

Baseline Evaluation on the Integrated Community-Based Child Protection and Youth Project in Kajiado County

Ch^{*}IdFund



TABLE OF CONTENTS

ACKNOWLEDGEMENT	
EXECUTIVE SUMMARY	8
1. CHAPTER ONE: INTRODUCTION/BACKGROUND	12
1.1. Project Background Information	12
1.2. Baseline Study purpose	12
1.2.1. Specific objectives of the baseline assessment	12
1.3. General Context of the study	13
2. CHAPTER TWO: METHODOLOGY	15
1.4. Study design	15
1.5. Study area description	15
1.6. The Study Population	16
1.7. Sampling techniques and procedures	16
1.7.1. Quantitative beneficiary sample survey	16
1.7.2. Qualitative beneficiary sample survey	17
1.8. Data Collection and Field Work	17
1.8.1. Training of Enumerators and Supervisors	17
1.8.2. Data Collection techniques	
1.9. Data Management, Analysis and Processing	20
1.9.1. Data analysis and processing of Quantitative aspect of the study	20
1.9.2. Data analysis and processing of the Qualitative aspect of the study	20
1.10. Ethical consideration	21
1.11. Study Limitations	22
3. CHAPTER THREE: BASELINE STUDY FINDINGS	23
3.1. Introduction	23
3.2. Demographic Characteristic of Survey Respondents	23
3.3. Awareness on Child Protection Issues	23
3.3.1. Children's Knowledge and Awareness on protection issues	24
3.4. Child Protection Risks in school and community	25
3.4.1. Prevalence of various forms of Emotional Violence	25
3.4.2. Prevalence of various forms of Physical Violence	25
3.4.3. Prevalence of various forms of Sexual Violence	26

	3.4	.4.	Children most affected by Child Abuse	26
	3.4	.5.	Perpetrators of child Abuse	
3	8.5.	Awa	areness on Child Rights	28
	3.5	.1.	Children's Level of Knowledge and Awareness on Child Rights	28
	3.5	.2.	Children's Access to Information on Child Rights	29
3	8.6.	Chi	ldren's participation in own protection needs	30
	3.6		Respect of views of children in their own protection needs	
3	8.7.	Acc	ess to Quality Educational Services	33
	3.7	.1.	Child protection concerns in schools	34
	3.7	.2.	Children who witness a child being hit or humiliated in school	34
	3.7	.3.	Children dropping out of school	34
	3.7	.4.	Children's Access to Life skills Education	35
	3.7	.5.	Children's Participation in Club activities	36
3	8.8.	Fun	nctionality of Community based child protection structures	37
	3.8	.1.	Children's utilization of community based child protection structures	37
	3.8	.2.	Reporting of child Abuse/Violation	38
3	8.9.	Ref	erral Mechanisms for Child Protection	39
	3.9	.1.	Children referred to access child protection services	40
	3.9	.2.	Community-based child protection committee activities	41
2	2.1.	Fun	nctionality of Inkisanjani vocational and resource center	41
3.	CH	APT	ER FOUR: CONCLUSION AND RECOMMENDATION	43
3	8.1.	Con	nclusion	43
3	8.2.	Rec	ommendation	44
4.	RE	FFRI	ENCE	45
5.	AP	PENI	DICES	46

LIST OF TABLES

Table 1 List of sampled children for quantitative survey17
Table 2 List of Key informants
Table 3 List of Focus Group Respondents
Table 4 Demographic Characteristics of the quantitative baseline respondents
Table 5 List of children responses on what they consider as child abuse
Table 6 Percentage of children of report on the prevalence of various forms of emotional violence 25
Table 7 Percentage of children who report on the prevalence of various forms of physical violence. 25
Table 8 Percentage of children who report on the prevalence of various forms of physical violence. 26
Table 9 Percentage of children who report those who a buse children mostly
Table 10 List of children responses on child rights
Table 11 List of children rights mostly upheld by the community
Table 12 Percentage of children who report that children are provided with accessible and appropriate
information
Table 13 List of responses on children's understanding on child participation on own protection needs
Table 14 Percentage of children reporting being involved in decision making processes
Table 15 Percentage of children who report that views of the child are accorded weight
Table 16 Percentage of ages and category of children mostly involved in decision making in the
community and in school
Table 17 Percentage of children who report witnessing a child being hit (humiliated in school)
Table 18 Percentage of children who drop out of schools 35
Table 19 List of life skills 35
Table 20 Percentage of children who report they can apply life skills in hypothetical situation
Table 21 Percentage of children who report those who support them in the community
Table 22: Percentage of children who would take action if they came across a child who has faced child
abuse or any form of violence
Table 23 List of child protection structures 39
Table 24 Percentage of children who report knowing a child who has been referred to access child
protection services
Table 25 Percentage of children in the community referred by community members
Table 26 Percentage of children who report that children affected by abuse, violence or exploitation
and feel safe and confident

LIST OF FIGURES

Figure 1 Map of Kajiado South Constituency	.15
Figure 2 Percentage of children aware of child protection issues in their school	.24
Figure 3 Percentage of the main victims of child a buse	.26
Figure 4: Percentage of Children and young people who participate in children clubs	.36
Figure 5 Percentage of children who report that there are no independent reporting mechanisms	s in
their community	.38

ACRONYMS

AACs- Area Advisory Councils

ACRWC- African Charter on the Rights and Welfare of the Child

AYA- Adolescent and Young Adults

BOMs- Board of Management

KII- Key Informant Interviews

- FGD- Focus Group Discussion
- FGM- Female Genital Mutilation
- FCM- Forced Child Marriage

FPE- Free Primary Education

MDGs- Millennium Development Goals

ODK-Open Data Kit

- SDGs- Sustainable Development Goals
- **TORs-** Terms of Reference

UNCRC-The UN Convention on the Rights of the Child

UN- United Nation

ACKNOWLEDGEMENT

This baseline report was prepared by a team of consultant from Move On Afrika led by Edwine Ochieng as the lead Monitoring and Evaluation Specialist. The organization is a Community Based Programme Development and Consultancy firm working with; NGOs, Public & Private Sector entities, FBOs and CBOs. We collaborate with our clients to assists them implement technical solutions for programmes/project in the most effective and efficient ways possible. The organization was commissioned by ChildFund Kenya to undertake an independent external rapid assessment of 'The Kajiado Integrated Community Based Child Protection and Youth project". The report presents finding and analysis on the overall assessment and has established the baseline indicator values upon which the project will be monitored. The report also makes recommendation on how the project interventions can be enhanced to attain the desired results. The evaluation team would like to extend sincere gratitude to all the people involved in preparing and facilitating the baseline study. Organizing such an evaluation is never void of obstacles! However, the team was able to talk to most of the study respondents who provided insightful information and knowledge that informed the preparation of the report. We hope that this baseline report will be a useful resources that will help ChildFund Kenya to create long-term positive change that benefits children; promotes children's rights and voices, and help children break free from poverty.

Sincerely yours,

DWI

Edwine Ochieng Monitoring and Evaluation Specialist Move On Afrika Consulting Ltd

EXECUTIVE SUMMARY

Summary of the project

The overall aim of the Kajiado Integrated Community Based Child Protection and Youth Project is to promote functional child protection systems and to facilitate increased empowerment and engagement of children in their own protection. The specific Child protection objectives of the project are to strengthen the school's protective environment, establish and strengthen reporting and referral mechanisms for child protection issues, Child protection advocacy and to strengthen the community based child protection system in Kuku and Mbirikani locations of Kajiado South constituency by December 2019. The purpose of the baseline study was to: Explore existence/availability of functional Community Based Child Protection and level of participation in their own protection needs. Establish if referral mechanisms for child protection exist and if children access services from the Community based child protection structures; Establish children's level of understanding on their rights to protection and utilize of Community based child protection structures to address cases of abuse and establish the level of functionality of Inkisanjani vocational and resource center.

Study Methodology

This rapid baseline survey was conducted as a comprehensive process using mixed approach of both quantitative and qualitative study methodology. Quantitative study approach involved use of baseline survey questionnaire to collect data from 504 sampled children from 12 primary and secondary schools. Qualitative study approach involved use of focus group discussions, key informant interview and review of secondary data information. Key informant interview was held with 11 respondents drawn from community leaders, teachers, government representatives and civil society actors involved in child protection work. The evaluation team also held 19 focus group discussion with parents, children and young adults in school, youths attending vocational training at Inkisanjani resource center, Maasai morans and community health workers. A total of 152 participants were consulted directly using focus group discussion. Secondary document analysis involved review of existing policy frameworks such as, The 2010 Constitution of Kenya (Article 53), Convention on the Rights of the Child, Africa Charter on the Rights and Welfare of the Child, Children Act 2001, Education Act 2013, The National Child Protection System for Kenya framework (2011)and Project documents. The baseline was conducted in Kajiado South Constituency in Kuku, Naretoi and Mbirikani locations.

Summary of Main Findings

The findings from the baseline are presented in a structure that broadly follows the evaluation purpose and objectives and the project baseline performance indicator matrix.

Demographic Characteristic of Survey Respondents

- **Age:** Children respondents involved in quantitative were between 14-16 years (56.5%) while 27.6% of the respondents were from 8-14 years and 15.9% were from age 17-18 years.
- **Gender:** Gender parity was considered in the selection of children respondents for quantitative survey with 49% of the respondents being female while 51% were male.

