RESEARCH PAPER

'Let pikin bisniss be all men bisniss'

**Survey Community based psychosocial programme
War Child Sierra Leone 2005 – 2006**

War Child Holland is an independent international non-governmental organization. The organization invests in a peaceful future of children affected by armed conflict.

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War Child Sierra Leone 2005 – 2006

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1.   Introduction

1.1   Background of the conflict in Sierra Leone

Sierra Leone is still recovering from a decade of civil war, which lasted from 1991 till 2002. The conflict between government forces and RUF rebels (Revolutionary United Front) pivoted on the control of diamond mines and affected most of the country and its civilian population. Combatants of the different factions committed numerous atrocities: An estimated 75.000 people were killed and 20.000 mutilated. The estimated number of women who were victim of sexual violence exceeded 250.000 and more than 10.000 children were recruited as child soldiers. About half of the country's population fled their homes at some point during the conflict, seeking refuge in camps, with family or hidden in the bush. After the conflict ended in 2002 the whole country was socially and economically disrupted. A process of recovery and reconstruction was set in motion. People returned to their home villages and tried to pick up the pieces and rebuild their lives. But they found their communities in shambles: homes, schools and wells destroyed and social structures non-functional. Former combatants, the child soldiers among them, were facing new problems while trying to reintegrate into society. Under these circumstances child rights and psychosocial needs of children and youth tend to be neglected as people focus on other priorities.

1.2   Background of the Community Based Psychosocial Programme in Sierra Leone

Within War Child, the community-based approach is relatively new and Sierra Leone was the first self-implementing War Child Programme Area (WPA) applying this approach. The community-based programme aims to address the psychosocial needs of children and youth through helping to rebuild peaceful child- and youth-friendly communities through the use of cultural, creative, recreational, sportive and social activities. The focus is on getting stakeholders within the communities to recognize the role, rights and needs of children and youth in their community and to act accordingly. The community-based programme is designed to empower children and youth to play a positive role in their community, while it also empowers the community to take better care of its children and youth.

Community participation is ensured at all stages of the programme: representatives from the community express their views on the psychosocial needs of the children and youth in their communities, they design and take collective action to address these needs with War Child support and they monitor and evaluate the impact of the actions taken. The methodology, using Participatory Needs Assessment (PNA) and Action Planning (AP) and implementation of a wide variety of Action Plan activities (including awareness raising actions) by Community Action Groups, is designed to generate a positive dynamic in which all stakeholders (children, youth and adults) participate and collaborate to achieve the programme objectives in a sustainable manner.

The community-based pilot programme started in 2003 in 20 communities in three severely war affected districts: Western Area, Port Loko and Bombali. At the end of 2004 a mid-term review of the pilot was carried out.[1] In 2005 the second (2-year) cycle of programme implementation started in 20 new communities.

Short overview of the 2005 – 2006 cycle of programme activities
Participatory Needs Assessment (PNA) and Action Planning (AP) was carried out in all communities. War Child Project Officers (POs) met with key stakeholders and Focus Group Discussion meetings were set up in order to identify and prioritize psychosocial problems of children and youth within the community and formulate necessary changes and possible solutions to these problems. Problems that were identified in most communities were lack of respect for elders, school drop out, lack of play opportunities for children, lack of participation of children in community life, drug abuse, and early marriage. The PNA process (which took three months) resulted in an Operational Action Plan (OAP) for each community. Furthermore, Community Action Groups (CAG) and Child and a Youth Support Structure (CYSS) were formed to implement the OAP. Throughout the PNA/AP process, the War Child teams organized fun activities for children.

The OAP is implemented by the Community Action Groups. Within every community, a War Child Project Officer (PO) fulfilled the role of facilitator, offering assistance, guidance and training. After one year of programme implementation, an official hand-over took place in all communities, including the handing over of the Safe Play Area and other community materials.

In the second year of programme implementation (2006), the War Child PO role changed into monitoring the communities and providing support upon request and encouraging them to sustain the programme activities and achievements. Throughout 2006, activities continued to take place every month. The frequency of implementation of activities differed between communities. Overall, activities within the communities, like CYSS meetings, drama, sports, community music, Tefeya dance, children's and youth clubs, took place once a month. Panel discussions about community issues mostly took place once every three months.

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[1] Mid Term Review Community Based Psychosocial Project. 'A war don don'. War Child Holland in Sierra Leone.

1.3   Background of the survey

This survey is a rapid assessment of the existing conditions in the communities (at different moments in time) in relation to the main indicators set out by WCH Sierra Leone in its logical framework for intervention. The indicators are developed to measure the creation of conditions that will contribute to the improvement of a healthy psychosocial development of children and youth in the communities. These indicators are:

1. Level of access of children and youth to play facilities and participation in community activities.
2. Level of awareness of children and adults of child rights and responsibilities.
3. Level of awareness of community members of psychosocial problems/needs of children and youth.
4. Level of adult and peer support for children and youth.
5. Level of positive communication and interaction between children and adults.

For the Community Based Programme to be considered successful community members (children, youth, and adults) must perceive improvements in terms of these indicators. The survey is designed to measure values of the indicators at different moments in time. Three measurements with the same respondents have taken place, with a time interval of 12 months. First data collection took place before starting programme implementation. This is called the baseline data. The second phase of data collection took place after one year of programme implementation. The third, and final, phase of data collection took place after two years of intervention.

2. Survey with repeated measures

2.1 Design and survey methods

This survey can be described as a multiple repeated measures design, meaning three measures of the same indicators for the same participants of the intervention group over time. No control group was involved in this study. By applying the same standardized instruments at different times, we test for statistical significant stages of change, presumably resulting from on-going intervention activities. However, a statistical significant causal relation between improvement of the intervention group and the intervention itself can not be proven with this survey.

Baseline measurement was conducted in January 2005, before starting programme implementation. Second measurement took place in December 2005, after one year of programme implementation. For the first two measurements, data was collected by means of a questionnaire. The third and final measurement was conducted in December 2006 (after two years of programme implementation). Note that for this final measurement, small sized Focus Group Discussions were conducted.

Both quantitative and qualitative survey methods were used to measure programme indicators. For the first two measurements, a questionnaire was administered. This questionnaire was designed to capture information on the main indicators set out by WCH Sierra Leone. Questions were related to the indicators below.

- Level of access of children and youth to play facilities and participation in community activities.
- Level of awareness of children and adults of child rights and responsibilities.
- Level of awareness of community members of psychosocial problems and needs of children and youth.
- Level of adult and peer support for children and youth.
- Level of positive communication and interaction between children and adults.

Most of the questions in the questionnaire were structured, but in addition some questions were open ended and respondents could reply anything related to the topic of the question, providing us (possibly) with another view on the same topic.

Two types of questionnaires were constructed, one for children and one for adults. All questions are the same content-wise but needed rephrasing to be suitable for either children or adults. Both questionnaires were constructed in English and translated into Krio and Temne, which are among the most common spoken languages in the areas where the survey took place. See Annex A for a full version of the questionnaire administered to children.

The third and final measurement was performed by means of Focus Group Discussions (FGD), also capturing the indicators of the WCH Sierra Leone programme. Again, two types of FGD were developed and outlined, one for children and one for adults.

In these FGD, semi-structured questions were asked mostly by using participatory drama exercises (such as string exercise, chair and line debate, and image work). Furthermore, pictures were used to identify and discuss child rights and psychosocial problems of children in the community. All responses were recorded by the Project Officers (POs). See Annex B for the outline of the Focus Group Discussions, and the pictures that were used.

2.2 Selection and sampling procedure

WCH Sierra Leone selected six communities for the survey, out of the total of twenty communities that participated in the Community based Psychosocial Programme. Within these six communities a random selection of community members (children, youth, and adults) were involved in the survey. To be able to apply findings from the sample of people interviewed to the wider target group (all people within the community), a careful sampling and selection procedure was set up. The most representative sample for this type of survey was achieved by using unbiased sampling and creating a sufficiently large enough sample. Several types of non-random sampling were used: cluster sampling, convenience sampling and purposive sampling.[2]

Cluster sampling entails the selection of an equal number of respondents from a set of identified clusters (e.g. communities, gender, age). Convenience sampling (or: snow ball sampling) means that respondents are found and selected with the help of resource persons (e.g. community chief, peers). Purposive sampling implies that only respondents who match the inclusion criteria and survey purpose are selected for the study.

The total population size within the six communities adds up to 14103, with an average of 2350 inhabitants per community. The sample size (N) is set at 1200, being 8.5% of the total population size. Within each community, 200 respondents were selected.[3] By having a sample size of 8.5% of the total population we minimized the chance of finding results by chance. Note however, that participants are on purpose not selected based on programme participation. This means that a part of the respondents may be active within the community (being member of a child & youth support structure (CYSS) or taking part in a Community Action Group), whereas others will only be indirectly involved in community activities. This way of selection is based on the assumption that the community as a whole should benefit from the intervention, regardless of level of involvement with construction and/or implementation of the Operational Action Plan (OAP).

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[2] However, the most unbiased way of sampling (creating a representative survey population) is random sampling where each member of the population has an equal and known chance of being selected. For practical reasons (no complete lists of names of people living in the communities), random sampling was not possible.

[3] Initially, two other communities in Western Area (Rogbamba) and Bombali (Makomp Doron) were initially taken into account for this study, but were excluded because WCH stopped programme implementation in these communities. Instead, two new communities (Mapaki and Hamilton) were added to the baseline survey in a later stage. All procedures for data collection as described in this report have also been applied to these communities.

This subset of selected participants was approached for the first two measurements. The third and final measurement took place with a selection of respondents (18%) out of this subset, using random cluster sampling within three out of the six communities.

Drawing a selection of a total population to collect data from saves time and resources, and can still represent the whole population as much as possible. Since the survey communities are expected to be representative, and the selection of sub-sets of community members was done carefully, we assume that results of this survey can be applied to all six communities that are part of the 2005–2006 Sierra Leone programme.

2.3   Procedure of data collection

The survey team consisted of 20 Project Officers (POs), who are all experienced War Child community workers. Three measurements were conducted and data was gathered by conducting interviews based on structured questionnaires and FGD. Before starting baseline measures (T1), Project Officers took part in a 4-day training session. At the second measure (T2), a follow-up training session re-introducing the survey and questionnaire, and a follow-up training on interview skills took place. Before starting data-collection for the final measurement (T3), PO's were trained in Focus Group Discussion (FGD) techniques, including participatory drama exercises. Work plans (especially on selecting and tracing back respondents) were prepared in cooperation with the PO's who were easily acquainted with the procedure of data collection. This procedure entailed: approaching the right people, motivating people to participate in the interview and finding an appropriate place to conduct the interview. Especially tracing back the same children and adults for the second interview requested a huge effort.

Before starting the interview and FGD, the PO explained the purpose of the survey and the way of working. Participants were informed that participation is on voluntary basis and without remuneration and that there is no direct connection between the survey and possible future WCH activities. Finally, strict confidentiality was guaranteed and the PO asked the respondent's consent to participate. The interview and FGD took place in the participants' mother tongue, being either Krio or Temne. Mostly Temne was used, since this is the most common language in the districts Port Loko and Bombali. PO's recorded all captured data in English.

The interviews were conducted individually and took thirty minutes on average at the second measure (T2).[4] Focus Group Discussions took about four hours each group, including a break. All focus groups consisted of 15 participants, being girls, boys, women and men. In every community, a FGD was conducted for every target group.

2.4   Data entry and analysis

A data typist in country performed data entry of the questionnaires. FGD data was registered by PO's. Data from all communities is compiled, but split for target groups (children, adults). Since both quantitative and qualitative methods were used, two types of analysis were carried out.

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[4] See also Table 1, Annex C. No information on interview time was collected at the first measure (T1), but from experience we know that this took also about half an hour.

The quantitative data was analysed using statistical tests (paired t-test and One-way Anova) to test for significance of differences between measurements (before starting (T1) vs. after one year of programme implementation (T2). Average score and standard deviations (sd.) are reported, as well as frequencies. For some items, 'difference-scores' (T1 value minus T2 value) are calculated to provide information on the relative change between the two measurements. In case of statistical significant results, test results are reported. Most tables containing statistical information are included in Annex C. Throughout the report, reference is made to the time of measurement (T1, T2, T3) when relevant.

A qualitative content analysis was done to categorize all qualitative data (that is, the responses to the open-ended questions of the questionnaires and responses of FGD). Content analysis was performed by categorizing or grouping the responses and formulating meaningful categories. This way, scales and categories were constructed post data collection, based on local perceptions on the topics questioned. On these scales, frequencies are reported and in some cases statistical tests are performed. The quotes referred to throughout this report are based on FGD, and are reflecting the majority's viewpoint within the focus groups.

2.5   Response

Response at the second measure (T2) was very positive: 83.2% of the original respondents (adults and children) participated again in the survey. This means a non-response of 16.8% only, which is very reasonable for this type of surveys. This positive response result is definitely related to efforts made by all PO's when tracing back respondents.

Table I: Response

	Children	Adults	Total
Response at T1	582	611	1193
Response at T2	488	504	992
Response at T3	90	86	176
Non response (T1 –T2)	94 (16.1%)	107 (17.5%)	201 (16.8%)
Selected response (T3)	18.5%	17.1%	17.7%

At the first measure (T1 in January 2005) a total of 1193 questionnaires (611 adults and 582 children) were completed successfully. At second measure (T2 in December 2005) a total of 992 questionnaires (504 adults and 488 children) were filled out. Questionnaire results are reported based on the response at T2 (488 children and 504 adults) unless indicated otherwise. FGD results are reported based on the response at T3 (90 children and 86 adults).

Furthermore, non-response was distributed equally between communities and no statistical significant differences were found between the non-response and respondents in terms of gender and average age. Reasons mentioned mostly (by both children and adults) for not responding were: respondent passed away or is seriously sick; respondent left the village permanently (for work, further education or marriage); respondent left the village temporarily (for medical reasons or other duties elsewhere); respondent could not be traced back (no information retrieved on the respondent's whereabouts). Only a few adult participants refused to participate in the survey any more, mostly due to lack of time.

2.6   Participants demographics

Geographical stratification was performed conform the selection criteria, resulting in a proportional representation of children and adults at the six community sites (see Annex C, Table 2). The majority of respondents participating in this survey are born in the village where they were living at the time of measurement.

2.6.1   Gender and age
Gender is equally distributed across conditions at all times of measurement (no statistical differences were found between conditions). Within both the adults and the children group, almost half of the respondents are male and the other half female (see Annex C, Table 3).

2.6.2   Education
At the first and second time of measurement, the majority (about 80%) of the children were attending school, and about 10% of the children have been attending school but were not going to school at the time of measure. The others (up to 10%) never attended school. At the third measurement, 90% of the interviewed children reported to attend school. Most of the children who dropped out of school, or never attended school, are girls (77%).[5] No selection effect of age was found among children who were not attending school.[6] Also, no increase of school enrolment was found throughout programme implementation. (For further analysis on educational background see also Annex C, Tables 4.1-4.4).

