Addressing the imperative for children's rights training

Gerison Lansdown, Gary Robinson, and Stuart Hart

The context

The Convention on the Rights of the Child (CRC) has achieved near universal ratification, but knowledge and understanding of its principles and standards and how to ensure their realisation, remains extremely limited. Millions of children throughout the world continue to experience widespread neglect and violation of their rights by those with direct and indirect responsibility for ensuring their implementation. Achieving respect for the human rights of children requires action at many levels - legislation, policies, resources, services, data collection, awareness raising and mechanisms for accountabilityⁱ. But it is not just the structures and systems that need changing. The people who live or work with children also play a significant role in determining whether or not their rights are realised. Doctors, nurses, teachers, social workers, psychologists, child care workers, nursery staff, police, members of the judiciary and others have huge influence over children's lives. If they are to fulfil their responsibilities towards those children, they need to be fully conversant with their human rights and how to ensure their incorporation into all levels of their day to day work. The Committee on the Rights of the Child emphasizes the important role of professionals in building sustained cultural change towards rights-respecting environments. In the examination of States Party reports, as well as in General Comment No. 5 on General Measures of Implementation, it consistently emphasises the importance of introducing systemic education and training on child rights for all professionals working with and for childrenⁱⁱ.

The challenge

In the two decades since the CRC was adopted by the UN, there has been a proliferation of training courses on all aspects of children's rights. Workshops, seminars, and courses have been offered in most countries, largely provided by NGOs, but also many UN agencies. While much of this provision has been targeted internally for agency/organization staff, many courses have also been run for government officials, professionals working directly with children, policy and army personnel and religious and community leaders. However, important though this work has been, the courses tend to be optional, irregularly and/or infrequently offered, and likely to attract primarily the already motivated. They operate on the basis of short, self contained interventions that stand outside the core training provided for the individuals involved. They are not enough: child rights education needs to be embedded into the pre-service and in-service and continuing professional development of all relevant professionals. The principles and standards of the CRC need to inform the philosophy, culture and values underpinning professional education and practices. To date, this has not happened on any sustained basis, with few governments making the necessary investment and commitment to provide professionals with the training they need. The reasons for this failure are complex. In some cases, it reflects a lack of commitment, or even resistance to child rights on the part of governments. The professions themselves often lack understanding of the relevance of rights for their practice, and therefore the necessary interest in adapting existing provisions to incorporate missing and needed perspectives. Courses are often

already overcrowded with content and the prospect of trying to accommodate new learning is challenging. Lack of competence and confidence in teaching children's rights is also a factor inhibiting change.

Unless and until such systematic provision is introduced, we will continue to fail children.

For example.....

- Nine year old Joseph has TB and HIV/AIDS. He has spent months in Π hospital - and it is possible he will die before he has the chance to go home. Yes, he needs medicine. Yes, he needs nursing. Yes, he needs skilled diagnostics and interventions. But realising the right to health requires more. He is frightened at night in the dark. He misses his mother and has not seen her for weeks. He doesn't understand why he has to have these painful injections. He hates it when the nurses shout at him if he cries. He misses school and is worried about falling behind. There is nowhere to play in the hospital. Loneliness and fear get in the way of his recovery. Medical care usually only focuses on his physical health, yet Joseph also has a right to be surrounded by caring people, to dignity, to be heard, to meaningful information, to an education, to play, to confidentiality. But doctors and nurses have only been trained to deal with the medical issues. They don't see or hear many of the things that truly matter to loseph. It is not recognized as their responsibility. Doctors and nurses do not pay as much attention to how his life is experienced as they do to the medical treatment he receives.
- Dr Valdivia works as a paediatrician in a large children's hospital. Over Π the past 10 years, hundreds of children with bruises, burns, broken limbs, and cuts, inflicted by parents, often in the name of discipline, have come into her clinic. So, she treats the children, patches them up, and sends them home, or in severe cases, into the public care system. The cycle continues. She bears constant witness to the impact of a society that condones parental beating of children. And she addresses its consequences but not its causes. If she continues that way, nothing will change. Is this a sensible use of her skill and expertise? She is frustrated by behaviours destructive to children, but feels helpless about challenging them. **Doctors are not trained to apply their** experience to advocating for the changes that will begin to address the high levels of violence perpetrated on children? In general, they do not perceive themselves as having a responsibility and genuine opportunity to work towards changing the law and practice which allows this violence to persist.

An initiative to meet the challenge

In response to this gap, CRED-PRO (Child Rights Education for Professionals) was established as an international programme, based in the International Institute for Child Rights and Development, University of Victoria, and funded by the Oak Foundation, to facilitate and support the sustained development of such child rights trainingⁱⁱⁱ. It is a collaborative initiative which works in partnership with the

Committee on the Rights of the Child , UNICEF, WHO/PAHO, and many national, regional and international professional bodies including American Academy of Pediatrics (AAP), the Royal College of Paediatrics and Child Health (RCPCH) and the European Society of Social Paediatrics (ESSOP), IPSCAN, Education International, International School Psychologists Association, International Early Child Education Association, Children's Institute (Cape Town University), and International Children's Centre, Turkey.

