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ACRONYMS

AIDS acquired immunodeficiency syndrome  
CBO community-based organization  
CO country office  
CP child protection  
CPS child protection system  
CRC Convention on the Rights of the Child  
FGM/C female genital mutilation/cutting  
GBV gender-based violence  
HIV human immunodeficiency virus  
ILO International Labour Organization  
IP implementing partner  
NGO nongovernmental organization  
PEPFAR President’s Emergency Fund for AIDS Relief  
STIs sexually transmitted infections  
UN United Nations  
UNICEF United Nations Children’s Fund  
WFCL worst forms of child labor

KEY CONCEPTS AND TERMS

Child: The United Nations Convention of the Rights of the Child defines a child as a human being younger than 18, unless majority under the law applicable to the child is attained earlier.

Child abuse: Child abuse is any deliberate behavior or action that endangers a child’s health, survival, well-being and development. There are three types of child abuse: physical, emotional and sexual. Neglect is also considered a form of child abuse.

Child exploitation: Child exploitation is the use of children for someone else’s economic or sexual advantage, gratification or profit, often resulting in unjust, cruel and harmful treatment of the child.

Child labor: Child labor is unpaid and paid activities that are mentally, physically, emotionally, socially or morally dangerous and harmful to children. It is the kind of work that interferes with the development and education of children.

Child maltreatment: All forms of physical and/or emotional ill-treatment, (sexual) abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

Child marriage: Also referred to as early marriage, this term refers to any marriage of a child younger than 18 years old, in accordance with Article 1 of the Convention on the Rights of the Child.

Child neglect: Neglect is the persistent failure of a parent or adult caregiver to provide appropriate care to a child, despite being able to do so. There are different types of neglect: physical, medical, emotional and educational.
**Child protection:** This is a broad term used to describe efforts that aim to keep children safe from harm. The United Nations Children's Fund (UNICEF) uses the term “child protection” to refer to preventing and responding to violence, exploitation and abuse against children.

**Child protection system:** A child protection system consists of laws and policies, meaningful coordination across government departments and between sectors at different levels, multiple governmental and nongovernmental actors working in synergy, knowledge of and data on child protection issues and good practices, minimum child protection standards and oversight, preventive and responsive services, a skilled child protection workforce, adequate funding, children’s voices and participation and an aware and supportive public.

A CPS incorporates subsystems for the administration of foster care and juvenile justice. A CPS also intersects with global systems in such domains as education, justice and health. The synergies among the components of a CPS and between a CPS and its subsystems and related global systems are essential for child protection.

**Child trafficking:** Child trafficking is the recruitment, transportation, transfer, harboring or receipt of children for the purpose of exploitation.

**Child well-being:** Child well-being can be understood as the quality of a child's life. It is a dynamic state that is enhanced when a person can fulfill his or her personal and social goals. A wide variety of domains and measures are used to assess levels of childhood well-being. The United Nations Children's Fund uses six dimensions: material well-being, health and safety, education, peer and family relationships, behaviors and risks, and children's own subjective sense of well-being.

**Discrimination:** Bias or prejudice resulting in denial of opportunity, or unfair treatment. Discrimination is practiced commonly on the grounds of age, disability, ethnicity, origin, political belief, race, religion, and gender — factors that are irrelevant to a person's competence or suitability.

**Female genital mutilation (FGM):** Female genital mutilation (also referred to as cutting) refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons.

**Foster care system:** A foster care system aims to provide a temporary home to children whose parents or relatives cannot take care of them. However, the ultimate goal is to reunite the child with his or her family.

**Gender norms:** Gender norms refer to the expectations constructed by society or culture for how women or girls and men or boys are supposed to behave, think and feel. Harmful gender norms increase the vulnerability of girls and women to violence, poverty and disease.

**Hazardous labor:** Hazardous labor is any activity or occupation that has or leads to adverse effects on a child's safety, health and moral development.

**Juvenile justice system:** A juvenile justice system is a network of agencies that deal with young people whose conduct has come in conflict with the law. These agencies include police, prosecutor, detention, court and probation. The focus of the juvenile justice system is to rehabilitate rather than to imprison and punish.

**Optional protocol:** An optional protocol is a treaty that complements and adds to an existing human rights treaty. Only states that have already agreed to be bound by a parent treaty may choose to be parties to optional protocols.

**Sexual exploitation:** Practice by which a person, usually an adult, achieves sexual gratification, financial gain or advancement through the abuse or exploitation of a child's sexuality.

**Social stigma:** Social stigma refers to prejudice and negative attitudes toward people whose personal characteristics or beliefs are perceived to be different or against cultural norms. Social stigma often leads to acts of discrimination.

**Violence against children:** Violence against children is defined as all forms of physical or mental injury, abuse, neglect or exploitation.
FHI 360 developed Child Protection Basics to educate its country program staff and the staff of local implementing partners on the fundamental aspects of child protection (CP). The manual is intended for everyone involved in programming for vulnerable children, from senior management staff to community volunteers.

Child Protection Basics is the first part of FHI 360’s Child Protection Toolkit. The toolkit also contains:

- **Guidelines and Programming Options for Protecting Children in Community-based Care and Support Programs.** This manual provides guidelines on specific programming strategies and interventions that can be implemented at the child, family, community and government level to protect children.

- **Guidelines for Becoming a Safe Organization for Children.** This document provides guidance on implementing CP policies and procedures at the institutional level to protect children from intentional or unintentional harm.

The toolkit will strengthen the capacity of FHI 360 country programs and their local partners to effectively integrate and address child protection issues in community-based care and support programs and other interventions on behalf of vulnerable children.

The importance of child protection

Every child has the right to be safe from harm. Nevertheless, every year the lives and physical, mental and emotional well-being of millions of children around the world are threatened by maltreatment such as abuse, neglect, violence and exploitation. Studies from around the world show that approximately 20 percent of women and 5 to 10 percent of men report having been sexually abused as children. Other studies show that between a quarter and a half of all children report severe and frequent physical abuse.1 In addition, it is estimated that 215 million children are involved in child labor, which is a form of child exploitation; 115 million of them are involved in hazardous work.2

These are only some of the staggering figures that show the magnitude of child protection violations around the world. They are under-recognized and under-reported and constitute barriers to the fulfillment of children’s human rights. They also undermine children’s healthy development and survival.3

These violations occur in every country, culture and social and economic group. However, children whose parents or caregivers are absent owing to illness, death or abandonment are more vulnerable to maltreatment, because they have lost their first line of protection.

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Children in this category are those who have or are affected by HIV, which is a primary focus of the community-based care and support programs of FHI 360 and its implementing partners (IPs) around the world.

Protecting children made vulnerable by this epidemic is a priority for the international community. In June 2006, for example, the General Assembly of the United Nations (UN) issued a “Political Declaration on HIV/AIDS.” This document affirmed government commitment to “addressing as a priority the vulnerabilities faced by children affected by and living with HIV; providing support and rehabilitation to these children and their families, women and the elderly, particularly in their role as caregivers; promoting child-oriented HIV and AIDS policies and programs and increased protection for children orphaned and affected by HIV and AIDS;...and building, where needed, and supporting the social security systems that protect them.”

