## CONTENTS

**BRIEFING NOTES FOR FACILITATORS**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td><strong>Topic 1</strong>: Defining Children and Childhood</td>
<td>7</td>
</tr>
<tr>
<td><strong>Topic 2</strong>: Introducing Child Development Thinking into Programme Planning</td>
<td>11</td>
</tr>
<tr>
<td><strong>Topic 3</strong>: Risk and Resilience in Children and Adolescents</td>
<td>16</td>
</tr>
<tr>
<td><strong>Topic 4</strong>: Some Critical Threats to Child Development in Emergency Situations</td>
<td>21</td>
</tr>
<tr>
<td><strong>Topic 5</strong>: Promoting Child and Adolescent Development in Programming</td>
<td>30</td>
</tr>
<tr>
<td><strong>Topic 6</strong>: Action in “the Best Interests of the Child”</td>
<td>36</td>
</tr>
<tr>
<td><strong>Topic 7</strong>: Child and Adolescent Participation</td>
<td>42</td>
</tr>
<tr>
<td>Sample Programmes</td>
<td>48</td>
</tr>
</tbody>
</table>

**TRAINING MATERIALS**

<table>
<thead>
<tr>
<th>Material</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overheads</td>
<td>57</td>
</tr>
<tr>
<td>Exercises</td>
<td>82</td>
</tr>
<tr>
<td>Handouts</td>
<td>130</td>
</tr>
</tbody>
</table>

**RESOURCES**

<table>
<thead>
<tr>
<th>Material</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Further Readings and Websites</td>
<td>136</td>
</tr>
</tbody>
</table>
Acknowledgements

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Editor: David Nosworthy.
Facilitators who have not recently trained or worked in the area covered by this Resource Pack, should read carefully through the various Topics, Overheads, Exercises, and Handouts before starting to plan their training activity. Please note that these materials aim to stimulate learning and discussion, and should be used in conjunction with stated policy (they do not replace it).

**INTRODUCTION**

Children and adolescents are not short adults - they are qualitatively different. They have physical, psychological and social needs that must be met to enable healthy growth and development. The extent to which parents, the family, the community and the society are able to meet these developmental needs (or not) has long-term consequences for the kinds of adults they will become. Armed conflict, displacement, disruption of normal life, and separation from family and/or community can have powerful, long-lasting effects that need to be compensated for in protection and assistance interventions. The fact that almost half of the people of concern to UNHCR are children and adolescents, gives quantitative significance to these operational issues.

Children and adolescents are not a homogenous group. While they share basic universal needs, the expression of those needs depends on a wide range of personal, social and cultural factors. The protection and assistance interventions of UNHCR and its partners are less likely to achieve their intended impact if a population of concern is treated as an undifferentiated group. An understanding is necessary, in a given situation, of what differences among gender, age, maturity, social class or caste, cultural or religious background have operational implications. Taking these factors into account is basic to good programming.

Children need the care, protection and guidance which is normally provided by parents or other care-givers, especially during the early years when they are most dependent. While their emerging abilities and capacities change the nature of this vulnerability from infancy through adolescence, their need for attention and guidance at each stage remains. Parents and communities have the primary responsibility for protecting and caring for their children, and initiating them into culturally relevant skills, attitudes and ways of thinking. Interventions by outsiders are significant largely to the extent that they strengthen (or inadvertently undermine) family and community capacities to provide this care and protection. There are some circumstances where the urgent needs of children or adolescents must be met directly, but maintaining a long-term view is essential to finding ways to enable families and communities to care for and protect their children on an ongoing basis.
KEY CONCEPTS

The following are the key concepts, which are addressed in this Resource Pack. These can also be found in Overhead 1.0.

1. There is no universal definition of children or of childhood. Childhood is a cultural and social construction, and not simply a universal stage in the human being's physical and psychological development.

2. Children and adolescents have needs and capacities that are significantly different from those of adults.

3. Although certain general features of child development are predictable, there are significant cultural differences in the ways in which children and adolescents develop, and in the beliefs, goals and expectations and child-rearing practices that shape development.

4. Gender differences are especially significant, as are differences related to social status, class/caste and specific needs – e.g. related to disability.

5. It is important to integrate both a child rights and a child development perspective into programme planning.

6. Armed conflict and forced migration are likely to impose various risks which may have a particularly serious impact on children’s development: these risks can be both multiple and cumulative.

7. Children and adolescents also have the capacity to be resilient in the face of adversity. The concept of resilience directs attention to those factors within the individual, the family and the wider context which help people to cope with adversity.

8. Strengthening supportive networks may be the most effective way of enabling children and their families to cope with adverse circumstances.

9. Conflict and migration can pose some particularly critical threats to the development and well-being of children and adolescents: these include experiences of violence and fear; separation from parents or other care-givers; exploitation and abuse; and involvement in fighting forces.

10. In situations in which children’s development is under threat because of sudden displacement, a high priority should be given to restoring a sense normality in their lives and by protecting them from further threats to their development.

11. The Best Interests of the child is an important principle in both legal and child development contexts, and can be applied to individual children and more generally in programming. But implementing it sometimes requires handling complex and contradictory considerations.

12. As well as being an important legal right, child participation can promote child and adolescent development and can enhance decision-making about young people. Clarity of objectives and methods, a careful consideration of issues of culture, gender and age, and the real commitment by the adults involved will greatly facilitate effective implementation of this important principle.
OVERVIEW AND DEFINITIONS

This resource pack does not aim to offer a comprehensive account of child and adolescent development: rather it seeks to provide some introductory material which relates particularly to some of the critical issues facing children with a refugee background. It is mainly knowledge based: facilitators will find many references to other ARC Resource Packs and may find it helpful to turn to these both to amplify some of the issues and to find more skill-oriented training materials.

The Convention on the Rights of the Child defines “child” as everyone under the age of 18 unless, under applicable law, majority is attained earlier (Article 1): for most purposes in this Resource Pack, this definition is adopted. However, as Topic 1 argues, the concept of childhood is understood differently in different cultural and social contexts.

“Child development”, or “child and adolescent development” refer to the process of growth and maturation of the human individual from conception to adulthood. The term “adolescence” has particular connotations in particular cultural and social contexts. In this resource pack, it is used to describe young people who are in the stage of development that occurs between the beginning of puberty until adulthood, without any implication that this period is characterised by any particular behaviour or attitudes. However, a distinction between children and adolescents is sometimes necessary in order to highlight the particular issues facing older young people, whose needs can be, and are frequently, overlooked in programming.

In many cultures, the care of children is shared among a wider group of adults, and often older children, than is common in western societies. The term “carer”, “care-taker” and “care-giver” are used interchangeably to refer to those people who play significant roles in the care of children.

This Resource Pack introduces the key concepts of “risk” and “resilience”: risk refers to any factor or circumstance which poses any kind of threat to the normal and healthy development of the child, while resilience is defined as the capacity of the person to cope with risk or adverse circumstances. The term “normal”, however, should be understood as indicating the norms of the particular society or community, and not referring to any supposed universal standards.

STRUCTURE OF THE RESOURCE PACK

This Resource Pack provides an introduction to some aspects of child development to inform and complement the material contained within the ARC Critical Issues Resource Packs. It is organised in seven topics:

**Topic 1** argues that there is no universal definition of who is a child, adolescent or youth, and that the concept of childhood is understood differently in different cultural and social contexts.

**Topic 2** considers the process of child development and the importance of integrating both a child rights and a child development perspective into programme planning. It demonstrates how children’s needs and capacities are significantly different from those of adults, and that armed conflict and displacement are likely to have a particularly serious impact on children’s development.
**Topic 3** introduces the concepts of risk and resilience in children and adolescents, and outlines some approaches which may reduce risk and enhance resilience.

**Topic 4** examines some particularly critical threats to children’s development: experiences of violence and fear; separation from parents or other carers; exploitation and abuse; and young people’s involvement in fighting forces.

**Topic 5** outlines some strategies to promote child development in adverse conditions: these seek to restore a sense of normality, and to prevent further harm.

**Topic 6** examines the important concept of the child’s Best Interests and considers some of the issues involved in implementing it.

**Topic 7** looks at the principle of child and adolescent participation from both a legal and child development perspective. It considers the potential beneficial impact of participation on young people and discusses some implementation issues.

Participatory exercises, case studies, overheads and handouts are provided. In most situations, Facilitators will probably wish to use this Resource Pack in conjunction with others which consider implementation strategies in more detail. Facilitators are strongly recommended to develop regional or country-specific materials such as case studies and group exercises, in order to make the training more relevant and engaging.
Topic 1
Defining Children and Childhood

KEY LEARNING POINTS

- There is no universal definition of who is a child, adolescent or youth. Chronological age is not a sufficient criterion for establishing operational definitions.

- Childhood is understood in very different ways in different contexts. Childhood is a social and cultural construction, not merely a stage in physical and psychological development.

- Children and adolescents can be especially vulnerable because of their immaturity and dependence, but it is important also to recognise their potential and resilience. A child-centred situation analysis may be important in identifying and assessing the particular needs of children in particular situations.

Although it is common to define children by reference to age and the level of children's biological and psychological development, definitions of children and of childhood are much more complex than this.

DEFINING CHILDREN BY AGE

The Convention on the Rights of the Child (Article 1) states that “a child means every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier” (this appears as Overhead 1.2). While this definition provides a point of common reference for international organisations, NGOs and governments, operational definitions in the field may differ. For example, the International Committee of the Red Cross defines an unaccompanied minor as “below 15 years of age and not being accompanied by an adult”. In contrast, the UNHCR definition is consistent with the CRC and sets “under 18” as the age for inclusion in family tracing services. During the return of African National Congress members to South Africa, the term “youth” was widely applied to single young men, frequently up to the age of thirty-five. In other countries, the threshold for youth may be at a much younger chronological age.

In many situations of conflict and displacement, the accuracy of children’s ages may be in question. Lack of official birth records can combine with the fact that, in many societies, exact dates of birth are of little importance. In others, children are considered to be aged one at birth. In the context of very high infant mortality,
new-borns may not be formally named or even recognised until they have passed a full year, when it becomes more certain that they will survive.

In many cultures there is a distinction between different stages of childhood - especially between stages of the “innocence” or “ignorance” of childhood and a later stage of “reason” and “responsibility”. Many legal codes define the age at which children are legally deemed to be responsible for their actions.

CULTURAL FACTORS

In different cultural contexts, factors other than age may be important in determining who is a child or an adolescent: factors such as social roles, gender, marital status and the capacity to contribute economically may be more important than chronological age in shaping expectations of children.

Rituals of religion or custom may also confer social status, clearly marking points of transition in rights and obligations in the eyes of the wider community. These may be indirectly linked to age, notably the onset of puberty. In many cultures, adolescents, both boys and girls, go through rites of passage which, once successfully completed, confer adult rights and responsibilities. The ability to maintain such customs is often difficult in the context of displacement, where lack of income and access to important resources may delay or dilute these practices.

An assessment of the way universal principles, national laws, local regulations and customs shape expectations of children at various ages should be the starting point for intervention.

In the context of displacement and other circumstances of severe adversity, children may find themselves assuming roles that have not been traditionally prescribed. This can include becoming the head of a household. Some illustrations are given in Overhead 1.3.

CHILDHOOD AS A SOCIAL AND CULTURAL CONCEPT

Childhood is neither timeless nor universal: it is not determined only by age, or by biological and psychological factors. Rather childhood is understood by reference to particular cultural and social contexts and to particular periods in history. Childhood in Mexico is not the same as childhood in Madras or Madrid: childhood at the beginning of the third Millennium in London is not the same as it was two hundred years ago. In the more developed countries of the north, for example, childhood is now seen as an extended period of economic dependency and protected innocence during which play and schooling are seen as central components: but this is far removed from childhood in many other cultures, where work (whether paid, or work within the household) must take precedence over both schooling and play. In many countries of the south, the child-rearing environment is characterised by large families and high infant mortality: a heavy emphasis on parents’ efforts to ensure the physical survival of their children means that parents must devote much of their time to economic and domestic activity, with many “parenting” tasks delegated to other people, often older children. Western notions of childhood often place an emphasis on children’s vulnerability and innocence, but again in other contexts this may be much less appropriate.
Many child-rearing practices also reflect particular cultural contexts: in some contexts in Asia, mothers may be quite protective of their children, seeking to keep their infants quiet and contented, and as they grow up there may be an expectation of compliance and conformity, and an acceptance of adult authority: by contrast, many American parents may encourage open, expressive, autonomous and assertive behaviour and allow a pre-school child to take physical risks that would be unacceptable to many Asian mothers.

In both instances there may be marked ways in which girls are treated differently from boys. In some contexts, being a boy, or a girl, may be more significant than the fact of being a child. Different societies have contrasting ideas about both children’s vulnerabilities and their capacities, about how they best learn, about what is good for them and what is bad for them. Within a given context, childhood is often highly differentiated not only according to gender, but also according to social class or caste. Approaches to discipline and punishment will also vary greatly between cultures: severe corporal punishment may be the norm in some societies but be regarded as abusive in others. Clearly, for families who seek refuge in countries where norms are very different from those to which they are used, there is considerable potential for conflict and confusion. Exercise 1.2 provides an example. Exercise 1.3 provides an example of the different ways in which young people may be considered to be responsible for their actions.

It has sometimes been suggested that the CRC and other international instruments reflect a “globalised” conceptualisation of the child and of childhood which do not always sit comfortably with the reality of many countries of the South. The CRC, for example, tends to emphasise schooling and play rather than acknowledging work as a legitimate aspect of childhood. On the other hand, it is widely acknowledged that the CRC does provide an extremely valuable reference point which offers universal standards to be aspired to.

Care must be taken to avoid introducing expectations and norms of childhood derived from one situation into another, different cultural context. The ARC materials contain many examples of situations where it is essential to have a comprehensive grasp of the culture in order to understand and make sense of what children experience - whether in respect of separation from the family or other carers, exploitation, disability and so on. Without an informed cultural lens, and the capacity to communicate with children, negotiations around different child-rearing practices and norms are likely to produce conflicts that do not serve the best, long-term interests of the child.

**AVOIDING ASSUMPTIONS ABOUT VULNERABILITY IN CHILDREN AND ADOLESCENTS**

Children may be especially vulnerable because of their immaturity and reliance on adults for their care and protection. But it is also important to remember that resilience as well as vulnerability is a characteristic of the growing human organism. This will be explored in more detail in Topic 3. Many different factors, relating to the individual child, the family, the immediate social situation and the wider cultural context may combine to place children in a position of risk of threats to their well-being, development and rights. The capacity to anticipate, acknowledge and assess such factors is fundamental to the effective protection of children.
In many refugee contexts, programme responses emphasise children of primary school age, who are frequently the most visible group of children. However, the relative invisibility of other groups of children (pre-school children, and adolescents for example) sometimes leads to their relative neglect in programming. Limited visibility of children with disabilities may mean that there are relatively few disabled children within the particular population, or alternatively that they are shut away out of sight and possibly away from human contact and stimulation.

Many of the typically-identified sub-groups of vulnerable children may interact and overlap - for example, separated children, street children, child soldiers, child-headed households and so on. While it may be vital to identify particular groups of children whose development and well-being is threatened, the targeting of special assistance to these groups of children may have negative, unintended consequence if the long-term goals of social and economic integration are not fully appreciated.

A child-centred situation analysis is an important tool for assessing the particular needs of various categories of children and adolescents who may require special attention if their assistance and protection needs are to be met adequately. The views of the children themselves, the opinions of adult community members and the insights of local leaders are all essential in determining the extent to which particular children may be at risk. Reference may be made to the ARC Resource Pack on **Situation Analysis** for further information on this subject.

### TRAINING MATERIALS FOR TOPIC 1

<table>
<thead>
<tr>
<th>Material</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overhead 1.1: Key Learning Points for Topic 1</td>
<td>Summary of the key learning points</td>
</tr>
<tr>
<td>Overhead 1.2: CRC Definition of Who is a Child</td>
<td>Provides the text for the CRC, Article 1</td>
</tr>
<tr>
<td>Overhead 1.3: Views of Children and Adolescents</td>
<td>Provides some quotations from Young People</td>
</tr>
<tr>
<td>Exercise 1.1: Discussion Questions</td>
<td>Discussion questions on definitions of children</td>
</tr>
<tr>
<td>Exercise 1.2: Child or Adult?</td>
<td>An examination of the role and status of a young person</td>
</tr>
<tr>
<td>Exercise 1.3: Are Children Responsible for their Actions?</td>
<td>Examines issues concerning the age at which children become responsible</td>
</tr>
<tr>
<td>Handout 1.1: Notes on Developmental Stages</td>
<td>Summary of some of the things children of different ages can do</td>
</tr>
</tbody>
</table>
KEY LEARNING POINTS

- **It is important to integrate both a child rights and a child development perspective into programme planning.**

- **Although certain aspects of child development are predictable and universal, there are significant cultural differences in the ways in which children and adolescents develop.**

- **The process of child development can be described as transactional: children and adolescents are not the passive subjects of socialisation, but play a central role in their own development.**

- **Children and adolescents have needs and capacities which are significantly different from those of adults.**

- **Armed conflict and forced migration are likely to have a particularly serious impact on children’s development which may have long-term consequences.**

CHILD RIGHTS AND CHILD DEVELOPMENT

Although there is a growing recognition of the importance of a child rights perspective in emergency situations, it is equally important to integrate knowledge of child development into programming.

*Child Rights* refers to a set of universal rights and principles which have been given legal status through their expression in the articles of the CRC. The CRC lays down fundamental principles which are necessary to promote and secure the survival and development of children. Some articles in the CRC do employ concepts of child development – e.g. the concepts of immaturity, evolving capacities, “the child’s health, or physical, mental, spiritual, moral or social development” etc. – see Articles 6, 12, 14, 23, 27, 29 and 32. Children’s rights issues are explored in more detail in the ARC Resource Pack on *International Legal Standards*.

*Child Development* concerns the process of growth and maturation of the human individual from conception to adulthood. Development is best understood within a lifespan perspective, with growth and change beginning at conception and throughout the foetal stage, continuing throughout childhood and adolescence and, in some respects, during adulthood and old age. During the whole period of
his or her development, the individual child will develop a mature body, brain and nervous system and progressively acquire competence in a wide range of functions and skills which enable him or her to adapt and survive in many different types of environment. There are significant cultural differences in children’s developmental pathways, goals for development and the conditions under which children develop satisfactorily. For example, while in the West the “ideal norm” is often seen as child rearing within a small, two-parent family, in other cultural contexts, child rearing tasks are shared among a wider network of adults and, significantly, among older siblings.

Within a particular culture, children of the same chronological age will nevertheless differ in their level of development because of the complex interplay of genetic and environmental factors. So, for example, although it can be safely predicted that children will enter puberty at around the ages of 11-15, the onset of puberty will differ from individual to individual, between the genders (girls typically mature earlier than boys) and between contexts – for example, the onset of puberty may be delayed in situations in which there is chronically poor nutrition. Moreover there will be marked cultural differences in the way that various changes which characterise the early adolescent period are understood, and in the expectations for young people’s behaviour, especially in relation to their gender.

Some general patterns of development can be predicted and observed across cultures and individuals, although the expression of these universal patterns will always be embedded in, and shaped by, local conditions and cultural practices. Child development is not a smooth and continuous process, but rather tends to proceed in stage-like patterns of growth. Many attempts have been made by developmental psychologists to define these typical stages: one example is given in Annex 1 in UNHCR’s “Working with Unaccompanied Minors in the Community”. The problem with such charts is that they do not represent universal stages, but rather reflect particular cultural contexts. Child development is not to be seen as the unfolding of a genetically-determined blueprint, but as a process which is shaped by particular cultural and environmental experiences. For these reasons, such charts of child development need to be used with some caution.

The process of child development can be usefully described as transactional - i.e. “actions which pass between”. This simply means that a child interacts with his/her physical and social environment over time, each having an effect on and shaping the other. It is now generally recognised that this is a more useful way of looking at the process of child development than either maturation or socialisation which sometimes implies that the child has a relatively passive role in his/her development. For example, a baby smiles and babbles to her mother, causing the mother to respond by smiling and talking, and in turn this causes the baby to again respond - hence a dialogue begins to take place. Not only is the mother shaping the baby’s development: the child is actively shaping the mother’s role as a parent - hence the interactional or transactional element in development.

