THE FIRST INTERNATIONAL CONFERENCE IN AFRICA ON CHILD SEXUAL ABUSE

24 – 26 September 2007
Inter-Continental Hotel, Nairobi, Kenya

Theme: Enhancing knowledge through research, practice and partnership to protect children against sexual abuse
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ACKNOWLEDGEMENT

The First International Conference in Africa on Child Sexual Abuse was a collaborative effort involving a significant number of stakeholders ranging from organizations, institutions of higher learning to individual professionals and actors. ANPPCAN wishes to express great gratitude to all these groups, for contributions made.

Special gratitude goes to Plan International, OAK Foundation, Liverpool VCT – Kenya, Office of the Vice President and Ministry of Home Affairs, Global Fund for Women and Fredskorpsset (FK) Norway for providing resources for the important conference. The resources enabled ANPPCAN to meet conference expenses beyond the registration fees, such as supporting participation of women and other delegates from developing countries, hiring the venue and providing lunches and teas, among others.

The Kenya Airways and Hotel Intercontinental are deeply thanked for offering special fares and rates for delegates attending the conference.

The organizing team and the Scientific Committee spearheaded by Prof. Okatcha of Kenyatta University and assisted by Prof. Carol Plummer of Louisiana State University, USA, shaped the conference and truly made it what it became.

Special thanks, goes to all the speakers both in plenary and workshops, and the delegates, most of whom supported themselves to the conference. Your sincerity and commitment to the cause demonstrated that our children needed to be protected from the vice and we should not bury our heads in the sand any more.

Special mention goes to the Vice President and Minister for Home Affairs, Hon. Dr. Moody Awori and the Attorney General of Kenya, Hon. Amos Wako for finding time from their busy schedules to officially open and close the conference, respectively. Your actions are an indicator on the value you have for children not only in Kenya but on the continent.

To Board members of ANPPCAN, ANPPCAN Chapter Heads and staff at the Head Office, we simply say thank you for the solidarity and ensuring that the goal of the conference was realized.

Finally to Dr. Frank Okuthe and the Rapporteurs, thank you for being there when your services were most needed.
INTRODUCTION

In traditional African society, child sexual abuse was unheard of. It may, however, have been happening but the society at large had created a system where children were protected through many avenues, ranging from stringent taboos centered on relationships and living arrangements. Anybody who touched a child inappropriately or even made an attempt to sleep with a child was not only considered an imbecile, but was severely punished by the society. Such a person was considered better dead than alive.

It is unfortunate that this is now only a dream and the society has been invaded with all sorts of anti-children missiles. The range is wide. It starts with broken families, unemployment, overcrowding, abject poverty, pornography, HIV/AIDS with its accompanied miseries, state of normlessness, drug and alcohol abuse, conflicts and civil strifes among others. This state of disorder, attacking our institutions, even those supposed to be safe havens for children, has wreaked havoc to children, where fathers, mothers, aunties, uncles, brothers, sisters, cousins, grandfathers and strangers have turned to children for sexual gratification and at times even earning a living, where children are sold for sex and economic gains.

So far, studies done and which target urban populations, indicate that youth and adults, after enjoying seeing pornographic materials in mushrooming video dens and cyber cafés, resort immediately to sexual violence, where children and young women are the victims. Education institutions, which are supposed to be the secondary socializing agents for children, have turned into places where teachers admire their pupils and proceed to establish sexual relationships only to be discovered when the girls get pregnant. Children, especially, the girls, are emotionally manipulated by the adults in these institutions with impunity, based on the emerging evidence. The children are flattered with gifts, good grades and at times, their poor conditions are also exploited. Faith based institutions are no longer godly when it comes to sexual exploitation of children.

In traditional societies, parents were not only the primary socializing agents for children, but they were totally accountable when there was an indication that children were not being protected. With time, the parents have abdicated their responsibilities to friends, teachers, religious groups and, in some cases, to individuals they know very little about. Parents send children for errands at night or to strangers, oblivious of what can happen. The few studies that are emerging, indicate that some of these parents, even sell their children into prostitution for economic gains.

Africa has come up with entrepreneurs with no morals and boundaries when it comes to making money. Whoever thought that children could be trafficked to UK, Middle East and within Africa itself for sexual exploitation, unemployment and poverty notwithstanding. Children are trafficked into domestic servitude where they serve as maids and also provide sexual services to the members of the households.

The most disturbing thing is that as the above is now the normal occurrence, hardly any system exists in most of our countries to respond to child sexual abuse. Children continue to be abused sexually in total silence. This should not be happening in dot com era, where the technology is advancing and in some cases, putting children at risk, as there is ample pornography in the internet. Children with computers and mobile phones, cannot only
access pornographic sites with ease, but they are being lured through this technology unabated.

When it comes to policies, many of our countries cannot claim any credit as they hardly exist. Attempts, on the other hand, have been made by some countries to put laws in place. But the outcry from the few studies that have been done, as well as, those practitioners in child protection, indicate that the implementation is a challenge. The reality is that by and large policies and laws relating to children are not implemented in many countries in Africa, posing problems in child protection efforts

The impact of sexual abuse on children is devastating and requires skilled manpower to respond appropriately i.e. to yield results to the victim. This is a huge omission in Africa where the children who have been extremely violated end up with unskilled service providers who have no knowledge of sexual abuse and its impact. This is double tragedy to sexually abused children in this continent. One hears of cases where perpetrators negotiate out of court settlements with parents of the victims, leaving the victims with no recourse. In some cases the legislative systems are so defective that they favour the perpetrators than the victims. Yet in some cases still, services responding to sexual abuse cases are highly centralized and difficult to access given the distances involved.

It was for all the above reasons that ANPPCAN decided to open the debate on child sexual abuse through an international conference. The conference brought together actors and professionals from all over the world who came and shared and learnt from each other. The conference attracted researchers, practitioners, child activists, the media, policy makers and donors. The delegates were drawn from universities, governments, NGOs, FBOs, media houses, research institutions and UN agencies.

The theme of the Conference was:

*To Enhance Knowledge through Practice and Partnership so as to Protect Children from Sexual Abuse.*

The Conference had the following as its objectives:

- Identify the causes, nature and magnitude of child sexual abuse in Africa
- Create a forum to identify strategies to deal with sexual violence against children
- Provide an opportunity to share information and experiences with a view to enhancing partnership and networking.

The Conference began on 22 September 2007 with a pre-conference for children to deliberate on sexual abuse in their perspectives and make recommendations. This brought together over 300 children who made recommendations for considerations at the conference. On 23 September, 2007 there was a Training Institute for one day, being conducted by experts in the field, mainly to enhance knowledge on research and interventions required to deal with cases of child sexual abuse. The experts were drawn from the Institute for Child Witness Research and Training spearheaded by Prof. Dr. Karen Muller and Ms. Karen Holley. It attracted over 100 delegates. By the end of the day it was clear that training is very much needed.
The Conference kicked off on 24 September, 2007 and was opened by the Vice President and Minister for Home Affairs, Hon. Dr. Moody Awori. It ran for 3 days with 5 plenaries where renowned researchers and practitioners in the area of child sexual abuse, policies and laws made presentations to enhance knowledge in the crucial area. The conference attracted over 400 delegates.

Within the Conference there were 15 concurrent workshops where leaders and practitioners in the field of child sexual abuse made presentations and allowed discussions that identified gaps and made recommendations. The Conference also provided for small seminars for individuals who wanted to establish networks as well as expanding issues of their interests. It allowed for poster presentations and displays of materials and works being done in different parts of the world.

The Conference was officially closed on 26 September, 2007 by the Director of Prosecution, Mr. Keriako Tobiko on behalf of the Attorney General of Kenya, Hon. Amos Wako. He received the conference recommendations and concerns, as well as, views coming from the children’s pre-conference.

This Conference accomplished its goal which was to put child sexual abuse high in the agenda of governments, policy makers, civil society organizations, the media, donor community and the African society, in general, given the interest it attracted from many stakeholders.
MAIN HIGHLIGHTS AND RECOMMENDATIONS

The three-day conference deliberated on numerous aspects concerning the challenges posed by the increasing menace of child sexual abuse. Experts were drawn from different parts of the world, to share in experiences in addressing the vice. The highlights of the discussions of the conference are as presented below in summary form:

Nature and extent

Prevalence:

1. According to the WHO report of 2002 – 20% of females and 6-10% of males reported having been sexually abused.
2. Of all reported forms of child abuse in Africa a significant number have been subjected to sexual abuse.
3. Somewhere in Africa, 45% of children diagnosed as having been abused had been sexually abused.
4. In a certain community in Eastern Africa, 49% of sexually active primary school girls had been coerced into having sex.
5. Yet even these statistics represent a great under-estimation given the gross under-reporting and the ever changing nature of child sexual abuse.

Forms and typologies:

Child trafficking: incest; child marriage; pornography; rape/defilement; non-violent forms (touching, fondling)

Pre-disposing factors:

1. poverty,
2. culture (traditions, practices, dispute resolution mechanisms),
3. disaster/conflict situations,
4. child headed households,
5. homelessness/street/working children situations,
6. gender – based vulnerability (girls more vulnerable)
7. unregulated adoption,
8. sub-standard institutional care arrangements,
9. drug and substance abuse,
10. children with special needs,
11. gender non-conformist children.

Abusers and perpetrators

1. The issue of power relations,
2. children are most susceptible to abuse by people who are close to them and load power over them such as parents/guardians/caregivers, teachers, religious leaders, aid workers,
3. A study among the Yoruba in Nigeria revealed that teachers constituted 40% of the perpetrators of CSA.
Complexity:

1. Intra-familial abuse and the need to protect close family members
2. dependence of survivors on perpetrators
3. linkages with tradition
4. HIV/AIDS

Interventions:

Global level

There have been global/regional responses to the problem of child sexual abuse through the adoption and enforcement of global legal instruments and other special mechanisms such as:

2. The African Charter on the Rights and Welfare of the Child,
3. The Optional Protocol to the UNCRC on the sale of Children,
4. The Parlemo Protocol and
5. The Hague Convention on Inter-country Adoption.
6. Mechanisms include special rapporteurs, child help-lines, inter-agency task forces,

National level

1. Legislation and policy frameworks
   (e.g. mandatory reporting Acts, Children’s Acts, Sexual Offences Acts), regulations
   rules and guidelines to guide implementation of legislations and regulate
   practice/ethical standards and codes of conduct
2. Specialized structures for child protection such as children’s courts, children’s
   protection units, children’s parliaments, special councils and committees
3. National policies and plans of action
4. National registers on perpetrators and child abuse

Community Level

1. Prevention and protection programmes focusing on public awareness creation and
   community mobilization, media campaign involving children and other innovative
   community- based/participatory approaches such as the CIRCLE initiative.
2. Treatment and rehabilitation programmes such as Nairobi Women’s Hospital,
3. Psycho-social care and support programmes/therapies, alternative care arrangements
   (safe havens).

Partnerships:

Rationale

The cross – cutting nature of child sexual abuse requires a:
1. multi-sectoral,
2. multi-actor, and
3. multi-disciplinary approach,
4. There is need to interface research, policy and practice to provide the requisite legislation, protocols and guidelines to support interventions,
5. The need to focus on the best interest of the child and thus to partner with and listen to children

Forms of partnership

Intra-government partnerships (national –local governments)
1. Inter-governmental /bilateral co-operation
2. Civil Society/ government partnership
3. Intra - Civil Society partnerships
4. Civil Society – Private sector partnerships and linkages e.g the Tim LaRose IT communication initiative, toll – free child help lines.
5. Strong partnership with the media

Benefits of Partnerships

1. Scaling up interventions;
2. Improving the quality of service provision and delivery;
3. Capacity building (institutional, human and capital);
4. Maximizing collaboration & minimizing costs through use of modern IT.

Research, knowledge building and adoption of best practices:

1. Increased action-oriented research globally and nationally in the area of child Sexual abuse
2. The disparity between the amount of research undertaken and the level of application (the apparent disconnect between research, policy and practice).
3. Under-researched/grey areas such as the prevalence of child sexual abuse among children with special needs, the linkage between culture and sexual abuse, the efficacy of punitive approaches to dealing with perpetrators
4. Systematic collection of data through national data bases for clearer and more comprehensive picture of the status of child sexual abuse.
5. Translation of research into a coherent body of knowledge that can be domesticated to suit the situational realities of the various countries.

Recommendations

1. In view of the cross-cutting nature of the problem of child sexual abuse, actors at all levels should adopt and foster:
   • multi-sectoral,
   • multi-disciplinary
   • integrated strategies in the design and implementation of interventions.
   • the process should include children.

2. Recognizing the complex and dynamic nature of the problem of child sexual abuse, actors at all levels should embrace learning-oriented, evidence-based, culturally sensitive and contextually appropriate approaches to intervention.
3. In order to promote greater effectiveness of the responses against child sexual abuse, researchers, policy makers and practitioners should aim at increasing coherence between research, policy and practice at the global and national level through closer collaboration and networking.

4. Governments, NGOs and development agencies should invest in scaling up grassroots/bottom-up support to families and communities to undertake practical actions to protect and support children that are vulnerable to child sexual abuse with prevention, as a primary focus.

5. Governments, development agencies and NGOs, particularly in the South, should explore, test and promote innovative mechanisms such as mandatory reporting regimes and national child abuse registers to enhance reporting of child sexual abuse cases.

6. Governments, NGOs and communities should prioritize interventions that support and empower children to be active agents of their own protection

7. Interventions at community level should always include:
   ✓ identification,
   ✓ interrogation and
   ✓ challenging of cultural mis-conceptions and practices that perpetuate child sexual abuse

8. Interventions that target perpetrators should be scaled up and re-oriented towards rehabilitation instead of punishment focused.

9. Child-focused organizations should forge closer links with the media to prioritize and professionally respond to issues of child sexual abuse.

10. Increased research be undertaken in the area of gender non-conformist children to inform responsive approaches to their special needs

11. Renewed efforts be made to ensure that Governments ratify and domesticate relevant international instruments and mechanisms that protect children from child sexual abuse.

12. Governments especially in Africa should demonstrate greater and more practical commitment to the fight against child sexual abuse by: enacting appropriate legislations, policies, regulations and guidelines providing the necessary resources to ensure effective implementation.

13. Governments to enforce regulatory provisions governing child-care institutions including schools to protect children from sexual abuse.

14. In order to reap and maximize the opportunities and benefits accruing from the available knowledge and resources increased investment be made in:
   √ establishing,
   √ nurturing sustainable and equitable partnerships among and across actors at the global, national and community level.

15. In all efforts to address the problem of child sexual abuse, the overriding focus should be the “best interest of the Child”. 

PART I: PLENARY PRESENTATIONS

OPENING SESSION

DAY ONE: MONDAY 24 SEPTEMBER 2007

Welcome Remarks

Prof. Fredrick Okatcha- Kenyatta University

Conference Chair

Prof. Okatcha explained that though there had been numerous conferences and workshops which had addressed the different issues and concerns pertaining to child abuse and neglect, the present conference was historical in that it was the first ever international conference to be held touching on child sexual abuse.

He outlined the thematic objectives as being:
- To discuss interventions aimed at alleviating child sexual abuse;
- To share experiences and challenges in various countries;

The university don urged participants to take the deliberations seriously and to formulate a plan of action for the various governments to consider for implementation.

He commended the African Network for the Prevention and Protection against Child Abuse and Neglect (ANPPCAN) for the bold steps they made in putting in place the African Charter for ratification by member states.

Prof. Peter Ebigbo,
President, ANPPCAN

A board member of ANPPCAN, Prof. Florence Musiime, made the presentation on behalf of the ANPPCAN President but made a few remarks of her own. The highlights were as follows:

Dr. Musiime decried the overwhelming silence by governments and civil society despite the upsurge in cases of child sexual abuse in the continent. She said that babies had not been spared the horror by those who purported to be supporting them. She noted that it is time for governments in the continent to step up efforts to eradicate the vice as it was fast spiralling out of control.

The ANPPCAN President said that problems confronting the African child were numerous and required a multi-sectoral approach (health, early childhood protection, and interventions/lobbying by civil society, media, governments and the global partners). The issues requiring urgent attention and some of the reasons were given as follows:

- **Child labour**
  Is still rampant despite the government legislation and legal framework;
✓ **The plight of the children in situations of armed conflict.**

The majority of the conflicts are in sub-Saharan Africa. Nairobi is very close to the epicentre of conflicts which poses specific challenges to the population living along the borders. The problem is being tackled within the African Union framework which has instituted a Charter on Children’s Rights. Within the African Union, there is a Committee of Experts to tackle the variegated issues related to rights and health of the child in armed conflict situations. Since 2001 there has been an increase in networking and enhanced operations and interventions but a lot still needs to be done.

✓ **Child trafficking**

The African network system has been taxed by onslaught of HIV/AIDS. Evidence emerging indicates that the age-group of victims of child sexual exploitation especially for commercial purposes is getting younger. This vice is being perpetuated by adults, many of whom are familiar to the children. It is becoming increasingly apparent that women are part of this web of deceit. Africa’s cultures and traditions are rich in child protection, but the same traditions that gave with one hand took with the other. Within the African traditional set-up women and children were given very little room to express their fears and aspirations.

On the global front, legislation for the protection of the child against all forms of sexual exploitation have been slow to evolve. In England legislation aimed at protecting the child against sexual abuse was enacted in the 16th century. It was only until the 17th century that the United States found a father guilty of incest.

The challenge for those championing the cause of the child is to face the problem head-on and to jumpstart interventions and not wait for governments to act. There is an urgent need to re-evaluate our beliefs, thoughts, values and ideas if any progress is to be made.

It was assumed that the problem of child abuse was not rife in the African traditional settings due to the love Africans have for children, however, it is notable that it can actually happen from within families despite the overt expressions. This scenario needs to be addressed and eliminated immediately.

He emphasized that boys were equally at risk and that interventions need to increasingly bring the boy child into focus as actors, put on the lens of child sexual abuse.

