

Preventing violence against children in fragile and conflict-affected settings: a 'child security index'

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There is an urgent need to better understand the experiences and vulnerabilities of children in fragile and conflict-affected settings. This article proposes the development of a Child Security Index composed of administrative and perception-based metrics.

Much of the debate on violence against children residing in fragile and conflict-affected settings is based on partial and uneven evidence. Information is often anecdotal rather than data-driven and claims are often made without resort to clear baseline information. However, new and innovative data collection methods are increasingly being tested and applied in fragile settings, including participatory approaches to capture children's voices, perception surveys to track public opinion, and geo-spatial mapping systems to facilitate analysis of trends and relationships.

A more systemic approach to research that captures public perceptions and attitudes towards violence against children – including the views and observations of children themselves – could contribute to a more sophisticated understanding of risks they face while also facilitating evidence-based programming. This abbreviated article explores how a simple but robust instrument – a Child Security Index (CSI) – could be applied in a variety of settings to generate meaningful data that are comparable over time and space.

The difficulty of adopting such an approach should not be underestimated. Indeed, the tools frequently deployed to undertake assessments are blunt. For instance, household survey-based attempts to gather data on children in conflict and fragile settings regularly fail to capture the situation of children not living with their families. Children are often separated from their families either as refugees, displaced, disappeared, or in the ranks of armies and insurgency groups. What is more, these children register specific vulnerabilities that require careful, and ethically grounded, attention.

Another important factor that must be anticipated when mapping child insecurity relates to how public manifestations of violence are associated with private

forms of child maltreatment. For example, domestic violence against women and children frequently increases in stressful situations (WHO, 2002; UNICEF, 2010). Likewise, Singh and Fairholm (2012) contend that violence in the home and at school can also shape and trigger incidents of collective violence on the street. Exploring the linkages between public and private forms of violence is central to a comprehensive treatment of the ways children experience and cope with violence.

Reviewing tools and data

A rash of initiatives has been launched to improve data collection since the publication of the seminal *World Report on Violence against Children* (Pinheiro, 2006). Few of these efforts, however, have yet to be tailored to fragile and chronically violent circumstances. Even so, there are some examples of instruments that could, if carefully adjusted, have application for a wider array of contexts. Several of these have been collated by the inter-agency Child Protection Monitoring and Evaluation Reference Group (CP MERG).

Among those tools gathered together by CP MERG are UNICEF's *Manual for the Measurement of Indicators of Violence against Children* (2006), USAID's *Violence Against Women and Girls: A compendium of monitoring and evaluation indicators* (2008), the inter-agency *Emergency Child Protection Assessment Toolkit* (Ager et al., 2010) and the Geneva Declaration Secretariat's *Armed Violence Metrics* (Gilgen et al., 2010). In order to advance the discussion, CP MERG recently assembled a technical working group specifically focused on developing international guidelines to track violence against children.¹

Meanwhile the use of information and communication technology is an emerging practice that warrants attention. In Benin, for example, Plan International is using mobile phones to map violence against children. Witnesses can send an SMS to an application called FL SMS connected to the website of Ushahidi which in turn maps cases of violence in the area.²

As yet, these tools and practices have not been rigorously tested in fragile and conflict-affected settings, where,



A more systemic approach to research that captures public perceptions and attitudes towards violence against children – including the views and observations of children themselves – could contribute to a more sophisticated understanding of risks they face while also facilitating evidence-based programming. Photo • Courtesy CECIP

for many good reasons, forms of data collection on violence against children have largely been qualitative. An excellent example is UNICEF's 2008 study of children's perceptions in the southern border area of Thailand. Here UNICEF administered a quantitative analysis of qualitative data collected from 2600 boys and girls aged 7–17 through methods such as drawing exercises (of 'good' or 'bad' people and experiences), visual stimulus, neighbourhood maps, sentence completion and essays (on 'my school' or 'visions of peace'). UNICEF partners also conducted an 'attitude' survey (UNICEF, 2008).

There are some important precedents for assessing the experience of victimisation and insecurity in fragile and conflict-affected settings. Specifically,

perception, polling and attitude surveys have long been administered in stable settings to capture people's views and opinions, and are increasingly applied in fragile and conflict-affected environments to inform government and donor interventions. Longitudinal data from repeated surveys are powerful if applied through a process of triangulation with other sources – including administrative statistics and complementary survey datasets – to identify trends, priorities and gaps.

There are also reasons to be cautious about household perception surveys and to recognise their limitations. As is well known to criminologists and behavioural social scientists, the public's fear of collective and interpersonal violence is not always in line with observed reality. For example, media reports of single events can influence attitudes and behaviours of individuals to a large extent. Likewise, there are many examples of residents in societies that are considered notoriously 'violent' registering higher than expected perceptions of safety and security.