As the child grows up, he or she contributes to an increasing degree in forming his or her growing-up environment, though this varies according to the context (for example, there may be differences between very authoritarian child-rearing practices, and more democratic ones): this environment typically consists of the child’s closest care-givers - parents, grandparents, older siblings etc. and later, friends, neighbours, teachers etc. Again there will be pronounced cultural
variations - with marked differences in child-rearing practices, and to some extent between families of the same culture. They are shaped by traditional practice, beliefs, level of education, external influences and many other factors. These practices will form an important framework for the child's development in a particular family and culture. Child rearing practices will also change over time, and there may also be differences between urban and rural practices. In whatever environment the child is brought up, the child becomes a cultural and social being and in so doing he or she also contributes to the process.

All babies are born with their unique genetic make-up inherited from their parents, which are significant in determining their gender, appearance, temperament and intelligence: genetic factors also can cause particular diseases and disabilities. Genes also “steer” biological development, the “programme” of emergence of different functions and levels of competence as the child grows. But within a transactional model of development, many factors in the environment will interact continuously with the individual child’s biological potentialities and vice versa to produce developmental effects. For example, although certain genes determine the basic structure of the brain, it is known that the quality of adult-child interaction - the way the baby is held, talked to and stimulated - actually influences the more detailed structure of the brain, the quantity of interconnections between the brain cells and eventually how the brain functions.

Various physical, intellectual and sensory disabilities can have an obvious and possibly profound impact on the development of the child. Arguably, however, it is not so much the disability itself, but the way disability is viewed and disabled children are treated that has the greatest detrimental effect. Here the transactional nature of child development is clearly visible: the child who is slow to develop, for example, may be unrewarding to his or her care-taker and as a consequence may receive less attention and stimulation. In many cultures, disability confers a sense of shame on the family, while in others there is to be found a fatalistic attitude which often results in an under-investment in the child. In some cases, ignorance about the nature of the child’s disability can have very adverse consequences – for example the mistaken assumption that cerebral palsy inevitably leads to learning disability. In such situations, children may be deprived of stimulation and attention, of food and comfort, and of contact with other children – all of which can have a massively adverse impact on the child’s development. Facilitators are referred to the ARC Resource Pack on Disability for further information on this subject: in particular, Exercise 7.1 may be used to illustrate the impact on the child of lack of educational and other opportunities.

SOME GENERAL FACTORS AFFECTING CHILD DEVELOPMENT IN CONFLICT AND DISPLACEMENT SITUATIONS

All children and adolescents have basic physiological, social and emotional needs which must be met to ensure healthy development. Some needs are shared in common with adults, but others are specific to particular ages and stages during childhood. For example, very young children have a particular need for consistent, secure patterns of care and nurturance, though these needs can be adequately met through a wide range of family and care systems. If their needs are not adequately met, young children’s development may be impaired and this may have long-term impact.
Armed conflict and forced migration impose a potentially wide range of threats to children’s development. Not infrequently in such situations, children face the potential for an accumulation of risks: for example, the malnourished child may do less well at school, and poor school performance may pre-dispose the young person to exploitative work. Separation from the family may place the child at risk of exploitation while the child who is being abused within the family may be vulnerable to recruitment into armed forces.

It is important to understand what kind of risks children may be facing and how these may pre-dispose children to other risks so that appropriate intervention can be planned. Similarly, when any kind of programme is planned, whether or not children are targeted, it is important that the question is posed “What effect will it have on children’s rights and child development”?

Armed conflict and displacement occur in many different social, cultural and political contexts, and last for different lengths of time, but there are a number of factors which pose particular threats to the growing child which are characteristic of conflict and forced migration situations. It is vital for protection and assistance agencies to be aware of these in order that they can take steps both to prevent their worst effects and to deal with them if they do occur. It is also important to understand how families, children themselves and communities recognise these risks, and how they respond to lessen them and handle the consequences.

Some of the most common impacts on child development of situations of forced displacement (apart from the four specific areas dealt with in Topic 4) are listed below.

- **Wholesale loss** of the child’s home, familiar circumstances, people, possessions etc.

- **Cold and excessive heat** can be life-threatening to very young children who do not yet have fully-developed temperature regulation systems and have little fat under the skin. Even in relatively hot climates, night temperatures may become very low. Intense heat without fluid replacement can also be life-threatening.

- **Crowded accommodation, lack of health services, lack of clean water and adequate sanitation** can conspire to pose particular threats to the health of the growing child. Inadequate immunisation programmes, lack of capacity to control infectious diseases and poor health services are likely to have a considerable impact on the healthy development of children and adolescents.

- **Malnutrition** is closely linked to disease, especially infectious diseases. Under-nourished children have less resistance to disease, and once they have a diarrhoeal or respiratory infection, eat even less so that a cycle of disadvantage is set up which can quickly lead to death. Children’s nutritional needs are significantly different from those of adults. **Severe clinical malnutrition** which can begin in the foetal state and continue into the first one or two years of life is associated with long-term effects on the development of the cognitive and behavioural aspects of development as well as competence in motor functioning. It appears that the risk is greatest if there is also growth failure. Chronic malnutrition can lead to stunted growth.
• **Chronic poor health**, often associated with malnutrition, can affect the child’s natural inclination to explore and learn from the environment and opportunities for taking part in school and other social activities. Overheads 2.2 and 2.3 illustrate the effects of nutritional deficiency.

• **Physical injuries** can also be associated with armed conflict: for example, bomb blasts can lead not only to shock and anxiety but to hearing loss, which in turn may affect school performance. Bombs, shells, bullets and land-mines can cause a wide range of physical disabilities and psychological threats.

• **Loss of educational opportunities** can have far-reaching effects on children’s development. Children whose primary education is disrupted often find it difficult to return to schooling later in their childhood. Girls are particularly likely to be disadvantaged educationally. The absence of basic education violates the rights of children and often proves to be a life-long handicap.

• **Lack of opportunities for play**: although children’s play takes different forms for children of different ages and genders in different cultures, play is an essential and universal feature of childhood through which children explore, learn, co-operate, cope and adjust. Through play, children not only develop skills and competencies, but also handle and re-enact difficult life experiences and express their feelings about them. In conflict and refugee situations, play may be inhibited by a number of factors, including pressures on the time of parents and other carers; the possibility of their own anxieties making them emotionally unavailable to the children; lack of spaces for play; and anxieties about security which may lead parents to restrict their children’s movements.

Topic 4 of this Resource pack examines some of the more specific and critical threats to child development which are particularly encountered in the context of armed conflict and forced migration. These consist of; experience of violence and fear; separation; exploitation and abuse; and association with armed forces. Firstly, however, Topic 3 of this Resource Pack will examine the linked concepts of risk and resilience.

### TRAINING MATERIALS FOR TOPIC 2

<table>
<thead>
<tr>
<th>Overhead 2.1: Key Learning Points for Topic 2</th>
<th>Summary of key learning points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overhead 2.2: The Effects of Nutritional Deficiency (1)</td>
<td>How Nutritional Deficiency can Affect Children’s Development and Behaviour – Unborn children, Infants and Toddlers</td>
</tr>
<tr>
<td>Overhead 2.3: The Effects of Nutritional Deficiency (2)</td>
<td>How Nutritional Deficiency can Affect Children’s Development and Behaviour – School-aged Children and Adolescents</td>
</tr>
<tr>
<td>Exercise 2.1: Personal Time Lines</td>
<td>Examines the Impact on Child Development of Particular Life-events</td>
</tr>
</tbody>
</table>
KEY LEARNING POINTS

- In situations of conflict and forced migration, children and adolescents may face an accumulation of risk factors which may pose a serious threat to their development.

- The concept of resilience directs attention to “protective factors” within the individual, the family and the wider context which help people to cope with adversity.

- Children’s resilience is intrinsically linked with that of their parents or other carers.

- Strengthening supportive networks may be the most effective way of enabling children and their families to cope with adverse circumstances.

This Topic overlaps with Topic 3 in the ARC Community Mobilisation Resource Pack, which also includes a number of training materials which are relevant to the issue of resilience.

RISK FACTORS FACING CHILDREN AND ADOLESCENTS IN EMERGENCY SITUATIONS

In Topic 2 it was suggested that children and adolescents in situations of conflict and forced migration are likely to face a range of risks and threats to their development. Displacement is often to be seen as a threat to the social, emotional and intellectual development of children and adolescents owing to the fact that they have experienced massive change and that their environment has experienced wholesale disruption. However, in assessing situations of risk it is important to avoid making assumptions that exposure to a particular risk or hazard will automatically have a harmful effect on children: the concept of resilience is a useful framework for examining the way in which different people in similar circumstances may react quite differently to threats to their development and well-being.

RESILIENCE: A DEFINITION

The concept of resilience is founded on the observation that under traumatic or otherwise adverse circumstances, some people cope and develop relatively well while others fail to do so. The term “resilience” describes the characteristics of those
who cope relatively well - their personal attributes, the quality of their family life, their social supports etc. It is important to emphasise that resilience is not just about personal qualities, but about the way in which these qualities interact with external factors within the family and wider environment.

The term “resilience” is derived from the natural sciences and describes the capacity of a material or product to recover its original shape after being stretched or stressed: when applied to people it describes the capacity of the person to “bounce back” after difficult or stressful experiences.

RISK AND RESILIENCE IN CHILDREN AND FAMILIES

The psycho-social well-being of children in difficult circumstances can be seen as a product of the balance between, on the one hand the presence of certain risk factors and, on the other, the existence of certain protective factors. Where the presence of protective factors helps to counteract the effects of risk factors, the person can be regarded as resilience.

Risk Factors

Many aspects of the situation of displaced children and adolescents can be seen as risk factors. Many of them will have had experiences of violence, loss and wholesale disruption to their lives, and often such stresses are compounded by other factors in the context of displacement. The many risk factors commonly experienced by displaced children and adolescents include:

- previous traumatic experiences of violence, separation, fear etc.;
- loss of the family home, familiar surroundings, friends, familiar people etc.;
- loss of self-respect and self-confidence;
- poor diet and nutritional status;
- lack of opportunities for education;
- lack of opportunities for play and recreation;
- excessive burden of paid and/or unpaid domestic work;
- uncertainty about the future.

These points appear as Overhead 3.2.

In addition, children’s well-being is intrinsically linked with that of their parents: this means that the risks to which parents (or other carers) are exposed will also affect the children. These risks may include, in addition to the above:

- poor health;
- mental health problems such as depression and anxiety;
- lack of access to health and support services;
- separation from spouse;
- relationship problems and tensions in the marriage;
- excessive demands on their time;
unemployment and lack of access to economic opportunities;
• lack of material resources;
• worries about other family members and about the future.

These points appear as **Overhead 3.3.**

For both parents and children, the presence of multiple risk factors, especially if they stem from both past traumatic experiences and current stresses, can disproportionately increase the risk. An accumulation of risk factors is likely to adversely affect the child’s development, and in turn this places him/her at increased susceptibility to other risk factors.

**Protective Factors**

Protective factors serve to shield both parents and children from the worst effects of such risk factors and thereby contribute to resilience. Some of these protective factors relate to the characteristics, assets or resources of the individual such as the following:

• cognitive competence - a reasonable level of intelligence, skills in communication, realistic planning etc.;
• a positive sense of self-esteem, self confidence and self-control;
• an active coping style rather than a passive approach - e.g. a tendency to look to the future rather than to the past;
• a sense of structure and meaning in the individual’s life, often informed by religious or political beliefs, a sense of coherence etc.

In addition, protective factors are also a product of the **child’s immediate social environment** such as the following:

• good and consistent support and guidance from parents or other care-givers;
• support from extended family and friendship/community networks, teachers etc., and the re-establishment of a normal pattern of daily life;
• an educational climate which is emotionally positive, open and supportive;
• appropriate role models which encourage constructive coping.

These points appear as **Overhead 3.4.**

In situations of conflict and forced migration, many of the child’s personal resources may have been undermined, and many of his or her social support systems may have been destroyed or disrupted.

For parents or other care-givers, various personal characteristics will serve to limit, or enhance resilience: within their immediate social environment, protective factors may include:

• a supportive marital relationship;
• support from the extended family;
• supportive community structures - e.g. informal support from community, neighbours, women’s associations etc.;
• access to appropriate health and support services;
• opportunities to re-establish an acceptable economic base for the family.

These points appear as **Overhead 3.5.**

The presence of such protective factors for parents will enhance their capacity for offering appropriate support to their children, but again many of these will have been adversely affected by conflict and forced displacement.

**Exercise 3.1** may be used to illustrate the interaction between risk and protective factors for children and their parents or other care-givers, while **Exercise 3.2** provides an opportunity for participants to consider risk and protective factors in a case study.

**STRATEGIES TO ENHANCE RESILIENCE**

It will be clear from the above that resilience in children is a product of personal characteristics, the family environment and the availability of other forms of social support outside of the family, and the interaction between these factors. A focus on the child’s resilience has the advantage of directing attention to people’s strengths rather than their weaknesses; it underlines the need to identify and strengthen existing support networks within the community; and it directs attention to those children and families whose assets and resources may need strengthening, as well as to those who may continue to be especially vulnerable even when these resources are in place.

A resilience approach can be considered in two ways: first, a **risk-focused approach** in which intervention is based on the identification of specific actual or potential risk factors. Examples of such a strategy are: the prevention of child abuse or neglect through parent and community education; a prevention of separation campaign in mass movements of people; a reduction in teenage drinking, smoking or drug mis-use through community-based or youth-to-youth programmes; supplementary feeding programmes where children’s nutritional status is unsatisfactory. Topic 4 of this Resource Pack considers some critical threats to child development in emergency situations, and these are cross-referenced to other ARC Resource Packs which provide detailed information on the particular critical issue.

A second strategy may be described as a **resource-focused approach** which will aim to prevent and reduce risk for the population as a whole by improving the number and quality of resources available to support children and their families. Sometimes this will consist of strengthening existing community resources, and possibly reinforcing cultural norms and practices that seem to facilitate resilience: in other situations new resources such as clubs for children or facilities for parents will be required. Topic 5 of this Resource Pack provides a framework for promoting child and adolescent development through community-based interventions.

Underlying both approaches is the need to view children and adolescents as **active agents in their own development**, and not as passive victims of adversity. Assessments of children need to include their competences, assets, strengths and resources as well as their problems and areas of vulnerability. The active involvement of young people can be a vital component in preventing and reducing risk and in enhancing resilience. Issues of Child and Adolescent Development - Revision Version 04/01 Page 19
Participation are considered in Topic 7, while the community mobilisation of young people is considered in more detail in the ARC Resource Pack on Community Mobilisation, Topic 8. Topic 5 of the ARC Resource Pack on Working with Children provides more practical ideas on how the concept of resilience can be applied to children whose psycho-social well-being has been affected by their experiences of violence and displacement.

**TRAINING MATERIALS FOR TOPIC 3**

<table>
<thead>
<tr>
<th>Overhead 3.1: Key Learning Points for Topic 3</th>
<th>Summary of key learning points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overhead 3.2: Risk Factors for Refugee Children</td>
<td>Lists key points</td>
</tr>
<tr>
<td>Overhead 3.3: Parental Risk Factors</td>
<td>Lists key points</td>
</tr>
<tr>
<td>Overhead 3.4: Protective Factors for Refugee Children</td>
<td>Lists key points</td>
</tr>
<tr>
<td>Overhead 3.5: Protective Factors for Parents</td>
<td>Lists key points</td>
</tr>
<tr>
<td>Exercise 3.1: Risk and Protective Factors</td>
<td>Illustrates risk and protective factors in children and their families</td>
</tr>
<tr>
<td>Exercise 3.2: The Importance of Community Resources for Children’s Development</td>
<td>A case study exercise which requires participants to identify risk and protective factors and their inter-relationship</td>
</tr>
</tbody>
</table>
INTRODUCTION

This topic is designed to provide a basis of knowledge which links directly with other ARC Resource Packs - notably Separated Children, Working with Children, Exploitation and Abuse and Child Soldiers. Facilitators are referred to these for further information on each of these subjects, and in particular on some of the key issues involved in programmes.

Throughout this Topic, it is important to remember that child-rearing practices vary a great deal between different cultures. Much of the research on threats to child development - separation and loss for example - have taken place in western societies and hence cannot simply be transferred to other cultural settings. Therefore there is no substitute for examining, within any particular context, how children have reacted to the situation facing them: this requires a child-centred situation analysis which directly accesses the views, wishes and feelings of the people involved - the children, their carers, community leaders, teachers etc. Facilitators are referred to the ARC Resource Pack on Situation Analysis – especially Topic 3 – for further information and ideas on this.

4.1 EXPERIENCES OF VIOLENCE AND FEAR

Key Learning Points

- Traumatic events such as violence, sudden flight, loss and intense fear are likely to have immediate, and maybe long-term, effects on children and adolescents.

- The nature of their reactions will depend on many different factors, including age, individual characteristics and temperament, and the quality of care and support they receive from their family and other significant people in their social environment.
Children living in areas affected by armed conflict risk experiencing a number of threats to their development and well-being. These typically involve intense fear, witnessing and perhaps experiencing brutal violence at close quarters, witnessing the destruction of property (possibly including their own homes) and the necessity of fleeing in panic. Children living in a situation of more prolonged conflict may have to face the constant anxiety of fighting or bombing intruding into their lives, coping with the presence of land-mines or unexploded ordnance. Many of these experiences can have both immediate and longer-term effects on children’s development and well-being.

The immediate effects of such events on children depend particularly on:

- the meaning of the event for the child (and his/her family) and, most importantly, whether the event caused the loss of one or both of his/her parents or carers;
- the stage of development of the individual child;
- the personal characteristics of the child;
- the presence or absence of supportive adults, particularly their familiar carers;
- whether the child was personally involved either as a victim or perpetrator.

Longer-term developmental effects may depend on factors such as:

- the extent to which those in the child’s immediate environment react to the changed behaviour, appearance or social status in the child;
- the degree to which highly significant losses can be replaced - such as parents or other important carers;
- the degree to which further traumatic experiences can be avoided;
- the extent and quality of assistance which the child and family receive;
- the extent to which the events have changed the child’s “life-plan” (i.e. his or her anticipated life course covering such things as where he or she lives, type of life-style, expectations for the future - for example, institutionalisation following the loss of parents or carers).

Pregnant and lactating mothers may be particularly at risk from violence and the deprivations of war. Premature delivery, still-births, loss of breast-milk are all possible consequences.

Young children who have had frightening and confusing experiences may regress - i.e. lose (usually temporarily) developmental gains such as speech or control of bladder and bowel. Disturbances in sleep and eating habits are also common. These kinds of reactions may be compounded in situations where the parents or other carers become depressed or anxious and may have less energy for and interest in the child. Where traumatic experiences are compounded by the loss of parents or other carers, or separation from them, reactions and distress may be greatly magnified (see section on Separation below). The apparent loss of capacity to play is sometimes observed, or children become preoccupied with themes of violence, death etc. in their play and drawing.

The developmental effects of violence and other frightening events on older children usually have to do with their capacity to form relationships, and to learn.
The capacity and will to form relationships can be disturbed by experiences which destroy trust and which create fear and suspicion in others. This is especially significant where children lose people close to them, whether through death or separation. Children can become depressed and hence unable to mobilise interest in learning. Children who become withdrawn can easily be overlooked in the classroom, especially if there are many children. Others may retain their will to learn but be troubled by flashbacks - sudden intrusive images of the traumatic experience which can disturb concentration and motivation.

Other symptoms include an increase in aggression and the various physiological complaints such as headaches, loss of appetite and energy, mood changes and other signs of anxiety. Older children may also display a sense of guilt that they have survived when others have not.

During the adolescent period, exposure to violent and frightening experiences can have a particularly pronounced effect. Their capacity for learning and for forming relationships can be disturbed, and in some cases, faced perhaps with the loss of educational opportunities and a disturbed developmental life-course, many adolescents may come to sense a lack of meaning in life and future perspectives. Young people of this age can experience many of the symptoms which may affect younger children: extreme fear and anxiety may cause a delay in the onset of puberty. Criminal activity with peers, drug and substance abuse and other forms of anti-social behaviour may represent a form of meaning as well as an outlet for deep frustration. The vulnerability of adolescents to voluntary recruitment into armed forces reflects the severe impact of traumatic events at this crucial stage of development.

Facilitators are referred to the ARC Resource Pack Working with Children for further ideas and training materials on issues related to children who have been psychologically affected by their experiences.

4.2 SEPARATION FROM PARENTS OR OTHER CARERS

Key Learning Points

- Separation from, or loss of, parents or other familiar carers, may have both short-term and long-term effects on children of all ages.
- The effects of separation will be different according to the age of the child, his or her level of intellectual development, maturity, gender and the nature and duration of the separation.
- Some significant cultural differences can be observed.
- A child’s limited sense of time may limit his or her understanding of the likely duration of the separation.
- Separation is likely to be associated with other threats to child development, including loss of home and familiar surroundings and the experience of violent or frightening events.