Child protection risks in the community

- The study established that 52.1% of children are awareness of child protection issues and risk in their community. According to 49.4% of children respondents, child abuse is still a problem in the community. Some of the child protection risks cited as common in the community are Physical abuse: (hurt or violence to a child's body e.g. hitting, beating, cutting) at 14.4%; Sexual abuse: (any sexual contact or threat of sexual contact with a child, harmful cultural activities) at 47.5%; Neglect: denying children basic needs or rights (food, shelter, warmth, education, health care etc.) at 25.5%; Emotional abuse: (saying and doing things to a child or in front of a child that makes a child feel afraid) at 12.6%.
- The main victims of child abuse are girls at 78% and boys at 22%. The most affected children by age are children aged 11-14 years at 52.4%, children aged 14-18 years at 26.2% and those aged 6-10 years at 12.7%. Discussion with various respondents, indicate that though girls are most affected, boys are also affected in equal measure. Boys suffer more when they are forced to drop out of school to herd cows or join moranisms and child labour to fend for their families. Girls are more affected due to community culture that require them to be circumcised in preparation for marriage.
- Children reported that child abuse is mostly perpetrated by family members at 35.7%, followed by strangers at 21% and by friends children trust at 18.5%. Teachers are also closely cited at 12.7% and distance relatives at 10.7%.

Awareness and understanding on Child Rights

- It is established that 70% of the children know about their rights and that 69.8% have been trained on child rights. The rights mostly upheld by the community are protection from harmful cultural practices e.g. FGM, Early Marriages, Community warriors at 39.8%; rights to education, health care, shelter, nutrition, parental care, name and birth registration at 38%. Rights not mostly upheld by the community include protection of children from hazardous or exploitative labour which is low at 3.6% followed by protection from abuse and neglect at 5.2% and protection from inhuman treatment and punishment at 9.5%.
- According to the baseline 53.2% of children reported being able to access information on their rights.
- The study established that] 40.9% of children and young people reported being involved in decision making. Only 48.6% of children and young people reported that there is direct involvement of children in monitoring their rights as stipulated on Child Rights Conventions. 59.2% confirmed that they are influencing their environment by reporting child abuse cases to their teachers, parents, chiefs and 'Balozi wa Nyumba¹'.
- 49.6% of children interviewed felt that children's views are taken into account. Children who are mostly involved in decision making are aged 14-18 years at 54.4% followed by those aged 10-14 years at 28.4%. Both boys and girls are involved in decision making at 40.9% and 39.7% respectively with children with disability being involved less at 8.1%.

¹ Head of the village

Access to Quality Educational Services

- The baseline established that there are children who have less access to services like educational and recreational activities, and health care as reported by 52.2% of children interviewed. 53.3% of children report being aware of child protection issues that occur in their school such as beating, bullying, insults or being called names; peer pressure and drug and substance abuse; hitting of a child by a teacher without reason and poor sanitation. 42.9% of children reported witnessing physical abuse meted on students within their schools. Only 64.5% felt that their schools are child-friendly with limited risks
- 52% of children reported that children drop out of school and that more boys 48.8% drop out of school compared to girls at 20.8%. Some of the reasons cited why children drop out of school are abuse, intimidation and discrimination by teachers, early pregnancy and child labour, lack of school fees, forced marriage and female genital mutilation.
- The study established that only 51.2% of children report that they have been trained on life skills and only 66% of children have practiced life skills in hypothetical situation
- The rapid assessment established that 51.6% of children report existence of children right clubs in their schools and that 61% of children participate in children right clubs

Functionality of Community based child protection structures

- The baseline established that persons in the community that best support children are parents at 19.6% followed by teachers at 16.8% and government officials at 15.1%, peer groups at 10.3%, religious leaders at 8.6%, relatives 8.4%, community at 6.9%, social workers at 6.3% and health workers at 5.0%. On aggregate children utilize informal community based child protection structures (i.e. peer groups, Nyumba Kumi, Balozi wa nyumba, parents, teachers, religious leaders, siblings and relatives) at 84.9% compared to formal structures (government officials such as chiefs, children officers, police, courts) at 15.1%. "Community is the most responsible for protecting children against violence and children always report cases of violence to their parents, teachers, chief balozi wa nyumba and Nyumba Kumi, church leaders. Parents are equally more involved in reporting cases that affect children"- **Responses from various FGD with children in school**.
- The baseline established that only 40% of children know where to report or procedure for reporting child abuse and only 39.5% of children surveyed confirmed that children do have access to independent reporting mechanism such as speak out boxes and children help desks.

Referral Mechanisms for Child Protection

• The baseline established that only 31.9% of children are aware of the existence of child protection referral institution and only 38.9% access referral services. The study further established that most children are referred by their family member/parents at 63.2%; friends at 15.8%; by teachers at 15.8% and Child protection committees at 5.3%. The most commonly used referral systems are the children officer, chief, rescue center such as Teule children home; Lenkai School for children, FIDA, County health care center for medical attention and police officers to arrest perpetrators of child abuse, child protection units based at the police station and Children help desks.

• The study also established that only 51.2% of children affected by abuse, violence or exploitation know whom to contact for help, and feel safe and confident to do so. Some of the reasons cited by children why they don't feel confident is fear of victimization, fear of being beaten or being chased away from the family, ignorance, fear and lack of community support.

Functionality of Inkisanjani vocational and resource center

 ChildFund Kenya in collaboration with Computer for schools Kenya has establish structures at Inkisanjani Vocational/Resource Centre to give adequate opportunities for the local youth to gain hands on skills for employment opportunities. The baseline establish that the center offers 6 ICT packages in the area of introduction to computer, Word processors. Excel, PowerPoint, internet and email, Access and hard ware maintenance as part of the standardized curriculum. Since its inception in July 2017 the center has graduated 8 youths with basic computer skills. During key informant interview with the center instructor it was established that the center currently has 26 students which is a marked improvement of 225% increase of students in the second intake. On life skills, 66% of youths who participated in the FGD that is 8 out of 12 indicated that they have been trained on life skills.

Conclusions and Recommendations

The project proposal as designed will address many of the observations made in relation to child protection concerns and functionality of the Inkisanjani vocational and resource center. However it is recommended that the project baseline indicator matrix be improved to include some aspects that may have emerged from the study and which can be monitored during implementation, midterm and end tem evaluation.

1. CHAPTER ONE: INTRODUCTION/BACKGROUND

1.1. Project Background Information

ChildFund's core intent is to help deprived, excluded and vulnerable children to have the capacity to improve their lives and give them the opportunity to become young adults, parents and leaders who bring lasting and positive change in their communities; and societies; and whose individuals and institutions participate in valuing, protecting, and promoting the worth and rights of children. ChildFund began working in Kenya in 1970, and currently works through 13 consolidated structures of 51 Community Organizations spread in 27 out 47 counties in Kenya, reaching approximately 1.1 million children, families and community members; improving their lives by providing humanitarian and development assistance. To this end, ChildFund Kenya implements programs targeting the care and development of infants and young children, quality learning opportunities and enhanced achievement in basic education, leadership and livelihood skills and emergency response.

ChildFund Kenya, in Kajiado County, works with three local partners, Naretoi Girl Child Program, Mbirikani Child Care Program and Kuku Plains Child Care Program to promote an environment that facilitates child survival, growth, development and participation; enabling them to be self-reliant, resilient and responsible persons in the society. ChildFund works in twenty two administrative zones namely; Shokut, Olepolos, Olkaria, Naretoi, Enkusero, Entarara, Enkaroni, Moilu, Emesasu, Enkolili, Iltilal, Olorika, Nataana, Namelok, Isinet, Kalesirua, Inkoisuk, Nasipa, Ilchurra, Olng'osua and Mabatini zones.

The overall aim of the Kajiado Integrated community based Child protection and youth project is to promote functional child protection systems and to facilitate increased empowerment and engagement of children in their own protection. The specific Child protection objectives of the project are to strengthen the school's protective environment, establish and strengthen reporting and referral mechanisms for child protection issues, Child protection advocacy and to strengthen the community based child protection system in Kuku and Mbirikani locations of Kajiado South constituency by December 2019.

1.2. Baseline Study purpose

The purpose of the rapid baseline assessment was to describe the baseline status through generating values for indicators in line with the intended program goals. The indicators values are to be used as the yardstick for measuring the progress of the project during implementation phase. The baseline report presents information on the existences and responsiveness the community based child protection structures in Kuku, Naretoi and Mbirikani locations of Kajiado South Constituency.

1.2.1. Specific objectives of the baseline assessment

1) Explore existence/availability of functional Community Based Child Protection structures. To attain this objective the rapid assessment mapped out all community Based Child Protection structures in Kuku and Mbirikani locations of Kajiado South Constituency to establish their existence/availability and functionality in providing responsive child protection services.

- 2) Explore Protection risks exposed to school children. To attain this objective the rapid baseline assessment mapped out and assessed child protection risks in Kuku and Mbirikani locations of Kajiado South Constituency that expose school children to vulnerability.
- 3) Establish if school children access quality educational services and level of participation in their own protection needs. To attain this, rapid baseline assessment sought to ascertain the level of satisfaction by children and stakeholders on provision of quality educational services and assess level of participation of children in their own protection needs in and out of school.
- 4) Establish children's level of understanding on their rights to protection, maintain and utilize Community based child protection structures to address cases of abuse experienced by them. To attain this objective the rapid assessment sought children's knowledge and attitudes towards utilization of community based child protection structures in addressing cases of child abuse and promoting their rights.
- 5) Establish if referral mechanisms for child protection exists and if children access services from the community based child protection structures. To attain this objective the baseline mapped out referral mechanism available for child protection and ascertained whether children access services from community based systems and how this contribute to addressing child rights violation in the community.
- 6) Establish the level of functionality of Inkisanjani vocational and resource center. To attain this objective the baseline assessed how the resource center is providing vocational training services to youths and the resource gaps required to improve functionality of the center to provide better services.