2.6.3   Working children
Almost all (93%) of the children who participated in this study indicated they do any kind of work. Many children indicated doing several types of jobs or chores. On average, children mentioned they had 2 jobs or chores (see Table 5.1-5.2, Annex C). Children were engaged in domestic work, as well as income generating work. Most common examples of domestic work were: sweeping and cleaning the compound. Also, fetching water, collecting wood, cooking and doing the dishes, plaiting hair and taking care of siblings were tasks commonly mentioned by children. Examples given of income generating jobs were: working at the farm (growing cassava, planting rice) and petty trade. Boys were more often engaged in the income generating jobs, whereas girls were more often engaged in domestic work. Most of the work was done before going to school and in the weekends. Working and going to school seemed not to negatively influence each other.

2.6.4   Profession of adults
Adults in the survey were asked about their profession. Most of the adults (90.5%) indicated their profession. The most typical profession, (practised by 51% of the adults) is farmer, especially related to palm-wine and palm oil production.

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[5] These figures of school enrolment are quite high for Sierra Leone, and might not be reliable. Furthermore, these figures do not provide us with any information regarding the regularity of school attendance, leave alone quality of education.

[6] The average age of the children who dropped out of school is not significantly different from the average age of the total survey sample.

Many women (46% of the total number of women in this sample, and 24% of the total sample including men) indicated their core profession is their task as a housewife (see Table 6, Annex C). A minority (9.5%) indicated not to have any profession, or indicated being unemployed.

2.6.5 Family and housing situation

Both children and adults were questioned about their living situation in the family compound. In Sierra Leone, it is common to live with several families sharing a compound area/housing area. On average, people in the survey communities live with 15 people in the same house or compound, mostly with relatives (children, parents, grandparents and other relatives). However, there is a huge variation in the total number of people in the house, and it varies up to 64 people. The average number of children living in the house is 8 (see also Table 7, Annex C).

2.6.6 Involvement in War Child programme

Though selection of participants was by no means based on level of programme participation, respondents were asked for level of programme/community involvement at final measurement (T3). As shown in Table II below, about 40% of children and adults were indirectly involved in the War Child intervention, by attending community meetings and activities. The majority of respondents were more directly involved (e.g. In terms of CAG; CYSS, key stakeholder).

Table II: Level of involvement in War Child intervention – community activities (at T3)

	% Children N=90	% Adults N=86
Indirectly involved: Participant of community activities	37.8	44.7
Directly involved: CAG (Children's or Youth club)	23.3	5.9
Directly involved: CYSS member	10.0	5.9
Directly involved: Key stakeholder	-	2.4
Directly involved: CAG member (not specified what type of CAG)	28.9	37.6
Directly involved: CAG Tefeya	-	3.5

3. Results

The results of the survey are described in accordance to the main indicators set out by WCH Sierra Leone in its logical framework for intervention. All indicators were studied within both children and adults.

As a reminder, the three measurements (T1, T2, T3) are outlined below:
T1 = Baseline measurement, before the start of the intervention. Quantitative and with full group of respondents (N=992).
T2 = Second measurement, after one year of intervention. Quantitative with full group of respondents (N=992).
T3 = Third measurement, after 2 years of intervention. Qualitative Focus Group Discussions with smaller group (N=176).

3.1 Level of access of children and youth to play facilities and participation in community activities

Level of access of children and youth to play facilities and children's participation were measured as these were considered important indicators of play opportunities of children. As part of the programme a play ground was constructed in each community as well as material inputs for different recreational activities. Furthermore Community Action Groups organised a wide variety of cultural, recreational and social activities, in which children were encouraged to participate.

3.1.1 Places and materials for play

Children were asked whether there are places to play within their community, and more specifically where they are used to play.[7] At both measures, over 80% of the children indicated that there are places to play for children. This implies that there was no lack of places to play before the intervention.

At both measures a large majority (about 80%) of children and adults indicated that children mostly play at home and on the streets. The average number of places for play mentioned increased significantly between the two times of measurement (2.0 to 3.1).[8]

During FGD (T3) children and adults were asked what keeps children from playing. Responses showed that in the past, adults kept children from playing because they did not always allow children to leave the compound to play with other children because of safety concerns. Some parents said they especially restricted their daughters from playing because they were afraid for her to be raped or be engaged in early sex (still, the 'hide and seek' game is notorious for this). Other reasons mentioned were lack of play materials and lack of a safe place to play. According to adults, War Child's provision of a play ground and play materials improved play opportunities and made play safer.

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[7] Responses to this question were spontaneous, which means that no answer options were presented to the child.

[8] Children mentioned 1.9 play opportunities at baseline and 3.0 at second measurement (t(487)=-14.86; p<.000). Adults mentioned 2.0 play opportunities at baseline and 3.2 at second measurement (t(503)= -19.20; p<.000).

Nowadays, adults are encouraging children to go playing and they provide them with play materials (when they can afford it). Especially the shy, withdrawn and isolated children are encouraged by their parents, CYSS members and village elders.[9]

3.1.2 Child participation in community activities

Children and adults were asked about participation and roles of children in community activities. At the first measure they were asked to name community, cultural or religious activities that take place within the community (see also Annex C, Table 9).[10] Both children and adults listed the same type of activities like dance, games, sport, and other types of recreational activities, cultural and religious activities. Almost all children (96%) mentioned cultural dance activities, and activities most frequently mentioned by (70% of the) adults were general cultural activities, including those related to secret society.[11] It is interesting to note that already before programme intervention a lot of such activities appeared to exist.

At two measures (T1 and T2) it was asked whether children take part in these community activities regularly. Both children and adults indicated that children do take part in community activities more regularly since programme implementation, compared to before.

Table III: Child participation in community activities

Do you/children take part in community activities?	% Children T1 N=452	% Children T2 N=488	% Adults T1 N=504	% Adults T2 N=504
Yes, regularly	74.8	91.4	93.2	99.6
Sometimes	7.2	5.3	3.1	0.2
No	11.4	3.3	3.7	0.2
Mean change score (T1-T2)	.21 (sd. .78)		.09 (sd. .42)	

According to 93.2% of the adults there was already regular child participation at the baseline measurement but this increased further to 99.6% of adults finding that to be the case after one year of the intervention.[12] Children's responses showed a more important increase in participation (change score: .21) than adults (change score .09).[13] To conclude, it was found that children's participation in community activities was already found to be quite high before programme intervention but increased further after one year implementation resulting in over 90% of the children participating in community activities.

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[9] It is assumed that this is also due to the sensitisation on the right to play that was done as part of general awareness raising on the rights of the child, see chapter 3.2.

[10] This was asked by means of an open-ended question, and content analysis resulted in the clusters of activities mentioned in table 9.

[11] Secret society is a common cultural practice in Sierra Leone, initiating children into the community/adulthood. Practices and customs within the secret society are not openly shared (e.g. talked about), and all secret society activities take place at a special place that is mostly hidden in the bush. People fear this place and tell you not to look at it, or talk about it, because if you do spirits might take control over you.

[12] It should be noted, however, that it is not known whether respondents interpreted the word 'regularly' the same during T1 and T2.

[13] $F_{(1, 935)} = 7.51$; $p < .01$.

The role of children during community activities was categorized into the different type of activities that take place within the communities (see also Annex C, Table 9).[14]

- o During *cultural dance activities*, children are taking part as dancers and as music makers (blowing Boo-Boo, beating the drums, clapping) or as performers wearing masks. As stated by one of the adults (during FGD): *'Boo-Boo cultural dance and the Tefeya cultural dance has brought peace and unity amongst children and youth.'* A children's Focus Group responded: *'We are allowed to participate in Boo-Boo, Tefeya, big meetings, and village cleaning. Now that these activities have enough materials, many people show up to watch and take part. Our parents give us the change to actively take part in these activities because they are now peaceful.'*
- o During *community games and sports events*, children most often play football or do running contests.
- o Within *cultural secret society activities*, children are initiated into Bundo society and they initiate songs and dance ('making devil').
- o During *religious activities*, children are often engaged in choir singing, and praying and reciting from the Koran.
- o When *leisure and recreational activities* are organized within the communities, children take part in outings (swimming, playing), watching magic performance, comedy and films and come along with their parents to visit family and friends.
- o Children also take part in *melodrama* by doing miming, and are also engaged in acting and story telling during *community drama* activities.

Some examples of child participation in community life were mentioned during the FGD (T3): '*Now my daughter blows Boo-Boo[15], whereas initially I used to stop her from playing. But I was advised by the CYSS to allow her to continue and now she is the female leader of their group'*.

'Children and youth now take active part in community meetings and community self-help activities. For example: When ready for land allocations for farming, children and youth are called to witness. Everyone is working together and respecting each other.'

'A 12-year old boy in this village was very troublesome and he even took drugs. But now he is active in the children's club and various community activities and training. These have helped him to improve his behaviour and he is not taking drugs any more.'

'During the Day of the African Child, children took a leading role in the celebrations. The adults allowed them to talk and express ideas about what they would like to become in future and how they would like their future to look like.'

'Adults now pass their knowledge to the children and youth (teach them how to blow the Boo-boo, and beat the drums). They are also trained in how to organize and lead a group. The children and youth are very much involved in planning community activities.'

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[14] Note that roles of children are not specified for children and adults since both mentioned the same type of roles that children fulfil during community activities.

[15] Boo-Boo is a trumpet made from white kane stick.

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**Level of access of children and youth to play facilities
and participation in community activities**

- While before the intervention there did not appear to be a lack of places to play, follow up measurements indicated that the availability of a safe place to play and play materials led to an increase of play opportunities for children.

- Children's participation in community activities (such as cultural dance activities, sport, games, and religious activities) was already found to be quite high before programme intervention but increased further after one year implementation resulting in over 90% of the children participating in community activities.

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3.2   Level of awareness of children and adults of child rights and responsibilities

As part of the programme, War Child and Community Action Groups carried out regular awareness raising activities on the topic of child rights and responsibilities.

Children and adults were asked whether they know about child rights and child responsibilities and were also asked to name some examples at the first two measures (T1 and T2). At the final measure (T3) FGD were conducted to provide a more in-depth analysis of the meaning of child rights in children's everyday life. During FGD, pictures were shown illustrating both violations of and adherence to several child rights (see also Annex B). Responses to all measures related to child rights and child responsibilities are described below (paragraph 3.2.1 and 3.2.2 respectively).

Table IV: Child rights and responsibilities

	Children T1	Children T2	Adults T1	Adults T2
Have you heard about child rights and responsibilities? (% yes)	39.8	-	60.4	-
Have you heard about child rights?	-	95.1	-	96.6
Have you heard about child responsibilities?	-	94.1	-	96.0

This Table shows that there was a major increase in the percentage of children and adults who heard about child rights and child responsibilities between the two measures.[16] [17]

3.2.1   Child rights

Children and adults were asked to name examples of child rights and a significant increase was observed. Before starting programme implementation (T1) the children who had heard of child rights could mention an average of 2.7 child rights and this increased to 3.4 (T2, larger sample, see Table IV). For adults there was an increase from 2.8 to 3.8. This confirms and reinforces the positive findings on the increased child rights awareness presented above in Table IV.

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[16] Children's response; Child rights: $t(470)=22.35$; $p<.000$; child responsibilities: $t(471)=21.45$; $p<.000$.

[17] Adults' response; Child rights: $t(485)=15.60$; $p<.000$; child responsibilities: $t(486)=14.95$; $p<.000$.

Table V: Child rights

	Children T1	Children T2	Adults T1	Adults T2
Average number of child rights mentioned	2.7 (sd. .93) N=161*	3.4 (sd.1.1) N=464	2.8 (sd..93) N=287	3.8 (sd. 1.1) N=486

* N=161: Respondents who said they know about child rights, but could not name any example of child rights were excluded from analysis

Children's responses

Examples of child rights mentioned by the children who were aware of the existence of child rights are described in Annex C, Table 10.[18] Results showed that especially the right to go to school and the right to play were well known to a majority (over 80% of the 40 % who had heard of child rights at T1 and 80% of 95% at T2) of children in this survey sample at both first and second measurements.[19] Other rights mentioned, and furthermore mentioned more frequently at the second measure (compared to the first measure), are the right to food (21% to 40%), right to express oneself (15% to 25%) and the right to parent support (13% to 27%). It seems that awareness of especially these rights increased among children, throughout the first year of programme implementation.

Further indication of awareness of different child rights was sought through the use of a pre-formulated question list on certain rights. For each of these rights children were asked if they thought that children had this particular right or not (see also Annex C, Table 12). Interestingly, 18% of the children thought they had the right to fight with other children at the first measurement.[20] This decreased to 6% at the second measurement. The most significant and interesting increase was found on the right of children to express their opinion (from 51% to 89%). This finding will be confirmed and elaborated upon in chapter 3.5 on 'communication and interaction between children and adults'.

Adults' responses

Examples of child rights mentioned by adults are described in Annex C, Table 11. The rights that are most increasingly mentioned after one year of programme implementation (T2) are: the right to play (31% to 75%), right to food (27% to 46%), right to shelter (5% to 26%), and the right to express oneself (12% to 33%). In line with results of the children, also the majority of adults were aware of the right to education at both measures (86% to 91% of the adults who had heard of child rights, taking note again of the fact that that number was much larger at T2 than at T1).

Further indication of awareness of different child rights was sought through the use of a pre-formulated question list on certain rights (see also Annex C, Table 13). The most significant increase was found on the right to free time (from 73% to 96%) and the right to express their opinion (from 67% to 96%).

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[18] Categories of child rights are constructed based on content analysis since this information was gathered by means of a open-ended question. No statistical analysis could be performed on this descriptive data.

[19] Note however, that the sample is much larger at T2 than at T1 since many more children at T2 were aware of child rights (see also table 4 above). Thus the absolute number of children mentioning the right to education was much higher at T2 than at T1.

[20] Obviously the 'right to fight' does not actually exist as a CRC right.

An adult expresses his enthusiasm about the child's right to education as follows during FGD: *'Education brings development; it's the key to success. Education is a 'light'. If a child is educated, he is a light to his community. I feel happy about this right to education because children are now passing exams, and they are more clever. My child can now explain things to me clearly since she is attending school and has a scholarship'.* Adults also recognise the longer-term benefits of education: *'We see the benefit to support the child by providing their basic needs (e.g. giving them food, clothes, education) because we believe that they are our future leaders and we want them to pass the same ideas on to their own future children.'* As one parent formulated it: *'I am happy to help the child because it will look after me when I am old.'*

Some parents explained during FGD that the right to education can also make them sad because all children should have the opportunity to go to school, but there are still parents who don't have enough money and there are also parents who are still reluctant to send their children to school. Some parents don't allow non-school going children to mingle with their school going kids. School drop-out is still perceived as a major problem by adults who participated in FGD. They believe that school drop-out is especially high among children without biological parents, as well as among adolescents (mainly due to early marriage or pregnancy).