Attachment to care-givers is one of the most fundamental building blocks of child development, as this bond is critical to the child’s immediate welfare. Most of the research into the effects of separation have been undertaken in western societies where there has been a strong emphasis on attachment to a single care-taker,
usually the child’s mother. In many other cultures, young children have, and are attached to multiple care-takers - mothers, grand-parents, older siblings etc.

Experiences of separation and loss will have differing impact depending on the child’s age, level of intellectual development, emotional maturity, gender and the nature and duration of the separation. It will also vary between cultures. In general, however, it seems that infants are likely to react to separation with evident anxiety. For infants under the age of about 4 - 6 months, separation is not normally associated with distress, provided their needs for warmth, food, comfort and stimulation are met. The reason for this is that up to this age, the infant has not yet learned to recognise the individual carer and that attachment bonds have not yet been formed. Research evidence from the West suggests that the period from birth to 2 or 3 years is particularly important for the formation of bonds and the development of attachment behaviour. Separation during this period has the greatest distress reaction, especially between about 6 and eighteen months of age. If separation is prolonged, it is not unusual for children to regress (i.e. revert to behaviour typical of younger children): for example, the child may become more demanding and want to be fed, or refuse food altogether, may be more fearful at night, speak less clearly by reverting to “baby talk”, become more fearful of strangers, and perhaps relinquish the achievement of bladder and bowel control.

The notion of attachment is not limited to the phase of early childhood. School-aged children will also react to loss and separation through other behaviour, including denial, depression, increased aggression, sleep disturbance and physical symptoms such as headache, stomach-ache and shortness of breath.

While adolescents may have learned conventions about the control of grief, and have acquired cognitive capacities to understand more about what is happening to them, they continue to benefit from the structure of family life. The opportunity for adolescents to receive support and guidance from adult mentors and role models allows for significant developmental gain, as the attitudes, beliefs and values they adopt during the adolescent period may become lifelong. There is some evidence that separation during adolescence has a more profound long-term effect than separation experienced by younger children. One of the reasons for this may be that separation can disrupt the young person’s sense of self and his/her emerging sense of identity.

Research in western societies has suggested that separations can have long-term effects on children. However, it seems most likely that the majority of long-term effects are not a product of separation, but of the lack of adequate substitute care that follows on from separation. It seems clear that separated children cope best when they are cared for by caring adults (or sometimes older siblings) who provide an appropriate level of affection, care and stimulation. Good quality of care is rarely available in an institutional setting. Wherever possible, children (especially those of pre-school age) should be provided with care within a family setting. Where children have experienced multiple carers (i.e. where caring tasks are shared, for example between the child’s mother, older siblings, grandparents etc.), the distress will probably be minimised if they are able to maintain contact with at least one of their previous care-takers. For this reason it is especially important that brothers and sisters should be kept together whenever possible. In cultures in which siblings have an important role, care within a supported child-headed family may be preferable to separation from siblings resulting in care by strangers.
In the context of separation and the provision of substitute care, another important feature of child development concerns the child's sense of time. Young children have yet to acquire the capacity to appreciate time as measured by the clock or calendar. The baby will not seek an object that has been taken from sight: it has simply gone! The infant cannot use thinking to hold on to the image of the departed parent, while children aged around 4 - 6 years of age are more likely to grasp time as related to events such as “meal-time”, “bed-time” etc. Similarly, children under the age of around 5 may have difficulty in understanding the concept of death and may not realise that a deceased parent is not going to return. Reassurances that a separated child may be able to return to her parents within a few days/weeks/months may have little meaning and will provide little comfort. When policy-makers and practitioners use terms such as “interim care” or “short-term placement”, these may have little meaning to children themselves. Again, however, it should be remembered that there may be significant differences between cultures.

It needs to be borne in mind that separation does not occur in isolation from other events. A child who is separated in war or flight, for example, will have to cope not only with separation (which may be permanent) but also with the possibly violent circumstances in which the separation occurred, and the loss not just of his or her attachment figure(s) but the loss of the family home and familiar surroundings. By contrast, the child who has been abandoned may have to cope not just with separation but with the knowledge of being unwanted or rejected, and possibly with being neglected or abused during the months leading up to abandonment: younger children may invent explanations of the circumstances of their abandonment, such as their own worthlessness. Separation is usually associated with other kinds of loss - of the family home, other familiar people, possessions and familiar circumstances. Separated children usually benefit from as much continuity with the past as possible: remaining together with siblings, maintaining one or two possessions and so on can be extremely important to the child.

More information and training materials on the issue of separation are to be found in the Resource Pack Separated Children.

4.3 EXPLOITATION AND ABUSE

Key Learning Points

- Children and adolescents in situations of conflict and forced migration are at greatly increased risk of various forms of abuse and exploitation.
- Exploitation and abuse can take many different forms, and any particular instance needs to be understood within its particular social and cultural context.
- The impact of exploitation or abuse can be profound, and will vary according to the particular circumstances: it is important to understand both the objective nature of the experiences and the meaning, and subjective evaluation by the individual child.
- Abuse or exploitation within the family can have particularly profound consequences for the child’s development.
There is now a great deal of evidence that children with a background in conflict or displacement are at greatly increased risk of various forms of abuse and exploitation. It is also clear that the presence of one risk factors may make children more vulnerable to other risks, hence an accumulation of risks can occur: for example, the separated child may be at enhanced risk of abuse and exploitation, while a child facing abuse within the family may be at enhanced risk of recruitment into fighting forces.

The terms “exploitation” and “abuse” cannot be used in an absolute or universal sense: rather behaviour towards a child which might be deemed to be abusive or exploitative needs to be seen against cultural norms and standards. This issue is dealt with in the ARC Resource Pack Abuse and Exploitation, Topic 1.

In the area of child labour, for example, it is important not to impose a western concept of childhood (which largely excludes paid work) and not to make the blanket assumption that all forms of child work are exploitative or damaging to children’s development. On the other hand, some of the most damaging aspects of work can be psychological in nature and relatively invisible to the outside observer. Included within the definition of exploitative child labour is work that interferes with the child's ability to access education whether because of the hours or any other reason.

Children may be more susceptible to some types of work hazards than are adults because they are in the process of growth and have particular developmental needs: carrying excessively heavy loads can have a serious and permanent effect on the child’s growth. On the other hand, research has demonstrated that working children can have an extraordinary ability to weigh the complex costs and benefits of work. In determining whether work is harmful, two sets of criteria may be used. First, the objective conditions of their work: this may include such criteria as:

- the nature of children’s work activities;
- the nature of the work environment;
- the presence of specific hazards (physical and psychological);
- the nature of the employment relationship.

Second, the subjective value given to the work by the children themselves. For example, where children perceive that the benefits (e.g. pride in contributing to the family economy, satisfaction and learning derived from the work) largely outweigh the costs (e.g. working long hours), it seems that this may partly shield children from the worst effects of work. Again it is important to avoid assumptions about the impact of work on children: for example, it is often assumed that children should not be working because they should be in school. However, it is clear that many working children can only attend school if they earn enough to pay their own school fees and expenses. It is important that a thorough situation analysis is undertaken, which includes a careful attempt to elicit the views of the children themselves.

Gender issues may also be significant: in some cultures, girls tend to carry an excessive burden of unpaid domestic work, sometimes in addition to paid work outside of the family. Frequently this is a factor in school enrolment figures which show a bias in favour of boys.
All of these issues are elaborated in the Resource Pack on Abuse and Exploitation, Topic 3.

The sexual abuse and exploitation of children will frequently have severe and far-reaching effects, depending on the age, gender and temperament of the child, the nature and duration of the experience, the identity of the abuser and the quality of support received, especially from the child’s family. Although the majority of sexually abused and exploited children will be girls, it is important to remember that boys can also be involved, and that there may be even greater under-reporting of abuse against them than is the case with girls.

The impact of sexual exploitation can be experienced on various levels, including:

- physical consequences - including genital injury, STDs and the contraction of HIV/AIDS, and unwanted pregnancy;
- emotional consequences can include the trauma of violent exploitation which can have similar effects to those of other traumatic experiences (see previous discussion);
- in some societies, a sense of shame at having been violated, and especially if pregnancy results, can have severe consequences for the child;
- social consequences can include ostracism by the family or community - especially if the child is disbelieved or blamed for what has happened. In some cultures, sexual exploitation will have a negative effect on the child’s chances of marrying;
- secondary trauma can result if the incident is handled insensitively - e.g. aggressive interviewing of the child, insensitive medical examination etc.

All of these can have both immediate and long-term impacts on children’s development.

Abuse within the family (whether physical, sexual, emotional abuse or neglect) can have particularly serious consequences for the child’s development. It will be important to consider not just the immediate physical and emotional impact of the abuse on the child: abuse within the family constitutes a gross breach of trust in the adults who are charged with the responsibility for caring for and protecting the child. Because of the child’s age and developmental stage, he or she may be powerless to resist or protect him/herself from abusive behaviour. Evidence suggests that abuse is likely to continue until its causes have been identified and removed, or unless the risk of further abuse is minimised by the separation of the abuser from the subject of the abuse; but removal of the child can sometimes place other children in the family at increased risk.

Research in western societies suggests that it is not uncommon for abused children to grow into abusing adults. For example, sexually abused boys are prone to become sexual abusers of other children, while emotionally neglected children may grow up without the personal knowledge of the importance of love and affection, which may have a negative effect on their own parenting skills later in life.

All of these issues are elaborated in the ARC Resource Pack on Exploitation and Abuse.
4.4 CHILDREN’S INVOLVEMENT IN FIGHTING FORCES

Key Learning Points

- Children associated with fighting forces are likely to have lived in a rigid hierarchical structure and may have acquired a distorted morality based on power, fear and brutality.

- Involvement in violence and brutality and possibly in involuntary and inappropriate sexual activity may have a severe impact on age-appropriate and culturally acceptable behaviour.

- Demobilisation may raise significant issues in terms of identity and self esteem and the sense of purpose in life.

- Not all of the child’s experiences with fighting forces will necessarily have been negative: it is important to acknowledge any positive elements and to consider the child’s loss of them in any rehabilitative programme.

There is a growing awareness not only of the particular needs of child soldiers, but of those of other children who are involved in fighting forces - children abducted or otherwise forcibly recruited not just as fighters but for use as “human shields”, porters and camp assistants, or for sexual purposes.

One of the most challenging effects on children of such experiences is that they have spent a significant part of their childhood in a strictly hierarchical structure and have experienced a socialisation process which serves the purposes of a military command. Clearly such experiences may make it difficult for children, upon release, to adjust and to re-learn new codes of behaviour and how to develop relationships not based on power and fear.

Children who have participated in violence and killing have probably been given messages about what such actions mean from the vantage point of armed forces: again, this may mean that children have to re-learn moral behaviour and acquire the ability to make moral judgements appropriate to civilian life. Some children do realise the terrible nature of their previous actions and hence may suffer greatly because of that realisation and the guilt and shame associated with it.

Girls who have been on active duty may find particular difficulty in adjusting to expected ways of how girls should behave in their society, and this may affect marriage prospects as well as adjustment to the role of wife and mother. Girls are particularly at risk of rape and prolonged sexual abuse, and this may affect the normal development of age-appropriate and culturally acceptable behaviour: in turn this can pose a challenge for successful social integration.

Some children - especially those who have had positions of responsibility in the fighting forces - may have particular difficulty in adjusting themselves to civilian life where their status is no longer recognised. Even young children may have taken on “adult” roles, responsibilities and authority: this may make it extremely difficult to return to the expectations associated with childhood - e.g. conforming to the norms and rules of school, or to the discipline and expectations of the family and community.
An essential aspect of rehabilitation is finding ways of promoting children’s self-esteem and a sense of hope and confidence in the future: this may be particularly difficult for children who have been recruited, partly as a reflection of their own perceptions of the lack of opportunities available within their own community. Experience suggests that once these children reintegrate back into more normal life in the community, many struggle with poor self-esteem and a confused sense of who they are, and need long-term support from their families and communities. It is not surprising that many remain vulnerable to re-recruitment.

One aspect of life within fighting forces that is not always well recognised is that children may well have had some positive experiences, intermingled with many negative and brutalising ones. For example, they may have been part of a highly supportive group-living situation, they may have had a strong sense of purpose, perhaps with in ideology which, though possibly imposed through an indoctrination process, may have given a sense of meaning to their actions. They may also have had strong personal relationships with their commanders despite the potential for an exploitative and brutal aspect of this relationship. These more positive sides of their experience cannot always be readily replaced, but unless children do have opportunities for good adult and peer-group relationships, a sense of purpose and self-esteem, they are likely to experience great difficulties in returning to more normal civilian life in the community.

The implications of these impacts on child development are explored in more detail in the ARC Resource Pack on Child Soldiers.

**TRAINING MATERIALS FOR TOPIC 4**

<table>
<thead>
<tr>
<th>Overhead 4.1: Key Learning Points for Topic 4</th>
<th>Summary of key learning points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exercise 4.1: The Effects of Frightening Experiences and Separation</td>
<td>Case Study Exercise</td>
</tr>
<tr>
<td>Exercise 4.2: The Effects of Separation</td>
<td>Case Study Exercise</td>
</tr>
<tr>
<td>Exercise 4.3: Separation</td>
<td>Sensitisation Exercise</td>
</tr>
<tr>
<td>Exercise 4.4: The Girl Soldier</td>
<td>The Effects of Experiences of Armed Forces and Exploitation on Child Development</td>
</tr>
</tbody>
</table>

**FURTHER SUGGESTIONS FOR TRAINING**

Facilitators should consult the relevant Critical Issues Resource Packs for additional material and exercises in the issues covered by this Topic.
KEY LEARNING POINTS

• There are many potential threats to the development of all children and adolescents in situations of armed conflict and displacement.

• Restoring a sense of normality in their lives may be achieved by restoring community structures, by re-establishing a routine and purpose to daily life, by promoting family life and parental competence and by building on the strengths and capacities of young people and advocating for their rights.

• Protecting children and adolescents from further harm may be achieved by avoiding further separations, inappropriate “trauma” responses, the unnecessary isolation of “vulnerable groups” and the further victimisation of victims.

• The presence of some risk factors may increase the vulnerability of children and adolescents to other, additional risks.

The previous Topic examined some of the more specific and critical threats to young people: Topic 5 returns to the theme introduced in Topic 2, that all children and adolescents in situations of armed conflict and forced migration face threats to their development and well-being. “Resource-focused” interventions may help to prevent risk, and enhance resilience by increasing the range of protective factors available to young people who are already at risk. A wide range of interventions can serve to promote child development by restoring a sense of normality in children’s lives and by preventing further harm. This Topic provides an introduction to some of the most important of these.

RESTORING A SENSE OF NORMALITY IN THE LIVES OF CHILDREN AND ADOLESCENTS

1. Restoring Community Structures

Situations of armed conflict - and especially the experience of flight and displacement - are enormously disruptive to children’s lives by creating massive change which frequently involves significant losses, and by seriously altering the child’s life course and sense of purpose and direction. Displacement undermines the social networks and institutions (family, school, religious organisation, community etc.) which support normal development, emotional security,
relationships that support children’s learning and their sense of self and identity. Forced migration tears the fabric of society and thus the developmental consequences on children are best viewed within their social and cultural context. Interventions which help restore previous social structures, which facilitate the setting-up of new and adaptive structures and which strengthen the capacity of existing social networks are most likely to yield positive impact for children’s development: some of these issues are elaborated in the ARC Resource Pack on Community Mobilisation - see especially Topics 3, 5 and 6.

2. Restoring a Structure, Routine and Purpose to Daily Life

For children and adolescents, establishing predictability is enabled through the trust, purpose and meaning that comes from sustained contact with the same people, from familiar routines and from continuity of cultural practices.

Daily structured activities - including play and recreation, informal and formal school and, where appropriate, work are especially important for children of all ages. Structure in daily life conveys a sense of purpose and dependability that can be a calming, stabilising element for the whole community as well as for its children. It also helps engender feelings of responsibility and respect for other people. Activities should be responsive to the needs, concerns and resources of the population and might include some of the following:

- organised play and safe spaces for free play;
- appropriate sports activities for girls and boys;
- traditional music, songs, dance, theatre, story-telling and familiar festivals;
- acquiring traditional knowledge and skills;
- drawing and painting;
- schooling - formal and/or non-formal as appropriate, and vocational training (see ARC Resource Pack on Education, especially Topics 2 and 4);
- key health, sanitation and nutrition and safety messages, including mines awareness where appropriate;
- training in conflict resolution skills such as communication, negotiation and decision making.

Gender issues need to be acknowledged: for example, in some situations, it may be easier for girls to continue to carry out traditionally-prescribed roles than for boys – especially in situations where it is impossible for boys to carry out tasks in relation to agriculture and other areas of work. On the other hand, in some contexts, girls are much less likely to have opportunities to attend school or take part in other social activities.

3. Promoting Family Life and Parental Competence

One of the most important contributions that can be made to improve children’s well-being is to help the adults in the family to re-build a sense of effectiveness as parents. Very often, parental capacity is affected by parents’ reactions to stressful events - depression, anxiety etc. - which, when compounded by the additional burdens which may be placed upon them, especially in refugee contexts, may serve to limit their responsiveness to their children. A wide range of different
approaches can have an impact on the well-being of parents - especially mothers: from appropriate and accessible health services to economic activities; from educational opportunities to cultural and recreational activities. Some programmes may specifically aim at enhancing parental competence (e.g. homecraft groups and parenting education): others attempt more generally to improve the quality of life and opportunities for the development of men and women. An emphasis on the empowerment of women may be especially significant.

It is particularly important to promote family-based care and family tracing for children who have been separated from their parents or previous carers. See further discussion on Topic 4 of this Resource Pack, and that on Separated Children, especially Topics 3 and 4. It is also vital to take steps to avoid further and unnecessary separations of children - see discussion below.

4. Building on the Strengths and Capacities of Young People

While it is true that children may have particular areas of vulnerability, it is important not to overlook their own capacity for active engagement in the issues affecting them. In this Resource Pack, emphasis has been placed children as agents in their own development. An over-riding image of children as “victims” emphasises their passivity and vulnerability. While it may not have been possible to influence the events that disrupted development, young people may have a key role to play in re-building their lives, with facilitation appropriate to their ages and capacities. The strengths and capacities of children and adolescents in refugee population are seldom fully appreciated. This is discussed further in Topic 7, and reference can also be made to the important principles and approaches outlined in Community Mobilisation Topic 7 on Mobilising Young People.

5. Advocacy for Children’s Rights and Needs

Promoting child and adolescent development requires careful examination of the intersection between important child protection and child development issues, and critical legal and policy matters. Some brief examples are given below, illustrating some ways in which policies and practices can be developed so as to enhance the opportunities for children to develop:

In a camp context in South East Asia, adolescents who had violated camp regulations were routinely placed in the camp stockade or jail. They were not separated from adult inmates and were subjected to both exploitation and abuse. In an extreme case, despite the protests of a refugee worker, one refugee youth was removed from the camp and placed in the local jail. Again he was not segregated from adult inmates and upon his eventual return to the camp, medical examination revealed that he had been repeatedly sexually abused. This extreme situation prompted another review of the camp’s detention policy, and ultimately the camp authorities accepted the responsibility for dealing with disciplinary matters for youth within the confines of the camp and in consultation with the child-focused agencies who were operating there.

A group of Sri Lankan children who had lost one or both parents in the civil war were refused entry to primary school because they had no birth certificate, and insufficient money to pay the high fee demanded to obtain one. An international
NGO working in the country brought the facts to the notice of the National Child Rights Coalition, which took the matter up with the education authorities. The children received their birth certificates and were able to attend school.

A national NGO, in collaboration with an international NGO, persuaded Rwandan authorities to allow women in prison to place their children with extended family outside of the prison. The establishment of a policy on regular return visits to their mothers helped maintain attachment between mother and child during the separation. For the children who remained with their mothers in prison, a stimulation programme was organised.

PROTECTING CHILDREN AND ADOLESCENTS FROM FURTHER HARM

Unfortunately it is not uncommon for interventions intended to assist children and families to actually make matters worse. The following are some examples.

1. Avoiding Further and Unnecessary Separations

Unintended separations can easily result from policies such as opening residential centres, careless documentation when children or their parents are admitted to hospital or feeding centres, or the poorly-organised evacuation of children and families from dangerous areas. The prevention of separation is considered in the ARC Resource Pack on **Separated Children**, Topic 2.