✓ **Media**

Children were being confronted with sexual exploitation through pornography and other sexual images very early in life. Although something is being done to address this onslaught, children need assistance to help them tackle the socio-psychological trauma side-effects of this onslaught. The way forward is to devise creative and innovative ways to redress the situation and to think outside the ‘Box’ when addressing the problem and to do so in a children-centred fashion.

The children are crying for help and all citizens of goodwill must take the first step to prevent the abundant child sexual abuse in our continent.
Opening Remarks

Florence Bruce  
*Director, Child Abuse Programme, Oak Foundation, Geneva*

In her remarks she thanked ANPPCAN for organizing such a timely conference on an important subject, as well as, for the warm welcome to Nairobi. She gave a brief outline of Oak Foundation’s work and focus on the issue of Child Sexual Abuse noting the significant progress made globally in breaking the silence around the problem including in her home country Switzerland where new initiatives to respond to the problem are currently in progress.

She informed the conference that Oak Foundation views the problem of Child Sexual Abuse as a cross-cutting issue that manifests itself in multiple contexts, such institutional care, armed conflict, disabled children, among others. It thus, requires multi-sectoral, multi-actor and multi disciplinary interventions that recognize and foster links between research, policy and practice. She highlighted the Foundation’s growing focus on regional programmes such as the one currently being implemented by ANPPCAN in Eastern Africa with support from Oak Foundation.

She concluded by inviting participants to develop and nurture new partnerships based on listening to and working with children to ensure more sustainable, relevant and effective programmes to respond more effectively to the problem of child sexual abuse.

Anthony Kaguara  
*Junior President of the Children’s Parliament of Kenya.*

Anthony Kaguara welcomed all delegates and gave a brief introduction to the Kenya Children’s Parliament which he said was established in 2001 and has since then been involved in advocacy against all forms of crimes against children, in addition, to promoting the participation of children in influencing decisions and processes that relate to their rights.

He gave a brief highlight of the deliberations during the children’s pre-conference noting, especially high level of learning registered during the children’s conference as well as the important recommendations by children that would be presented to the adult conference. Focusing on the state of Africa’s children Mr. Kaguara challenged delegates on the need for a more balanced portrayal of the situation of children in Africa reflecting not only the negative, but also the positive dimensions of their situation as well as the significant progress being made in empowering children and making the continent a better place for children.

He appealed, through the Vice-President to the Government of Kenya to financially support the work of the Children’s Parliament. He extended a similar appeal to all the delegates to support the work of similar child-led organizations in their respective countries.
He concluded by beseeching the delegates to ensure that all through their deliberations during the conference, the best interests of the child be kept paramount.

**Hon. Lady Justice Joyce Aluoch**

*Head, Family Division of High Court & Chairperson of the Task Force on Sexual Offences Act, 2006 and a Committee member of CRC, Geneva.*

In her opening remarks, Lady Justice Joyce Aluoch congratulated ANPPCAN for bringing together African legal experts which culminated in the African Charter on the Rights and Welfare of the Child. She identified the two pieces of legislation namely:

- African Charter and said that Africa was the only continent with such a charter.
- Global Convention on the rights of the child.

Both the regional and global initiatives have committees responsible for the implementation of the conventions. It is their responsibility to put in place practices and procedures and guidelines for actual reporting and filing of complaints.

She explained that both committees had similar provisions related to the issue of child sexual abuse. Article 17 of the African Charter and Article 34 of the UN Global Convention both call upon Nation States to take up measures to prevent continued coercion of sexual activity, exploitation and pornographic literature. Lady Justice Aluoch said that reports from Member States on child sexual abuse were not detailed enough. The African committee had not started receiving state reports for their due consideration.

The reports submitted to the CRC lack detail and data making it difficult to determine the magnitude and extent of child sexual abuse on the continent. She said that interventions should start at national level. Lady Justice Aluoch outlined some of the steps that Kenya had taken in response to the menace, which include:

- Two (2) Acts pertaining to children; namely the Children Act, 2001, where the definition of child is stipulated from the outset and the Sexual Offences Act, 2006, which contains extensive provisions on the issues of child sexual abuse. The latter Act brings sexual offences together into one piece of legislation and creates many ‘new’ offences such as gang rape, collusion by one or more for purposes of sexual abuse, child trafficking or to deliberately take a child for sexual purposes. The Comprehensive Act also captures new trends such as HIV/AIDS and deems deliberate transmission of HIV/AIDS to be an offence.

  - There are childrens’ courts to handle legal issues such as discipline, jurisdiction exercises, such as adoption, parental responsibility;
  - A three-digit [116], toll free line for children in distress to call and receive assistance from counselors, psychologists and other experts who can respond to the cries of a child is being introduced to make a difference;
Justice Aluoch observed that there must be appropriate legal structures in place to implement and preserve the rights and welfare of the child.

She explained that the Act further introduces and clearly spells out the **minimum sentences** for defilement;

- for anyone who commits this offence to a child below the age of 11 years, the minimum sentence is **life imprisonment**;
- those who sexually abuse a child aged between 12 to 15 years, face a sentence of **20 years**;
- for a child between the ages of 16 to 18 years, the law provides for a minimum sentence of **15 years**.

The High Court Judge said that Section 40 of the Act outlawed the withdrawal of sexual offences by parents/guardians in collusion with the offender. The legal provision gives the Attorney-General the sole prerogative to withdraw such cases. She noted that a Task Force, which she chaired, had been established whose responsibility it was to ensure the implementation of the Sexual Offences Act, 2006 and said that Judges and Magistrates should train themselves on the issues related to the vice and legal provisions thereto.

Finally, Lady Justice Aluoch called upon the delegates to agitate for the ratification of the African Charter in their respective countries. She decried the inexplicable low ratification status of the African Charter by member states, with less than 40 of the 53 member states having ratified this important Charter.

**Key Note Address by Dr. Abiola L. Tilley-Gyado**

*Director, Strategic Framework for Africa, Plan International*

At the onset of her key note address Dr. Abiola sounded a terse warning to all those who championed the cause of children with “NO MORE EXCUSES!”

She said that there was need for the key actors in children’s rights to eliminate the cruel epidemic of child sexual abuse in Africa if there was commitment to actualizing the thematic objectives of the conference namely to:

- identify the causes, nature and magnitude of child sexual abuse;
- create a forum to deal with sexual violence against children; and
- provide an opportunity to share information and experiences with a view to enhancing partnership and networking.

Dr. Abiola reiterated that Plan International (PI) had zero tolerance on all forms of violation against the rights of children, particularly sexual crimes against children in whatever form. She said PI had 70 years of experience working with children, families and communities and 30 years of active intervention in Africa where PI has an annual budget of $200m for programmes and activities touching on the life and well-being of children in Africa.
Dr. Abiola observed that child sexual abuse is a universal phenomenon which does not discriminate social strata, age, race, sex or creed. It is often about power relations, where the more vulnerable party is subjugated to the whims of the ‘lord’. Seemingly respective members of society begin to share the same nefarious behaviour as vagabonds and common criminals.

The PI representative said that Africa was a continent of youth where 50% of the population of 924m people constitute youth. The future of the continent is dependent upon this population whose energies, if properly harnessed, can propel the continent to greater heights of prosperity. She lamented that the future of Africa was, however, jeopardized by the overwhelming epidemic of child sexual exploitation.

She said it was unacceptable that 45% of the children reported to have been abused had been sexually abused and that in one community 49% of sexually active primary school girls have reported that they had been coerced into having sex and urged child welfare organizations to combat head-on the grim reality that in some communities 32% of girls and 15% boys reporting sexual molestation by their teachers.

Dr. Abiola decried the tendency by adult combatants in war zones; peace-keeping forces, in refugee camps or teachers and coaches to convert young girls into ‘comfort pillows’, ‘bush allowances’ and ‘sex slaves.’ She said that it was inadmissible that such acts were being committed with impunity most often by care-givers at home, schools and the community and attributed the gross under-reporting of such cases to intimidation of the children by the perpetrators of the crime, loss of case files and monetary compensation given to families to silence the cases. She described this as a double jeopardy for the victims, who in turn became open to further abuse due to their enhanced vulnerability as a result.

Dr. Abiola expressed her disgust that those with economic power were able to continue unabated, while the rest of the world appeared to have been sworn to silence and inaction in an intricate web of deceit. She not that there were an unprecedented number of underage girls who from Africa, Asia or Eastern Europe whose dignity was being sacrificed on the altar of sex slavery and prostitution and failed to comprehend the apparent power of the network of perpetrators, which overwhelmed even Interpol and immigration officials.

Dr. Abiola argued that it was easier for potential abusers to come into Kenya, pay the visa charges without any problems than for African researchers to offer something useful to the country. She called for the facilitation of free movement within and between African states for networking and sharing best domesticated practices.

According to Dr. Abiola, evidence points to the fact that parents were encouraging their young to sell sex for survival. She argued that it was inconceivable that 13 to 16 year olds have to survive on sex and posed the question of whether it was poverty or the lack of value system.

Dr. Abiola said there was a robust body of evidence that indicated that child sexual abuse led to impaired physical, psychological, cognitive and social development. She said that it was time that we all put a stop to the crimes being meted out against children. She urged African governments to investigate the upsurge of international adoptions on the continent and put in place follow-up mechanisms to ensure the safety of the children.
She said she found it impossible to comprehend how a 60 to 70 year old man could even imagine himself being a suitable mate to a 13 year old. Another baffling trend was incest between children and their natural parents. In the hiring of domestic help, she observed, it is incumbent upon parents to be more diligent.

Despite the fact that several countries on the continent had committed themselves to the various charters and conventions concerned with the welfare of the child, they were silently condoning the continued sexual abuse and exploitation of children by their reticence and inaction.

She called for an across-the-board equilibrium of interests and harmonization of definitions such as that of ‘child’ to avoid third party interpretation for egotistical reasons. To facilitate the protection of the child, she said that every child under the age of 18 (the universal definition of child) should be registered. She further challenged traditionalists, religious leaders, practitioners and parliamentarians to work in partnerships and speak boldly with one voice against this scourge. She castigated the law enforcement agencies for their failure to close the legal ‘nets’ through which perpetrators continued to fall through.

Dr. Abiola posited that those who justified child abuse by hiding under the cloak of tradition and culture had mis-applied the African cultural practices and norms. She called for increased research on the grey areas between culture and abuse to shed light on our misconceptions of traditional practices. Old menopausal men had justified their marriage to children by turning the wrong page in the book of traditional practices.

She said it was also time to demystify certain myths touching on the health and safety of the child, such as, that sex with a virgin can cure HIV and AIDS. On the contrary sex with a virgin fuels HIV and AIDS, she cautioned in her address.

Dr. Abiola challenged researchers of all strands to constructively engage the perpetrators in order to comprehend their mind set and so help them in turn reduce the vulnerability of the young children. They must also seek to understand the impact on the break-up of the family unit, urbanization and the concomitant socio-cultural mutation and its impact on the African value system, beliefs and practices.

Child sexual crimes are too important to be handled by one concerned party and efforts toward eradicating the vice must be through strategic partnerships and alliances in order to establish and identify the child sexual abuse pull-factors, she underscored. As such, Interventions must be genuine, children-centered and children-directed with their full involvement to adopt a felt needs approach and to empower them for their own defence.

Appropriate and adequate legal and support systems and structures must be in place so that those who commit crimes against the children, must face the full force of law and for children who fall prey, to find a social, psychological and medical safe haven to heal in their own time and at their own pace.
Official Opening Remarks

Ambassador Nancy Kirui
Permanent Secretary, Office of the Vice-President and Ministry of Home Affairs

In inviting the Vice-President to officially open the conference, the Permanent Secretary highlighted the magnitude of child abuse cases in Kenya. She said that every year since 2004:
• about 900 cases of child sexual abuse were reported at the District Children’s offices;
• 2,600 child sexual abuses cases were reported to police stations country wide;
• Most of the more than 10,000 cases of child sexual abuse annually go unreported;
She enumerated some of the challenges facing the Ministry of Home Affairs in its efforts to address the menace;
• Lack of enforcement of existing legal provisions to protect children;
• Conspiracy of silence and ignorance within communities on child sexual abuse cases;
• Poor communication and transportation systems for rescuing children, especially from rural areas; and
• Inadequate institutional systems to provide support to victims.

She cited the following measures that the Ministry of Home Affairs had taken to address and attempt to eliminate the problem of child sexual abuse:

• Regulations for charitable children institutions to safeguard children in institutional care;
• Adoption regulations;
• Child participation guidelines;
• Advisory guidelines for children welfare at grass root level;
• National Steering Committee on anti-child-trafficking;
• 115 children’s courts;
• Child protection units in 14 police stations throughout the country;
• Multi-sectoral committees to address the epidemic.

Official Opening Remarks By His Excellency Dr. A.A. Moody Awori, EGH, MP, Vice-President and Minister for Home Affairs of the Republic of Kenya.

In his official opening remarks, the Vice President highlighted a major disconnect between the great value that is attached to children in African communities and the fact that the same communities were the major perpetrators of abuse against children. He noted the various changes in the socio-cultural and economic dynamics of society that are exacerbating the vulnerability of children to abuse, such as, unemployment, poverty, HIV/AIDS, drugs/ substance abuse as well as cultural practices, such as, child marriage and traditional forms of resolving cases of child sexual abuse that do not conform with acceptable legal provisions.
He acknowledged the growing magnitude of the problem of child sexual abuse in Kenya noting in particular the decay and degeneration in society’s social fabric that renders children vulnerable to abuse by the people they know and that are supposed to protect them.

While recognizing the significant progress made in enacting legislation to address the problem of Child Sexual Abuse, Hon. Awori underscored the need for more concerted efforts by various stakeholders to operationalise systems, structures and direct interventions that protect children and target the abusers rather than criminalize child survivors and subjecting them to secondary victimization.

He outlined the progress made by the government of Kenya in domesticating the major international instruments to protect children from sexual abuse, as well as, the establishment of structures for protecting children. These among others, include; the National Steering Committee on Anti-trafficking in persons, the National Council for Children’s services and the Code of conduct for hotel owners at the Coastal region to promote responsible tourism.

Other measures include; ongoing efforts to amend the Children’s Act, the drafting of a Bill on anti-trafficking in persons, as well as, the establishment of networks for reporting, monitoring and law enforcement. In recognition of the link between poverty and vulnerability of child sexual abuse the government is implementing a cash transfer scheme to vulnerable households in 37 districts.

The Vice-President also highlighted government’s efforts to monitor tourists and work with collaborate with sister governments to support responsible tourism as well as efforts to regulate adoption and protect children from being trafficked through the adoption process.

In conclusion, he said he appreciated the multiple challenges, as well as, the complexity associated with protecting children from sexual abuse, which in the case of Kenya, include the absence of inadequate rescue facilities. He, however, re-iterated the government’s firm resolve and commitment to the sustained protection and promotion of the rights and safety of children. He then declared the conference officially open.
PRESENTATIONS

An Overview of Child Sexual Abuse

Global Overview of Child Sexual Abuse:
By Prof. Carol A. Plummer – School of Social Work, Louisiana State University, USA.

Prof. Plummer introduced her presentation by illustrating the conceptual linkage between society/the world-which is big and children who are small - demonstrating the mutually re-enforcing utility of both macro-interventions at the global level, as well as, the micro-interventions at community level.

Using case studies in various contexts, she explored a number of issues/factors that define the nature, magnitude and complexity of the problem of child sexual abuse globally. These among others include: intra-familial abuse, involvement of children in pornography, which translates into other forms of abuse, such as child trafficking, disaster situations which increase children’s vulnerability to sexual abuse, cultural practices, such as genital cutting also pre-dispose children to early marriage, gender-based abuse, inter-country adoption, the phenomena of homeless/street children and that of children raising children all of which make children more vulnerable to abuse. She particularly, invited participants to reflect on the strong correlation between poverty and child sexual abuse.

She highlighted the global magnitude of the problem of child sexual abuse (20% of females and 6-10% of males report having been sexually abused according to WHO 2002). Yet even these statistics represent a great under-estimation given the gross underreporting and the ever changing nature of child sexual abuse.

On a positive note, she recognized the considerable efforts being made at the UN level to respond to the problem through the adoption and enforcement of global legal instruments and other special mechanisms. Other evidence of positive trends, include the increasing public awareness, focus on and targeting of key power holders over children, such as teachers, baby sitters, religious leaders, who abuse their power to sexually molest children. The increasing restrictions on inter-country adoption, the creation of laws and policies to protect children, increasing international cooperation and communication about child sexual abuse, as well as, increased action oriented research were also noted as major positive steps in reducing the vulnerability of children to sexual abuse.

In spite of the significant progress registered, children continue to be abused on alarming scales, with increasing severity and in mutating forms. In addition, in many countries the issue of child sexual abuse has not attracted the commitment it deserves, especially in term of funding.
She challenged delegates not only to focus on what “we stand against” but also “what we stand for” by, among other things: increasing support for all varieties of families, promoting non-violent relationships, nurturing and positively modeling children, increasing access to education and healthcare, promoting positive sexual education for children and strengthening families and empowering communities.

She outlined a set of recommendations for effective intervention. These include:

- Scaling up bottom up interventions as opposed to waiting on governments or big organizations
- Systematic application of the available information (connecting the dots) to increase access to support and services.
- Increased and focused research in gray or uncovered areas
- Informed and balanced education to children about sex and sexuality that does not frighten children about sex
- Re-consideration of the efficacy of punitive responses
- A more culturally sensitive and contextually appropriate approach to intervention
- A focus on prevention as a priority
- More thorough assessments

She concluded by inviting participants to take home small stone as an enduring reminder of their individual responsibility and commitment to contribute in their modest individual ways to the enormous global challenge of responding and reversing the global menace of child sexual abuse.

**Different Forms of Interventions in Child Sexual Abuse**

*Child Sexual Abuse: A case Study of Nairobi Women’s Hospital – Gender Violence Recovery Centre (GVRC)*.

**By Dr. Sam Thenya,**

*Executive Director, Gender Violence Recovery Centre (GVRC), Nairobi Women’s Hospital, Nairobi Kenya.*

In his interventions, Dr. Sam Thenya, the Executive Director of the Gender Violence Recovery Centre (GVRC) at the Nairobi Women’s Hospital, gave various highlights on the significance of proper medical management administered to all cases of Child Sexual Abuse. Stating that media and scientific reports portrayed an upward trend in sexual abuse, the doctor acknowledged the role played by his medical counterparts, as well as the legal and church personnel to fight the vice and support the victims.