During FGD, participants were asked what changed in relation to the right to play. Adults explained: *'In the past, children were playing but on a small scale. Children were even beaten when they wanted to go for play and it was not too common for children to play together. Now, there is less restriction and there are more play materials. Children see more support and love from parents, who do provide them with play materials. This encouragement brought the children and their parents together and resulted in children's increased self-confidence, increased social skills and it improved their talents. Now, joy is seen every day on the faces of children.'*

'We, adults, attended awareness meetings about support for our children. We learned that when you support a child you are developing your family, homes, community, and the nation. Children are our future leaders and they need to develop well and be good people in the future. Men are ready today to work for the support of their children and parents now even take loans to be able to send their children to school and give them medical care.'

The last remark indicates that improved awareness on the right of children to be supported by their parents also translated into more supportive behavior.[21] This was confirmed by children themselves in FGD, where they described positive changes they have encountered with regards to adults complying with children's right to parent support and protection: *'Before, our parents did not protect their children. When adults saw children going to dangerous places (like in the bush) they just laughed. Adults had an attitude like: 'I don't care because it's not my child' when they see children in need. There was no concern for children, especially not for non-biological children or children from families who they were in dispute with.' Now that has changed and parents show they care for us.'*

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[21] As there is a clear overlap between support for child rights and support for children's psychosocial needs, these examples would also be applicable to chapter 3.4 'Level of adult and peer support for children and youth'.

More comments made by children during FGD on improved adult practice in the community: *'Since there is more peace in the community and adults are not in malice any more, they have concern for all children, irrespective of being biological or non-biological children. Neighbours help children when they are sick by taking them to the hospital even when the parents are not around. And our parents are not flogging us any more since the messages on child abuse and child rights.'* A nice statement was expressed by one of the groups: *'Let pikin bisniss be all men bisniss'* (meaning: Let children's business be everyone's business).

3.2.2   Child responsibilities

Similarly to the highly increased awareness on child rights a major increase in the awareness on child responsibilities can be observed among children and adults (as described in Table IV above). However, the average number of examples of child responsibilities mentioned by children and adults did not increase significantly at the second measure (on average two examples were mentioned, see also Annex C, Table 14).[22] Examples of child responsibilities as mentioned by the children and adults are described in Annex C, Table 15 and 16.[23]

Based on the responses on both measures, children and adults seem to be most aware of the responsibility to work. A majority (over 80%) of children and adults mentioned the responsibility to work and help parents with domestic and/or income generating work. Children are not only very much aware of their responsibility to work, but during FGD (T3) it was also shown that they are quite happy with this responsibility. This seems remarkable. Why would children be happy to work instead of playing, for example? From the children's responses, it can be learned that they perceive their responsibility to work as a trade-off; When children are helping their parents, the parents in return will provide better care (in terms of education, basic needs support and play materials) for their children. As stated by one child: *'I help my parents. This makes my parents to show love and care and provide me with food.'*

What was interesting with regards to the generally agreed upon child responsibility to work was that adults indicated that there was a limit to what could be asked of children, indicating an awareness of the child's rights attached to this responsibility. During FGD some adults even claimed that excessive child labour has reduced in their community. *'Before War Child came to our community, we used to engage our children in heavy and long hours of work, especially farm work. Now children are doing the work according to their age and strengths. They mostly work in the weekend, so they can go to school during the week.'* However, in several adult FGD groups, concerns were expressed related to child labour. *'Our communities should continue to monitor the parents to limit the work for children. Parents should continuously be encouraged to take responsibility of handling the home in terms of work. Also sensitization of children should continue related to children's responsibilities, and this can best be done by children themselves (e.g. child-to-child advocacy).'*

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[22] Same as in 3.2.1, it should be noted that the number of respondents at T2 was much larger than at T1.

[23] Categories of child rights are constructed based on content analysis since this information was gathered by means of an open-ended question. No statistical analysis could be performed on this descriptive data.

Remarkably, adults mentioned children's responsibility to be respectful and honest to elders more often at the second measure (57%), compared to the baseline measure (30%). This increase is surprising because it is known that lack of respect by children and youth for elders is generally considered a problem in the communities. Therefore one would have expected the awareness of this responsibility among adults to be high already at T1.

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Level of awareness of children and adults of child rights and responsibilities

- A major increase in the awareness of child rights and child responsibilities among children and adults was observed after the first year of intervention.

- In addition to increased awareness of adults on child rights there are some indications that adults have translated some of this awareness into positive behavioural change. (It should be noted that this information stems mostly from T3 and cannot be compared to baseline data on practice and behaviour.)

- The effect of the intervention for children and adults seems to be most evident on the awareness of the right of children to express their opinion and on the right to food, as well as on parents' awareness of the child's right to play.

- Among the children and adults who showed awareness of child rights, the awareness of the right to education appears to be high at all measures. Among children, awareness on the right to play appears high at all measures.

- Concerning child responsibilities it is interesting to observe how unanimously children and adults seem to agree (at all measurements) that it is children's responsibility to assist their parents in terms of (income generating) work and chores. No relevant changes with regards to awareness on child responsibilities were observed.

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3.3 Level of psychosocial problems and needs of children and youth as perceived by community members

As part of the programme, sensitisation on the existence of psychosocial problems and needs of children and youth took place. It is quite difficult to measure the prevalence of psychosocial problems encountered by children in the community. In order to get respondents to speak more freely about problems the questions were formulated as 'do you *or* do you know anybody who…has this or that problem' The disadvantage of such line of questioning is that it makes it difficult to draw conclusions from the replies. For instance, in theory all children could mention that they know somebody who encounters a drug problem while they actually refer to the same one and only drug addict in the community. Therefore, results described below should be treated with caution.

Children's responses
Children were asked whether they experienced any difficulties, or whether they observed other children who had difficulties. Various types of difficulties were pre-formulated as described in Annex C, Table 17. The average number of difficulties mentioned by children decreased significantly between the first two measures.[24] This implies children perceived the number of difficulties of children to have decreased throughout the first year of programme implementation.

When looking at the types of difficulties that children were facing, three types were mentioned much less often at the second measurement: An important decrease was shown with regards to perceived prevalence of aggression, early marriage and lack of respect for elders. The other changes were also statistically significant, except for school drop-out and discrimination. School drop-out was perceived as a problem by a large majority (80%) of the children at both measurements (thus not showing any decrease).[25]

Adults' responses
Adults were also asked whether children they know experienced difficulties. Types of difficulties were pre-formulated and directly questioned with the adults and presented as such in Annex C, Table 18. The average number of difficulties mentioned by adults decreased significantly between the two measures.[26] This implies that adults perceived the number of difficulties faced by children in the community to have decreased throughout the first year of programme implementation.

In line with the children, adults' responses also indicate a significant decrease of the three major problems within their communities: aggression, early marriage and difficult relationships between children and parents/caregivers. Although the mention of school drop-out as a problem declined significantly according to the adults, it was still identified as a problem by a large majority (75%, coming down from 91%) of the adults at the second measure (note difference with children, who appear to perceive no decrease at all).

Furthermore, adults' responses indicate a significant decrease in children's concentration problems and lack of self-confidence between the two times of measurement. Slightly smaller, but still significant differences were found for the problem of drug abuse, which seems to decline according to adults.

When children and adults are compared to each other with regards to relative change between the measures, it was found that the mean change was largest within adults.[27] This indicates that on average, adults show a larger decline of the reported number of psychosocial problems that children are facing (2.27), compared to the children themselves (.87).

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[24] At T1 on average of 5 problems were mentioned, whereas at T2 less problems (4.2) were mentioned ($t(486)=6.70$; $p<.000$).

[25] However, based on demographics of this survey population (see Chapter 2) school enrolment seems to be quite high.

[26] At T1 adults mentioned on average 6.1 difficulties, whereas at T2 on average 3.9 problems were mentioned ($t (503)=14.4$; $p<.000$).

[27] 'Mean change' is assessed by calculating average change score at T1 minus average change score at T2, based on individual scores of change. Test result for difference found: $F(1, 989)=46.7$; $p<.000$.

During FGD (T3), especially the problem of aggression within the communities was discussed: '*After the war, there was no harmony within the communities any more. Neighbours were fighting each other due to land disputes and there were no laws in the community any more. Leadership struggle and disputes were common and there was no unity. This has changed now.*'

'*The war made our people violent. Aggression was a major problem in our community. Children and youth were not sent to school, instead they went playing in the bush and used to fight, using sticks and bottles. There was no control over them and adults were ignorant about this and not aware of the negative effects of this situation. Also, adults were showing a bad example, because parents were fighting in presence of their children almost every day and teachers used to flog the children in school.*'

'*When children do not behave, they have no fear and no respect for elders. In the past, especially youth were fighting, using abusive language, stealing, drinking alcohol and smoking marijuana. All this has reduced, because of awareness raising activities that were organized by CAGs. However, there are still youth who don't behave and don't help in community development. They smoke secretly and insult others and fight with neighbours. This is causing a bad peer influence. Also, parents sometimes show a bad example by sending their children to buy cigarettes or alcohol. This is bad because children will imitate them.*'

The aspects of communication and interaction between young people and adults and community harmony will be described in the chapters 3.5 and 3.6.

**Level of psychosocial problems and needs of children and youth
as perceived by community members**

- Both children and adults appear to perceive a decline in the average number of difficulties that children face throughout the first year of programme implementation.

- Both children and adults appear to observe less aggression, early marriages and lack of respect for elders throughout the first year of programme implementation.

- School-drop-out appears to be perceived as a major problem, but the actual scope of this problem remains unclear.

- Adults appear to observe a decline of children's' concentration problems and lack of self-confidence after one year of intervention.

- On average, adults appear to observe a larger decline of the number of difficulties that they believe children are facing, compared to the children themselves.

3.4   Level of adult and peer support for children and youth

As part of the programme, sensitisation on the importance of adult and peer support to children to help them deal with psychosocial problems took place.

What type of social support would help children to deal with (psychosocial) problems?
Children and adults were asked (at T1 and T2) what kind of support would be needed for children to enable them to deal with psychosocial problems.[28] Responses are presented in Annex C, Table 19 and 20 and discussed below.

Awareness of the benefit of peer support (in terms of talking with peers) increased most significantly between the two measures (26% to 64%). Other types of support that were increasingly identified by children, were adult support (75% to 92%), and playing with friends (26% to 43%). Adult support is the most needed type of support according to children as shown by high responses on both measures (74% and 92% respectively). The notion that nothing can help children to deal with psychosocial problems declined significantly between the two measurements, implying that children have become more aware of the benefits of social support. Other types of support seem less relevant to the children.

In line with the children, peer support was increasingly identified by adults as a way for children to deal with psychosocial problems. Other types of support increasingly identified by adults are playing and providing a safe home for children. Also adult support was indicated as a good source of help for children, according to adults. However, it was mentioned slightly less at the second measure. The same effect was found for celebrations and cultural festivals as ways of dealing with problems. No difference between measures was found for consulting a healer as a way of dealing with problems. The average number of support options mentioned by children increased from 2.3 at T1 to 3.1 at T2. The average number of support options mentioned by adults was 3 at both measurements. [29] [30]

What type of social support do children actually receive?
The level of actual support, as perceived by children, increased significantly in terms of support from parents, teachers, and friends [31] (see also Annex C, Table 21 and 22). Overall, children indicated that they felt most supported by parents and caregivers (rated as 'sufficiently' at T1 and between 'sufficiently' and 'a lot' at T2). At the second measure, many more children say they turn to teachers and peers for support compared to before the intervention. At T2 support from teachers was rated as between 'a little' and 'sufficiently' and support from friends and peers was rated relatively least positive ('a little').

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[28] When addressing this question, reference was made to the problems that were discussed in section 3.3.

[29] Answering options were not read aloud to the respondents, so all answers are spontaneous and therefore provide good insight in awareness of child support opportunities.

[30] Since response of parents was found stable (average change score: -.01), the average change score within children (-.78) was found to be significantly larger. This means that children increased most in the average number of support options mentioned, after one year of programme implementation. However, at the second measure, children could mention the same average number (that is, three) support options as adults. To conclude, the increase in awareness of child support options was found within children only.

[31] Test results children's responses to the question 'If you have a problem, how much do you feel supported by…?': parents t(439)= -9.49;p<.000; teachers t(375)= -4.40;p<.000; friends t(420)= -5.81;p<.000

These results indicate that although the level of actual social support was still perceived to be limited at T2 (especially support from friends and teachers), children did feel the level of support to be increasing.

In line with the children, almost all adults indicated that children can easily turn to their parents/caregivers when they have problems, and this perception was already high on baseline measure (T1) but increased even further from 91% to 100% at T2 (compared to children's increase from 83% to 96%).[32] Furthermore, adults especially reported increased perceived existence of teacher and peer support as did children.[33] Especially the increased awareness of the teacher's support role is remarkable and shows the acknowledgement of the role of teachers as important adults within the community.

A significant increase was found for the amount of time parents spend taking care of their children.[34] (See also Annex C, Table 24). At the first measure 61.2% of the parents indicated that they spent 'sufficient' to 'a lot' of time with their children and at the second measure this increased to 87.8%. The number of parents who indicated they had too little time for their children went down from 38.9% before the intervention to 12.2% at the second measure. Furthermore, the extent to which parents perceived themselves to be able to help their children when they have problems also increased significantly throughout the first year of intervention (78% to 95%).[35] [36] Examples of adult support expressed by adults are presented in Annex C, Table 25. Examples of adults supporting their children when they have problems can be categorized into:

- o Provision of basic needs
- o Financial support
- o Educational support
- o Parent advice
- o Advocate for the needs of children

Interestingly, these examples show that adult support is mostly thought of in terms of material, financial and practical support and not so much as psychosocial or emotional support. Furthermore, adults were asked why they are (at times) not able to help the children when they have problems. Major reasons for the lack of adult support are: poverty (especially within single parent families and very large polygamy homes), lack of time, lack of skills (bad role models), no family harmony (no respect between adults and children, or dispute between parents), ignorance and misunderstanding of adult support (see also Annex C, Table 26). In addition, adults reported they were not aware of the importance of adult support for children.

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[32] Test result parents' response: t (501)=4.62;p<.000

[33] Test results parents' response on teacher support: t (501)=16.29;p<.000; parents' response on peers support: t (501)=13.10;p<.000.

[34] t(387)=-9.21;p<.000

[35] t(404)=7.21;p<.000

[36] In line with these results, also adults in general (so not only parents), showed a significant increase in perceived capacity to sufficiently support the children in the community (t(483)=16.34;p<.000). At T1 less than half of the adult respondents (46.2%) indicated they feel able to support the children, whereas at T2 almost all adult respondents (90%) responded they can offer sufficient support.

