



# Children in Armed Conflict

"Rights, Health and Wellbeing"

American University of Beirut, Lebanon  
Saint Joseph University in Beirut (preconference)



جمعية المهنيين العرب

## HDF

HOTEL-DIEU DE FRANCE  
Centre Hospitalier de l'Université Saint-Joseph de Beyrouth



Université Saint-Joseph de Beyrouth  
جامعة القديس يوسف في بيروت



FACULTÉ DE MÉDECINE  
كلية الطب

## Child protection in the Arab region:

## More challenges, Poor Priority, Less resources and resistance...

## New Mobilization, Sustained Professions and resilience

## Great Momentum: Global Partnership

**USJ** 1875  
Université Saint-Joseph de Beyrouth  
جامعة القديس يوسف في بيروت

Missionswissenschaftliches Institut Missio e.V.

**CONFERENCE/WORKSHOP ON CHILD PROTECTION**  
**CONFÉRENCE/WORKSHOP SUR LA PROTECTION DE L'ENFANCE**

**Sustainable Development Goals for Children**

**Objectifs de développement durable pour l'enfance**

**Jeu 7 et vendredi 8 février 2019**  
Amphithéâtre C  
Campus des sciences médicales  
Université Saint-Joseph de Beyrouth, Rue de Damas



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No commercial or conflict of interest to disclose