In addition, many international and nongovernmental organizations (NGOs), including FHI 360, have endorsed “The Framework for the Protection, Care and Support of Orphans and Vulnerable Children Living in a World with HIV and AIDS.” This document, published by the United Nations Children’s Fund (UNICEF) in 2004 and often referred to as “the Framework,” outlines key strategies and actions. And in October 2005, UNICEF launched the Unite for Children, Unite against AIDS global campaign. Among the campaign’s central goals are the protection, care and support of children affected by HIV.

Community-based care and support programs for children living with and affected by HIV provide unique opportunities for FHI 360 country programs and local IPS to protect children. These programs connect with the most vulnerable children in poor communities. Moreover, their child-focused, family-centered and community-based approaches facilitate the implementation of CP interventions at three key levels: the child, the family and the community. As implementer of large-scale programs for vulnerable children, FHI 360 often also has the opportunity to work at the national level, supporting governments in strengthening national child protection systems.

Structure of the manual
Child Protection Basics has three main sections:

1. Understanding child protection: This section describes key CP concepts and terms, the reasons why children need to be protected, the roles and responsibilities of key stakeholders in the protection of children and the international legal framework and principles that protect children.

2. Understanding child maltreatment: This section describes the different types of child maltreatment, factors that contribute to make children vulnerable to maltreatment and the impact that maltreatment has on children.

3. Children in special need of protection: This section identifies subgroups of children who may be particularly vulnerable to maltreatment and in need of extra protection within community-based care and support programs.

How to use this manual
This manual was designed primarily as a self-study tool. Program managers can distribute it to their staff for self-study and then hold group sessions for discussion and learning review. The manual can be a useful reference for the design of CP trainings, the design of new programs and the elaboration of project proposals. It can also be used to strengthen CP efforts within ongoing community-based care and support programs.

In the context of care and support programs, vulnerable children are children and adolescents (ages 0 to 17) who are negatively affected by a combination of health and socioeconomic factors created or exacerbated by HIV and AIDS. Examples are extreme poverty, lack of adult care and protection, lack of access to basic services and stigma and discrimination. These vulnerability factors can also increase the risk for HIV infection among children, especially among adolescents.

These children are commonly referred to as orphans and other vulnerable children (OVC). This manual will use the simpler term vulnerable children (VC). FHI 360 considers this term to be inclusive of all children who may be vulnerable in the context of the HIV epidemic and less stigmatizing for those who are orphans.

This manual also uses the term children affected by HIV. This is used to refer to children and adolescents between the ages of 0 and 17 who either are living with HIV or whose parents are sick or have died from AIDS.
Children who are maltreated are at increased risk of lifelong developmental challenges, HIV infection and other physical, emotional and social problems.

Child protection (CP) is a broad term used for efforts to safeguard children from actions or situations that place their healthy development and well-being at risk. FHI 360 follows UNICEF’s definition of CP, which is to “prevent and respond to violence, exploitation and abuse against children.” The dimensions of CP are measures and structures that prevent and respond to physical, sexual, emotional or psychological abuse; commercial sexual exploitation; child trafficking; child labor; abuse in the home, school, and community; and harmful and abusive traditional practices, such as female genital mutilation (FGM; also known as cutting) and child marriage.

Children need to be protected, because they are physically, mentally and emotionally immature and unable to adequately protect themselves. The younger a child is, the more care and protection he or she will need. For instance, during the first five years of life children are particularly vulnerable and their survival and well-being depend primarily on their parents or other adult caregivers. As children grow, their physical, cognitive and socioemotional capabilities evolve and mature, but children are still not fully capable of protecting themselves.

Children who are maltreated are at increased risk of lifelong developmental challenges, HIV infection and other physical, emotional and social problems. Moreover, these outcomes compromise the economic and social development of societies, so protecting children from harm is a vital aspect of development programs. The second section of this manual discusses the consequences of child maltreatment in detail.

Because of its complexity, CP must be multidisciplinary and multisectoral. Effective CP involves working with a wide range of formal and informal bodies: governments, multilateral agencies, donors, communities, caregivers and families. It also depends on close partnership with children and initiatives to strengthen children’s capacity to protect themselves (see the document Guidelines and Programming Options for Protecting Children in Community-based Care and Support Programs for examples). A successful CP system strengthens the capacity of all these actors to protect children for the long term, addressing root causes of maltreatment such as chronic poverty, insecurity, power imbalances (gender inequality, for example) and harmful traditional attitudes and behaviors.
1.1 Creating a protective environment for children

The protective environment framework developed by UNICEF (see Figure 1) is an example of a multidisciplinary, multisectoral and holistic, approach to CP. It is a useful framework for FHI 360 country offices (COs) and IPs to consider when they implement CP interventions in community-based care and support programs.

This framework is the basis of UNICEF’s strategy to protect children from maltreatment. According to UNICEF, a protective environment is one where all actors — from children and health workers to governments and the private sector — live up to their responsibilities to ensure that children are protected from abuse and exploitation. A protective environment has eight key elements. Absent any one of them, children are more vulnerable to abuse, violence, discrimination and violation of their rights. These elements are:

1. **Attitudes, traditions, customs, behavior and practices:** Children are not safe in societies where norms or traditions facilitate abuse. For example, social norms that tolerate adults having sex with minors or violence against children facilitate abuse. Children affected by HIV are more vulnerable to abuse and exploitation in societies that discriminate against them because of their status. Children are more likely to be protected in societies where all forms of maltreatment of children are taboo and where the rights of children are broadly respected by customs and tradition.

2. **Governmental commitment to fulfilling protection rights:** This is an essential element of a protective environment. Governments need to show commitment to creating, enforcing and implementing strong legal frameworks that comply with international legal standards, policies and programs.

3. **Open discussion and engagement with CP issues:** Above all, children need to be free to speak up about CP concerns affecting them or other children. At the national level, media attention and civil society engagement with child protection issues strengthen a protective environment. Nongovernmental organizations (NGOs) need to make protection a priority. The silence must be broken.

4. **Protective legislation and enforcement:** An adequate legislative framework designed to protect children from abuse must be not only adopted but also implemented and enforced.

5. **The capacity of people in routine contact with children to protect them:** Health workers, teachers, police, social workers and many others who interact with children need to be equipped with the motivation, skills and authority to identify and respond to child protection abuses.

6. **Children’s life skills, knowledge and participation:** Children are less vulnerable to abuse when they are aware of their right not to be exploited or of services available to protect them. With this information, children can draw upon their knowledge, skills and resilience to reduce their risk of exploitation.

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**Figure 1.** Protective environment framework

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A CP system incorporates subsystems for the administration of foster care and juvenile justice. A CP system also intersects with global systems in such parallel domains as education, justice and health, because these systems have a common interest in securing children's fundamental rights. The synergies among the components of a CP system and the synergies between a CP system and its subsystems and related global systems are essential for child protection.

1.2 A systems approach to child protection

Over the past two decades, CP in development and in emergency situations (war and famine, for example) has improved significantly. The dynamics of several protection problems, such as child trafficking and the impact of HIV on children, are clearer now. However, the fragmented approach to protection issues has caused problems, because many children contend with multiple issues simultaneously. By addressing one issue and ignoring others, most CP interventions have failed as comprehensive solutions. Moreover, donors and NGOs generally have not coordinated their efforts well and governments have not understood CP as a sector in its own right.\(^9\) Dissatisfied with such fragmentation, several agencies that specialize in development and CP, including UNICEF and Save the Children, decided to implement an integrated and holistic strategy: the child protection system (CP system) approach.