Citing various scientific, medical reports, statistics and various case studies, Dr. Thenya explained that since its launch in March 2001 to date, the GVRC has provided specialized medical and psychosocial treatment to survivors of domestic violence and sexual abuse. From his research findings and actual very sad cases
attended to, the majority of the sexually abused victims are mainly women and children, though occasionally a few men are also brought in for care (cf. case studies and tables).

Dr. Thenya decried the extreme trauma which survivors undergo, citing some of the actual effects as: severe physical injuries; infections; chronic ill health of the rectal and vaginal parts; unwanted pregnancies; infertility; rape trauma syndrome and Post Traumatic Stress Disorders; disturbed sleep nightmares, regressive behaviours; denial; anxiety and suicidal thoughts and spiritual dilemma, among others.

To achieve their goal of offering free and timely medical treatment to all survivors of various forms of sexual abuse, Dr. Thenya and members of his GVRC team have developed a framework comprising a monitoring and evaluation toolkit containing both closed and open-ended questions exploring parameters on physical and sexual abuse, and other relevant data, such as referrals is used. Through their Gender Violence Monitoring Unit (GVMU), an electronic data management system has been developed for purposes of data entry and storage for cases of GBV that report to the centre.

To successfully offer the necessary assistance to sexually abused children and other persons in society, the GVRC also gives comprehensive medical examination and care; does laboratory tests and treats for the infections such as HIV tests, HVS, hepatitis B, PDT, sexually transmitted infections, urinalysis, haemogram, liver function & kidney function tests among others.

Other activities carried out by the GVRC include radiological investigations; hospitalization and accommodation to survivors; access to ECs, PEP, antibiotics; preservation of evidence; provision of expert testimonies in courts; professional counseling; support group sessions and provision of information and referrals for long term shelters and legal aid to survivors.

In addition, the GVRC publicizes its activities to the stakeholders through the media and dissemination of information pamphlets. It also offers training and capacity building to health workers in other health facilities. Thus, reaching out to all, the program has achieved a lot in terms of advocacy against and treatment of child sexual abuse, even as it also cares for adults, particularly women, hence the name, Nairobi Women’s Hospital, where GVRC offers its support. For instance, from April 2002 to June 2007, GVRC treated 6629 survivors of sexual abuse where out of these, 41% were children survivors of sexual abuse. Of the 6629 HIV blood samples taken for testing, 105 (1.5%) survivors of sexual assault tested HIV positive, and were referred for care and support to the relevant organizations/partners.

In conclusion, Dr. Thenya called on all and sundry to actively participate in the elimination, prevention and cure of sexually abused victims, without leaving the entire responsibility to the medical, media, religious and government officers.

**Psychological Interventions: The experience of Nairobi Women’s Hospital – Gender Violence Recovery Centre (GVRC).**

By Lucy W. Kiama, Programs Manager, Gender Violence Recovery Centre (GVRC), Nairobi Women’s Hospital, Nairobi Kenya.

As the programs manager of the Nairobi Women’s Hospital’s Gender Violence Recovery Centre (GVRC), Ms Lucy Kiama expressed grave concern that so many millions of people,
in Kenya and abroad, are deeply affected by the sexual abuse of children. Citing various references and real life case studies (cf: main presentation, literature, case studies and tables) in her interventions, she said that the worst part of the scenario is that the victims are at increased risk of being abused again by the perpetrators, who, if left to go Scot-free, might repeat the same crime over and over again to the same or other victim.

Ms Kiama presented a variety of causes that possibly drive the perpetrators to commit the sexual offences. Among the most common are: family dynamics; history of abuse or maltreatment; poverty; helplessness; the myth of HIV/AIDS versus virginity belief; social cultural factors; previous abuse of the abuser; alcohol/substance abuse; increased crime and insecurity; internet and other negative media influence as well as unmet expectations and/or frustrations of the abusers.

Surprisingly, her April 2005- June 2007 findings clearly indicated a sad pattern: that the people the victims are supposed to rely on for security (mainly relatives or workers) are the very perpetrators of child sexual abuse. She presented the statistics as follows: 56% (2351) of the survivors reported that their perpetrators were people known to them; 33% (1825) survivors reported that their perpetrators were unknown to them; 1% (22) of the survivors did not indicate whether they knew the perpetrator or the data was missed, and 40% of sexual abuse cases involved gang rape with up to 11 men in a single act.

She also noted that while child sexual assault may be opportunistic or planned, it was usually reported to have taken place between 6pm and midnight, and hence the need for possible victims to take great caution at these times. In the event of victimisation, Ms Kiama welcomed all, the victims and their caretakers, to seek help from the GVRC, whose main goal is to bring emotional and psychological healing to children, as well as women and men survivors of sexual abuse. She said that the objective of GVRC is to help the sexually abused children deal with trauma as effectively as possible as well as adhere to the PEP medicine, especially the ARVs.

In addition, she said that the GVRC methodology also provides personal and group counseling for both victims and their family members; does follow-up sessions and gives referrals where necessary for psychiatric, legal, and temporary shelter.

According to Ms Kiama, other than physical and medical treatments, GVRC guides victims through various therapies which are very effective in helping the victims on their way to quick recovery. These therapies include play therapy, where the child freely expresses its emotions, and is able to come to terms with any hurts, quickly building his/her self esteem; creative therapy where creative arts such as dance, drama, music, painting and poetry are used to help the victims explore their inner emotions and thoughts through expression, and, finally, narrative therapy. Narrative therapy is used with children experiencing feelings of grief/loss, self-hate and guilt, abuse sufferers and is used widely to address family problems.

In essence, Ms Kiama stated that the most important outcome of the GVRC project is that since, April 2004 to June 2007, GVRC has provided counselling services to: 3586 survivors rape; 1707 defilement cases; 226 sodomy cases and to over 60 referrals. GVC also works closely with established. Centres such as FIDA, CREA, COVAW CRADLE, and CLAN to provide legal aid advice protecting women and children’s rights, and with the Women’s
Right Awareness Programme (WRAP) to provide shelter, relocation and re-integration to the survivors.

In addition, GVRC has also partnered with WILDAF to lobby for the Sexual Offences bill which is now an Act. It also offers training to health workers, police, CBO’s and other interested parties on management of rape and PEP treatment in Coast region, Rift Valley and Western provinces. GVRC has also produced training manuals on Child protection, Rape Management, Trauma counseling and Child counselors, among others.

To achieve their goals and objective, Ms Kiama said that GVRC Counsellors, while assisting their victims on their way to recovery, face a number of challenges, for which she requested assistance in their solutions. Among them are that counselors sometimes suffered various traumatizations and burn out. The number of children reported abused sexually keep increasing instead of declining; inadequacy of space at the GVRC, lack of adequate human as well as financial Resources.

In conclusion, Ms Kiama pointed out that the GVRC has significantly contributed to improvement of health and wellbeing of children survivors of sexual assault, and in particular, in the development of National guidelines for management of sexual abuse.

Finally, she recommended that all Kenyans, and all people of goodwill, be educated about the problem of child sexual assault so that the problem can be reduced by being properly and seriously addressed. She also added that medical and psychosocial services to sexually abused children be scaled up and integrated with other health services and training institutes.

Innovative Community-Based Approaches to Combat Child trafficking and Sexual Abuse in Sierra Leone

By Dr. Saskia M.A.A. Brand, Deputy Regional Manager, Circle Project, Winrock International, Mali.

CIRCLE is an acronym which stands for Community based Innovations to Reduce Child Labor through Education, explained Dr. Saskia Brand in her presentation. She added that CIRCLE was launched to address, among other issues, violence-related consequences experienced by IDPs in Sierra Leone during the War.

Citing from various sources, Dr Saskia presented the following figures to show the gravity of sexual assault among IDPs: 9% of women and girls suffered sexual assault; another 9% endured non-war related sexual abuse; 1% suffered both; average age of the victims was 15 years; average number of attackers was 3.2; up to 70% of young girls within the age bracket of 10-15 had unprotected sexual affairs with multiple partners, especially with LURD soldiers, who usually taunted them: “I fired for it, you lie down for it”.

Dr Saskia Brand  Dr Saskia expressed great concern that, having noted that children are at great risk of being trafficked, her CIRCLE CBI developed Vocational Skills Training programmes to bring the children on board. Here, the children get protection since they are able to actively involve themselves in learning certain trades; business training; engaging in start-up kit and monitoring; participating in gender specific
services like day-care and foster-care for distant students. Counseling & life skills, as well as peace & civic education forms a major course in the children’s training.

Students from the Special Needs School are provided with medical care & school meals. Non Formal Education is also provided, though the ratio of students to the community teachers (25:1) is so diverse. In collaboration with the DEO & local authorities, and through participation of parents & community members in the CIRCLE programs, counseling & life skills are learned, extra curricular activities engaged in, and intensive monitoring carried out to uphold safety of the children.

Dr. Saskia added that, in collaboration with CARD’s peer educators, the following activities have born very good fruit: 300 students are enrolled or have graduated and are doing well; community members are informed and actively creating a better future for their youth; parents, children and chiefs in 2 districts are vigilant of child trafficking; border patrols have been improved; local and district authorities are active against child trafficking and labor. Indeed, the “war-mothers” are proud of their business, says Dr Saskia.

She cited the following as key factors in the success of CIRCLE initiatives: a holistic approach in training and counseling; stakeholder participation; long standing presence of the NGOs in the area, qualified staff available during the entire project duration; Collaboration with local and district authorities. These efforts have led to ownership and sustainability of programs.

Like in all programs, which are aimed at educating the youth, various challenges sometimes go hand in hand with achievements. The following are therefore the main challenges, which CIRCLE has had to face in the implementation of its programmes, within Winrock: problems beyond the scope and means of national NGOs; lack of proper school infrastructure; the general ignorance of the population of the risks of child trafficking; low literacy levels; difficult access to the remote areas; permeability of the border and lack of viable economic alternatives to child trafficking and labour.

In her recommendations, Dr. Saskia called for the multiplication of efforts without loss of stakeholder participation, states that more emphasis be given to the prevention of child abuse, and education be made compulsory to all school going children. In addition, she called for increased capacity of police and border patrol as well as greater collaboration between government, NGOs, donor and UN agencies.

In her conclusion, Dr Saskia suggested that in future efforts, the treatment and rehabilitation of sexually assaulted women and children should be part of the program.
DAY TWO: TUESDAY 25 SEPTEMBER 2007

The Role of Policy and Legislation in the Fight against Child Sexual Abuse

The use of child abuse registers to enhance child protection: the South African experience

By Prof. Julia Sloth-Nielsen, Senior Professor and Specialist in Children’s Rights Law University of the Western Cape, South Africa.

In her introductory remarks, Prof. Julia Sloth-Nielsen outlined the tenets of the South African Children’s Act 38 of 2005 which has been 10 years in the making and which was partly promulgated on 1 July 2007. Explaining that the Act contained 18 chapters, Prof. Nielsen elaborated that the chapters covered a vast array of parental and child rights and responsibilities, protective provisions, new provisions to expand the functions of the children’s courts and expand the greatly legal provisions on the alternative care system.

The Professor stated that already in operation is Chapter 7 part 2 of the Act passed in 2005, establishing the National Child Protection Register. This setup was a welcome initiative, joining those already initially set up in large cities in the US in the 1960’s.

It was quickly recognized that these registers could serve as database to prevent abusers working with people. Reports building profiles of family histories also aided social work investigations and assessment of level of risk to the child. Hence both substantiated and unsubstantiated reports would be included to aid CPS decision-making.

In elaboration, Professor Nielsen added that the database would also point out to where CSA services were required, and what fiscal support they required. However, she said that today there’s a wide variance in how registers are structured, who can get access, and what information is maintained. She added that registers are just one tool in CPS strategy – close link to reporting requirements.

In reference to South Africa, the Prof said that a key area of concern, in as far as registers are concerned, are constitutional issues (infringement of rights). To understand the history of child abuse registration in that country therefore, the following questions need to be answered:

- What standard of proof is required for inclusion of names of perpetrators?
  Initial reports? Unsubstantiated?
- Is any constitutional infringement before substantiation justifiable?
- To what use is information put, and who may have access?
  Permissive access vs mandatory access; which agencies/facilities/employers may [or must ] access?
- Question of removal of names: should it be possible, to comply with constitutional rules about proportionality (situation in the USA- once name on, v difficult to remove, especially if substantiated)
- Disclosure of identity of ‘reporter’ (who also has privacy rights)?
Specifically, Professor Nielson outlined the following backdrop as the Background to South Africa’s Register. Historically, she said that the concept was introduced in amendments to the existing regulations to the Child Care Act (74 of 1983) in 1998. It provided for information to be captured from: criminal court convictions; children’s court findings; and received reports of child abuse and neglect (reporting being required it s 42(1) of that Act). However, it only got off the ground in 2006, but now, (2007) it has 18000 names and details.

It is worth noting that in the concept, both child and perpetrator details are provided for. Regulations are a bit thin to serve as proper buffer against constitutional attack –e.g. no appeal, no provision for erroneous inclusion, wide discretion to HOD permitting him/her to disclose. Therefore, there are new provisions in the Children’s Act 38 of 2005, giving a two-part register: ‘child part’ and ‘perpetrator part’.

In the first, Child part,

- S 114 clarifies that the following will be recorded:
  - Criminal convictions on charges involving child abuse and neglect.
  - Finding by a children’s court that a child is in need of care because of abuse and neglect.

- S 105 Report of child abuse and neglect:
  - only reports of ‘deliberate’ abuse and neglect will be recorded in register (in context of poverty, HIV and AIDS):
  - amendment bill (s 110) sets out lengthy list of required reporters (chiefly health, education and social welfare professionals obligated to report).

- S 115 Disclosure only in the best interests of the child:
  - access limited to listed person whose function is to investigate and follow up abuse and neglect
  - Even researchers access circumscribed

In the above sections, it is clear that the purpose of disclosure is only for protecting, safety and well-being of the child, or investigating the report (s 116) and the protection of the child’s privacy rights, as well finding who the alleged perpetrator is.

Another purpose is the provision to find out if names (perpetrator and child) are on the register, and reasons for inclusion be given. Here there is, however, no indication as to whether the identity of the reporter will be revealed nor is there intention to expunge record (e.g. when child becomes adult).

In the second, perpetrator part,

- A perpetrator is defined as: ‘persons found unsuitable to work with children’.
- There is a new section intended to cover the employment issues separately.
- There are many more provisions, since there is greater intrusion into constitutionally protected rights (e.g. right to work), and need to cast wide protection for children from sexual predators and serial abusers.

The Professor explained that the findings on Children’s protection from the perpetrators are made by the Children’s court; any other court (civil and criminal) and any forum established in disciplinary proceedings. She was categorical that in the above courts, there was no finding of guilt required – expressly stated. Indeed, it could even follow an acquittal (e.g. child witnesses to young to testify properly).
She also presented criteria for making an ‘unsuitability’ finding. These included:

- Regulations: evidence showing on a balance of probabilities that perpetrators caused, participated in or colluded in abuse and neglect (or previously did so) or convicted of long list of offences which suggest unsuitability; including conviction in a foreign court.
- Court may make finding on own accord, or by application (very wide locus standi to apply: e.g. any person having an interest in the protection of children).
- Process does not have to be in the course of proceedings – could be entirely separate application.
- Unlike some US laws, ‘perpetrator’ not confined to parents, foster parents, persons having the care of a child.

Having been proved guilty, Prof. Nielsen presented a number of consequences which perpetrators, potential employers, prospective employers and convicted persons faced.

- **Perpetrator consequences:**
  - May not manage, operate or work in institutions providing welfare services to children in prohibited settings (including even clubs and associations) and irrespective whether an employee or a volunteer.
  - Police who working in child protection, any employee in the public services working with children (e.g. schools), or for local government authorities where access to children possible also included.

- **Consequences for potential employers in those mentioned settings:**
  - May not allow a person whose name is on Part B to be employed in a position where access to children is possible (violation = criminal offence, except clubs and associations).
  - Covers all staff with access.

- **Consequences for Prospective employers**
  - S 126 – prospective employers seeking to appoint must first make an enquiry whether that persons name is contained in Part B (onerous screening requirement!)

- **Consequences for Persons convicted in the last five years:**
  - S126(2) automatic retrospective provision for all convicted of specified criminal offences within last 5 years – employers have 12 months to ascertain whether anyone they employ currently gets ‘uploaded: and seems cannot delegate this task.

In her final submissions, Prof. Nielsen gave an assessment of the CPS’ contribution to the Register, explaining that it was tailor made to eliminate some problematic aspects abroad, such as residence requirements and notification that the name appears online. However, she cautioned that the system could be overwhelmed with employer screenings and inquiries. Constitutional problems could creep in. In addition, courts may be reluctant to make unsuitability findings unless absolutely beyond all doubt.

There could also be an overlap with proposed sex offender register being provided for in the draft Sexual Offences Bill: but different criteria for inclusion there, and held by Department of Justice. And, finally, there is the risk of disclosure – advertent or inadvertent, some of these being hackers and viruses.
Making everybody accountable: two approaches used in the United States

By Prof. Sheryl Buske, De Paul University College of Law and Erin Doyle M.S. candidate, De Paul University.

Prof. Buske gave a historical overview of the problem of sexual abuse in the US. She explained that it was as late as the 1970s that sexual abuse was recognized as a distinct form of child sexual abuse in the US. It was fast becoming apparent that legislative and other provisions made to address other forms of physical offences meted out against children were not applicable to child sexual abuse. The need for alternative prevention measures was therefore deemed necessary.

The new legislative provisions acknowledged the fact of a continuum of deterrents which required to be accommodated.

The Law Professor identified two legislative provisions namely Mandated Reporters Acts and Sexual Offenders Registration Acts.