2. Inappropriate “Trauma” Programmes can be Deeply Damaging

Protecting children from further harm may require a careful appraisal of the means used to support them in coping with their experience of violence and displacement. Exploring these sensitive issues and the meaning they hold for a child can be important to the process of healing and recovery: but they require expertise in therapies appropriate to the context, and should take place in a stable, supportive environment with the participation of care-givers who have a solid and continuing relationship with the child. In-depth clinical interviews intended to awake the memories and feelings associated with the child’s worst moments may be very harmful, especially if conducted with an unprepared child by a stranger with limited knowledge of the culture. This kind of interview risks tearing down a vulnerable child’s defences and leaving him/her in a worse state of pain and agitation than before. For a child in a stressful and unsafe situation, it may be a good coping strategy to avoid recalling traumatic experiences. In any case, talking about intimate feelings and fears with anyone but one’s closest family is taboo in many cultures. These issues are explored in more detail in the ARC Resource Pack **Working with Children**, Topics 3, 4 and 5.

3. Avoiding the Inappropriate Isolation of “Vulnerable Groups”

Actions to address the needs of vulnerable groups of children and adolescents should ensure their long-term reintegration into their communities, and avoid the short-term assistance that may increase the probability of their marginalisation. Institutionalisation, for example, frequently results in further marginalisation and alienation from the wider society. Targeting separated children, orphans, former child soldiers etc. for special material assistance may be motivated by the desire
to assist vulnerable categories of young people, but may inadvertently heighten the potential for stigmatisation and conflict, especially in situations where material scarcity is the norm. Similarly, isolating “psychological trauma” from the other difficult and stressful aspects of the lives of children and offering a de-contextualised form of “treatment” can label children unhelpfully, isolate them from their peers and ignore current aspects of children’s lives which are creating difficulties.

**CASE ILLUSTRATION - TARGETING VULNERABLE GROUPS**

With support from an international NGO, a life-skills building programme was established through a local community association in a rural village in one of Mozambique's northern provinces. The programme included basic numeracy and literacy, recreation, access to viable trade skills and mentoring relationships with adult role models. The programme was opened to a wide range of economically marginalised adolescents, including those who had been internally displaced, were among returning refugees, original local residents and, recently demobilised child soldiers. As the long-term goal was to promote genuine reintegration into the local community, special programmes were not established for particular subgroups such as former child soldiers or unaccompanied children. There was a conscious attempt within the programme to address common problems and issues with support being reflective of individual needs, rather than being tied to membership of a special sub-group. Recreation programmes and cultural activities were also designed to be inclusive.

### 4. Avoiding the Further Victimisation of Victims

One of the most extreme examples of the need to protect children from further harm comes from insensitive responses to allegations of abuse and exploitation. It is distressingly common to find that children who have been sexually abused or exploited are not believed, or that they are blamed or even punished for the incident, and as a consequence experience not just a complete breakdown in trust in the adult world, but further marginalisation. Avoiding the danger of inflicting secondary trauma on children is dealt with in the ARC Resource Pack on Exploitation and Abuse, Topics 4, 8 and 9. As indicated above, inappropriate and insensitive clinical interviewing of traumatised children can also inflict serious secondary trauma.

### 5. The Presence of One Risk Factor can Increase Young Peoples’ Vulnerability to Others

Risk factors do not always occur in isolation from others, and the presence of one may make the individual children more vulnerable to others. Several examples can be cited. A child who is being abused within the family may choose to leave home and become vulnerable to exploitative work or to commercial sexual exploitation. Separated children who are not provided with adequate care and protection may be at enhanced risk of recruitment into fighting forces. A child with a learning disability may be both more vulnerable to sexual exploitation, and less able to respond to it appropriately than a child without such a disability. Finally, an absence of educational opportunities may expose children to greater risks of
exploitative child labour while at the same time denying the opportunities for learning skills which they can use to protect themselves.

**TRAINING MATERIALS FOR TOPIC 5**

<table>
<thead>
<tr>
<th>Material</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overhead 5.1: Key Learning Points for Topic 5</td>
<td>Summary of key learning points</td>
</tr>
<tr>
<td>Overhead 5.2: Steps to Promoting Child Development in Situations of Conflict and Forced Migration</td>
<td>Key Points</td>
</tr>
<tr>
<td>Exercise Ex5.1: Promoting Child Development in Programming</td>
<td>Case Study Exercise</td>
</tr>
<tr>
<td>Exercise Ex5.2: Identifying Opportunities for Promoting Child Development</td>
<td>Discussion Exercise</td>
</tr>
</tbody>
</table>
**KEY LEARNING POINTS**

- *Whenever a decision is to be made that will affect an individual child, or a group of children, their best interests should be a primary consideration:* this is a fundamental principle in the Convention on the Rights of the Child, is an important principle in promoting child development, and is enshrined in UNHCR’s policy framework.

- “Best Interests” is a clear, simple concept: but implementing it often requires handling complex and sometimes conflicting considerations in which complete information may not be available.

- Decisions in a child’s Best Interests are likely to have to be made by individuals with appropriate qualifications and expertise, including the ability to engage the child himself or herself in considering the various options.

- “The Best Interests of the Child” principle is a valuable tool in programming, in monitoring and for impact assessment. A child-centred situation analysis, in which young people themselves are involved, may be required in order to assess the likely impact of particular policy decisions on children.

**“THE CHILD’S BEST INTERESTS” IS A FUNDAMENTAL PRINCIPLE IN DISPLACEMENT SITUATIONS**

The Best Interests principle is found widely in national law regarding children, and its inclusion in Article 3 of the United Nations Convention on the Rights of the Child has given it global application. But as well as being a central legal principle, the concept of the child’s Best Interests is vital from a child development perspective in ensuring that the child’s well-being and future development are central to decision-making.

The CRC broadens the scope of the Best Interests principle to relate it not just to decisions about individual children, but to young people collectively. Article 3 of the Convention states, "In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration". This is presented as Overhead 6.2. Because UNHCR has adopted the CRC as its normative frame of reference, the rule should be applied to any decision made which affects children of concern to UNHCR, whether individual
children or groups of children. The UNHCR “Policy on Refugee Children”\(^1\) states that, “In all actions taken concerning refugee children, the human rights of the child, in particular his or her best interests, are to be given primary consideration”. Like the Convention, this policy applies the principle to children individually and collectively, but broadens its application to "all actions" and makes Best Interests the primary consideration for such decisions, rather than only a primary consideration.

The Best Interests of the child principle is a valuable tool for impact assessment and monitoring in programming. Because children are more physically vulnerable than adults, when decisions are made that affect a population generally, greater weight must be given to assessing the impact on the youngest members. Because children are still developing, conditions that pose hardships or discomfort for adults may have serious long-term consequences for children and adolescents.

The concept is simple: when authorities make decisions concerning a child or children as a group, their Best Interests must be a primary basis for the decision. In practice, however, a complex set of considerations can arise when applying it in a specific situation. The best interests principle has been criticised because it does not provide detailed guidance on how to determine what action, in fact, is in the best interests of a child or group of children. At times parties standing on opposite sides of an issue concerning children will each claim the child’s “best interests” as the basis for their position.

The principle recognises that an individual child (and more so for a group) has more than one “interest”. When considering an action, the entire range of a child's needs and rights (physical, psychological, social, cultural, spiritual, developmental, legal, etc.) must be taken into account - and also their immediate and long-term implications. The information available is often limited, and the interests that must be considered can be competing. All this must be taken into account to make a decision that is, on balance, the best one for the child(ren) concerned.

This Topic considers the application of the Best Interests principle to individuals and to groups, examines issues of who decides what is in the best interests of a particular child or group of children, and how decisions should be made.

THE “BEST INTERESTS” PRINCIPLE APPLIED TO INDIVIDUALS AND GROUPS

This important principle should be applied both to decisions relating to individual children, and to broader policy matters and decisions relating to groups of children.

**Individual** Best Interests decisions will need to be made in a wide range of different situations, often raising difficult issues and dilemmas. Such situations may include the following.

- **Repatriation situations**: as with adults, separated children can have legitimate claims to refugee status which must be considered before they can be sent back as part of a larger repatriation movement. Sometimes adolescents may have needs and opinions different from those of their families, and these need to be taken into account when repatriation decisions are being made.

- **Family reunification situations**: where a decision needs to be made about the possibility of a separated child living, for example, with grandparents in the
country of origin, an uncle in a second country of asylum or remaining with an unrelated family in a refugee situation.

- Situations where abuse or exploitation have been revealed: for example, is it in the best interests of a teenage girl who has alleged sexually abuse by a step-parent to remain in the family where the risk of further abuse may exist, or to remove her to another family against her will?

**Group situations** can also raise questions of the Best Interests of children. In refugee contexts, the following are some examples of situations which may emerge.

- In some displacement situations basic education has been denied to children because the availability of schooling was seen to discouraging families from repatriating. Such a policy may be interpreted as violating the Best Interests principle as well as the specific right of all children to education specified in the Convention on the Rights of the Child.

- As a displaced population progresses toward self-sufficiency, decisions must be made about how and when to reduce food rations. The Best Interests principle may be useful in ensuring that the specific needs of children are continuing to be met.

- In situations where there is ongoing conflict, difficult decisions may have to be made about whether to assist the population where they are or to arrange to move some or all members to a safer location. Sometimes other groups organise an evacuation and UNHCR must decide whether to participate, if only to reduce the likelihood of family separation or other problems. In all these cases the Best Interests principle must be considered, and a long-term view taken.

- The large-scale demobilisation of former child soldiers may raise questions about whether they should be allowed to return directly to the families (where this is possible) or whether they should all first be admitted into some form of residential interim or transit care.

**KEY OBJECTIVES OF “BEST INTERESTS” DECISIONS**

The key objectives involved in assessing the best interests of children consist of the following:

1. ensure their *protection* - both in terms of physical safety and legal rights;

2. ensure that care arrangements provide for both their *physical and emotional needs*;

3. provide for their ongoing *developmental needs* - psychological, social, educational and physical, both for the immediate future and in the long-term;

4. provide for their *participation* in these decisions, in keeping with their maturity and capacity;

5. put *their safety and welfare ahead of all other considerations*.

These points appear as Overhead 6.3.
WHO DECIDES WHAT IS IN THE BEST INTERESTS OF CHILDREN?

Where one or both parents are present, national and international law generally recognise their authority in deciding what is in the best interests of their children. However, the Best Interests principle is specified as the basis for courts or other authorities to make decisions concerning the protection and care of children who are without a parent or normal guardian, whose parents are in a legal disagreement over their care and protection, or where parental rights have been terminated to protect a child's safety or well-being, as in a case of child abuse.

In many countries, national law provides for a guardian responsible for the protection of a child not in the care of her or his parents. Often this is a department of child welfare. Court proceedings may be involved to appoint a specific individual as guardian. The guardian is charged with responsibility to ensure the protection and care of a child and to make decisions that are in his or her best interests. Very often, however, particularly in the developing world, guardianship of separated or orphaned children is determined by customary practice rather than the specifications of national law. In a situation of displacement it is important for government and NGO personnel and UNHCR staff members to know what applicable national law specifies concerning guardianship of separated children and to have an understanding of relevant customary practices.

It is also true, however, in the context of a failed state or a complex emergency, that both legal and customary systems of guardianship may have broken down and procedures must be put in place by those who intervene to make decisions about the immediate protection and care of separated children. Within the guidance of the Convention on the Rights of the Child, the Best Interests principle is the basic operational guideline for such decisions. However, those who intervene to protect children must carefully avoid taking action in the short run that may not be in their long-term best interests. For example, UNHCR has included policy guidelines in Refugee Children that prohibit adoptive placements in an emergency, before family tracing is possible. Particularly in situations where there is no legitimate state authority responsible for the care and protection of separated children, UNHCR is obliged as part of its protection mandate to ensure that an appropriate, if interim, system is put in place to make Best Interests decisions. Likewise, UNHCR has an obligation to ensure that the Best Interests of children and adolescents are given primary consideration when decisions are taken that affect them as a group. UNHCR's Refugee Children: Guidelines on Protection and Care and the Office's "Policy on Refugee Children" provide guidance on how to do this.

Where a procedure must be put in place to make Best Interests decisions regarding individual children it is essential that suitably qualified personnel are involved. The qualifications needed depend in large part on the nature of the decisions they must make (e.g., medical intervention, evacuation, type of placement for care, protection from recruitment). There are, however, certain kinds of knowledge and expertise that are generally needed among the personnel involved:

- a solid understanding of the practical implications of stages of child and adolescent development and psycho-social well-being
• an understanding of the issues involved in the decision – physical, psycho-
social, educational etc.
• a knowledge of the safety implications and legal context
• an understanding of the cultural and religious context
• a knowledge about the social and economic context
• the ability to engage the child (or children) in discussion about the available
options

It is vital that the decision-maker should be able to separate the interests of the
child(ren) from those of all others, including parents, other adults, social groups,
institutions and the state, and subordinate the interests of these other parties in
favour of the child’s welfare. The decisions being taken can have profound long-
term implications, and very often the matter of determining Best Interests is
actually a choice among the least damaging of a limited number of alternatives.
The decision-maker must be able to balance the options and make such choices
in a way that is both informed and objective.

Those personnel charged with making Best Interests decisions must carefully
consider how children themselves are involved in decision-making: this important
issue is discussed below.

HOW ARE DECISIONS MADE ABOUT CHIDREN’S BEST INTERESTS?

Identifying the various, interwoven “interests” of children and adolescents,
individually or in groups, is difficult and requires a range of skills, but this is only
part of the process. Making a decision involves considering all these factors to
reach a conclusion that takes into account the weight that should be given to each.
This point was well made in Unaccompanied Children: Care and Protection in Wars, Natural Disasters, and Refugee Movements²:

...What is truly best for a child cannot be determined by a general
formula. What is best for one child will not necessarily be best for
another. The touchstone is what is best for the individual child in his
or her particular circumstance.

In the final analysis determination of a child's best interests or those of a group
requires judgement that takes into account a range of relevant, and possibly
competing factors, within the realm of achievable possibilities. For example, safety
versus maintaining family attachments are at stake when the evacuation of
children is proposed. In some cases where tracing on behalf of a separated child
is successful, a difficult choice is required between preserving a child's attachment
to a long-term foster family and returning the child to the biological parents. In
the context of repatriation, difficult decisions are sometimes required as to whether a
child who is orphaned or whose parents cannot be traced should stay in a foster
family in a country of asylum, or be returned to uncertain care in the country of
origin. So far as possible, such determinations must be made on a case-by-case
basis using the Best Interests principle. (Exercise 9.1 in the ARC Resource Pack
on Situation Analysis provides a complex exercise which involves determining
the best interests of a large group of Rwandese children who had been fostered by
families in the host country).
**Child Participation** will be an essential part of the process: this important principle is discussed in greater detail in Topic 7 of this Resource Pack. Article 12 of the Convention on the Rights of the Child requires state parties to ensure that children capable of forming their own views have the opportunity to express these in all matters that affect them, and that these views are given consideration in keeping with the age and maturity of the child. Also, Best Interests decisions require information that can only come from the individual child(ren) concerned. In some situations, decisions in the child’s best interests may need to over-ride the stated wishes and opinions of the child: such decisions should only be taken after very careful consideration, and it is vital that the reasons for, and implications of the decision are explained carefully to the child.

A **child-centred situation analysis** may be required in order to assess the likely impact of particular policy decisions on children - for example in issues such as the phasing-out of food rations or examining the impact of education when large-scale repatriation is envisaged. The involvement of young people themselves will be an essential part of the process.

### TRAINING MATERIALS FOR TOPIC 6

<table>
<thead>
<tr>
<th>Overhead 6.1: Key Learning Points for Topic 6</th>
<th>Summary of key learning points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overhead 6.2: Best Interests - CRC</td>
<td>Quotes the CRC Article 3</td>
</tr>
<tr>
<td>Overhead 6.3: Key Objectives of Best Interests Decisions</td>
<td>Lists key points</td>
</tr>
<tr>
<td>Exercise 6.1: How to Apply the Best Interests Principle in Concrete Situations</td>
<td>Case Study Exercise – group of children</td>
</tr>
<tr>
<td>Exercise 6.2: Best Interests in Decision-Making</td>
<td>Brainstorm and Discussion Exercise</td>
</tr>
</tbody>
</table>

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KEY LEARNING POINTS

- The notion of participation is important from both a child rights and a child development perspective.
- Participation can promote child and adolescent development and can enhance decision-making about young people.
- It is important to consider cultural factors and gender issues when planning to develop child participation in programming.
- Child and adolescent participation can be difficult and complex to implement in some contexts. Clarity of objectives and methods, and careful consideration of areas of difficulty will greatly facilitate effective implementation.
- It is important to avoid tokenistic participation. Participation requires a real commitment by the adults who are working with young people to ensure that the principle of participation is embedded within the programme.

Topic 2 emphasised the need to integrate both a children’s rights and a child development perspective into programming. Child participation is often thought of as a right, but there are important child development aspects to this important concept which will be examined in this Topic.

Participation literally means to take part in something, to have a hand in it, join in, share, be a party to it, and so on. In the context of relief and development activities, child participation can be described as “listening to children, giving them space to articulate their own concerns, and taking into account the children’s maturity and capacities, enabling them to take part in the planning, conduct and evaluation of activities, within or outside the family sphere, which may imply involving them in decision making”\(^1\). This is reproduced on Overhead 7.2.

PARTICIPATION AS A CHILD RIGHTS CONCEPT

The notion of participation is firmly embedded in the Convention on the Rights of the Child. Article 12 states “State Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the view of the child being given due weight in accordance with the age and maturity of the child”: this appears as Overhead 7.3.
In addition to this important provision, Article 13 refers to the child’s right to freedom of expression, Article 14 refers to the child’s right to freedom of association and of peaceful assembly. Article 17 stresses the importance of children’s access to information.

Roger Hart describes participation as “the fundamental right of citizenship” and is of particular importance in underlining the notion of children as subjects of rights and not merely as objects of them. But participation does not just happen: it needs adults to provide a facilitating environment to enable young people to participate in accordance with their emerging competencies.

PARTICIPATION AND CHILD DEVELOPMENT

Participation is a vital aspect of child development, and can be examined under three headings:

1. Children are active in their own development.

In Topic 2 a “transactional” approach to child development was suggested, in which children - from a very young age - are responsive to and participate in shaping their environment. Children are both influenced in their development by their environment, and in turn they influence it. A healthy, active baby, for example, will influence parents’ behaviour and will cause them to give him/her more positive attention than would a passive or constantly irritable baby. As children grow up, there is a recognisable sequence of their evolving capacity to participate, though there will be both individual and cultural differences about the actual ages at which particular competencies are developed.

Competencies for participating in social interaction and decision-making will include the following:

- language ability – the ability to communicate and to use language to collaborate with others;
- empathy - the ability to understand the feelings and views of others;
- abstract thinking - for example the ability to conceptualise an unseen process towards a non-concrete goal;
- an understanding of time;
- the capacity for controlling one’s impulses - i.e. the immediate and self-centred satisfaction of needs and wishes;
- the ability to understand and accept that a participatory exercise may benefit other people rather than oneself;
- the ability to concentrate, listen, analyse, project one’s point of view etc.;
- the ability to control emotions, especially anger and frustration.

In general, children aged around 5, 6 and 7 are able to participate in and take decisions about activities which are very concrete and familiar and where the results show themselves immediately. From the age of around 8 and 9, children’s competence in participation develops rapidly and by the age of 10 - 12, many of the competencies listed above will be acquired at quite a mature level, though care needs to be taken that the issues involved are understood fully. Experience suggests that, in general, adolescents are able to be very active participants and
can be engaged in programmes at a deep level. It must be remembered, however, that there will be significant cultural differences regarding the age at which particular competencies are acquired, as well as individual differences. There are also significant issues regarding both gender and the cultural value attached to the participation of children, which will be discussed below.

2. **Enabling children to participate can enhance their development.**

Participation involves listening to children, in a non-patronising way, taking their ideas and opinions seriously, and (where appropriate) allowing them to take responsibility for making decisions. This can be validating for children and can serve to enhance their self-esteem and confidence, as well as enabling them to acquire skills such as those outlined above. There is also some research evidence which suggests that when children and adolescents have opportunities to participate meaningfully and to contribute to the environment in which they are involved, resilience is enhanced.

