

**Recovery, Rehabilitation and Reintegration of Children  
Exposed to Commercial Sexual Exploitation:  
Outcome Evaluation and Program Analysis**

**(The Case of Forum on Street Children-Ethiopia)**

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## **Abstract**

This study assesses the outcomes of the Recovery, Rehabilitation and Reintegration program for children exposed to commercial sexual exploitation which has been run by Forum on Street Children Ethiopia. The assessment is made toward examining the successes, challenges and prospects of the Drop in Center, the Safe Home project and the National Steering Committee against Sexual Abuse and Exploitation of Children in facilitating the appropriate conditions to assist children engaged in commercial sex work to bring about psychosocially and vocationally valued changes in their way of life so that they could be able to escape from exploitation.

Accordingly, qualitative data collected from program documents, beneficiary children, families, project staff and partner organizations have revealed the considerable outcomes of the projects in promoting the physical well being, personal growth, livelihood development and social integration of children exposed to commercial sexual exploitation. Moreover, the endorsement of the National Plan of Action on Sexual Abuse and Exploitation of children in Ethiopia is also distinguished to be a promising move to mitigate the challenges associated with resources, capacity and strategies to address the problem of commercial sexual exploitation of children in a more systematic and organized manner in the country.

## **Chapter One**

### **Introduction**

#### **Background**

Ethiopia is located in the horn of Africa with the land area of about 1.1 million kilometers and a population size of about 69 million persons in 2003, growing at a rate of 3 percent per annum. Ethiopia stands third in terms population and ninth in terms of geographical area in the continent of Africa. The country is divided into nine federal states and two city administrations. Each regional state or city administration is sub-divided into Zonal and Woreda (district) level administration. The critical role of agriculture in Ethiopian economy is very well known. The sector on the average accounts for about 50% of GDP, extends a means livelihood for over 85% of the population, and brings over 90% of the foreign exchange that country earns (Ministry of Labor and Social Affairs/MOLSA/ &Ministry of Finance and Economic Cooperation/MFEC/, 2003).

With a per capita GDP of 100 USD Ethiopia has still remained to be one of the poorest countries of the world. Accordingly, more than 31.3% of the population lives below the poverty line that is less than 1 USD per day. Life expectancy in Ethiopia is 41.4 for Male and 43.1 for female, one of the lowest in the world. Moreover the HIV incidence is estimated to be 10.63% (End Child Prostitution and Trafficking /ECPAT, 2006).

The study conducted by Government of Federal Democratic Republic of Ethiopia (GFDRE) & United Nations Children's Fund (UNICEF) cited on National Action Plan for Sexual Abuse and Exploitation (NAPSAEC, 2006), also indicates that, due to several reasons related to family poverty and destitution, the recurrent drought and famine, the long civil war that ravished the country, the huge number of the population is expected to live in especially

difficult circumstances. Among this segment of the population more than 185,000 Ethiopia children work, sleep and live on streets of the major towns of the country. Similarly, Melakm (2004) also mentions the report of End Child Prostitution Child Pornography and Trafficking (ECPAT, 2001) that estimated over 4 million children live in especially difficult circumstances in Ethiopia. The current pandemic of HIV/AIDS also has brought a significant number children to be orphaned as their number has reached over 1.2 million with many of them being forced to engage in activities such as begging, streetism, child labor, domestic services and commercial sex work to generate income and sustain the livelihood of themselves and their younger siblings (NAPSACE, 2006).

Because of their vulnerability to abuse, exploitation and much other harm, children who are forced to live under the realities of the above discussed difficult circumstance are, for shorter or longer periods in their lives, exposed to intense and multiple risks to their physical and mental health. A common characteristic of children under difficult circumstances is that they lack proper adult care and protection, and that they undergo various forms of deprivation, abuse or exploitation. Groups of children under such difficult circumstances include children who live and work on the streets, abandoned and neglected children, orphans, children with disabilities, child workers, children in armed conflicts, child mothers (including child brides) and their children, displaced and refugee children, children infected and affected by HIV/AIDS, children of imprisoned mothers and sexually abused and sexually exploited children. (United Nations, Economic and Social Commission for Asia and Pacific (UNESCAP, 2002).

