

Lessons learned

Gerison Lansdown

This brief series of articles on the work done around the world to strengthen child rights education for professionals demonstrates that while it is comparatively straightforward to develop workshops on children's rights, there is no quick fix to the goal of institutionalising child rights education within professional training. It takes time and commitment. It needs broad partnerships and advocacy. It will require sustained support and investment.

CRED-PRO has now been in operation for a number of years, in countries in different regions including Canada, USA, Guatemala, Jamaica, Colombia, Chile, Argentina, Uruguay, Paraguay, Turkey, Kenya, Tanzania, Ethiopia, Uganda and South Africa. To date the focus has primarily been in the fields of health and early childhood development but CRED-PRO is also currently developing core curricula for the social work and school psychology professions. It is planned to expand to address teacher education and law in the near future. While the activities are still very much a work in progress, the experience to date does highlight some important common lessons that highlight both the challenges and the opportunities involved in this task.

1 Local ownership

It is neither possible nor desirable to seek to foist a curriculum or training model on any country or profession from outside. In order to be meaningful, any curriculum needs to reflect the lived realities of children within the given country. It needs to relate to the prevailing constitutional and legal provisions. It must take account of the current level and forms of training available within the country. It must reflect the culture and values, build on them where they can be applied to affirm and strengthen children's rights and be understood and challenged effectively where they violate or abuse them. The relevant key stakeholders have to be committed to the view that child rights education is needed. The role of an external body, such as CRED-PRO, is to act as a catalyst and provide the tools for initiating a process. However, the curriculum must be developed and owned by the country concerned. The process of curriculum review, therefore, is imperative.

The universal/generic curricula and external framework provided by CRED-PRO is a starting point which must be shaped, adapted and accommodated to the social, economic and cultural context in which it will be taught and applied. For example, in Latin America, the review process led to a more philosophical and academic approach, whereas in South Africa, a much greater focus was placed on legislation and the role of the constitution in addressing children's rights in health care. By contrast, in Tanzania, it was decided to develop the curriculum by creating a story which focused on the lives of two children through each of the modules.

This review process is crucial, not only in producing a curriculum which is relevant, but also in mobilising active support amongst the potential advocates for its incorporation and application. An example of the importance of ownership was well illustrated in the initial stages of the early years' curriculum in Tanzania. At the first meeting of the partners brought together to lead the process, the representative of an Early Childhood Development NGO was rather concerned

about the nature of certain proposals being made and demanded to know what **'you'** that is, CRED-PRO, were proposing to do about it. The Director of the Institute for Education, the body responsible for teacher training, immediately responded by saying the question should be rephrased to ask **'what are we as a group going to do about it?'**

2 Involvement of the professions

The active involvement of the professionals themselves, ideally through their professional associations, is a key factor in success. In Latin America, for example, the process was led by paediatricians. They are far more persuasive advocates of the need for the curriculum than any external agency could be. They speak from a deep understanding of their profession, their role and relationships with children and the challenges that children face. They also play a central role in the provision of their own training. They therefore carry substantial weight with their colleagues. However, the role of the professions varies both across sectors and between countries. In Tanzania, for example, where the CRED-PRO programme was focusing on early childhood, no single professional body exists. Children under eight years potentially have contact with a wide number of different professionals including social workers, teachers, community development workers and nursery teachers, and few of them have a professional body which could take a lead in driving the agenda forward. Where this is the case, other key stakeholders need to be engaged.

3 Broad alliances

Building a broad based alliance and forming a co-ordinating body of all relevant stakeholders is a key to success. Stakeholders might include professional bodies, government ministries, academic institutions, training institutes, INGOs and local and national NGOs, UN agencies, and donors. The inclusion of this breadth of partners ensures that the process is:

- based on the best possible knowledge of current or proposed training developments;
- able to benefit from the greatest possible breadth and depth of expertise and skill;
- able to identify all possible entry points for training, and their respective advantages;
- effective in providing a forum which brings together different perspectives in order to address challenges
- able to establish ownership, solidarity and strength in making the case for child rights education
- able to ensure that the curriculum is implemented and applied

