Studies
  – Pop Council Adolescent Data Guides
  – Joint smaller studies: OSC
  – Literature reviews

• Improved impact and outcome-oriented evaluations in both prevention and services

• Social norms participatory and action-oriented research
VAC Prevention & Response: Emerging ESAR Models

- Sector-by-sector organic development: **Swaziland, Zimbabwe, Kenya, Malawi**

- Media and social norms focus: **Mozambique & Uganda**

- Developing a national CP/multi-sectoral response: **Tanzania**
Challenges to ESAR

• National coordination, building State institutions, inclusive of public & private sector
• Building on & integrating VAC with the Region’s HIV/AIDS superstructure
• Expanding GBV infrastructure/practice to include child sexual abuse
• Tackling social norms: defining, understanding their dynamics and applying findings in prevention and service
• Integrating child-friendly services across all sectors