

3.2 Violence against children



Approximately 1 billion children worldwide have experienced physical, sexual or psychological violence in the past year.²⁵ The prevention of violence against children has recently come to the fore as an emerging political priority. This presents a key opportunity to highlight the need to strengthen the social service workforce.

The Global Partnership to End Violence Against Children

The Global Partnership to End Violence Against Children (End Violence) was launched in 2016 to support efforts to achieve SDG target 16.2. (“End abuse, exploitation, trafficking and all forms of violence against and torture of children”) and promote other child-related SDG goals and targets. End Violence’s role is to galvanize support for efforts to end violence against children across actors, regions and sectors. End Violence will also serve as a platform for highlighting solutions to violence against children and collaborate with pathfinder countries on implementing effective programs and strategies to achieve target 16.2. on the national level. Alongside the launch of End Violence, the World Health Organization (WHO) and other partners launched *INSPIRE: Seven Strategies for Ending Violence Against Children*.²⁶ INSPIRE identifies strategies, and highlights sample interventions, for reducing violence in the lives of children.

As of May 2017, 13 governments²⁷ have expressed their commitment to champion the End Violence goals to end all violence against children. These pathfinding countries are developing national strategies to end violence against children-

- Sri Lanka
- Nigeria
- Romania
- Sweden
- Paraguay
- The Philippines
- Indonesia
- El Salvador
- Mexico
- Uganda
- Tanzania
- Montenegro
- Jamaica

The pathfinding countries are showing the political will to implement solutions on the national level to end violence against children. The social service workforce will be the key implementing actor on the ground to achieve the success of INSPIRE and SDG target 16.2. Therefore, it is especially relevant to highlight the intersections between a strong social service workforce and ending violence against children.

INSPIRE

Seven Strategies for Ending Violence Against Children



Implementation and enforcement of laws



Norms and values



Safe environments



Parent and caregiver support



Income and economic strengthening



Response and support services



Education and life skills

²⁵ World Health Organization (2016), INSPIRE: Seven strategies for Ending Violence Against Children: http://www.who.int/violence_injury_prevention/violence/inspire/en/

²⁶ *ibid.*

²⁷ The Global Partnership to End Violence Against Children: www.end-violence.org

General Narrative

The social service workforce directly addresses the biggest issues facing society today – issues like migration, violence against children, and healthcare challenges.

In 2015, 65.3 million people worldwide were forced to flee their homes due to conflict and persecution,³³ while over 100,000 children left their homes unaccompanied to request asylum in another country.³⁴ Save the Children estimates that due to prolonged exposure to the horrors of war, millions of Syrian children could be living in a state of toxic stress³⁵ which can affect the development of a child's brain and cause life-long physical and mental health problems.³⁶

Approximately one billion children worldwide have experienced physical, sexual or psychological violence in the past year.³⁷ A recent study conducted by ChildFund Alliance and the Overseas Development Institute, estimated that the global cost of violence against children may be as high as US\$7 trillion, or eight percent of global GDP.³⁸ Research has shown how abuse and maltreatment can lead to life-long physical and mental health problems, lower educational achievement, and even affect a child's brain development.³⁹

According to UNAIDS, the number of HIV infections declined by more than 50% in 26 countries between 2001 and 2012.⁴⁰ Yet, an estimated 36.7 million people worldwide are still living with HIV at the end of 2015.⁴¹ Evidence suggests that in heavily affected countries, the HIV/AIDS pandemic has reduced average national economic growth rates by 2-4% each year across Africa.⁴² WHO estimates that 1.5 million people died of the infection in 2013 leaving a staggering 17.8 million children without parents.⁴³

The social service workforce stands on the front lines addressing these issues, but the impact of their work depends on receiving the proper political and financial support.

The social service workforce is comprised of paid and unpaid, governmental and nongovernmental professionals and para professionals working to ensure the healthy development and well-being of children and families. Failing to strengthen this workforce means limiting the effectiveness of the program they implement and wasting the valuable resources invested in those programs.⁴⁴

Studies show that a well-planned, well-developed, and well-supported workforce⁴⁵ is better equipped to support families and children to reach their full potential and better recover from emergency situations and crises.