This innovation will change the way agencies in the CP sector work. Because ideas about the approach are evolving, what follows is a brief outline of some of the basic elements of a CP system.

The CP system approach looks at the circumstances that challenge children's well-being as a web of threats rather than taking them one by one. It addresses all of the issues that children in multiple circumstances might face and the structural and root causes of gaps in prevention and response. The CP system approach brings together all of the components of a global framework for the protection of children. These components support one another to form an interrelated whole: a system.

**Essential components of a child protection system**

- laws and policies
- meaningful coordination across government departments and between sectors at different levels
- knowledge of and data on CP issues and good practices
- minimum standards and oversight
- preventive and responsive services
- a skilled CP workforce
- adequate funding
- children's voices and participation
- an aware and supportive public \(^{10}\)

Child protection systems can be local, provincial, municipal and national. A national CP system should provide the overall framework and coordination for lower-ranking CP systems. In an ideal CP system the different jurisdictions are well coordinated and mutually reinforcing. Active community involvement in the protection of children is an important part of any national CP system.

An effective CP system needs to carry out a range of functions in order to deliver

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functions related to decision making on behalf of individual children (such as needs assessment, gatekeeping, investigation, placement and removal from and reintegration in families)

functions that support the overall performance of the system (such as capacity building and professional development, monitoring and evaluation, the allocation of human and financial resources, legal reform and policy development, coordination among child protection agencies and service providers, social mobilization)

The way that these functions are carried out in any setting will depend on the context and the priority assigned to CP concerns.

1.3 Roles and responsibilities in the protection of children
All parts of society — families, communities and governments — have important roles to play in ensuring children’s safety and well-being. Children have roles, too, appropriate to their ages, maturity levels and capacities. One of the best ways to protect children is to empower them to protect themselves through knowledge and skills for self-care. Children can also contribute to make CP systems stronger when they have meaningful opportunities to participate.

Families are the first safety net for children. Families’ primary social, moral and legal responsibility in society is to care for children and meet their basic needs.

Some families are overwhelmed by social and economic problems and can’t fully protect their children. Communities are the second safety net for children. Informal networks of kin, friends and neighbors usually step in to help children in need. Communities also provide more formal responses through groups such as churches and grassroots organizations. These groups can assess the needs of children and families, mobilize resources to support them and monitor and report child protection violations. The ability of communities to protect children is enhanced when stakeholders join forces; community child protection committees are an example.

"... Parents or, as the case may be, legal guardians, have the primary responsibility for the upbringing and development of the child. The best interests of the child will be their basic concern.”
Article 18, United Nations Convention on the Rights of the Child

Figure 2. Example of the intersecting needs of children served by a child protection system

Community oversight is especially important in countries where national child protection systems are weak or nonexistent. In these countries, communities play a vital role in supporting children and families in need of protection. However, although community stakeholders usually have the will and commitment to help, sometimes they lack the resources and expertise necessary to meet the needs of all those at risk adequately.

The state has the main responsibility for securing children’s right to protection. Governments should establish national CP systems and make sure they work well. When the components of a CP system (listed on page 5) are properly coordinated, they combine to strengthen the protective environment around each child. The governments of poor and underdeveloped countries are often unable to fulfill all of these responsibilities, hampered by such obstacles as inadequate budgets and lack of qualified staff.

1.4 Child protection legal framework and principles

1.4.1. UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD

Children are protected by an array of international guidelines and protocols (see Appendix 1). The most comprehensive human rights treaty and legal instrument for the promotion and protection of children’s rights is the Convention on the Rights of the Child (CRC), a human rights treaty that the United Nations (UN) adopted in 1989. The CRC was developed because it was generally felt that the Universal Declaration of Human Rights — adopted in 1948 and applying equally to all human beings, children and adults alike — did not define the rights of children with enough precision.

The CRC addresses civil, political, economic and cultural rights in one comprehensive framework. It applies to all children at all times in all situations. Only two countries — Somalia and the United States — have not ratified it. The CRC provides the moral and legal basis for governments and civil society to protect every human being younger than 18. It states: “the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before and after birth.” Most of the countries that have ratified the CRC have established national systems to fulfill children’s right to protection.

The CRC comprises 54 articles and is guided by four basic principles: 1) the best interests of the child, 2) nondiscrimination, 3) the right to survival, well-being and development, and 4) respect for the views of the child.

The CRC clusters the rights of the child according to the following themes: civil rights and freedoms; family environment and alternative care; basic health and welfare; education, leisure and cultural activities; and special protection measures. Appendix 1 describes these rights by thematic area.

According to the CRC, every child has the right to protection from the threats listed below:

<table>
<thead>
<tr>
<th>THREATS</th>
<th>CRC ARTICLE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>illicit transfers and illegal adoption</td>
<td>11, 21</td>
</tr>
<tr>
<td>violence, abuse, neglect and exploitation</td>
<td>19</td>
</tr>
<tr>
<td>armed conflict</td>
<td>22, 38, 39</td>
</tr>
<tr>
<td>child labor, trafficking, and sexual and other forms of exploitation</td>
<td>32, 38, 39</td>
</tr>
<tr>
<td>torture and deprivation of liberty and capital punishment</td>
<td>37-39</td>
</tr>
<tr>
<td>In addition, the CRC ensures special protection, care and assistance for children who are:</td>
<td></td>
</tr>
<tr>
<td>deprived of a family environment</td>
<td>20, 22</td>
</tr>
<tr>
<td>disabled</td>
<td>23</td>
</tr>
<tr>
<td>in conflict with the law</td>
<td>37, 39-40</td>
</tr>
</tbody>
</table>

“State Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.”


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13. A ‘rough guide’ to child protection systems.
Guiding Principles of the United Nations Convention on the Rights of the Child:

1. Non-discrimination (Article 2): The Convention applies to all children, whatever their race, religion or abilities; whatever they think or say, whatever type of family they come from. It doesn’t matter where children live, what language they speak, what their parents do, whether they are boys or girls, what their culture is, whether they have a disability or whether they are rich or poor. No child should be treated unfairly on any basis.

2. Best interests of the child (Article 3): The best interests of children must be the primary concern in making decisions that may affect them. All adults should do what is best for children. When adults make decisions, they should think about how their decisions will affect children. This particularly applies to budget, policy and law makers.

3. Right to life, survival and development (Article 6): Children have the right to live. Governments should ensure that children survive and develop healthily.

4. Respect for the views of the child (Article 12): When adults are making decisions that affect children, children have the right to say what they think should happen and have their opinions taken into account. This does not mean that children can now tell their parents what to do. The Convention encourages adults to listen to the opinions of children and involve them in decision-making — not give children authority over adults. Article 12 does not interfere with parents’ right and responsibility to express their views on matters affecting their children. Moreover, the Convention recognizes that the level of a child’s participation in decisions must be appropriate to the child’s level of maturity. Children’s ability to form and express their opinions develops with age and most adults will naturally give the views of teenagers greater weight than those of a preschooler, whether in family, legal or administrative decisions.

