



**Data for Children
Collaborative**
WITH UNICEF

Colombia

YOUNG PEOPLE ADVISORS

INSPIRE Case Study



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OVERVIEW

In 2020, the Data for Children Collaborative with UNICEF (DCC) generously funded the End Violence Lab to coordinate a series of regional systematic reviews on INSPIRE strategies to end violence against children called: *Accelerating What Works to End Violence Against Children: A multi-country study*. As part of the post award process the DCC asked the End Violence Lab to read and respond to their Youth Engagement Workbook. It asked a provocative question: How will you meaningfully engage young people?

We were INSPIRED!

In response, the EV Lab proposed a series of youth-centred activities to complement the review project supporting a growing trend to deliver meaningful research initiatives *with* children and young people. Notably, systematic reviews are too often completed with little or no inputs from the end-users to ensure that findings make sense. We addressed this working with a male/female team of young people from Brazil, China, Cote d'Ivoire, Colombia and Uganda. We subsequently launched the Young People Advisors (YPA) programme, a co-designed approach to discuss violence prevention, to map our progress addressing such a technically complex topic and to generate case studies with young people from all 5 countries.



PUBLICATION REVIEWED

Duque, L. F., Orduz, J. F., Sandoval, J., Caicedo, B. E., & Klevens, J. (2007). Lecciones del programa de prevención temprana de la violencia, Medellín, Colombia [Lessons learned from an early intervention violence prevention program in Medellín, Colombia]. *Revista panamericana de salud publica = Pan American journal of public health*, 21(1), 21–29. <https://doi.org/10.1590/s1020-49892007000100003>

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INTRODUCTION & CONTEXT

Colombia is located in the southern part of the American continent with more than 50 million inhabitants. The country is rich in natural resources and is the second most biodiverse country in the world. Colombia has also been challenged by more than five decades of internal armed conflict. Recently in 2016 a Peace Agreement was signed between the FARC guerrillas and the National Government, however, the path to peace remains uncertain and with many barriers. Kidnapping, extortion, forced recruitment, sexual violence, among other types of violence were and remain far too common. Generations of children have grown up in this context, where deeply rooted ideas and conceptions about violence are proving difficult to change.

Medellín is the capital city of the department of Antioquia the site for the violence prevention intervention reviewed here. Medellín has suffered from high rates of violence and notably drug trafficking given the presence of the well-known Medellín Cartel. It should be noted that in the year in which the intervention takes place (2001), although there are high rates of violence, these are much lower than the rates of violence of the early 90's caused by drug trafficking. The problems that the city faced in 2001 were mostly related to common crime and armed groups (clashes between guerrilla groups and paramilitary groups) located in sectors such as 'Commune 13'.

The result has been longstanding inequalities and multiple social problems—all of which directly or indirectly affect children. According to the census carried out in 2005, in Medellín there were 693,139 young people under 18 years of age, representing 31.3%



of the total population¹ (DANE, 2010). This historical and present-day impact of such longstanding violent conditions have had consequences on the educational and social development of children. Children living in low-income families on the edges of criminal organisations are especially vulnerable. From an early age, these children are prone to criminal recruitment; they are also likely to suffer accidental injuries—including stray bullets – due to daily confrontations. The security forces who should play a protective role in children and their families' lives are too often deeply intertwined in local turf wars and are frequently the subject of investigation for violent actions against civilians.

One of the main challenges of gathering information is collection. The reporting rate in Colombia is exceptionally low, and the statistics on violence between members of a family nucleus are typically collected through reports made by third parties.² Not surprisingly, violence in families is high even though rates of reporting tend to be low.

In 2001, the Colombian Institute of Legal Medicine made a total of 10,921 reports on domestic violence against children. The total number of reports it made in the same year, including spousal, family and child violence is 69,681 (González, 2002, p. 76). Regarding gender, boys and young men under 5 years of age and between 5 - 17 years of age, respectively, are the ones with the highest rates of domestic violence (González, 2002, p. 78). Figures from the National Institute of Legal Medicine and Forensic Sciences show that verbal aggression by parents towards children is 60% and

¹ DANE. (2010). Sociodemographic Profile 2005 – 2015 Total Medellín. Medellín Mayor's Office: Medellín, Colombia.

Recovered from

<https://www.medellin.gov.co/irj/go/km/docs/wpccontent/Sites/Subportal%20del%20Ciudadano/Planeaci%C3%B3n%20Municipal/Secciones/Indicadores%20y%20Estad%C3%ADsticas/Documentos/Proyecciones%20de%20poblaci%C3%B3n%20005%20-%202015/Perfil%20Demografico%202005-2015%20Total%20Medellin.pdf>

² Duque L, Montoya N. (2008). Domestic Violence in Medellín and other municipalities of Valle de Aburrá 2003 – 2004. Rev. Fac. Nac. Salud Pública. Recovered from <http://www.scielo.org.co/pdf/rfnsp/v26n1/v26n1a04.pdf>



physical aggression 10%. Furthermore, in the city of Medellín, the proportion of domestic violence is higher than in nearby municipalities and cities (2002).

A particularly important aspect that is addressed in this report is the psychological and physical violence reported by children compared to that of their parents. Research reveals that children claim to suffer more than twice as many violent acts compared to what their parents had reported.³ (Duque & Montoya, 2008:7). Reports of aggression committed towards children do not vary between father and mother.

³ Duque LF, Orduz JF, Sandoval JJ, Caicedo BE, Klevens J. (2007) Lessons from the Early Violence Prevention Program, Medellín, Colombia. *Rev Panam Public Health*: 21 (1): 21–9.