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Even so, appraising people's attitudes, including why and how they change, can help policymakers and practitioners render the necessary changes to improve security and safety, including for families and children. An example of this can be traced to Croatia, where the United Nations recently conducted a public perception survey of security which informed government strategies on community policing (UNDP Croatia, 2009). A similar exercise was pursued by the UK Department for International Development (DFID) (2010) in Sierra Leone and showed dramatic improvements in attitudes towards the police over a short period of time during which an intervention had taken place. Although not necessarily demonstrating causality, such data are effective and powerful if used in conjunction with other sources through a process of triangulation.

Developing a CSI

In order to generate quality data for evidence-based advocacy and programming on violence prevention, it is important to develop a mechanism that accounts for the specific needs and vulnerabilities of children. This article proposes a Child Security Index designed to set out metrics to measure the real and perceived safety and security of young children in particular. While still at the preliminary stage of development, and confronting a host of methodological and ethical challenges, the CSI would be a hugely valuable tool to track the diverse ways in which children are victimised and cope during situations of intense duress.

Very generally, the proposed CSI is constituted by a basket of indicators that together allow a determination of the extent of real and perceived insecurity encountered by children in fragile and conflict-affected settings. The CSI also accounts for children's own qualitative views of their own experiences, capabilities, and response mechanisms. Selected indicators offer insights into the physical, psychological, and emotional well-being of children and ensure that they are not cast as passive actors, but rather active agents, even in the most complex of circumstances.

While still in development, the CSI will draw on both routinely collected administrative data and survey-based information that capture the direct and indirect effects of violence and indices of real and relative safety. Administrative data could include the incidence of violent fatal and non-fatal injuries (per 100,000) as a measure of real safety for children. Perception survey-based data could focus on children's views of community unrest and violent punishment, how and when they feel safe and afraid, notions of 'safe areas' in the neighbourhood and the like.

Methodologically, relevant information would be gathered through the administration of a survey questionnaire designed and administered by the Igarapé Institute³ and partners in Latin America and the Caribbean. The format of the CSI survey will be informed by good practice and the accumulated experience of

Table 1 Prospective indicators for a Child Security Index (csi)

	Prospective indicators (to be disaggregated by age, sex, violence type and other variables where possible and appropriate)
Physical harm from violence	Number of homicides in children during a 12-month period per 100,000 population
	Number of emergency room visits due to assaults on children during a 12-month period per 100,000 population
	Percentage of children who experienced any physical punishment in the past month (at home)
	Percentage of children who have been robbed or assaulted in their community within the last 12 months
	Percentage of children who have witnessed violence in their family or community within the last 12 months
Psychological harm from violence	Percentage of children who experienced any psychological aggression in the past month (at home)
	Percentage of children with 'high' life satisfaction (psychological/emotional well-being)
	Percentage of children with symptoms of psychological trauma
	Percentage of children who say they have feelings of 'fear', 'anger' and/or 'revenge' as a result of violence
	Percentage of children with manifestations of 'resilience'
Attitudes towards violence	Percentage of children and adults who believe that in order to bring up a child properly, one needs to physically punish him or her
	Percentage of children and adults who have confidence that punitive action will be taken against those who abuse children
	Children's and adults' views and experiences on 'conflict', 'unrest', 'guns' in their community
	Children's and adults' views and experiences on government and civil society agents and agencies for violence prevention/response
	Percentage of children who feel safe when alone, at home, walking to school, playing outdoors and in the street at night
Family impacts of violence	Percentage of children/families who underwent relocation or displacement in the past 12 months due to violence
	Percentage of children who underwent familial/social role change after family member was killed or hurt due to violence in the past 12 months
	Total direct financial costs (medical and non-medical) due to violence in the past 12 months
	Percentage of children who skipped (or were removed from) school because they felt unsafe due to violence in the past 12 months
	Percentage of children who were unable to access appropriate or timely medical care due to violence in the past 12 months
Public responses to violence	Proportion of children who know what to do or who to turn to in case of victimisation
	Percentage of children and adults who know how to report violent incidents, are willing to do so, and/or have done so in the past 12 months
	Percentage of children who were referred to and used recovery, reintegration or psychological support services in the past 12 months
	Percentage of children who report 'safe places' for them to be within their community
	Children's and adults' views on what supports or protects children

Sources: *BOND*, 2012; Bjarnasson et al., 2010; Dahlberg et al., 2005; Geneva Declaration 2010; Kolbe et al., 2012; Lippmann et al., 2009; Prinz et al., 2009; Save the Children, 2008; *UNESCO*, 2010; *UNICEF*, 2006, 2008; *USAID*, 2008; *WHO*, 2009; World Vision, 2011⁴

the Institute and other specialists in epidemiology and victimisation. Indeed, there is an array of basic principles that inform the administration of surveys in fragile and conflict-affected settings (WHO, 2004; United Nations Statistical Division (UNSD), 2008; Moestue and Muggah, 2009).

