

EXPLAINING THE CHILD SECURITY INDEX (CSI)

WHAT IS THE CSI?

The CSI is a diagnostic tool that spatially maps and graphically visualizes how young children experience and perceive violence in poor neighborhoods. At its core is a basket of carefully selected indicators that track psychological, emotional and physical impacts of insecurity on children. These indicators translate into roughly 30 perception-based statements with which respondents can agree or disagree on a 3-point scale, yielding an individual “CSI score”. The CSI app is a digital survey that is administered using a mobile digital device. It is at its most powerful when combined with other forms of administrative and qualitative data collection.¹

WHAT IS THE CSI ABOUT?

The CSI evaluates the ways in which everyday insecurity affects children’s everyday lives, and how this insecurity varies over time and space. Indicators can be grouped by themes (e.g. neighborhood, home, school, safe places, safe people, mobility, life skills, well-being and resilience) and disaggregated by selected variables (e.g. age, sex, and setting). Additional background indicators (e.g. relationship to young children, living arrangements, socio-economic status) or themes (e.g. exposure to violence, mental health, parenting, role models, financial impacts) may be added when necessary, and in accordance with ethical standards and norms. Geographical coordinates are collected and logged by the app.

WHO IS THE CSI FOR?

The CSI is intended for organizations and individuals interested in understanding and responding to violence against children in poor and underserved areas. It is specifically geared toward generating data on the experiences of children under 12 years old in fragile settings. Respondents include children themselves (8-12 years old) and older proxy informants: adolescents (13-17 years old), adult caregivers and educators. Children under 8 years old are excluded to adhere to ethical norms. However, older age

¹ For example, we recommend the “flower of peace” for young children, a protection tool that allows children to finish on a positive note whilst generating qualitative data to complement the CSI.

groups can be asked questions about the impacts of violence on children under the age of 8.

HOW IS THE CSI ADMINISTERED?

The CSI is administered using a mobile digital device. It is most powerful when combined with other forms of administrative and qualitative data collection. The CSI expected to be used by enumerators with a minimum level of training and administered to respondents in a private, confidential and neutral setting. In the future, we envision the CSI being administered by trained adolescents and teachers, also applying group interview techniques to facilitate rapid assessments.

HOW IS THE CSI BEING APPLIED IN BRAZIL?

The CSI can be rapidly applied to (1) generate spatial and temporal baseline information on children's vulnerabilities; (2) evaluate interventions to see what impacts they have on the lives of children; and (3) produce advocacy materials to address the risks and needs of young people. The CSI assessment includes an informed consent form and takes about 10 to 15 minutes to complete, lending itself to large and longitudinal cross-sectional surveys. The CSI has already been applied in 14 Brazilian cities throughout different regions of the country – in partnership with Instituto Bola Pra Frente (Rio de Janeiro), Shine-a-Light and the Federal University of Pernambuco (Recife), Neca, Nepsid, CEU Parque Anhanguera (São Paulo), EMEFM Antônio Alves Veríssimo (São Paulo) and World Vision (Ceará, Rio Grande do Norte, Paraíba, Pernambuco, Alagoas, Rio de Janeiro, Amazonas, Minas Gerais, and Bahia). A “CSI Toolkit” that includes survey tools and guidance documentation is available online. In the United States, the CSI will likely be tested by CureViolence in cities such as Chicago and New York.

WHERE CAN THE CSI BE USED?

The CSI is designed to be used in poor and violence-prone communities. It was developed in Brazil, but the platform can be adapted and replicated in other settings, including elsewhere in Latin America, North America and Africa. The CSI does not prescribe a standard definition of violence nor draw a distinction between public or private forms of violence. Instead, it relies on subjective perceptions of safety, security and well-being, along with direct and indirect impacts of violence on children's everyday lives. As a composite index, it captures both real and perceived levels of insecurity among children and serves as a wider proxy for the degree of safety in a given setting.

HOW DOES THE CSI WORK?

The CSI consists of age-specific mini-surveys that organize and visualize information, but also provide geo-location data. Trained enumerators will ask specific questions of care-givers, educators, teenagers and children. Adhering to ethical norms, children will not be questioned about their own experiences with violence,² and mainly positive statements will be employed. Enumerators will present information visually as maps and figures in customizable dashboards to allow for an intuitive and interactive experience. Data will be encrypted to ensure that it is safeguarded at all times. The CSI does not produce generalizable data unless appropriate sampling methods are used.

THE FUTURE OF THE CSI

While initially envisioned as fieldworker-led digital survey tool, we plan to develop a smartphone application on “news and views on violence against children” that incorporates the CSI survey. Such an app would enable users to receive notifications and information on community violence and available social services, while simultaneously enabling anonymous reporting by witnesses. We also foresee the CSI as a community-owned and organized tool. Resulting data sets and maps will be generated in “real time”, changing dynamically to reflect incoming information. The CSI will be a cross-platform app, developed for both web and mobile use.

ETHICAL ISSUES

A detailed ethical strategy based on the latest standards and norms will articulate the steps in order to ensure:

- Protection: neither children nor adults will be harmed in any way as a result of the research;
- Informed consent: all respondents must understand what the research is for and give their informed consent to take part in said research;
- Confidentiality: participating researchers (and anyone else who handles research data) must keep the information confidential.

² If direct questions about victimization is required by implementing partners, we recommend a module based on “things I’ve seen and heard” tool.

WHAT DOES THE CSI LOOK LIKE?

The CSI has a “front end” and a “back end”. The front end consists of the survey presented in a console on a mobile device. As shown below, this will include specific statements with which children agree or disagree on a 3-point scale. The back end consists of an online platform to present data in the form of a customizable and interactive “dashboard”, including graphs and geographic maps. As all data is geo-coded, it can be presented accordingly using geo-thermal representation.

WHO DESIGNED THE CSI?

The CSI was developed by the Igarapé Institute, in consultation with over two dozen experts in violence against children (VAC) from around the world. A concept version was completed in 2012 and the Igarapé Institute undertook a series of field-tests in 2013 to test its viability. At the heart of the application is a shortlist of 20 indicators selected from hundreds of possible metrics. These are designed to capture the qualitative experience of insecurity, including perceptions, attitudes and physical impacts. The CSI was designed with stringent ethical standards in mind, so certain kinds of data are necessarily privileged over others.

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