The CRED-PRO methodology

The starting point is to develop a core curriculum for professionals working with or for children. This is undertaken in collaboration with leading international experts in the particular professions, in curriculum development and in child rights. For example, a partnership with the American Academy of Pediatrics and the Royal College of Paediatrics and Child Health was formed to develop a curriculum for paediatricians and other health professionals^{iv}. While the focus in the curriculum obviously varies according to the specific profession, the overall framework always comprises five modules with a strong emphasis on how the CRC impacts on practice, rather than a more technical legalistic understanding of human rights^v:

• **Module One - The child, development, needs and rights:** A brief introduction to child development, the universality of children's needs and the consequent obligations and recognition of entitlement of children to have those needs met. It examines the relationship between needs and rights.

• Module Two - The UNCRC as the foundation for a child rights approach: An introduction to the CRC, its general principles, its status and associated responsibilities, and a systems approach to its implementation.

• Module Three - Respecting children's rights in individual professional practice: An analysis of the implications of child rights for the work of the individual practitioner and his or her relationship with the child – addressing, for example, the right to information, to be listened to and taken seriously, to respect for evolving capacity and to recognition of children as agents in their own development, to protection from all forms of violence, to give informed consent and to privacy and confidentiality. It also examines the implications of the CRC for the role of parents, the relationship between parental and children's rights and identifies some of the key challenges to be addressed in promoting and respecting children's rights.

• Module Four - Respecting children's rights in institutions and systems providing services to children: The development of rights respecting institutions and systems - for example, health care, education, child care, social work or judicial systems. The curriculum addresses the development of services which are inclusive, flexible and accessible for all children; principles of equality of access, non-discrimination and respect for children's different

cultures, religions, language, and abilities; and commitment and approaches to reaching the most vulnerable children. It explores the need to build services that promote the best interests of children and not merely those of, for example, parents, administrators, consultants or researchers. It emphasises the importance of involving children in the design, development and implementation of services, creating safe and nurturing environments for children which are nonviolent, respectful and accountable. It also recognises partnership with and respect and support for parents and their role in children's lives.

• **Module Five - The professional as advocate:** Professionals working with children are well placed to identify those areas of public policy which harm or impede their rights to development, participation and protection. For example, there is only a limited role that health services can play in promoting children healthy development. Of far greater importance are the social determinants such as poverty, inequity, discrimination, violence, insecurity, environmental pollution or risk of accidents. This module explores the role of the professional as a citizen-advocate in creating an environment conducive to respect for the rights and well being of children.

This generic curriculum is then available to be developed, adapted and implemented for different country contexts and for different professional groups. The **process** which CRED-PRO has adopted to achieve the successful implementation of the curriculum is as important as the **outcome**, and involves the following steps:

• We seek professional interest at the national or regional levels. Only where that interest exists will we consider proceeding: we never seek to impose the curriculum from outside.

• Where there is either government or professional interest, the first step is to establish a lead partner within the country to co-ordinate and support the process. An advisory group is established to identify the most appropriate entry point for the curriculum within existing training for that professional group, and to adapt and amend the curricula to ensure relevance for the country or regional social, cultural and economic context. Participation in this forum will depend on both the specific profession and the country involved, but will generally involve representatives from the relevant profession, academic institutions, government, UN agencies, INGOs and national or local civil society organisations.

• The advisory group undertakes a detailed review of the core curriculum to adapt it for the local cultural, social, political, legal and economic context.

• The draft curriculum is circulated to a wider constituency for comment and where possible, a consultation with children is undertaken.

• Once the necessary adaptations have been made, the lead partner organises and runs a training of trainers to build a core group of 'champions' familiar with and committed to the curriculum.

• The lead partner, together with the 'champions', then develops a plan for achieving the incorporation of the curriculum into the training of all professionals in that field in their country or region and toward sustainability and future upgrading. The focus for this advocacy must depend on what the group has determined to be the most viable entry

points – for example, pre-service training, under or post graduate levels, in-service training, or continuing professional development.

Conclusion

It is striking that in the 20 plus years since the CRC was ratified by so many governments with such enthusiasm, so few have evolved systematic programmes for providing training for professionals on the application of children's rights. This is a need that must be met, for such training will provide genuine leverage in support of children's rights. The experience of the CRED-PRO programme indicates that while the development of such training is a challenging process, it is achievable. CRED-PRO's key contribution has been to serve as a catalyst tapping into and building on potential interest through the offer of both a product and a process. The core curriculum is the product – it is merely a beginning – each country needs to take it, adapt it, elaborate it and make it relevant to their context. Local ownership is vital. The added value CRED-PRO brings is to overcome the need to reinvent the wheel and the opportunity to benefit from international expertise and experience. But CRED-PRO also offers a supported process for implementation. This is the key to success. CRED-PRO seeks to go beyond one-off workshops, bringing together all stakeholders to invest in a commitment to produce and sustain change. By enjoining governments, academics, professional bodies, UN agencies and NGOs to explore all possible strategies for achieving implementation, it becomes possible to tackle and overcome barriers and to ensure that professionals working with and for children have access to the information, guidance and training they need to empower them to fulfil, protect and respect children's rights.

i

See, for example, Committee on the Rights of the Child, General Comment No.5, General Measures of Implementation of the Convention on the Rights of the Child(arts 4, 42 and 44, para.6), CRC/C/2003/5 November 2003

ii

Implementation Handbook on the Convention on the Rights of the Child, Hodgkin R and Newell P, UNICEF, 2007

iii

www.credpro.org

iv

The curriculum can be accessed at the AAP website: <u>http://www.aap.org/commpeds/resources/childrensrights.htm</u>

v

The basic generic curriculum is being expanded to include a new module 3 which establishes the relevance of child rights to the values, purposes, roles and responsibilities of the specific profession.