3. **Child and adolescent participation can enable better decisions to be made.**

At the most basic level, planning for individual children (for example, planning interim care, family tracing etc. for a separated child) will be much more effective if the child is enabled to reveal information about herself and her family, if she is informed about the progress of family tracing and if she is involved in discussions and decisions about her future (depending, of course, on age and ability to participate). At a broader level, programme planning and development will be enhanced by child participation: for example, a reproductive and sexual health programme will be most likely to meet the particular needs of young people if they are involved in a meaningful way in identifying the problems they experience, and in determining the focus of the programme and the way it is to be run: they are also more likely to use the programme if they feel some ownership of it. See ARC Resource Pack on **Situation Analysis**, Topic 8, for ideas on involving young people in situation analysis and programme planning. The Resource Pack on **Sexual and Reproductive Health** (Topics 2 and 3) examines the importance of participation in decision making.

**PARTICIPATION: CULTURAL AND GENDER ISSUES**

The idea of child participation may well challenge what is generally considered appropriate behaviour for children in many societies and child-rearing traditions, and may be difficult to introduce in contexts in which it is the norm for “children to be seen but not heard”. This has to be weighed against some of the real advantages which can result from child participation, while a sensitive approach needs to be taken in order that the key players - staff, parents, the children themselves etc. - can see the benefits and not perceive participation as a threat.

Participation implies **responsibility** and it may be helpful to emphasise this fact when working towards a more participatory way of working. It is worth noting that the African Charter on the Rights and Welfare of the Child includes a section on the Responsibilities of the Child (Article 31). It is through the collaborative work with others that children as well as adults learn to exercise responsibilities.

Real participation is unlikely to be achieved unless the staff involved in a programme are really committed to it. One study has suggested that staff working
within a hierarchical, authoritarian organisation that does not encourage staff participation are likely to find the idea of child participation difficult.

Gender issues can be highly significant: in many contexts, there may be more organised opportunities for boys to participate than girls, which may reflect both cultural attitudes towards gender, and the fact that girls often have a greater burden of work placed upon them in the home. It is not uncommon to find programmes designed mainly around the needs of boys, especially in refugee camps where they may be more visible - and perhaps perceived as being more potentially troublesome - than girls. Particular care may need to be taken to ensure that girls become actively engaged, and to ensure that participation in decision-making is not dominated by boys.

PARTICIPATION - IMPLEMENTATION ISSUES

The principle of child participation is often now promoted by donors and by international agencies, but in practice fieldworkers frequently find the concept difficult to apply in a meaningful way, especially in cultures in which the idea is unfamiliar. Roger Hart has suggested that child participation can be depicted as a ladder, with various steps from activities which he describes as “non-participation” (manipulation, decoration and tokenism) through to various more positive degrees of involvement. These ideas are set out in Handout 7.1 and in Overhead 7.4. One of the limitations of Hart’s model is, firstly, that it is sometimes assumed that participation on the higher rungs of the ladder is always better than at the lower rungs of participation. The model should be seen as enabling adults to establish the conditions that enable children to participate at whatever level is appropriate to the particular circumstances.

A second limitation is that, in practice, participation cannot always be located along such a single continuum. Van Beers’ definition (see above) helps to highlight two distinct aspects of participation: at a basic level, it can involve children in articulating their ideas and concerns and taking part in something: at a more sophisticated level, it involves empowering them, enabling them to make decisions, take autonomous action, organise themselves etc. Programmes may seek to involve young people in the former way but not the latter, or vice versa. For example, in a non-formal education programme, the approach can be highly participatory, with children very actively involved in their own learning, but this basic level of participation could take place within a setting in which the centre’s objectives, the curriculum, teaching methods etc. have been developed by adults without any involvement of the children. In this sense, children are being actively involved in a participatory way in centre activities, but may not be empowered through involvement in the planning, conduct and evaluation of the programme. This may, of course, be entirely appropriate, depending on the circumstances.

Hart’s ladder is very useful in highlighting the danger of tokenism. Effective participation cannot be something “added on” to a programme, but needs to be embedded in the programme on the basis of very careful thought and planning. Efforts to help children "express their views" sometimes become rather prescribed, providing narrow and limited avenues for particular children or youth to speak to an audience of adults. Indeed, all too often such agendas have not emerged from children themselves, and it is not always clear that selected views in a formal context are representative of the broader population of children. A developmental
perspective on participation emphasises the fact that the nature and format of participation does not fit a pre-set template or fixed time frame. Rather, genuine participation must evolve according to basic principles of child development and within the given cultural, socio-economic and political context.

Appropriate and effective child and adolescent participation requires careful consideration of questions such as the following:

- What are the objectives of involving young people? Are they appropriate to the children’s emerging competencies and skills?
- In what areas and aspects of the programme are young people being involved? What are the appropriate limitations of child participation in this context?
- What are the local cultural attitudes towards child participation? How will participation be explained to the young people, parents, community leaders? What difficulties can be anticipated and how will they be overcome?
- What methods and techniques will be used to involve young people?
- Have gender issues been thought about and addressed? Will the participation of girls, or of boys, require particular approaches or techniques?
- Are the staff committed to child participation? Have they experienced the benefits of participation themselves? Do they see it as any kind of threat to their own position, and if so how will this be addressed?

This list is reproduced as Handout 7.2.

**CHILD AND ADOLESCENT PARTICIPATION AND COMMUNITY MOBILISATION**

The mobilisation of young people to take collective action within their own communities is an approach which strongly emphasises the participation of young people: this is examined in some detail in the ARC Resource Pack on **Community Mobilisation**, Topic 7.

### TRAINING MATERIALS FOR TOPIC 7

<table>
<thead>
<tr>
<th>Material</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Overhead 7.1: Key Learning Points for Topic 7</td>
<td>Summary of key learning points</td>
</tr>
<tr>
<td>Overhead 7.2: A definition of Child Participation</td>
<td>Provides a definition</td>
</tr>
<tr>
<td>Overhead 7.3: Child Participation – the CRC</td>
<td>Quotes Article 23</td>
</tr>
<tr>
<td>Overhead 7.4: The Ladder of Children’s Participation</td>
<td>Illustrates Hart’s “Ladder”</td>
</tr>
<tr>
<td>Exercise 7.1: Programme Audit</td>
<td>Group exercise</td>
</tr>
</tbody>
</table>
Exercise 7.2: Involving Adolescents  |  Planning Exercise
Handout 7.1: The Ladder of Children’s Participation  |  Illustrates Hart’s “Ladder”
Handout 7.2: Planning Issues  |  Lists questions to consider when planning for children’s participation

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Different participants are likely to have different learning needs and priorities. We have divided participants into three broad groups: senior managers, sector co-ordinators and field staff.

**Senior managers** are those people who have key responsibility for an NGO’s operations in a country or region or a UNHCR Section. They will have overall responsibility for strategy and resource allocation within the organisation’s policy framework. Senior managers’ needs are likely to be best served through briefings.

**Sector co-ordinators** comprise those people who have responsibility for a particular aspect of their agency’s work in a country or region or who have a responsibility for a particular function within an operation, such as for example UNHCR programme, protection or community services officers. Sector co-ordinators are those responsible for translating policy into practice and ensuring that programme budgets reflect the necessary resources to support good practice.

**Field staff** are those people working in the field who are responsible for implementing the programme activities. They often have considerable front-line experience. Field staff may value the opportunity to develop and practise new skills as well as develop their knowledge and understanding.

Training programmes should be designed with the responsibilities and learning needs of these different groups in mind. If possible, participants from different groups should be trained separately but if this is not possible, exercises and input should be selected which will meet the needs of all groups. It may be possible to use different small group exercises to address the needs of each type of participant in a mixed group workshop.

Two types of programme are included in this Resource Pack. The first describes a half day Awareness-Raising Workshop. The programme makes detailed reference to materials from the Resource Pack and describes how a facilitator might use these materials to conduct a session lasting three hours.

The second example is for a full day workshop. It is written in the form of a Session Plan which covers:

- the overall aim of the training session;
- specific learning objectives;
- a description of what will be covered and the sequence to be followed;
- the timing for each part of the session;
- who will take responsibility for the different parts of the programme;
• what inputs and exercises will be used;
• what materials (e.g. handouts, overheads, briefing papers, index cards) will be required;
• what equipment (e.g. flipchart, overhead projector, blackboard, video) is needed.

The purpose and development of session plans are described in detail in the **ARC Facilitator’s Toolkit**.

Both programmes are intended as guidance examples only. It is very important that the facilitator should think carefully about the group of participants with whom he or she will be working and devise a programme that takes into account:

• the role and responsibilities of the participants;
• the learning needs of the participants;
• their existing level of knowledge;
• their interest in the subject;
• their willingness to share experience and admit to gaps in their knowledge / skills;
• current / local issues and priorities for the participants;
• the amount of time they have available;
• their position in their organisation.

Any training programme should be devised, if possible, in consultation with the intended participants. If it is not possible to consult with all participants (for example, by sending out an application form including questions about their expectations for the training), the facilitator should try to speak to a sample of participants before making final decisions about the programme.

The facilitator should also consider:

• the range of topics to be covered;
• the order in which topics should be addressed;
• how to encourage the sharing of experience and information between participants;
• who will carry out the training;
• what methods will be most appropriate for the participants.

More detail on the process of training can be found in the **ARC Facilitator’s Toolkit**

Remember to build in a workshop evaluation - you will find ideas for this in the **ARC Facilitator’s Toolkit**
DETAILED PROGRAMME FOR A HALF DAY AWARENESS SESSION

This three and a half hour programme is designed to provide participants with an overall view of the subject and an introduction to the key issues.

LEARNING OBJECTIVES

By the end of the workshop, participants will be able to:

- understand some of the complexities in defining children and childhood in differing cultural contexts
- apply a child development framework to children and adolescents in different contexts
- understand some of the principle threats to the development of children and adolescents in situations of forced migration and conflict
- describe ways in which child development can be best promoted for children at different ages and stages of development
- understand that the Best Interest Principle must be applied in all situations where decisions are taken about the future of children and adolescents

PREPARATION

The facilitator should prepare a comprehensive information pack for the participants that includes:

1. copies of the relevant handouts;
2. a copy of the Reading List and relevant readings;
3. copies of relevant materials from the region / country / locality (e.g. research papers, monitoring reports).

If possible, this pack should be sent out in advance.

The facilitator should gather any locally relevant information on the Topics to be addressed in the training and identify individuals with specific expertise who could act as resource persons. All participants can be asked to bring along relevant material to display / share with others.

The facilitator should study the notes for each Exercise carefully to ensure that all the necessary materials are prepared in advance.
### Introduction

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Preparation</th>
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</thead>
<tbody>
<tr>
<td>15 mins</td>
<td>Introduce the session and introduce the participants to each other.</td>
<td>Prepared flipchart or overhead</td>
</tr>
<tr>
<td>5 mins</td>
<td>Present the learning objectives for the session using a prepared flipchart or overhead.</td>
<td>Overhead 1.0</td>
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</tbody>
</table>

### Defining Children and Childhood

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Preparation</th>
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</thead>
<tbody>
<tr>
<td>40 mins</td>
<td>Brief presentation based on the Briefing Notes in Topic 1.</td>
<td>Exercise 1.1</td>
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<tr>
<td></td>
<td>Introduce and facilitate Child and Adolescent Development Exercise 1.1: Discussion Exercise.</td>
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</table>

### Integrating Child Development Thinking into Programmes for Children

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Preparation</th>
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<tbody>
<tr>
<td>40 mins</td>
<td>Give a brief presentation using the Child Development Framework (Handout 2.1) and information from the Briefing Notes for Topic 2. Provide local examples where possible.</td>
<td>Exercise 3.1</td>
</tr>
<tr>
<td></td>
<td>Introduce and facilitate Exercise 3.1: Using a Child Development Framework.</td>
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</tbody>
</table>

### Critical threats to Child Development

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Preparation</th>
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</thead>
<tbody>
<tr>
<td>10 mins</td>
<td>Using Overhead 4.1, provide a brief presentation of the key threats which face adolescents and children in situations of forced migration and conflict. Invite participants to provide local examples from their own experience.</td>
<td>Overhead 4.1</td>
</tr>
</tbody>
</table>
Promoting Child Development in Existing Programmes

45 mins  Brief presentation with Overhead 5.2.  
Introduce and facilitate Exercise 5.2: Identifying Opportunities for Promoting Child Development.  

Exercise 5.2

Applying the Best Interest Principle

15 mins  Brief presentation about what this principle is, and the key objectives (use Child and Adolescent Development Overhead 6.2).  
Questions and answers.  

Overhead 6.2

Conclusion

10 mins  Brief evaluation and closing comments.
SESSION PLAN FOR A DAY WORKSHOP ON CHILD AND ADOLESCENT DEVELOPMENT AND DISABILITY

This programme has been written in the form of a training plan to demonstrate how materials from more than one Resource Pack can be combined to create a workshop which is customised to the needs of a particular group of participants. It is intended as an example only.

OVERALL AIM:

To encourage the participants to look at the whole child when considering issues around disability; to look behind the disability to understand and plan for all the developmental needs of children with disabilities.

LEARNING OBJECTIVES

By the end of the workshop, participants will:

- be more aware of their own understanding and attitudes to disability;
- have examined what actually disables children in different situation (often not the disability itself);
- have a clearer understanding of factors which contribute to child development;
- have the opportunity to reflect on a successful approach to working with children with disabilities in the community and to apply some of these ideas to participants’ own working situations;
- have an opportunity to discuss interventions which enhance resilience in children and adolescents;
- to apply this understanding to planning for support for children with disabilities in refugee situations;
- have analysed why some children with disabilities are excluded from primary schools;
- be able to suggest strategies for promoting change in attitudes and behaviour towards children with disabilities;
- have had the opportunity to plan for change within their own programmes and areas of work.
## Timing Content Methods Materials Resources & Equipment Responsibility

<table>
<thead>
<tr>
<th>Timing</th>
<th>Content</th>
<th>Methods</th>
<th>Materials</th>
<th>Resources &amp; Equipment</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td>15 mins</td>
<td>Introductions</td>
<td>Short input by facilitator</td>
<td>Child and Adolescent Development Overhead 1.0: Key Concepts</td>
<td>Overhead projector</td>
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</tbody>
</table>

<p>|                                                        |                                                        | Disability Overhead 1.0: Key Concepts                                      | Flip chart and pens                                         |                                                      |
|                                                        |                                                        |                                                                     |                                                             |                                                      |
| 30 mins | <strong>What does “disabled” mean?</strong>            | Small group work and discussion      | Disability Exercise 2.1                                                 | Prepared flip chart with questions and situations          |                                                      |
| 15 mins | <strong>Who is disabled?</strong>                      | Small group work and plenary         | Disability Exercise 2.2                                                 | Participants' Notes for this exercise                      |                                                      |
|                                                        |                                                        |                                                                     | CAD Exercise 3.1                                           |                                                      |
| 60 mins | <strong>Applying a Child Development Framework</strong>| Input by the facilitator, discussion, small group work | CAD Exercise 3.1                                                   | Participants' Notes for this exercise                      |                                                      |
|                                                        |                                                        |                                                                     | CAD Overhead 2.7?? : Child Development Framework           |                                                      |
| 45 mins | <strong>Different Approaches to Disability</strong>    | Case study and discussions           | Disability Exercise 3.2: Case Study from Nepal                         | Participants' Notes for this exercise                      |                                                      |
|                                                        |                                                        |                                                                     |                                                              |                                                      |
| 15 mins | <strong>The concepts of risk and resilience in children and adolescents</strong> | Input by facilitator | Short input by the facilitator using Briefing Notes from CAD Topic 3 and Overhead 3.1 | CAD Overhead 3.1                                           |                                                      |</p>
<table>
<thead>
<tr>
<th>Time</th>
<th>Activity Description</th>
<th>Activity Type</th>
<th>Exercise/Handout/Notes</th>
<th>Additional Notes</th>
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</thead>
<tbody>
<tr>
<td>45 mins</td>
<td>Promoting coping skills for children with disabilities in refugee situations</td>
<td>Small group work</td>
<td>Disability Exercise 4.1</td>
<td>Participants' Notes for this exercise Cards Flip chart paper and pens</td>
</tr>
<tr>
<td>45 mins</td>
<td>Why are children with disabilities excluded from school?</td>
<td>Group work</td>
<td>Disability Exercise 5.2</td>
<td>Disability Handout 5.3 Disability Overhead 5.3 Participants Notes for this exercise</td>
</tr>
<tr>
<td>45 mins</td>
<td>Programme Audit: Who's participating?</td>
<td>Small group exercise and plenary.</td>
<td>CAD Exercise 7.1. Adapt this exercise to apply to children with disabilities</td>
<td>CAD Handout 7.1?</td>
</tr>
<tr>
<td>60 mins</td>
<td>Action Planning</td>
<td>Group work</td>
<td>Disability Exercise 6.3</td>
<td>Disability Overhead 6.3 Participants' Notes for this exercise</td>
</tr>
<tr>
<td>30 mins</td>
<td>Review and evaluation</td>
<td>Evaluation exercise</td>
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<td>1.0</td>
<td>Key Concepts for this Resource Pack</td>
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<td>1.1</td>
<td>Key Learning Points for Topic 1</td>
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<td>1.2</td>
<td>CRC Definition: Who is a Child</td>
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<td>1.3</td>
<td>Views of Children &amp; Adolescents</td>
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<td>2.1</td>
<td>Key Learning Points</td>
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<td>2.2</td>
<td>The Impact of Poor Nutrition (1)</td>
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<td>2.3</td>
<td>The Impact of Poor Nutrition (2)</td>
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<td>3.1</td>
<td>Key Learning Points</td>
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<td>3.2</td>
<td>Risk Factors for Children</td>
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<td>3.3</td>
<td>Parental Risk Factors Affecting Children</td>
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<tr>
<td>3.4</td>
<td>Protective Factors for Children</td>
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<td>3.5</td>
<td>Protective Factors for Parents</td>
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<td>4.1</td>
<td>Key Learning Points</td>
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<td>Key Learning Points</td>
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<td>5.2</td>
<td>Steps to Promoting Child Development</td>
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<td>6.1</td>
<td>Key Learning Points</td>
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<td>6.2</td>
<td>The Best Interests Principle in the CRC</td>
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<td>6.3</td>
<td>Key Objectives of Best Interests Decisions</td>
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<td>7.1</td>
<td>Key Learning Points</td>
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<td>7.2</td>
<td>A Definition of Child Participation</td>
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<td>7.3</td>
<td>Child Participation – the CRC</td>
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<td>7.4</td>
<td>The Ladder of Participation</td>
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</table>
Key Concepts

1. There is no universal definition of children or of childhood.
2. Children and adolescents have needs and capacities that are significantly different from those of adults.
3. There are significant cultural differences in the ways in which children and adolescents develop.
4. Gender differences are especially significant, as are differences related to social status, class/caste and specific needs.
5. It is important to integrate both a child rights and a child development perspective into programme planning.
6. Armed conflict and forced migration are likely to impose various risks that impact on children’s development.
7. Children and adolescents also have the capacity to be resilient in the face of adversity.
8. Strengthening supportive networks may be the most effective way of enabling children and their families to cope with adverse circumstances.
9. Conflict and migration can pose some critical threats including experiences of violence and fear; separation; exploitation and abuse; and involvement in fighting forces.
10. A high priority should be given to restoring a sense normality and protecting from further threats.
11. The Best Interests of the child is an important principle in both legal and child development contexts.
12. As well as being a legal right, child participation can promote child and adolescent development and enhance decision-making about young people.
Key Learning Points - Topic 1

- There is no universal definition of who is a child, adolescent or youth. Chronological age is not a sufficient criterion for establishing operational definitions.

- Childhood is understood in very different ways in different contexts. Childhood is a social and cultural construction, not merely a stage in physical and psychological development.

- Children and adolescents can be especially vulnerable because of their immaturity and dependence, but it is important also to recognise their potential and resilience. A child-centred situation analysis may be important in identifying and assessing the particular needs of children in particular situations.
CRC Definition

A child means every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier.

Article 1
Convention on the Rights of the Child
Views of Children and Adolescents

A twenty year old youth reflects on his situation as head of household caring for two younger siblings. “I’m not an adult, and I’m not a child. In the middle. I can do the work of men, but I never discuss things with them. The only adult I speak with is my grandmother, but she is worn down. I am not an adult, but I am a father”.

A fifteen year old girl caring for younger siblings as head of household says: “I am too young to be a mother, but I am a mother and I would never leave my brothers and sisters alone”.