1.3. General Context of the study

Millions of children all over the world continue to be victims of violence and exploitation in the home, at school or within their community, the very settings that are supposed to provide a protective environment for them. Violence against children and the exploitation of children are global social, economic, human rights and public health issues, with significant negative health and social impacts. The Convention on the Rights of the Child states that all children have the right to be protected against all forms of violence, exploitation and abuse, including sexual abuse and sexual exploitation². Violence against and the exploitation of children include all forms of physical or psychological abuse, injury, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.

Kenya has made significant strides in addressing obstacles that stand in the way of full realization of child rights. The UN Convention on the Rights of the Child (UNCRC) and the African Charter on the Rights and Welfare of the Child (ACRWC) have largely been domesticated and incorporated into Kenyan law mainly through the Children Act of 2001 and now the Constitution of 2010³. Kenya's Vision 2030 recognizes that education and training of all Kenyans is fundamental to the attainment of the Vision. It also recognizes the role of basic education in ensuring sustainable socio-economic and human resource development, empowerment and good governance.

² VIOLENCE Against Children in Kenya Findings from a 2010 National Survey

³ The Framework for The National Child Protection System for Kenya NOVEMBER 2011

In Maasai community, family and peer pressure for early marriages is one of the most cited reason that girl's dropout of school. In the Maasai culture, the girls are taught that circumcision is a rite of passage into womanhood and that once circumcised they should not continue with their education but to be married off since school is for children. Maasai women are traditionally valued on the basis of how many children they can produce for their husbands but not by how educated or economically successful they might become. According to Maasai culture, girls sleep in separate houses without supervision and when a girl becomes pregnant before marriage, she brings disgrace and reduces bride price to the family. This is why parents insist that their daughters leave school and marry early. Despite initiatives addressed through various government policies, interventions and declarations like the Millennium Development Goals (MDGs) to ensure equal access to primary school education for both boys and girls, World Bank (2010) indicates that girls' retention in the county and the larger Maasai dominated areas is lower compared to other parts of the country. High dropout and parent laxity in following up with their children's schooling especially after the introduction of Free Primary Education (FPE) is a concern to education stakeholders in Arid and Semi-Arid area. (Uwezo Report Kenya, 2012).

First and foremost, poor cultural practices, economic and physical factors combined together usually deny education to Maasai girls in the community. For instance, for the exceptional girl who pass primary examination, proceeding to secondary school becomes almost impossible. Most secondary schools in Kenya are boarding schools, and the annual cost is prohibitive for most Maasai families in the rural areas. For those few families that are able to pay education costs, there is a widespread cultural preference for educating sons first. This stems from the tradition that Maasai girls leave their parents' village and become a member of the husband's family upon marriage. Early girl child marriage has been worsened by the increasing poverty among Maasai people.

Since 2014, ChildFund Kenya has implemented the Naretoi Booking Girls for Education" project funded by ChildFund Korea focusing on; Early Childhood Care and Development, Education, Sanitation, Nutrition, Child Protection, and livelihood programs covering 14 administrative zones. In this project, ChildFund has expanded the coverage area to Mbirikani to reach 1,146 children aged between 6-24years, 634 adults and 4,000 indirect beneficiaries. Naretoi phase 1 and 2 'Booking Girls for Education' project focused on empowering the young girls to be advocates of their own protection rights. The integrated community based child protection and youth project builds on the this gains of Naretoi 1 and 2 to scale up the child protection and Youth Development interventions through establishment of community based child protection mechanisms and providing youth with opportunities through ChildFund Life Stage Programming approach along the following pathways: Safe learning environment.; Quality, inclusive, formal and alternative basic education; Positive engagement for Children and Young Adolescents; Community-based child protection mechanisms; Youth-Inclusive Environments and Work readiness. The findings of the baseline assessment are to be used to better understand the magnitude and nature of child protection risks, exposed to school children, their access to quality education, level of participation in their own protection needs and the existing referral mechanisms for child protection and if children access services.

2. CHAPTER TWO: METHODOLOGY

1.4. Study design

The baseline study was carried out in line with the set objectives as indicated in the TOR. The assessment employed both quantitative and qualitative data collection approaches. The mixed design approach relied on primary and secondary data collection techniques of use of semi-structured questionnaires, key informant interview guides and focus group discussion guides using child friendly participatory methodology to obtain data and information relevant to the baseline survey. Sampling approach and data collection was done across the three project implementation locations of Kuku, Naretoi and Mbirikani locations of Kajiado South Constituency.

1.5. Study area description

The baseline study was carried out in Kajiado South Constituency in Kuku, Naretoi and Mbirikani locations. Kajiado South constituency is located at the southern tip of Rift Valley province and is categorized among arid and semi-arid districts in Kenya. It is situated between longitudes 36° 5' and 37°5' east and between latitudes 1°0' and 3 °0' south. It covers an area approximated to be 6,411 km². The constituency is divided into five wards namely; Entonet, Imbirikani/Eselenkei, Kimana, Kuku and Rombo wards with an estimated population of 147,730 people.



Figure 1 Map of Kajiado South Constituency

1.6. The Study Population.

The baseline study population comprised of Teachers, Parents and Caregivers, Community Health Workers, Children and Young Adolescents, Members of Board of Management, Government representatives from ministry of education, health and children services, Volunteer Children Officers, Members of Area Advisory Council, Religious leaders, Community Opinion Leaders and Maasai morans.

1.7. Sampling techniques and procedures

1.7.1. Quantitative beneficiary sample survey

To gather quantitative data, a sample survey was done to cover a representative sample of children target beneficiaries -adopting a stratified random sampling technique as indicated in table 1 below. The data collection technique employed use of Kobo collect using android phones. This enabled strict adherence to data integrity at the field (Kajiado). In places where the security situation or network challenges did not allow the use of phones, hard copy questionnaires were used and the data entered immediately using Kobo collect platform. The baseline survey tool was administered at school level and reached 504 children over and above the estimated sample size of 432 school children. The school set up was chosen for ease of mobilization and also because the project will be implemented in 12 public primary and secondary schools. In administering the tools, girls were consulted separately to ensure confidentiality. The evaluators conducted a group meeting with all Adolescent Youths enrolled in the Inkisanjani Vocational Training Center on their basic business and technical skills. Trained enumerators randomly administered the baseline survey questionnaire to the sampled children in primary and secondary school as indicated below.

Sampling formula

$$n=rac{m}{1+rac{m-1}{N}}$$

Where:

n= sample size

m= Margin of error

In this case, m will adopt the formula:

$$m=rac{z_{lpha/2}^2\hat{p}(1-\hat{p})}{\epsilon^2}$$

The value of m=600, N=1146 (direct beneficiaries of the project). The sample proportion p will be 0.50, while maximum error term at 0.04. Using the formula stated above, the estimated sample calculated is 394. There was additional 10% to account for randomization and other effects. The sample was proportionally stratified as shown below:

Sar	Sampling Frame for quantitative survey				
		Boys	Girls	Total	
А.	6 Primary Schools				
	Class 5	27	27	54	
	Class 6	27	27	54	
	Class 7	27	27	54	
	Class 8	27	27	54	
B.	6 Secondary Schools				
	Form 1	27	27	54	
	Form 2	27	27	54	
	Form 3	27	27	54	
	Form 4	27	27	54	
C.	Inkisanjani vocational resource center			All	
	Total Sample Size			432	

Table 1 List of sampled children for quantitative survey

1.7.2. Qualitative beneficiary sample survey

Purposive sampling was used to guide the qualitative data collection and targeting of respondents. Study participants were mainly drawn from teachers, parents, caregivers, community health workers, children, Maasai Moran, Young Adolescent and Youths, members of AACs and BOMs, representatives from ministry of education, health and children services, volunteer children officers and religious leaders.

1.8. Data Collection and Field Work

Data collection exercise was carried out in a period of 4 days. This involved training of enumerators, pre-testing of data collection tools and primary data collection using questionnaires and interview guides.

1.8.1. Training of Enumerators and Supervisors.

Prior to data collection, the evaluators conducted a one day training for 24 research assistants, at a central location in Kimana at Paniel Hotel. The training day focused on the study background and purpose, sampling procedures, interviewing techniques and familiarization with the data collection tools (KII guides, FGD guides, and survey questionnaires). The training day was also used to pre-test the data collection tools and as well as making correction and review of pre-tested data collection tools. From the 24 research assistants, 4 were assigned the role of supervisors, 8 selected as FGD facilitators and the remaining 12 were involved in data enumeration using the children questionnaire.