The problem of sexual exploitation of children, which is a central issue to be dealt with this paper, is identified by many concerned bodies as a fast growing phenomenon world wide and in Ethiopia. Each year over a million children (below the age of 18) world wide are

reportedly forced in to different forms of commercial sexual exploitation that mainly includes child prostitution, trafficking and sale of children for sexual purpose and child pornography. For example, in South Eastern Asian countries where the commercial sexual exploitation of children has reached a rampant stage, the number of children engaged in commercial sex work is estimated to reach, 200,000 in Thailand and 100,000- 200,000 in Nepal. Similarly, there are also a significant number children exposed to commercial sex work in Latin American countries such as Chile and Brazil where the figures are believed to be higher than 50,000 in both countries (Warburton & Cruz, 1996).

Due to the illicit nature of commercial sexual exploitation of children and the absence of any comprehensive research made and available in Ethiopia, there is no source that clearly indicate the extent of sexual abuse and exploitation of children. However, some existing sources show that commercial sexual exploitation of children is a growing social problem victimizing a considerable number of children in the country. Many children and inexperienced young girls are seen on street of Addis Ababa and other major towns of the country engaged in commercial sex work exposed to abuse and exploitation which is often imposed by adults and the hardship of survival causing multitude of health and psychosocial problems. This happens in large part due to their social marginalization, economic circumstances, physiological maturity and lack of skills and power to negotiate safe sex practices (Getachew & Almaz, 1997).

In general, across the globe the sex sector is growing with an accelerated demand for younger children due to inadequate government intervention and law enforcement particularly in terms of adopting and maintaining protective measures for children. Moreover, as AIDS become widespread among the prostitute population in many developing countries,

particularly in Africa, clients may reason that the young girl, who has spent less time on the streets, is less likely to have acquired the HIV virus (Lalor, 1996).

Barnitz (2001: 598), asserting the malevolence behind commercial sexual exploitation of children by describing the phenomenon as follows:

Few, if any, forms of abuse and exploitation are more destructive than the commercial sexual exploitation of children. This atrocity, rightly called the ultimate evil is defined as a fundamental violation of children's rights and comprises sexual abuse by a person and remuneration in cash or kind to the child or to a third person or persons.

The first sign for Commercial Sexual Exploitation of Children and Adolescence being recognized as a global flagrant violation of their human rights is the marked by the universal ratification of the Convention on the Rights of the Child (CRC) passed by the United Nations General assembly in 1989 which was entered into force on 2 September, 1990. A second response came forward, with the intention of going from principle towards implementation. This was the First World Congress against Commercial Sexual Exploitation of Children hosted in Stockholm (1996) by the Government of Sweden in cooperation with UNICEF, the campaigning organisation ECPAT, and the NGO Group for the Convention on the Rights of the Child. The Congress brought together 122 governments, Ethiopia was also represented, with hundreds of non-governmental organisations (NGOs), inter-governmental agencies , researchers and academics, law enforcement sectors and young people. The focus of the Congress was on three elements of the commercial sexual exploitation of children such as:

- child prostitution,
- the trafficking and sale of children for sexual purposes,
- and child pornography.

The Declaration and Agenda for Action complimenting the Convention on the Rights of the Child was adopted by all participating governments committing themselves to a 'global partnership' against the challenges of commercial sexual exploitation of children.

That renewed the commitment of states to stress article 34 of the United Nations Convention on the Rights of the Child (UN CRC) 1989 makes it mandatory for state parties to undertake measures to protect the child from all form of sexual exploitation and sexual abuse. The UN CRC on articles 25 and 39 further requires state parties to take appropriate steps towards the physical and psychological recovery and social reintegration of children who may be victims of any form of sexual exploitation and abuse.