# Present situation

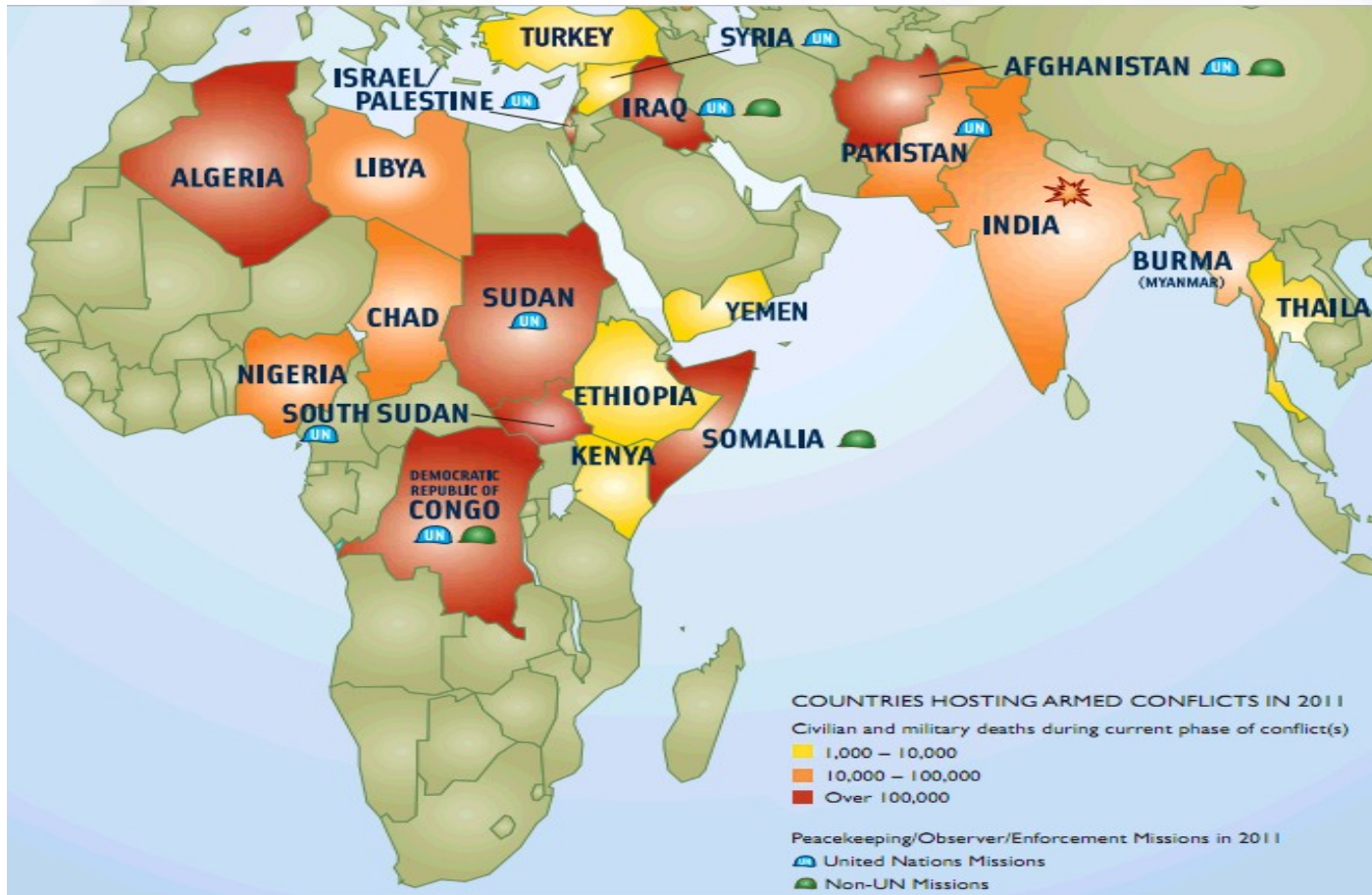
## Arab Countries and the UNVAC



- Risk factors :
  - **Economic factors:** poverty and unemployment, global economic crisis; literacy.
  - **Social factors:** families in difficulty; multicultural contexts; gender discrimination; size of families; social tensions and armed conflicts; consanguinity
  - **Prevalent cultural beliefs:** attitudes; practices;
  - **Lack of awareness:** norms and harms
  - **Role of the media**
  - **Legislation:** laws and conventions; society and enforcement [reporting]

# Of 23 armed conflict in the world , 7 are in the MENA region

Arab region represent 5% of the world population, yet 45% of armed conflicts and terrorism are in this region



- Palestine/Gaza
- Syria
- Iraq
- Libya
- Yemen
- Sudan
- Somalia

# Child protection in armed conflict

## Displacement of children within and across borders:

- the armed conflict create an influx of child refugees in need of food, shelter, schooling and medical care across borders.
- *out of a total child population of nearly 166 million in MENA region, There are over 61 million children living in countries affected by war*
- *living in war is becoming the “new normal” for millions of children. These children exposed to forms of maltreatment such as child marriage, recruitment, and child labor.*
- advancing the child protection agenda in MENA region in humanitarian contexts is a challenge