1.8.2. Data Collection techniques

Data collection was conducted across the three location of Naretoi, Kuku and Mbirikani locations of Kajiado South Constituency where the project is being implemented. Enumerators administered questionnaires at school level for both parents and children and in the community targeting Maasai morans and community leaders. The consultants conducted key informant interviews with stakeholders involved in promoting child rights in the three targeted locations as reflected in the qualitative sample frame.

a) Use of Survey Questionnaires

A baseline questionnaires was designed for children and young adolescents in school. The baseline questionnaire for children was used to assess the children's knowledge and attitudes towards utilization of community based child protection structures in addressing cases of child abuse and promoting their rights. Key themes of assessment included: the level of child protection risks, children's understanding of their rights and participation in their own protection needs, level of utilizing community based child protection structures/ mechanisms to address child abuse cases etc. A total of 504 children were reached using the children questionnaire in 12 primary and secondary schools

b) Key Informant Interviews

Key informants interviews was conducted with government representatives from respective government offices responsible for child protection services in the county. The respondents included Education officers, public health officers, Gender and Social development officer, school board of management, representatives of civil society organization working to promote child protection. Project staff, directors/ administrators of the three local partners, Naretoi Girl Child Program, Mbirikani Child Care Program and Kuku Plains Child Care Program. Key question was to establish if children access services from the Community based child protection structures and explore existence/availability of functional Community Based Child Protection structures. A total of 11 key informants were reached during the survey as indicated in table 2 below.

В.	Key Informant Interviews			
	Sub County Children Officer		1	1
	Sub County Education officer	1		1
	Gender and social dev officer		1	1
	Sub County Youth Officer	1		1
	Volunteer Children Officer		2	2
	School BOM member	1		1
	Religious leaders	1		1
	Public health officer	1		1
	Program officer Teule Rescue Centre		1	1
	Assistant County commissioner	1		1
	Total Number of Key informants			11

Table 2 List of Key informants

c) Focus Group Discussion

Focus group discussions were conducted with children in school, teachers and their parents, and caregivers, community health workers, Maasai morans, community leaders to understand child protection risks which children are exposed to, establish if children access quality education, level of participation in their own protection needs and explore children's level of understanding on their rights and available referral mechanisms for child protection. The specific target groups were spread out in the project area to ensure diversity of opinion. The question guides were administered to groups comprising of not less than eight persons each and was considerate of gender where possible for boys and girls and parents where possible.

Focus Group Discussion (participants between 8 - 10)		No of FGD	
	Men	Women	Total
Parents of children	2	1	3
Secondary school children	1	1	2
Primary school children	2	1	3
Young Adolescent Adults	1		+1(mix)=2
Community health workers,			1 (mix)
Maasai morans (Three location)	2	-	2
Community opinion leaders	1		1
Primary school teachers			1 (mix)
Secondary school teachers	2	1	3
Youths In Vocational Training Centre			1 (mix)
Total FGDs			19

Table 3 List of Focus Group Respondents

d) Use of child friendly Methodologies

During FGDs for children the FGD facilitators used child friendly participatory methodologies where activities were carried out in small groups, so that individual children felt confident enough to participate in the study. Interviewing children in small groups helped children to express their perceptions, experiences, and ideas concerning child protection risks and helped them gain from the experience of participating in the research.

The following steps and procedures were used to ensure children participate in the study

- The FGD facilitators organised the children into small groups separated by gender and age to highlight differences between male and female, and older and younger children.
- The FGD facilitators used icebreakers between sessions to keep the group energetic, develop confidence, and to introduce the tools and study objectives.

The group exercise allowed children to identify existence and available child protection services in their community. The exercise also allowed the children to discus and identify priority child protection issues which need to be addressed by the project.

e) Desk review of policies, plans and reports on child protection

This method was very reliable for developing a global, regional, national and local context and information dimension under which the project is being implemented. Document review helped the evaluators to ascertain how Child Protection actors are meeting their obligation in promoting child rights in line with existing global, national child protection policy frameworks. This was done through review of existing policy frameworks such as. The 2010 Constitution of Kenya (Article 53) that recognizes the need for all children to be protected from abuse, neglect, harmful cultural practices, all forms of violence, inhumane treatment and punishment, and hazardous or exploitative labour. Convention on the Rights of the Child and the Africa Charter on the Rights and Welfare of the Child. Children Act 2001, Education Act 2013. The Framework for the National Child Protection System for Kenya (2011), that seeks to "promote linkages between different actors and provide coordinated interventions and responses through statutory mechanisms." The County Child Protection Systems Guidelines, which spells out an agenda for "coordinated action at county level and provides work practice direction for all formal and informal actors." The data and information obtained from the literature review and secondary data analysis of reports helped in understanding underlying conditions that prevent children from realizing their rights. Other documents reviewed included: -Project Design Documents and ChildFund Kenya Programme policy documents on child protection.

1.9. Data Management, Analysis and Processing

1.9.1. Data analysis and processing of Quantitative aspect of the study

Once data was collected using mobile handsets in Kobo Collect platform, the data was transmitted securely and real time where Internet access was available to Move On Afrika server in Nairobi. At the server level the data was checked by the data manager against consistency, and where there were discrepancies corrections were made by direct consultations on telephone and e-mail with the field staff. The standard formats for data exports used were Excel sheet and SPSS. The Data analysis specialist worked directly with the field teams to ensure that the data entry software was thoroughly tested and matched the research tool. The evaluation team relied on both quantitative and qualitative research techniques to analyse the data gathered from the field so as to address specific baseline objectives. Analysis of quantitative data was done using SPSS version 22.0. This involved summary, presentation (tabulation and charts) in order to generate descriptive statistics. The descriptive statistics include percentages, frequency tables and use of pie charts. Frequencies and valid percentages- of all responses was analysed to assess child protection risks in Kuku Naretoi and Mbirikani locations of Kajiado South Constituency that expose children to vulnerability. The level of satisfaction by children and stakeholders on child protection services such case management, complaint handling and referral mechanisms from the Community based child protection structures was also analysed

1.9.2. Data analysis and processing of the Qualitative aspect of the study

Before data collection was complete, the baseline assessment team began to transcribe and translate the recorded focus group discussions and key informant interviews. The evaluators ensured that the transcripts from spoken Kiswahili and local language to English were carefully considered for linguistic nuances. The evaluators established protocols for coding each transcript to topically categorize and organize the content, which was the first step in identifying themes. Codebook development followed an iterative process informed by the baseline assessment purpose, interview guide content and preliminary findings based on quantitative aspect of the study. The evaluators conducted a pilot coding exercise to establish coder consistency protocols and further organized document families, code families and individual codes. After coding was complete, the evaluators ran queries on the coded data to analyse the content and themes that emerged from the qualitative study, drawing out data to interpret and triangulate findings from the quantitative and qualitative data. Key themes included existence/availability of functional Community Based Child Protection structures, Protection risks exposed to children. Children access to quality education services and level of participation in their own protection needs, children's understanding on their rights to protection and existence of referral mechanisms for child protection and their responsiveness to addressing cases of abuse.

1.10. Ethical consideration

The baseline assessment team paid attention to the following ethical issues: informed consent, privacy and confidentiality.

- **a. Informed Consent and confidentiality:** The following measures were taken to secure informed consent and assent of the respondents: explaining the objective of the assessment, the kind of information required and the intended use, and above all, providing reasons for choosing the respondents. Anonymity and confidentiality was guaranteed. Overall, the team ensured that all filled questionnaire were coded and stored safely with limited access.
- **b. Inclusion and exclusion criteria:** The research only interviewed participants targeted by the project activities and who had knowledge of the program. The study excluded respondents who were not willing to respond to the study questions due to their personal reasons.
- **c. Child protection:** The consultant were conversant with the provisions on Child Protection and the appropriate and relevant legal provisions. The Laws of the Republic of Kenya were deemed appropriate in case any of the measures mentioned above were inadequate or inconsistent with the Law in protecting the children during the study. The team ensured that all team members including enumerators and supervisors were trained and conversant with all the requirements for a study whereby children are the main target population. All filed staff involved in the study committed to strictly adhere to Child Fund's Child Protection Policy and Code of Conduct. Assent was an on-going process and was renegotiated verbally at each stage of the survey. This was to enable participants to withdraw from the survey at any time should they wish to do so.
- **d. Data quality:** MOVE ON AFRIKA takes seriously the need to protect information and data on behalf of our clients and the communities we work with. Data protection measures are typically stipulated by an in-house Standard Operating Procedure (SOP) emphasizing the client's confidentiality measures. MOVE ON AFRIKA implemented all measures concerning sensitive information, including SOPs regarding multiple-step rights access verification, password protection, and data encryption during transmission, archiving, storage, and retrieval. In Nairobi, our secure server maintains an excellent and stable Internet connection, which allowed us to reliably collect data from the field using Kobo collect.

1.11. Study Limitations

Although there was no adverse effect on the findings and results presented in this report, it is worth highlighting the following study limitations:

- 1. The programme staff and the consultant identified all the stakeholders and project beneficiaries who were to be interviewed during the inception meeting. However a few of the respondents had busy schedules and it was not practical to set face to face interview meetings with them. As such the consultants resorted to telephone interviews and which was not as elaborate as would have been if face to face interviews were conducted due to time constraints. Despite this limitation the evaluation team was still able to get information from the interviewed respondents, and which was useful in providing insight into how the project can address the needs of project beneficiaries.
- 2. The project coverage in the three locations is wide. Due to poor terrain and road network, it took the evaluation team longer hours to get to the field to conduct interviews. This extended the interview time and sometimes the evaluation team left the field. Poor internet and network connection in many of the rural places where the data was being collected required data enumerators to converge in a central place in Kimana to upload the field data from their phones. As such the field enumerators spent more time and transport resources getting back to their rural homes.

3. CHAPTER THREE: BASELINE STUDY FINDINGS

3.1. Introduction

This chapter enumerates and discusses all the findings of the baseline study from both the qualitative and quantitative aspects of the rapid assessment. As intended, the findings of the study were mutually reinforcing. Quantitative data were used to reinforce qualitative information. This chapter therefore presents a fine blend of both qualitative and quantitative analysis providing a better understanding on the magnitude and nature of child protection risks, exposed to school children, their access to quality education, level of participation in their own protection needs and the existing referral mechanisms for child protection and whether children access services. The conclusions and recommendations contained in chapter four of the report are drawn from discussions generated from these results as well as materials studied in the literature review.