1.4.2. OPTIONAL PROTOCOLS TO THE CONVENTION ON THE RIGHTS OF THE CHILD

Human rights treaties are often followed by “optional protocols” — additional legal mechanisms that complement and add to the treaty. A protocol may be on any topic relevant to the original treaty and is used to further address something in the original treaty, address a new or emerging concern or add a procedure for the operation and enforcement of the treaty. To help stem the growing abuse and exploitation of children worldwide, the UN’s General Assembly adopted two optional protocols to the CRC in 2000 to increase the protection of children from involvement in armed conflicts and from sexual exploitation. These protocols add detail to the CRC and an expanded set of obligations, as follows:

- The optional protocol on the involvement of children in armed conflict establishes 18 as the minimum age for compulsory recruitment and requires states to do everything they can to prevent children from taking a direct part in hostilities.

- The optional protocol on the sale of children, child prostitution and child pornography draws special attention to the criminalization of these serious violations of children’s rights and emphasizes the importance of fostering increased public awareness and international cooperation in efforts to combat them.

A protocol is “optional,” because it is not automatically binding on states that ratified the original treaty. Accordingly, the optional protocols to the CRC have their own ratification mechanisms independent of the CRC. Generally, only states that have already agreed to be bound by an original treaty may ratify its optional protocols. The CRC’s optional protocols are an exception. Thus, the United States, which has not ratified the CRC, did ratify these two optional protocols.

The optional protocols must always be interpreted in light of the CRC as a whole, in this case guided by the principles of nondiscrimination; the best interests of the child; the right to survival, well-being and development; and child participation.
Child maltreatment has been defined as “all forms of physical and/or emotional ill-treatment, (sexual) abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.” Because the term encompasses abuse, neglect, violence and exploitation, this manual uses it throughout.

Maltreatment of children is internationally recognized as a serious public health, human rights, legal and social issue. Child maltreatment is a complex. It occurs in many different settings and in every culture, country and context, so exact numbers of child victims cannot be given. Enormous amounts of time, effort and money are spent on prevention and support services for victims. The nature, severity and consequences of maltreatment can vary widely. The consequences depend on the duration, frequency and intensity of the maltreatment; the victim’s age; the perpetrator’s age; the perpetrator’s relationship to the victim; and the rehabilitation/remedial services the victim receives. In extreme cases, maltreatment results in death.

Perpetrators can be anyone: parents, family members or caregivers; friends or acquaintances; strangers; people in positions of authority such as teachers, soldiers or police officers; employers; health care workers; and other children.

2.1 Types of child maltreatment

Following are descriptions of the most important types of child maltreatment.

2.1.1 CHILD ABUSE

Child abuse is the most common harmful action carried out against children around the world every day. Organizations serving children must understand and address it.

Child abuse is any deliberate behavior or action that endangers a child’s health, survival, well-being and development. There are three types: physical, emotional and psychological and sexual abuse. Neglect can also be considered a form of child abuse but is described separately here.

- Physical abuse involves any action that brings intentional physical harm or injury to a child, such as slapping, pinching, kicking, biting, punching, pushing, throwing, burning or hitting with the hand or an object (such as a cane, belt, whip, or shoe). Often, there are external injuries (wounds or bruises), but abuse is not
always visible or detectable. Much physical abuse against children is inflicted at home or in school as a form of discipline.

- **Emotional or psychological abuse** often accompanies physical abuse. Children who experience it are “hit” with words that demean, shame, threaten, blame, intimidate or frighten them.

- **Sexual abuse** involves forcing or enticing a child to take part in sexual activities. Activities may involve physical contact, such as genital fondling and sexual intercourse, and noncontact activities, such as indecent exposure, making children look at pornographic materials or encouraging children to behave in sexually inappropriate ways. Girls are disproportionately affected by sexual abuse.

### 2.1.2 CHILD NEGLECT

Neglect is the persistent failure of a parent or adult caregiver to provide appropriate care to a child, *despite being able to do so*. Neglect is usually an ongoing pattern of inadequate care that can be observed by people in close contact with the child. Indicators of child neglect are poor hygiene, poor weight gain and growth, inadequate medical care and frequent absences from school or day care.18

There are different types of neglect:

- **Physical neglect** is the consistent failure to provide a child with basic necessities such as food, shelter, or clothing. Child abandonment, inadequate supervision, and failure to ensure the safety of a child are also forms of neglect. Physical neglect can severely impact a child’s development, by causing failure to thrive, malnutrition, and serious illnesses.

- **Medical neglect** is the consistent failure to provide necessary health services to a child, thus placing the child’s health and life at risk. Examples of medical neglect are when a parent refuses to seek medical care for a child who has an acute illness, or when a parent ignores medical recommendations for a child with a treatable chronic disease or disability, resulting in frequent hospitalizations or a significant deterioration of the child’s condition.

- **Emotional neglect** is the consistent failure to provide affection, stimulation, nurturance and encouragement to a child. Severe emotional neglect of an infant’s need for stimulation and nurturance can result in the infant failing to thrive and even in the infant’s death. Emotional neglect can also lead to the child’s poor self-image and self-esteem, and to alcohol or drug abuse and other destructive behaviors later in life.

- **Educational neglect** is the failure to enroll in school a child of mandatory school age or provide appropriate home schooling. Educational neglect can lead to the child failing to acquire basic life skills and can pose a serious threat to the child’s psychological, emotional, and social development and well-being, particularly when the child has special educational needs that are not met. In many cultures, girls are more likely than boys to experience educational neglect.

### 2.1.3 CHILD EXPLOITATION

Child exploitation is the use of children for someone else’s economic or sexual advantage, gratification or profit, often resulting in unjust, cruel and harmful treatment of the child.19 Following is a brief description of some of the most significant forms of child exploitation around the world:

- **Child labor**: The International Labour Organization (ILO), an agency of the U.N., uses two different terms to make a distinction between acceptable and unacceptable activity for children: work and labor. According to the ILO, work is acceptable for children to a certain extent. It is defined as light activities, unpaid and paid, such as helping parents at home for short periods or activities

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for pocket money that do not interfere with the education and development of children. These activities are perceived as a part of growing up for girls and boys, and as contributing to their self-esteem, self-confidence and well-being. Labor, on the other hand, is perceived as unpaid and paid activities that are mentally, physically, emotionally, socially or morally dangerous and harmful to children. Labor is the kind of work that interferes with the development and education of children.21

The ILO places great importance on the age of a child to distinguish between labor and work. According to the ILO, children engaged in types of work for which they have not yet reached the specified minimum age are child laborers. These boundaries are set forth in ILO conventions number 138 and 182.22 Many of the types of labor children are involved in, particularly girls, are invisible, because children usually work in the informal sector of the economy or in households23 (domestic labor).

- **Hazardous labor**: is any activity or occupation that has or leads to adverse effects on a child’s safety, health and moral development. Hazardous labor conditions include night work; long hours of work; exposure to physical, psychological or sexual abuse; work underground, underwater, at dangerous altitudes or in confined spaces; work with dangerous machinery, equipment and tools; and work in unhealthy environments that may expose children to hazardous substances and temperatures damaging to their health.

Children who do hazardous work account for more than 90 percent of those engaged in the “worst forms of child labor,” as defined by the ILO (see sidebar).

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23. A household consists of all people who occupy a housing unit regardless of relationship. A household may consist of a person living alone or multiple unrelated individuals or families living together. From: FHI Program Guidelines: Vulnerable Children and Youth, August 2010.
• **Sexual exploitation of children** can be described as a practice by which a person, usually an adult, achieves sexual gratification, financial gain or advancement through the abuse or exploitation of a child’s sexuality. Examples of such practices are trafficking, prostitution, prostitution tourism, pornography, and stripping. It is considered to be one of the worst forms of child labor.