## Child protection outside Armed Conflict situation

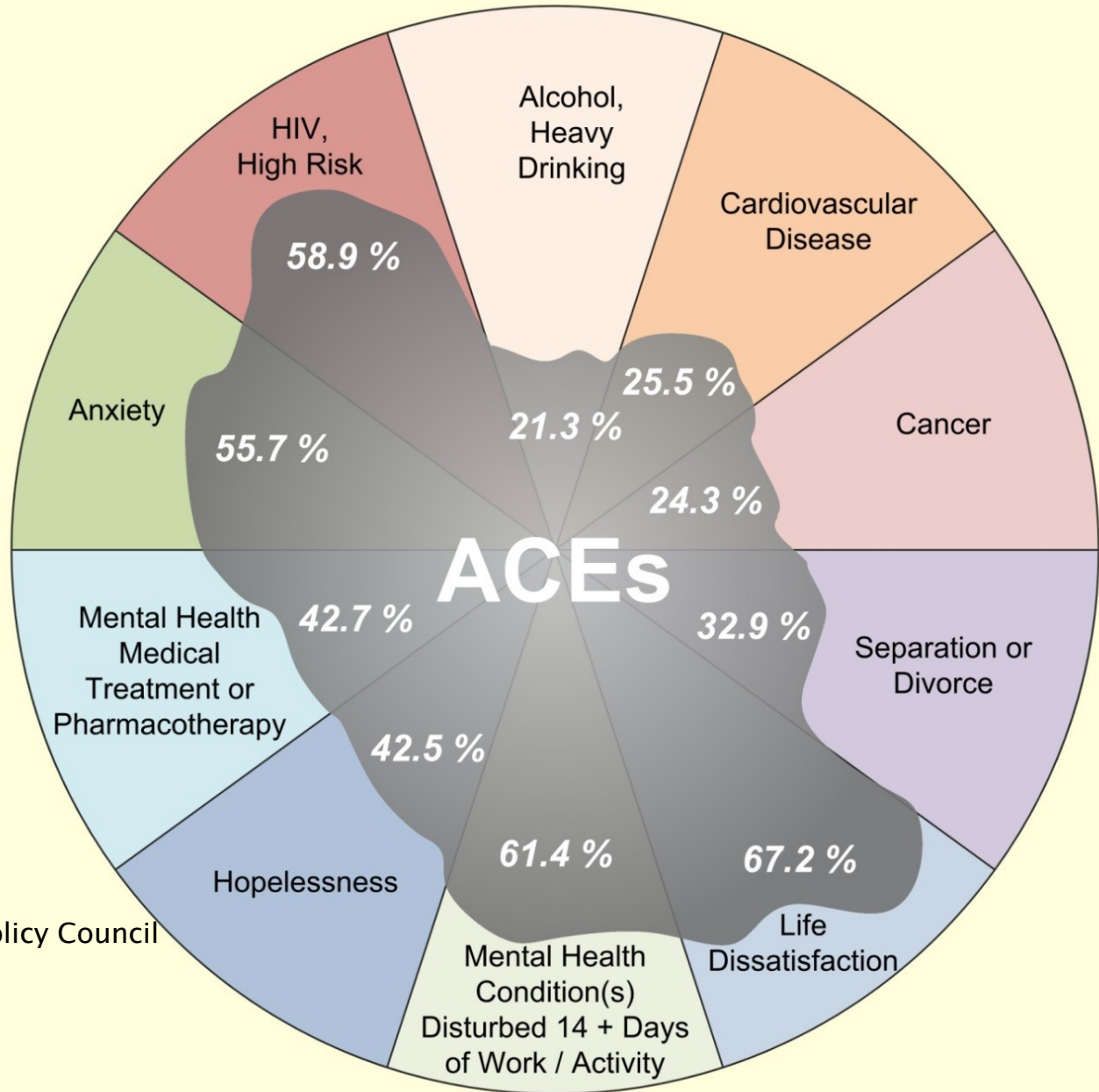
Even the Arab countries that emerged from armed –conflicts, or never entered armed-conflict are still grappling with **social norms** that view

- early child marriage,
- female genital mutilation,
- child labor,
- street children,
- violence toward children,
- and corporal punishment