4 Strong lead partner

Developing a sustainable curriculum is a time consuming and demanding process. Any curriculum change takes time. Introducing training on children's rights is not only an unfamiliar field but also one towards which there is likely to be resistance, requires considerable persistence and fortitude. While a broad base of key stakeholders is necessary to ensure support and expertise, it is also very important to identify a lead partner at the country level who can co-ordinate and sustain the process. Our experience has been that, wherever possible, the lead partner should have the following capacities:

- Leadership capacity - the willingness, energy, ability, and reputation to own the process, become identified with it and to lead the process forward. An

agency which commands widespread respect for high standards of professionalism and reliability is particularly invaluable. The partner will need to be able to identify potential members for the committee overseeing the work, understand the different roles of organisations, agencies and institutions, meet with potential members, make the case for participation and successfully pursue reluctant but needed members.

- Management capacity - the agency needs to be able to commit the time to maintain contact with all advisory committee members, host meetings, disseminate information, produce agendas and minutes, provide reports, and co-ordinate the work of different sub-groups.
- Knowledge of and commitment to children's rights and curriculum development - although the responsibility for the adaptation of the curriculum rests with the co-ordinating body committee as a whole, it is important that the lead partner has credibility in understanding both children's rights and curriculum development in order to be able to co-ordinate the process from an informed perspective.

The lead partner is critical to the success of the initiative. It is a demanding role which has to be actively maintained throughout the entire process.

5 Consultations with children

Children's perspectives are of significant value in ensuring that the curriculum reflects the issues of key relevance to their lives. In South Africa, for example, where a consultation was undertaken to explore children's experience of the health professions, a wealth of information was revealed¹. The children commented that nurses and doctors did not always seem to care about them or their health. Even when they were in pain, many felt that there was no-one to tell or who was interested in them. Because they were children, they found it difficult to ask for help or attention when they needed it. They often felt lonely and frightened, particularly at night. Many also expressed fear because doctors and nurses sometimes shouted at them, or treated them roughly when, for example, changing bandages. Lack of privacy and respect for their dignity was another major concern they raised. They highlighted the lack of information provided by doctors which left them feeling unnecessarily anxious and lacking control, commenting that 'It makes us sad when we ask the doctor or nurse what is wrong and he won't tell you'. Some criticism was also focused on their caregivers who often failed or refused to take them to a doctor even when they were sick or in pain. They felt that health professionals had a role to play in educating caregivers about early identification and referral. They also felt that health workers should be sensitized to the power relationship between adults as authority figures and children, children's vulnerability when sick, and to be encouraged to be more proactive in offering care in ways that acknowledge the child's feelings. Clearly, better communication and greater respect would enable children to get improved treatment and recover more quickly.

It is not possible to produce a meaningful child rights curriculum without an understanding of these issues from the child's perspective. The process in each country therefore needs to involve a mechanism for listening to children, and the

1 CRED-PRO Pilot of the Children's Participation Workshop, Workshop Report, Moses S, and Urgotti G, Children's Institute, 2008

process of curriculum development must build in time and the necessary partners to enable that to take place.²

6 Role of government

Governments are the primary duty bearers in respect of the implementation of the CRC. Their active engagement in curriculum development is, therefore, of self-evident importance. Their involvement is crucial both as a means of raising the awareness of ministers and officials of the value of child rights education, but also in enlisting their support in its promotion and implementation. The attitude of the government will obviously vary widely from country to country. Some of the arguments which can be enlisted in encouraging government cooperation and investment arguments which can be used include:

- Concluding observations from the Committee on the Rights of the Child - the Committee consistently presses governments to introduce child rights education for professionals. This recommendation, and the need for the government to act on it, can be used to argue for their support.
- It is not possible for governments to fulfil their obligation to implement the Convention unless practitioners throughout the country are familiar with it and begin to reflect its principles and standards into their daily practice.
- There is a growing body of evidence that where children's rights are respected by professionals, it leads to enhanced outcomes for children. For example, evaluations of rights respecting schools, where children are listened to and not hurt or humiliated, indicate that they result in lower drop out, improved attendance, better behaviour, higher academic attainment, and improved relations both between children and teachers and children. The safety of children necessitates, not only a recognition of their right to protection from all forms of violence, but a commitment to creating space for children to be heard and to involving children in strategies for their own protection, well being, health and development. Professionals cannot bring about these changes without the appropriate training and support³.