Ethiopia, as a signatory of the international instruments and in response to commitment to the Stockholm declaration that calls for immediate and intense intervention at the government level, the Ministry of Labor and Social Affairs has been mainly dealing with macro policy issues and preparation of directives that could help for provision of different services for the children. Where as NGOs such as Forum on Street Children- Ethiopia (FSCE), Children Aid Ethiopia- (CHADET) and African Network for the Prevention and Protection of Child Abuse and Neglect-(ANPPCAN) Ethiopia, have been at the front of the move instigating attempts of addressing the rights and needs of the children exposed to the overwhelming effects Commercial Sexual Exploitation of Children by initiation small scale pilot and model projects through their preventive, recovery, rehabilitation and reintegration programs (Save the Children-Denmark, 2003).

Among these few implementing NGOs, FSCE is chosen to undertake this evaluative case study, has attained a great experience in the area of the child right movement aiming at building up a better life for children under difficult circumstance in the country to provide, care, sensitize, influence, empower, and advocate for children and their rights starting from

early the 1990's. Its program on the prevention, protection and support for sexually abused and exploited children that was initiated in 1996 in Addis Ababa, the capital city, was the first of its kind in the country and replicated to other major towns of Ethiopia by the organization and other concerned NGOs in the past ten years.

With a specific interest to the Program for Sexual Abuse and Exploitation of Children, this research attempts to assess the outcomes of the sub projects were assembled to facilitate the psycho-social rehabilitation and reintegration of target children exposed to commercial sexual exploitation. Moreover, successes, challenges and prospects of the program will be analyzed and discussed in order to give an illustration as to where the program is heading in promoting the wellbeing of sexually abused and exploited children.

### **Statements of the Problem**

Apparently, initiating and increasing the number of services does not automatically lead to better outcomes for children. Whether or not this increased awareness and growth of services for the Recovery, Rehabilitation and Reintegration (RRR) of children and young people already abused through commercial sexual exploitation has been accompanied by a comparable level of positive change for the beneficiaries is less certain. Lack of evidence could be attributed to the result of a shortage of program and project evaluation. In line with this, efforts made so far in evaluating the combined outcomes of services and strategies currently underway by various parties in the country have been very limited. And those few evaluations that have been made so far are mostly done for the consumption of the donor organizations mostly influenced by the aim of sustaining the fund flow to run the program.

Expansion of protection and recovery measures for children exposed to commercial sexual exploitation should be based on positive learning from challenges. Generating certain practical standards, against which project performance can be reviewed and transferring good

practice is not possible without undertaking evaluation of the impact or outcomes of projects. In other words, efforts to speed up the process of developing new services that are effective and efficient, demands some assessment of the outcomes of the existing practice and requires transparency about actions and actual achievements, with mistakes and failures as useful as successes, in terms of future development.

## **Objectives of the Study**

### **General Objective of the Study**

The general objective of this study is critically looking at the various aspects, directions and prospects of the selected Recovery, Rehabilitation and Reintegration (RRR) intervention for children exposed to commercial sexual exploitation by examining the status and evaluating outcomes of the selected program and come up with recommendations that can be useful in refining practices and could serve as tools for influencing policies.

### **Specific Objectives of the Study**

The specific objectives of study include:

- To assess the major aspects of the RRR interventions in the selected programs
- To assess the outcomes the RRR programs in changing the life and conditions children exposed to commercial sexual exploitation
- To review the RRR programs based on the clear and non-contentious standards based on various international instruments.
- To examine major challenges of the selected program; both internal and external
- To explore prospect for the sustainability of the RRR interventions
- To come up with possible solutions and recommendation to improve services for children exposed to commercial sexual exploitation

## **Scope of the Study**

Out of the currently available NGO programs directly involved in RRR interventions for Children Exposed to Commercial Sexual Exploitation, an integrated program known as the Preventive and Support Program for Sexually Abuse and Exploited Children run by FSCE that includes a Drop in Center, a Safe Home projects and a National Steering Committee on Sexual Abuse and Exploitation of Children (NSCSAEC) is purposively selected. The program is known to be the first RRR initiation in Ethiopia launched in 1996 and it is believed to be a well organized and fully-grown intervention that would serve as an appropriate entry to conduct the outcome evaluation. Moreover, Save the Children Sweden as a major donor organization and MOLSA with a mandate of coordinating and implementing child development related activities in the country are going to be the other source of data for the study.