A 14 year old adolescent boy remarks, “I must help support my family, but there is no work in the camp. With the men, I go to earn money on the commercial farms”
An 11 year old being cared for by her grandmother remarks, “My grandmother is the head of our household, but if she’s away, then I’m the head. I take care of my brothers and sisters when my grandmother isn’t here. I’m stronger than the other children because I’m a child and I’m also an adult.”

A 17 year old living with her grandparents reflects, “I’m still a child because I’m being cared for by somebody. When I’m with my grandparents, I begin to feel more like an adult because I do almost everything for them. I prefer to be an adult, so when I encounter problems, I can take care of them. To me somebody is strong if she works hard to earn money. I am somewhat strong, my grandparents are not very strong.”
Key Learning Points - Topic 2

- It is important to integrate both a child rights and a child development perspective into programme planning.

- Although certain aspects of child development are predictable and universal, there are significant cultural differences in the ways in which children and adolescents develop.

- The process of child development can be described as transactional: children and adolescents are not the passive subjects of socialisation, but play a central role in their own development.

- Children and adolescents have needs and capacities which are significantly different from those of adults.

- Armed conflict and forced migration are likely to have a particularly serious impact on children’s development which may have long-term consequences.
How Nutritional Deficiency Can Affect Children’s Development & Behaviour

Unborn Child

- Born anaemic and of low birth weight
- Being vulnerable to other health complications, including the failure to thrive

Infant and Toddler

- Negative affect on brain maturation leading to irreversible intellectual impairment
- Lack of Vitamin A can lead to blindness
- Decreased activity level and interest in people, things, events
- Apathy and irritability
How Nutritional Deficiency Can Affect Children’s Development & Behaviour

School-Aged Child

- Inability to concentrate
- Lower energy level
- Unable to resist infection
- Mood Swings
- Slow intellectual development

Adolescents:

- Stunted physical growth
- Delayed onset of puberty
- Impaired intellectual development
- Mood Swings
• In situations of conflict and forced migration, children and adolescents may face an accumulation of risk factors which may pose a serious threat to their development

• The concept of resilience directs attention to “protective factors” within the individual, the family and the wider context which help people to cope with adversity

• Children’s resilience is intrinsically linked with that of their parents or other carers

• Strengthening supportive networks may be the most effective way of enabling children and their families to cope with adverse circumstances
Typical Risk Factors for Refugee Children and Adolescents

• Previous traumatic experiences of violence, separation, fear etc.
• Loss of the family home, familiar surroundings, friends, familiar people etc.
• Loss of self-respect and self-confidence
• Poor diet and nutritional status
• Lack of opportunities for education
• Lack of opportunities for play and recreation
• Excessive burden of paid and/or unpaid domestic work
• Uncertainty about the future
Parental Risk Factors Affecting Refugee Children

Children’s well-being is intrinsically linked with that of their parents: this means that the risks to which parents or other care-givers are exposed will also affect the children. These may include, in addition to the above:

- Poor health
- Mental health problems such as depression and anxiety
- Lack of access to health and support services
- Separation from spouse
- Relationship problems and tensions in the marriage
- Excessive demands on their time
- Unemployment and lack of access to economic opportunities
- Lack of material resources
- Worries about other family members and about the future
Protective Factors for Refugee Children

Protective factors serve to shield both parents and children from the worst effects of such risk factors: for children these may include:

- Good and consistent support and guidance from parents or other caregivers
- Support from extended family and friendship/community networks, teachers etc.
- The re-establishment of a normal pattern of daily life
- An educational climate which is emotionally positive, open and supportive
- Appropriate role models which encourage constructive coping
Protective Factors for the Parents of Refugee Children

- A supportive marital relationship
- Support from the extended family
- Supportive community structures - e.g. informal support from community neighbours, women’s associations etc.
- Access to appropriate health and support services
- Opportunities to re-establish an acceptable economic base for the family
Key Learning Points for Topic 4

4.1 EXPERIENCES OF VIOLENCE AND FEAR

- Traumatic events such as violence, sudden flight, loss and intense fear are likely to have immediate, and maybe long-term, effects on children and adolescents.

- The nature of their reactions will depend on many different factors, including age, individual characteristics and temperament, and the quality of care and support they receive from their family and other significant people in their social environment.

4.2 SEPARATION FROM PARENTS OR OTHER CARERS

- Separation from, or loss of, parents or other familiar carers, may have both short-term and long-term effects on children of all ages.

- The effects of separation will be different according to the age of the child, his or her level of intellectual development, maturity, gender and the nature and duration of the separation.

- Some significant cultural differences can be observed.

- A child’s limited sense of time may limit his or her understanding of the likely duration of the separation.

- Separation is likely to be associated with other threats to child development, including loss of home and familiar surroundings and the experience of violent or frightening events.
4.3 EXPLOITATION AND ABUSE

- Children and adolescents in situations of conflict and forced migration are at greatly increased risk of various forms of abuse and exploitation.

- Exploitation and abuse can take many different forms, and any particular instance needs to be understood within its particular social and cultural context.

- The impact of exploitation or abuse can be profound, and will vary according to the particular circumstances: it is important to understand both the objective nature of the experiences and the meaning, and subjective evaluation by the individual child.

- Abuse or exploitation within the family can have particularly profound consequences for the child’s development.

4.4 CHILDREN’S INVOLVEMENT IN FIGHTING FORCES

- Children associated with fighting forces are likely to have lived in a rigid hierarchical structure and may have acquired a distorted morality based on power, fear and brutality.

- Involvement in violence and brutality and possibly in involuntary and inappropriate sexual activity may have a severe impact on age-appropriate and culturally acceptable behaviour.

- Demobilisation may raise significant issues in terms of identity and self esteem and the sense of purpose in life.

- Not all of the child’s experiences with fighting forces will necessarily have been negative: it is important to acknowledge any positive elements and to consider the child’s loss of them in any rehabilitative programme.
Key Learning Points for Topic 5

• There are many potential threats to the development of all children and adolescents in situations of armed conflict and displacement

• Restoring a sense of normality in their lives may be achieved by restoring community structures and a routine and purpose to daily life: by promoting family life and parental competence: by building on the strengths and capacities of young people and advocating for their rights

• Protecting children and adolescents from further harm may be achieved by avoiding further separations, inappropriate “trauma” responses, the unnecessary isolation of “vulnerable groups” and the further victimisation of victims

• The presence of some risk factors may increase the vulnerability of children and adolescents to other, additional risks
Steps to Promoting Child Development in Situations of Conflict and Forced Migration

1. Restoring a Sense of Normality in the Lives of Children and Adolescents
   - Restoring community structures
   - Restoring a structure, routine and purpose to daily life
   - Promoting family life and parental competence
   - Building on the strengths and capacities of young people
   - Advocacy for children’s rights and needs

2. Protecting Children and Adolescents from Further Harm
   - Avoiding further and unnecessary separations
   - Inappropriate “trauma” programmes can be deeply damaging
   - Avoiding the inappropriate isolation of “vulnerable groups”
   - Avoiding the further victimisation of victims
   - The presence of one risk factor can increase children and adolescents’ vulnerability to others
Key Learning Points - Topic 6

- Whenever a decision is to be made that will affect an individual child, or a group of children, their best interests should be a primary consideration: this is a fundamental principle in the Convention on the Rights of the Child, is an important principle in promoting child development, and is enshrined in UNHCR’s policy framework.

- Best Interests is a clear, simple concept: but implementing it often requires handling complex and sometimes conflicting considerations in which complete information may not be available.

- Decisions in a child’s Best Interests are likely to have to be made by individuals with appropriate qualifications and expertise, including the ability to engage the child himself or herself in considering the various options.

- The Best Interests of the Child principle is a valuable tool in programming, in monitoring and for impact assessment. A child-centred situation analysis, in which young people themselves are involved, may be required in order to assess the likely impact of particular policy decisions on children.
The Best Interests Principle in the CRC

Article 3 states:

"In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration".
Key Objectives of Best Interests Decisions

1. To ensure their protection - both in terms of physical safety and legal rights
2. To ensure that care provides for both their physical and emotional needs
3. To provide for their ongoing developmental needs - psychological, social, educational and physical, both for the immediate future and in the long-term
4. To provide for their participation in these decisions, in keeping with their maturity and capacity
5. To put their safety and welfare ahead of all other considerations
Key Learning Points for Topic 7

- The notion of participation is important from both a child rights and a child development perspective.
- Participation can promote child and adolescent development and can enhance decision-making about young people.
- It is important to consider cultural factors and gender issues when planning to develop child participation in programming.
- Child and adolescent participation can be difficult and complex to implement in some contexts. Clarity of objectives and methods, and careful consideration of areas of difficulty will greatly facilitate effective implementation.
- It is important to avoid tokenistic participation. Participation requires a real commitment by the adults who are working with young people to ensure that the principle of participation is embedded within the programme.
A Definition of Child Participation

“Listening to children, giving them space to articulate their own concerns, and taking into account the children’s maturity and capacities, enabling them to take part in the planning, conduct and evaluation of activities, within or outside the family sphere, which may imply involving them in decision making”\(^1\).

CRC, Article 12 states:

“State Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the view of the child being given due weight in accordance with the age and maturity of the child.”
The Ladder of Children’s Participation

1. Manipulation
2. Decoration
3. Tokenism
4. Children assigned but informed.
5. Children consulted and informed.
6. Adult-initiated, shared decisions with children
7. Child-initiated and directed
8. Child-initiated, shared decisions with adults

Degrees of Participation

## Exercises

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.1</strong></td>
<td>Discussion questions</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>1.2</strong></td>
<td>Child or Adult?</td>
<td>Senior Managers, Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>1.3</strong></td>
<td>Are Children Responsible for Their Actions?</td>
<td>Senior Managers, Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>2.1</strong></td>
<td>Personal Time Lines</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>3.1</strong></td>
<td>Risk and Protective Factors</td>
<td>Field Staff.</td>
</tr>
<tr>
<td><strong>3.2</strong></td>
<td>The Importance of Community Structures for Children’s Development</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>4.1</strong></td>
<td>The effects of Frightening Experiences and Separation – Case Study</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>4.2</strong></td>
<td>The Effects of Separation – Case Studies</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>4.3</strong></td>
<td>Separation – Sensitisation Exercise</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>4.4</strong></td>
<td>The Girl Soldier: the Effects of Experiences of Fighting Forces and Exploitation on Child Development</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>5.1</strong></td>
<td>Promoting Child Development in Programming</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>5.2</strong></td>
<td>Identifying Opportunities for Promoting Child Development</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>6.1</strong></td>
<td>Case Studies - How to Apply the Best Interests Principle in Concrete Situations.</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
<tr>
<td><strong>6.2</strong></td>
<td>Best Interests in Decision-Making – Brainstorm and Discussion.</td>
<td>Sector Co-ordinators, Field Staff.</td>
</tr>
</tbody>
</table>
### 7.1 Child Participation: Programme Audit
- Sector Co-ordinators, Field Staff.

### 7.2 Case Study – Involving Adolescents
- Sector Co-ordinators, Field Staff.
Exercise 1.1: (Facilitator’s Notes)
Discussion Questions

TARGET GROUPS
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise, participants will be able to:
• Understand more clearly factors involved in defining a child’s state of maturity;
• Consider how these definitions might affect the way in which a child or young person is treated/cared for.

TIMEFRAME
15 minutes in small group discussion – or longer depending on how many questions are considered
20 minutes in plenary

METHOD
Divide the participants into small groups. Give each group a set of questions to discuss (e.g. Questions 1 – 3, or Questions 4 – 7). Whilst they are discussing the questions, prepare flip chart paper to record the answers to the questions. In plenary, invite and record answers to these questions. Encourage group discussion about the answers given. If the participants are a multi-cultural group, ensure that all the different cultural view-points are recorded.

RESOURCES
Copy of Participants’ Notes for each person.
Flipchart paper and marker pens.
Copies of the CRC if considered necessary.
OBJECTIVES

By the end of this exercise, you will be able to:

- Understand more clearly factors involved in defining a child’s state of maturity;
- Consider how these definitions might affect the way in which a child or young person is treated/cared for.

TIMEFRAME

15 minutes in small group discussion – or longer depending on how many questions are considered
20 minutes in plenary

METHOD

In small groups, discuss the questions from the list below, as directed by the Facilitator, and feed back the results in plenary session.

QUESTIONS

1. In what ways do you (and your colleagues) differentiate children and adolescents in assessing needs and planning programmes? Give examples from your current or past work of the practical implications of distinctions made among “children, adolescents, youths and adults”

2. How do these definitions adhere to the CRC definition and what are the implications for programmes and policies?

3. Are there rituals or social markers that define for the community of concern, transitions between childhood, adolescence and adulthood? Are there any points of conflict between traditional practices, and the CRC or other legal codes?

4. What are the prescribed traditional social roles for children and adolescents in this population? How do they differ with factors of age, gender, social class/caste, kinship and ethnic group?
5. How have these roles been affected by factors of displacement and what have the developmental costs and benefits been for children and adolescents?

6. In the eyes of the community who are the children who are considered to be most at-risk?
Exercise 1.2: (Facilitator’s Notes)
Child or Adult?

TARGET GROUP
Senior Managers, Sector Co-ordinators, Field Staff.

OBJECTIVE
By the end of this exercise, participants will have had the opportunity to:
• consider how the perceived role and status of a young person might determine how s/he is treated by those in authority.

TIMEFRAME
30 minutes

METHOD
Divide the participants into small groups. Distribute copies of the Participants’ Notes for this exercise. Ask them to read the case study and to consider the questions posed.

Note: Facilitators may prefer to create a case study based in a cultural context familiar to the participants.

RESOURCES
Flipchart paper and marker pens.
Exercise 1.2: (Participants’ Notes)
Child or Adult?

OBJECTIVE

By the end of this exercise, you will have had the opportunity to:

• consider how the perceived role and status of a young person might determine how s/he is treated by those in authority.

TIMEFRAME

30 minutes

METHOD

In small groups, read the following case study and consider the questions at the end.

CASE ILLUSTRATION: DIFFERING INTERPRETATIONS OF ROLE AND STATUS

In a refugee camp in Southern Africa, a dispute broke out between local camp authorities and refugee leaders over the fate of a thirteen year old Mozambican refugee girl, Maria. As a separated child, she had been placed in the care of a foster family from her province of origin. When a refugee worker learned that the girl had been promised (against her will) as a second wife to an older Mozambican refugee man, the worker went to the camp authorities in protest.

Camp authorities stated that this would be against the law of the host country and would also change the status of the girl as a separated child, searching for her family. In contrast, the camp’s refugee leaders noted that the girl carried adult responsibilities in her foster home, was considered an adult, and it was customary practice for a girl of her age and status to marry in her home district. They felt that camp authorities were intruding on their culture and traditions, and undermining their leadership in the community.

The situation was finally resolved when a Mozambican traditional healer stated that the marriage could not take place, because the foster family was not entitled to collect the "lobola" (bride price) that had already been promised. The girl was placed with a different foster family and her situation was monitored by a women’s association in the camp.
It is of note that although the girl’s wishes were known, they remained, along with an assessment of her long-term best interests, quite secondary to the major points of contention and debate.

QUESTIONS:

1. What is the refugee leaders’ understanding of childhood in this context? Would they define Maria as a child, an adolescent or an adult?

2. How might the different stakeholders (refugee leaders, camp authorities, foster parents UNHCR staff etc.) understand Maria’s status as a child, adolescent, youth or adult? What implications would their different understandings have in terms of protection and her best interests?

3. What about Maria herself? How do you think she would classify herself? Is she old enough to make her own decisions about her long term future? How could she have been more effectively involved in the process of deciding her future?

There will be a plenary session where you can share the results of your discussions.
**Exercise 1.3: (Facilitator’s Notes)**

Are Children Responsible for Their Actions?

**TARGET GROUP**

Senior Managers, Sector Co-ordinators, Field Staff.

**OBJECTIVE**

By the end of this exercise, participants will have a greater understanding of the concept of responsibility in relation to age.

**TIMEFRAME**

20 minutes groups
10 minutes plenary

**METHOD**

Put participants into small groups, give them flip chart pages and pens and copies of the Participants’ Notes. Give them 5 minutes to read it and then discuss the questions posed.

Each group to then feedback into the plenary and discuss the points made.

**RESOURCES**

Copies of the Participants' Notes.
Flipchart paper and marker pens.
Exercise 1.3: (Participants’ Notes)
Are Children Responsible for Their Actions?

OBJECTIVES
By the end of this exercise, participants will have a greater understanding of the concept of responsibility in relation to age.

TIMEFRAME
10 minutes groups
20 minutes plenary

METHOD
In small groups, read the case study below and then discuss the questions posed. Each group should feed back into the plenary and discuss the points made.

CASE STUDY
Following large-scale displacement, local community members may also express ambiguity about who is a child or adult and to what extent they are responsible for their actions. In situations of armed conflict, adolescents have often been drawn into the conflict as combatants. In the context of Mozambique, some former child soldiers who had fought with RENAMO and were known to have participated in attacks on their own villages returned after the peace accords. It is reported that through village meetings and traditional ceremonies some of these youth were forgiven by their communities and have managed to reintegrate into daily life.

A particularly complicated issue revolves around the role and culpability of children and adolescents during the genocide in Rwanda in 1994. Hundreds of children and adolescents under 18 years of age were in prison in Rwanda, having been accused of participating in the genocide. A paper based on community focus group interviews with Rwandan citizens concluded that the majority believed “children who committed crimes during the genocide are no longer children; they have become adults”(Archey; Children, Genocide & Justice,1996). However, Rwanda is a signatory to the CRC and Article 37 states “neither capital punishment nor life imprisonment without possibility of release shall be imposed for offences committed by persons below eighteen years of age”. Article 40 demands that states party to the convention “recognise the right of every child…recognised as having infringed the penal law… to be treated in a manner consistent with…..the desirability of promoting the child’s reintegration and the
child’s assuming a constructive role in society”. Rwandan national law governing punishment of children (Article 77 of the Rwandan Penal Code) is similar in providing special protection of those under 18 years of age. This tension between legal justice and social justice prompts a range of questions.

QUESTIONS

- Are those under 18 who participated in the gamut of crimes associated with the genocide “children”?
- If charged and found guilty, are those under 18 responsible and culpable for their crimes?
- What criteria would you use in making these determinations? Should “developmental” principles be applied – e.g. children’s capacity to understand their actions?
Exercise 2.1: (Facilitator’s Notes)
Personal Time -Lines

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise, participants will:
• have charted their own lives graphically and will have highlighted major events within their own lives which affected their own development;
• use this process to develop their understanding and empathy for how disruptions may affect the lives of young people with whom they are working.

TIMEFRAME
60 minutes

METHOD
Ask participants to work individually. Give each a piece of flip chart paper and a marker pen and explain that you want them to construct a personal time line. The steps for this are as follows.

1. Draw a straight vertical line from the middle of the top to the bottom of the page.
2. At the top write the year that you were born. At the bottom, write the present year. This line represents your life.
3. Concentrating on the first 18 years of your life, think of the main events that shaped them. This might involve schooling, the birth or death of members of the family, accidents, moving homes, separation, family tensions, illness in the family, struggles, political or social events in your area/country.
4. On the left hand side of the line, mark as appropriate what the event was and the year(s) that it took place/happened. On the right hand side of the line, note down the effect that this event had on your life and development personally.

Demonstrate this process to the participants, using your life history as an example. Having completed this exercise individually, ask participants to join together in groups of two or three. Ask them to share their time lines with each other. Ask
them particularly to consider the short and long term effects that key events had on their own lives and their development.

**Note:** This exercise may reveal areas that are very sensitive. Participants who do not wish to share their time lines with others should not be required to do so.

Plenary: Use this plenary to draw out example of events that affected participants at different stages of development (as babies, as toddlers, as young children, as adolescents etc) and how they were affected in both the short and the long term. Encourage participants to consider how their own reactions to events in childhood affected those who cared for them.

An alternative format for this exercise is to prepare (or invite participants to draw) a chart in the form of a river (the “river of life”), with tributaries to indicate important influences and bends in the river to indicate significant changes and transitions.

You may also like to discuss how this exercise could be used or adapted for work with children – e.g. in helping a separated child to recount his or her life story.

**RESOURCES**

Flipchart paper and marker pens.
Exercise 3.1: (Facilitator’s Notes)
Risk Factors and Protective Factors

TARGET GROUP
Field Staff.

OBJECTIVES
By the end of this exercise, participants will be able to:
• explain the concepts of risk factors and protective factors and their relationship with the concept of resilience;
• describe ways of reducing risk factors and develop or strengthen protective factors.