METHODS

The “Programme for the Early Prevention of Violence in Medellín” (PEPVM) focused on the prevention of violence in children and young people. The intervention was part of the city of Medellín’s strategic effort, called Comprehensive Citizen Safety and Coexistence Plans (*Programa de Convivencia Ciudadana* or the Citizen Coexistence Programme), a government programme designed to address issues of security and coexistence with the participation of multisector actors (Duque, Orduz, Sandoval, Caicedo and Klevens, 2007). In particular, the PEPVM was created with the aim of “reducing the rates of aggression, promoting the development of prosocial behaviours, preventing violence and aggression, the use of psychoactive substances and poor school performance in children between 3 and 11 years” (Duque et al. 2007: 22). A municipal team implemented the intervention.

In its first phase, carried out in 2001, the intervention addressed teachers and parents of children between 3 and 11-years old studying in public educational institutions located in one of the most vulnerable areas of the city. The activities carried out with educators included training through ten workshops, each one addressing a different topic, supplemented by counseling workshops every 15 days for 8 months to promote the expression of feelings and emotions. Parents were trained to manage violent cases and dynamics in the home. To this end, home visits were made to each family, and participating parents were asked to attend six parenting workshops addressing in-depth topics, followed by three scheduled family counseling sessions. Where needed, support was offered to parents of children with more significant symptoms of aggression, based on assessments using a COPRAG questionnaire. The COPRAG questionnaire was designed to identify children with more aggressive behaviours.



Teachers were trained by the evaluation team to administer a questionnaire consisting of 50 questions.

This first phase of the intervention was carried out for 12 months with 7,605 children, 271 schoolteachers, 164 preschool teachers and 2,440 families. Subsequently, the programme was followed for a year and a half using tools such as participant observation, semi-structured interviews, and analysis of field diaries to measure uptake. Regarding adherence, it was reported that 22% of the parents attended at least nine out of ten sessions, 21% attended six, seven or eight, and 57% attended five or less. Among teachers participating, it was reported that 58% attended nine out of ten sessions, 5% attended eight sessions, and 37% attended less than eight sessions (Duque et al. 2007).



REFLECTIONS & RECOMMENDATIONS

The evaluation of this programme was carried out in 2004 by a group of researchers from the University of Antioquia and the National Center for Injury Prevention and Control. The evaluation traced 339 children, all of whom received the initial intervention in 2001, three years after the study start date. Locating the children and reapplying some of the end line measures was challenging. Measurements made during 2001 were compared to the same measures in 2004, including: symptoms of direct aggression, indirect aggression, pro-sociality, and school performance. Results showed a significant decrease in the symptoms of direct aggression, indirect aggression, and an increase in pro-sociality. Likewise, findings showed a higher percentage of children with elevated levels of school performance and a lower percentage of children with below average results. While the intervention demonstrates positive results, there are some problematic issues around research design, implementation, and results.

First, and most importantly, the intervention suffered from a lack of organisation and planning as part of the larger public policy design process. The PEPVM did not initially include an impact or results-based evaluation as part of the larger intervention from the start creating some dubious findings. The implementers themselves concluded that environmental constraints were extensive, including: 1) low levels of adherence among parents; 2) more than 95% of the children were lost from sight in less than 4 years; 3) variable application of group separation criteria defined by the COPRAG questionnaire scores making it difficult to establish comparison groups; 4) the treatment was not uniform or systematically differentiated since, in many cases the parents did not receive the same workshops.



Second, the results were measured in 2004, but they were not published until 2007—a full six years after the initial intervention (2001). While the findings are encouraging and demonstrate that the PPTVM had a positive impact on the children and young people, effectively reducing the levels of aggression and improving the school performance, it is unclear as to why or exactly how much the intervention *per se* can account for these positive outcomes. As the researchers indicate, the lack of a control group makes it difficult to rule out the influence of external factors that could have prejudiced the impact of this evaluation.

Third, the importance of evaluation overall in the design of public policies needed to be included from the start of the intervention—not as an afterthought. The intervention, at least by 2004, managed to carry out a methodologically rigorous evaluation with the little information available and within the constraints of a difficult political and social context. If the evaluation were built *into* the design of the study, this would have been more effective in guaranteeing that public resources be used efficiently to protect children from violence. This illustrates the importance of planning the evaluation in parallel with public policy to have more robust impact measurements that allow for better decision-making regarding the best ways to protect children in real time.

This point is not just a methodological failure; it illustrates the difficulties that exist when evaluating child protection programmes in contexts with elevated levels of violence, such as the Colombian one. Given that Colombian childhood care systems are deficient, and that the context is notoriously violent, assigning a child to a control group has profound ethical considerations. This implies leaving him or her in an extremely vulnerable situation in front of and compared to those who receive the



treatment. Therefore, although it would be desirable to have interventions with rigorous causal evaluations, often the context and the urgency with which decisions must be made make these choices problematic.

A final and critical point of reflection is around the engagement of children in the intervention itself. As previously noted, the activities proposed by this prevention program were aimed at the parents and teachers of the minors. Minors, however, were not actively involved in the development of activities. A holistic public intervention should include all stakeholders—especially the children for whom the intervention was designed. One way to do this would be through drawings or spoken descriptions of, for example, the qualities they most appreciated in a parent or teacher. In this way the training provided to caregivers could be better aligned with the expectations and needs of the children. This point reinforces how important it is to design public policies with a more participatory approach that recognises and validates the voices of children as the main beneficiaries of these interventions. Rather than treating children as passive agents, it would be more beneficial to expand the methodologies and tools for obtaining valuable information from them. Done well, this would increase the chances for a successful intervention that meets the relevance of its intended audience.



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Colombia

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