## **Significance of the Study**

Along with carrying out progress follow up, identifying areas of potential concern for supporting and implementing agencies and assessing effectiveness of the intervention activities over time is something that is needed to be taken as a simultaneous activity tracing the direction of the programs working towards the recovery, rehabilitation and reintegration of children exposed to commercial sexual exploitation.

Currently as a number of other NGOs are emerging to deal with the problem commercial sexual exploitation of children as a result continuous lobbying and sensitization done by the pioneering local NGOs, the government and international organizations, the outcome of this study could be useful in pointing out relevant issues related to the recovery, rehabilitation and reintegration of children exposed to commercial sexual exploitation. These

issues can be related to informing directions to policies, designing new programs and reviewing those programs already being undertaken.

In general, this research will share similar points of significance which are listed by Depoy and Gillson (2003), who describe outcome assessment as an important field of evaluation that;

- Allows the replication of successful interventions and planning future services based on empirical evidence
- Provides knowledge for comparison of interventions
- Provides feedback for knowledge and advancement of individual practice
- Allows for prediction of outcomes
- Contributes to empirical knowledge

### **Operational Definitions**

#### **‘Child’**

‘A child is every one under 18 years of age “unless under the law applicable to the child, majority is attained earlier’ (UNCRC, 1989: Art.1).

#### **Commercial Sexual Exploitation of Children**

The commercial sexual exploitation of children is a fundamental violation of children’s rights. It comprises sexual abuse by the adult and remuneration in cash or kind to the child or a third person or persons. The child is treated as a sexual object and as a commercial object. The commercial sexual exploitation of children constitutes a form of coercion and violence against children, and amounts to forced labor and contemporary slavery. It is a practice that implies not only sexual abuse of a child, but remuneration in cash or in kind. Commercial sexual exploitation covers

prostitution, pornography and trafficking in children for sexual purpose (ECPAT, 2001).

### **Recovery, Rehabilitation and Reintegration (RRR) Interventions**

According to UN-ESCAP (2005), recovery, rehabilitation and reintegration refers to policies, programmes and procedures that have been created to recover children from situations of actual or potential abuse or exploitation, to rehabilitate child victims through the provision of medical treatment and psycho-social counselling and support, and to reintegrate children back into their communities and families when possible. Such initiatives include procedures for the safe removal of a child from an institution or establishment where he or she is being exploited, training on standards of care for shelters that are responsible for child victims of commercial sexual exploitation and the creation of life skills and vocational training for child victims of trafficking.

## **Chapter Two**

### **Literature Review**

#### **Conceptualization of Commercial Sexual Exploitation of Children (CSEC)**

##### **Defining the ‘Child’**

Child and childhood are defined differently by different cultures. Attempting to coin a common understanding of the concept, some authors like Good (1974) cited in Melkam (2004) define a child as “a boy or a girl at any age before maturity”. This definition fails to ascribe what ‘maturity’ means. In that case and the definition is also subjective across time and cultures.

In the other circumstances, it is common to find the consideration of the age at which a child is able to give a legal consent being taken as a bench mark to define a ‘child’. This definition bear’s legal ramification (consequences) since a person of either sex who has not attained the full age of a certain years is taken as a person under the age of legal competence. Such kinds of definitions are tied to the legal instruments that are meant to protect the rights of the child and declaring the responsibility of the society protecting those rights. However, the age of consent itself varies from country to country, (13 in Spain and 21 in Egypt) and even within a country, for example Australia, affecting how courts deal with cases of child offenders (Melkam, 2004).