Sexual exploitation of children — a form of sexual abuse — includes exploitation for commercial sex. Millions of children (and a disproportionate number of girls) worldwide are exploited for commercial sex. Children are enslaved by a chain of actors who all profit in some way. The chain can be long, linking a child to an abuser sometimes thousands of miles away through intermediaries that include recruiters, transporters, brothel owners and pimps. Organized criminal networks and gangs thrive on the trade in children. The phenomenon is complex and enormous. Because it is largely hidden, accurate data do not exist. Exploitation for commercial sex is a form of coercion and violence against children that amounts to forced labor and a contemporary form of slavery.

2.1.4 **CHILD TRAFFICKING**

According to the U.N. Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (2000),25 child trafficking is the recruitment, transportation, transfer, harboring or receipt of children for the purpose of exploitation. It is a violation of their rights and well-being and denies them the opportunity to reach their full potential.

Although recent research has yielded some information on the nature of child trafficking, its magnitude is uncertain. In 2005 the ILO estimated that 980,000 to 1,225,000 children (boys and girls) are in a forced labor situation as a result of trafficking; this figure is the most reliable reference.

Child trafficking occurs within countries, across national borders, and across continents. It is closely interlinked with the demand for cheap, docile labor in sectors and among employers where working conditions and treatment grossly violate children’s human rights. Children are trafficked to work in environments that are unacceptable (the unconditional worst forms) as well as dangerous to health and development (hazardous worst forms). These forms range from bonded labor, camel jockeying, child domestic labor, commercial sexual exploitation and prostitution, drug couriering, and child soldiering to exploitative or slavery-like practices in the informal industrial sector.26

2.1.5 **VIOLENCE AGAINST CHILDREN**

Violence against children is defined as all forms of physical or mental injury, abuse, neglect or exploitation.27 Violence can be committed by individuals, by the state and by groups and organizations. Its results are injury, fear of injury and fundamental interference with personal freedom. The table in the next page describes and provides examples of different types of violence against children.

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25. This protocol supplements the United Nations Convention against Transnational Organized Crime, also called the Palermo protocol.


<table>
<thead>
<tr>
<th>TYPE OF VIOLENCE</th>
<th>DESCRIPTION</th>
<th>EXAMPLES</th>
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</thead>
<tbody>
<tr>
<td>Interpersonal violence</td>
<td>Violence between individuals can take place within a family or a community.</td>
<td></td>
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<tr>
<td>Collective violence</td>
<td>Violence committed by groups of people</td>
<td>• Violence resulting from internal and international armed conflicts, terrorism and organized crime.</td>
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<tr>
<td></td>
<td>• It can be social, political and economic violence.</td>
<td>• Violence that targets specific groups of people such as child infanticide, honor killings, and gang violence.</td>
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<td></td>
<td>• State violence is one of the primary forms of collective violence.</td>
<td>Examples of state violence against children:</td>
</tr>
<tr>
<td></td>
<td>• State violence is committed, condoned or allowed by the state and its representatives. It includes violence by the armed forces, law enforcement officers and security forces of all kinds but also violence committed by any other state agent.</td>
<td>• use of the death penalty</td>
</tr>
<tr>
<td></td>
<td>• Acts of violence are both an expression of and a way to reinforce male domination not simply over individual women and girls but also over females as a class of people.</td>
<td>• torture</td>
</tr>
<tr>
<td></td>
<td>• It is rooted in power imbalances and structural inequality between men and women.</td>
<td>• forced displacement</td>
</tr>
<tr>
<td>Gender-based violence (GBV)²⁸</td>
<td>• These are harmful acts perpetrated against a person based on socially ascribed differences between males and females.</td>
<td>GBV includes but is not limited to:</td>
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<td></td>
<td>• It is used to preserve and maintain females' subordinate status vis a vis males.</td>
<td>• sex-selective abortion</td>
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<td></td>
<td>• Acts of violence are both an expression of and a way to reinforce male domination not simply over individual women and girls but also over females as a class of people.</td>
<td>• differential access to food and services</td>
</tr>
<tr>
<td></td>
<td>• It is rooted in power imbalances and structural inequality between men and women.</td>
<td>• sexual exploitation and abuse; child marriage</td>
</tr>
<tr>
<td>Sexual violence</td>
<td>• In 2002, an estimated 150 million girls and 73 million boys under 18 years of age experienced forced sexual intercourse or other forms of sexual violence involving physical contact.²⁹</td>
<td>• female genital mutilation/cutting</td>
</tr>
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<td></td>
<td>• The true magnitude of sexual violence is hidden because of its sensitive and illegal nature.</td>
<td>• sexual harassment</td>
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<td></td>
<td>• It is a gross violation of children's rights.</td>
<td>• dowry or bride price abuse</td>
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<td></td>
<td>• It is a global reality across all countries and social groups.</td>
<td>• honor killing</td>
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<tr>
<td></td>
<td>• It takes the form of sexual abuse, harassment, rape or sexual exploitation in prostitution or pornography.</td>
<td>• domestic or intimate partner violence</td>
</tr>
<tr>
<td></td>
<td>• It can happen in homes, institutions, schools, workplaces, in travel and tourism facilities, and within communities both in development and emergency contexts.</td>
<td>• deprivation of inheritance or property</td>
</tr>
<tr>
<td></td>
<td>• Increasingly, the Internet and mobile phones also put children at risk of sexual violence, because some adults use them as tools to pursue sexual relationships with children.</td>
<td>• elder abuse</td>
</tr>
<tr>
<td></td>
<td>• Among women and children sexual violence is often a method of warfare to brutalize and instill fear in a civilian population.</td>
<td></td>
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<tr>
<td></td>
<td>• Most children and families do not report cases because of stigma, fear and distrust of authorities. Social tolerance and lack of awareness also contribute to under-reporting.</td>
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</tbody>
</table>

²⁸ Many documents are excellent sources of information on gender-based violence. Two documents worth consulting are “Guidelines for Gender-Based Violence Interventions in Humanitarian Settings: Focusing on Prevention and Response to Sexual Violence in Emergencies” (Inter-Agency Standing Committee, September 2005) and “Broken Bodies, Broken Dreams: Violence against Women Exposed” (United Nations Office for the Coordination of Humanitarian Affairs and Integrated Regional Information Networks, 2005).

2.1.6 CHILD RECRUITMENT BY ARMED FORCES OR GROUPS

Around the world, thousands of boys and girls are recruited into government armed forces and rebel groups to serve as combatants, cooks, porters and messengers, or in other roles. Girls are also recruited for sexual purposes or forced marriage. Many are recruited by force, though some join as a result of economic, social or security pressures. Situations of displacement and poverty make children even more vulnerable to recruitment. Children associated with armed forces or armed groups are exposed to tremendous violence — often forced both to witness and commit violence, while they themselves suffer abuse, exploitation, injury and even death. Their condition deprives them of their rights, often with severe physical and emotional consequences.

Noteworthy is the optional protocol to the CRC on the involvement of children in armed conflict, which is part of the legal and normative framework that underpins prohibitions against the recruitment and use of children by armed forces and armed groups.