She explained that the Mandated Reporters Act brought together pieces of legislation running up to 20 years old, and imposed statutory obligations on those with:

a) unique access to children; and
b) those with individual knowledge of children and so who would be able to have an early detection of any behavioural changes.

One category of those considered as falling within this bracket include teachers, doctors, and therapists. The other category includes professionals who must be licensed - bringing on board physicians, funeral directors and nail technicians.

By bringing on board professionals who must be licensed the legal provision creates a mechanism for enforceability. Those subsequently who fail to report as mandated by law have a two-pronged penalization through both the likelihood of having their licenses revoked and being charged with a criminal offence.

In essence the license creates a mechanism of enforceability, the university don said. In the event of child sexual abuse, doctor-patient privilege does not apply.

She enumerated the challenges in the implementation of the Act. The differentiated standards of application of the definition of terms such as ‘substantial’ and/or ‘credible’ evidence have led to inconsistency in clarity of reporting responsibility. This ambiguity has left some of the clauses open to third party interpretation and abuse.

Another challenge is the need to address the relevance of these Acts to other countries.

Those enacting the provisions need to remove the obstacles hampering the formulation of the statutory obligations. The statutes need to be domesticated to suit the situational realities of the country within which they are to be operationalised.

On the Sexual Offences Registers: she explained that it was an important instrument to enhance awareness in the US.

Among the major challenges are that juvenile offenders are not be registered, it provides the criminal history of offenders only in states where they committed the offence and offenders
have tended as a result, to cross the borders where they can move around undetected. Crime is defined variously in the different states of the US and cannot be applied across board.

To limit the chances of a mandated reporter failing to report on suspicion that they could be wrong, and thus fearing criminal ramifications, there is no liability if it was done in good faith (bona fide) even if they are wrong, unless it is established beyond reasonable doubt that there was mens rea (malice aforethought). Special emphasis is being placed on ensuring that persons selected are those who have been adequately and appropriately trained to assess what they see in children.

She explained that the charging of juveniles in the US was controversial in that one could be charged as a juvenile but convicted as an adult.

In response to a question on the recruitment of 17 year olds by the US Military, she explained that this is done with prior parental consent which such consent is assumed to be in the best interests of the child.

A mother is not a mandated reporter, however a licensed foster parent automatically becomes a mandated reporter.

The Role of Policy and Legislation in the fight against Child Sexual Abuse: A case of Kenya.

By Mr. Ahmed Hussein, Director of Children’s Services, Office of the Vice-President and Minister for Home Affairs, Kenya.

Mr. Hussein started his presentation by acknowledging the importance of partnership between government and civil society in promoting child protection as illustrated by vibrant and complementary partnership that exists between ANPPCAN and other children’s NGOs in Kenya and the Department of Children’s Services. He encouraged all NGOs present to nurture and foster such collaborative partnerships to improve service provision for children.

He highlighted the magnitude of child sexual abuse in Kenya showing a high prevalence rate where 2501 cases were reported to police in 2004/2005, notwithstanding, the fact that most of the cases go unreported. He also shared the highlights of a GoK/UNICEF study on commercial sexual exploitation of children, which among others, indicted that 40% of the adults involved were locals, 60%% foreigners and that parents and guardians were involved in encouraging the practice. He noted the continuing challenge posed by cultural practices that condone and promote sexual abuse against children.

He outlined the policy and legislative responses by the Government of Kenya to the problem of child sexual abuse, which included the following:

- Ratification and domestication of International Instruments namely the Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child, the Optional Protocol to the UNCRC on the sale of Children, The Parlemo Protocol and The Hague Convention on Inter-country Adoption,
• Enactment of legislations, regulations, rules and guidelines. These include; the children’s Act 2001 which is under review, the Sexual Offences Act 2006, the Penal Code (revised) the Evidence Act and the Adoption regulations. Charitable Children’s Organizations regulations (2005), Foster children’s rules, child participation guidelines, Area advisory council guidelines.

• Adoption of policies and codes of conduct including: Early Childhood Development Policy, Education Policy, National Plan of Action, National Policy on Orphans and Vulnerable Children, National Children’s Policy (draft), Code of Conduct and Regulations for teachers as well as a Code of Conduct for hoteliers.

• Establishment of organs and structures such as the National Steering Committee on the UNCRC and ACRWC, National Steering Committee on orphans and other vulnerable children, National Adoption Committee.

• Other capacity building interventions include: the training of the police, magistrates, childrens’ officers, hoteliers and the development of advisory council training manuals.

The Director outlined the major outcomes of these policy and legislative initiatives which include the formation of the National Council for Children’s Services. This is a policy-making body composed of key actors in the area of children’s rights. The Council makes policies and decisions that are then implemented by government departments. Other positive outcomes include the formation of area Advisory Councils at grassroots level, the establishment of Special Children’s Courts and the re-registration of all the charitable children institutions and adoption societies operating in Kenya.

**Partnerships in the Fight against Child Sexual Abuse**

**Partnership for Prevention: engaging stakeholders to improve organization responses to sexual abuse and exploitation**


Radha Ivory said that among the difficult issues associated with child sexual abuse was the fact that children are more likely to be abused by trusted adults in trusted environments. One such scenario of familiarity, which if most often forgotten, is the great potential for sexual abuse and exploitation of abuse of children by child care workers, especially in situations of war and disaster, Ivory added.

Citing global incidences of child abuse by humanitarian workers and peace keepers in war situations, Ivory noted that the shocking revelations against the perpetrators led to a re-evaluation of organizational responses and attitudes to this form of abuse.

It became increasingly apparent that abuses meted out in such circumstances were not a geographical phenomenon, but resultant from extreme discrepancies in power prevalent in relief situations the world over.

She disabused the notion that the possibility of large-scale abuses were peculiar in their circumstances in the West of the continent, but argued that none-the-less, the so-called ‘West Africa legacy’ had indeed impacted positively on Building Safer Organisations (BSO) work.
of partnering with individuals and agencies, to improve beneficiaries access to reporting mechanisms and dignified, safe and confidential investigations.

She said that a participatory assessment by the UNHCR and Save the Children, UK in West Africa’s Manor River states, amplified the plight of young refugee girls at the hands of humanitarian agency workers.

The assessment highlighted the slow response by the UN and the numerous loopholes in the systems required to protect girls and women against misuse of power. A high-powered inter-agency task force involving UN and NGO agencies looked into the underlying structural issues and established *inter alia*, that there was an absence of codes of conducts governing individual behaviour of humanitarian workers and a general lack of systems to ensure accountability of organizations and individual workers to beneficiaries.

The Task Force identified six core principles of behaviour for humanitarian staff and recommended the establishment of mechanisms for reporting and investigating complaints, the coordination of awareness-raising for beneficiary communities and enhanced beneficiary participation in decision-making.

Ivory explained that the principles and recommendations formed the foundation for international action on effective prevention and response systems to date. She cited the forging of partnerships to implement the principles and recommendations in the field as another impact of the West African experience.

She gave examples from Kenya where UN and NGO agencies formed a consortium to prevent sexual abuse by workers in Kenyan refugee camps. She enumerated the achievements of these agencies.

In 2003 a similar UN-NGO partnership culminated in the Building Safer Organisations project, which was aimed at enhancing NGO capacity to receive and respond to complaints safely, confidentially and effectively. Sustained training of NGOs globally on complaint investigations and implementation of complaint mechanisms in partnership with communities was successful in enhancing skills, attitudinal change and generating enthusiasm for reform.

Tailored workshops for managers helped foster partnership with field agencies through regional networks of concerned staff to sustain momentum of the programmes.

Through research and advocacy, a Beneficiary Based Consultation became the primary focus of the third phase of the project of Building Safer Organizations to ascertain comprehension and sustained implementation of the inter-agency task force policy decisions at the field level.

The experiences showed clearly that for fundamental organizational change to be realized it must appreciate that beneficiaries – perceptions and feelings of safety- must be at the centre of any approach. The experience of BSO clearly demonstrated that only through strategic
engagement with partners can there be a sustained response to sexual exploitation at the global level.

**Partnerships in the fight against child sexual abuse: a case of Child Helpline International**

**By Alice Mapenzi Kubo, Programme Coordinator, Africa Child Helpline International, the Netherlands.**

The Programme Coordinator explained that Child Helpline International (CHI) was a global network of telephone and outreach service for children and young people that was predicated upon the belief that children and young people have rights.

Ms Kubo said the activities of CHI included:

a) uniting child help lines through the global network;
b) identifying potential partners to facilitate the establishment of new help lines;
c) offer quality guidelines to improve services offered by existing child help lines;
d) compile data on global children issues; and
e) advocate, on behalf of children at policy-making levels (Child Rights Conventions – CRC, VAC, International Telecommunication Union).

She explained that a child helpline is a phone and outreach for children and the young, which is easily accessible and utilizes phone, chat/online, concern/happy-sad boxes, mobile vans, radio and postal, walk-ins.

It operates on a 24-hour basis, is free-of-charge, with a three-digit, easy-to-remember number and has national coverage and reaches the marginalized through community outreach, the CHI Coordinator, explained.

Ms. Kubo underscored the importance of the child help lines as primarily being that they offered venues where children’s voices were heard, thus providing a basic human right—the dignity that comes with participatory approaches. They also facilitated linkage of children to services and resources.

She said that the UN Conventions and ITU fora had children issues on the agenda, and made specific recommendations pertaining to child help lines were enshrined in the national and international conventions.

A baseline survey of 59 global help lines to determine the reasons why children contacted child help lines indicated that the majority of them did so due to peer relationships (24%), abuse and violence (16%), family relationships (13%), sexuality (12%), psycho-social mental health-10%, school-related (8%), and homelessness-5%.

Global contacts from children on abuse and violence rated physical reasons to be the most predominant, with other reasons being bullying, sexual reasons, emotional neglect and witness to violence.
Ms. Kubo CHI was in 24 African countries, where there were 10 member help lines and 14 potential help lines. She said that the South African help line was among the most advanced on the continent. “In Africa, help lines reach children through telephone, in-person, postal/mail boxes, web, radio and television counseling,” Kubo said.

The Coordinator noted that the majority of the children who contacted child help lines in Africa, did so due to abuse and violence.

She outlined the role of CH in fighting CSA as outreach services where counselors visited schools to teach children about their rights and abuse, and through telephone services.

Despite the importance of CHs in Africa they faced the following challenges:

- political will;
- cultural attitude in societies;
- financial resources and sustainability;
- lack of commitment of an NGO;
- accessibility to resources; and
- trained counselors.

**DISCUSSION**

In response to the question of the broad mandate of CH, Kubo said they linked children to other services, as it was not an independent organization but linked children to existing services to function as a CH. The CHI provided intervention in a crisis period and linked children to long-term rehabilitation.

On the issue of confidentiality, Kubo explained that during referral and intervention, this issue was bound to become complicated due to the involvement by several parties in service provision. She explained that the children were informed of the network of confidentiality and that information shared remained within the network of shared confidentiality.

On the difficulties encountered in acquisition of toll-free services, she explained that this was context specific “one size does not fit all”, adding that if an organization were to work closely with the respective government as a partner this could determine the extent of their acceptance of your request. Other modes of communication that a CH can run on include walk-in services, outreach services.

As regards to the information that children wrote in the concern/happy-sad boxes, Kubo explained that the boxes were placed in schools and pupils would write down those things that pleased or disturbed them. Once or twice a month, depending on the circumstances, a counselor would meet with the head teacher to address the issues raised. It was found that most pertained to concerns about the social environment within which the children lived.

She said those international agencies involved in sexual offences against children such as those working in the UN could face deportation by national governments and their immunity from criminal prosecution waived.

Those in the military could also be sent home to be prosecuted under martial law, Kubo said when explaining about the extent of concerted national and international efforts towards combating the menace.
DAY THREE: WEDNESDAY 26 SEPTEMBER 2007

**Gender and Institutional Child Sexual Abuse**

*Abuse of gender non-conformist children*

**By Donna Piddo, Social Scientist/Consultant, School for International Training, Nairobi, Kenya and Nicholas Harper, North Carolina, USA**

Ms. Piddo explained that gender non-conformist children were viewed as pathological and suffering from an illness that needed to be changed, altered or cured. She posited that such children were subjects of abuse by families, and even wider society when they forced towards the direction that they do not want to go by ‘reforming’ their behaviour.

She gave this as the reason for the limited research on the matter as such ‘deviant’ behaviour was often ‘swept under the carpet’, yet it was a growing phenomenon which required attention from professionals, families and society at large. Her argument was that gender non-conformist children who had experienced abuse tended to become abusers as adults. Children who fall within this category are prone to abuse from other children due to their gender-crossing behaviour. As they venture to live out their full lives, they experience a litany of violations. Evidence points to the demonstration of violent or other anti-social behaviour among gender non-conformists when they mature into adults. She said manifestations of this include:

- wife battery among men who are forced to marry ‘for the sake of society’;
- joining religious orders;
- political leaders who suppress others to conceal their non-conformity;
- people remaining single;
- ‘polygamy’, where married persons conceal their affairs with their spouses;
- Depression;
- Suicide; and
- Inability to relate to either sex.

She said long before such children understood their behaviours adults could notice them and therefore tended to take advantage of them. Piddo said that such children were clearly unable to deal with sexual advances and so became traumatized, developed low self-esteem and more often than not, blamed themselves.

Due to the fact that in most of the countries of Africa and the West there was a rigid definition of gender and gender roles, behaviour and lifestyles, the tendency was to suppress rather than support and abandon rather than protect.

She said that research undertaken indicated that such behaviour was not caused by overbearing mothers and absentee fathers, but that it was physiological. From the video shown on identical twins, one effeminate male child, and the other ‘straight’, it was clearly demonstrated to the participants that genetics was not the primary factor responsible for gender non-conformism but that there were several variables which required being researched on.
Ms. Piddo explained that homosexuality and gender non-conformity were terms which overlapped. Piddo noted that most of the research results were in the form of medical statistics on the prevalence of homosexuality.

She disabused the notion that in countries where gender non-conformity was seemingly condoned and tolerated there was a higher tendency towards it and explained that from available medical statistics, homosexuals were evenly distributed in both the West and in Africa.

Piddo explained that her paper was catalysed by a term paper that homosexual rights groups in Kenya had prepared and was not based on rigorous research. It was also informed by observation through contact with gender non-conformist children.

**Child sexual abuse data from a tertiary care hospital in Mexico City**

*By Claudia Diaz Olavarrieta, National Institute of Public Health, Mexico*

Dr. Olavarrieta presented findings from a comprehensive research whose methodology comprised legislation processes, the region’s demographics and Mexico’s specific child abuse cases. In general, her presentation gave a clear indication that all Mexico and other countries needed to curb CSA through enactment of legislative provisions, ensuring appropriate punishment to the perpetrators and adequate protection to the survivors.

Giving examples to elaborate her case, the doctor stated that Latin America (LA) was the first region in the world in which all countries had ratified the CEDAW, and the first to formulate a legal instrument explicitly designed to eradicate GBV: *Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women.*

(www.madre.org/articles/lac/violence.html)

However, her findings showed that between 20-60% of women in LA have experienced sexual abuse (cf: IPPF, www.ippfwhr.org/programs/program.gbve.asp). She added that WHO estimated that 11 to 25 million children have witnessed or are victims of some form of violence, particularly in their homes.

From statistics on Mexico’s population, education and child labor, Dr Diaz presented findings of sexual abuse in Mexico as follows:

**National Family Institute**

- in 2002 reported 1,123 complaints due to child sexual abuse
- Youth National Survey (2003), n=105,000
  - 3.5% reported some form of SA at home or at school

**Ministry of Health, National Report on Violence and Health**

2006, SSA: México, DF

- Surveillance systems in 1991-2002 registered 7,351 child homicides (0-14 yrs)
- Between 1979 -1990 an average of 616 children died every year due to homicide.
- And in 1991-2002 the number that died were 613

**Attorney General’s Office**

- In 2002, 942 cases of child abuse were tried and 119 women sentenced.
- On child abduction, 502 sentences were given between 1996-2001.
• On child trafficking for financial gain, 130 sentences were given and 18 states reported this type of crime.

In giving specific data on child sexual abuse, Dr Diaz gave a detailed description of the prevalence of sexual abuse (SA) among children attending a tertiary care hospital in Mexico City—the NATIONAL INSTITUTE OF PEDIATRICS.

Dr. Diaz defined sexual abuse as the practice that involved physical or visual behavior, by an individual in a sexual context; using violence, deception or seduction and the child’s inability to offer consent due to his age and power differential.

She then gave her findings with a Retrospective review of medical records; suspect cases; demographic data; Aggressor and the child’s mother and divided the cases into absence of, and confirmed SA.

Using the American Academy of Pediatrics, AAP classification, Dr Diaz outlined a number of issues from the Guidelines for the Evaluation of Sexual Abuse of Children. Review. Pediatrics 1999; 3:186-190. The main ones of these are Sexual Abuse (SA):
- with physical contact: touching (90%); genital-genital, genital-oral contact and penetration.
- without physical contact: exhibitionism; vouyerism; SA on the Internet.
- Child sexual exploitation: prostitution and child pornography.
- Sexual tourism
- Child trafficking

The diagnosis of child abuse was also an important recommendation in Dr Diaz’ research. She stated that an interview with child and caretaker was one of the best inquiries into episode and associated behavioral changes. The Dr. also recommended psychological assessment (projective tests and changes in behavior); complete physical exam (genito-anal area using the Joyce Adams clinical criteria) and lab tests to discard STIs are other modes of diagnosis (cf: main paper for details).

The Dr. affirmed that there are social costs associated with child abuse. One of the highest was morbi-mortality causes associated with injuries among infants and children. Another is that the victim of child abuse has an approx 50% risk of re-victimization and mortality increases considerably if abuse is not identified and treated after first episode.

In her concluding remarks, Dr Diaz called for another descriptive study which would give preliminary data on SA. She encouraged an increase in the sample size to other sites as well as the inclusion of experiences in rural areas. In addition, she called for the implementation of universal screening, treatment and referral.

