

GENDER-BASED VIOLENCE AGAINST CHILDREN AND YOUTH WITH DISABILITIES

A Toolkit for Child Protection Actors

PRINCIPLES AND GUIDELINES





ACKNOWLEDGEMENTS

These Principles and Guidelines are taken from *Gender-based Violence and Children and Youth with Disabilities: A Toolkit for Child Protection Actors*. The full toolkit, which includes Capacity Development Tools on Disability Inclusion in GBV Programming; Child- and Youth-Led Participatory Assessment; and a Communication Toolbox, is available at <http://wrc.ms/GBV-disab-youth-children-toolkit>

ChildFund International is a child-focused, non-government organization whose mission is to help deprived, excluded and vulnerable children have the capacity to improve their lives, and have the opportunity to become young adults, parents and leaders in their communities. ChildFund also exists to promote societies whose individuals and institutions participate in valuing, protecting and advancing the worth and rights of children.

The Women's Refugee Commission (WRC) improves the lives and protects the rights of women, children and youth displaced by crisis and conflict. WRC researches their needs, identifies solutions and advocates for programs and policies to strengthen their resilience and drive change in humanitarian practice.

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ChildFund International
2821 Emerywood Parkway
Richmond, Virginia 23294-3725 USA
global@childfund.org
www.childfund.org

Women's Refugee Commission
122 East 42nd Street, New York, NY 10168-1289
t. 212.551.3115
info@wrcommission.org
womensrefugeecommission.org

PRINCIPLES AND GUIDELINES FOR THE INCLUSION OF CHILDREN AND YOUTH WITH DISABILITIES IN GBV PROGRAMMING

ChildFund International has a particular interest in promoting the rights of the most deprived, excluded and vulnerable children, and this requires it to ensure that girls, boys, young women and young men with disabilities are adequately represented in all programs and activities, including those addressing child protection and GBV. ChildFund's framework for development places child and youth agency as a key element throughout the program cycle, from assessment, design and implementation through monitoring and evaluation. Similarly, the Women's Refugee Commission puts children and youth with disabilities at the center of humanitarian programs and advocacy, working with them as partners to identify protection concerns and risks, as well as to explore their ideas for change. Operational and participatory research is used to build bridges between children and youth with and without disabilities, their communities and humanitarian actors, strengthening their capacity and creating space where the most marginalized have a voice on issues that affect them.

In GBV prevention and response programming for children and youth, it is critical to understand the gendered nature of violence against children. Gender norms and inequality, social structures and age all intersect with other sources of social disadvantage to influence the vulnerability of girls and boys to different forms of violence. When gender and age intersect with disability, it becomes even more critical for program staff to understand and adopt inclusive programming approaches in child protection and GBV programs and activities, fostering the participation of children and youth with disabilities, who are routinely exposed to multiple kinds of violence, abuse and exploitation.

In the principles and guidelines below, particular attention is given to girls, who are disproportionately affected by GBV due to their intersecting identities as both young and female. The forms of GBV that they are exposed to may include, but are not limited to sex-selective abortion, child sexual abuse,¹ rape, trafficking, forced prostitution, child marriage, dowry-related violence and female genital mutilation. When disability is also part of girls' identity, they may also be exposed to differential forms of violence and human rights violations, which have both disability- and gender-related dimensions, such as forced or coerced sterilization, withholding of assistive devices for mobility and/or communication, and denial of assistance for personal hygiene and or daily tasks.²

The following principles are proposed to foster the participation of children and youth with disabilities, and those affected by disability, in community-based child protection and GBV programs, strengthening their foundational assets³ to in turn mitigate their risk of violence, abuse and exploitation across different life stages.

PRINCIPLES FOR INCLUSION OF CHILDREN AND YOUTH WITH DISABILITIES

Principle 1: Children and youth with disabilities have a right to participation and inclusion in programs

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) requires states parties to ensure that persons with disabilities are protected in situations of risk, and "that protection services are age-, gender- and disability-sensitive."⁴ Exclusion of children and youth with disabilities from existing activities and programs, whether inadvertent or purposeful, is therefore a form of discrimination. Program staff and development actors must recognize the diversity of the populations they serve, including the different risks faced by girls and boys with different types of disabilities at different life stages, and by those living in households with persons with disabilities. The inclusion of children and youth with disabilities and those affected by disability in ongoing and new programming is critical to reducing their risk of GBV and should be a core dimension of programming – not something "special" or separate.