A parent explained how he changed his attitude (T3): '*There was drama play performance in which the adult was not encouraging and supporting the child at home and the child struggled a lot and lost his life. So from this play, I decided to develop good relationship with my children and support them as much as I can.*'

Level of adult and peer support for children and youth

- At all three measurements adult support is considered the most important type of support children need to deal with psychosocial problems according to children and adults. The results of this survey indicate an improvement of the actual level of adult support, although the level of adult support was already quite high at baseline measurement. Following the first year of intervention, parents showed increased availability of time and perceived themselves more able to help their children with their problems.

- Awareness of the benefits of peer support increased importantly among both children and adults. Actual support children said to receive from peers also increased importantly. On the other hand the extent to which they actually feel supported by peers, despite an increase appears to remain limited.

- Children turned much more to their teachers for support. Adults also increasingly acknowledged this support role of teachers.

3.5   Level of positive communication and interaction between children and adults

As part of the awareness raising on child rights and responsibilities (see chapter 3.2) the right of the child to express him/herself and be heard was treated, as well as the responsibility of children and youth to treat adults and elders with respect. The programme was also designed to generate a positive dynamic in the community through all the community actions and events that got people from different generations and backgrounds to come together to engage in fun activities, interact in a positive atmosphere and as such build peaceful relationships. Getting children, youth and adults together in the Community Action Groups who organised these activities also created opportunity and need for young and old to exchange ideas, listen to each other and cooperate.

Talking, listening and respectful interaction [37]
At the second measure (T2, this topic was not included in T1) children and adults were asked whether they can talk and listen to each other in a good way and whether any changes had occurred in this respect since the intervention. A large majority of both children and adults indicated that their communication improved during the intervention since they talk and listen to

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[37] It should be noted that *no baseline* measurement was carried out on this topic. Only at T2 and T3 respondents were asked to report (in hindsight) on changes related to talking, listening and respectful interaction between children and adults. Therefore, no statistical comparisons could be performed on the responses. Note that since these responses are based on self-reporting, its reliability is limited and very likely to be influenced by social desirability.

each other in quite a good way now, though adults evaluated the quality of communication slightly more positively compared to children.[38]

Table VI: Talking and listening between adults and children

	Children T2	Adults T2
Talking and listening*	2.04 (sd. .60)	1.8 (sd. .55)
Have you noticed changes (% yes reported)	87.0	96.8

*5 point scale used: 1=very good; 2=good; 3=not good / not bad; 4=bad; 5=very bad

Examples of changes regarding communication between children and adults are described in Annex C, Table 27. Over 50% of adults and children mentioned 'improved opportunities for children to express their ideas' as an example of improved communication. This was further explained by a child in FGD: '*Before, children were not allowed to talk or have a say during family- and community meetings. Parents now encourage us to express our ideas and we now discuss about opinions. It makes me feel part of the family and the community and now I am not afraid any more to talk in public, and to talk with other children.*'

Both children and adults indicated at the second measure that they do respect each other quite well. Adults rated the level of respect a bit more positive compared to children (see also Annex C Table 28).[39] A large majority of children (89%) and adults (93%) reported changes with regards to respect between adults and children since the beginning of the intervention. Examples of changes regarding respect between adults and children are described in Annex C, Table 29. Both children and adults indicated that children now obey their parents and adults are now gentler with the children.

Examples of improved relationships between children and elders were also expressed in FGD (T3): '*Children now greet the elders and this makes children respect and maintain our culture. Because they now show respect to elders, it makes people to respect children's needs also. Now, the paramount chief provides light for children at night so they can study.*'

'*When we children show respect, it makes people in our community know that we are properly trained at home by our parents and it will even make our parents to be proud of us. Therefore, we will be considered and allowed in community activities. This will also bring peace and unity, not only within the family but also within the community. There is also a saying about this: "When children wash their hands, they can eat with the chiefs."*'

Level of involvement of children and youth in decision-making
In order to gain further insight in the level of improved communication and dynamics, children and adults were asked whether adults listen to the views of children and youth regarding issues that are important for their daily life (see Annex C, Table 30, 31, 32). Results showed that the average level of involvement of children in decision making increased significantly between measures according to both children and adults (from 'hardly involved' at T1 to 'sometimes involved' at T2).[40] The type of decisions that children have a say in are mostly related to school issues, type of tasks that children fulfil to help the family, and decisions related to play.

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[38] $F_{(1,968)}=39.42$; $p<.000$.

[39] $F_{(1,977)}=42.68$; $p<.000$.

[40] Test result for children: $t(478)=13.47$; $p<.000$; adults $t(490)=13.64$; $p<.000$.

Results also showed that it is (at all measurements) not appropriate to involve children in decisions regarding marriage, and family or community conflicts.

During FDG (T3) participants were asked to respond to two statements. A line debate was set up to respond to the statement: 'Parents always consult their children in discussions about issues concerning their daily life.' A chair debate was set up to respond to the statement: 'Parents do not always have to ask children for their opinion.' Results from these discussions are in line with results found on earlier measures (T1,T2). Most of the FGD participants agreed with the statement that parents should always consult their children's views.[41] Furthermore, 65.7% of the FGD participants disagreed with the statement 'Parents do not always have to ask their children for their opinion'. Obviously, very young children are not consulted, and also when children are disturbing community meetings, they are excluded from participation. As found on earlier measures, children are mostly involved in decisions about education and play, and it is not appropriate to consult them on decisions related to marriage, circumcision, and 'elders' affairs' and secret (society) talks.

Adults' view concerning child participation in decision making can be illustrated best by the following quote from an adult: *'In today's world, viewpoints of children and youth should be consulted in order to prepare them for tomorrow. Through involvement of children, they learn how to talk in public and express their opinion. I believe that children will grow by imitating elders. Whatever decision is made, it will have the blessing of every family member. This will make the children learn how to address and solve problems in the future.'*

Another quote from FGD with adults shows how adults even claim to put such views in practice: 'Children and youth are active participants in almost every community meeting now. We listen to them. Sometimes they even have more sense in issues than we the adults. They are called to meetings and their voices are heard in decision making.'

Level of positive communication and interaction between children and adults

- Both children and adults indicated that communication and mutual respect improved as a result of the intervention and that they now talked and listened to each other in a positive manner. Children indicated that they felt encouraged by their parents to express their ideas and opinions.

- The level of involvement of children and youth in decisions concerning daily life issues increased importantly after the first year of intervention, according to children and adults.

- The type of decisions children and youth are involved in concern play, education and work/chores. It is not common to involve children and youth in decisions about family, marriage, community affairs/conflicts, and secret society.

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[41] Average score was 3.9 on a 5-point scale (1=disagree – 5=agree).

3.6   Perceived purpose and effect of WCH community based psychosocial programme

Questions about perceived purpose and effect and changes within the community after War Child's presence were asked at the second and third measures only. When interpreting these results, one should be aware of the risk that respondents answered in a social desirable way.

Results show that community members have a clear understanding of War Child's programme in the community. After the first and second year of War Child's presence in the community (T2, T3) many children and adults mentioned similar examples of what had happened in their community (see also Annex C, Table 33). Sports and cultural activities were mentioned most often, along with meetings and training. Other examples of activities mentioned (at T3) are: games, construction of the playground and peace hut, material support, cultural dances, drama, outings, and awareness raising activities. Also community self-help initiatives (described in the community sustainability plan) were mentioned, like: formation of an agricultural CBO or community cleaning (fields, cemetery, water wells and latrines).

At the second measure, children and adults were asked to describe the purpose of War Child's presence in the community (see Table VII below).

Table VII: What do you think is the purpose of War Child Programme? (T2)

	% Children N=474	% Adults N=489
Play and participation in community activities; improve welfare through play, play together, involved in activities, sports, cultural activities, play materials, safe play ground, have fun, call for meetings, learn from others.	52.1	44.2
Feel better; bring happiness, mend sickness of the mind, reduce stress, introduce thinking about attitudes, discuss issues, address problems and psychosocial needs, help children, de-traumatize, cure broken hearts, make people feel free, make children respect themselves.	35.0	37.8
Peace/community harmony; unity, interact in peace, no violence/conflict, to bring us together, live in peace, talk to community, positive coping ways, change attitude problems, bring community together.	26.8	35.8
Forget about the past; forget the war, forget problems of the mind	16.9	14.5
Child rights; talk about child rights, promote child rights, register children, improve well-being, how to live well with children, protect child rights.	11.6	5.7
Adult support; take care of children, educate children, know their responsibilities.	6.9	5.1
Respect adults; talk to adults.	3.2	2.6
Educate; improve talent, develop skills of children, encourage children go to school, encourage parents to send their children to school.	2.1	3.7
Average number of examples mentioned:	1.5 (sd. .69)	1.5 (sd. .59)

Children and adults mentioned play and participation in community activities most often as the purpose of the programme. Furthermore, addressing psychosocial issues (e.g. feeling better) and peace/community harmony were mentioned often, showing a good understanding of War Child's mandate. During one of the FGD a man stated: *'War Child is like a doctor for our community, and their staff (PO's) is our medicine.'*

The roles and tasks of Child & Youth Support Structure (CYSS) and Community Action Groups (CAG) were also discussed during FGD (T3), to examine whether community members had a good understanding of the aim of these community structures that play such a central role in the programme. Their responses showed quite a good understanding of the actual role of these structures and are summarised in Table VIII below.

Table VIII: Role CYSS and CAGs

Role of Child & Youth Support Structure:	Role of Community Action Groups:
o Organize children to participate in community activities	Implement play activities such as:
o Mobilize people for meetings	o drama
o Monitor children go to school	o sports
o Patience to monitor the CAGs	o dance
o Monitor the use and storage of materials	o story telling
o Reporting and planning for the community	o outings
o Advice parents to take good care of their children	
o Mediate between community people	

After one year of programme implementation (T2), children and adults were asked whether they knew War Child and whether anything changed in the community during the past year. Almost all children and adults (99%) responded they knew the War Child programme and 97% indicated that changes had taken place in the community. When asked to name some examples of recent changes, most respondents mentioned one or two examples (see also Annex C, Table 34). Changes mentioned most often (about 50% of children and adults) were related to community harmony (including positive communication and respect between children/youth and adults/elders) and opportunities for children/youth to play and participate in community activities. To a lesser extent changes related to family support, disciplined behaviour of youth and school enrolment were mentioned. Change related to child labour and early marriages were hardly reported.[42]

After two years of programme implementation, children and adults were again asked about the biggest change that happened in their community (T3 FGD). Most responses were again related to harmony within and between communities. Nice examples of indicators of community harmony are presented in Table IX below.

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[42] Note interesting contrast with findings on early marriage in tables 17 and 18 as well as conflicting information on child labour described in 3.2.2.

Table IX: Biggest change in the community: community harmony (T3)

- o Children interacting (also with children from satellite villages) and children can practice their culture
- o Peace and harmony amongst children, youth and adults
- o Increase in women participation in meetings / increased level of expression of women
- o Through meetings even our attitudes towards our children and wives has changed and improved.
- o There is more communication now within the families.
- o Easy mobilization of people from neighbouring communities. Before, it was not easy but now because of War Child we enjoy good and frequent meetings.
- o Good respect between authorities/elderly and other community people. They are listening to training messages and behave well amongst each other.
- o Children and youth are now invited to meetings by elders.
- o Improvements in children's talent in cultural activities.

A nice illustration of change related to community harmony was expressed by one of the adults during FGD: '*Community cohesion is increased by coming together and organizing cultural festivals and by doing this rotational, meaning that village A comes to village B. Now, satellite village people are friendly with us living in the main village.*[43] *The cultural dance activities are now ending peacefully contrary to before when these activities were marked with violence.'*

<div style="border:1px solid">

Perceived purpose and effect of WCH community based psychosocial programme

- Almost all community members appear to know about the War Child programme and claim that changes have taken place in the community as a result of the programme.

- Community members have a clear understanding of the purpose of War Child's programme in the community.

- Community members have a clear understanding of the role and aim of the community structures (CYSS and CAGs) in the programme.

- Community members perceive the main changes that have taken place in the community as a result of the two-year intervention to be related to community harmony (including positive communication and respect between children/youth and adults/elderly) and opportunities for children/youth to play and participate in community activities.

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[43] Note that most target communities actually consisted of a cluster of small villages: a main village and a set of satellite villages.

4.   Conclusion

In this survey, captured data on the scale of indicators is being compared to the initial outcomes of baseline measurement. The final collection of interpreted data is used by WCH Sierra Leone to measure the success of the community based psychosocial programme in the 6 communities that were selected for the 2005-2006 intervention.

This conclusion contains two sections. The first section (4.1) discusses the results of the survey and the implications that can be drawn from these for future programming. In the second section (4.2) the survey methodology applied, its limitations and lessons learned will be discussed.

4.1   Discussion on results of survey and implications for programme

Level of access of children and youth to play facilities and participation in community activities
- While before the intervention there did not appear to be a lack of places to play, follow up measurements indicated that the availability of a safe place to play and play materials led to an increase of play opportunities for children.
- Children's participation in community activities (such as cultural dance activities, sport, games, and religious activities) was already found to be quite high before programme intervention but increased further after one year implementation resulting in over 90% of the children participating in community activities.

These findings imply that the situation was already satisfactory before the intervention, and as such raises the question whether the intervention addressed a real need on this level. However, this conclusion can not be drawn so easily. For instance, with regards to the existence of play facilities, these results do not say anything about the safety of these places. As for the point on children's participation in community activities it should be noted that it is not known whether respondents interpreted 'regularly' the same during T1 and T2. In other words, the frequency of 'regular' might be different between T1 and T2. As a matter of fact, the programme team has observed that the frequency of community activities and children's participation therein has increased considerably. This is furthermore confirmed by the fact that 'improved opportunity for children to play and participate in community activities' is mentioned as the second most important change resulting from the programme.

The level of access of children and youth to play facilities and children's participation were measured as these were considered indicators of play opportunities of children. It should be noted, however, that parent attitudes and behaviour with regards to the child's right to play are at least as important when looking at children's play opportunities. Time, permission and encouragement given to children to go and play are essential in this respect.

Level of awareness of children and adults of child rights and responsibilities

- A major increase in the awareness of child rights and child responsibilities among children and adults was observed after the first year of intervention.
- In addition to increased awareness of adults on child rights there are some indications that adults have translated some of this awareness into positive behavioural change. (It should be noted that this information stems mostly from T3 and cannot be compared to baseline data on practice and behaviour.)
- The effect of the intervention for children and adults seems to be most evident on the awareness of the right of children to express their opinion and on the right to food, as well as on parents' awareness of the child's right to play.
- Among the children and adults who showed awareness of child rights the awareness of the right to education appears to be high at all measures. Among children awareness on the right to play appears high at all measures.
- Concerning child responsibilities it is interesting to observe how unanimously children and adults seem to agree (at all measurements) that it is children's responsibility to assist their parents in terms of (income generating) work and chores. No relevant changes with regards to awareness on child responsibilities were observed.

The extent to which children's and adults' awareness of the rights of the child increased as a result of the intervention is truly significant and counts among the biggest improvements observed.

