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**CONSULTANCY INPUT TO THE DFID HEALTH
RESOURCE CENTRE INFORMATION SERVICES –
HEALTH RESOURCE GUIDE: CHILD HEALTH
SECTION.**

CHILDREN IN DIFFICULT CIRCUMSTANCES

**Revised report for the Institute for Development Studies, Sussex
and DFID.**

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Introductory note

This is a revised report following clarification of the terms of reference (TOR). The revision now groups child labour, orphanhood, abuse and children exposed to conflict together. The TOR requires the consultant to focus reference selection on a set of key areas (evidence base etc). Clearly these have been drawn up with a medical perspective in mind, and some are not readily applied to the topics of child labour, abuse, orphanhood and exposure to political conflict. Drug procurement is one obvious example. These limitations have been taken into account in the presentation of references related to each topic.

CHILDREN IN DIFFICULT CIRCUMSTANCES

Introduction (104 words)

The rights, health, development and well being of children in difficult circumstances are severely compromised. Outcomes depend on the form and duration of the adversity, the child's age and gender, and availability of support and protection. Community-based and culturally sensitive interventions should be considered as far as possible. Targeting of children orphaned by AIDS should be avoided as stigmatization may result. Kin rather than residential care for orphans is good practice wherever feasible. Effective treatments for abused children (in Western societies) include trauma/abuse-focused cognitive therapy and parent-child interaction therapy. Home visiting preventive initiatives have to be intensive if they are to reduce abuse risk.

Three Key readings (internet available)

1. Boyden, J. & Mann, G. (2000). 'Children's Risk, Resilience and Coping in Extreme Situations'. Background Paper to the Consultation on Children in Adversity, Oxford, 9–12 September Available at: <http://www.rsc.ox.ac.za>
2. UNAIDS, UNICEF & USAID. (2004). Children on the brink. Strategies to support children isolated by HIV/AIDS. Available at: www.unaids.org and www.unicef.org
3. Kauffman Best Practices Project (2004, March). Closing the quality chasm in child abuse treatment: Identifying and disseminating best practices: Findings of the Kauffman best practices project to help children heal from child abuse. Charleston (SC)7 National Crime Victims Research and Treatment Center. Available at: <http://www.musc.edu/cvc/kauffman.html>

Ten Additional readings

1. Barenbaum, J., Ruchkin, V., & Schwab-Stone, M. (2004). The psychosocial aspects of children exposed to war: practice and policy initiatives. *Journal of Child Psychology & Psychiatry & Allied Disciplines*, 45, 41-62.
2. Duggan, A., Fuddy, L., Burrell, L., Higman, S. M., McFarlane, E., Windham, A. et al. (2004). Randomized trial of a statewide home visiting program to

- prevent child abuse: impact in reducing parental risk factors 27. *Child Abuse & Neglect*, 28, 625-645.
3. Giese, S., Meintjies, H., Croke, R., & Chamberlain, R. (2003). Health and social services to address the needs of orphans and other vulnerable children in the context of HIV/AIDS. Cape Town: Children's Institute. Available at: <http://web.uct.ac.za/depts/ci/index.htm>
 4. Loughry, M. & Ager, A. (Eds) (2001), *The Refugee Experience*. Available at: <http://www.forcedmigration.org/guides/fmo004/fmo004-8.htm>
 5. Mann, G. (2003). *Family matters. The care and protection of children affected by HIV/AIDS in Malawi*. Stockholm: Save the Children Sweden.
 6. McConnan, I. & Uppard, S (2001). *Children - Not Soldiers: Guidelines for working with child soldiers and children associated with fighting forces*. London: Save the Children UK. Available at: <http://www.savethechildren.org.uk>
 7. Richter, L. M., Manegold, J., & Pather, R. (2004). *Family and community interventions for children affected by AIDS*. Cape Town, Human Sciences Research Council. Available at: www.hsrapublishers.ac.za
 8. UNICEF Child Protection Indicators
http://www.unicef.org/infobycountry/stats_popup9.html
 9. Van As, A. B., Withers, M., Du Toit, N., Millar, A. J. W., & Rode, H. (2001). Child rape -patterns of injury, management and outcome. *South African Medical Journal*, 91, 1035-38.
 10. Woodhead, M. (1998) *Children's Perspectives on their Working Lives: a participatory study in Bangladesh, Ethiopia, The Philippines, Guatemala, El Salvador and Nicaragua*, Stockholm, Radda Barnen. Available from <http://www1.rb.se>