among other violations of children's rights, **as acceptable.**

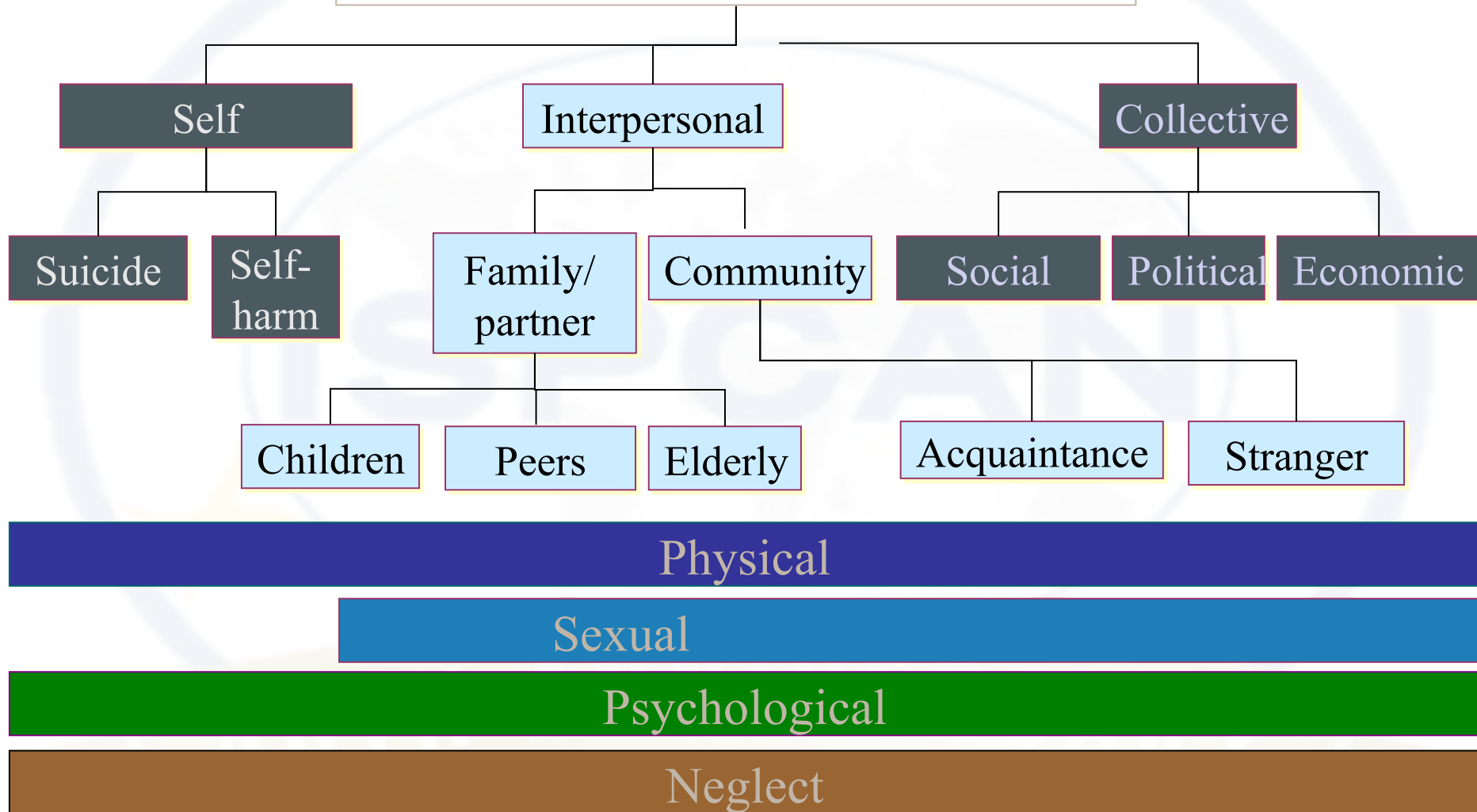
# Population Attributable Risk

The incidence of  
many diseases  
can be attributed  
to adverse  
childhood  
experiences