These findings provide, however, insufficient insight into the question of what meaning people attach to the concept of 'child rights'. Do they possibly interpret 'having the right' merely as 'being allowed to'? Do parents actually understand that there are obligations attached for parents (and community, society and government) to fulfil those rights? This question has not been focussed on in this survey and may be worthwhile giving more explicit attention in the future. On the other hand it should be noted that different components of the survey do show that adult awareness of child rights has translated into improved practices in support of child rights (e.g. with regards to adult supporting children better, adults allowing/encouraging children's self expression and participation, adults allowing/encouraging children to play).

Level of psychosocial problems and needs of children and youth as perceived by community members

- Both children and adults appear to perceive a decline in the average number of difficulties that children face throughout the first year of programme implementation.
- On average, adults appear to observe a larger decline of the number of difficulties that they believe children are facing, compared to the children themselves.
- Both children and adults appear to observe less aggression, early marriages and lack of respect for elders throughout the first year of programme implementation.
- School-drop-out appears to be perceived as a major problem, but the actual scope of this problem remains unclear.
- Adults appear to observe a decline of children's' concentration problems and lack of self-confidence after one year of intervention.

As explained in chapter 3.3 these findings should be treated with caution due to the type of questioning applied. However, in combination with findings that came out of other sections of the survey they have served to confirm certain conclusions.

In several measurements the problem of school drop-out has come up producing conflicting findings. It would be useful to assess the situation with regards to school drop out further, especially in the context of the community education component. Special attention should then be given to vulnerable children, like girls, disabled children, working children and former child soldiers.

Level of adult and peer support for children and youth
- At all three measurements adult support is considered the most important type of support children need to deal with psychosocial problems according to children and adults. The results of this survey indicate an improvement of the actual level of adult support, although the level of adult support was already quite high at baseline measurement. Following the first year of intervention, parents showed increased availability of time and perceived themselves more able to help their children with their problems.
- Awareness of the benefits of peer support increased importantly among both children and adults. Actual support children said to receive from peers also increased importantly. On the other hand the extent to which they actually feel supported by peers, despite an increase appears to remain limited.
- Children turned much more to their teachers for support. Adults also increasingly acknowledged this support role of teachers.

While the survey indicates that the level of adult support to children in dealing with their psychosocial problems was already quite high before the intervention, it should be noted that this contradicts information that has been coming out of pre-intervention Participatory Needs Assessments. According to these PNA the lack of adult support is a major problem in the communities. These contradicting findings call for further in-depth assessment to reveal the actual state of affairs.

It is also interesting to observe that parents tend to understand psychosocial support to be referring to support in terms of material, financial and practical support rather than psychological or emotional support. In future, more attention should be directed to the level of emotional support.

While the survey captured some information on the level of actual adult and peer support, it did not show whether children were also more empowered to ask for such support and whether they themselves were inclined to support others. This remains difficult to study and might require a special approach, like social mapping.

Level of positive communication and interaction between children and adults
- Both children and adults indicated that communication and mutual respect clearly improved as a result of the intervention and that they now talked and listened to each other in a positive manner. Children indicated that they felt encouraged by their parents to express their ideas and opinions.
- The level of involvement of children and youth in decisions concerning daily life issues increased importantly after the first year of intervention, according to children and adults.
- The type of decisions children and youth are involved in concern play, education and work/chores. It is not common to involve children and youth in decisions about family, marriage, community affairs/conflicts, and secret society.

The survey findings indicate that the intervention has led to considerable positive change with regards to adults giving children and youth the opportunity to express themselves and be heard. This is an important aspect of empowerment of children and youth.

The fact that both children and adults perceive much more positive communication and more respectful interaction is important as these are major factors that determine the level of cohesion and harmony within the family and the community.

The survey shows that parents consider it inappropriate to consult their children on certain topics. The objective of children's involvement in decision-making processes is a sensitive one and needs to be explained carefully. It should not be misunderstood as if War Child is imposing child participation in decision-making on every type of topic and at all costs. The dimension of what is culturally appropriate needs to be kept in mind. The aim of promoting child participation is to empower children to be pro-active and in influencing the courses of action in their daily life to some extend. At the same adults should not feel threatened. They should be convinced that when children have their voices heard and take part in decision making that this can be beneficial not only to the child's development but also to the family and even to the community. It is promising to find in this survey that adults acknowledge the value of child participation in terms of a learning process for all.

Perceived purpose and effect of WCH community based psychosocial programme
- Almost all community members appear to know about the War Child programme and claim that changes have taken place in the community as a result of the programme.
- Community members have a clear understanding of the purpose of War Child's programme in the community.
- Community members have a clear understanding of the role and aim of the community structures (CYSS and CAGs) in the programme.
- Community members perceived the main changes that have taken place in the community as a result of the two-year intervention to be related to community harmony (including positive communication and respect between children/youth and adults/elderly) and opportunities for children/youth to play and participate in community activities.

The fact that people consider community harmony to be the biggest change achieved reflects some of the most significant results that have come out of other parts of the survey. The perceived improvements in community harmony confirm the findings with regards to positive communication and respectful interaction as well as reported decrease of aggression in the community. The high frequency of programme activities in which children, youth and adults participate is assumed to have contributed to this improved community harmony, as by their very nature they have generated a positive dynamic in the community.

4.2   Limitations and lessons learned

The difficulty of measuring impact of psychosocial programmes for children in war-affected areas has been widely recognized. Therefore, aid organizations should be transparent about survey results, the selection criteria used for sampling and the survey's limitations.[44] This way, we don't run the risk of making claims beyond what the results tell us. In itself, this survey has been a learning exercise for War Child Holland. Apart from providing insights that can be used for improving the programme in Sierra Leone, this survey has also produced lessons learned on how to measure the effect of psychosocial interventions for children in war-affected areas. In other words, it contributes to the development of an effective instrument to measure the impact of interventions on psychosocial well being.

There are some methodological constraints and limitations that should be taken into account for this survey. Since no control group was used, we cannot assure that the results and changes found within the survey sample can purely be attributed to the intervention itself. In order to identify whether the outcome is attributable to our intervention, we need to have a realistic idea of how the communities would have been doing if they had never been involved in our programme. This can only be measured by using a control group that is fully comparable to the intervention group, before starting the intervention. Due to practical and ethical reasons, we could not include a control group in this survey. It would be unethical to have participants enrolled in a survey like this, without implementing any intervention in their community. On a practical level, it would request lots of resources (time and money) to double the number of respondents in this survey. Therefore, it was decided not to include a control group.

In order to reach the most representative sample, care was taken for selection and sampling method. Random selection for inclusion would be the strongest way of designing this survey. Random selection would assure us that the selected participants are representative of the entire target community population, since everyone has an equal opportunity to be included. In this survey, participants could not be randomly selected since no complete lists of names of people living in the communities were available. For selection of participants within the community, non-random sampling methods were used (cluster sampling, convenience sampling and purposive sampling). Though most care is taken to execute these sampling in an unbiased way, there will always be some subjective factors involved.

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[44] See also 'Good practices in evaluating psychosocial programming' by Save the Children (2004).

In addition, we have to acknowledge the possibility that conducting the survey itself created a bias. The respondents who took part in the baseline measurement may have been triggered to become active participants in the community programme.

While non-random sampling is quite common in this field of study, it is necessary to be cautious when generalizing findings to the larger population. This means that results (e.g. changes) found in this survey can to some extent be generalized to community level, but to a lesser extent to programme level. Also, we cannot claim that changes found can be attributed purely to the War Child programme. Nevertheless, in this survey we assume it to be very likely that these changes were brought about, at least partly, as a result of War Child's presence in the communities.

The problem of social desirability compromises the reliability of this survey. War Child staff administered the questionnaires in the communities and facilitated the FGD. Though we informed participants not to expect additional assistance or support in return for their participation, we have to take into account our position as donor to the community. Especially responses based on self-report and related the changes that War Child brought to the community, should be interpreted with care since these are likely to be answered in a socially desirable way.

This study was set up to integrate quantitative and qualitative methods. The FGD were designed to provide us with more in-depth information on the one hand but were also conducted in a very participatory way. Overall, the results found by using different methods were in line with each other, which is encouraging. However, we also encountered some disadvantages of both the quantitative and qualitative survey methods we used. By using a quantitative method, we succeeded to systematically gather a lot of information that was analysed in order to test for significant changes between measures. Since no existing instruments were available we designed the questionnaires ourselves, with limited validity. In some cases, questions were not formulated unambiguously leading to mixed results. In addition, part of this data was captured in a pre-formulated way, we still have no information about the meaning people themselves attach to the responses. Therefore, more in-depth qualitative data, using focus group discussion (FGD), was gathered at final measurement. This indeed provided us with additional insights. However, since these FGD were carried out with a limited number of survey respondents, these FGD results are only partly representative for the original survey sample.

One should be aware that it is very unlikely that the field of psychology will provide us with a clear-cut and simple instrument or way of evaluating psychosocial programs that will evoke full evidence and clarity. Nevertheless, there is clearly a need for a cross validated and reliable instrument to measure psychosocial well-being. Because there is no ready-made instrument available, we need to cooperate with other aid organizations and institutions in the development of this.

However, accountability is demanded of NGOs with much more force than in the past. In itself this is of course a good development. This study was an extensive and expensive exercise. One could wonder how much time, money and effort should be put into conducting evidence based research on the impact of psychosocial assistance, the effects of which are by nature often not so tangible (at least in the short run). We need to be aware of the trade-off between the cost of such research and its practical value.

ANNEX A Questionnaire

Sierra Leone Baseline Survey
Questionnaire Form 2: Child (8 to 17)

INTRODUCTION

Like almost a year ago, today War Child staff members are interviewing many people in this community again. As you may or may not know, War Child is an organization working with children and youth. By doing these interviews, War Child is collecting information that may help our work.

I would like to ask you to participate in the interview again, as we did almost a year ago. For us, it is very important to interview you again. Your participation in this interview will be voluntarily, you will not receive any payment or benefit. War Child is also not making any promises with regard to activities in this community.

We will keep everything you share with us in this interview strictly confidential. However, if you feel uncomfortable at any time, you can ask me to stop the interview.

The interview takes about half an hour. The questions I am going to ask you are written down on this paper; they are the same for every participant.

Let's find a quiet place now, so we can start the interview.

NOTE

- Ask the person for his/her name and **check if this person is on your list of participants**

- Ask the person for his or her willingness to do the interview; if yes: express gratitude.

- Check what language the respondent is **most fluent** in

- If person does not want to participate, record on **non response form**:
    - Respondent number (always record this!)
    - Name
    - Age
    - Sex
    - Reason for not participating (always ask for this!)

- Remember to **ask every single question**; do not skip any questions, unless otherwise indicated

- Remember to **only tick one possible answer** per item, unless otherwise indicated

NAME INTERVIEWER …………………………

Community ….………………………………………

Respondent number ..………………………….. (copy from list of respondents)

Time at start of the interview ………………….

Mother tongue   Krio   Temne   Krio and Temne

Name: _____

Address: _____

       Indication location/house with use of landmarks / reference persons

1. Age: _____

2. Sex: Male: Female:

3. Household situation: (Provide numbers #)

A. Total number of people living in the house (including yourself):   _____

B. Type and number of people living in the house:

                  # Children: _____

                  # Parents: _____

                  # Grand parents: _____

                  # Other: _____

4. Were you born in this village?

       Yes   No

       if 'yes' go to item 6

5. Where were you born? _____

6. Do you go to school?   Yes   No

       if 'yes' go to item 8

Which class are you in? _____

7. If you do <u>not</u> go to school now, have you ever gone to school in the past?
   (if yes, specify until which class)

       Yes, until class__   No

8. Do you do any kind of work?

       Yes   No

If yes, what kind of work: _____

9. Do you have the opportunity to play? When/where can you play?

*Do **NOT** read options, tick the box(es), choose "None" if initial answer is "No". More options possible.*

None (hardly)

Play area

War Child play area

Club

At home / street
In school
Special occasions (e.g. festivals)
Other   _____

10. What kind of community / cultural / religious activities take place in your community?

11-a Do you yourself take part in those activities?

          Yes   No   Sometimes

11-b If yes, which ones?

11-c If yes, what is your role?

The following questions are about Child Rights and Responsibilities.

12. Have you heard about Child Rights?

          Yes   No
                                      I*f "No": go to item 14*

13. Can you name some children's rights?

14-a Have you heard about Child Responsibilities?

          Yes   No
                                      I*f "No": go to item 15*

14-b Can you name some responsibilities of children?

15. Do you think that children have the right to…
Read options:

play	Yes	No
support of parents/caregivers	Yes	No
express their opinion	Yes	No
fight with other children	Yes	No
go to school	Yes	No

16. Do you, or any other children you know, experience any difficulties, such as: …
Read options, tick the box(es) if indicated YES, more than one choice is possible
Tick 'none' if no other option selected

School drop-out	Yes	No
Aggression	Yes	No
Early marriage	Yes	No
Fear (Anxiety)	Yes	No
Frequent nightmares	Yes	No
Lack of respect for elders	Yes	No
Drug abuse	Yes	No
Discrimination	Yes	No
Other (write down **exactly** what is mentioned)	Yes	No

_____

None	Yes	No

(*if 'None' go to item 18*)

17. Is there anything that would help you, or any other children you know, to deal with these kinds of problems?   *Do **NOT** read options, tick box(es), more options possible.*

Nothing can help
Talk / support of adults
Talk / support of peers
Play with friends
A safe home
Visit a healer
Celebrations, festivals, rituals, dance, songs
Other   (write down **exactly** what is mentioned)

_____

18. If you have a problem, is there someone you can turn to? Who?
*Do **NOT** read options. More options possible.*

No one
Parent or caregiver
Teacher
Friend/Peer
Other   _____

19-a If you have a problem, *how much* do you feel supported by:
Read all, tick a box for every sub item

Parents or caregivers:	not at all	a little	sufficiently	a lot	n/a
Teachers	not at all	a little	sufficiently	a lot	n/a
Friend/Peers:	not at all	a little	sufficiently	a lot	

19-b Are there other people who support you?
If 'other', always write down type of person first!

Other:_____	not at all	a little	sufficiently	a lot
Other:_____	not at all	a little	sufficiently	a lot

20. In decisions that are important for your daily life (e.g. concerning home, playing, cultural events, school), do adults listen to what you have to say?

    Yes   No   Sometimes
                             If "No": go to item 22

21. Which decisions are you (sometimes) allowed to make?

_____

_____

_____
                             *Write down **exactly** what is mentioned*

22-a Has anything changed in your community since the first interview?

    Yes   No
                      If *"No": go to item 23*
22-b If yes, describe changes _____

_____
                           *Write down **exactly** what is mentioned*

23-a How well do you think that adults and children in your community talk and listen to each other? *(tick only 1 option!)*

Very good
Good
Not good / not bad
Bad
Very bad

23-b Have you noticed any changes regarding talking and listening between adults and children, since the first interview?