3.2. Demographic Characteristic of Survey Respondents

In this section, demographic characteristics of the children respondents relating to age and gender distribution are presented. In total the quantitative aspect of the baseline survey reached 504 pupils indicating a 116% response rate in comparison to the envisaged sampled size of 432 respondents.

- a. **Age:** The survey purposed to seek opinions from school going children aged 8-18 years. The table below indicates that majority of respondents were between 14-16 years (56.5%) while 27.6% of the respondents were from 8-14 years and 15.9% were from age 17-18 years.
- b. **Gender:** Gender parity was considered in the selection of respondents with 49% of the respondents being female while 51% were male.

Attribute	Percent	
А	ge	
8-14	27.6%	
14-16	56.5%	
17-18	15.9%	
Ger	nder	
Male	51%	
Female	49%	

Table 4 Demographic Characteristics of the quantitative baseline respondents

3.3. Awareness on Child Protection Issues

Child protection are measures and structures that prevent and respond to abuse, neglect, exploitation and violence affecting children (Save the Children International, 2011). Child protection structures constitute a set of laws and policies that protect children from violence and exploitation; a central government coordination mechanism bringing together; government departments and civil society organisations at all levels; a centralized management information system that ensures regular collection of information on both prevalence and incidence of child protection issues; services and responses that are effectively regulated and coordinated.

3.3.1. Children's Knowledge and Awareness on protection issues

The baseline study sought to assess whether children are aware of what is child abuse? The below table indicate some of the responses cited by children.

A situation where the child is being denied their rights
Involving a child in work that is harmful to their health
Denying a child education
Sexual abuse of children
Parents neglecting their children
Beating a child without any reason
Forcing girls to get married
Mistreatment of the child e.g. denying him or her food and clothing

Table 5 List of children responses on what they consider as child abuse

The study finding established that only 52.1% of children interviewed, have knowledge and are awareness of child protection issues in their school and the community. On the other hand 40.2% are not aware of child protection issues in their school or community. The ratio of children aware of child protection issues and those not aware are almost proportionate, which is a clear indication of the need to improve the knowledge and awareness of children on child protection issues.



Figure 2 Percentage of children aware of child protection issues in their school

3.4. Child Protection Risks in school and community

The study sought to explore child protection risks exposed to school children in Kuku, Naretoi and Mbirikani locations of Kajiado South Constituency that expose school children to vulnerability. During the baseline assessment, various⁴ respondents identified the key child protection problems in the community as Sexual violence involving early child marriages, teenage pregnancies, female genital mutilation; child trafficking; parental neglect; physical abuse through corporal punishment; child labour especially for the boy child and prostitutions. According to 49.4% of children interviewed, child abuse is still a problem in the community. Only 29.8% of children interviewed indicated that child protection is not a problem. Some of the child protection risks cited by the children as common in their community are Physical abuse: (hurt or violence to a child's body e.g. hitting, beating, cutting) at 14.4%; Sexual abuse: (any sexual contact or threat of sexual contact with a child, harmful cultural activities) at 47.5%; Neglect: denying children basic needs or rights (food, shelter, warmth, education, health care etc.) at 25.5%; Emotional abuse: (saying and doing things to a child or in front of a child that makes a child feel afraid) at 12.6%.

3.4.1. Prevalence of various forms of Emotional Violence

The most prevalent form of emotional violence is being called names or cursed at 32.3%, followed by being screamed at 30.6%. Being threatened to hurt or kill at 19.4% followed by being bullied 13.8%

Emotional violence		
	Frequency	Percent
Screamed at	159	30.6
Called you names, said mean things or cursed you	168	32.3
Threatened to hurt or kill you	101	19.4
Bullied	72	13.8

Table 6 Percentage of children of report on the prevalence of various forms of emotional violence

3.4.2. Prevalence of various forms of Physical Violence

The most prevalent form of physical violence is being hit or spanked with hand or an object at 52.5% followed by being pushed, grabbed, or kicked at 15.8% followed by child labour at 13.5%.

Physical violence	Frequency	Percent
Pushed, Grabbed, or Kicked	82	15.8
Hit with , or spanked you with a hand	136	26.2
Hit, beat, or spanked you with a an object	137	26.3
Pulled your hair, or twisted your ear	61	11.7
Burned or scalded	15	2.9
Child Labour	70	13.5
Total	520	100.0

 Table 7 Percentage of children who report on the prevalence of various forms of physical violence

⁴ KIIs with stakeholders, FGDs with children and parents and youths

3.4.3. Prevalence of various forms of Sexual Violence

According to the study, the most prevalent sexual violence is being shown pornography or exposed to adult nudity at 24.8% followed closely with female genital mutilation at 21.2% followed with forced marriage at 19.2% and rape or being forced to have sexual intercourse (vaginal, anal or oral) at 16.9%. Being touched or pinched on the private parts or being made to touch others private part at 13.8%.



Table 8 Percentage of children who report on the prevalence of various forms of physical violence

3.4.4. Children most affected by Child Abuse

The study further established that the main victims of child abuse are girls at 78%, while 22% of the boys suffer abuse too. The study further established that the most affected children by age are children aged 11-14 years at 52.4%, followed by children aged 14-18 years at 26.2% and 6-10 years at 12.7%. Discussion with children and parents during FGD, key informant interview with stakeholders indicate that though girls are most affected, boys are also affected in equal measure. Boys suffer more when they are forced to drop out of school to herd cows or join moranisms and child labour to fend for their families. Girls on the other hand are more affected due to community culture that require them to be circumcised in preparation for marriage or if they get pregnant while in school they are forced to get married to save the family the embarrassment of raising a child who will be considered an outcast. The respondents also mentioned that children with disability and orphans are also abused due to stigma and high level of poverty.



Figure 3 Percentage of the main victims of child a buse

3.4.5. Perpetrators of child Abuse

According to the baseline study findings it is reported that in most cases both males and females are abusers of children's rights at 57.7%. While women are cited to be the frequent abusers of children's right at 21.8% and men at 16.5%. This clearly show that interventions on training on child rights needs to target both parents. Children further reported that child abuse is mostly perpetrated by family members at 35.7%, followed by strangers at 21% and by friends children trust at 18.5%. Teachers are also closely cited at 12.7% and distance relatives at 10.7%. This is further corroborated by the following responses from children, parents and community members interviewed

Parents send their children to their relatives during holiday, where they are exploited by their relatives who care less- **FGD with secondary school girls**

Parents are also not able to meet basic need that promote the rights of children such as paying school fees. They opt to marry their daughters or if they are boys they are asked to drop out of school to join child labour-**Key informant interview with public health officer**.

Community members shy off and do not take child abuse cases seriously. The community members take no action when children are a bused for fear of being rebuked by the community- **Key informant** *interviews with children officer*.

I witnessed a case where a child was being beaten badly by the father and I had to intervene to rescue the child and take him to the children officer-**Key informant interview with faith based leaders for AIC Church**

Parents and family members are the main perpetrators. I once rescued a child from being taken to Tanzania for FGM at the boarders of Namanga. I had to involve the children office and the child was rescued and referred to a children rescue center- **Key informants interview with education officer**

Some parents have neglected their children due to poverty and are not supporting their children's education due to lack of income. Parents of children with disability do not want to be seen with their children and they hide their children hence denying them their rights-**FGD with parents in Naretoi.**

Perpetrators of Child Abuse				
	N	%		
No response	7	1.4		
Friends we trust	93	18.5		
Teachers	64	12.7		
Family Members	180	35.7		
Distant Relatives	54	10.7		
Strangers	106	21.0		
Total	504	100.0		

 Table 9 Percentage of children who report those who a buse children mostly.

3.5. Awareness on Child Rights

According to the UNCRC Article 4 (Protection of rights): Governments have a responsibility to take all available measures to make sure children's rights are respected, protected and fulfilled. When Countries ratify the Convention, they agree to review their laws relating to children. This involves assessing their social services, legal, health and educational systems, as well as levels of funding for these services. Governments are then obliged to take all necessary steps to ensure that the minimum standards set by the Convention in these areas are being met. They must help families protect children's rights and create an environment where they can grow and reach their potential. In some instances, this may involve changing existing laws or creating new ones. Such legislative changes are not imposed, but come about through the same process by which any law is created or reformed within a country. Article 41 of the Convention points out that, when a country already has higher legal standards than those seen in the Convention on Children Rights (UNCRC) and African Charter on the Rights and Welfare of the Child (ACRWC) and existing legal frameworks, child right violation is still in existence in different forms and communities.

3.5.1. Children's Level of Knowledge and Awareness on Child Rights

The study sought to assess whether children were aware of their rights. The study established that 70% of the children know about their rights and 21.2% do not know about their rights with 7.5% not sure. The below table indicate some of the responses cited by children recognizing some of their rights.

Ability of a child to get his or her basic needs
Ability of a child to get access to education and food
Activities that make a child life's enjoyable and fee from discrimination
Are those things that a child should have in life
Child right means ability of a child to access health care
Giving the child what lawfully is required of such as clothing and shelter clothing
Giving a child proper care and support to participate in life

Table 10 List of children responses on child rights.