However, the role of government in curriculum development varies enormously according to the particular profession and the region or country. For example, in the US and UK, where the curriculum was originally developed for paediatricians, the profession itself, through academic institutions, has total responsibility for the content of what is taught. The situation is similar in Latin America, but, by contrast, in the CEE/CIS countries, the health ministries have control over the curriculum. Nothing can be done without their approval. In most countries, the curriculum for teacher training, which tends to have a more political dimension than health, is determined by the education ministry. It would not be possible to proceed with the development of a child rights curriculum for teachers without working closely with and through the relevant government officials. The role of government must be assessed and engaged in each country, and according to the particular profession. In Tanzania, where the adoption by the government of

2 See, for example, Lansdown G (2011) Every Child's Right to be heard: a Resource Guide on the CRC General Comment No.12, Save the Children/UNICEF, and Lansdown G and O'Kane C, A Framework and Toolkit for Measuring Children's Participation, available from CRIN

3 see, for example, CRC General Comment No.13, The Right of the Child to Freedom from All Forms of Violence, CRC/C/GC/13

an Integrated Early Years Strategy included a strong commitment to the development of training for the relevant professionals, all three government ministries responsible for the Strategy needed to be committed and actively involved for the process to have any chance of success. It is important to invest time and commitment to meeting the appropriate ministers and officials, providing them with information, maintaining regular contact, engaging with their concerns, and making the positive case for child rights education.

7 Identifying entry points for child rights education

If the curriculum is to be institutionalised into the training of all professionals, it is important to determine exactly where it will be taught. For some professions, it would be possible to incorporate the modules into post-school or undergraduate training. Another alternative would be to develop it as a required component of continuing professional education, or an in-service, post-qualifying diploma. It is worth giving time to an analysis of the potential entry points as this will affect the format of the curriculum being developed, and the nature of the advocacy undertaken to ensure that the desired outcome is attained.

8 Readiness to profit from unexpected opportunities

It is an acknowledged principle that progress can be achieved in different ways. In short there is no one right answer, but rather many right answers that can be applied according to the particular context. For example in the Southern Cone Initiative, each of the countries is achieving education of professionals but in different ways. In Chile the answer was to align the effort with the deployment of the government's health policy, *Chile Grows With You*. In Uruguay it was through a nation-wide sector alliance, in Argentina through work in the hospitals and clinics, in Colombia in close association with the Colombian Pediatric Society and in Paraguay through an outreach program of the Ministry of Health. In all five countries, the work has evolved into a broad level of engagement in advocacy, health and child protection policy, public health campaigns and awareness raising. In Tanzania, the work has provided a valuable platform for bringing together stakeholders with different skills, networks and opportunities for advocacy. It has offered an opportunity for greater learning and understanding about children's rights, what needs to change and how to achieve that change. It has also enhanced understanding of the vital role of professionals in contributing to the transformation of the society towards one where children rights are respected, protected and fulfilled. In East Africa, four countries have expressed a desire to cooperate collectively, and together with the support of CRED-PRO and the Open University, are poised to build an inter-country alliance to capitalize on the respective strengths of each country in creating a child rights curriculum for frontline health workers. These experiences highlight the importance of sensitivity to the environment and readiness to take immediate action wherever the opportunity presents itself.

Conclusion

The full realisation of children's rights takes time. It is a complex process necessitating change at many levels – in attitudes, in laws and policies, in resource allocation, in awareness and understanding and in cultural practices. The provision of training for professionals who work directly with children, to ensure that their individual practice as well as the systems within which they work serve to promote rather than impede the realisation of those rights, is a vital part of that process of change.

CRED-PRO's experience is that by bringing together a wide group of stakeholders to collaborate in developing child rights curricula and programmes, it is possible to overcome these barriers. However, it will not happen without a considerable investment of sustained time and energy and as broad a support base as possible for the process. Bringing together professional bodies, civil society organisations, governments, academic institutions and UN agencies stimulates debate, generates energy and has the potential for building a strong body of champions for advocating greater respect for children's rights. Child rights education is only one piece in the jigsaw that needs completing if the Convention on the Rights of the Child is to be fully implemented but without it, implementation will not be achieved.