Plan: Following a national HR analysis in 2011 in Uganda, regular reviews of decentralization of workforce data facilitate workforce planning and budgeting. Combined with leadership capacity building and child protection training, staffing levels have increased by 20%.⁴⁶

Develop: Through a strategic mapping of the Child Protection in Emergencies sector that ensures the well-being of children in conflict and disaster situations, practitioners were able to determine the barriers to training of practitioners and align skill needs in an emergency situation with specific training efforts.⁴⁷

Support: To prevent job stress and increase team performance, a program in South Africa successfully offered psychological support to its child care workers serving vulnerable children and orphans.⁴⁸

Policy and decision-makers can ensure the resilience of our society by investing in the planning, development and support of the social service workforce to give them the tools and resources they need to tackle the most pressing issues facing us today.

³³ The UN Refugee Agency, Figures at a Glance: <http://www.unhcr.org/figures-at-a-glance.html>

³⁴ UNICEF (2016), Uprooted, The growing Crisis for Refugee and Migrant Children.

³⁵ Save the Children (2017), Invisible Wounds, The impact of six years of war on the mental health of Syria's children.

³⁶ WithoutViolence, How violence & neglect leave their marks on a child's brain, infographic: <http://www.withoutviolence.org/infographics/>

³⁷ World Health Organization (2016), INSPIRE: Seven strategies for Ending Violence Against Children: http://www.who.int/violence_injury_prevention/violence/inspire/en/

³⁸ ODI & Childfund Alliance (2014), The costs and economic impact of violence against children.

³⁹ WithoutViolence, How violence & neglect leave their marks on a child's brain, infographic: <http://www.withoutviolence.org/infographics/>; WithoutViolence, How can preventing violence against children raise global living standards, infographic: <http://www.withoutviolence.org/infographics/>

⁴⁰ UNAIDS (2013), AIDS by the numbers.

⁴¹ WHO, Global Health Data: <http://www.who.int/gho/hiv/en>

⁴² United Nations Department of Economic and Social Affairs/Population Division (2004), The Impact of AIDS.

⁴³ WHO, World AIDS Day: Business Unusual: Time to end the AIDS epidemic: http://www.who.int/woman_child_accountability/ierg/news/ierg_statement_AIDS_1_december_2014/en/

⁴⁴ Global Social Service Workforce Alliance (2016), The Evidence Matrix for the Social Service Workforce.

⁴⁵ *ibid.*

⁴⁶ The State of the Social Service Workforce (2016), Report, A Review of Five Years of Workforce Strengthening.

⁴⁷ Save the Children and Linksbridge, SPC (2015), Child Protection in Emergencies capacity building: Mapping and market analysis.

⁴⁸ Thurman, T.R., Yu, S., & Taylor, T.M. (2009), Care for Caregivers: A psychosocial support model for child and youth care workers serving orphans and vulnerable children in South Africa.

Narrative – Violence Against Children

Approximately 1 billion children worldwide have experienced physical, sexual or psychological violence in the past year.⁴⁹ A recent study conducted by ChildFund Alliance and the Overseas Development Institute estimated that the global cost of violence against children may be as high as US\$7 trillion, or eight percent of the world's GDP.⁵⁰ Research has shown how abuse and maltreatment can lead to life-long physical and mental health problems, lower educational achievement, and even affect a child's brain development.⁵¹

The social service workforce stands on the front line responding to violence against children, but the impact of their work depends on receiving the proper political and financial support.

A strong social service workforce is comprised of paid and unpaid, governmental and nongovernmental professionals and para professionals working to ensure the healthy development and well-being of children and families.

With the Sustainable Development Goals all countries have committed to ending violence against children. We have an historic opportunity to give children a future free from violence and abuse. The experts agree and proven solutions exist. For example, parenting programs, such as a 12-week program implemented by local well-trained child care workers in South Africa, resulted in significant reductions in reported child abuse and parental stress.⁵²

Studies show that a well-planned, well-developed, and well-supported workforce⁵³ is better equipped to protect children from violence, abuse and exploitation at home, in school and in their communities. Failing to strengthen the workforce means limiting the effectiveness of solutions, wasting the valuable resources being invested and leaving children unprotected in the face of violence, abuse and exploitation.⁵⁴

Policy and decision-makers can keep their commitment to ending violence against children by investing in the planning, development and support of the social service workforce to give them the tools and resources they need to tackle one of the most pressing issues facing us today.