The baseline study findings further established that 69.8% of children interviewed had been trained on child rights while 26.8% had not been trained. The rights mostly upheld by the community are protection from harmful cultural practices e.g. FGM, Early Marriages, Community warriors at 39.8% and rights to education, health care, shelter, nutrition, parental care, name and birth registration at 38%. This can be attributed to the high level of awareness on children rights in the community as 61.4% children reported that they believe that the community they live in respect children's rights. While 38.6% did not believe the community respect rights of children. During key informant interview with stakeholders the awareness was attributed to the work by civil society organizations such as ChildFund Kenya, FIDA, Aphia Plus and AMREF. The study also established that protection of children from hazardous or exploitative labour is low at 3.6% followed by protection from abuse and neglect at 5.2% and protection from inhuman treatment and punishment at 9.5%.

Children rights mostly upheld in your community				
	Ν	%		
Protection from Abuse and neglect	26	5.2		
Protection from Harmful Cultural practices e.g. FGM, Early Marriages, Community warriors	198	39.3		
Protection from inhuman treatment and punishment	48	9.5		
Protection from hazardous or exploitative labour	18	3.6		
Basic rights to education, health care, shelter, nutrition, parental care, name and birth registration	194	38.5		
Others	10	2.0		
No response	10	2.0		
Total	504	100.0		

Table 11 List of children rights mostly upheld by the community

3.5.2. Children's Access to Information on Child Rights

According to the UNCRC Article 17 (Access to information; mass media): Children have the right to get information that is important to their health and well-being. Governments should encourage mass media – radio, television, newspapers and Internet content sources – to provide information that children can understand and not to promote materials that could harm children. Mass media should particularly be encouraged to supply information in languages that minority and indigenous children can understand. Children should also have access to children's books. Article 35(b) of the Kenyan constitution 2010 also recognizes that every citizen has a right to access information held by another person and required for the exercise or protection of any right or fundamental freedom.

According to the study findings only 53.2% of children reported being able to access information on their rights while 30.2% indicated that they do not access information and 12.5% were not sure. The study further established that 50.4% of children are aware of Children being informed about their rights and care while 36.9% indicated that they are not aware and 9.1% are not sure whether children are informed of their rights to care and protection. The table below indicates children's response as to whether they are provided with accessible and appropriate information about their rights and how to exercise them those rights.

During focus group discussion with children in schools, they observed that they access information only through their teachers, radio programmes, life skills trainings and from friends. However their parents rarely share with them information that is important on their rights. Most parents shy off to discuss issues with their children especially those concerning their rights. This observation was further made by the children officer who indicated that due to illiteracy, culture and Maasai traditional practices many families rarely have discussion with their children on their rights and welfare. An indication that it will be important to engage parents, by trainings them on how they can support their children access the right information to help them make wise decisions about their wellbeing.

Children are provided with accessible and appropriate information about their rights and how				
	to exercise them			
	N	%		
No	65	12.9		
Mostly No	87	17.3		
Somewhat	63	12.5		
Mostly Yes	92	18.3		
Yes	176	34.9		
No response	21	4.2		
Total	504	100.0		

Table 12 Percentage of children who report that children are provided with accessible and appropriate information

3.6. Children's participation in own protection needs

Children's voices should be heard anywhere where their development, safety and wellbeing are at stake. It is their fundamental right. In addition, participation delivers significant benefits. Only through listening to children can the best decisions be made, improving outcomes for both children and adults. Critically, participation helps children to develop the skills they need to become active citizens able to contribute positively to the societies they live in. Whilst there are undeniably pockets of good 'participatory' practice, there is much more to be done to mainstream children's participation to ensure that all children are able to realise their right to be heard and taken seriously in their own needs. Adults often do not recognise nor support children's rights to participate and consequently they are excluded from decision-making. Cultural attitudes may mean that children are not recognised as having useful and legitimate contributions; rather, children are often still viewed as the 'property' of adults, not as people in their own right⁵. The below table indicate some of the responses cited by children on their understanding on children's participation in own protection need.

A child being part of protecting themselves and taking part against child abuse
Ability of a child to fight for his or her right
A child on herself knows where to report the perpetrators to avoid being abused
A child actively participating in own protection need
A child being able to take action in protecting themselves against abuse
Activities that make a child life's enjoyable and fee from discrimination
A child taking a lead in saying issues that affect them
A child taking part in reporting cases of abuse and knowing their rights
A child participating in Creating awareness of child protection need to the child

Table 13 List of responses on children's understanding on child participation on own protection needs

⁵ Keeping Children's Participation on the Child Rights' Agenda 20 November 2014

The study established that 40.9% of children and young people reported being involved in decision making and 46.2% reported not being involved in decision making process. While 9.5% were not very sure if children are involved or not. The rapid baseline assessment also indicates that 50% of children and young people confirmed that they are consulted and 50% indicated that they are not consulted on decisions that affect them. 48.6% of children and young people reported that there is direct involvement of children in monitoring their rights as stipulated on Child Rights Conventions while 51.4% of children and young people felt there is no direct involvement of children in monitoring their own environment to be more protective, 59.2% confirmed that they are influencing their environment while 40.8% said no. Focus group discussion with children indicate that they have participated in making their own environment safer by reporting child abuse cases to their teachers, parents, chiefs and 'Balozi wa Nyumba⁶'. Discussion with key stakeholders interviewed as that children's low participation in decision making is because in Maasai community children are not taken seriously.

"In our community children are not taken seriously and that limits their participation in decision making. 'To address this, efforts have been made by child right organizations working in Kajiado county to form child right clubs in schools and formation of children parliament as avenues through which children can participate in decision making at school level and in school. However not all schools have children clubs. This has improved how children engage to influence issues that affect them"- **KII with Education officer**

Children and young people are involved in decision making processes				
	Ν	%		
No	129	25.6		
Mostly No	104	20.6		
Somewhat	48	9.5		
Mostly Yes	68	13.5		
Yes	138	27.4		
No response	17	3.4		
Total	504	100.0		

Table 14 Percentage of children and young people reporting being involved in decision making processes

3.6.1. Respect of views of children in their own protection needs

According to UNCRC Article 12 (Respect for the views of the child): When adults are making decisions that affect children, children have the right to say what they think should happen and have their opinions taken into account. This does not mean that children can now tell their parents what to do. This Convention encourages adults to listen to the opinions of children and involve them in decision-making -- not giving children authority over adults. Article 12 does not interfere with parents' right and responsibility to express their views on matters affecting their children. Moreover, the Convention recognizes that the level of a child's participation in decisions must be appropriate to the child's level of maturity. Children's ability to form and express their opinions develops with age and most adults will naturally give the views of teenager's greater weight than those of a pre-schooler, whether in family, legal or administrative decisions.

⁶ Head of the village

During the rapid baseline assessment the study established that 49.6% of children interviewed felt that children's views are taken into account, while 50.4% felt that children's views are not taken into account on issues of abuse, exploitation or neglect. When asked whether children are actively empowered to speak out about exploitation, abuse, neglect and violence in their lives and able to participate in decisions affecting them (particularly regarding their care or restoration), 50.7% confirmed that they have been empowered while 49.3% indicated that they have not. 53.3% felt that views of children are accorded weight while 41.9% felt that children's views are not accorded weight based on their age and maturity. The table below indicates this variations.

Views of the child are accorded weight based on their age and maturity of the child			
	N	%	
No	74	14.7	
Mostly No	85	16.9	
Somewhat	52	10.3	
Mostly Yes	99	19.6	
Yes	170	33.7	
No response	24	4.8	
Total	504	100.0	

Table 15 Percentage of children who report that views of the child are accorded weight based on their age and maturity of the chi

The study also established that children who are mostly involved in decision making are aged 14-18 years at 54.4% followed by those aged 10-14 years at 28.4%. Both boys and girls are involved in decision making at 40.9% and 39.7% respectively with children with disability being involved less at 8.1%. The table below show how children are involved in decision making

Ages of children are mostly involved in decision making in the community and school				
	N	%		
<5 years	13	2.6		
5 - 10 years	35	6.9		
10-14 years	143	28.4		
14 - 18 years	274	54.4		
Above 18 years	15	3.0		
Which category of children are mostly involved in decision making in the community and school				
Boys	206	40.9		
Girls	200	39.7		
Children with Disability	41	8.1		
Don't Know	30	6.0		

Table 16 Percentage of ages and category of children mostly involved in decision making in the community and in school

3.7. Access to Quality Educational Services

Article 28 of UNCRC on the (Right to education): States that all children have the right to a primary education, which should be free. Discipline in schools should respect children's dignity. For children to benefit from education, schools must be run in an orderly way – without the use of violence. Any form of school discipline should take into account the child's human dignity. Therefore, governments must ensure that school administrators review their discipline policies and eliminate any discipline practices involving physical or mental violence, abuse or neglect. The Convention places a high value on education. Young people should be encouraged to reach the highest level of education of which they are capable. Article 29 (Goals of education): Children's education should develop each child's personality, talents and abilities to the fullest. It should encourage children to respect others, human rights and their own and other cultures. It should also help them learn to live peacefully, protect the environment and respect other people. Children have a particular responsibility to respect the rights of their parents, and education should aim to develop respect for the values and culture of their parents.

Kenya has ratified most international treaties that protect the right to education, which form part of the country's laws. The Constitution of Kenya, in Article 53 (1) (b) state that every child has a right to free and compulsory basic education and Article 55 (a) the State shall take measures, including affirmative action programmes, to ensure that the youth access relevant education and training. Minorities and marginalized groups under Article 56 (b) have a right to be provided with special opportunities in the field of education. To give effect to the Constitution, the Basic Education Act (No 14 of 2013) has been passed into law to regulate the provision of basic education and adult basic education in the country. The Children's Act also acknowledges and protects every child's right to education. Other education laws guarantee the implementation of the right to education. In addition, Kenya adopted various general and specific policies on education.