TIMEFRAME
30 minutes

METHOD
Introduce the concepts of risk factors and protective factors using material from the Briefing Notes for Topic 3. Distribute copies of the Participants’ Notes and then use the case study within it as a means of illustrating risk and protective factors for children and their parents (or other care givers). Facilitators may prefer to choose their own case study if the one provided is culturally inappropriate.

Using a flipchart copy of the “force field” diagram on the following page, invite participants to contribute some possible risk factors for the children in the family and then for the parents: ask the participants to discuss the inter-relationships between the risk factors for children and parents respectively.

Now invite them to contribute ideas on some possible protective factors and write these up on the flipchart diagram.

Discuss how might it be possible to reduce risk factors and increase protective factors.

RESOURCES
Flipchart paper and pens.
A flipchart version of the diagram on the following page:
NOTES FOR FACILITATOR

The following are some of the factors which should be identified during the exercise:

**Risk Factors for Children**
- Their own grief and possibly limited opportunities to express it
- Lack of opportunity of private discussions
- The effect on them of marital tensions
- A whole complex set of issues arising from their situation as refugees – loss of family home, familiar people and routines, school, local clubs, friends etc.
- Loss of a clear sense of the future and the insecurities of the present situation
- Consider the potential risk factors for the unborn child – potential for low birth weight, neo-natal health issues, possible lack of bonding with mother etc.
- Consider how the birth of the baby will pose additional risks for the other children

**Risk Factors for the Parents**
- Their own grief, compounded by the blaming of the father, reducing their capacity for mutual support
- Father’s physical incapacity
- Loss of earning potential and consequent financial worries
- A whole complex set of issues arising from their situation as refugees – loss of family home, familiar people and routines, friends, neighbours etc.
- Loss of a clear sense of the future and the insecurities of the present situation

**Potential Protective Factors for Children**
- The presence of both parents (but their support is limited by the situation they are in)
- The presence of siblings
- School – how can the supportive capacity of the school be enhanced?
- Friends
- Other adults within the centre
- Grandparent
- Consider what other supports might be put in place – e.g. –
  - Some form of club or group experience for children
  - Structured activities within the centre
  - Children’s camps
Potential Protective Factors for the Parents

- Friends – what might be done to develop a more supportive atmosphere in the centre?
- The presence of the mother’s own mother
- Material support, opportunities for earning money
- Opportunities for learning new skills
- Opportunities to exercise greater control over their lives, plan for the future etc.

Some Other Points to Bring Out

- Some of the children’s resources have both positive and negative aspects – e.g. the presence of both parents might be seen as an asset but the conflict between them can pose an additional risk factor for the children. Consider the impact on the children of father’s guilt and mother’s anger. Similarly, good experiences at school can be highly supportive, but experience of school failure, bullying or social isolation can pose additional risks. Consider how existing resources can be made more positive.
- The close inter-relationship between the children’s well-being and that of the parents
- Consider the “pile-up” or accumulation of risks – i.e. how one risk can lead to another: e.g. the mother’s sense of grief and anger has an impact on her own mental health which in turn impacts on the unborn child.
Exercise 3.1: (Participants’ Notes)
Risk Factors and Protective Factors

OBJECTIVES

By the end of this exercise, you will be able to:

1. explain the concepts of risk factors and protective factors;
2. describe ways of reducing risk factors and develop or strengthen protective factors.

TIMEFRAME

30 minutes

METHOD

Read the following case study and then, in the large group, you will all be invited to assist in the construction of a diagram illustrating risk and protective factors.

THE CASE STUDY

A family with four children who have been displaced on account of the Balkans conflict. The father is driving a car with the 15 year old son as a passenger and has an accident in which the boy is killed and the father is severely injured. The mother blames her husband for the death of her favourite child and both parents are so devastated that they have little time to help the other children with their grief. Father’s incapacity is a further factor, leading to financial worries for the family on top of an already uncertain future.

The family are living in a collective centre which was formerly a children’s holiday home. The accommodation affords little privacy, and though the children have friends in the centre the parents have no close friends and are aware of tensions among the refugees. The refugees have been told that they may have to move to another centre. The mother’s own widowed mother is also there but she tries to avoid burdening her with her own worries. The children attend a local school, but are often bored within the centre. The mother is pregnant but is no longer looking forward to the birth: she is neglecting her health and is smoking heavily.
Exercise 3.2: (Facilitator’s Notes)
The Importance of Community Structures for Children’s Development

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise, participants will be able to:
• explain the concepts of risk factors and protective factors;
• describe ways of reducing risk factors and develop or strengthen protective factors.

TIMEFRAME
30 minutes in small groups
20 minutes presentations

METHOD
Introduce the concept of risk factors and protective factors using Overheads 3.2 to 3.5. Open a brief discussion and comments from the participants.
Divide participants into small groups and give each participant a copy of the Participants’ Notes and ask them to carry out the tasks listed.
Bring the groups together in a plenary to present their findings and discuss the issues.

RESOURCES
Overheads 3.2 to 3.5.
Copy of the Participants’ Notes for each participant.

ALTERNATIVE USES OF THE EXERCISE
The case study can also be used in a variety of other ways.
1. Ask each member of the group to consider the situation of a different child, then compare the results, and then compile the composite diagram.
2. Locate the case history in an actual refugee community known to course participants and ask the group to consider the extent to which existing protective factors may shield the children from some of the effects of the risk factors outlined in the case study.
Exercise 3.2: (Participants’ Notes)
The Importance of Community Structures for Children’s Development

OBJECTIVES

By the end of this exercise, you will be able to:

• explain the concepts of risk factors and protective factors;
• describe ways of reducing risk factors and develop or strengthen protective factors.

TIMEFRAME

30 minutes in small groups
20 minutes presentations

METHOD

Read the case study below and then work on the tasks identified at the end.

CASE STUDY

The M family originally comprised Mr and Mrs M, boys aged 17, 15, 12, 8 and 2 and girls aged 10 and 6. Mrs. M’s widowed mother also lived with them, helping with the younger children and various household tasks. They were relatively prosperous small farmers living in a village in the south of Maganda, a small African state. Although all of the children were expected to contribute to the family economy, they all attended school, the 15 year old showing some academic promise and hoping to become a teacher.

Maganda was experiencing an insurgency movement which attacked villages in a seemingly random attempt to destabilise the country. The M’s village was attacked suddenly towards dusk while Mr. M and the oldest son were at market and her mother, with the youngest child, were also away from the family home. Mrs. M and the other children fled along with other villagers, but in the chaos of flight they became separated from other family groups, and when they encountered a girl aged 9 who had lost her parents, they took her with them. After travelling for 3 days, experiencing many frightening events, they crossed the border into Kenzania and were settled in a camp housing, at that stage, about 15,000 other refugees.

Mrs. M’s 15 year old son helped to build a house. Forced to survive on very meagre rations, the family suffered recurring bouts of colds and stomach disorders. Mrs. M and the older two girls had to walk considerable distances to find firewood and to collect water from a borehole some half kilometre from their home.
She has tried to find work locally as a labourer, but the rates of pay are so low, and the cost in time so high that she has given up this idea. The sons aged 15 and 12 are both expected to work in order to supplement the family’s meagre economy - both resent the hard work and long hours. Worried at receiving no news about her husband, mother and other children, Mrs M became moderately depressed and felt isolated from former friends and neighbours. She has met up with a few former villagers who are settled at another location in the same camp. A devout Catholic, she misses the opportunity to attend mass.

The camp has no school or other organised activities for young people. There is a camp committee formed mainly of men, elected in each zone of the camp, but political divisions have impeded the work of this committee and little has been achieved so far. The other children are also bored, and the 8 year old boy is resentful at having to carry out household tasks he regard as “girls’ work”, and denied the kind of task which he would find acceptable.

**TASKS**

Participants are invited, in small groups, to discuss the above scenario and to undertake the following tasks:

1. Looking at the situation of each child in the family in turn (including the 9 year old girl), identify the various factors which potentially impede “healthy” development. Identify what criteria you are using in determining of development is “healthy”

2. Compile a composite diagram (using worksheet provided) illustrating all of these various risk factors. Try to indicate how some of these risk factors might be connected with each other.

3. Identify potential protective factors which might be developed within the refugee community and discuss how some of these developments might be initiated. Consider the potential impact of these on the development of the children.

**THE DIAGRAM**

The diagram on the following page can be used by the group to identify both risk factors (above the arrow) and the potential protective factors (below the arrow). The diagram can also be used to indicate the relationship between parental and child risk factors.
Protective Factors for Parents

Risk Factors for Children

Risk Factors for Children

Protective Factors for Parents

Childhood

Adulthood

Development
Exercise 4.1: (Facilitator’s Notes)
The Effects of Frightening Experiences and Separation

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVE
By the end of this exercise, participants will be able to demonstrate an awareness of the effects of frightening experiences and separation of children.

TIMEFRAME
15 minutes small groups
20 minutes large group

METHOD
Following a presentation based on the material contained in Topic 4.1, divide participants into small groups and ask them to read the case study contained in the Participants’ Notes: invite them to discuss it and identify the likely emotional and behavioural reactions of the child. Participants should write their ideas on a flip chart and share with the larger group in the plenary session.

Note: this case study is of an actual case in the former Jugoslavia, and has been adapted from Exercise 3.5 in the ARC Resource Pack Working with Children: it is recommended that Facilitators should compile one or more case studies based on a situation familiar to the Participants – preferably illustrating children of different ages and genders.

RESOURCES
Copies of Participants’ Notes for each person.
Flip charts and pens.
Exercise 4.1: (Participants’ Notes)
The Effects of Frightening Experiences and Separation

OBJECTIVE

By the end of this exercise, you will be able to demonstrate an awareness of the effects of frightening experiences and separation of children.

TIMEFRAME

15 minutes small groups
20 minutes large group

METHOD

In small groups, discuss the case study below and identify the likely emotional and behavioural reactions of the child. Consider these within short, medium and long time-frames. Identify some of the factors that might alter the outcome of Dusan’s experiences.

Write your ideas on a flip chart and share with the larger group in the plenary session.

CASE STUDY

Dusan is a tall and good looking 10 year old boy who was living happily with his parents in Tuzla before the war changed their lives for ever. He was born of a mixed marriage, his mother being a Croat, his father a Serb, and they lived in a predominantly Muslim town in Bosnia. When the war started, they faced both the physical dangers of the war and the risks stemming from their respective ethnic origins. Because of this, his father decided that he and Dusan would try to leave and seek refuge with the two grown-up children of a former marriage who lived in a predominantly Serb part of Bosnia. His mother, however, preferred to stay, feeling safer in Tuzla.

Dusan and his father tried to cross the dividing line secretly at night, but in the process stumbled on a landmine which killed the father outright, severely injuring Dusan in the leg, arm and eye. He is thought to have lain unconscious by the body of his father before managing to continue his journey, eventually being found by soldiers who arranged for an ambulance to take him to hospital in Belgrade. He arrived in a very poor shape, not only injured but so severely traumatised by witnessing the death of his father that he was unable to eat or talk about what had happened.
Exercise 4.2: (Facilitator’s Notes)
The Effects of Separation – Case Studies

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVE
By the end of this exercise, participants will be able to demonstrate an awareness of the effects of separation of children of different ages and genders and under different circumstances.

TIMEFRAME
15 minutes small groups (for each case cameo)
20 minutes large group

METHOD
Following a short presentation on the effects of separation on children, divide the participants into small groups (suggested number of 2 or 3 to a group) and ask them to consider one or more of the case cameos in the Participants’ Notes. Participants are asked to identify the likely emotional and behavioural reactions of the children and to consider the likely effects of separation both in the short term and in the long term. They should particularly consider issues of:-

- The child’s age
- The child’s gender
- The circumstances of and reasons for the separation
- The nature of the alternative living environment

They should write their ideas on a flip chart and share these in the plenary session.
Facilitators may prefer to compile short case cameos based around the experience of their participants.

RESOURCES
Flipchart paper and marker pens.
Exercise 4.2: (Participants’ Notes)
The Effects of Separation – Case Studies

OBJECTIVE

By the end of this exercise, you will be able to demonstrate an awareness of the effects of separation of children of different ages and genders and under different circumstances.

TIMEFRAME

15 minutes small groups (for each case cameo)
20 minutes large group

METHOD

In small groups, discuss one or more (as directed by the Facilitator) of the short case cameos given below and identify the likely emotional and behavioural reactions of the children and to consider the likely effects of separation both in the short term and in the long term. You should particularly consider issues of:

- the child’s age;
- the child’s gender;
- the circumstances of and reasons for the separation;
- the nature of the alternative living environment;
- local beliefs about separation and the ways to treat children affected by it.

Write your ideas on a flip chart and share with the larger group in the plenary session.

CASE CAMEOS

Maria was found as a two-month old baby lying at the breast of her mother who had been violently killed in the genocide which had swept the country. She was taken in by a woman who recognised the mother and promised to care for the child as a member of her own family.

Juan aged 5 years was found in a dazed and confused state after his village was attacked by rebels. He saw his house engulfed in flames and many dead bodies but has no idea what happened to the rest of his family. He was taken under the wing of a widow and eventually they found their way to a refugee camp in a neighbouring country. The widow felt unable to care for him and arrangements...
were made for interim care with a family with four children of their own while attempts were made to trace his family.

*Anita*, aged 9, was taken by her mother to the centre for separated children in the refugee camp and left her there. Her mother had lost her husband in the civil war affecting their country, has seven other children to care for and feels that at the centre Anita will at least be fed and clothed and will have a chance to go to school. Anita was reassured to hear her mother say “You will be able to come home soon”, but after three months at the centre she has not seen any of the members of her family.

*Marcus* is 14. Following the family’s return to their own village after 4 years in a refugee camp in a neighbouring country, Marcus is fed up with the lack of opportunities for study and work, and decides to leave the village in search of a better life in a town 50 kilometres away. He feels ashamed to share his plans with his family even though he is fond of them, and leaves at night without telling anyone.

*Angelique* is 13 years old. She confided to a trusted school-teacher that she has been sexually abused by her step-father, and when the matter was investigated by the authorities, the step-father strongly denied the allegations and it was impossible to either prosecute him or force him to leave the home. Anita’s mother felt torn in her loyalties between her daughter and her husband and was reluctant to believe her daughter’s story. Eventually the authorities decided to enforce her removal from the family and placed her in a foster home. However, she was miserable in the foster home, despite being well cared for: she felt rejected by her family and greatly missed her mother and brothers and sisters.
Exercise 4.3: Facilitator’s Notes
Separation - Sensitisation Exercise

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVE
By the end of this exercise, participants will be sensitised to the effects of separation on children, drawing on their own childhood experiences.

TIMEFRAME
5 minutes individual work (in silence)
Up to 25 minutes in large group

METHOD
Ask participants, in silence, to recall situations in their own childhood when they became separated from their families, or experienced other significant loss or bereavement. What did it feel like? What did they find most helpful in dealing with the situation? Invite people to share their memories with the large group. If the group is a multi-cultural one, consider possible cultural differences. One way of structuring the exercise is to ask participants to identify the feelings engendered by separation, and to write these on large Post-it sheets (one or two words per sheet) and display these on a board. This can be followed with a similar exercise to write on Post-its what they found most helpful.

RESOURCES
Post-its.
Display board.

The Facilitator needs to ensure that the group has established an atmosphere of trust before using this exercise and care should be taken to avoid the disclosure of excessively personal information.
Exercise 4.4: (Facilitator’s Notes)
The Girl Soldier – The Effects of Experience of Fighting Forces and Exploitation on Child Development

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise, participants will:

- have considered the implications of abuse and exploitation on the development of a young girl;
- have had an opportunity to consider how to plan for her return to more normal life in the community.

TIMEFRAME
45 minutes

METHOD
Invite the participants to read the case study in the Participants’ Notes, and consider the question posed.

Participants can work on these questions in pairs or small groups, and then feed into a larger plenary.

Refer to the Briefing Notes for Topic 4 for guidance in leading the plenary session.

RESOURCES
Participants’ Notes for this exercise.
Exercise 4.4: (Participants’ Notes)
The Girl Soldier – the Effects of Experiences of Armed Forces and Exploitation on Child Development

OBJECTIVES
By the end of this exercise, you will:
• have considered the implications of abuse and exploitation on the development of a young girl;
• have had an opportunity to consider how to plan for her recovery and re-integration.

TIMEFRAME
45 minutes

METHOD
Read the case study and then to consider the likely consequences for this girl in terms of her future life.
• What are the likely physical consequences and their implications?
• What emotional consequences do you think might follow this experience?
• What about social consequences?
• What other areas of her development might this young girl have missed?
• If you received this girl into your care, how would you plan for her recovery and re-integration into “normal” life?

THE GIRL SOLDIER
“At the age of 13 I joined the student movement. I had a dream: to contribute to make things change, so that children would not be hungry, so that people could be the owners of their dreams, there would be no more differences between rich and poor and then...we would have a just society....A few years later I applied to join the armed struggle...When I joined I was 15, with the inexperience and the fears of a little girl....Through some girlfriends I found out that in organisations similar to mine, there were girls who were obliged to have sexual relations with the combatants...The women among other things had to "alleviate the sadness of the combatants."
And who alleviated our sadness after going with someone we hardly knew?...At my young age I experienced abortion. It was not my decision, I could not decide on that. They decided, in any case. Hadn’t I handed over my entire life? Had I not undertaken a
commitment to permanent obedience and discipline?... There is a great pain in my being when I recall all these things, principally because with time I have come to understand that to be a woman in any group was always a disadvantage. In spite of my commitment, they abused me, they trampled my human dignity. Above all, they did not understand that I was a child and that I had rights."
**Exercise 5.1: (Facilitator’s Notes)**

**Promoting Child Development in Programming**

**TARGET GROUP**

Sector Co-ordinators, Field Staff.

**OBJECTIVES**

By the end of this exercise, participants will have:

- identified the adverse affects on child development that a particular course of action had on a group of children;
- discussed ways in which these children’s developmental needs could have been better served.

**TIME FRAME**

45 minutes

**METHOD**

Participants to work in small groups. Distribute copies of the Participants’ Notes and ask them to read the case study, and then brainstorm ways in which the solution chosen in the case study might have adversely affected the development of the children that the organisation was seeking to help. Invite participants to consider their answers under the different headings of “social/emotional development;” “physical development” and “cognitive and language development”.

Plenary. Ask participants to feed their answers into the main group. Open discussion about ways in which the developmental needs of this group of children might have been better served by the agency. You may then like to ask the participants to consider, from their own experience, other examples of programmes which might have had an adverse effect on children’s development.

**RESOURCES**

Participants’ Notes for each person.
Exercise 5.1: (Participants’ Notes)
Promoting Child Development in Programming

OBJECTIVES

By the end of this exercise, you will have:

• identified the adverse affects on child development that a particular course of action had on a group of children;

• discussed ways in which these children’s developmental needs could have been better served.

TIME FRAME

45 minutes

METHOD

In small groups, read the following case study. Consider in what ways the chosen solution might have adversely affected the development of the children that it sought to help. Consider your answers under the following headings: social/emotional development; physical development and cognitive and language development. Make a list of your answers on flip chart and be prepared to present them in a plenary session.

A Separation from Community and Culture

In a northern province of Mozambique, an international agency had established an autonomous children’s institution to respond to the perceived needs of orphaned and abandoned children. Located across a major river from a provincial capital, the institutional facilities were excellent, including material needs, educational programmes and staff-to-child ratio.

However, local people regarded the institution as an island, as the children had little or no contact with the community. The children did not attend the local schools and the institution had no formal relationship with community structures. The school’s educational materials were not consistent with the Mozambican curriculum, children were not encouraged to maintain fluency in their local dialect, and the religious context of the institution did not account for individual children who had been raised as Muslims.

Despite the obvious material privilege of the children in the institution, serious questions were raised about the long-term effect this would have on the children and the potential problems they might face in integrating to Mozambican society after departing the institution at age 18.
Exercise 5.2: (Facilitator’s Notes)
Identifying Opportunities for Promoting Child Development

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise, participants will have:
• considered a number of ways in which child development can be promoted in situations of conflict and forced migration;
• applied these suggestions to groups of children at different stages of development.

TIME FRAME
45 minutes

METHOD
Provide a brief presentation using the Briefing Notes from Topic 5 and Overhead 5.2.
Divide the participants into small groups and explain that each group will work through this exercise with different groups of children within the situation that they are working:
• Group One: Early childhood (c. age 1-5)
• Group Two: Middle childhood (c. age 6 – 11)
• Group Three: Adolescents (c. age 11 –18)
N.B. These are very approximate divisions. Participants may want to adapt the groups by other defining age-stage divisions.
Provide each group with the Participants’ Notes for this exercise. Ask them to take each of the headings on the list and to apply the thinking to the group of children that they are considering, by asking the following questions:
1. How well has this recommendation been achieved for this group of children?
2. What does it actually consist of?
3. In what other ways could this recommendation be improved in the context of this group of children?