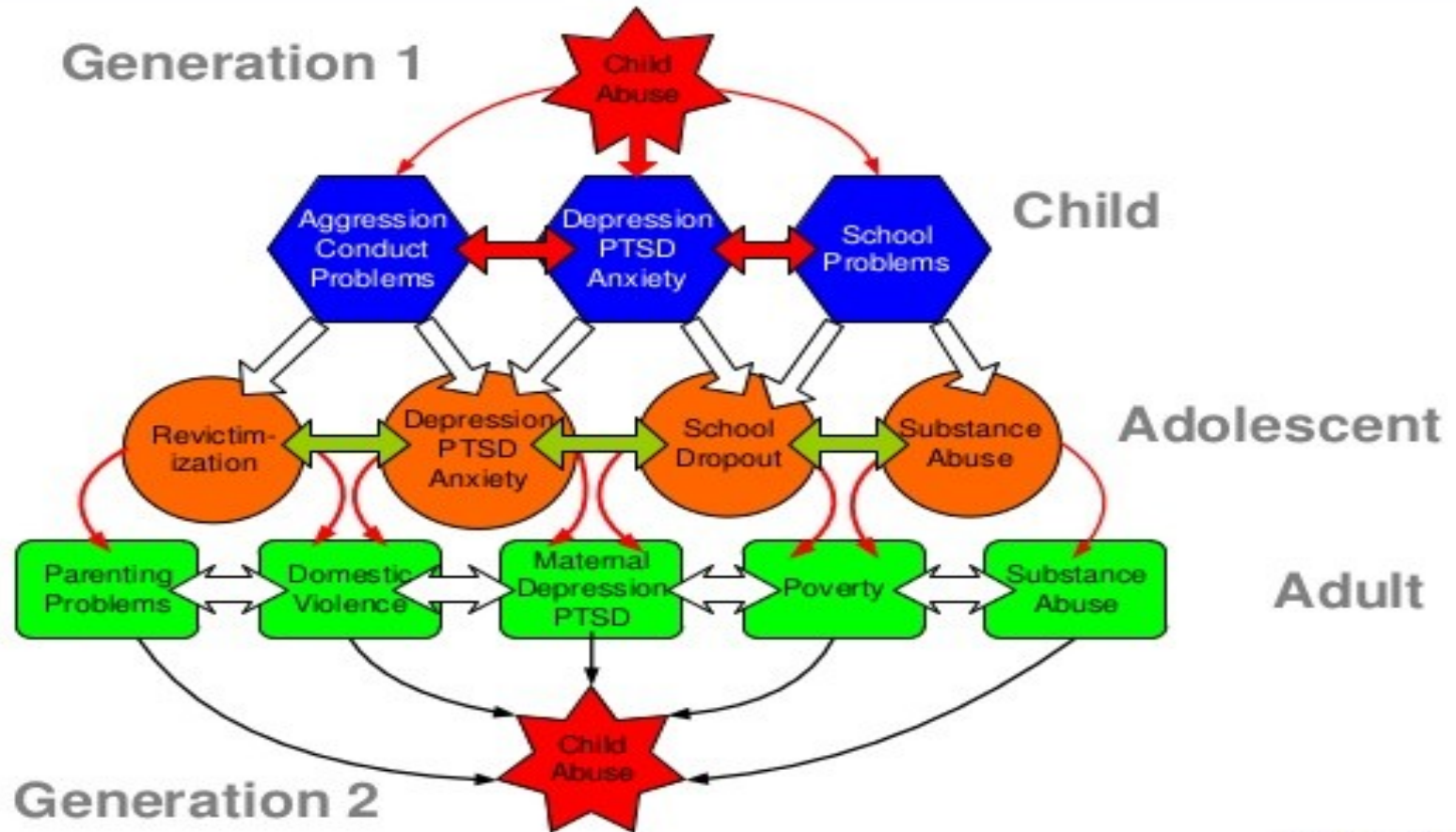


Courtesy of Washington State Family Policy Council

# Typology of Violence



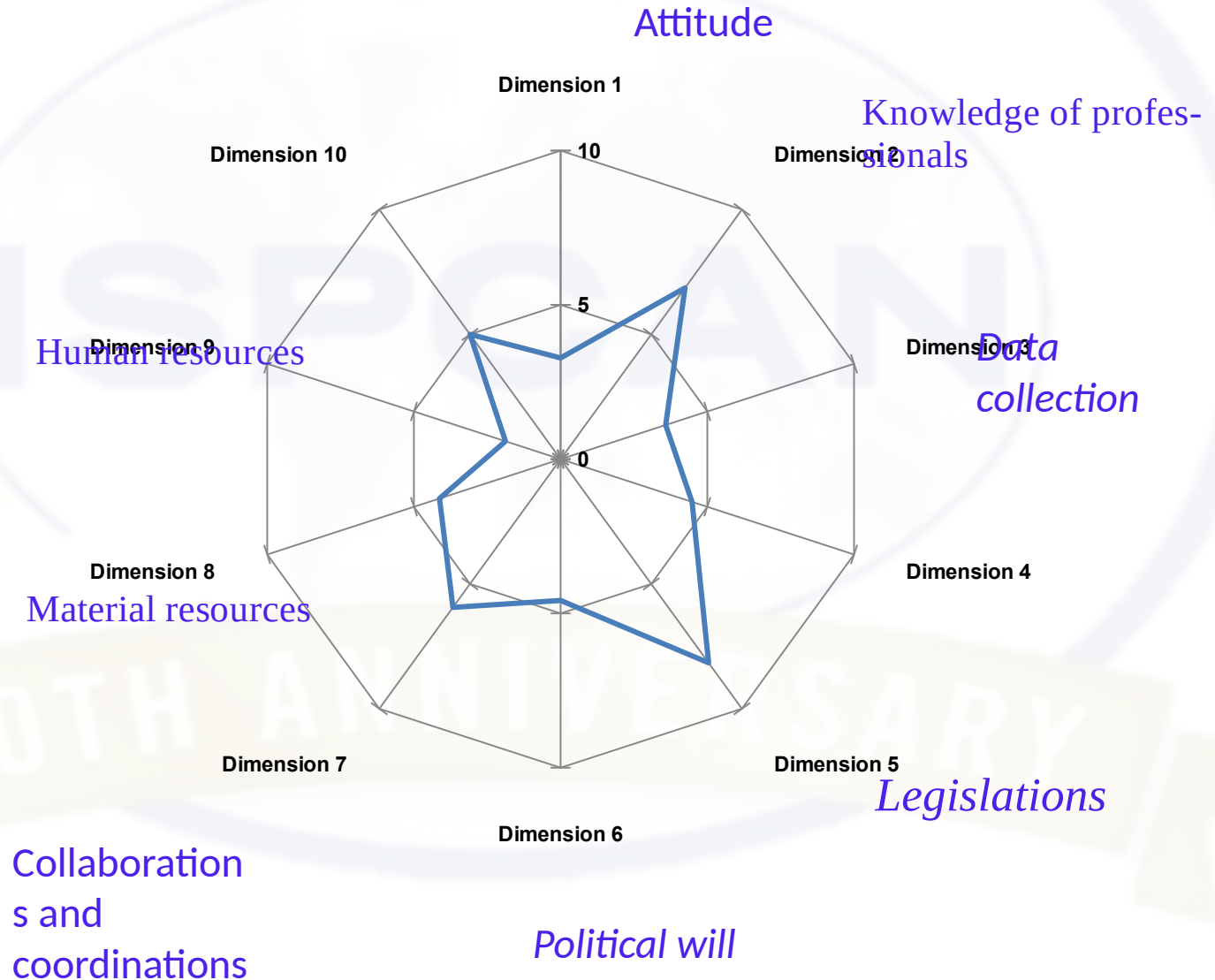
# How ACES Cross Generations



# Main challenges

- Laws, legislations, and policy on child protections
- Culture, attitude, values, and social norms
- Data Collection & Research

# Child Protection / Prevention Readiness



# SWOT: more similarities than differences

- Weaknesses:
  - Structural obstacles:
    - Disaster responsiveness and surge adaptation
    - Lack of monitoring systems and independent structures
    - Poor Research
    - insufficient [meaningful] Child participation.
  - Legislation discrepancies and pitfalls:
    - OP, with reservations
    - Delay in review of national child protection laws and legislations.
  - Capacity building and financial resources:
    - Lack of allocated budget to child protection and prevention programs
    - Insufficient multidisciplinary training.