In this regard the Ethiopian Civil Code (2004) that uses the alternate word ‘minor’ for a ‘child’, defines a child as any person both male and female who has not reached the full age of 18. Similarly, the United Nations Conventions on the Rights of the Child (1989, Article 1) puts the same age limit for a person to be called a child. It says “... a child means every human being below the age of 18 years, unless under the law applicable to the child, majority

is attained earlier” Application of this international definition facilitates the formulation of a universal or common understanding that smoothes the cultural and contextual texture of the concept of the ‘child’.

### **Commercial Sexual Exploitation of children (CSEC)**

As (Ennew, 1996), clearly states the limitation of strictly applying the term Commercial Sexual Exploitation of Children(CSEC) in most African context because the feature of sexual abuse, sexual exploitation and commercial sexual exploitation are not yet clearly drawn, not only in analytical terms with in studies, but also with in diverse cultural understandings or context. According to the authors the term CSEC is not yet well structured and defined for most of the social science community of Africa. The main traditional theme or concern of child related research has been mostly geared towards the areas of socialization, initiation rites, medical anthropology and victimization and traumatization of children affected by natural and man made disasters with out any particular focus on commercial sexual exploitation of children. In the currently emerging literature CSEC is treated with the relatively-well developed discourse of child abuse and neglect mostly fitting under the issue of child labor.

Though this tendency of classifying CSEC just as one feature of other forms of child abuse fails to recognize the problem as a phenomenon in its own right, the classification does still very much relate to the International Labor Organization (ILO) convention No.182 that views commercial sexual exploitation of children in the form of using or procuring or offering of a child for prostitution and the production of pornography or for pornographic performances as one the worst forms of child labor.

In understanding of such subjectivities, the report issued by the (UNICEF, 2005) describes Commercial Sexual Exploitation as a sub-set of a wider problem of sexual abuse

and exploitation of children and asserts the need for analyzing the problem in association with the wider realm of the problem of sexual abuse and exploitation. Moreover pointing out the roots and showing the faces over time, the report describes Commercial Sexual Exploitation of Children (CSEC) as old and new; old in that it includes traditional practices and new in that globalization and advances in technology are posing a different set of challenges.

Apparently, sexual abuse and exploitation of children appears to have different definitions and features due to the peculiar cultural environment of a specific society under consideration. In other words, what is abusive in one cultural setup may be a normal behavioral pattern in another. It is also important to note that sexual abuse and sexual exploitation of children are not mutually-exclusive from one another. A child who is sexually exploited may also be sexually abused at the same time.

Another writer, (Estes, 2001) presents a range of definitions of terms which are directly or indirectly associated with sexual exploitation and commercial sexual exploitation of children. The presentations of the definitions give some kind of illustration or mapping of ideas currently widely in use by most literature dealing with commercial sexual exploitation of children. For the purpose of this research definitions which are thought to be relevant to the context are picked and presented as follows:

**Table 1 Summary of definition of concepts**

<b>Concept</b>	<b>Sub type</b>	<b>Definition</b>
<b>Child</b>		Person under the age of 18 years unless, under the applicable law of the child majority is attained earlier (UNCRC, 1989:Art 1) The scheme of the CRC suggested that this exception should be interpreted as an empowering one, in other words children under the age of 18 can claim the benefit of adulthood if granted by national law while still able to claim the protection of the CRC.
<b>Child Abuse</b>		The recurrent infliction of physical or emotional injury on dependent minor through intentional beating,