          Yes   No   If *"No": go to item 24*

23-c If yes, describe changes_____

24-a How well do you think that adults and children in your community respect each other? *(tick only 1 option!)*

Very good
Good
Not good / not bad
Bad
Very bad

24-b Have you noticed any changes regarding respect between adults and children, since the first interview?

      Yes   No   I*f "No": go to item 25*

24-c If yes, describe changes_____

25-a. Do you know the War Child program?

      Yes   No   I*f "No": go to end of questionnaire*

25-b If yes, what do you think is the purpose of the War Child program?

25-c Can you name any activities of the War Child program?

END
This is the end of the questionnaire. Thank you for answering all the questions, you have been of great help. Remember that all your answers will be kept confidential.

RECORD:

Time at end of the interview: ……………………………..

Total interview time ……………………………….**minutes**

ANNEX B Focusgroup discussion outline

3rd Measurement Baseline Survey Community Based Programme
WCH-Sierra Leone

Session plan children

INTRODUCTION

- Fill in the **attendance sheet**; check presence (record name), age and gender of participants, school going or not, and active member of CYSS/CAG and/or participating in project activities.

- Explain that it is one session that consists of a **morning part and an afternoon part**. Therefore, we would like to have the people back in the afternoon for the last part of the session.

- Explain the **purpose of this session** and the activities

This session is organized to gather information from you about the War Child programme that was implemented throughout the past two years. You have been interviewed before (2 times) and this is the last time that we would like to ask you some questions. We are going to do this in a different way as before; this time we are going to do a **focus group discussion**, using enjoyable exercises.

The type of information that we would like to know is about the **changes that you have experienced in your community and family life throughout the past two years**. Please feel free to say anything you like and express your feelings; being either positive or negative. All responses are anonymous; this means the information collected will not be attached to names.

WARMING UP

1. Image of the hour

Aim: To get an understanding of what the days of children look like now (NOT how it should be or how they would like it to be)

1. Ask the participants to walk around the space, constantly trying to fill up the whole space without touching each other.

2. Explain to them that when you call out a time of the day you'd like them to make an image/still picture of what they are doing at that time of day normally, i.e. at night you're asleep or in the morning you're washing. One half of the space is during the week, the other half is during the weekend.

3. When everyone is in a position, ask them to look at each other – staying in their position as much as possible - to see what the others are doing at that time of the day.

4. Tap a few people that are in different images, on the shoulder for them to start bringing their image to life (making movements and possibly sounds – acting out what it is they are doing at that moment) – ask the others what activity they see.
Note: you do NOT have to ask all participants to bring their image to life. Just ask 1 or 2.

5. Ask: 'Who is doing something else during that time?' Ask that person to bring his/her image to life as well and look together at that image being brought to life.
Note: you do NOT have to ask all participants who do something else to bring their image to life. Just ask 1.

6. Go through the following times: early morning, morning, afternoon, evening.

7. Discussion in the group about the following questions (10min):
• What have you noticed during the exercise (difference between the week and the weekend activities, between boys and girls)
• Is it always like this?
• How do you combine work, school and play?
• Do you always manage to go to school, when you should? Or do you also work while you should actually be in school?
• How would you like it to be?

WHAT HAPPENED AND CHANGED?

TOTAL TIME: 35 min.

2. CIRCLE – what happened?

Aim: to find out what has happened in the project for/with this group and to get them thinking about all that happened related to the project.

1. Stand in a circle

2. Ask participants to think about what has happened in the project throughout the past two years. Ask them to think about the different <u>activities</u> that took place and when they took place (either in 2005 and/or 2006)

3. Ask participants to step into the circle (one by one) and name activities.

4. PROBE (if needed) on:
   a. What are the CYSS and CAGs doing in their community; what is their role, what are their tasks, what activities do they organise/do, etc.?
   b. Which playful activities/opportunities and community activities are happening in the community for children / with children as participants.

What changed? (<u>15 minutes</u>)
What is different now in your community compared to the time before the project?

5. Stand in a circle and ask each participant to step into the circle (one by one) and express through a gesture and a sound the biggest change that has happened in the community and benefited the children. After making the gesture, ask for explanation.

6. PROBE

a. Make a link between activities (as drawn in the road journey; *eg. meetings, activities, people being active, monitoring, reporting*) and the effect of the activities (=changes that are caused in terms of well-being of children)

b. Focus on changes within the family, community and between peers.

PLAY OPPORTUNITIES

TOTAL TIME: 20 minutes

3. Play opportunities

Aim: To gain information on play opportunities and activities in the community at present compared to before and wishes for the future.

CHANGES

1. What has changed? What is different now? Name how specific activities contributed to achieve the changes.

For every topic, ask <u>one person</u> to tell a <u>personal story or example</u> of <u>how</u> this changed.

      a. Time/permission to play; what keeps children from playing?
      b. Interaction with friends;
      c. Well being & behaviour of children
      d. Behaviour/attitude of children

FUTURE: String exercise (10 minutes)

1. From the previous exercise it became clear a lot of changes and improvements have already taken place. Maybe the participants can explain whether they would like to make more improvements.

2. Stand in a circle and explain that each one of them should come up with what they would like to change regarding play opportunities/activities in your community?

3. Start yourself by saying what you think should change and throw the string to someone else in the group (try to relate it to something that came out of the previous exercise; setting an example for the participants)

4. The participant you throw the string to, should do the same: say what (s)he thinks should change and throw the string to the next, etc., until it comes back to you.

5. When a web is created and connections with each participant, explain to them how we are all connected and everyone in the community should work together to make the changes for the future.

COMMUNITY ACTIVITIES

TOTAL TIME: 20 minutes

4. Community activities

Aim: To gain information on community activities in the community at present, changes compared to before and wishes for the future.
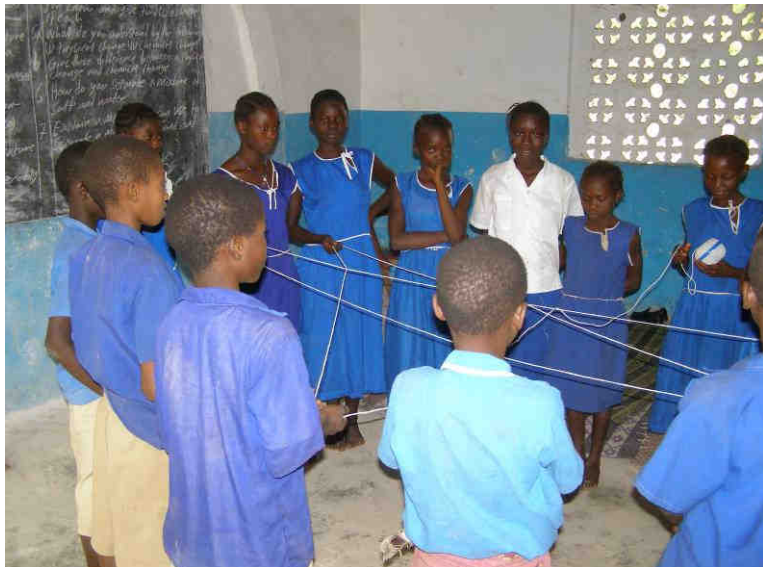
CHANGES
    1. What changes have taken place in the community, because of these activities?
    Name how specific activities contributed to achieve the changes.

For every topic, ask one person to tell a personal story or example of how this changed.
- Permission for children to participate;
- Increase/improvement in community cohesion/harmony
- Relationships between children/youth and adults
- Involvement of children and youth
- Involvement of women

CHANGES: 10 minutes
    2. Discuss with the whole group to get answers to the following questions:
    What changes have taken place in the community, because of these activities?
    Name how specific activities contributed to achieve the changes.
- Permission for children to participate;
- Increase/improvement in community cohesion/harmony
- Relationships between children/youth and adults
- Involvement of children and youth
- Involvement of women

FUTURE: String exercise – 10 minutes

1. From the previous exercise it became clear a lot of changes and improvements have already taken place. Maybe the participants can explain whether they would like to make more improvements.

2. Stand in a circle and explain that each one of them should come up with something they would still like to change in the relationships between community members.

3. Start yourself by saying what you think should still change and throw the string to someone else in the group (try to relate it to something that came out of the previous exercise in which they discussed about relationships; setting an example for the participants)

4. The participant you throw the string to, should do the same: say what (s)he thinks would still have to change in relationships and throw the string to the next, etc., until it comes back to you.

When a web is created and connections with each participant, explain to them how we are all connected and everyone in the community should work together to make those changes for the future.

CHILD RIGHTS AND RESPONSIBILITIES

TOTAL TIME: 70 minutes

5. Child rights and responsibilities

Aim: To gain insight in changes taken place in terms of awareness about children's rights and responsibilities; Did behaviour change in relation to children's rights and responsibilities / are rights and responsibilities being respected nowadays?

Materials: CRC pictures, instruction cards with HAPPY/SAD face
The CRC pictures:

- Right to express oneself
- Right to protection (see example below)
- Right to parent support

- Responsibility to work; to do chores to help the family
- Responsibility to respect (elders/others)
- Responsibility to behave properly/well (not use abusive language, not abuse drugs, avoid fighting etc.)

TIME: 20 minutes

Preparation: Hang up cards with a HAPPY (white card) and a SAD (red card) face on each side of the room.
Show the CRC pictures one by one to the group and go through the following steps:

1. Show the group a picture and ask:

a. 'What do you see?'

b. 'Which child right/responsibility do you recognize in this picture?'

c. 'Thinking about the situation in your community NOW concerning, is this right/responsibility being fulfilled? If yes, choose HAPPY, if no choose SAD.

2. Tell the participants to run to the HAPPY face if the situation NOW makes them happy and to run to the SAD face if the situation NOW makes them sad.

3. Ask a few participants on each side why it makes them either happy or sad.

Divide the group in 4 small groups of three/four participants. (don't show the pictures anymore)

- Right to express oneself
- Right to protection
- Responsibility to work; to do chores to help the family
- Responsibility to behave well/properly (not use abusive language, not abuse drugs, avoid fighting etc.)

1. Ask the groups to make a still image/picture of the situation concerning this child right or responsibility (is it respected / violated?) in their community NOW and BEFORE the War Child project. (10 minutes)

2. Have the groups one by one show their images.

The first group will start with their 'now' image. (20 minutes)
1. The audience will be asked the following:
- 'What do you see?'
- 'Do you recognize this?'
- 'What child right or responsibility is being shown you think?'

2. Tap the people in the image on the shoulders for a movement/sound, thoughts or feelings, or short scene bringing the image to life.

Then the first group will show their 'before' image (20 minutes)
1. The audience will be asked the following:
- 'What do you see?'
- 'Do you recognize this?'

3. Tap the people in the image on the shoulders for a movement/sound, thoughts or feelings, or short scene bringing the image to live)

- 'What is the difference with the first image?'
- 'What changes took place concerning this child right or responsibility in your community?'

4. The group who made this image will be asked the following:
- 'What did you show in the two images (now and before)?'

5. Ask the group the following:
- 'Are you happy about those changes? Why yes/no? (What is the impact of this change?)
- 'Would you like to see any further changes/improvements in the future concerning this right or responsibility in your community?'

CONTINUE WITH THE NEXT IMAGE GOING THROUGH THE SAME PROCESS
UNTIL ALL 4 RIGHTS AND RESPONSIBILITIES HAVE BEEN DISCUSSED

PSYCHOSOCIAL PROBLEMS

TOTAL TIME: 40 minutes

6. Psychosocial Problems/Needs of Children and Youth

Aim: To gain insight in changes that have taken place in terms of psychosocial problems/needs of children and youth; How did this change? What changed? Did problems reduce and are needs better met?

Materials: psychosocial problem pictures

Psychosocial problem pictures:
- Aggression between children
- Lack of harmony in the community - Difficult relationship between children and adults
- Lack of adult support
- Lack of peer support

Show the problem picture and ask the questions as outlined below.

TIME: 10 minutes

Aggression between children

Show picture (see example below) and ask:
1. What do you see / what is going on in this picture (define the problem, e.g. aggression)

2. Do you recognize this / is this often happening between children in your community now / before? Ask for more examples of aggressive behaviour (now or before).

3. What could be reasons for people to behave like this (now or before)?

4. What should happen between children to change this behaviour? How can it be changed?

Lack of harmony in the community - Difficult relationship between children and adults

Show picture and ask:
1. What do you see / what is going on in this picture (define the problem, e.g. no harmony)

2. Do you recognize this / is this happening in your community now / before? Can you give examples of this problem in your community?

3. What could be reasons for children and adults to behave like this (now or before)?

4. What should happen between people to change this behaviour? How can it be changed?

TIME: 10 minutes

Lack of adult support

Show picture and ask:
1. What do you see / what is this about?

2. Do you recognize this? Is that something that is/was happening to yourself and/or other children? Can you give other examples of adults not giving support (now or before)?

3. What could be reasons for adults to not always support their children (before or now)?

4. What should happen / change for adults to be able to better support you?

TIME: 10 minutes

Lack of peer support

Show picture and ask:
1. What do you see / what is this about?

2. Do you recognize this? Is that something that is/was happening to yourself and/or other children (now or before)?

3. Can you give more examples of children not helping each other (now or before)?

4. What could be reasons for children to not help each other (now or before)?

5. What should happen / change between children to be able to better support each other?

DECISION MAKING AND PARTICIPATION OF CHILDREN

7. Decision making and participation

*Aim: To get an understanding to what extent there has been a **change/increase** in the level of participation of children in decision making processes in the community and at home.*

Materials: 5 cones, 1 microphone, 2 chairs

TIME: 15 minutes

Line debate: Statement about current situation:
Parents ALWAYS consult their children in discussions about issues concerning their daily life, like play/ education/work/marriage etc.

Also probe / focus on why and in which cases children are (not) consulted about issues.

1. Draw a line that you mark with 5 cones.
2. Explain to the participants that now they are going to do a line debate. One end of the line means: 'I agree' and the other end means: 'I disagree'.
3. When you pose a statement, they should decide to what extent they agree or disagree with that statement and position themselves somewhere along the line according to how much they agree or disagree with the statement.
4. Read the statement and give participants 30 seconds to find their position.
5. Introduce the microphone (an empty bottle will do!). You explain that you will go around asking for comments from people about their choice. Only the person who has the microphone can speak!
6. First go to the people on the extreme ends; the people who completely agree or completely disagree and ask them why they stand there, to defend their point.

Note: do NOT ask all people! Only several people need to be asked to get an overview of the opinions the group has.

7. If people want to they can decide to change places once, if someone has convinced them with his/her opinion.
8. Following, ask some people if they feel the situation has changed compared to before the project started.
9. The **note taker** should give a summary of the different opinions voiced and the process of changing position, ensuring people feel heard and the discussion can be closed.

Chair debate

Opinion on participants think it should be:

Parents do not ALWAYS have to ask children for their opinion.

1. Place two chairs opposite each other.

2. Explain that you're going to do a chair debate.

3. Show which chair means 'I agree' and which one means 'I disagree'.

4. Tell the participants that as soon as they've heard the statement they should position themselves on or behind one of the chairs (only one person can sit on the chair).