"When I come to the event and I see there are persons with disabilities, I feel like I am not alone. And when I see other [non-disabled] people there, I feel equal."

— Girls with disabilities presenting to women's organizations in Northern Caucasus as part of a program evaluation

1 Child sexual abuse is defined as "any form of sexual activity with a child by an adult or by another child who has power over the child." International Rescue Committee, *Caring for child survivors of sexual abuse: Guidelines for health and psychosocial service providers in humanitarian settings* (New York: IRC, 2012), p. 15.

2 Human Rights Council, 20th Session, *Thematic study of the issue of violence against women and girls with disabilities, A/HRC/20/5*, 30 March 2012. http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session20/A-HRC-20-5_en.pdf (accessed 2 November 2012).

3 Evidence suggests that supporting children and youth, particularly during adolescent years, to develop human, social, financial and physical assets, improves their health, reduces their risks and equips them with the skills to positively impact their families and communities. Education, communication skills, friendships and social networks, as well as having vocational skills and opportunities in older adolescence are considered the "building blocks of economic and social empowerment." For more information about asset-based approaches, please refer to: Women's Refugee Commission, *Strong girls, powerful women. Program planning and design for adolescent girls in humanitarian settings* (New York: WRC, 2014). <http://wrc.ms/StrongGirlsReport>

4 United Nations, Convention on the Rights of Persons with Disabilities (Geneva: United Nations, 2006).

Principle 2: See the girl, boy, or young person first, not their disability

Children and youth with disabilities have life experiences, dreams and goals like other children and youth, and, when asked, may identify simply as friends, daughters, sons, sisters, brothers and so forth. They are exposed to the same stigma, discrimination and inequality based on age and gender as other girls, boys, young women and young men. Yet, these factors are often overlooked, as program staff, families and communities prioritize the disability-related needs of this group.

"We want to learn things, we want to go to school, we want to make friends, and we want to be productive. Someday, some of us want to be wives and mothers. But people forget about girls with disabilities. They forget we have goals and dreams."

— Bolia, 16-year-old girl living in Burundi

Principle 3: Do not make assumptions

Program staff often make assumptions about what children and youth with disabilities can and cannot do, or what activities would be most suitable for them. Taking time to consult with them, exploring their interests and providing them with opportunities allows children and youth with disabilities to be recognized as the experts on their situations and enables them to provide insights into issues that shape their daily lives.

"I can work hard and I can prove that despite what they said in the hospital in the Congo, I am not 'worthless'. Instead, I am a girl with a lot to share and to offer."

— Sifa, 16-year-old refugee living in Burundi

Principle 4: Identify and value all contributions

Participation will look different for every individual, and vary according to their personal preferences, the type of activity and how familiar they are with program staff and peers. Program staff should take the time to watch, listen, talk and interact with individuals to learn more about them, what their preferences are, and their skills and capacities. It is also important to avoid setting rigid standards for "participation." Everyone has something to contribute – this may be a picture, a gesture or a detailed discussion – all of which should be valued and recognized in efforts to engage meaningfully with children and youth with disabilities.

"At these events, parents were standing aside and our children were at the front and the officials were paying attention to them. ... I was really proud, and I was thinking, is it really my daughter?"

— Mother of a girl who is deaf in Northern Caucasus

Principle 5: Work with families and caregivers

Program staff should seek to understand the concerns, priorities and goals not only of girls, boys, young women and young men with disabilities, but also of those who may be taking on caregiving roles for persons with disabilities, as they may also be excluded from community activities and opportunities. It is critically important to engage caregivers of children and youth with more profound disabilities, including parents and siblings. By engaging wider family units, the development community can both support and strengthen healthy relationships and balanced power dynamics among caregivers, children and youth with disabilities and other family members. This is particularly important when working with girls and young women with disabilities who are likely to have less power and status in society due to age, gender and disability norms.

"My daughter is growing up. She is getting bigger, so taking care of her can be challenging. But we do it together, my oldest daughter and me. ... She loves to be outside and to see things and greet people. ... I know she enjoys this, so I try hard to take her out."