The most recent are the second Medium Plan Term of Vision 2030 (2013) and the Policy Framework for Education and Training (2012). Kenya recognises that education is the key for empowering the most marginalised and vulnerable individuals in society and make efforts on an affirmative basis to enable these individuals to best exploit their life-chances alongside their other Kenyan peers through primary, secondary and tertiary education.

Despite this progress on policy and legal frameworks, Kenya still faces challenges to enforce these laws and policies. For instance, sexual abuse, early marriages and pregnancies and gender stereotypes continue to affect girl's education. Also, even though the State made primary and secondary education, free there are still some fees paid by parents.

Other issues are: high ratio of pupil to teacher ratio, poor teacher remuneration, poor quality of education in public school, high drop-out and repetition rates, inadequate and uncoordinated funding with weak governance and financial management, geographical disparities, limited availability to teaching and learning material and limited community participation⁷.

⁷ Report by Right to Education Project – March 2014

3.7.1. Child protection concerns in schools

The rapid baseline assessment established that there are children who have less access to services like educational and recreational activities, and health care as reported by 52.2% of children interviewed. While 53.3% of children report being aware of child protection issues that occur in their school. Some of the child protection concerns reported by children as occurring in their school are as indicted include beating children and being screamed at by teachers; bullying, insults or being called names; peer pressure and drug and substance abuse; hitting of a child by a teacher without reason and poor sanitation. Children reported that they are highly at risk at outside homes at 49.6% followed by at home at 27.4% and less at risks at school at 4.8%. Children also identified that the most risky places in the community are thick forests, Manyattas, Bars/clubs, town centres and streets, Discos, Alcohol dens, Sanctuary packs, hall of videos and games and smoking places.

3.7.2. Children who witness a child being hit or humiliated in school

Despite the fact that risk of child a buse in school is low, 42.9% of children interviewed reported witnessing physical abuse meted on students within their schools while 48.7% said they have never witnessed physical violence meted on fellow students. This confirms that there are schools where teachers still use corporal punishment and bullying since discussion with children during focus group discussion indicated that this was mostly done by teachers, fellow students and other adults. When asked whether their school is child-friendly with limited child risks, 64.5% felt that their schools are child-friendly with limited by 18% who felt that their school was not child friendly. 10.7% were not sure of whether there schools had limited risks.



Table 17 Percentage of children who report witnessing a child being hit (humiliated in school)

3.7.3. Children dropping out of school

The study also sought to establish the rate of school dropout a mong children. Many of the children respondents 52% said yes that children drop out of school while 39.5% said no. The study further established that more boys drop out of school at 48.8% and girls at 20.8%. Some of the reasons cited why children drop out of school are abuse, intimidation and discrimination by teachers, early pregnancy and child labour, lack of school fees, forced marriage and female genital mutilation. The high percentage of boys dropping out of school than girls' shows that boys are becoming more neglected and ignored by the society.

This shows a serious shift because in the past many studies have shown that girls are most likely to drop out of school due to early marriage, lack of sanitary towel, FGM and teenage pregnancy. FGD with young adults and youth indicate that there is a feeling that the boy child has been neglected

"Most project and programmes are for helping the girl child and leaving out the boy child. This is neglecting the boy child who also drops out of school to join moranisms, herding and child labour, some children also drop out of schools to pick tomatoes in nearby farms" And as we understand all children are equal.- **FGD with young adults and youth out of school**

Parents also indicated that once boys, are circumcised they either join moranisms or must go herd cows in Chyulu hills- FGD with Parents



Table 18 Percentage of children who drop out of schools

3.7.4. Children's Access to Life skills Education

Life skills-based education (LSBE) is a form of education that focuses on cultivating personal life skills such as self-reflection, critical thinking, problem solving and interpersonal skills. LSBE aims to help children reach their full personal potentials and to prepare them for the challenges of everyday life. Children are supposed to learn the life skills that can prevent them from teen pregnancy, reduce early marriages, how to defend themselves against peer pressures, and reduce the spread of HIV and other sexually transmitted diseases. The study established that 51.2% of children report that they have been trained on life skill while 41.5% have not been trained on life skill education. The training on life skills is mostly done in school and non-governmental organizations such as ChildFund Kenya, AMREF, ANNPCAN, Aphia Plus and World Vision, The below table indicate some of the responses cited by children on their understanding on some of the life skills known to them.

Art and craft, assertiveness self-esteem, communication
Self-control and self defence
Critical thinking
Participating in decision making
Self-discipline
Making good decisions and being in good company
Self-awareness
Table 19 List of life skills



The study finding established that 66% of children and young adolescent have practiced life skills in. While 34% indicated that they have not.

Table 20 Percentage of children who report they can apply life skills in hypothetical situation

3.7.5. Children's Participation in Club activities

One of the key project interventions requires that teachers trained on child protection establish child protection clubs in their schools. This will involve identifying different groups of pupils; boys and girls aged between 12 and 17 to be recruited into the clubs. Each club will consist of approximately 30 children who will be engaged in different child protection related club activities to create awareness on child right and the reporting channel in cases of child abuse. The rapid assessment established that 51.6% of children report having children clubs in their schools while 31.7% indicated they do not have children clubs in their school. Some of the other clubs mentioned during FGD with children include Environmental clubs, Drama clubs, Debate clubs, health clubs, football club, where children also get to participate. The study further established that only 61% of children and young adults participate in children's club activities while 39% do not participate in any club activities.



Figure 4: Percentage of Children and young people who participate in children clubs

3.8. Functionality of Community based child protection structures

In 2013, ChildFund participated in a rapid ethnographic study carried out through the technical leadership of Columbia Group for Children in Adversity in collaboration with the ministry of gender and children's affairs amongst other stakeholders. The purpose of the research was to learn about community-based child protection processes and mechanisms in two mostly rural areas of Kilifi, and Nyamira Kenya. The research was intended to complement and extend the learning that came from previous research work carried out by the Inter-Agency Learning Initiative in two urban slums of Mombasa in 2009 to review community-based child protection mechanisms, which are considered frontline mechanisms for responding to threats to children's wellbeing. The research reported that externally facilitated groups were often limited in their effectiveness and sustainability. This was owed largely to the fact that they were not community owned and driven, but were seen as projects of outside agencies. The same research reported that higher levels of effectiveness and sustainability were associated with community-driven groups organized around helping vulnerable children. Recommendations from the research therefore strongly encouraged strengthening of community based child protection mechanisms through: Enabling a coordinated, holistic approach, addressing gender issues, placing families and communities at the center, strengthening prevention, improve the use, functionality, and accountability of the formal system and supporting internally driven social change⁸.

3.8.1. Children's utilization of community based child protection structures

The rapid baseline assessment sought to establish children's level of understanding on their rights to protection and utilization of community based child protection structures to address cases of abuse experienced by them. The baseline established that when children have problems or are stressed or violated/abused, the person in the community that best support them are their parents at 19.6% followed by teachers at 16.8% and government officials at 15.1%, peer groups at 10.3%, religious leaders at 8.6%, relatives 8.4%, community at 6.9%, social workers at 6.3% and health workers at 5.0%. On aggregate children utilize informal Community based child protection structures (i.e. peer groups, Nyumba Kumi, Balozi wa nyumba, parents, teachers, religious leaders, siblings and relatives) at 84.9% compared to formal structures (government officials such as chiefs, children officers, police, courts) at 15.1%.

If children have problems or are stressed or violated/abused, who in the community best support them			
	Res	sponses	Percent of Cases
	Ν	Percent	
Peer groups (e.g. friends)	143	10.3%	30.2%
School teachers	235	16.8%	49.6%
Community social workers	88	6.3%	18.6%
Religious leaders	120	8.6%	25.3%
Parents	273	19.6%	57.6%
Government officials	210	15.1%	44.3%
Relatives	117	8.4%	24.7%

⁸ Proposal for Integrated Community based child protection and youth development project

Siblings	43	3.1%	9.1%
Community members	96	6.9%	20.3%
Community Health workers	70	5.0%	14.8%
Total	1395	100.0%	294.3%

Table 21 Percentage of children who report those who best support them in the community if they are stressed or abused

3.8.2. Reporting of child Abuse/Violation

The baseline established that 40% of children know where to report or procedure for reporting child abuse while 45% do not know. When asked if threatened to keep a secret by the perpetrator what they will do, 67.7% of the children indicted they will expose the perpetrator while 11.9% indicated that they will keep quiet; 7.3% will be terrified and 6.5% would not know what to do. An indication that majority would know what to do, while 25.7% would not use available community based child protection structures. 39.5% of children surveyed confirmed that children do have access to independent reporting mechanism such as speak out boxes or children reporting desks while 39.3% indicated that there are no independent reporting mechanisms. 21.2% do not know if this reporting mechanisms exists.



Figure 5 Percentage of children who report that there are no independent reporting mechanisms in their community

The children also reported that if they came across a child who has faced child abuse of any form, 31.7% would take the child to a care giver while 19.2% would take the child to a family member and 10.1% to the teacher. While 11.9% believe child protection never happens in their community.

