Rationale for a Liberian Child Protection Curriculum

A Literature Review

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I. Brief Contextual Overview of Liberia

In 2010, Liberia was ranked 162 out of 169 on the Human Development Index (HDI) (Ruiz-Casares, 2011). After 14 years of civil war from 1989 through 2003, rebuilding and reconciliation has proven to be a long and slow process (CPCN, 2012). Liberia was founded in 1847 by freed slaves from the United States of America and the Caribbean (BBC UK, 2013). Despite the mix of Americo-Liberians (slaves' descendants) and indigenous Liberians, the state was relatively peaceful until 1980, when Samuel Doe overthrew the Americo-Liberian government. After nearly a decade of dictatorship and economic disorder, The National Patriotic Front of Liberia (NPFL), under Charles Taylor assassinated Doe and took power. The rebel factions, Liberian army and West African peacekeepers continued fighting through the 1995 peace agreement and Taylor's election to president. Finally, in 2003, Taylor stepped down and relatively democratic elections took place in 2005 (BBC UK, 2013). Though the war was over, the repercussions were just beginning.

During the war, 270,000 people were killed and 86% of rural households, 78% in Monrovia, were displaced from their homes (Shaberg & Williamson, 2008). This is compounded by the striking economic downturn between 1979 and 1996, with a 91% decrease in GDP (Ruiz-Casares, 2011). The economic crisis has not reverted itself, with 84% of the population living on less than \$1.25 USD per day. Children do not face any better conditions, and they make up nearly one half of the population (42.7% below age 15) (Ruiz-Casares, 2011). Even early childhood indicators are poor. The under-five mortality rate is 103 per 1,000 live births and 15% of under-five children are underweight for their age (UNICEF, 2012). Though there is free and compulsory primary school, the net attendance rates are abysmal. In urban areas, there is a 46% net attendance ratio, and in rural areas it is just 21% (CPCN, 2012). Based on these low outcomes for the country as a whole, and in particular for children, it comes as no surprise that child protection issues are a major problem facing the country.

II. Child Protection Issues

One of the most apparent byproducts from the war is the profusion of issues facing children today. Children who were former child soldiers or displaced during the war have been unable to receive the services they need to return to normalcy. As a result, child are facing abuse, sexual violence and exploitation, forced labor, kidnapping and a lack of basic necessities among other issues (CPCN, 2012; GOL, 2011; Lanning, 2011; Ruiz-Casares, 2011). Though each of these issues is considered a major violation of children's rights and an abuse against children, they often exist in conjunction with other issues. Additionally, there is a cyclical pattern between these issues that make them particularly difficult to address.

Many of the children's issues in Liberia stem from the rampant poverty that the country has seen since the end of the war. If a child's parents are present, they may be unable to provide the basic necessities that are granted to all children by the UN Charter on the Rights of the Child, Article 27 which grants adequate standard of living (UNGA, 1989). A direct link can be seen between a deficiency of resources and the major children's issues witnessed in Liberia. However, at least two studies note that a lack of parental guidance or separation from parents are also major causal factors related to these issues (Lanning, 2011; Ruiz-Casares, 2011). The lack of quality parental guidance, or separation from a biological parent could also be seen as a result of poverty. According to a study conducted by the USAID Displaced Children and Orphans Fund (DCOF) and Save the Children, "children are not living with their parents mostly due to financial constraints (poverty, unemployment), single parenthood, lack of education and basic skills that could enable some parents to get income" (pg. 6, Ruiz-Casares, 2011).

Child protection issues in Liberia are diverse based on context. Abuses seen in the capital city, Monrovia, may be very different from those seen in more rural villages in the rest of the country. However, based on a comprehensive review of existing literature, the major issues facing children in Liberia have been categorized in the following manner: orphans; street children; sexual and gender-

based violence; teenage pregnancy; child labor; harmful traditional practices; human trafficking and kidnapping; child abuse and torture.

Orphans

In the aftermath of the war, 800,000 people were displaced from their homes, many of whom were children. Besides the separated children from the war, many parents no longer have the means to support their children in the economic downturn over the past three decades. According to the USAID DCOF/Save the Children study, among the 4,300 children living in orphanages in 2010, 88% or more had at least one living parent (Ruiz-Casares, 2011). Until 1989, there were only 10 registered orphanages (Ruiz-Casares, 2011). More recently, less than half of the more than 100 orphanages were registered with the Ministry of Health and Social Welfare (MOHSW), which holds the mandate to register and inspect orphanages (Ruiz-Casares, 2011). The remaining orphanages, and even those registered with the MOHSW, were far below livable standards. In 2007, the United Nations Mission in Liberia (UNMIL) conducted a review of human rights violations by orphanages. These rights violations ranged from being denied the right to proper development and health to the rights to identity, family, education, leisure and participation in cultural activities (Shaberg & Williamson, 2008). In a society which values the support and protection of the family above many other rights, it seems incompatible that children whose parents are mostly alive are put into such living conditions.