# SWOT: more similarities than differences

## Strengths:

- Structural helpers:
  - Strong professional bodies: Medical bodies; Academics...
  - Potent University Hospitals
  - Strong potentials in mobilization
  - Primary care outreach: Polio prevention
- Legislation discrepancies and pitfalls:
  - All countries endorsed the CRC and committed to SDGs
- Capacity building and financial resources:
  - Ad Hoc child protection and prevention programs
  - Research: available I-CAST instrument

# SWOT: more similarities than differences

## ✂ Challenges and Threats:

### – Structural:

- Regional Armed conflicts, EFCM,
- Child displacement, CT, Migrants and refugees
- Safety and Burnout of professionals
- Primary health breakdown
- Data base on child and health

### – Legislation:

- Some still lack or turned down national child protection laws and legislations: EFCM; CSET; CAC; BCB; CCL;

### – Capacity building and financial resources:

- Processing of specific budget allocation to child protection and prevention programs
- Platform for multidisciplinary training of professionals

# SWOT: more similarities than differences

## ✂ Opportunities

- Structure:
  - Regional bodies: APS, APSPVAC; ISPCAN-RRC...
  - International bodies: WHO-INSPIRE; IPA, ISSOP, ECPAT,...
  - Pathfinder countries
  - UH monitoring teams [ER, PD] and CDR
  - Municipal working groups and taskforces
  - Childhelplines
  - Connect Research: I-CAST instrument
- Legislation discrepancies and pitfalls:
  - From the CRC to SDGs: Child Rights and Child Health
  - CRC Art 19 [GC13]; #endviolence
- Capacity building and financial resources:
  - Develop specific links with academic resources on child protection and to prevention programs: cost-effectiveness
  - UH and HSCC CPUs
  - CMMC; Multidisciplinary; Psychosocial; Intermediate; Basic.

## **Strengths of Health care:**

Long history of sectoral connection  
APNPVAC 2004; ArabCAN 2012

Increasing child protection units in medical facilities

Detection of child abuse and neglect at the  
emergency room

## **Weaknesses**

Uneven protocols to screen identify child abuse

Limited knowledge among HCP on child  
maltreatment

HCP burnout if not supported

Uneven multidisciplinary cooperation

# Health care SWOT

## **Opportunities**

Good basic knowledge

CMMC: University Diploma and CP Programs

Deans' conference

Knowledge on “safe environment” for children

Child protection policies and charters

Mandatory reporting and data collection strategies  
in ER

## **Threats**

Social stability

Child discipline legislations

Poor budgeting and auditing on child protection  
system

# What is our Present to their Future?

- **Challenges and resistance:** Conflicts and wars, ethnic and gender discrimination, cultural norms v/s values, political influences and corruption...
- **Hope and resilience:** woman and child dyads, professionals, academics, non-governmental organizations... change legislations and policies ... to improve child protection system

# Map Next Steps

- Consider how existing structures (formal and informal), services and organisations can be used to improve collaboration within the child protection system
  - Identify opportunities and challenges and how these might be taken/risen to
  - Plan the future actions (process) needed to develop and sustain inter-agency collaboration to protect children.
- Examples of workshops:
    - Understand the role of professionals : **CMMC**
    - Promote the establishment of multidisciplinary settings: **CPUs**
    - Share collaborative work outline: **professional societies, academics**
  - Examples of frames:
    - Develop an understanding of regional and global agency cooperation: **APSPVAC and INSPIRE**
    - Integrate #endviolence, the UN CRC and GC13: **National activities & regional support**
    - Identify the process of multi-disciplinary work and the components of inter-sectoral arrangements: **Algorithms and Guides**
    - Recognise the importance of building and sustaining an effective child protection system: **regional resource centers;**

# Children and youth taking over

Most challenging options are in most difficult environments!

...Where the most vulnerable is the youth and the child

... who is not the slowest to change!