5. The people that are seated on the chairs are the ones that will start the debate. They will try to convince the people on the other side of their opinion. When people want they can swap sides and stand behind the other chair; in support of the person on the chair, who's debating.

6. Only the people in the chairs are allowed to talk!! People behind the chair can tap on the shoulder of the person seated, to take over the debate. Also, the person on the chair can decide to leave the chair for someone else to take over the debate.

7. Read the statement clearly and give participants 30 seconds to decide whether they agree or disagree.

8. Introduce the microphone (an empty bottle will do!) and explain that only the person on one of the chairs with the microphone is allowed to speak. The others need to wait for their turn.

9. Round of the debate when no one is left on one side, or when people are convinced of where they are. Don't go on for too long; at some point all opinions have been voiced and people will not change sides anymore (when it becomes repetitive; round up!)

10. The note taker should give a summary of the different opinions that you've heard and the process of changing sides, ensuring people feel heard and the discussion can be closed.

ANNEX C   Tables of Results

Table 1: Interview time and Language

	Children	Adults
Average interview time T2 (minutes)	29.2 (sd. 6.52) range 15 – 58	30.3 (sd. 7.46) range 14 - 80
Mother tongue		
Krio	23.8 %	20.7 %
Temne	55.6 %	64.7 %
Krio & Temne	20.6 %	14.6 %

Table 2: Percentage of children and adults within communities

	% Children	% Adults
Madina	17.0	14.9
Mabureh	18.4	17.7
Mamaliki	15.4	15.9
Rotfunk	16.4	14.5
Mapaki	19.7	18.5
Hamilton	13.1	18.7
Born in this village (%yes)	75.4	66.9
Total number (N)	**488**	**504**

Table 3: Age and gender

	Children	Adults
Gender T1 and T2		
Male	49.2%	53.2%
Female	50.8%	46.8%
Gender T3		
Male	47.8%	52.3%
Female	52.2%	47.3%
Average age at T2	13.3 (sd. 2.55) range 8 -17	36.3 (sd. 14.3) range 18 – 90
Average age at T3	14.4 (sd. 2.4) range	34.3 (sd. 13.7) range
Age groups at T2 [45]		
Child: 8-12	40.8%	-
Adolescent: 13-17	59.2%	-
Youth: 18-34	-	56.4%
Adult: >34	-	43.6%

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[45] The age range of children and youth in Sierra Leone is between 0 to 35 years. Young men and women up to 35 years of age who are not economically independent can still classified as youth. However, in this survey children and adolescents between 8 and 17 years old are categorized as 'children'. Youth and adults from 18 years and older are categorized as 'adults'.

Table 4.1: School attendance

	% Children at T1	% Children at T2
Going to school now*	79.1	82.3
Not going to school now, but has been in school *	11.1	10.7
Never been to school	10.2	6.8

*See also Table 4.2 and 4.3, respectively

As shown in the Table above, school attendance seems to increase slightly after the first year of programme implementation (from 79.1% to 82.3%). Therefore, change in school attendance was analyzed at the individual level but was not found to be increasing significantly.

Table 4.2: School attendance specified at individual level

	% Children (N=477)
Going to school at T1 and T2	74.0
Not going to school at T1 and T2	11.4
Going to school at T1 but not at T2	9.6
Not going to school at T1 but is going to school at T2	5.0

As shown in Table 4.2 above, it was found that for 85.4% of the children school attendance did not change (they either stayed in school or stayed out of school). For 14.6% of the children, school attendance changed, and most of these children (9.6%) dropped out of school, whereas 5.0% took up school again.

Table 4.3: School grade at T2

Going to school now (T2) in grade:	% Children at T2 (N=401)	Mean age
Primary school grade 1 - 2	3.7	9.9
grade 3 - 4	36.4	11.4
grade 5 - 6	38.9	12.9
Junior secondary school grade 1	15.4	14.3
Senior secondary school grade 1	0.2	15.5
Grade unknown	5.2	-
		Total mean: 13.1 years

Table 4.3 above shows the grades the children are in (for children who at attending school at second measure). Most children who currently attend school are in primary school, in grade 3 to 6. Within this group of 401 children, gender is distributed equally (46.4% girls, 53.6% boys). Also, mean age is increasing in line with grades, which shows no indication of the existence of former school drop-out children trying to catch up school again. As shown in Table 4.4 below, most children who are not going to school dropped out after the second grade of primary school.

Table 4.4: Grade of children who dropped out of school

Not going to school now, but has been in school up to grade:	% Children at T2 (N=54)
Primary school grade 1 - 2	50.0
grade 3 - 4	29.7
grade 5 - 6	18.6
Junior secondary school grade 1	1.9

Table 5.1: Working children

	Children at T1 N=488	Children at T2 N=488
Children who are working	93.4%	93.2%
Average number of jobs mentioned	2.45 (sd.1.4)	-
Number of jobs mentioned by the children		
1	29.7%	-
2	30.8%	-
3	19.7%	-
4-7	19.8%	-

Table 5.2: Type of work or chores children do

What kind of work or chores do you do? (T1, N=488)	N	%*
o (Income generating) Work at the farm (planting / weeding / ploughing / harvesting)	232	47.5
o Domestic work in / around the house (sweeping / cleaning), go on errands, taking care of siblings	211	43.2
o Fetching water / wood	205	41.6
o Preparing and cooking food (pounding)	120	24.6
o Other income generating jobs, namely: masoner / construction work / sand mining, taking care of animals (birds, goats, sheep), fishing (drying fish), basket making, cracking palm kennel, carpentry, hair dresser, tailoring, soap making, transport, black smith, charcoal burning	105	21.4
o Doing the dishes (wash plates / pans)	74	15.2
o Doing the laundry (washing)	54	11.1
o Trading / selling things to generate income (petty trade of wood, cigarettes)	43	8.8

* Since most children mentioned more than one type of job, frequencies do not add up to 100%.

Table 6: Profession

Type of profession of adults (T1, N=504)	N	%
o Farmer / palm-wine tapper / palm oil production	257	51.0
o Housewife	122	24.2
o Petty trader / fisherman / store keeper	100	19.8
o Other, namely: sandminer, tailor, driver, caretaker, policeman, technician, traditional birth attendant, diamond digger, coal miner, nurse, labourer.	35	6.9
o Student	20	3.9
o Carpenter / masoner / construction builder	16	3.2
o Teacher	16	3.2
o Religious (leader / imam) / headman (village chief, board chairman, youth chairman)	7	1.4
o No profession / unemployed	50	9.5

Table 7: Household situation for children and adults (at T2)

	Children	Adults
Average number of people living in the house	14.7 (sd. 7.6) range 2 – 52	14.9 (sd. 8.9) range 1 - 64
Average number of children	7.9 (sd. 4.6) range 1 – 41	8.1 (sd. 5.4) range 1 – 31
Average number of parents living in the house	3.7 (sd. 2.9) range 1 – 27	4.3 (sd. 3.3) range 1 – 23
Average number of grandparents	1.9 (sd. 1.3) range 1 – 10	1.9 (sd. 1.6) range 1 -12
Average number of other relatives living in the house	3.6 (sd. 2.9) range 1 - 21	3.4 (sd. 2.7) range 1 - 18

Table 8: Places for play according to children *

	% Children T1	% Children T2	% Adults T1	% Adults T2
At home / street	81.5	79.9	80.5	81.9
In school	56.6	78.3	45.6	83.3
Community play area	23.5	46.5	32.3	51.6
War Child play area	-	44.1	-	35.5
Special occasions (e.g. festivals)	19.8	31.1	19.4	39.5
Club	2.3	2.7	1.8	6.2
Other**	15.8	16.2	22.7	26.8
None (hardly)	10.1	0.2	6.0	0.0
Average number of play opportunities	1.9 (sd. 1.0)	3.0 (sd.1.1)	2.0 (sd..94)	3.2 (sd. 1.1)

* 'Do you have the opportunity to play? When/where can you play?' Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

** Other play opportunities mentioned by children and adults: at the drying floor, on the beach, at the (football or play) field, at the farmhouse, under the big mango trees, and at the wharf (based on T1).

Table 9: Community activities identified by children and adults *

'What kind of community, cultural or religious activities take place in your community?' (Open question) *	Children T1 N=488	%	Adults T1 N=504	%
o Cultural dance activities	468	95.9	255	50.1
o Community games and sports	333	68.2	223	44.2
o Cultural activities / Secret society	296	60.6	351	69.6
o Religious activities	213	43.6	301	59.7
o Leisure / recreational activities	105	21.5	109	21.6
o Melodrama / Disco	29	5.9	16	3.2
o Socio drama	16	3.3	20	4.0
o Media activities (radio program) / annual festivals	10	2.0	4	0.8
o No idea	26	5.3	16	3.2
Average number of activities mentioned		3.2 (sd. 1.7)		2.8 (sd.1.3)

* Since most respondents mentioned more than one activity, frequencies do not add up to 100%.

Table 10: Child rights mentioned by children

'Can you name some children's rights?' *(Open question)*	T1 N=161	%	T2 N=464	%
o Right to go to school	133	82.6	408	87.9
o Right to play (football, drama, dance, run)	129	80.1	378	81.5
o Right to protection/ medical care / to be treated well (no flogging) / right to live / good health	42	26.1	131	28.2
o Right to have enough food / safe drinking water	33	20.5	182	39.2
o Right to have own opinion / express oneself / take part in decision making	24	14.9	119	25.6
o Right to parent support, care and love / clothing / shelter / (place to) sleep / basic needs	21	13.0	125	26.9
o Right to work / help my parents / no excessive labour	16	9.9	33	7.1
o Right to freedom / free association/ free to mix or be friends with others / free movement / to be happy / to have a name/nationality	10	6.2	112	24.1
o Right to be part of / learn of my own culture and tribe / freedom of religion / participation	4	2.5	46	9.9

Table 11: Child rights mentioned by adults

'Can you name some children's rights?' *(Open question)*	T1 N=287	%	T2 N=486	%
o Right to go to school	248	86.4	444	91.3
o Right to basic needs (medical care, sanitation, clothing) / parental care and encouragement / right to be loved / right to rest	133	46.3	258	53.1
o Right to be protected / to be treated well / no flogging / not to be disgraced / right to be treated equally *	119	41.5	75	15.4
o Right to play (football, drama, dance)	88	30.7	366	75.3
o Right to have enough food / water	77	26.8	224	46.1
o Right to be happy / to be free (to move / freedom of association, freedom of decisions and religion) / to live and survive/ right to develop / right to a name / right to leisure time	65	22.6	152	31.3
o Right to have own opinion / express oneself/ right to complain	34	11.8	158	32.5
o Right to work / help my parents / no excessive labour	14	4.9	12	2.5
o Right to shelter / right to have a house & compound to live	14	4.9	127	26.1
o Right to obey / respect (elders) / discipline	11	3.8	14	2.9
o Right to be part of / learn of my own culture and tribe	6	2.1	41	8.4

* Adults' response to the right to protection was not successfully categorized. The coding system was not applied properly, hence the large variation in responses. This result should be interpreted very carefully.

Table 12: Child rights according to children

'Do you think children have the right to….' *	% Children T1 N=488	% Children T2 N=488
Play	92.6	100.0
Go to school	98.2	99.6
Support of parents / caregivers	96.0	99.4
Express their opinion	50.7	89.1
Fight with other children	17.9	6.3

* Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

Table 13: Child rights according to adults

'Do you think children have the right to….' *	% Adults T1 N=504	% Adults T2 N=504
Play	94.6	100.0
Go to school	99.6	99.8
Support of parents / caregivers	97.6	99.8
Free time	72.9	95.8
Express their opinion	67.5	95.7

* Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

Table 14: Child responsibilities

	Children T1	Children T2	Adults T1	Adults T2
Average number of child responsibilities mentioned	2.1 (sd. .61) N=171	2.4 (sd. .84) N=461	2.2 (sd. .71) N=285	2.2 (sd. .78) N=484

Table 15: Child responsibilities mentioned by children

'Can you name some responsibilities of children?' (Open question)	T1 N=171	%	T2 N=461	%
o Income generating work (e.g. selling and trade) and domestic work (e.g. pounding, cooking, farming, ploughing, rice weeding washing, help parents, go on errands)	140	81.8	379	82.2
o Be respectful to elders, others / greet and obey elders	88	51.5	245	53.1
o Go to school / read books	78	45.6	229	49.7
o Fetch water / wood	36	21.0	84	18.2
o Take care of elders / younger siblings / self	5	2.9	51	11.1
o Play peacefully with other children and share with others	3	1.7	52	11.3
o Discipline: no drugs, avoid fighting/use of abusive language	-	-	81	17.6

Table 16: Child responsibilities mentioned by adults

'Can you name some responsibilities of children?' (Open question)	T1 N=287	%	T2 N=484	%
o Income generating work (e.g. selling) and domestic work (e.g. pounding, cooking, farming, ploughing, rice weeding washing)	236	82.2	404	83.5
o Go to school / read books	118	41.1	223	46.1
o Be respectful and honest to elders, others / greet and obey elders	86	29.9	275	56.8
o Fetch water / wood	48	16.7	83	17.1
o Take care (of themselves) / be at peace / avoid taking drugs / wash own clothes / discipline / say no to wrong friends	30	10.4	42	8.7

Table 17: Difficulties experienced or observed by children *

	% Children T1	% Children T2
School drop-out	80.3	80.2
Lack of respect between children and elders	76.0	41.2
Aggression	75.4	55.7
Early marriage	75.8	57.2
Drug abuse	58.9	51.8
Fear (anxiety)	45.2	48.9
Discrimination	40.0	39.8
Frequent nightmares	24.8	30.5
Other**	29.0	56.7
None of these difficulties	3.9	24.2
Average number of difficulties mentioned Range 0 – 9	5.0 (sd. 2.0)	4.2 (sd.2.1)

* 'Do you, or any other children you know, experience any difficulties, such as …?' Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

** At T1, a third of the respondents (11.7% out of the 29%) who responded that there were also other types of difficulties could not describe any other type of difficulties children experience. Difficulties that were mentioned by the others are: child labour, fighting, domestic violence ('no peace at home'), unsafety (e.g. 'after 6 PM children in this community are afraid to be outside the house'), early sex/pregnancy, gambling, gossiping, low concentration, lack of self confidence, stealing, prostitution.