Finally, she passionately pleaded and called for political will (which was currently not enough) to ratify international treatises.
Institutional Child Sexual Abuse

By Joseph Nderitu Kibugu, Country Director, International Justice Mission, Kenya

Mr. Kibugu gave a brief background of International Justice Mission (IJM) and its work as an organization of lawyers, investigators and social workers that are committed to bridging the gap between law as provided and its enforcement.

The paper focused on situations of sexual abuse of children outside the family unit when children are placed into institutional care. He noted that the way society ascribes such institutions as ‘institutions for the homeless and vulnerable’ reinforces feelings of disadvantage and diminished confidence among children in such institutions who see themselves as more or less second class citizens. This undermines their ability to report and seek help when they are abused. Mr. Kibugu informed participants that much as there had not been any systematic study on the prevalence of institutional child sexual abuse in Kenya, casework records of IJM pointed to institutions as major perpetrators considering that half of the cases being handled by IJM involved the abuse of children in institutions.

Citing a number of case studies, Mr. Kibugu outlined a number of factors that perpetuate and exacerbate the abuse of children in Institutions. These include:
- Manipulated power relations between children and care givers whereby children succumb to abuse by managers of institutions in order to access basic services.
- Limited accessibility to institutions by the public and other stakeholders. Many of the institutions are located in remote areas out of the public eye and the operations of these institutions are shrouded in mystery. When visits are made to institutions they are quite often choreographed by the managers to show only what they want to be seen.
- Adult chauvinism: a belief that children should not be heard blocks avenues for disclosure.
- Failure to effectively oversee and monitor the institutions by the regulatory authorities. This includes the absence of vetting procedures for managers and other staff who interact with children.
- Administrative cover up in order to protect the face of the establishments to which these institutions are often affiliated such as those affiliated to religious establishments.
- Failure to enforce the law against perpetrators. There is need to hold perpetrators accountable and heighten the cost of abetting sexual abuse through improving professional investigations and prosecution.

Mr. Kibugu concluded his presentation by suggesting a number of possible remedies which included:
- Early and confidential detection;
- Establishment of hotlines;
- Effective supervision by Government;
- Effective and holistic intervention - Law enforcement and aftercare services;
- Improved sexual awareness among minors.
The Country Director concluded by re-emphasising the need for a concerted focus on the mental and physical health of our children if Kenya’s future is to be safeguarded. He argued that it was not enough to make pronouncements on climate change, environmental issues and Vision 2030 without paying special attention to the dignity of the world’s children.

**Sexual Coercion among adolescent Girls in Yoruba Land**

By **Dr. Florence Akanle Foluso**, *Institute of Education, University of Ado-Ekiti, Nigeria*

Dr. Foluso presented a study which investigated the magnitude and patterns of sexual coercion experienced by female adolescents aged between 12 to 16 in the South-West zone in Nigeria. The sample size was 475 girls drawn from both school and out of school.

A high prevalence of sexual coercion in public institutes in Nigeria most commonly in the form of sexual harassment was reported. The report established that sexual violence had a profound effect on physical and mental health.

She cited extensive literature which identified the types, magnitude, patterns and perpetrators of this vice and the fact that in Nigeria sexual violence was a neglected area of research.

The university don argued that from available literature, sexual coercion had been defined as a continuum of behaviours ranging from unwanted touch, verbal intimidation, attempted rape, rape to cultural expectations where girls were expected to marry and sexually service men against their will.

The findings of the study showed that the major perpetrators of sexual coercion of young girls are their teachers and the adult in the life of the girls. The study suggests that school is not as safe as would be expected.

The implications for policy programmes are that interventions aimed at improving reproductive health must address issues such as personal safety and prevention of abuse. It recommends that the public should be sensitized in order to challenge stereotypes that favour sexual coercion.

It is further recommended that skills training should be organized for female students and non-students. The media should educate the public about the dangers or consequences of sexual coercion on victims and help reduce the stigma associated with it.

Sexuality education should be aimed at empowering adolescents to against making themselves vulnerable to coercive or unwanted sexual advances.
CLOSURE OF THE CONFERENCE

The Conference was officially closed by the Attorney-General Hon. Amos Wako whose speech was read on his behalf by the Director of Public Prosecution (DPP), Mr. Keriako Tobiko.

The delegates graced the occasion, which was chaired by Hon. Lady Justice Joyce Aluoch, a Judge of the High Court of Kenya and Chairperson of the Task Force on the Implementation of the Sexual Offences Act.

Before the Attorney-General’s speech was read, the Junior President of the Children’s Parliament of Kenya, Mr. Andrew Kaguara sounded a stern warning to all ‘ignore these voices no more!’ in reference to the pleas by children to have their views acknowledged and embraced by policies.

Flanked by members of his Cabinet whom he introduced, the Junior President requested the Attorney-General’s office and other relevant authorities to enact stiffer laws that ensure that perpetrators of sexual abuse had no options of fines.

Kenyans should shun cultural practices that make children vulnerable to sexual abuse, the Junior President advised. He challenged organizers of conferences touching on issues related to children, to ensure that the major beneficiaries of such conferences-the children- were present.

Master Kaguara decried the tendency for inter-generational tensions, and called for the facilitation of fora where different generations could find a common meeting ground for strategic engagement so as to foster better understanding among them.

He urged the government to establish toll-free help lines with easy-to-recall digits to ensure rapid response to the cries of the abused child. Kaguara urged the government to protect the children after they reported such incidents and to establish safe havens for such children away from those perpetrating the vice who may wish to vent out their anger once the ‘whistle had been blown’.

‘The government should organize public awareness on sexual abuse and recommendations from conferences such as this one should be implemented’, he pointed out.

The ‘President’ recommended that the government should introduce child sexual abuse as part of the curriculum from primary level education.

He presented a report to the DPP, on the recommendations of the just-concluded children’s pre-conference on the same theme, which was held on 22 September.

Dr. Philista Onyango, Regional Coordinator of ANPPCAN expressed her gratitude to the 400 delegates who sacrificed their time and funds to attend the first international conference in Africa on this vital subject. She thanked all those whose efforts culminated in the successful organization of the conference. She singled out the Organising Committee who she said had burnt the midnight oil to ensure that all the logistics had been worked out. She mentioned them by name as Prof. Collette Suda of the University of Nairobi as the Conference Chairperson, Mrs. Wambui Njuguna the Coordinator of the Conference and
Prof. Frederick Okatcha of Kenyatta University, Chair of the Scientific Committee, in addition to herself.

As the Vice-Chairperson of the conference she extended her appreciation to members of the Scientific Committee, of which she was also a member, and who included Prof. Carol Plummer of the School of Social Work, Louisiana State University, USA, and the Chair of the Organizing Committee.

She thanked the Conference Secretariat for their invaluable support and those who offered logistical and financial support to the conference. To all the children who addressed the conference, entertained the delegates or enriched the conference in any way, she singled them out for special mention. Dr. Onyango said the Inter-continental Hotel had availed the premises for use by the conference, at very short notice and had greatly subsidized the conference room and package rates. She especially thanked the hotel management for going beyond the call of duty to ensure that all necessary facilities were available.

Mr. Keriako Tobiko said that prevention of child sexual abuse had been recognized by social scientists as being a vital aspect of dealing with the menace and therefore should be explored vigorously.

He enumerated the three levels at which prevention was tackled namely primary (activities targeted at community level), secondary prevention (activities directed at families that have one or more risk factors) and tertiary level prevention which consisted of activities targeted at families that had demonstrated the need for intervention and thus with confirmed or unconfirmed child abuse and neglect cases.

Mr. Tobiko said the just concluded conference had afforded participants the opportunity to examine and discuss the strategies of protecting children against child sexual abuse. He added that the children in Africa were particularly vulnerable on account of the situational realities on the continent.

He outlined the legal framework governing the protection of children against the vice and the penalties that perpetrators faced. The Director of Public Prosecution said “the State Law Office is currently drafting a Counter Trafficking in Persons Bill of 2007 which takes cognizance that trafficking of persons, particularly women and children for sexual exploitation among other ills, is nothing more than modern day slavery.” He said the Bill had provided for stiff penalties for first-time and repeat offenders of the same crime.

Mr. Tobiko said that it was in cognizance of these provisions that the Task Force on the implementation of the Sexual Offences Act, 2006 was launched in May 2007. Mr. Tobiko said that the government expected tangible results to emanate from the Task Force.

He confirmed that more legal attention had been placed on this problem and reiterated that the plague on society could only be eradicated through concerted efforts of all interested and concerned parties in the public and private sector.

“This is one battle that we cannot afford to lose. Not by a long shot. We have no choice but to thwart child sexual abuse practices, the DPP emphasized.
The DPP concluded on a hopeful note when he said that the recommendations on the way forward were bound to facilitate the formation of building blocks for social re-engineering and reform.

The rapporteurs of the conference had earlier presented the Chief Guest the Summary of Recommendations and the Way Forward which are summarized below.
PART II: WORKSHOPS PRESENTATIONS

The plenary sessions of the conference were interspersed with workshop sessions where key focal points of interest pertaining to child sexual abuse where given emphasis. The convenors of all these sessions, with the exception of three, provided reports which are as summarized below:

**Workshop 1: Existing Knowledge on Child Sexual Abuse**

The workshop was convened by Prof. Julia Sloth-Nielsen of the University of Western Cape, South Africa. The session assessed the vulnerability and impacts of sexual abuse of children in Nigeria from the perspectives of children, an exploratory study of student teachers’ perceptions on the consequences of child sexual abuse and substance use and risky sexual behaviour among adolescents in four sub-Saharan African countries and understanding sexual abuse with persons with intellectual disability.

Session Rapporteur was Ms. Eleanor Harrison

The following key issues and research findings emerged from the discussions:

1. A UN Regional Study conducted in 2006 in Naivasha, Thika and Garissa in Central and North-Eastern Provinces of Kenya respectively, established that child sexual abuse was still rampant in Kenya;
2. There are 15,000 child prostitutes in Kenya and that this needs to be addressed as a matter of urgency.
3. Among the factors exacerbating the menace are lack of parental supervision and alcohol and drug abuse.
4. Children need to be educated on appropriate and inappropriate behaviour so that they can protect themselves and guard against potential perpetrators.
5. There has been little or no research conducted on children with special needs who are victims of sexual abuse. This is evidenced by the following:
6. Their exclusion from standard programmes addressing victims of child sexual abuse; and
7. Steps to address their capabilities as reliable witnesses in many countries.
8. Young male victims of sexual abuse have lower reporting rates due to the compounded stigma involved.
9. Men have not been socialization to view sexual gratification of children as an offence which had dire consequences for the victims.

**Emerging issues from workshop discussions**

In response to the above concerns the following emerged from the deliberations:

1. The issue of sterilization of intellectually challenged children needs to be re-assessed and the session addressed the issue and questioned whether this would be tantamount to protection or assault.
2. The lack of adequate attention, support work and research required to help re-socialise men are issues of concern.
Recommendations on the way forward

After discussions, the participants made the following recommendations:

1. There is need for more research on sexual abuse issues for children with learning disabilities so that the statistical data can inform planning for such victims.

2. There is need for more male-focused research and male-centered family planning to re-socialize men to curb the practice of child sexual abuse.

3. In programmes addressing child sexual abuse equal attention should be given both the boy and girl children.

4. Men and women should form a combined unit in the fight against the vice. The tendency to mainly have women-focused programmes and activities is self-defeating and has had dangerous repercussions.

5. Research should be conducted on and with perpetrators.

6. New problems emerging in societies in transition need to be identified and addressed in the formative stages.

7. There is need for comprehensive strategies to sensitize societies on the fact that child protection is a shared communal responsibility.

Workshop 2: Prevention of Child Sexual Abuse

Prevention, Care and Support for Children Affected by Sexual Abuse Using the Child Helpline – Case Study of Action for Children (AFC), Uganda by Tusiimire Miriam from Action for Children, Uganda (AFC)

Convenor, Prof. Sheryl Buske, De Paul College of Law, Illinois, USA
Rapporteur: Francis Nfukiraani, Uganda Reproductive Health Bureau

Miriam began with a brief introduction of her organization, Action For Children (AFC), a non-governmental organization, which was started in 1995, as a child helpline by an individual who gave her home phone number to children to call in case of abuse. The individual herself had been a victim of abuse. She thought that, had she had a phone-line to call at the time of the abuse, the abuse would not have happened.

She explained that the Child Helpline was under the AFC ‘speak out project’ (SOP). Other services under the SOP include the SOP boxes, child rescue, community sensitization and community counselors.

Miriam demonstrated how the child was linked to all the five stakeholders (government, empowered community, NGOs, family and other stakeholders through the child help line. Through this strategic engagement, the community becomes empowered, Miriam explained. She took the group through a volume of calls ranging from 100 – 480 made by the different
categories of stakeholders. The results reflected that children up to seven (7) years of age used the help lines the least and yet they were the most vulnerable. Only 10 calls had been made by this category between June 2005 and June 2007 compared to the 465 calls made between the same period by children aged between 13 and 18 years.

The AFC representative explained that where there were no telephone facilities this gap was bridged by:
1. speak out boxes;
2. SOP centres (the community counseling component);
3. holiday programmes for the children in communities;
4. formation of clubs to address and disseminate Child Sexual Abuse messages.

She said that CHL had been publicized through: volunteers, local media, straight talk foundation, flyers, newsletters and office vehicles.

**Key Issues**
The child helpline serves various purposes:
- It is a tool for the prevention of sexual abuse;
- A telephone counseling tool;
- A school outreach tool.

**Role of the Child Helpline**
- Easy access to services by sexually abused children;
- Links children to a service providers;
- Promotes basic rights of children to protection and participation;
- It provides a listening ear to the children;
- Provides immediate response to the child's query;
- Encourages confidence which comes with being heard.

**Emerging issues**
Some of the interventions are:
1. Provision of speak-out boxes;
2. There is a community counseling component through SOP centres;
3. Holiday programs for the children in communities;
4. Formation of clubs to address and disseminate Child Sexual Abuse messages.

The lessons learnt from the scheme include:
1. Communities with CSA problems have been identified;
2. Children have opened up;
3. Children are not aware of their rights and responsibilities;
4. Drama enhances and simplifies CSA messages;
5. Anyone is a potential child abuser;
6. An empowered community is a tool against CSA.

Among the challenges faced are:
1. Children not being aware of their rights;
2. Limited publicity of the Child Helpline;
3. Counselor burn-out;
4. Abusive callers and lying clients;
5. Limited referral centres available.
**Recommendations**
1. All stakeholders should support the Child Helpline;
2. The email medium should also be used to complement other communication channels;
3. The child helpline should be properly publicized;
4. Increase support clubs;
5. More telephones should be availed.

**Part 2: Child Sexual Abuse**

By Mercy Chege, After-Care Specialist, International Justice Mission (IJM), Kenya.

**Key Issues**
1. The communal life of African traditional society ensured child safety;
2. Sexual matters were not discussed openly;
3. Cases of sexual abuse were unheard of;
4. Sexual offenders, where they were found, were punished accordingly;
5. Disintegration of the African traditional way of life has left children more vulnerable;
6. The family unit has also disintegrated;

Ms. Chege argued that a viable alternative would be to make the criminal justice system more accessible to the children and their protectors. She took participants through the Kenyan criminal justice system and posited that the process was never complete for example, when it takes too long to be reported hence the loss of evidence. Other factors contributing to this were:
- Poor investigations;
- Shortage of judges and investigators;
- Out-of-court settlements;
- Ignorance of the system;
- Corruption; and
- Court delays.

She argued for the formation of preventive programmes for the key target groups namely the general public (where the abusers and protectors are), high risk groups (children) and past offenders.

She listed the following as the major challenges:
1. Resources remain scarce: curriculum development and research;
2. Lack of efficacy in prevention programmes;
3. Difficulties in developing voluntary programmes for offenders;
4. No clear factors identifying potential offenders;
5. Challenge of striking a balance between sexual abuse and promoting healthy sexuality;
6. The fact that most children are abused by persons close to them;
7. Offenders may surpass our wisdom and employ new tactics;
8. Social discomfort surrounding sexuality hinders sensible discussion of the subject;
9. Sexual abuse involves only penetration.

**Emerging issues from the workshop**
1. Poor investigation hinders progress.
2. There is a shortage of magistrates, judges and investigators
3. Many people remain ignorant of the system.
4. Rampant institutional corruption impedes progress.
5. Inordinate delays in the court process.
6. The issue of out-of-court settlements compromises the fight against the vice.

**Recommendations on the Way Forward**
1. Society should address itself to the vacuum created by the disintegration of African traditional values;
2. The judicial process should be demystified;
3. Sufficient resources should be allocated to tackling sexual abuse;
4. Lobby political leaders to pass laws and to ensure that they are enforced;
5. The criminal justice system should be more accessible to the children and their protectors.

**Workshop 4: International Experiences in Treatment, Prevention and Interventions**
*Convenor, Hindowa Lebbie, Regional Officer, Africa*

**Part 1: Child protection and protecting childhood- the development of a training programme for OVC MOVE field staff in Lesotho by Mamoletsane Khati of Catholic Relief Services**

The training program is in the mountains of Lesotho for orphans who are HIV positive. The strategic objects of this project are:
1. To improve the education and training, especially for girls
2. To increase the capacity of families to mitigate socio-economic impact of AIDS.

**Key Issues**
1. The shortage of resources has reduced the impact of the project
2. Some of the achievements, to date, are:
   - Strong partnership and coordination with stakeholders;
   - Its grassroots approach has ensured good participation from the community;
   - Monitoring and Evaluation tool-kit has been created.

3. **Child Protection Manual**

A child protection manual has been established for both adults and children. The purpose is to educate the community on children’s rights and duties and to protect children from abuse. The results are as follows:
- Improved HIV and AIDS prevention
- Increased food security component – key-hole gardens which are well-suited to conditions of drought have been adopted
- A rights-based approach, well-suited to the issue of HIV and AIDS is in place.

**Part 2: Child witnesses, child sexual abuse and international law: recent legislative developments and cause for optimism.**
*Benyam Mezmur, Doctoral Research Intern, University of Western Cape, South Africa*

**Key Issues**
The focus of discussions was on the involvement of children in criminal cases and children in contact with the law.
She cited ART 12 of the Convention on the Rights of the Child which advocated for child participation in the judicial process impacting on their rights. The issue being how to guarantee their participation and protection.