A number of pilot sites would be selected to test out the csi. Indeed, these sites would include fragile and conflict-affected settings, including recently pacified areas of Rio de Janeiro and other urban settings such as Port-au-Prince. The survey will include core and supplementary questions directed to a sample of



Mapping exercise of a favela from the perspective of children living there. Photo • Courtesy CECIP

children and/or their caregivers depending on age and in accordance with recommendations from experts. The survey results would also be combined with other administrative data to form the CSI 'score'.

There is a wide-ranging literature on the ethical considerations associated with research on children and violence. Much of it focuses understandably on issues of informed consent, confidentiality, and wider accountability – along with specific child-friendly methodologies in researching issues around violence (Save the Children Alliance, 2004; Akeson, 2011; Carroll-Lind *et al.*, 2011). Given these and other concerns, it is

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possible that the CSI would only draw on interviews with adults and with children older than 12. Indeed, when interviewing it is practically and ethically less challenging to ask about positive experiences and life skills than about violence itself, although the latter may be explored 'indirectly'. For example, children can be asked if they have skipped school due to feeling unsafe; and other adults who have day-to-day contact with children may act as proxy informants, including parents, siblings and teachers.

CSI applications

The overarching intention of the CSI is to develop an accurate measure of levels of violence against children in fragile and conflict-affected settings. The CSI focuses not just on casualties, but on private forms of violence against children, such as within the home, as well as public forms of collective violence, including gang and street-level violence. Eventually, a composite index capturing both real and perceived levels of insecurity among children could serve as a wider proxy of the extent of safety in a given setting.

In addition to drawing attention to the specific rights and needs of children who are by definition high-risk groups, the CSI will also address ways of enhancing policies and programmes. Specifically, a CSI will enable more effective targeting of interventions according to demonstrable need in distinct geographic and demographic settings. A CSI would also serve as a baseline to evaluate programmatic effectiveness over time. And as indicators would be standardised and systematised into an index, the CSI would facilitate careful comparisons between countries and cities.

An advantage of the CSI includes the application of geo-referencing methods to spatially analyse and present findings. On the basis of a shortlist of administrative and perception-based indicators and geo-referenced data gathered from surveys, it would be possible to spatially map and monitor how different categories of children are experiencing security and safety in areas affected by chronic and acute forms of violence. The visualisation of CSI scores by neighbourhood would allow for a more

nuanced determination of vulnerability and priorities for intervention. We envisage that, with time, the geo-visualisation of CSI scores may be complemented by maps that have been generated through mobile phone reporting by children themselves.

Ideally, the CSI indicators would also that satisfy 'SMART' criteria (Specific, Measurable, Attainable, Relevant and Timebound). Furthermore, they will not just focus on negative risks and outcomes of violence but also on 'positive' indicators of well-being (see Lippman *et al.* (2009) for further discussion on indicator development). Data will be collected at the individual and household level and, in the case of street children or non-residents, in areas where they can be accurately sampled. CSI data will ideally be supplemented with data from other sources such as surveillance systems, incident-reporting mechanisms, focus groups, small panel surveys, along with more comprehensive stratified, cross-sectional and/or cluster surveys.

The CSI will be piloted in purposively selected urban settings – specifically, a combination of low-, medium- and upper-income settings in Rio de Janeiro. This will allow for testing of the variance in CSI scores across socioeconomically diverse income groups as well as in areas affected by 'higher' and 'lower' rates of real and perceived violence. A comprehensive list of indicators, such as the one featured in the table below, will be pre-tested in order to arrive at a robust and relatively simple tool.

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Notes

- 1 For more information, visit the CP MERG website at: <http://www.cpmerg.org>
- 2 For more information, visit Plan International's website: <http://plan-international.org/where-we-work/africa/benin/what-we-do/our-successes/mapping-violence-against-children-in-benin/>
- 3 Details of the Igarapé Institute are available at: <http://pt.igarape.org.br/>
- 4 Additional sources are the Multiple Indicator Cluster Surveys (MICS) optional module on discipline (www.childinfo.org), the Health Behaviour in School-aged Children (HBSC) survey (www.hbsc.org), and the Global School-based Student Health Survey (GSHS) (<http://www.who.int/chp/gshs/en/>).