Street Children

By the end of 2004, 11,780 children had gone through the post-war disarmament process and at least an additional 4,000 children were estimated to not be disarmed at the time (Shaberg & Williamson, 2008). Though UNICEF estimated that 99 percent of these disarmed children were reunited with their families, it is likely that this is an overestimation, and many of these children ended up permanently

separated from their families (Shaberg & Williamson, 2008). Though some may have ended up in the orphanages described above, many more are predicted to have ended up on the streets. Due to the nature of street children, the prevalence and severity of the issue is unclear, and little research has been done on the issue. Oftentimes the line is blurred between a child who works out of the home to help support his or her family, and a child who is permanently living on the street (Shaberg & Williamson, 2008). Oftentimes, children end up on the street as a result of another issue described above or below. For example, children who are sent to live with a distant relative in the city often ends up selling on the streets and eventually even living on the streets (Shaberg & Williamson, 2008). The population of street children is particularly important because of the additional risks associated with living on the street. They are at higher risk for kidnapping, SGBV including rape, and various other child protection issues.

Sexual and Gender-Based Violence

In Liberia, 67% of counties report high prevalence of sexual and gender-based violence (SGBV), largely due to cultural practices, post-war responses, and weakened family and community networks (Shaberg & Williamson, 2008). All studies reviewed for this report included some form of SGBV as a major issue, including rape, transactional sex, sexual exploitation, sexual abuse and prostitution. In some communities, rape was defined only as when an older man forces himself upon a young girl, suggesting that rates of rape are severely underreported (Lanning, 2011). A different study looked at the outcomes of rape for the survivor, and found that these included pregnancy, AIDS, shame, forced to drop out of school, forced to leave her community (CPCN, 2012). The uniformity among responses when asked about rape implies that there has been comprehensive education regarding the crime. However, despite the obvious education regard the risks and the legal implications, rape cases are rarely reported. Instead, it is often settled within the community because it is viewed as a family matter. As a result, it is

not reported to the appropriate authorities (Lanning, 2011). Rape and sexual violence may also be underreported as a result of the stigma associated (*Shaberq & Williamson, 2008*).

Girls are at a particular risk for being targets of SGBV. In particular, teachers are known to request sex in exchange for school fees, good grades and more (CPCN, 2012). Additionally, when girls are on the streets, they often resort to prostitution as a means of income (Shaberg & Williamson, 2008). Even when they are seeking income elsewhere, they are more vulnerable to rape and other acts of SGBV when working in the market or otherwise working (CPCN, 2012).

Teenage Pregnancy

Teenage pregnancy affects a disproportionate number of girls in Liberia. During a 2012 study, teenage pregnancy was mentioned most frequently and ranked as the overall greatest child protection issue among participants (CPCN, 2012). Young girls are getting pregnant due to a large number of reasons, including those outlined in the SGBV section. Girls who are raped or involved in transactional sex are at risk for pregnancy. However, the outcomes for girls who become pregnant can be dire. One report clearly laid out the effects of teenage pregnancy according to community members from Nimba and Montserrado counties. The major effects included: "early marriage, school dropout, forced out of home, depression, abortion to death, health problems, and problems delivering" (pg. 49, CPCN, 2012). In particular, girls who become pregnant may be forced to marry the baby's father, who may even be the man who raped her (CPCN, 2012). A girl may choose to "spoil the belly" (have an abortion) when the baby's father refuses to or cannot afford to take care of the child. As a result, there can be numerous health risks. Oftentimes, it is an herbalist, not a trained doctor, who performs the abortion, because it is less public. The herbalist may give a rough estimate of a dosage, which may be too strong for the girl and lead to death or other serious health issues (Lanning, 2011). Even if there are no major health issues, the girl may face a negative stigma in her community, particular if the father denies that the child

is his. Additionally, a pregnant girl may be kicked out of her family and left to find her own way on the streets (Lanning, 2011).