Lack of resources was identified as the major inhibiting factor preventing children from accessing protective conditions in court in matters pertaining to any form of sexual violation. Benyam said there was an important Declaration on witnesses and protocols to the CRC but that they were too general and therefore some organizations had drafted general laws on child witnesses and victims of crime.

She cited the 10 substantive rights stated in the CRC.

**Recommendations on the Way Forward**

1. General Laws should not be overlooked as they do not create new obligations but elaborate on existing legal provisions;
2. Training in legal provisions should be intensified.

**Part 3: Forensic Nursing Science: New Strategies in Paediatric Sexual Assault Examination**

*Virginia A. Lynch, Forensic Clinical Nurse Specialists, Faculty, Beth El College of Nursing and Health Sciences, University of Colorado, Colorado Springs, USA*

**Key Issues**

1. University of Colorado is not just focused/concerned with sexual assault or abuse of children. It also includes crime, scene investigation, psycho-social and legal aspects of legal care;
2. the forensic nurse examiner addresses all aspects of crime, but especially violence and interpersonal violence;
3. forensic nurses are preferable to physician with no forensic training;
4. forensic nurses work in partnership with other players in the justice system

**Emerging Issues**

1. Nurses are utilized because most doctors do not want to perform rape examinations as they do not have the requisite equipment, time or training for this type of emotional issue;
2. Statistics on child rape victims are lopsided as their examinations are scanty;
3. Forensic nurses provide the first point of contact for victims and it is a recognized speciality.
4. most children do not report cases of CSA and those who do report after the time that it is possible to get any useful forensic evidence;
5. forensic nurses are trained that sexual abuse usually correlates with physical abuse or neglect and that there are types of injury that can be distinguished from accidental or other injuries;

**Workshop 5: Role of Policy and Legislation in the fight against Child Sexual Abuse**

**Part 1: National Children’s Bench Book Project on Child Sexual Abuse**

*Convenor: Prof.Carol A. Plummer, Louisiana State University, USA*

*Rapporteur: Nancy A. Onyango, Sarakasi Trust, Nairobi, Kenya*
Key Issues
Some of the objectives of the scheme are to:
1. Stop the silence on Child Sexual Abuse;
2. Promote healing of the abused children;
3. To educate the community on Child Sexual Abuse.

Emerging issues from the presentation
1. Judges and the judiciary should be included in any discussions on the way forward;
2. The abused child should be provided with a safe shelter;
3. The judges do not always understand the existing issues;
4. Lawyers, judges, psychologists and sociologists need to be involved in the bench’s decisions;
5. Race and culture are factors in child sexual abuse proceedings;
6. Children should be educated on the various aspects of sexual, emotional and physical abuse;
7. There should be training to help in providing a neutral, child-centred, multi-disciplinary and sound overview, while also having a training manual as independently.

Recommendations
1. Linguistic barriers should be addressed;
2. Preservation of the welfare of the child should always be of paramount importance;
3. There is need for a multi-disciplinary team comprising trained professionals who comprehend the use of forensic interviews;
4. The judiciary should be educated on child sexual abuse;
5. There is need for an editorial board drawn up from diverse disciplines;
6. Issues of offender and the victims contacts should be followed up to ensure that issues of trauma and stigma are fully addressed;
7. The implication of judicial sentences should be incorporated in policies formulated.

Part 2: Institutionalising the protection of children against child sexual abuse
By Tom Chavangi, Executive Director, Children’s Legal Network (CLAN), Nairobi, Kenya

Key issues
1. What are the effects of the Children’s Act;
2. Religious leaders, political leaders and parents, do not understand the complexities of children’s issues.

Emerging Issues
1. the legal framework with regards to child rights and protection was deliberated upon;
2. international organizations supporting human rights and children should have laws covering all states;
3. there is need for an International Covenant of Human and Civil Rights.

Recommendations
1. Qualified and progressive methods of international policy should be applied;
2. Community child protection committees should be established;
3. The Sexual Offences Act needs to be defined and clearly understood especially in the areas of child trafficking, child labour and child pornography;
4. Law enforcers need to be trained on investigation and interviewing techniques;
5. The community should be encouraged to report rape cases;
6. Law enforcement officers and social workers need training on the Children Act;
7. The community needs to be involved in order to have ownership in children’s projects;
8. Various genres such as drama, songs and poetry should be used for sensitization;
9. Children should be encouraged to write to their Members of Parliament;
10. There is need for a multi-disciplinary approach to the question of child protection.

**Part 3: The Children Act, 2005: model of practice to protect children from sexual exploitation**

*By Njundu Drammeh, Anglophone Sub-regional Coordinator, ECPAT International, Gambia, West Africa*

**Key Issues**
1. Religious leaders, politicians, parents should be sensitized;
2. The issues learnt from the Children’s Act need to be further explored;
3. The interests of the child are paramount in all interventions.

**Emerging Issues**
1. The need for Community Child Protection Committees was brought up;
2. Training of law enforcers in investigation and interviewing techniques was raised;
3. Trafficking of children.

**Recommendations on the Way Forward**
1. Communities should be encouraged to report rape cases;
2. Alliances between and government and the public should be encouraged to lobby for support on child rights and protection;
3. There is need for community involvement and ownership of children’s projects;
4. Children should be protected against perpetrators of sexual violence and the victims supported.

**Part 4: Using the Law to Protect Children from Abuse**

*By Petronella Nenjerama, Coordinator, Justice for Children Trust, Zimbabwe*

**Key Issues**
1. Provision of free legal services to children, as lawyers are very expensive in Zimbabwe;
2. Key participation in legal reforms in Zimbabwe in matters pertaining to child maintenance, custody and guardianship.

**Emerging Issues**
1. Lobbying and advocacy, legal education and legal aid in communities needs to be revisited;
2. Physical abuse of orphans by relatives was addressed.

**Recommendations on the Way Forward**
1. Peer educators should be utilized to sensitise the community on relevant laws;
2. Child protection within all categories of educational institutions should be stipulated within the Constitutions of respective countries;
3. Drama, poetry, songs and other acceptable art forms should be utilized to sensitise the public on laws related to CSA;
4. Children need to be encouraged to send in letters to their members of Parliament.
Workshop 6: The Role of the Media in the fight against Child Sexual Abuse
Convenor: Damali Robertson, Stanford University, Jamaica.
Rapporteur: Consilous T. Rwanyonga, Programme Officer, Guidance and Counseling Aga Khan Education Service, Uganda.

Part 1: Ethical Issues in Media Coverage in Child Sexual Abuse in Uganda: Challenges and Opportunities

Joshua Rubandi, Programme Officer, Information, ANPPCAN Uganda Chapter, Kampala, Uganda.

Key Issues
1. In Uganda, a case of child abuse is reported every hour;
2. the highest form of CSA is defilement;
3. In 2006 alone, 11,923 cases of CSA were reported, the main perpetrators being parents, relatives and teachers;

Emerging issues
1. Media Coverage of Child Sexual Abuse
The legal framework for media coverage of Child Sexual Abuse matters draws from:
   • Articles 3 and 17 of the UN Convention on the Rights of the Child
   • The Press and Journalists Statute of 1995
   • The Ethical Code of Conduct for Journalists. This Code of Conduct stresses various aspects, namely confidentiality, accuracy, correctness and the right to reply. It also addresses the instance of journalists being offered freebies, being bribed, the tenets of fairness and balance and prohibits pornographic material.

2. Challenges in enforcing the Code of Conduct
   Among the challenges face in enforcing the Code of Conduct are:
   • The right to free expression and speech normally competes with the legal conditions enshrined in the Code of Conduct.
   • There remains a need to strike a balance between public interest and the best interest of the child.
   • Inadequate training of journalists, so that many journalists are ignorant of the professional norms and rules.
   • Journalists on the ground have limited control over what gets published since editors sometimes alter the stories.

3. The results of the poor enforcement and application of the journalistic code of conduct are:
   • It causes psychological torture to the victims
   • It leads to loss of dignity of the victim, before others
   • It contributes to the loss of self-esteem in victims
   • It leads to failure in recovery or delayed recovery of victims
   • Sexual arousal among the consumers of the mass media, generally.

3. Some of the interventions which have been applied to remedy these short-comings are:
   • Providing professional training to journalists
   • Facilitating public dialogue and conferences on the media and children
The development of ethical codes of conduct in relation to reporting on child sexual abuse

**Recommendations**
1. Provision of further and more comprehensive training for journalists.
2. There is need to work with media in order to influence policies and attitudes.
3. The involvement of journalists in children’s activities.
4. Incorporation of children’s issues in the journalism curriculum.
5. The media should play a bigger role in the prevention of sexual abuse, besides reporting the cases.
6. There is need to assist the media to specialize so as to avoid further abuse of children by them

**Part 2: Play as a Model of Treatment for Sexually Abused Children in Kenya,**  
*By Florence Mueni, Juvenile Justice Unit, Probation Service Headquarters, Nairobi, Kenya*

This presentation explored play therapy on sexually abused children. Particular reference was given to the Amani Counseling and Training Centre which employs this form of therapy in counseling the survivors of child sexual abuse. Under this scheme, a Play therapy Room is set up for children under 13 years of age. Such children are referred for play therapy by their parents, doctors and charitable organizations.

**Key Issues**
1. Play therapy is the window through which the counselor gets an insight into the child’s world. The rationale is to encourage the child to express their thoughts and feelings in a non-threatening environment.

2. The different stages involved in play therapy are:
   - Initial interview to build a good relationship with the child
   - Working sessions with the child
   - Consultations with guardians

3. The ultimate goals of such sessions are to:
   - Bring relief for emotional distress
   - To make complex issues understandable to the young minds in their own way.
   - Facilitate the child’s optimal development
   - To help the child become self-reliant.

**Sand Play**
Sand Play is another aspect of play therapy. Miniature toys are availed to the child. These could range from people, animals, plants and vehicles. It is important that one does not interrupt the child at play. It may also be observed that at times, children get carried away, which can be useful when a child wants to recollect a bad dream.

**Doll House**
This session brings out the issue of Child Sexual Abuse since it is the closest personification of a child.
Emerging issues
1. Some challenges of the use of play therapy are:
   - Poverty
   - Most children are brought in when abuse has been occurring over a long period of time
   - Lack of practice-based research
   - No effective referral systems
   - Impatience on the part of parents to achieve the success of the therapy as healing is a long process and creating rapport can take even longer.
   - There are several follow-ups even after termination of this therapy, but sometimes it is not easy to pick up the symptoms.

Recommendations on the Way Forward
Child therapy may be enhanced by:
   - Setting up agencies that host play therapy rooms, where children may seek services
   - Professional training of practitioners such as child psychotherapists
   - Establishment of effective referral mechanisms for children in need of therapy.
   - There is need to conduct scientific inquiry into this intervention of play therapy.

Part 3: Child Sexual Abuse in Jamaica
By Damali Robertson, External Relations Coordinator, Stanford University, Jamaica.

Key Issues and Research findings
1. In Jamaica, girls are more vulnerable to sexual abuse than boys. Rape rates are the most common brand of sexual abuse.
2. The main perpetrators range from family members, authority figures and family friends.
3. Perpetrators use the weapon of trust against their victims.
4. In Jamaica, image, it seems, is everything; a victim may lose a case if she actually went to the perpetrator’s house and got abused therein. In fact, many victims understand the thinking of society and can fairly predict what attitude the public will adopt towards them, hence some of them shy away from reporting abuse cases.
5. Some ethical issues on media reporting are as follows:-
   - There is need to work with media in order to influence policies and attitudes.
   - In Uganda, a case or two, of child sexual abuse, is reported to the police every hour.
   - The highest form of sexual abuse in Uganda is defilement.
   - 11,923 Child Sexual Abuse cases were reported in 2006. They mostly involved relatives, teachers and parents.

The Jamaican experience on sexual abuse unearthed the following issues:-
   - In Jamaica, girls are more vulnerable to sexual abuse than boys. Rape rates are the most common brand of sexual abuse.
   - The main perpetrators range from family members, authority figures and family friends.
   - Perpetrators use the weapon of trust against their victims.
   - In Jamaica, image, it seems, is everything; a victim may lose a case if she actually went to the perpetrator’s house and got abused therein. In fact, many victims
understand the thinking of society and can fairly predict what attitude the public will adopt towards them, hence some of them shy away from reporting abuse cases.

**Workshop 7: Best Practices in Treatment of Child Sexual Abuse**

*Convenor: Dr. Abiodun A. Popoola, University of Ado-Ekiti, Nigeria*

*Rapporteur: Ms. Ann K. Muli*

**Part 1: Best practice models in dealing with children who have been sexually abused**

*By Tania Moodley, Resources Aimed at the Prevention of Child Abuse and Neglect (RAPCAN), Cape Town, South Africa.*

The presentation was based on the experience of RAPCAN, Cape Town, South Africa in preparing children for court appearance within the Child Witness Project.

**Key Issues**

1. Court systems are adversarial and can subject children to secondary trauma as well as to confusion when presenting evidence, hence RAPCAN’s response;
2. The programme was reported to have taken five years to develop and has been subjected to monitoring and evaluation;
3. The programme has clear goals and uses age-appropriate methods and materials.

**Emerging issues**

1. Feeding of child witnesses was highlighted as a major consideration of the programme.
2. Role-playing has proved to be important in reducing stress in children during actual testifying is taking place;
3. Different measures of preparation are applied to children of different ages;
4. Agencies such as the police are involved to provide complementary services and to strengthen the programme;
5. The involvement of intermediaries to accompany children to court when testifying was subject to an application being made to the court in accordance with the provisions of Section 174 of the country’s statutes;
6. That some children may be in institutions and therefore preparations prior to and after court process would have to be directed to those responsible for the child, and not necessarily the parent (s).

**Recommendations on the Way Forward**

1. There is need for cooperation between different agencies and bodies in supporting children;
2. The best interest of the child should be paid due regard when preparing a child;
3. While preparing children for testimony, it is important to facilitate the healing process.
4. As much as possible, persons who have custody of the children or those with whom they are familiar should be involved in their preparation process;
5. Feeding of child witnesses should be effected;
6. There is need for pre- and post-court proceeding debriefings of children and persons accompanying them;
7. Need for community involvement in continued child protection, before and after court proceedings;
8. Varied interventions are required at different stages of the child’s experiences in sexual abuse and their varied conditions. This is so especially if the child is experiencing secondary trauma.


By Katarina Westman, Technical Advisor ECPAT International, Bangkok, Thailand

The presentation was based on the ongoing work of implementing the Code of Conduct at the Kenyan Coast.

Key/Emerging issues
1. It is important to ensure that all agencies and enterprises dealing in travel and tourism, whether large or small, sign up to the Code of Conduct.
2. A home-made Code of Conduct should be adopted in order to ensure local ownership of the Code and relevance to the local setting.
3. The success of the system depends on structures being in place to facilitate reporting of the contraventions of the Code of Conduct.
4. Potential investors need to be involved in meeting the requirements of the Code of Conduct;
5. Significance of structures being in place to facilitate reporting of contraventions of the Code of Conduct to the relevant authorities;
6. Available evidence indicates that 60% of sexual exploitation is perpetrated by foreigners.

Recommendations on the Way Forward
1. All stakeholders need to be involved in the implementation and adherence to the Code.
2. There is need for more research to provide adequate data on the phenomenon of involvement of children in sex tourism;
3. Stiff laws should be put in place to deter perpetrators of sexual abuse;
4. Community empowerment projects should be stepped up to pre-empt the situation where families encourage children to engage in child sexual abuse;
5. The government needs to step up its poverty eradication campaigns;
6. Inter-territorial enforcement of the existing laws should be addressed.

Part 3: International Evidence-based good practices of interventions in the field of vulnerable or abused children

By Dr. Stefania Meda, Catholic University of the Sacred Heart of Milan, Italy

The data presented was drawn from a study of slum and street boys in Nairobi.

Key Issues/ Emerging issues
1. There is a lack of community involvement in the lives of street-children;
2. the findings of the study had exposed new challenges, i.e it was an eye-opener;
3. In comparison with other children, slum and street-children are more vulnerable to child sexual abuse;
4. Drugs and substance abuse contribute heavily to child sexual abuse of this group.
5. Children are keenly aware of one another’s predicaments and problems.
Recommendations
1. The local communities should be encouraged to take part in improving the welfare of its children;
2. Data should be presented in co-relational methods since different sites and populations were part of the study. This would show the extent of vulnerability of street and slum children in relation to other populations;
3. Programmes seeking solutions to child sexual abuse should incorporate children’s contributions;
4. Communities need to recognize and accept that sodomy has been an existing practice and is not new;
5. There is need for children to be empowered to be able to take better care of themselves;
6. The problem of drug and substance abuse should be tackled with more purpose.
7. The community should be empowered economically in order to pre-empt the occurrence of destitute, abandoned and homeless children;
8. It is imperative that poverty be addressed to reduce children’s vulnerability to sexual abuse.

Part 4: Safe Schools in Mozambique, Malawi and Uganda
Tanja van de Linde, Africa Area Education Advisor, Save the Children, USA, Nairobi, Kenya

Key Issues
1. That sexual abuse of children in schools by teachers can go on undetected by the school authorities;
2. That the abuse took many different forms such as bullying and teasing which also contributed to school drop-out;
3. The abuse of pupils by their teachers is a boundary violation and a power issue

Recommendations on the Way Forward
1. That there is need for sensitization of school authorities to reduce incidences of undetected sexual abuse by teachers and other pupils;
2. There is need for an enforcement of the Code of Conduct for teachers and those who contravene it should have their services terminated and not merely transferred to another school as this would be merely perpetuation of the problem;
3. There is need for a review of curriculum for teachers training programmes to ensure that it is an intervention into the problem of CSA in the school environment;
4. Emergency and disaster situations require particular attention to curb CSA.