<b>Concept</b>	<b>Sub type</b>	<b>Definition</b>
		uncontrolled corporal punishment, persistent ridicule and degradation, or sexual abuse, usually committed by parents or guardians(NASWS, 1994)
<b>Child Sexual Abuse</b>		Sexual activity of either or several types that occur between children and youth under the age of 18 years and an adult. Such activities include fondling of child's genitals, intercourse, incest, rape, sodomy, exhibitionism, and commercial exploitation through prostitution, pornographic materials(NCCAN-2001)
	Type 1 Rape, molestation and prostitution	The rape, and in the case of care taker or interfamilial relationship, statutory rape, molestation, prostitution or other forms of sexual exploitation of children or incest with children(NCCAN-2001)
	Type 2 Pornography	The employment, use, persuasion, inducement, enticement or coercion of any child to engage in or assist any other person to engage in any sexually explicit conduct or stimulation or such conduct for the purpose of producing a visual depiction of such conduct (NCCAN-2001)
<b>Child Pornography</b>		Films, video, magazines, writings, photographs, computer images, or other material produced by either adults or child or both, that contain sexually explicit images of children and youth under the age of 18 years
<b>Prostitution</b>		The act of engaging in sexual intercourse or performing other sexual acts in exchange for money, or of offering another person for such purpose
	Type 1 Survival Sex	The act of engaging or offering sexual service of a child in exchange of money, clothing, food, shelter, drugs, or other considerations. Youth engaging in "survival sex" do not perceive themselves as engaging in prostitution but rather as doing "whatever is necessary" to ensure their survival.
	Type 2 Child/Juvenile prostitution	The act of engaging or offering the services of a child to perform sexual acts for money or other considerations with that person or any other person
<b>Exploitation</b>		Unfair treatment or use; unfair treatment or use of somebody or something, usually for personal gains
<b>Child Sexual Exploitation</b>		Sexual abuse of children by adults for the purpose of obtaining some benefits to the adult.
<b>Commercial Sexual Exploitation of Children</b>		Sexual abuse of children involving financial or other commercial advantage to some party or parties to sexual activity
	Type 1 Adult>Child For Money	Involves the transfer of money from an adult((or adults)) to a child in exchange for sex

Concept	Sub type	Definition
	Type 2 Adult>Child In-kind service	Involves the provision of either in-kind or supportive services by an adult to a child in exchange for sex (e.g., housing, food, protection, drugs, etc.).
	Type 3 Juvenile>Juvenile	Involves the provision of either money, in-kind (e.g., food, clothing, shelter, drugs) or services (e.g., safety and protection) <i>to a child by another child</i> in exchange for sex

Commenting on the use of the terms, (Warburton and Cruz, 1996) gives emphasis to applications as in some instances the differences are accurate and relevant, in other cases, the language used may be considered inappropriate by other parties working on the field because usage of some terms may be seen as conveying certain negative value and perceptions, and demeaning. Moreover, the linkage of abuse of children through commercial exploitation, and other forms of sexual abuse may be confusing when seeking to identify commonalities of approach and gather evidence about the scale of each concern.

Being clear about this understanding will give researchers or practitioners a freedom to move back and forth from one concept to the other while choosing a right term that could accommodate a particular type of child abuse in a specific context. For example, the preference to use the term CSEC in this study falls in to the intention of emphasizing the element of ‘exploitation’ that entails the persistence nature of sexual abuse that children are exposed. They are drawn in to the commercial benefits that also brings to them an incomparable pain compared to gain in any form as long as they are involved in the business. Though the term ‘child prostitution’ seems to be equally expressive of the context of the research, it is not favoured as an operational concept as it obscures the nature of sexually abusive behaviour unhelpfully focusing on the ‘informed consent’ and framing children as offenders rather than victims.

Looking at the above definitions it can be concluded that commercial sexual exploitation of children can be conceived as involving all the other chains and circumstances that could occur at a specific state exposing a child to multiple forms of abuses putting the him/her in a desperate position induced by physical, psychological, emotional and social damage inflicted mostly by an older person who seeks benefits or sexual advantages that can be extracted or exploited from the vulnerable child.

### **Theoretical Framework of the study**

There are several clusters of theoretical frameworks that might be considered and used with in the field of understanding the commercial sexual exploitation of children for the purpose of organization of principles, development of concepts and collection of data. For (Ennew et.al., 1996), each of these theories has their own particular campaigning stances moving side by side. The following table presents the campaigning theories and related theories in the field of CSEC.