2.1.7 FEMALE GENITAL MUTILATION/ CUTTING (FGM/C)

Female genital mutilation/cutting (FGM/C) refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons.

UNICEF estimates that more than 70 million girls and women between the ages of 15 and 49 have undergone FGM/C in 28 African countries, plus Yemen, and 3 million girls are at risk of FGM/C each year on the African continent alone. The procedure can be performed as early as one year of age. It may cause severe pain and can result in prolonged bleeding, infection, infertility and even death.

This fundamental violation of the rights of girls is deeply entrenched in social norms. It is a manifestation of gender inequality. The practice is violent in nature, even though the families who perpetrate it may not intend to do violence. Communities practice FGM/C in the belief that it will ensure a girl’s proper marriage, chastity, beauty or family honor. Some also associate it with religious beliefs, although no religious scriptures require it. The practice is such a powerful social norm that families have their daughters cut even when they are aware of the harm it can cause. If a family were to stop practicing it on their own they would put the marriage prospects of their daughter as well as the family’s status at risk.

2.2 Factors that contribute to child maltreatment

In households and communities affected by HIV (the focus of this manual), poverty, lack of parental or adult care, social stigma and discrimination, harmful gender norms, disability, lack of birth registration and child (also called early) marriage increase the likelihood that children will be maltreated. This section considers each of these contributing factors in detail.

2.2.1 POVERTY

Although maltreatment is not limited to families living in poverty, economic stress makes children more vulnerable to maltreatment. It can lead to neglect and to temporary or permanent abandonment. Poverty also pushes children to work and can take them into the most hazardous forms of child labor.

Households where HIV is present tend to be poor, because the earning capacity of breadwinners is compromised, health care costs are high and education is disrupted.

Children in poor households are more likely to be raised by a single parent and to have inadequate parental supervision. As a result, they are also more likely to engage in risky behavior or to be exploited as prostitutes, increasing their own risk of contracting HIV.

Heads of household or caregivers who are poor are prone to emotional distress and anxiety, which can lead to child neglect and to physical and emotional violence against children. Furthermore, the combination of poverty and other vulnerability factors, such as harmful gender norms, can place children — especially girls — at risk of curtailed education, gender-based violence, sexual exploitation and early marriage.

2.2.2 LACK OF PARENTAL OR ADULT CARE

Parents are children’s main source of care and protection. In their absence children are more vulnerable to neglect, abuse and exploitation.

Moving in with extended family members or an unrelated family does not necessarily solve the problem, especially when placement in these alternative family-based care settings is inadequately supervised. Children who live in alternative family-based care risk being pulled out of school and put to work; moreover, decisions in these households tend to favor biological children.

The vulnerability of children who lack parental care increases in the absence of an extended family that can provide alternative adult care. Girls often take on a significant burden of unpaid care and household labor, with negative consequences for their education, development and health. Children who lack parental or adult care may also end up on the streets, where they can be physically and sexually abused and exploited, or in a child-headed household, where they may turn to dangerous survival strategies.

2.2.3 SOCIAL STIGMA AND DISCRIMINATION

Social stigma refers to prejudice and negative attitudes towards people whose personal characteristics or beliefs are perceived to be different or contrary to cultural norms. Stigma often leads to acts of discrimination: physical and emotional maltreatment, neglect and denial of basic services. Children affected by HIV frequently suffer such discrimination.

Stigma and discrimination isolate children socially, making it hard for organizations to reach them with services and support and increasing their vulnerability to abuse and exploitation.

2.2.4 HARMFUL GENDER NORMS

Gender is the composite of norms and roles attached to being a man or a woman, a girl or a boy, in a particular social and cultural context. Each culture has its own sets of norms and roles and these can enhance inequalities between the sexes. Harmful gender norms increase the vulnerability of girls and women to violence, poverty and disease. For instance, norms that encourage men/boys to be aggressive and dominant and women/girls to be submissive can place girls at risk for physical, emotional and sexual violence. Many girls experience gender-based discrimination in households and communities, and are therefore less likely to receive basic health care, education and social services, increasing their vulnerability to abuse and exploitation.

2.2.5 LACK OF BIRTH REGISTRATION

Birth registration is the official recording of a child’s birth by the government and establishes the child’s existence under law. It provides the foundation for safeguarding a child’s civil, political, economic, social and cultural rights. In addition to being the first legal acknowledgment of a child’s existence, birth registration is central to ensuring that children are counted and have access to basic services such as health, social security and education, all of which provide a protective network for children. A child’s age is a central protection from child labor, being arrested and treated as an adult in the justice system, compulsory recruitment in armed forces, child marriage, trafficking and sexual exploitation. A birth certificate as proof of birth can also help authorities trace unaccompanied and separated children and promote their safe migration. In effect, birth registration is children’s passport to protection.

2.2.6 CHILD (ALSO CALLED EARLY) MARRIAGE

Article 1 of the CRC defines child (or early) marriage as any marriage of a child younger than 18.

Girls are disproportionately affected. Where child marriage is prevalent, it functions as a social norm. Marrying girls younger than 18 is rooted in gender discrimination. About a third of women between the ages of 20 and 24 in the developing world were married as children. Evidence shows that child brides are at increased risk of violence, abuse and exploitation. Child marriage often results in separation from family and friends and lack of freedom to participate in community activities, which are all major sources of stress on girls’ mental and physical well-being.

Girls who marry early often abandon formal education and become pregnant. Child pregnancies and deliveries place girls at greater risk of death. They also often lead to physical conditions such as fistula, which in many countries results in discrimination and violence against these girls and abandonment by their husbands, families and communities. This, in turn, makes girls more likely to adopt dangerous survival strategies.

Child marriage is not only a vulnerability factor but also a form of maltreatment: Families marry off girls at an early age to avoid the expense of supporting them or to obtain bride wealth.

2.3 Understanding child maltreatment through the ecological model

Child maltreatment is not the result of a single risk factor. A complex interaction of factors is always in play at different levels of society that increases the risk for children to become victims of maltreatment. The ecological model (see the diagram on this page) shows this interaction.

The individual level refers to the personal characteristics and history of a person that can make him or her susceptible of either perpetrating or suffering abuse.

A parent or caregiver with the following characteristics is more likely to maltreat a child:

• was maltreated as a child
• shows lack of self-control when upset or angry
• misuses alcohol or drugs, so that the ability to care for the child is affected
• is depressed or exhibits feelings of low self-esteem or inadequacy
• has poor parenting skills as a result of youth or lack of education
• experiences financial difficulties

33. Child protection from violence, exploitation and abuse.
34. Child protection from violence, exploitation and abuse.
35. Butchart A, Harvey A; 2006.
Some characteristics increase a child’s risk of being maltreated. (This does not mean that the child is responsible for the maltreatment.) They are:

- was unwanted or failed to fulfill parents’ expectations or wishes
- has many needs (for example, is mentally or physically disabled or has a chronic illness)
- cries persistently and cannot be soothed or comforted easily
- has personality or behavioral traits that the parent perceives as problematic, such as hyperactivity or impulsivity

The **relationship** level encompasses close social relationships (among family or friends, for example) that can influence a person’s risk of perpetrating or suffering abuse. Examples of risk factors at the relationship level are:

- being isolated in the community
- lack of a support network that can assist with stressful or difficult situations
- living in a household affected by domestic violence

The **community level** relates to the settings in which social interactions take place, such as neighborhoods or schools, and characteristics of those settings that can contribute to child abuse. Examples of community-level risk factors are:

- high levels of unemployment and concentrated poverty
- easy availability of alcohol
- a pattern of homelessness or inadequate housing
- tolerance of violence
- lack of child protection policies and programs within institutions

**Societal** factors refer to conditions in society that contribute to abuse, such as social
norms that encourage harsh punishment of children, the absence of welfare safety nets for children, and economic inequalities.