Workshop 8: Trafficking and Sexual Violence against Children
Convenor: Prof. Susan Kreston, University of Free State, South Africa
Rapporteur: Mrs. A.O. Abiodun, NAPTIP, Nigeria

Participants deliberated on child sexual tourism and trafficking and other forms of sexual exploitation. The following were the highlights:

Key Issues
1. Trafficking is akin to slavery in the 21st century context.
3. Article 3 of the United Nations Convention Against Transnational Organized Crime
defines trafficking in persons comprehensively: it covers the “recruitment, transfer,
harbouring or receipt of persons” for purposes of trafficking.

Emerging issues from the workshop
1. There is little information and knowledge about child sex tourism in many African
countries.
2. While local communities frown upon the vice of commercial sex tourism, they have
failed to take a decisive stand against the vice.

Recommendations on the Way Forward
1. Tourism industry, government and society and NGOs must ensure protection against
children;
2. There is need for further research on child trafficking and sex tourism in Africa;
3. A National Plan of Action should be established in the field of trafficking to
strengthen existing legal framework;
4. The local community should adopt a clear stance against commercial sexual
exploitation of children.
5. The tourism industry members should participate in the code of conduct for the
protection of children.

Workshop 11: Gender and Sexual Violence against Children
Convenor: Claudia Diaz Olavarrieta, National Institute of Public Health, Mexico

Part 1: Child Marriage and the Commercial Exploitation of Children
By Hindowa Lebbie, ECPAT International, Bangkok, Thailand

Key Issues
1. Child marriage is prevalent in all societies worldwide;
2. Child marriage is a form of commercial sexual exploitation: children are used for
sexual ends, in exchange for goods or payment in kind and parents or family
members marry off children for their benefit.
3. Some of the consequences of child marriage are:
   - Interrupted education.
   - Low access to health facilities because the victim is no longer considered a
     child.
   - High vulnerability to HIV/AIDS;
   - Denial of access of legal rights to the child due to the fact that marriage gives
     overriding rights to the husband.

Emerging issues from the workshop
Some of the factors that promote child marriage are:
   - Poverty;
   - Broken families;
   - The lure of economic gain through bride-price
   - Gender inequality
   - Trokoshi (Marrying girl to shrine)
   - Civil conflict – marrying girl to warlord in order to get protection.
   - Family ties/debt bondage;
- International legal framework established to address child marriages is not harmonized with child rights laws in many countries in Africa and so are not properly enforced.

**Recommendations on the Way Forward**
1. Governments should challenge practices and myths that perpetrate abuse.
2. Governments should resolve civil conflicts that lead to child marriage.
3. More resources should be allocated towards law enforcement.
4. Training and awareness raising campaigns should be stepped up.

**Part 2: Child Sexual Abuse and the co-habitee question: A relationship of betrayal of trust and the trauma of silence in a typical Nigerian community**
*By Mrs. Plangsat B. Dayil, Department of Political Science, University of Jos, Nigeria*

**Key Issues**
1. The marriage relationship is not just between the spouses; the support of the relatives of both partners is just as important.
2. Children are normally socialized to trust and respect such cohabiting co-parents, just as if they were their own parents. Yet, some of these persons may misuse the special relationship to abuse the child.
3. Values of shyness and modesty for the sake of the family are associated with being a good child;
4. Sex is viewed as a taboo topic and parents do not discuss it with children beyond telling the children to abstain before marriage

**Emerging Issues**
1. Some societies believe that shyness, modesty and secrecy, for the sake of the family, are a precondition to being a good child.
2. Sex remains a taboo topic in many societies, so that parents never discuss sexuality with their children.
3. Most people are not interested in programmes on child sexual abuse.
4. Inappropriate touching and offensive behaviour is common in local schools.
5. More sexually abused girls report incidents of abuse to their parents, rather than to their teachers;
6. Cases of child sexual abuse in such situations are rarely reported but are resolved within the family.

**Recommendations on the Way Forward**
1. Society should encourage values in the family that encourage the swift reporting of sexual abuse.
2. Proper parenting techniques should be taught to parents.
3. Parents should shed the reservations and advise children about sexuality.
4. Schools should facilitate a friendly environment, conducive for reporting sexual abuse.
5. Children need to understand the appropriate and the inappropriate sexual behaviour, including touching.
Part 3: Combating Gender and Sexual Violence against Children in Nigeria Schools

By Dr. Florence Oluremi Olaleye, Department of Educational Foundations and Management, Faculty of Education, University of Ado-Ekiti, Nigeria

Key Issues
1. That teachers are the main perpetrators of sexual violence against children in schools;
2. Research indicates that sexual violence is rampant in Nigerian schools;
3. Most forms of violence in schools go unreported;
4. data available on the subject revealed that the common locations for sexual abuse incidents were the latrines and teachers houses after school;
5. Most girls report to parents or others than to schools after they have been abused;
6. Most boys do not report at all because they are afraid of the consequences.

Emerging Issues
1. The major negative consequences of CSA is- unwanted pregnancies, drop-outs, HIV and AIDS and emotional problems;
2. Girls are the main victims of sexual violence in the school situation.

Recommendations on the Way Forward
1. Schools should be declared safe places and safety measures put in place to ensure the safety of children;
2. children should be sensitized on inappropriate touching;
3. sanctions and codes of conduct should be enforced;
4. training and capacity building should be incorporated into the curricula, to address sexuality;
5. There should be spirited and sustained campaigns against sexual violence among stakeholders;
6. Schools should recruit counselors to be at hand for children when they need their services.

Workshop 12a: Culture and Child Sexual Abuse

Convenor: Dr. Christine Wasanga, Kenya
Rapporteur: Chidi Asika

Part 1: Challenges in Child Rape Victim Counseling: a study in Nairobi

By Joyce Simola Ombisi and Prof. Enos H.N. Njeru, Department of Sociology, University of Nairobi

Key Issues/Research Findings
1. Every 3 minutes, a child is raped, somewhere in the world.
2. Men are less sensitive or emotional, than women. Hence, this may affect the manner in which a judge or judicial officer arrives at his or her decision.

Emerging Issues from the workshop
1. Many children are unable to complete counseling for the following reasons:
   ▪ For counseling to be effective, care-givers need to be included; they are not always available.
   ▪ Lack of finances.
   ▪ Some families prefer to use traditional measures such as traditional medicine.
   ▪ Fear of the perpetrator.
2. The media is not very sensitive to abused children’s condition.
Recommendations on the Way Forward

1. Sensitize the public and all stakeholders, especially the media on how to handle issues on child abuse;
2. Provide simplified information to enhance awareness;
3. Educate parents to be more cautious with caregivers;
4. Awareness creation campaigns should be stepped up to educate the public on children’s rights.
5. Counselors and teachers should be trained to identify the issues involved in child sexual abuse and what to do should they arise;
6. Educate the public on children’s rights;
7. Play therapy should be encouraged as a form of counseling, since children of certain ages open up easier where it is employed.

Part 2: Rape Myth Acceptance (RMA) and under-reporting in Sub-Saharan Countries

By Kofi Boakye, Doctoral Researcher, University of Cambridge, Institute of Criminology, Cambridge, UK.

Key issues

1. Most of the media outlets report extremely stereotypical cases of child abuse, aimed at drawing a public outcry.
2. The publicity stunts employed by the media when reporting, scare away victims who would otherwise report on incidences of child abuse.
3. Child sexual abusers are a specialized group of offenders.
4. Child sexual abuse is more serious than the case of abuse involving an adult victim.
5. Data on the vice is questionable as there is no comprehensive research on the trend using employing a comparative analysis of historical data collected.

Emerging issues from the workshop

1. The problem of patriarchy and of power imbalance between men and women has ensured that reporting against a male abuser is more difficult than against a female abuser.
2. The Collective Shame Syndrome: It focuses on the broader long-term interest of the family and also on intra-familial family honour.
3. The African governments do not encourage research; instead, they accept work produced by foreigners without question. This lack of emphasis on research does not augur well for the fight against child sexual abuse in Africa.
4. Over-emphasis has been placed on the physical consequences on abuse at the expense of the psychological aftermath.
5. Governments do not appear to understand the psychological impact of CSA on the long-term productivity of the nation states.

Recommendations on the Way Forward

1. The media should be more conscious about the hazards to which children are exposed.
2. The community should be involved in the bulk of actions taken in tackling child sexual abuse problems, if certain community myths and beliefs are to be overhauled.
3. More robust community awareness campaigns should be launched, with regard to child sexual abuse.
4. There is need to train community members to be para-legals to infiltrate the families so as to work on the cases.
5. The issue of family homes which are so tiny that children witness normal sexual behaviour between adults, should be addressed by parents.
6. The African governments should invest in research on the area of child sexual abuse.
7. The society should change and appreciate the seriousness of the psychological cost of child sexual abuse, just as the physical cost is appreciated.
8. Child sexual abuse is a sickness that should be exposed and given due treatment; the abusers should also be rehabilitated.

Workshop 12b: Culture and Child Sexual Abuse

Convenor, Prof. Carol A. Plummer, Louisiana State University, USA
Rapporteur: Roselyne Okumu

Part 1: Child Sexual Abuse: Case Study of Southern Sudan

By Alphaxard Chabari, Eva Palmqvist and Amos Odeke, Save the Children Sweden, Southern Sudan programme

Key issues
1. In Sudan, there is a general lack of information on girls and boys.
2. Physically humiliating practices are widely practiced.
3. Corporal punishment is rampant
4. Early marriage and forced marriage are rife;
5. The most common locations where the vice is practiced are homes, in schools, at water pumps, market-places and during cultural dances;
6. There are numerous forms of sexual abuse which must be tackled differentially;
7. Children experience difficulties in reporting cases of abuse meted against them for fear of being accused of being responsible;
8. For girls the fear is compounded by the fact that they may be forced to marry the perpetrator;
9. Cultural practices perpetrate CSA, a girl in puberty has a bell tied around her waist, her house has a flag erected outside as a sign that there is a young girl who is ‘available’ for marriage;
10. Due to the power bestowed upon teachers they have the power to marry any one they want officially

Emerging Issues
1. The extent of involvement by opinion leaders was discussed;
2. Importance of using role models from Southern Sudan;
3. Use of culture positively to break down the barriers;
4. Environmental factors that do not allow children to complete their schooling;
5. Community structures required to address the issues were explored

Recommendations and way forward
1. There should be programmes in place for training community support groups, and also train them on reporting cases of CSA;
2. There is a need to put together efficient reporting mechanisms for sexual abuse cases;
3. Child Helpline International have expressed their readiness to provide services;
4. Promotion of education of children.
**Part 2: Cultural Risks and Protective Factors for Child Sexual Abuse in various Kenyan tribes: an exploration study**

*Prof. Carol Plummer, Louisiana State University, School of Social Work, Wambui Njuguna, ANPPCAN, Regional Office and Shabari Dey, Louisiana State University, School of Social Work*

The workshop was an exploratory study of the traditional African cultural treatment of child sexual abuse.

**Key Issues**

Some of the positive aspects of African culture are:

1. The harsh penalties serve as effective deterrence to would-be abusers.
2. The system of separating children from adults in many aspects was itself protective of the vulnerable children.
3. The importance that was accorded to virginity ensured that sexual activity was uncommon among children.
4. Guidance and Supervision: The arrangement where children slept with grandparents was a protective mechanism.
5. Sex and Gender taboos: sitting on the bed of someone of the opposite sex.
6. Modesty

**Emerging issues**

Risk factors in cultures

1. That men are more powerful than the women, hence a patriarchal bias;
2. Female Genital Mutilation and the accompanying marital obligations perpetuates sexual exploitation of young girls and raises expectation of marriage among young men after they are circumcised;
3. A culture of silence regarding sexual matters
4. The social change has clouded the position of the child in society.
5. Foreign influence has eroded certain values.

**Recommendations on the Way Forward**

1. Children’s participation in mainstream society should be encouraged
2. Education should be used as the key to shaping up adulthood and supporting communities;
3. Consideration should be given to cultural changes to assist communities to understand the risk factors involved.
4. Training of Community Protection Teams should be used to help them use positive cultural values;
5. Rites of Passage: Education should be used as a key to moulding adults to support their communities- FGM can be replaced by initiation ceremonies which inculcate positive life-skills as transitory to adulthood.

**Workshop 13b: Institutional Child Sexual Abuse**

**The Extent of Child Sexual Abuse in Zimbabwean Schools**

*By Ephias Gudyana, Midlands State University, Faculty of Education, Gweru, Zimbabwe*

*Convenor: Dr. Sally Bundy*

**Key Issues and Research Findings**

1. Brothers-in-law and teachers are the main culprits of Child Sexual Abuse.
2. Cultural shifts are causing an increase in Child Sexual Abuse
Emerging Issues from the Workshop
1. Sisters-in-law are increasingly abusing their younger compatriots (their brothers-in-law)
2. There is a misconception that having sexual intercourse with an older woman will keep younger boys safe from AIDS.
3. In many jurisdictions, it remains unclear as to whether a woman can rape a man within the legal definition of rape.

Recommendations on the way forward
1. There is need for more research on child-child sexual abuse;
2. There is need to establish what happens to children who have had early exposure to CSA;
3. Teachers should undergo a course in guidance and counseling and also on the warning signs of child sexual abuse.
4. Parents should be trained on how to guide their children in order to avoid moral decadence.
5. Myths that encourage incidents of sexual abuse with young children, should be exposed and shunned.
6. A system of peer reporting by teachers should be encouraged in order to reduce cases of Child Sexual Abuse among teachers.
7. Peer reporting among teachers should be encouraged to reduce cases of CSA among teachers;
8. A degree course in counseling and guidance should be offered at university level, in order to increase the number of professionals;
9. There should be additional specialized counseling for children who have had earlier exposure to sexual abuse.

SEMINAR PRESENTATION

Part 1: Prevalence of Childhood Sexual Violence in Swaziland,
Zodwa Mthethwa (UNICEF), Swaziland

Key Issues
1. An analysis of the sexual activity of females aged between 13 and 24 established that they became sexually active from as early as 15 years and that the percentage increases with age.
2. Most females first sexual encounters were with willing partners (43.5%) as compared to 2.5% who were raped.
3. 33% of girls experience sexual violence before the age of 18. Those who experienced attempted unwanted intercourse constituted 16.8%.

Emerging Issues
A survey on sexual violence among females 13 to 24 years of age revealed that lifetime prevalence of sexual violence among females within this age bracket was very common. The following statistics were resultant from the study:
• Attempted unwanted rape - 27.2%
• Unwanted touching - 23%
• Actual coerced intercourse - 17.8%
Recommendations
1. There should be a multi-sectoral partnership in research efforts, policy formulation and implementation of programmes aimed at protecting children against sexual violence.
2. Awareness programmes on sexual violence and protection measures should be stepped up.

Part 2: To Feel Safe Is Every Child’s Right
By Maggie Escartin

Key Issues
1. The challenge of ending child sexual abuse is the challenge of breaking the link between adults’ problems and children’s pain.
2. More emphasis needs to be put on prevention and empowering the child with safety skills.
3. Self awareness is key in equipping the child with safety skills and in ensuring that they know who they are, appreciate their bodies and that it is their right to feel safe.
4. Programmes should endeavour to increase confidence and cooperation with parents and other parents who interact closely with children, for example teachers, to increase their success rate.
5. A 12-month prevalence of sexual violence between 2006 and 2007 indicated that out of the population of 267 interviewees, 20.5% experienced sexual violence; while 10.2% experienced attempted unwanted intercourse.
6. There is a high correlation between violence and first time sexual encounters for females.
7. Effects of sexual violence range from depression, sleep disorders, HIV and AIDS to unwanted pregnancies to name but a few.

Emerging Issues
1. The child is a major determinant in any effort to deter sexual abuse and any mitigation efforts must be owned by children; they must, thus, be able to know where, when, why and how to seek help.
2. The manner in which adults teach the issue of sexual safety is not very child-friendly.