Child Labor

One fifth of children in Liberia are involved in some form of child labor (Lanning, 2011). Many of the same risk factors lead to children being involved in the workforce, including living with a non-biological parent and family poverty (Lanning, 2011). Most child laborers work to help to support their household. Child labor can be in the home or outside, and affects both boys and girls. Both boys and girls in Montserrado County claim that their gender is doing the majority of the child labor, for girls at home and for boys in the community (CPCN, 2012). Involvement in child labor also puts children at risk to other child protection issues. These include "kidnapping, walking alone, rape, accidents, lack of time to study, school dropout" (pg. 50, CPCN, 2012). In particular, one report discussed how children in the workforce are at risk for injury and even death because of the physical demands of the work they are doing (CPCN, 2012).

Harmful Traditional Practices

Traditional and cultural practices can be both child protection mechanisms and issues. In the case of Liberia, there are two recurrent issues related to child protection and tradition: female circumcision and early child marriage (Ruiz-Casares, 2011; Lanning 2011). Female circumcision reported takes place at the traditional bush schools (Lanning, 2011). These schools are run by the Sande society to teach traditional life skills. These schools unto themselves can be considered a child protection issue, because it often forces children to drop out of school (Lanning, 2011). These risks are exacerbated by the final ceremony, where the girls are circumcised. Aside from the physical pain, the circumcision may not be the girls' choice, instead an act of force by the traditional bush school.

Additionally, early marriage violates the rights of the child, and is a major issue in Liberia (CPCN, 2012; GOL, 2011; Lanning, 2011; Ruiz-Casares, 2011). As discussed earlier, child marriage may come as a result of poverty or teenage pregnancy. However, the outcomes vary. A girl may be unable to return to school if she has a family and a husband to take care of. Additionally, her husband may repeatedly rape her, but she is unable to report it. Overall, though traditional practices can be used to protect children, in some cases they put children in the way of harm.

Human Trafficking and Kidnapping

Kidnapping of children was cited in multiple studies as a major child protection issue in Liberia CPCN, 2012; Lanning, 2011; Ruiz-Casares, 2011). It was included in the lists of major issues as described by informants in both Zuo and Gbarpolu counties during a study conducted by the Child Protection in Crisis Network (Lanning, 2011). It was also among the issues listed in the USAID DCOF/Save the Children study conducted in 2011 (Ruiz-Casares). These kidnappings, also referred to as heartmen or harm-men, occur for many reasons, including for enrollment in the traditional bush schools of the Poro and Sande societies or for ritual sacrifices (CPCN, 2012). This issue was described as one of the only issues that came from outside the community. Children were most often kidnapped by unknown "men" who will kill them and sell body parts to people in power to retain their status (CPCN, 2012). However, it may also be a representative from the Sande society kidnapping the girls to force their enrollment in their schools. It is in the leaders of the Sande society's best interest to have the highest number of girls enrolled (CPCN, 2012). In addition to the risk of death associated with kidnapping, children face a variety of other risks, including mental illness, as a result (CPCN, 2012).

Child Abuse and Torture

Child abuse is sometimes overlooked as an issue in Liberia. One report stated that community members viewed child abuse as a problem "of the past" because there had been interventions and awareness campaigns (pg. 16, Lanning, 2011). Others do not view corporal punishment as abuse of the child. Among children aged 2-14, 70-80% have been victims of "psychological and minor physical punishment" and 11-18% "severe physical punishment" (LISGIS, 2008, as cited on pg. 3, Lanning, 2011). Partially due to the historical connection with discipline, child abuse is often placed into the category of family business. As a result, it is not amply addressed by the community.

III. Formal and Informal Child Protection Systems

Since the war, Liberia has been working to develop an infrastructure to formally support child protection. However, the implementation of the policies put in place has not yet fully come to fruition. As a result of this transition, as well as a long history of child protection, informal systems exist to fill in the gaps in the formal system.

Liberia has enacted various laws that work to protect children throughout its history. Beginning in 1972, the Executive Law gave the Ministry of Health and Social Welfare the mandate to develop all social welfare systems (Ruiz-Casares, 2011). Though this law was enacted before the war began, its mandate still stands. Other antiquated laws still stand to protect children. For example, the Domestic Relations Law of 1956 and 1973 governs marriage, divorce and child custody, including domestic adoption. The Adoption Act, which was in a proposal state at the time of review, was to amend the Domestic Relations Law's provisions for adoption, improving standards and regulations (Ruiz-Casares, 2011). Additionally, the Public Health Law of 1975 regulates conditions for children's institutions, including schools, holding more than 50 children (Ruiz-Casares, 2011). In 2005, the law referred to as the "Rape Law" was modified to increase the age of consent to 18 years. The definition of rape was also expanded to include any penetration, and the penalty increased to life imprisonment for inflicting

serious injuries as a result of rape (Ruiz-Casares, 2011). Though these improvements are being made to some laws, a full overhaul of all laws relating to child protection was necessary.