2.4 Impact of maltreatment on children

The health and social consequences of child maltreatment extend from harm to children's physical and neurological, cognitive and emotional development to death.36

Maltreated children are more likely to:
- have low self-esteem
- exhibit extremely passive or aggressive behaviors
- have difficulties with interpersonal relationships
- perform poorly in school
- have frequent nightmares
- experience depression that can lead to suicide attempts

Emotional abuse:
- destroys children's self-confidence and self-esteem
- results in a sense of worthlessness and inadequacy
- leaves deep psychological marks that can last a lifetime

Sexual abuse, exploitation and violence can cause:
- severe physical damage
- torment and feelings of shame and guilt (children feel they are responsible for the abuse or that somehow they brought it upon themselves)
- self-loathing and, as children grow older, sexual problems such as promiscuity or an inability to have intimate relationships
- studies suggest that exposure to maltreatment and other forms of violence during childhood is associated with risk factors and risk-taking behaviors later in life. These include violent victimization and the perpetration of violence, depression, smoking, obesity, high-risk sexual behaviors resulting in sexually transmitted infections (STIs) such as HIV, early pregnancy, and alcohol and drug use.

In addition, children who have experienced maltreatment may also be more vulnerable to HIV, because forced or coerced sex may lead to HIV transmission. Moreover, violence and threats of violence may inhibit a person's ability to negotiate safe sex behaviors throughout their lives.

In addition to these health and social costs, child maltreatment has a huge economic impact on families, communities and entire countries. Families are hit with the costs of medical care and psychosocial or psychological and legal services; curtailed education may result in lost earnings. For communities and countries as a whole maltreatment means a loss in productivity and tax revenue due to illness and premature death, and an increase in government expenditures for medical care, special education, psychological and welfare services, protective services, foster care, prevention and prosecution of adult crimes and incarceration of juvenile and adult offenders.

While all children are highly vulnerable and need to be protected, some subgroups of vulnerable children need extra attention because of their conditions or circumstances.

3.1 Children living outside of family-based care
Children living without the care and supervision of a responsible adult may have lost or been abandoned by both parents or may have run away from home. Children in this category who do not find their way to residential care (orphanages) live on the street or in child-headed households. As explained in the third manual in this toolkit (causes and consequences of child maltreatment), children without parental care are more vulnerable to maltreatment, even if they are placed in alternative family-based care.

- Children in child-headed households usually are living with an older sibling. Although these children live in a family environment, their poverty is generally extreme, blocking access to food and basic services. This makes them especially vulnerable to maltreatment. They can easily fall prey to economic and sexual exploitation, for example, or use hazardous survival strategies increase their risk of exposure to HIV. Moreover, a child or adolescent who is the head of a household usually experiences stress associated with shouldering an adult role at a young age. Many children affected by HIV have lost both parents and live in child-headed households to avoid being separated from their siblings or to avoid losing their inherited property.

- One pathway leading children to the street is HIV and its related factors. For this reason, and because these children are highly vulnerable to acquiring HIV themselves, donors such as the United States President’s Emergency Fund for AIDS Relief (PEPFAR) increasingly are mandating community-based programs to support and protect street children. However, addressing the needs of street children is not so straightforward, because these children are not a homogenous group. The categorization of “street children” that has been in use for many years refers to children who work on the street and go home to their families at night and also to children of the street: those who are functionally without family support but who maintain family ties and those who live completely on their own. This distinction is no longer considered to be valid and useful, because it does not accurately reflect children’s experiences.

Nowadays many terms and definitions are in use and still evolving, such as “children working and/or living on the street” and “children in street situations.” Another term, “children with street connections,”
reflects the myriad relationships children have with street life alongside other connections to family, schools and communities. Because of shifts in terminology, the exact number of street children is unknown.

Research has shown that most children with ties to the street may be outside of family-based care, because parents or caretakers are largely absent, but are usually not orphans or completely abandoned, as was once assumed. However, these children are very vulnerable and in need of community-based programming, because they do come from unstable, violent and fragile families often affected by HIV. Most of these children have experienced poverty, discrimination, social exclusion, violence, abuse and exploitation. They are at increased risk for delinquent behaviors, drug use and countless health problems, including HIV. At the same time they lack access to basic social services. These children, together with their families or caretakers, need support and protection.37

3.2 Children living with elderly caregivers

These are children who are orphans or whose parents are unable to care for them. The elderly caregiver can be a family member or someone close to the child’s family but most frequently is a grandmother. Caregivers of advanced age whose health is poor are usually not able to generate enough income to meet the basic needs of the children in their charge. Thus, many of these children, especially adolescents, may have to make money to help maintain the household, thus running the risk of engaging in hazardous work and being abused and exploited. Moreover, very elderly caregivers usually don’t have the energy and parenting skills required to deal with the challenges of raising and disciplining children. Adolescents, who have little guidance and supervision from their caregivers, may engage in risky behaviors or activities.39

3.3 Children living with HIV

Children living with HIV may be subject to stigma and discrimination. Their marginalization, often combined with poverty, makes them vulnerable to abuse, violence and exploitation. These violations can take place in community settings, such as schools, but also in a child’s home, especially if the child lives with extended family members. Children living with HIV are often denied access to key services, such as medical services, which can place their health, development and survival at risk.

37. From: Protection and promotion of rights of children working and/or living in the streets. Office of the High Commissioner of Human Rights, Aviva. For more information, data and guidelines on the issue of street children, please consult this report and http://www.streetchildren.org.uk/


at risk. They may also have parents who are too sick as a result of HIV to provide proper care, or they may be orphans. As children living with HIV enter adolescence, they face many other psychosocial challenges; for example, disclosing their HIV status to romantic partners and employers may trigger further discrimination and rejection.

3.4 Children with disabilities
Because of exclusion and discrimination, children with movement, speech, visual, hearing and learning/intellectual and mental impairments are more vulnerable to neglect and abuse. In many cultures these children are considered a curse and are stigmatized and discriminated against in their homes and communities. Near-starvation, extreme deprivation, unhygienic living conditions and abandonment are common. Children with disabilities are also more likely to be abused, because they are seen as easy targets. Studies show that 70 percent of all children with disabilities and up to 80 percent of girls with disabilities have experienced sexual abuse.40

3.5 Children in conflict with the law41
Community-based care and support programs must sometimes deal with children who are in conflict with the law. This is most common among children affected by HIV who take to begging, prostitution, stealing or other criminal activities in order to meet their daily needs and those of their families.

Although detention should be a last resort and short, children suspected or accused of having committed an offence are often detained for long periods. Children are also detained for other reasons: they may be accompanying a parent to detention or seeking asylum in another country; they may be detained as punishment for vagrancy, begging or missing school; or they may be detained in reprisal for their race, religion, nationality, ethnicity or political views. UNICEF estimates that more than one million children worldwide are deprived of their liberty.