Table 18: Difficulties experienced by children, according to adults

	% Adults T1 N=287	% Adults T2 N=486
School drop-out	90.7	75.5
Difficult relationships with parents/caregivers	79.7	31.5
Aggression	64.0	44.8
Early marriage	64.8	45.4
Poor concentration	56.0	37.4
Lack of self-confidence	54.8	29.0
Hyperactivity	44.2	37.5
Drug abuse	42.3	27.8
Discrimination	38.2	33.5
Fear (anxiety)	35.0	29.4
Frequent nightmares	33.2	27.2
Other **	18.3	16.8
None of these difficulties	1.6	22.2
Average number of difficulties mentioned Range 0 – 12	6.1 (sd.2.5)	3.9 (sd.2.7)

* 'Do you know children who experience any difficulties, such as …?' Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

** At T1, few adults (3.4% out of the 18.3%) who responded to other types of difficulties could not describe any other type of difficulties children experience. Difficulties that were mentioned by the others are: use of abusive language, maltreatment/fighting/violence, child labour, conflict among people living in the community, disrespect, early pregnancy, gambling, gossiping, lack of (parental) care, lack of medication, poor water and sanitation, no materials for cultural and recreational activities, prostitution.

Table 19: Child support according to children

'Is there anything that would help you, or any other children you know, to deal with these kinds of (psychosocial) problems?' *	% Children T1	% Children T2
Talk / support of adults	74.5	92.4
Talk / support of peers	26.3	64.1
Play with friends	26.3	43.0
Celebrations, festivals, rituals, dance, songs	25.1	31.1
Visit a healer	22.6	23.4
A safe home	21.6	37.5
Other *	21.4	19.3
Nothing can help	14.7	0.2
Average number of support options mentioned Range 0-7	2.3 (sd. 1.3) N=486	3.1 (sd. 1.5) N=488

* Open question.

** A few children (4.9% out of the 21.4%) who responded to 'other types of support' could not name them. Other ways of support mentioned were: counselling, give the children advice and encourage them, effort by community elders to ensure protection of children, good family support, government support on education, meeting and awareness raising activities, pray to God, safe play areas, sensitization of community, parents should be educated about the importance of school, train parents on child rights, workshops.

Table 20: Child support according to adults

'What would help children deal with such (psychosocial) problems?' *	% Adults T1 N=499	% Adults T2 N=504
Adult support / talk to the child	91.0	86.7
Peer support / child talks to friends	30.9	51.2
Give the child opportunity to play, recreate	45.9	53.8
Provide a safe home / structure / routine	35.3	43.5
Consult a healer	16.2	14.5
Celebrations, festivals, rituals, dance, songs	35.9	20.6
Other **	41.3	25.6
Nothing can help	2.6	0.0
Average number of support options mentioned Range 0-7	3.0 (sd. 1.4) N=499	3.0 (sd.1.7) N=504

* Open question.

** At T1, about half of the children (19.4% out of the 41.3%) who responded that there were also other types of support, could not name them. Other ways of support mentioned by the others are: advice and encourage the children, counseling, workshops, sensitization, government intervention, provide education assistance/sending children to school, help from humanitarian organizations, praying, provision of recreational materials / play facilities, skills training, 'parents should control their children', 'flog them for wrong doing!'

Table 21: Child support by significant others according to children

'If you have a problem, how much do you feel supported by…?' *	Children T1 Mean	Children T2 Mean
Parents or caregivers	2.99 (sd. 1.1) N=475	3.55 (sd. .73) N=469
Teachers	2.21 (sd. .95) N=417	2.51 (sd. .97) N=433
Friends / peers	1.94 (sd. .86) N=479	2.33 (sd. .87) N=430
Other **	2.40 (sd. 1.15) N=467	2.96 (sd. .78) N=427

* 4-point scale used: 1=not at all; 2=a little; 3=sufficiently; 4=a lot. Question is only answered when applicable, hence the variation in number of responses (N).
** Other persons specified are from within the family (grandparent, siblings, uncle, aunt) and from within the community (chief, imam, pastor, counsellor, youth leader)

Table 22: Child support: who do you turn to?

'If you have a problem, is there someone you can turn to? Who?' *(Open question)*	% Children T1 N=488	% Children T2 N=488
No one	6.4	0.0
Parent or caregiver	82.8	96.3
Teacher	33.9	68.0
Friend / peer	14.9	62.7
Other *	51.7	62.9

* Relatives were mentioned like brother/sister, husband, uncle/aunt, grandparent, and other important persons were mentioned from within in the community like chief, youth leader, pastor, imam, counsellor, doctor, neighbour, secret society.

In line with results described in section 3.4, results of Table 22 show that almost all children do perceive their parents or caregivers as the most important persons to turn to when there is a problem. Furthermore, perceived availability of support from parents increased significantly between the two measures.[46] Also, perceived availability of teacher and peer support increased significantly.[47]

Table 23: Child support: who can children turn to according to adults?

'If children have a problem, is there someone they can turn to? Who?' *(Open question)*	% Adults T1	% Adults T2
No one	4.0	0.2
Parent or caregiver	91.4	99.8
Teacher	32.9	77.0
Friend / peer	12.2	46.8
Other *	53.1	65.9

* Relatives were mentioned like brother/sister, husband, uncle/aunt, grandparent, and other important persons in the community like chief, head man, youth leader, pastor, imam, counsellor, elders, doctor, neighbour, police, secret society.

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[46] t (487)=7.15;p<.000
[47] t (487)=11.8;p<.000 and t (487)=17.8;p<.000 respectively.

Table 24: Parental support *

'How much time do you have for your child?' **	% Adults T1 N=422	% Adults T2 N=441
(1) Too little	38.9	12.2
(2) Sufficient	42.7	51.5
(3) A lot	18.5	36.3
'Are you able to help your children when they have problems? How?' ***	77.6 N=428	95.4 N=457

* Questions are only answered when respondents have children, hence the lower number of responses

** Open question, but answer options were read if necessary.

*** Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

Table 25: 'How do adults in the community support children?' Examples of adult support, according to adults. *(Open question)*

Basic needs	o Proper parental care: feeding, clothing, caring / help them financially
	o Provide basic needs (food, shelter, clothing, health services, play activities)
	o Protecting children from danger / take good care / provide shelter / medical care
Advice	o Advice and encourage them (to take responsibility) / talk with them / assist the child to solve problems / play with them
	o Talk with children when they do wrong things / educate them about what is wrong and right
	o Take them to black magic people to solve their worries / take them to the mosque for prayers
	o We have to support our children as our parents did / listen to them what they need and their sense too / advice them
Education	o Educate them / assist them to go to school / advocate for children to go to school / support in their education / pay their fees / arrange transportation to school
Advocate for the needs of children	o Advocate for them / address their needs / plead on their behalf
	o Apologize to (financial payment) complaints / mediate / beg for those offended / beg for crimes committed
	o Protect them (when they have palava)/ settle disputes / beg /apologize for them when they are in trouble with others / police
Financial	o Ask (financial) help from others, like relatives / relations / Give financial support
	o Through business funds / Through farm inputs sold
	o Supplying them during festival season / provide cultural material
	o Provide some material for single parents / pay school fees of orphan children
Other	o Attend meeting and allow children to take part in community activities
	o Train them well and beat them when they cause trouble / punish them for crimes committed

Table 26: 'Why can adults not always sufficiently support their children?' Explanations for not supporting the children. *(Open question)*

- o Poverty / no money/ we cannot afford the support needed / soils are not fertile hence the means of earnings are limited
- o Adults are always busy working in the farm / have little time for children
- o Adults cannot afford to support all children especially in polygamy homes / too many children / non-biological children are disadvantaged
- o Especially single parents homes have very limited means and difficulty to support the children
- o We still suffer from the effects of the war, economic situation is difficult / lack of employment / most families just resettled from war camps
- o Adults are bad role models so they cannot correct the children or talk to them when they have problems
- o Adults do not show concern for children / parents are not aware of child care / negligence / ignorance / lack of understanding among adults
- o Before, there were no NGO people that came to us to talk about this sickness of the mind. We were not aware of the benefit of play and education.
- o Because children don't respect adults / children and youth are arrogant and aggressive
- o Disunity (tribal setting) crisis or disputes between parents

Table 27: Examples of changes regarding communication between adults and children

'Can you describe changes regarding communication between adults and children?' *(Open question)*	% Children T2 N=417	% Adults T2 N=488
o **Children's expression:** children talk freely, explain their problems, adults listen to their opinion, make decisions together, complain, choose when/what to play, organize meetings, adults listen to advice/ideas	50.8	64.9
o **Adult support**: in a nice/friendly manner, share problems, advice in problems of children and in decision making, support the children, children listen	25.6	23.6
o **Community harmony**: peaceful interaction/living, all help in developing action plans and children attend in community meetings, respecting children's rights, sitting/listening together, share views, where /who to keep materials	22.1	25.2
o **Family communication**: parents discuss with their child, children respect their parents, parental support, allow child to play freely	20.9	11.3
o **Children and adults showing respect**: no aggression, shouting, abusive language, listen to prayers, children/youth show respect to adults, they listen to adults, all respect each others' opinion.	16.3	8.4
o **School work**: children explain their school work, parents help with homework, choice of school, buying school stationary, paying fees, more children in school	4.3	6.9
Average number of examples mentioned	1.4 (sd. .57)	1.5 (sd. .56)

Table 28: Respect between adults and children

	Children T2	Adults T2
Respect *	2.04 (sd. .59)	1.8 (sd. .53)
Have you noticed changes **	88.9	93.2

* 'How well do you think that adults and children in your community respect each other?' 5 point scale used: 1=very good; 2=good; 3=not good / not bad; 4=bad; 5=very bad.

** 'Have you noticed any changes regarding respect between adults and children, since the first interview?' Answer options were mentioned and respondents answered with either yes or no; % 'yes' is reported.

Table 29: Examples of changes regarding respect between adults and children

'Can you describe changes regarding respect between adults and children?' *(Open question)*	% Children T2 N=426	% Adults T2 N=462
o **Children respect & obey adults** (elders/parents), talk to parents/elders with respect, listen to advice, listen to each other, greeting	46.9	55.6
o **Cooperation in community activities**: organize activities, playing, interact/participate peacefully, conduct meetings, decide on playground, unity in community, take part in meetings	24.2	16.7
o **Adult respect children**: respect children's views/opinions/rights, stop beating, no shouting at children, polite	19.2	40.2
o **Children talk to adults/parents**: included in decision making in community, children respect themselves	31.9	11.2
o **Child behavior**: less aggression, no more stubborn children, politeness, no drugs, no shouting, less conflicts	19.0	12.5
o **Adult support**: encourage, talk/advice to children, protecting children	11.0	11.5
o **Work**: children help in housework, trade, selling, fetching water, go on errands	10.3	3.2
o **School**: attend school, go to school happily	3.3	1.5
Average number of examples mentioned	1.66 (sd. .69)	1.65 (sd. .66)

Table 30: Involvement of children in decision-making processes *

	Children T1 N=488	Children T2 N=488	Adults T1 N=492	Adults T2 N=504
Average **	2.6 (sd. .73)	1.9 (sd. .89)	2.5 (sd. .80)	1.8 (sd. .81)

* 'In decisions that are important for everyday life (e.g. concerning home, playing, cultural events, school), do adults listen to what children have to say?'

** A 3-point scale was used: 1=yes, always; 2=sometimes; 3=no, never.

Table 31: Decisions children are allowed to make, according to children

'Which decisions are you (sometimes) allowed to make?' *(Open question)*	T1 N=105	%	T2 N=301	%
o School / education affairs / buying learning tools	44	41.9	135	44.8
o Type of work to be done to help parents e.g.: cooking, washing, fetching water, clothing, small business, looking after siblings, choice of food or what clothes to wear.	24	22.8	168	55.8
o Cultural activities e.g.: dancing Tefeya, drama, church, peace building, self help projects, pray day, community meetings.	12	11.4	79	26.2
o How to solve a conflict / problem at home (e.g. Related to smoking, drinking alcohol, education, farming)	11	10.4	29	9.6
o Health / child welfare issues / child protection	8	7.6	33	10.9
o Playing / location of safe play area	5	4.8	112	37.2
o In terms of marriage / husband marrying second wife	2	1.9	3	0.9

Table 32: Decisions children are allowed to make, according to adults

'Which decisions are children (sometimes) allowed to make?' *(Open question)*	T1 N=141	%	T2 N=365	%
o School / education affairs / type of job to learn	50	35.5	168	33.3
o Kind of work the child needs to do, e.g.: type of food to be prepared, farming, fishing, small business.	52	36.9	146	29.0
o Cultural activities (dancing, bubu, debating, disco, theatre plays, celebrations, being initiated into secret society) / decisions about meetings / decisions about organizing festivals / decisions about community development	17	12.0	108	21.4
o Health / child welfare issues / how to take care of themselves	19	13.5	25	5.0
o Playing / allow them to associate with colleagues and to recreate / let them choose what they wish to do after school hours /games / personal affairs	13	9.2	168	33.3
o When dealing with community problems / issues / community laws	7	5.0	34	6.7
o Decisions about marriage	2	1.4	1	0.2

Table 33: Examples of War Child activities

'Can you name some activities of the War Child programme?' *(Open question)*	% Children T2 N=476	% Adults T2 N=491
o **Sports;** football, volleyball, handball	84.2	78.8
o **Cultural activities;** cultural dance, tefeya, bubu, jolley, mathoma, bando, kurrana, social activities, cultural revival, peace celebration	75.4	72.1
o **Meetings;** discussions, radio, panel discussions, rally	42.0	38.1
o **Games;** ludo, snake&ladder, ballon, draught	35.3	38.5
o **Music;** concerts, community music	27.9	33.0
o **Drama;** socio drama	25.8	28.1
o **Creative arts;** painting, drawing, arts&crafts, practical arts	19.5	16.9
o **Outing & leisure;** video, story telling	13.4	15.3
o **Workshop & training;** capacity building activities, to bring community together	12.8	16.7
o **Play materials;** create safe play area, play centre, community centre	11.1	6.9
o **Awareness raising;** inform about psychosocial needs/problems, how to solve problems, about importance of education, sensitization of parents/child issues, on child welfare	3.4	3.0
Average number of activities mentioned (range 0 - 17)	3.5 (sd. 1.2)	3.5 (sd. 1.2)

Table 34: Examples of changes within the community

'Have you noticed any changes since the first interview?' *(Open question)*	% Children T2 N=468	% Adults T2 N=488
o **Play opportunities and participation of children**: play material, safe play area, children meeting together, children have common/ positive interaction, youth express their emotions, children live happy and freely	55.8	47.9
o **Community harmony**: awareness rights of children, meetings, interaction elder / youth/children, living peacefully, raping and kidnapping reduced, cultural activities, communities brought together, village to village relation, women involved	51.3	54.5
o **Family support**: parents listen to children, ask their views. Parents take care of us, parents no longer beat us, reduce domestic violence, partake in decision making/food, parents provide basic needs for children	28.0	16.0
o **Disciplined behaviour of youth**: less drugs, less gambling, listening, no abusive language, less fighting, respect for elders, ask permission from parents, drinking of alcohol reduced	18.6	12.9
o **School enrolment**: increased school enrolment, canning has reduced, increase of girls attending school even after pregnancy	17.9	11.5
o **Child labour**: reduction of child labour	7.5	2.5
o **Early marriage**: reduce early marriage, pregnancy	3.6	1.2
Average number of examples mentioned	1.8 (sd. .82)	1.5 (sd. .56)