— Mother of a 14-year-old girl with intellectual disabilities living in a refugee camp in Ethiopia

GUIDELINES FOR PROGRAM STAFF

Girls, boys, young women and young men with disabilities should have the opportunity to participate in the same programs and activities as other children and young people. It is critical to identify and remove barriers to existing programs and activities, and avoid setting up separate programs and activities that may further marginalize children and youth with disabilities from their peers and communities.

Following are practical steps that program staff can take to support implementation of the above principle, and to ensure that existing child protection and GBV programs are accessible to and inclusive of children and youth with disabilities and those affected by disability.

1. Profile diversity among children and youth with disabilities in the community

Children and youth with disabilities are a diverse group, with varying needs, concerns and capacities. Program staff can better understand this diversity by collecting and analyzing population data that is disaggregated by sex, age and disability, and conducting assessments to identify the profiles of girls, boys, young women and young men in a community. This should include vulnerability factors, such as living with both parents, just one parent or alone; being in or out of school; and different types of disability, including of those who have multiple disabilities and are isolated in their homes. Assessments should also include infants with disabilities and their caregivers, so as to identify gaps in both service provision and parenting approaches, which may differ between girls and boys. Finally, pregnant women and mothers with disabilities may face a unique combination of GBV risk factors, making them a priority for activities which target parents and caregivers, and enabling them in turn to foster safe and caring environments for infants and children with disabilities.

2. Outreach is critical

Children and youth with disabilities, and often their siblings, may be isolated and hidden within their communities. They may lack confidence and social networks, and their mobility and access to public spaces may be restricted, particularly if they are female, due to a variety of attitudinal and environmental barriers, including security. Assessments and evaluations should therefore include an outreach component to engage children and youth with disabilities and their caregivers who are isolated in their homes. In some contexts it may be possible to support existing children and youth groups to undertake such outreach, so they themselves may provide information to children and youth with disabilities and their caregivers about available activities, establish communication preferences, build trust and develop strategies to address barriers to participation.

3. Put children and youth at the center of program decision-making

Involving children and youth with disabilities in GBV program design and evaluation is critical to accurately identifying barriers to their participation in programs, developing effective strategies to improve their participation, and understanding what changes matter most to them. Participatory approaches, such as ranking exercises, photo elicitation and story-telling are examples of ways, in addition to more traditional qualitative methods (e.g., focus group discussions and one-on-one interviews), to effectively explore the concerns and ideas of individuals who have different communication needs. Children and youth with and without disabilities can be encouraged to work together to identify their own goals and the foundational assets that they wish to develop. This gives them ownership over the programs and activities that affect them, fosters protective peer networks and supports the development of important life/leadership skills.⁵

"These are our ideas that we would like to see in the future....We would like a place to meet with some girls at a café or a place for just girls with and without disabilities – just girls, without adults."

– Girls with disabilities presenting to women's organizations in Northern Caucasus as part of a program evaluation

4. Make safe spaces "safe" for ALL girls

Establishing safe physical spaces where girls can meet separately from boys, connect with peer and social networks, learn skills and safely access information and services, is an effective method of reaching those who may be socially isolated, lack confidence and fear for their safety outside of their homes. Program staff managing safe spaces can support girls' groups to reflect on what makes that space "safe" for them. They can establish their own ground rules about keeping activities open and welcoming to girls with different types of disabilities, thereby reducing the risk of stigmatization and discrimination. Girls' groups can also play a critical role in defining whom should be included in future activities, and conducting outreach to groups of girls who are more isolated and excluded, such as those with intellectual disabilities.

5. Identify mentors with disabilities

Creating a network of strong, young female leaders with disabilities in a community will not only improve the status of women and girls and challenge social norms relating to gender, but also highlight the skills and capacities of persons with disabilities. Children and youth with disabilities want to be seen as leaders, friends, and community members; people who can make valuable contributions to their community. Program staff should recruit young women and men with disabilities as volunteers and staff in all types of programs, including GBV programs.

⁵ Women's Refugee Commission, *Strong girls, powerful women. Program planning and design for adolescent girls in humanitarian settings* (New York: WRC, 2014). <http://wrc.ms/StrongGirlsReport>



ChildFund[®]
International

ChildFund International
2821 Emerywood Parkway
Richmond, Virginia 23294-3725 USA
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t. 212.551.3115
info@wrcommission.org
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