Recommendations on the Way Forward
1. Adults (teachers, parents, guardians) must have a paradigm shift in their approach to teaching sexual safety.
2. Equip the child with knowledge on how to ensure that they avoid falling victims of sexual abuse.
3. Equip children with the skills and knowledge on how to recognize and express natural human emotions, namely, anger, frustration, joy, ecstasy and confusion.
4. There is need for society to work on cultural attitudes and belief systems so that children appreciate that even their parents are potential abusers.
5. There is need to integrate a model that takes into consideration the use of language that is fit for a child, in our education systems.
6. There should be a multi-sectoral partnership in research initiatives, policy formulation and programme implementation aimed at protecting the female against sexual violence.
7. Awareness programmes on sexual violence and protection measures and skills should be pursued.
Appendix I: Programme

THE FIRST INTERNATIONAL CONFERENCE IN AFRICA ON CHILD SEXUAL ABUSE

24 – 26 September 2007, Intercontinental Hotel, Nairobi, Kenya

Theme: Enhancing Knowledge through Research, Practice and Partnership to Protect Children against Sexual Abuse

DAY ONE, MONDAY, 24 SEPTEMBER 2007

Chair: Prof Frederick Okatcha - Kenyatta University

9.00 – 11:00am Opening Ceremony

Welcome Remarks
Conference Chair

Official Opening
Hon. Dr. Arthur Moody Awori, Vice-President and Minister for Home Affairs, Republic of Kenya

Key Note Address
Jim Emerson, Chief Operating Officer, Plan International

11:00 – 11:30am Coffee / Tea Break

11:30 – 12:30pm 1st Plenary: Overview of Child Sexual Abuse

✓ The global overview of child sexual abuse
Prof. Carol A. Plummer - School of Social Work, Louisiana State University, USA

12:30 – 1:30pm Lunch Break

Chair: Prof Peter Ebigbo from Nigeria and the President of ANPPCAN

1:30 – 2:30pm 2nd Plenary: Different Forms of Interventions in Child Sexual Abuse

✓ Child sexual abuse: a case study of Nairobi Womens’ Hospital - Gender Violence Recovery Centre
Dr. Sam Thenya: Executive Director, Gender Violence Recovery Centre, Nairobi, Kenya
Lucy Kiama: Programme Manager, Gender Violence Recovery Centre, Nairobi, Kenya
Innovative community-based approaches to combat child trafficking and sexual abuse in Sierra Leone
Dr. Saskia Brand: Deputy Regional Manager, Circle Project, Winrock International, Mali

2:30 – 5:30pm Concurrent Workshops

Workshop 1: Existing Knowledge on Child Sexual Abuse
Chair: Prof Julia Sloth-Nielsen: University of the Western Cape, South Africa

Assessing the vulnerability and impacts of sexual abuse on children in Nigeria – from the perspectives of children
Tolulope Monsola Ola, Sound Health Initiative (SHIN), Ekiti, Nigeria

Consequences of child sexual abuse: an exploratory study of student teacher’s perceptions
Dr Theresa K. Kinai, Department of Educational Psychology, Kenyatta University, Kenya

Substance use and risky sexual behaviour among adolescents in four Sub-Saharan African countries: the effect of physical and sexual abuse
Caroline W. Kabiru and Joanne Crichton, African Population and Health Research Centre, Shelter-Afrique Centre, Nairobi, Kenya

Where we are in terms of understanding the sexual abuse of people with intellectual disability?
Prof Nareadi Phasha, Department of Educational Psychology, University of Johannesburg, South Africa

Workshop 2: Prevention of Child Sexual Abuse
Chair: Prof Sheryl Buske: DePaul College of Law, USA

Children conceptualization of child sexual abuse, abusers and prevention strategies: a study of primary school children in Kayunga District, Central Uganda
James Kakooza, Research Associate, Makerere Institute for Social Research (MISR), Kampala, Uganda

Child sexual abuse in urban areas and what we can do to stop it
Rana Gulzar Ahmed and Muhammad Wasim, Street NGO, Rana Street, Teacher Colony, Aliprur, 34450, Pakistan

Prevention, care and support for children affected by sexual abuse using the child helpline: a case Study of action for children - Uganda
Francis Mulekya Bwambale (HIV/Aids Programme Specialist) and Tusiimire Miriam, Uganda

Prevention of child sexual abuse
Mercy Chege, After-Care Specialist, International Justice Mission (IJM), Kenya

Workshop 3: Different Forms of Interventions in Child Sexual Abuse
Chair: Dr Sammy Thenya: Nairobi Womens Hospital, Kenya

Care and support for children suffering sexual assault
Dr Jill Keesbury, and Ian Askew (Population Council, Nairobi) Julia Kim (Radar, South Africa), Ndaku Kilonzo, (Liverpool VCT, Kenya)

Research and interventions: tools for breaking the silence
Different forms of interventions in child sexual abuse
Chida Asika – Enahoro, Miramar, Florida

Isolabantwana: eye on a child: a community response to child protection
Trix Marais, Regional Director, Child Welfare South Africa

Where the streets have no name: factors predicting the provision of counseling and social work services for child rape victims in South Africa
Prof Steven J. Collings, School of Psychology, University of KwaZulu-Natal, South Africa

Workshop 4: International Experiences in Treatment, Prevention and Interventions

Chair: Virginia A. Lynch, Forensic Clinical Nurse Specialist, Beth El College of Nursing and Health Sciences, University of Colorado, USA

Child protection and protecting childhood – the development of a training programme for OVC MOVE field staff in Lesotho
Mamoletsane Khati, HIV and AIDS Assistant Programme Manager, Catholic Relief Services, Lesotho.

Child Witnesses, child sexual abuse and international law: recent legislative developments and a cause for optimism
Benyam Mezmur, Doctoral Research Intern, University of Western Cape, South Africa

Forensic Nursing Science: New Strategies in Paediatric Sexual Assault Examination
Virginia A. Lynch, Forensic Clinical Nurse Specialists, Faculty, Beth El College of Nursing and Health Sciences, University of Colorado, Colorado Springs USA

Humanizing the response to child victims of sexual abuse: International Lessons
Janet E. Fine, Executive Director, Massachusetts Office for Victim Assistance, Boston, USA

Our Bodies... their battleground: interrogating sexual abuse in the Rwandan Genocide
Bukola Adeyemi Oyeniri, Redeemers University, Nigeria

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<th>3:30 – 4.00pm</th>
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<td>4.00 - 5.30pm</td>
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<td>6:00 – 8:00pm</td>
<td>Reception for invited guests and Conference delegates</td>
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Report of the 1st International Conference in Africa on Child Sexual Abuse
DAY TWO, TUESDAY, 25 SEPTEMBER 2007

9:00 – 10:30am  Plenary: The Role of Policy and Legislation in the Fight against Child Sexual Abuse

Chair: Dr Rebecca M. Nyonyintono: ANPPCAN Uganda

✓ Establishment of South Africa’s child abuse register
   Prof. Julia Sloth-Nielsen, Senior Professor and Specialist in Children’s Rights Law, Faculty of the Western Cape, South Africa

✓ Making everyone accountable: two approaches used in the United States
   Prof Sheryl Buske, DePaul College of Law, Illinois, USA

✓ Role of policy and legislation in the fight against child sexual abuse: a case of Kenya
   Ahmed Hussein, Director of Children’s Services, Office of the Vice-President and Ministry of Home Affairs, Kenya

10:30 – 10:45am  Coffee / Tea Break

10:45 – 1:00pm  Concurrent Workshops

Workshop 5: Role of Policy and Legislation in the Fight against Child Sexual Abuse

Chair: Prof Carol A. Plummer: Louisiana State University, USA

Catalyzing appropriate judicial and legal responses to child sexual abuse
   Pamela Pine and Nora Sanchez, United States of America

Creation and institutionalization of a national sex offender registry (NOSR)
   Janice Ogonji and John Kipchumbah, Legal Aid Research and Policy Foundation, Kenya

Institutionalizing the protection of children against child sexual abuse
   Tom Chavangi, Executive Director, Children’s Legal Action Network (CLAN), Kenya

The Children Act, 2005: model of practice to protect children from sexual exploitation
   Njundu Drammeh, Anglophone Sub-Regional Coordinator, ECPAT International, West Africa, Gambia

Using the law to protect children from abuse
   Petronella Nenjerama, Coordinator, Justice for Children Trust Zimbabwe

Workshop 6: The Role of Media in the Fight against Child Sexual Abuse

Chair: Damali Robertson: Stanford University, Jamaica

Ethical issues in media coverage in child sexual abuse in Uganda: challenges and opportunities
Joshua Lubandi, Programme Officer, Information, ANPPCAN Uganda Chapter, Kampala, Uganda

Mass media strategies in child sexual abuse
Joseph Wambuki, Research and Training, Consumer Trends Ltd., Nairobi, Kenya

Play as a model of treatment for sexually abused children in Kenya
Florence Mueni, Juvenile Justice Unit, Probation Service Headquarters, Nairobi.

Using entertainment education, mass communication and the media as tools to address child sexual abuse
Damali Robertson, External Relations Coordinator, Stanford University, Jamaica

Workshop 7: Best Practices in Treatment of Child Sexual Abuse

Chair: Dr Abiodun Agnes Popoola: University of Ado-Ekiti, Nigeria

Best practice models in dealing with children who have been sexually abused
Tania Moodley, Resources Aimed at the Prevention of Child Abuse and Neglect (RAPCAN), Cape Town, South Africa

The Implementation of Code of Conduct for the Protection of Children from Sexual Exploitation in Travel and Tourism in Kenya
Katarina Westman, Technical Advisor, ECPAT International, Bangkok, Thailand

International evidence-based good practices of interventions in the field of vulnerable or abused children
Professor Giovanna Rossi and Dr Stefania Meda, Catholic University of the Sacred Heart of Milan, Italy

Safe schools in Mozambique, Malawi and Uganda
Tanja van de Linde, Africa Area Education Advisor, Save the Children USA, Nairobi, Kenya

Workshop 8: Trafficking and Sexual Violence against Children

Chair: Prof Susan Kreston: University of Free State, South Africa

Child sex tourism and trafficking of children for sexual exploitation in Africa
Ms Patchareeboon Sakulpitkphon, ECPAT International, Bangkok, Thailand

The Globalization of child sexual abuse: trafficking in children
Prof Susan Kreston, Department of Law, Unit for Children’s Rights, University of Free State, South Africa

Trafficking and child sexual violence against children
Zachariah Amukhale Mayokani, Project Coordinator, Western HIV/AIDS Network, Kakamega, Kenya

1:00 - 2.00pm Lunch Break

2:00 – 3.00pm Plenary: Partnerships in the Fight against Child Sexual Abuse

Chair: Prof Giovanna Rossi: Catholic University of Milan, Italy

✓ Partnership for prevention; engaging stakeholders to improve organisation responses to sexual abuse and exploitation
Radha Ivory, Building Safer Organisations, HAP International, Maison Internationale de l’Environment, Geneva, Switzerland

✔ Protecting children from sexual violence in disasters and conflict situations
Stephanie Delaney, ECPAT International, Bangkok, Thailand

✔ Partnerships in the Fight against child sexual abuse: a case of Child Helpline International
Alice Mapenzi Kubo, Programme Coordinator - Africa, Child Helpline International, the Netherlands

3:00 – 5:30pm Concurrent Workshops

Workshop 9: Partnerships in the Fight against Child Sexual Abuse

Chair: Prof Nareadi Phasha, University of Johannesburg, South Africa

Child sexual abuse and new information technologies: inter-agency co-operation needed
Mari Laiho, Project Officer, Save the Children, Finland

Market women /men address fundamental issues surrounding child sexual abuse
Princess Olufemi-Kayode, Media Concern for Women and Children

Partnership with youth in the fight against commercial sexual exploitation (CSEC) in Africa
Ms. Junita Upadhyay, Child and Youth Participation Officer, ECPAT International

Engaging police and Transport authorities in the fight against sexual abuse and exploitation of children
Amakelew Cherkoise, Executive Director, Forum on Street Children, Ethiopia

Facilitating positive partnership to fight child sexual abuse: a case of Ethio-Child Focused Association (ECFA)
Yisrak Kabede, Ethio - Child Focused Association (ECFA), Addis Ababa, Ethiopia.

Workshop 10: Community Participation in the Fight against Child Sexual Abuse

Chair: Gill Gordon: Senior Technical Advisor - International HIV/Aids Alliance

Community attitudes to child sexual abuse in rural Mozambique
Julioa Novela, Save the Children UK, Mozambique

From tricks to abuse
Marthe WILLIAM, IFAN

The place of faith community in fighting child sexual abuse
Fred Nyabera, Fellowship of Christian Councils and Churches in the Great Lakes and the Horn of Africa (FECCCLAHA)

Using participatory approaches to fight child sexual abuse in communities in Zimbabwe and Zambia
Gill Gordon, Senior Technical Advisor - Prevention, International HIV/Aids Alliance, Brighton, United Kingdom -, Loveness Chirwa - Youth for Christ, Zimbabwe -, Zikhalo Phiri - Young, happy, health and Safe, Zambia
Seminar Presentations

Seminar 1

The process of developing a national action plan on combating sexual exploitation of children in tourism
Mihiri Fernando, UNICEF – Consultant, Combating Child Sex Tourism, Sri Lanka

Prevalence of childhood sexual violence – Swaziland, 2007
Prof Matthew Breiding, EIS Officer, National Centre for Injury Prevention and Control Centres for Disease Control and Prevention, Atlanta and Prof Jama Gulaid, UNICEF - Swaziland

I have a right to feel Safe
Maggie Escartin, Australia

Seminar 2

Prevalence of the sexual violence at debut sexual encounter among out-of-school adolescents in Ilorin, Nigeria
Monehin J.O, Araye M.O, Aderibigde S.A, Nigeria

Influence of poverty and cultural stereotype on gender and sexual violence against children in Nigerian society
Dr Abiodun Agnes Popoola, University of Ado-Ekiti, Nigeria

A Directory of projects and activities for street children in Nairobi
Christopher Wakube, Programme Manager, Kivuli Centre, Koinonia Community, - Kenya

3:30 – 4:00pm  Tea Break

4.00 - 5.30pm  Workshops and Seminars Continue

5.00pm  Poster Presentations

Child sexual abuse prevention in Kenya: problems and possibilities
Carol A. Plummer and Shabari Dey, Louisiana State University, USA

Digital stories as an intervention tool for child sexual abuse
Raoul R. Swart, One Man Can, provincial Coordinator, Sonke Gender Justice Network

Employing art and poetry in advocating children’s rights
Jan Jordan, Director, Art for Humanity, Dept. of Fine Art, Durban University of Technology and Dr. Pamela Pine, Stop the Silence, USA

Exploitation and child sexual abuse in Nigeria
Dr John Lola Okunola, Department of Behavioural Studies, College of Management Sciences, Redeemer’s University, Nigeria

Influence of child hawking on academic performance and sexual abuse
Blavo J.F. and Dr Anywanu F.C., University of Ibadan, Nigeria
DAY THREE, WEDNESDAY 26 SEPTEMBER 2007

8.30 – 9.00am Presentation of main highlights of the Conference by the Conference Rapporteur

9.00 – 10:30am 1st Plenary: Gender and Institutional Child Sexual Abuse

Chair: Dr Sally Nyandiya-Bundy, from Zimbabwe, the Treasurer of ANPPCAN

✓ Abuse of gender non-conformist children
  Donna Piddo, Social Scientist/Consultant, School for International Training, Nairobi, Kenya and Nicholas Harper, North Carolina, USA

✓ Child sexual abuse: data from a tertiary care hospital in Mexico City
  Claudia Diaz Olavarrieta, National Institute of Public Health, Mexico

✓ Institutional child sexual abuse
  Joseph Nderitu Kibugu, Country Director, International Justice Mission, Kenya

✓ Sexual coercion among adolescent girls in Yoruba land
  Dr Florence Akanle Foluso, Institute of Education, University of Ado-Ekiti, Nigeria

10:30 – 11.00am Coffee / Tea Break

11:00 -1:00pm Concurrent Workshops

Workshop 11: Gender and Sexual Violence against Children

Chair: Claudia Diaz Olavarrieta, National Institute of Public Health, Mexico

Child marriage and the commercial sexual exploitation of children
  Hindowa Lebbie, ECPAT International, Bangkok, Thailand

Child sexual abuse and the co-habitee question: a relationship of betrayal of trust and the trauma of silence in a typical Nigerian community
  Mrs Plangsat B. Dayil, Department of Political Science, University of Jos, Nigeria

Combating gender and sexual violence against children in Nigeria schools
  Dr Florence Oluremi Olaleye, Department of Educational Foundations and Management, Faculty of Education, University of Ado-Ekiti, Nigeria

The experiences and coping strategies of boy victims of sexual abuse
  Mahlao Judith Diaho and Thabelang Bernard Thanisi, Gender and Advocacy Strategy Group, Maseru, Lesotho

Workshops 12a: Culture and Child Sexual Abuse

Chair: Dr Christine Wasanga, Department of Educational Psychology, Kenyatta University

Challenges in child rape victim counseling: a study in Nairobi
  Joyce Simola Ombisi and Prof Enos H.N. Njeru, Department of Sociology, University of Nairobi

Child socialization and sexual abuse among the Yoruba, south west Nigeria
  Femi Rufus Tinuola, Department of Sociology, Faculty of Social Science, Kogi State University, Nigeria

Early and forced marriage or concealing sexual abuse
Rape myth acceptance (RMA) and child Sexual abuse: some preliminary survey finding in Ghana
Kofi E. Boakye, Doctoral Researcher, University of Cambridge, Institute of Criminology, Cambridge, the United Kingdom

Workshops 12b: Culture and Child Sexual Abuse

Chair: Prof Carol A. Plummer: Louisiana State University, USA
Child sexual abuse in southern Sudan
Alphaxard Chabari, Eva Palmqvist, and Amos Odeke, Save the Children Sweden, Southern Sudan programme

Cultural risks and protective factors for child sexual abuse in various Kenyan tribes: an exploration study
Prof Carol A. Plummer, (Louisiana Sate University, School of Social Work) Wambui Njuguna (ANPPCAN Regional Office) and Shabari Dey, (Louisiana State University, School of Social Work)

Protecting the girl child against sexual abuse in the Ogoni culture
Joseph Kinanee and J.N. Joe-Kinanee, Rivers State College of Education, Dept of Psychology, Guidance and Counseling, Nigeria

Slum culture and child sexual abuse
Martin Kung’a Kibiro, Child Development Worker, Child of Destiny – Child Development Centre - Nakuru, Kenya

Workshop 13a: Institutional Child Sexual Abuse

Chair: Prof Almon Shumba: University of Forte Hare, South Africa
Abuse and exploitation of child domestic workers in Africa
Gnandi Kpandipou, Wao Afrique, Lome, Togo

Child sexual abuse in schools goes unnoticed: a case of enhancement of universal primary education and community
Twesigye Consilous Rwanyonga, Programme Officer, Guidance and Counseling, Aga Khan Education Service, Uganda

Child sexual abuse: reasons and justifications used by child abuse perpetrators in Zimbabwean schools
Prof Almon Shumba, School of Post Graduate Studies, Faculty of Education, University of Forte Hare, South Africa

Creating child safe organisations
Sinart King, ECPAT International, Bangkok, Thailand

Workshop 13b: Institutional Child Sexual Abuse

Chair: Dr Pamela Pine: Chief Executive Officer, Stop the Silence, USA
Barriers and opportunities in the use of participatory HIV/Aids education approaches in fighting CSA and gender violence in Kenyan schools
Rachael Nyamai, Assistant Lecturer, Educational Foundations Department, Kenyatta University, Nairobi, Kenya

Driving factors in sexual coercion and physical abuse among secondary school students in Ibadan, Nigeria
Omore Grace Toyin (Centre for HIV/Aids Intervention, Nigeria (CEHAIN)) and Ademola Johnson Ajawon - African Regional Health Centre, Nigeria.
The extent of child sexual abuse in Zimbabwean schools
Ephias Gudyanga, Midlands State University, Faculty of Education, Gweru, Zimbabwe

1:30 – 3:30pm  Lunch and Official Closure

Chair: Hon. Lady Justice Joyce Aluoch
Head, Family Division of High Court and Chairperson of Task Force on Sex Offences Act, 2006

Official Closure
Hon. S. Amos Wako, Attorney General, Kenya

Conference Secretariat

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Website. www.anppcan.org
Appendix II : Delegates that attended the Conference

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