"Community is the most responsible for protecting children against violence and children always report cases of violence to their parents, teachers, chief balozi wa nyumba and Nyumba Kumi, church leaders. Parents are equally more involved in reporting cases that affect children"- **Responses from various FGD** with children in school.

However it was also observed that while community are more responsible in handling cases that affect children, when cases are referred to the village elders, the child does not get justice because in most instances the case is ruled in favour of the perpetrator. Also when cases are taken to the police or chief, elders intervene to resolve the matter. Because in the Maasai culture it is the role of the village elders to resolve problems affecting the community.

If you come across a child who has faced child abuse of any form, what would you do?				
	N	F		
Child abuse never happens here	60	11.9		
Take child to caregivers	160	31.7		
Take child to other family members	97	19.2		
Take child to religious leader	44	8.7		
Take child to health center	32	6.3		
Take child to mobile clinic	11	2.2		
Take child to community social worker	14	2.8		
Take child to teacher	51	10.1		
Report to the chief	14	2.8		
Report to the children officer	4	.8		
Report to the volunteer children officer	3	.6		
Total	490	97.2		

Table 22: Percentage of children who would take action if they came across a child who has faced child abuse or any form of violence.

3.9. Referral Mechanisms for Child Protection

The baseline assessment sought to establish if referral mechanisms for child protection that exists and if children access services from the community based child protection structures. To attain this objective the baseline mapped out referral mechanism available for child protection and ascertained whether children access services from community based systems and how this contribute to addressing child rights violation in the community. The baseline established that only 31.9% of children are aware of the existence of child protection institution while 50.2% indicated that they are not aware. Examples of list of child protection institutions mentioned are as indicated below

Child fund Kenya
AMREF
ANNPCAN
World Vision Kenya
FIDA
APHIA Plus
Maendeleo Ya Wanawake
Community based organizations promoting the right of children
Child protection units
Chiefs office, children office, police station, probation office, health care center, Children homes,
Chombo cha upendo, Kibo centre, little lamb, Teule children home, Lenkai school, Father Tito
Children rescue center, Churches
Nyumba Kumi Initiatives
Courts

Table 23 List of child protection structures

3.9.1. Children referred to access child protection services

The study also sought to know the percentage of children in the community referred in the past year by community members (family members or other community members) directly to social services, without going through the community-based child protection committee. When asked if they know of children who have been referred 38.9% said yes while 53.8% said they did not know.

Are you aware of Children in the community referred in the past year by community members (family members or			
other community members) directly to social services?			
	Ν	Percent	
Yes	196	38.9	
No	271	53.8	
No response	37	7.3	
Total	504	100.0	

Table 24 Percentage of children who report knowing a child who has been referred to access child protection services

The study established that most children are referred by their family member/parents at 63.2%; friends at 15.8%; by teachers at 15.8% and Child protection committees at 5.3%. Most children are referred by community members at 94.7% and child protection committees at 5.3%. The most commonly used referral systems are the children officer, chief, rescue center such as Teule children home; Lenkai School for children to continue with their education, reporting to family members and friends of the victim, FIDA for counselling and legal services, county health care center for medical attention, Chief and police officers to arrest perpetrators of child abuse, child protection units based at the police station and Children help desks.



Table 25 Percentage of children in the community referred by community members.

The study also established that 51.2% of children affected by abuse, violence or exploitation know whom to contact for help, and feel safe and confident to do so. While 42.7% do not know who to contact and neither do they feel safe. Some of the reasons cited by children why they don't feel confident is fear of victimization, fear of being beaten or being chased away from the family, ignorance, fear and lack of parental support.

Do children affected by abuse, violence or exploitation know whom to contact for help, and do they feel safe and			
confident to do so?			
	Ν	Percent	
Yes	258	51.2	
No	144	28.6	
Don't Know	66	13.1	
No response	36	7.1	
Total	504	100.0	

Table 26 Percentage of children who report that children affected by abuse, violence or exploitation and feel safe and confident

3.9.2. Community-based child protection committee activities

Discussion with members of child protection committee to social services (social welfare officer, police, public health officers, children officers and education officers) indicate that most committee members have attended child protection committee activities such as seminars, workshops, meetings and trainings organized by AMREF, Children office, ChildFund Kenya and FIDA. The members have also benefited from networking meetings and mentorship programmes organized by the national and county government. When asked what can be done to improve prevention and protection against violence, abuse and exploitation, the committee members cited the need to empower institutions that fight child abuse in the community; Parents to take care of their children; The chief and police to arrest the perpetrators. Parents be trained on child protection and parenting skills on how to take care of their children. While stakeholder cited that programmes should also target the boy child and stakeholders should be more coordinated through structure such as Area advisory Councils (AACs).

2.1. Functionality of Inkisanjani vocational and resource center

ChildFund in collaboration with Computer for schools Kenya has establish structures at Inkisanjani Vocational/Resource Centre to give adequate opportunities for the local youth to gain hands on skills for employment opportunities. The project targets different groups of youths namely: Youths who dropped out of primary school; those who completed primary education but never joined secondary school; secondary school drop outs; those who finished secondary school and never joined any tertiary institution; those who dropped out of tertiary institutions; and some who completed tertiary education and training to equip them with required skills to enter the job market. The project has placed ICT infrastructures at Inkisanjani Vocational centre, development of e-learning platform for both students and instructors and development of a website. It is expected that the establishment and equipping of the vocational centre will improve digital literacy and hands on skills of the local youth and population thus promoting youth employment whereby youths will become work-ready in either formal or self-employment.

The baseline assessment sought to establish the level of functionality of Inkisanjani vocational and resource center. The center offers 6 ICT packages in the area of introduction to computer, Word processors. Excel, PowerPoint, internet and email, Access and hard ware maintenance as part of the standardized curriculum. Since its inception in July 2017 July the center has graduated 8 youths with basic computer skills. During key informant interview with the center instructor it was established that the center currently has 26 students which is a marked improvement of 225% increase of students in the second intake. Discussion with the youths indicate that they have participated in forums involving youths in the community and among their peers over a 12 month period. On life skills, 66% of youths who participated in the FGD that is 8 out of 12 indicated that they have been trained on life skills. They were trained on life skills while in school and also they attended trainings organised by World Vision, Child Fund and Aphia Plus. They are also able to practice the life skill learnt to make decisions that improve their lives. The youths are aware of some of the life skills such as communication, critical thinking and self-esteem and confirm that they are able to apply this in real life situation to improve decisions they make in life.

3.1. Conclusion

Based on the study findings, this report concludes that;

- 1. There exists functional Community Based Child Protection structures which provide responsive child protection services. On aggregate children utilize Community based child protection structures (i.e. peer groups, community (Nyumba Kumi, Balozi wa nyumba, parents, teachers, religious leaders, siblings, social workers, Community health workers and relatives) at 84.9% compared to formal structures (government officials such as chiefs, children officers, police, courts) at 15.1%.
- 2. There exists protection risks which children are exposed to school children. According to 49.4% of children interviewed, child abuse is still a problem in the community. Some of the child protection risks cited by the children as common in their community are Physical abuse: (hurt or violence to a child's body e.g. hitting, beating, cutting) at 14.4%; Sexual abuse: (any sexual contact or threat of sexual contact with a child, harmful cultural activities) at 47.5%; Neglect: denying children basic needs or rights (food, shelter, warmth, education, health care etc.) at 25.5%; Emotional abuse: (saying and doing things to a child or in front of a child that makes a child feel afraid) at 12.6%.
- 3. Access to quality educational services: The rapid baseline assessment established that there are children who have less access to services like educational and recreational activities, and health care as reported by 52.2% of children interviewed. 42.9% of children interviewed reported witnessing physical abuse meted on students within their schools. 52% of children respondents' report that children drop out of school and majority who drop out are boys at 48.8% followed by girls at 20.8%. The study also established that 66% of children and young adolescent said that they have practiced the life skills in hypothetical or practice situations.
- 4. The baseline established that children's have a moderate level of understanding on their rights to protection. The study established that 70% of the children know about their rights and 40.9% of children and young people participating in decision making
- 5. The baseline established that referral mechanisms for child protection exists and 50% of children reported that children access and utilize services from the community based child protection structures It is also noted that 40% of children know where to report or procedure for reporting child abuse.
- 6. The baseline also established that Inkisanjani vocational and resource center is already functional and the first 8 lot of student graduated with computer skills at the time of the evaluation there are 26 students enrolled for computer skills training as at the time of the evaluation. However the center has not started trainings on business skills. But it is anticipated that this will rolled out in the near future.

3.2. Recommendation

The project proposal as designed will address many of the observations made in relation to child protection concerns and functionality of the Inkisanjani vocational and resource center. However it is recommended that the project baseline indicator matrix be improved to include some aspects that may have emerged from the study and which can be monitored during implementation, midterm and end tem evaluation. This will enhance the aspect of evaluating impact of the interventions as proposed in the project design. Some of the indicators that may be considered include;-

- a. Children's access to information on their rights, the current baseline indicates that 53.3% are able to access information
- b. Children's participation in decision making. Currently the baseline has established that 40.9% of children participate in decision making
- c. School dropout rate. The baseline established that 52% of children report that children drop out of school.
- d. Children who know where to report or procedure for reporting child abuse case. The baseline has established that 40% know where to report child protection cases.
- e. Children and young people reporting that there is direct involvement of children in monitoring their rights as stipulated on Child Rights Conventions. The baseline has established that 48.2% report that there is direct involvement of children in monitoring their rights.

It will be good to track the changes that occur in reducing school dropout, increasing children's participation of access to information in line with the requirement of the UN conventions on child rights.