⁴⁹ World Health Organization (2016), INSPIRE: Seven strategies for Ending Violence Against Children: http://www.who.int/violence_injury_prevention/violence/inspire/en/

⁵⁰ ODI & Childfund Alliance (2014), The costs and economic impact of violence against children.

⁵¹ WithoutViolence, How violence & neglect leave their marks on a child's brain, infographic: <http://www.withoutviolence.org/infographics/>

⁵² Cluver, L. et. al. (2016), Reducing child abuse amongst adolescents in low- and middle-income countries: A pre-post trial in South Africa.

⁵³ Global Social Service Workforce Alliance (2016), The Evidence Matrix for the Social Service Workforce.

⁵⁴ *ibid.*

Example impact story

How communities in Uganda decided to jointly reduce incidents of child abuse

Impact stories are a great way to highlight the achievements of your program to potential funders, decision-makers, or partners. They are simple descriptions of a program's progress, achievements, or lessons learned as a success story. They can entail pictures, quotes by program participants or results of an evaluation to make it more personal and tell the story of the achievements.

Impact stories come in all forms and shapes, but the most common one is the one-page impact story directed at decision-makers and funders. The following is an example of a one-page impact story that has been developed based on the findings of the SUNRISE-OVC project.

Make sure to follow the story structure while creating an impact story.

1 in 2 Ugandans are under the age of 18, and almost half of those are moderately, or even critically, vulnerable to the impacts of economic challenges, internal migration, family breakdown and HIV and other illnesses.

A recent situation analysis on Child Poverty and Deprivation reveals that 3.7 million children below five years of age (half the under-five population) live in poverty, and around 1.6 million live in extreme poverty. Furthermore, 38% of children aged 6-17 in Uganda live in poverty, and around 18% live in extreme poverty. Of particular concern are the high rates of child abuse, including neglect, forced early marriage and defilement, defined under Ugandan law as sexual relations with a minor under the age of 18.

Research has recently shown how abuse and maltreatment can lead to life-long physical and mental health problems, lower educational achievement, and even affect a child's brain development. It has also shown that victims of violence are likely to become future perpetrators, feeding a cycle of violence that consumes lives.

The communities in the Kasese District in collaboration with the SUNRISE-OVC project decided that only a joint community approach combined with the training of local para professionals to act as child rights advocates can prevent and reduce incidents of child abuse.

Para professionals are typically not university educated and are

either paid or volunteers working at the community level as part of the social service workforce.

Preliminary results indicate that this program's combined approach has the potential to not only increase reporting, but actually make a notable impact on the reduction of child abuse in Uganda. Out of six counties where para professionals received training, four noted a reduction between 42%-73%. This is especially the case in communities that are hard to reach and are underserved by child protection workers.

Key program components that have benefited these preliminary results–

- Para professionals were selected and provided training based on their active community role, either through linkages with the health sector, a leadership role or an interest in promoting children's rights;
- Para professionals raised awareness about the criminal nature of child abuse and encouraged children, caregivers and community leaders to report cases of abuse and speak out against perpetrators;
- Victims of child abuse were referred to seek further support and assistance by professionals;
- The community began to recognize its shared responsibility to protect children through the increased attention. Community members were also more likely to report and follow up on suspected abuse.

By investing in training of para professionals and supporting the social service workforce to bring similar programs to communities across the country, policy and decision-makers can help more Ugandan children grow up free from violence.

Contact Coordinating Comprehensive Care for Children (4Children) and the Global Social Service Workforce Alliance to learn more about para professionals' role in reducing child abuse cases in Uganda.

Learn more details about the role of para professionals in Uganda's counties: <http://www.socialserviceworkforce.org/resources/role-para-social-workers-creating-community-led-approaches-preventing-and-responding-child>

"Para professionals are closer to the community than formal structures, in terms of detecting and following up cases. They visit vulnerable households, talk to caregivers and identify any issues and bring these to the notice of relevant authorities. Para professionals also make follow ups to ensure the case is handled."

Community Leader, Bwesumbu Sub-county