This transformation came in 2011 with the enactment of the Children's Law. This law covers all aspects of child protection, from rights to responsible parties for protection, to formal systems to be set up and establishment of a National Children's Forum to encourage children's participation (GOL, 2011). Though the law was stagnated for "Western influence in relation to cultural practice (e.g., FGM/C, corporal punishment, and child labour," it eventually passed (Ruiz-Casares, 2011). Responsibilities for each of the following Ministries in regards to children are outlined in the Children's Law of 2011: Youth and Sports, Internal Affairs, Information, Culture and Tourism, Justice, and National Defense, with particular emphasis on Health and Social Welfare, Education, Gender and Development. The law also directly addresses protection from the various issues outlined above, including child labor, early marriage (under 18), "any unnecessary or uncultured practice that may inflict physical, psychosocial, or emotional pain to the child" (pg. 21), cruel and inhumane punishment, child trafficking, and more (GOL, 2011). It also outlines a code of conduct for child protection professionals. Child Welfare Committees (CWCs) are mandated by the law to advance the rights of children and refer protection issues (GOL, 2011).

Community Welfare Committees (CWCs) were consistently cited as one of the major potential mechanisms for child protection in Liberia (CPCN, 2012; GOL, 2011; IMF, 2010; Lanning, 2011; Ruiz-Casares, 2011; Shaberg & Williamson, 2008). In 2010, the Ministry of Gender and Development (MOGD) updated the guidelines for CWCs as a result of challenges they were facing, namely decreased funding and a lack of standardization (MOGD, 2010). The functions of the CWCs were more clearly delineated to increase their effectiveness in identifying vulnerable children, monitoring their need for services and referring them to the necessary social services available in the community and beyond (MOGD, 2010).

Over the past decade, additional infrastructure has been put into place by the government to address children's issues. The MOGD convenes a Child Protection Network which brings all relevant professionals from the NGO, UN and government agencies together (CPCN, 2012). Between 2008 and 2009, the Ministry of Youth and Sports (MOYS) developed a Working Group on Adolescent Girls in Liberia to address security and other issues (IMF, 2010). In 2005, the Liberian National Police added a Women and Children Protection Section (WACPS) to their forces (Ruiz-Casares, 2011). According to a 2011 study, urban and metropolitan caregivers will go to WACPS first in the event of a child protection issue (Ruiz-Casares, 2011).

In contrast, in rural areas, the community leader or chief is the first person to be contacted in the case of child abuse (Ruiz-Casares, 2011). The chief is viewed as the connection to both the community-based child protection mechanisms and the National Child Protection System. However, there are conflicting reports regarding the need to inform the chief before going to the police (Lanning, 2011). In cases of rape, the first level of reporting is at the community level. Then, the cases are sometimes brought to a formal body, such as the police, by the community, but only when settling does not work (CPCN, 2012).

Primarily, a community will choose to settle internally. This may present differently on a case-by-case basis, but oftentimes the perpetrator will pay for survivor's medical bills and maybe an additional fee. Then, he will be able to go free, with no record of his crime (CPCN, 2012). This occurs regardless of the potential legal charges. In particular, cases of rape by a family member are often handled within the community and never formally reported (CPCN, 2012). A similar mechanism exists in the case of teenage pregnancy. If a boy and his family accept the pregnancy, they will provide financial assistance to the girl, particularly if her parents are not able. However, if the boy denies that the child is his, the girl may turn to the police or other formal mechanisms. It is often in these cases, when the girl chooses not to go to the police, that risky abortions occur (CPCN, 2012).

Additional community-based child protection systems exist as well. In many communities, Children's Clubs exist as a place where child protection issues are brought (CPCN, 2012). Informal youth collectives are organized by the youth themselves to protect one another in the case of family hardship, both financial and otherwise (Lanning, 2011). Key informants and focus groups in another study listed the following as informal community systems: community monitoring, shared parenting, compulsory school and religious services, parental involvement, and youth involvement in organizing community children (Ruiz-Casares, 2011). Though community-based child protection systems are common in Liberian communities, they are not enough without a strong formal system to back them up.