4. Prioritise one or two ways in which the situation could be improved and share these ideas in a plenary session.

Plenary: Invite each group to report back briefly on the situation for the group of children that they have considered. Write up the two recommendations from each group about improving the promotion of child development for each group of children.

RESOURCES

Participants’ Notes for this Exercise.

Overhead 5.2.
OBJECTIVES

By the end of this exercise, you will have:

- considered a number of ways in which child development can be promoted in situations of conflict and forced migration;
- applied these suggestions to groups of children at different stages of development.

TIME FRAME

45 minutes

METHOD

In your group consider this list of recommendations for promoting child development in situations of forced migration and conflict. You are asked to apply these recommendations to a group of children of a particular age group (the facilitator will tell you which group) and in a context with which you are familiar, by asking the following questions:

1. How well has this recommendation been achieved for this group of children?
2. What does it actually consist of?
3. In what other ways could this recommendation be improved in the context of this group of children?
4. Prioritise one or two ways in which the situation could be improved and share these ideas in a plenary session.

**Promoting Child Development in Situations of Conflict and Forced Migration**

**Recommendations:**

- Restore community structures

- Restore a structure, routine and a purpose to daily life
- Promote family life and parental competence
- Build on the strengths and capacities of young people
- Advocate for children’s rights and their needs
- Protect children from further harm
- Avoid further and unnecessary separations
- Avoid inappropriate isolation of “vulnerable groups”
- Avoid the further victimisation of victims
- Understand that the presence of one risk factor can pre-dispose young people to other risks.
Exercise 6.1: (Facilitator’s Notes)
Case Studies - How to apply the Best Interests Principle in Concrete Situations

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVE
By the end of this exercise participants will have a clearer understanding of:

• how to apply the best interests principle in concrete situations.

TIMEFRAME
40 minutes

METHOD
Put participants into small groups, give them flip chart paper and pens and one of the case studies for each group. Give them 5 minutes to read it and then ask them how they felt Best Interests applied in this situation.

Ask each group to present its findings to the plenary and write up key learning points on the board/flipchart as they are made.

Note: Four case examples are provided for possible use by facilitators in initiating discussion about how to apply the Best Interests principle in concrete situations. It would be preferable, however, to prepare case examples based on situations with which participants are directly familiar. Situations where traditional practices are in conflict with rights under the Convention on the Rights of the Child can be used to generate participation (e.g. limited education for girls, community support for young people to participate in armed conflict).

RESOURCES
Copy of the Participants’ Notes for each person.
Flipchart paper and marker pens.
Case studies.
Exercise 6.1: (Participants' Notes)
Case Studies - How to apply the Best Interests principle in concrete situations.

OBJECTIVE

By the end of this exercise you will have a clearer understanding of:

- how to apply the Best Interests principle in concrete situations.

TIMEFRAME

40 minutes

METHOD

In small groups, read one of the case studies as directed by the Facilitator and then discuss how you felt Best Interests applied in this situation. Present your findings to the plenary.

Sorting Out Best Interests During an Emergency

In October 1979, Cambodian refugees, many in very poor physical condition, were allowed to enter a hastily prepared camp in eastern Thailand. Monsoon rains turned that camp into a field of mud and complicated the establishment of essential services. By the end of the first week some 400 separated children, who were referred to by workers in the camp as "orphans", were living in tents in one area. UNHCR social workers began registering them. Within a month these children were moved into bamboo barracks in the hospital compound, where they were separated from the general population. They were placed in the care of a Protestant NGO that began to proselytise the Buddhist children. This sparked criticism from some relief workers.

Camp residents and workers were very concerned about the children, and there were essentially three strongly advocated positions as to what was in the children's best interests:

1. immediate resettlement to third countries;
2. removal from the camp to better facilities in Thailand;
3. remain in the camp until their individual situations were evaluated.

Intensive global press coverage gave particular attention to the "orphans," and public and government pressure began to build for immediate action. At the time
UNHCR had no policies concerning separated refugee children, and it eventually acquiesced to the resettlement of 105 of the children to France, with the understanding that they would not be adopted and that any of their family members eventually identified would also be accepted in France. One group of relief workers, opposed to the movement of the children, tried to block the departure of the bus that came to take them, but they were unsuccessful. This group of children were sent to France, where they were placed in French foster homes after a brief stay in a hospital.

Would UNHCR's current policies and guidelines prevent a similar situation from happening again? Under emergency conditions and extreme political pressure, how can the best interests of separated children be determined?

A Shift from General to Targeted Food Distribution

In the Ivory Coast after six years of food assistance, many Liberian refugees had achieved some degree of economic self-sufficiency and, except for the more recently arrived, general food distribution was phased out and rations were distributed only on a targeted basis to vulnerable households. How best to identify which households were indeed vulnerable was debated. Although almost 70 percent of the refugee population were children, no system was in place to monitor the nutritional impact on children of the change from general to targeted feeding. Operationally, how can the Best Interests of the child be given adequate consideration when changes in food policy affect an entire population but the nutritional and developmental consequences will be greatest for the youngest members?

Harmful Traditional Practices

In a residential centre for supposedly separated Ethiopian refugee children in Somalia, a group of girls approached the director of the centre to request that they should be circumcised in accordance with the tradition in their society.

The director was very opposed to this and decided to approach the problem by way of an educative programme designed to educate the girls in sexual health issues, and in particular to emphasise the physical and emotional consequences of traditional practices. This programme was conducted in a child-centred way by older women who had considerable status in the eyes of the girls and who were very opposed to harmful traditional practices.

Following their participation in this programme, the girls returned to the director to say that they had listened carefully to all that they had been taught, but nevertheless still wanted to go ahead with the traditional practices. They explained that they understood all the arguments that had been put forward but felt that by not conforming to custom they would be stigmatised and this would seriously affect their marriage prospects. They made it clear that if the director refused their request they would go ahead anyway through their own networks.

How should the director proceed? She was clear that there was no value in any further educative initiatives as the issues had already been covered in an appropriate and comprehensive way. Should she acquiesce in their request and at least ensure that the operation is carried out under hygienic conditions, or should
she stick to her strong objection of collusion with harmful traditional practices?
What criteria should she use in determining the children’s best interests?

Separated Boys in the Kakuma Refugee Camp

The population of the Kakuma Camp in North-Western Kenya in 1996 was determined to be just under 34,000, with Sudanese making up 83 percent of the total. The Sudanese population included some 3,000 separated boys aged 8-20 years. Using a methodology for assessing food needs, Save the Children Fund-UK determined that the nutritional situation of the separated boys was particularly precarious. The general ration for the camp provided 1,900 kcal per person per day, while the minimum energy requirements of teenage boys is 2,200 kcal. Unlike those in family groups in the camp, the separated boys did not have relatives on whom they could depend for help in supplementing their rations. Conditions in the area did not permit gardening or other activities through which they could produce extra food. Their food rations were the only resource that they had, and they often sold some of it to be able to buy firewood, school supplies or clothes, which increased their food deficit. Recognising the shortfall between the ration and their needs, the report on the camp's food situation recommended making up for the deficit by starting a school feeding programme. After some delays, this was eventually done. Before the assessment, however, this problem was essentially invisible and decisions about food rations were made based on total number of camp residents.

What steps could and should have been taken to prevent the situation from occurring? How can the principle of the Child’s Best Interests be incorporated into planning for the nutritional and health needs of displaced people?
Exercise 6.2: (Facilitator’s Notes)
Best Interests in Decision-Making

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise, participants will have:

• applied their own experience to the consideration of best interest issues in the case of separated or displaced children;
• considered some of the more important guidelines in making these decisions about separated or displaced children.

TIMEFRAME
30 minutes

METHOD
Ask the participants to provide examples of complex and/or decisions affecting children who were separated or displaced where specialised expertise was needed by not sought.

Brainstorm with them the criteria which would help to guide the decision, and discuss how the decision should be made, and by whom. Record key points on the flip chart.

Overhead 6.3 may be used as a check-list to compare the results of this exercise. In addition, the following points should be included in the course of the discussion:

• In a situation of displacement it is important for government and NGO personnel and UNHCR staff members to know what applicable national law specifies concerning guardianship of separated children and to have an understanding of relevant customary practices.
• In the context of a failed state or a complex emergency, that both legal and customary systems of guardianship may have broken down, procedures must be put in place by those who intervene to make decisions about the immediate protection and care of separated children.
• Those who intervene to protect children must carefully avoid taking action in the short run that may not be in a child's long-term best interests. This is
why, for example, UNHCR policy opposes adoption during an emergency, before family tracing is possible.

• The decisions made concerning separated children can have profound long-term implications, and very often the matter of determining Best Interests is actually a choice among the least damaging of a limited number of alternatives, each with its own negative implications.

• Decision making must balance the options and make such choices in a way that is both informed and objective.

• Where a procedure must be put in place to make Best Interests decisions regarding individual children, it is essential that suitably qualified personnel are involved.

RESOURCES

Flip chart and marker pens.
Exercise 7.1: (Facilitator’s Notes)
Child Participation: Programme Audit

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise participants will have:
- analysed the level of child participation which occurs in a programme known to them;
- discussed ways in which the level of participation could be improved in different components of the programme.

TIMEFRAME
45 minutes

METHOD
Ask participants to work in small groups. Ideally, members of each group should come from the same working situation.

Ask them to consider a programme that they are or have been working on: they should note down the key components of the programme. For each component, they should consider in what ways children and young people are involved. Using the handout “Ladder of Participation”, they should describe the level of involvement that children enjoy. Record the results of the audit on flip chart.

Plenary. Use this opportunity to discuss with the participants ways in which they could consider improving the level of participation for children in each component of the programme that they have described.

RESOURCES
Handout 7.1: Hart’s Ladder of participation.
Exercise 7.2: (Facilitator’s Notes)
Case Study: Involving Adolescents

TARGET GROUP
Sector Co-ordinators, Field Staff.

OBJECTIVES
By the end of this exercise participants will have:
- considered how to work with adolescents in planning to meet their needs in a refugee situation;
- sketched a brief plan of action for a particular group of adolescents.

TIMEFRAME
40 – 60 minutes

METHOD
Ask participants to work in small groups and provide a copy of the Participants’ Notes for this exercise.
Ask them to read the case study and to answer the questions at the end. Ask them to record their plan of action on the flip chart and discuss the key issues in plenary session.
Note: Where appropriate, Facilitators may like to consider adapting the case study or compiling an alternative one more directly relevant to the working context of participants.

RESOURCES
Flip chart paper and pens.
Participants’ Notes for this exercise.
Handout 7.2 may be distributed as a check-list to guide discussion.
OBJECTIVES

By the end of this exercise you will have:

- considered how to work with adolescents in planning to meet their needs in a refugee situation;
- sketched a brief plan of action for a particular group of adolescents.

TIMEFRAME

45 – 60 minutes

METHOD

In small groups, read the following case study and answer the questions at the end. Record your plan of action on flip charts.

In a refugee camp in southern Africa, during a meeting between camp leaders, administrators and officers of the host government’s refugee agency, reports of refugee youth being seen on the streets of the nearest large urban centre were aired. At the same time, concerns were raised about a seeming increase in the numbers of older adolescent boys who appeared to be absent from the camp, during a season when they were not working on the nearby commercial farms. The tone of the exchange implied that the youth were openly breaking camp policy and the potential for the youth to “get into trouble” had to be recognised and dealt with.

An investigation of these concerns revealed the following facts. The camp’s only structured education programmes were at the primary and pre-school levels. A skills training programme was active but was only open to adults. During a significant part of the year, there were no opportunities for adolescents to earn money or contribute to the material needs of their families. Recreational opportunities were extremely limited, did not cater to the needs and interests of adolescents and were virtually non-existent for adolescent girls.

The travel of refugee youth, primarily adolescent males, between the camp and the urban centre was confirmed. Interviews with them revealed that this was the result of a business opportunity brought about by the recent supply of canned fish from a donor country that had become part of the refugee food basket. The refugee population did not like the fish but had come to find that it was desired by the local population. Adolescent boys had become involved in collecting the canned fish from the camp population, transporting it to the city and selling it in
various markets. Next, they purchased condiments that the refugee population wanted as relish with their dietary staple, and brought it back to the camp. The adolescents noted that their travel expenses were covered and they made a small profit to contribute to their families or purchase small items they desired. Finally, they noted that the activity was a relief from the boredom they experienced in everyday life in the camp.

- Having now realised that these young people have been largely ignored by the camp authorities and that they were using their time constructively to relieve boredom and to earn some money, how would you now plan for their needs to be better met?
- Put together a brief plan of action which you can share with other groups in a plenary session.
### Handouts

<table>
<thead>
<tr>
<th></th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Notes on Developmental Stages</td>
</tr>
<tr>
<td>7.1</td>
<td>The Ladder of Children’s Participation</td>
</tr>
<tr>
<td>7.2</td>
<td>Issues to Consider when Planning for Children’s Participation</td>
</tr>
</tbody>
</table>
Handout 1.1
Notes on Developmental Stages


**Early Childhood (18 months - 5 years)**

This is a period of rapid mental and physical growth. Movement becomes progressively more coordinated: at 18 months the child can drop things intentionally, at 2 years a ball can be thrown in a specific direction and at five the ball can be bounced on the ground and caught with both hands.

Language development is marked. In all cultures, a relationship between walking and speech is evident. The utterance of recognizable words coincides with the child's first steps. In most cases, the basics of grammar and the ability to talk in sentences will have been acquired by the age of three.

From 3-5 years of age, playing increasingly includes "pretending" and make believe. These games of the imagination let children overcome fears and anxiety. In the game, frightening events can be safely re-enacted; or the child's version can replace actual events and experiences.

In contrast to younger children who will be frightened by loud, unexpected noises, unfamiliar people or animals, the 4-5 year old will also be frightened of imaginary dangers. At this age nightmares become increasingly common. Children of this age also often find new or unfamiliar surroundings a cause for apprehension, especially if they are not accompanied by their parents.

Through parental discipline and interaction with other family members, the child begins to acquire knowledge of right and wrong, to be able to exercise self-control. Appropriate behaviour is reinforced by the child's identification with the parent, his social role model.

**Middle Childhood (6-11 years)**

Children gradually develop the capacity for logical thought and can see things in "relational" terms. He is able to see the reverse of things and put himself in the place of others. Between 6 and 8 years of age children are able to understand the idea of death in relation to their parents or themselves.

The learning process is begun, through teachers at school (reading and writing) or through other adults in the community (e.g. practical skills required in the community to earn a living or to make a home). People outside the family become important: other adults as social and cultural role models, and peers for self-esteem (the child assesses his successes and failures by comparison with his fellows). Stable family and adult-child relationships are critical factors for healthy development during this period. Feelings of self-esteem are not only related to personal achievements and failures but to the
perceptions of the family. Conditions in the home may lead to a sense of pride for the family, or feelings of shame and embarrassment. Attitudes to work, the community, social roles and responsibilities also begin to be learned and reinforced at this stage.

**Adolescence (12-18 years)**

In early adolescence rapid growth and major changes in body and appearance can lead to strong, conflicting emotions, and feelings of insecurity and self-consciousness.

The adolescent’s sense of identity (the sum of his childhood experiences) is consolidated during this period. The sense of identity is bound up with relationships (positive and negative) with others; family history and traditions; religious beliefs, political ideas, social/cultural values and standards; role choices; physical and mental well-being. Personal identity gives the adolescent a strong sense of who he is, what he believes, what he can or cannot do. If no coherent idea of the self evolves, the resulting confusion may give rise to anti-social behaviour that reflects their continuing self-doubt.

The process of separation from the family begun in adolescence is a gradual one. Peer relationships become more important as family bonds are loosened. Yet, while the adolescent may be capable of independent thought, of taking responsibility for his own actions and making choices, he will tend to continue to rely for some time on his parents for advice, security and material support.

**Summary**

Summary of some of the things children of different ages can do (in terms of sense of touch, movement, joint and muscle sense, the development of the hand, sight, hearing, speech and language development).

0-1 month reacts to temperature (warm and cold fingers)  
if the baby is held upright on a firm surface, it makes "walking" movements  
recognizes its mother’s voice  
可以 make all sorts of sounds

3-4 months plays with its fingers and things that hang  
can support itself on its forearms  
can stretch out its hand and take an object and also begin to let it go  
babbles and plays with sound  
smiles at other people  
can follow an object with its eyes from side to side, up and down and in a circle

5-6 months investigates things with both its mouth and fingers; plays with toes  
can hold a large object with both hands  
can move an object from one hand to the other  
imitates and repeats its own sounds

8-9 months crawls on its stomach and can stand if supported  
enjoys experiencing the world  
wants to be carried  
can play "give-take" games  
can have an object in each hand and hit them against one another  
imitates all sounds it hears and understands separate words

12 months can play with chalk, pen and paper  
begins assisting with dressing  
empties its bowels regularly

12-18 months stands and walks by itself with its legs apart  
squats on its heels and gets up again

18 months can drop things intentionally
points at things it wants
no longer dribbles
understands that it is to empty its bowels

2 years  walks sidewards
can throw a ball in a specific direction
can distinguish a form that looks similar to the one the adult is holding

3 years  can sort out objects according to shape in different piles
understands "give one to every child"
jumps with both feet together

4 years  runs well
balances along a thickly drawn line
sits still and concentrates
can feel different weights
can imitate movements with its body
can pour water into a mug with one hand

5 years  can talk about a previous occurrence
can see totalities -that a half-finished house is to be a house
able to bounce a ball against the ground and catch it with both hands
can make itself stiff-limp
can stand on one leg without support

6 years  can sort objects according to length
can differentiate surfaces (different types of sand, cloth and suchlike)
can put the thumb against the finger tips
has a dominant hand
stands on one leg 8-10 seconds with eyes closed

7 years  can tie a bow
able to explain the difference between two things
can catch a small ball
can control facial muscles like closing one eye, looking glad, angry or sad
can do somersaults

3-7 years  the child begins to use words and images to think about reality. He tends to think he is the centre of the world and has difficulty imagining himself in the place of another.

7-12 years  the child begins logical thought and can see things in 'relational' terms; he is able to see the reverse of things and put himself in the place of others.

12+ years  the child can think in abstract terms, reason by hypothesis and generalize. He becomes interested in ideas, the future, and political, religious and social problems.
The Ladder of Children's Participation

Degrees of Participation

8. Child-initiated shared decisions with adults
7. Child-initiated and directed
6. Adult-initiated, shared decisions with children
5. Children consulted and informed.
4. Children assigned but informed.
3. Tokenism
2. Decoration
1. Manipulation

Non-Participation

Appropriate and effective child and adolescent participation requires careful consideration of questions such as the following:

- What are the objectives of involving young people? Are they appropriate to the children’s emerging competencies and skills?

- In what areas and aspects of the programme are young people being involved? What are the appropriate limitations of child participation in this context?

- What are the local cultural attitudes towards child participation? How will participation be explained to the young people, parents, community leaders? What difficulties can be anticipated and how will they be overcome?

- What methods and techniques will be used to involve young people?

- Have gender issues been thought about and addressed? Will the participation of girls, or of boys, require particular approaches or techniques?

- Are the staff committed to child participation? Have they experience the benefits of participation themselves? Do they see it as any kind of threat to their own position, and if so how will this be addressed?
RECOMMENDED READING


UNHCR (1994): “Refugee Children: Guidelines on Protection and Care”, UNHCR, Geneva: this is relevant to all Topics in this Resource Pack, but in particular it contains useful sections on separated children (Chapter 10), participation (Chapter 2), children’s best interests (Chapter 2, 8, 10 and Annex A). In addition, Chapter 4 provides useful material on child development in refugee contexts, which is particularly relevant to Topics 2 and 5.

FURTHER READING


Tolfree, David (1996): “Restoring Playfulness: Different Approaches to Assisting Children who are Psychologically Affected by War or Displacement”, Stockholm, Radda Barnen. See especially chapters 2 - 7, 11 and 12, which are particularly relevant to Topic 3.


Hart, Roger (1997): “Children’s Participation: The Theory and Practice of Involving Young Citizens in Community Development and environmental Care”, London, UNICEF and Earthscan Publications, especially Chapters 1, 2 and 3, which are relevant to Topic 7.

Further reading on the main subjects covered by Topic 4 will be found in the relevant ARC Critical Issues Resource Packs.