Many justice systems, lacking resources or political will, do not have child and gender-sensitive procedures and services for children’s rehabilitation or reintegration into society. Child protection mechanisms within the justice system are designed to benefit all children in conflict with the law to ensure they are well served and protected and that the justice system operates in their best interest. However, in most instances these mechanisms either do not exist or do not function well, treating children as a homogeneous group and rarely taking gender considerations into account.

Instead of detention, alternatives such as diversion42 and restorative justice (which focuses on repairing harm) should be promoted. When children are in detention, their rights are often violated. They are extremely vulnerable to maltreatment: they may be detained with adult prisoners and exposed to torture and other forms of physical, sexual and emotional abuse. Children in detention, particularly with adult prisoners, are at high risk of contracting STIs including HIV.

3.6 Separated children in times of emergency
The commotion of survival and flight in an emergency such as a natural disaster of rapid onset or an armed conflict often separates children from their families and caregivers.43 In major humanitarian crises, as in Haiti following the earthquake in January 2010, thousands of children have been lost or separated from their families. The longer the

“States Parties recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child’s active participation in the community.”


42. Diversion means the conditional channeling of children in conflict with the law away from judicial proceedings through the development and implementation of procedures, structures and programs that enable many - possibly most - to be dealt with by non-judicial bodies, thereby avoiding the negative effects of formal judicial proceedings and a criminal record. From “Toolkit on Diversion and Alternatives to Detention.” New York: UNICEF. Available from: http://www.unicef.org/tdad/index_56037.html
SEPARATED CHILDREN are those separated from both parents or from their previous legal or customary primary caregiver but not necessarily from other relatives. These children may be accompanied by other adult family members.

UNACCOMPANIED CHILDREN (also called unaccompanied minors) are children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for their care.


During emergencies, children want to be with their family and families want to be together. Experience has shown that most separated children have parents or other family members willing and able to care for them. Accordingly, unaccompanied and separated children should be provided with services aimed at reuniting them with their parents or customary caregivers as quickly as possible, in coordination with government authorities and other humanitarian agencies. If interim care is required, it should be provided in a way that keeps parents and siblings united and is consistent with the aims of family reunification and of ensuring children’s protection and well-being.

In disaster-prone countries, disaster preparedness plans should include measures to prevent the separation of family members. Examples of such measures are supporting vulnerable families to access basic relief supplies and services; limiting and restricting the use of residential care options unless absolutely necessary; ensuring that medical evacuations of children are undertaken in a way to support the reunification of children with their families once a child has been treated; and raising community awareness of the risks of family separation.
Appendix 1
THEMATIC CLUSTERS OF THE RIGHTS OF THE CHILD

Civil rights and freedoms (Articles 7, 8, 13–17, and 37[a]) is the category of rights which deals with “first generation rights,” including the right to a name and nationality; the preservation of identity; freedom of expression; freedom of thought, conscience and religion; freedom of association and peaceful assembly; protection of privacy; access to appropriate information; and the right to not be subjected to torture or other cruel, inhuman or degrading treatment or punishment.

Family environment and alternative care (Articles 5, 18[1–2], 9–11, 19–21, 255, 27[4], and 39) are those articles which deal with parental guidance and responsibilities, as well as processes and procedures for maintaining family unity and reunifying families. This cluster also deals with illicit transfer and non-return, as well as unaccompanied minors and adoption. Importantly, the right to psychosocial recovery and reintegration is also included here.

Basic health and welfare (Articles 6, 18[3], 23, 24, 26, 27[1–3]) clusters protections of a child’s rights to the enjoyment of the highest attainable standard of health, standard of living, and facilities for treatment and rehabilitation.

Education, leisure and cultural activities (Articles 28, 29, 31) have been grouped to give attention to education, including vocational training and guidance, and to require measures to be undertaken at the national level to ensure that the aims of education are child-friendly and that leisure, recreation and cultural activities are provided for.

Special protection measures (Articles 22, 38, 39, 40, 37 [b]–[d], 32–36) bring together rights of refugee children; children in emergencies; children involved with the system of administration of juvenile justice; children in situations of exploitation, including physical and psychological recovery and social reintegration; and children belonging to a minority or an indigenous group.

Appendix 2:
INTERNATIONAL GUIDELINES AND PROTOCOLS RELEVANT TO CHILD PROTECTION\(^{45}\)

<table>
<thead>
<tr>
<th>Year</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1979</td>
<td>Convention on the Elimination of All Forms of Discrimination against Women (United Nations)</td>
</tr>
<tr>
<td>1989</td>
<td>Convention on the Rights of the Child (United Nations)</td>
</tr>
<tr>
<td>1999</td>
<td>Convention on the Worst Forms of Child Labor (United Nations)</td>
</tr>
<tr>
<td>2000</td>
<td>Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children (United Nations)</td>
</tr>
<tr>
<td>2007</td>
<td>Convention on the Rights of Persons with Disabilities (United Nations)</td>
</tr>
<tr>
<td>2008</td>
<td>Resolution 1820 on sexual violence against civilians in conflict (United Nations)</td>
</tr>
<tr>
<td>2009</td>
<td>Guidelines for the Alternative Care of Children (United Nations)</td>
</tr>
</tbody>
</table>

## Appendix 3
### SIGNS OF CHILD ABUSE AND NEGLECT⁴⁶

<table>
<thead>
<tr>
<th>TYPE</th>
<th>SIGNS</th>
</tr>
</thead>
</table>
| Physical abuse | • Frequent injuries or unexplained bruises, welts, or cuts  
                   • Is always watchful and “on alert,” as if waiting for something bad to happen  
                   • Injuries appear to have a pattern such as marks from a hand or belt  
                   • Shies away from touch, flinches at sudden movements, or seems afraid to go home  
                   • Seems frightened of the parent or caretaker  
                   • Wears inappropriate clothing to cover up injuries, such as long-sleeved shirts on hot days |
| Emotional abuse | • Excessively withdrawn, fearful, or anxious about doing something wrong  
                    • Shows extremes in behavior (extremely compliant or extremely demanding; extremely passive or extremely aggressive)  
                    • Is defensive, shy or overly dependent  
                    • Uses abusive and demeaning language  
                    • Doesn’t seem to be attached to the parent or caregiver  
                    • Acts either inappropriately adult (taking care of other children) or inappropriately infantile (rocking, thumb sucking, throwing tantrums)  
                    • Is delayed in physical or emotional development  
                    • Has attempted suicide |
| Sexual abuse | • Trouble walking or sitting  
                    • Wets the bed or has nightmares  
                    • Displays knowledge of or interest in sexual acts inappropriate to his or her age, or even seductive behavior  
                    • Makes strong efforts to avoid a specific person, without an obvious reason  
                    • Doesn’t want to change clothes in front of others or participate in physical activities  
                    • An STD or pregnancy, especially under the age of 14  
                    • Runs away from home |
| Neglect       | • Clothes are ill fitting, filthy, or inappropriate for the weather  
                    • begs or steals food or money  
                    • Hygiene is consistently bad (unbathed, matted and unwashed hair, noticeable body odor)  
                    • Untreated illnesses and physical injuries  
                    • Lacks needed medical or dental care and immunizations  
                    • Is frequently unsupervised or left alone or allowed to play in unsafe situations and environments  
                    • Is frequently late or absent from school |

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