IV. Gaps in Child Protection Systems

There is a core challenge that needs to be overcome before child protection can be mainstreamed into Liberian infrastructure. Some community leaders believe that teaching children their rights leads them to misbehave (CPCN, 2012). This deep misunderstanding of rights makes it difficult to entirely protect children. Additionally, formal systems do not always take into account the informal systems, nor are they always communicated effectively. As a result, laws and formal protection mechanisms may end up having a negative effect on the community-based protection systems, leading to decreased protection (Lanning, 2011). Even when the formal mechanisms may be appropriate for one community, Liberia has a multitude of differing contexts, including rural, urban, refugee and border (Lanning, 2011). These varying contexts require different protection mechanisms.

Communities also say that they have difficulty accessing the services that do exist. First, transportation is a major obstacle, particularly in rural areas. Second, many of the services are not free, for example health and legal services. Finally, some believe that the services are not reliable, so they will not waste the money even trying to access them (CPCN, 2012). If one were to venture out to clinics and hospitals, they often do not have the correct supplies (Lanning, 2011). Even for the Child Welfare

Committees, which were often cited as a structure that could succeed, only seven percent of the caregivers interviewed for a 2011 study had even heard of CWCs. Those who had heard of CWCs considered them ineffective. For CWCs and other child protection officers, including police, they will respond if reported, but there is severe under reporting because of distrust and lack of cell service (Lanning, 2011). Not only do the services need to be improved, but the relationship between service providers and recipients must be addressed as well.

V. Recommendations

Throughout multiple studies, community members and key informants from the child protection community provided a variety of recommendations to improve the systems in Liberia. First and foremost, there is a need for an awareness campaign to inform misunderstandings of children's rights and issues. Parents should feel empowered by children's rights, rather than viewing it as infringing on their power and responsibilities (Ruiz-Casares, 2011). Based on the culture, it is imperative to strengthen the community-based child protection mechanisms, like CWCs. The community must have ownership of these responses, or the existing challenges will remain (Ruiz-Casares, 2011).

More specifically, community members interviewed in the CPCN study provided recommendations for each of the major issues. Prevention and response to teen pregnancy should include: access to family planning and education about family planning; community awareness and education about poverty reduction and sex education; and children should always be a part of the decision making process. Community awareness was also discussed as a prevention mechanism regarding child labor. Additionally, there should be a program that encourages parents and caregivers to reduce the workload given to children, suggesting education as the best alternative. For kidnapping, community members suggested designating community members to watch over the children, and to limit the movement of children to prevent their capture. Rape response was the only given by

community members that incorporated external actors. They suggested improving "outside protection," working with boys and men to "redefine masculinity," enforcing rape laws, and reporting all cases of rape (CPCN, 2012).

Furthermore, community members were aware of the necessity to strengthen the national legal and policy framework for child protection (Ruiz-Casares, 2011). Engaging the relevant ministries, including MOHSW, MOJ, MOE is key, because they are more present in rural communities (CPCN, 2012). These personnel are necessary in connecting local communities to national resources. Additionally, they can educate children on the risks of teenage pregnancy and other necessary areas (Ruiz-Casares, 2011). Caregivers and community members need to be trained at all levels to ensure effective response (Ruiz-Casares, 2011). In order for community members to be trained, professionals need comprehensive education on child protection issues and how to handle them in order to share this expertise with the community. However, two reports noted that the Department of Social Welfare is grossly understaffed in Monrovia and around the country and that NGO protection officers are often absent (Ruiz-Casares, 2011; Lanning, 2011). This shows a need for additional training and staffing in child protection systems.

VI. Child Protection Curriculum Rationale

Based on previous studies on child protection in Liberia, there are many gaps that still need to be filled. Many of the gaps exist in the formal structures and their connection to the informal community-based systems. Even the structures that do exist are either difficult to access, or are not trusted by the community. As such, it is necessary that child protection professionals have access to training that is specific to Liberia and its' needs.

Based on the perspectives of both communities and child protection professionals previously interviewed, there is a critical lack of child protection officials. Additionally, many of the professionals that do exist have never been formally trained, and those with training have been insufficient. As a

result, there is a lack of knowledge, best practices, and new social technologies, which affect the prevention, early diagnosis, and early management of socioeconomic factors that contribute to vulnerability of children. Also dire is the fact that the sector lacks adequate capacity planning for the long-term development and management of its workforce. The area of human resource development in the field of child protection requires a systematic and solid foundation for programmatic change and meaningful participation of CP practitioners in Liberia. Therefore, formal training on child protection is necessary in the post-war context in Liberia. Based on this void, the Program Learning Group recommends a professional child protection curriculum. Based on the experience of current child protection professionals, it is recommended to be piloted as a professional certificate, with the hope to expand to a Bachelor's Degree and even a Master's Degree based on ongoing evaluation.

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