**Table 2 Alternative Theories explaining CSEC**

<b>Campaigning</b>	<b>Theory</b>
Feminism	Patriarchy, the 'girl-child'
Morality	Religion, sexuality, blaming perpetrators, rescuing children
Child survival and development	Psychology and medicine
International development aid	Poverty, demand and supply (economics), community development
Children's rights(including sexual rights)	Power, childhood, human rights

Although all the theories have their own merits and explanatory purposes and values, the most coherent and more importantly child focused framework for the purpose of measuring and monitoring CSEC is suggested to be the children's right perspective. This is because the consideration of children's rights entails appreciation and discussion on the nature of childhood, which is dominated by the power differential between adults and children.

Consideration of this unequal power relationship opens the possibility of raising the issues of other forms of inequalities that are present between children and adults universally and at national or local level (Ennew, 1996).

Moreover, this theoretical understanding also pays due attention to the fact that, by virtue of being young and vulnerable, children possess some special rights to which they are entitled and should be extended. In this regard, the UNCRC recognizes and strongly supports the central role of families in safeguarding children's rights. This relationship between children and adults within families extends to the parallel link between children and states, which, in their modern form, are ultimately responsible or accountable for the welfare of the child and the state has the obligation to help families to meet the basic needs of their children.

The universal human rights of children, fully articulated by the United Nations Convention on the Rights of the Child (CRC, 1989), has been signed and ratified by all countries in the world except Somalia and the United States of America. In those countries that fully accepted and endorsed the convention policies, strategies and programs to deal with commercial sexual exploitation of children are expected to be based on the fundamental and inherent rights expressed on the document. These fundamental rights have to do with the recognition of the fact that all children are born with freedoms and inherit rights as all human beings.

The UNCRC framework is therefore the broadest possible context to understand the commercial sexual exploitation of children. Of particular interest to sexual abuse and exploitation the CRC on article 34 states that:

States parties undertake to protect the child from all forms of sexual exploitation and abuse. For these purpose, states parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:

- (a) The inducement or coercion of a child to engage in any unlawful sexual activity;
- (b) The exploitative use of children in prostitution or other unlawful sexual practice;
- (c) The exploitative use of children in pornographic performances and materials

The convention also identifies the obligations of State Parties in a comprehensive context under article 19 asserting that State Parties shall:

“...take all appropriate legislative, administrative, social and educational measures to protect children from all forms of physical and mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation...that includes effective procedure for the establishment of social programs to provide support for the child or for those who have the care of the child as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow up of instances of child maltreatment...”

Concerning the protection, rehabilitation and reintegration issues Article 39 of the convention clearly stands for the promotion of the physical and psychological recovery and social reintegration of neglected, abused and exploited children. This article is more relevant to children who are exposed to sexual abuse and exploitation appearing in what ever form.

To conclude, for the purpose of this study, the child right perspective is found to be a sound framework that extends a broad spectrum for the conceptualization of the commercial sexual exploitation of children as it provides the most practical and theoretical explanations as the same time serving as a universal legal instrument binding commitments of all concerned parties. Therefore, the relevant conceptual definitions, articles, principles and values of the CRC are taken as a basic background to under take this evaluative research that deals with assessing the outcome of an intervention program for the recovery, rehabilitation and reintegration of children exposed to commercial sexual exploitation.

## **Faces of CSEC in Ethiopia**

### **Extent and magnitude of the Problem**

In the case of Ethiopia, some studies estimated that child commercial sex workers make up 18-29 percent of the total prostitute population, which is estimated then to be 90,000 (Habtamu, 1996). Another study by (Bohmer, 1996), done on Adolescent Reproductive Health in the Ethiopia, pointed out that commercial sexual exploitation of young girls is frequently facilitated by their lack of economic power and job opportunity. The same study estimated 30 percent (about 30,000) of prostitutes in Addis Ababa as young girls ranging from 12- 26 years of age.

Although there is no precise and universal data available, some research evidence suggests that the age of children involved in commercial sex work is decreasing. Estimated average age of children brought in to the 'modern day slavery' to found to be 13 or 14. (Banitz, 2001). A survey cited on (Lalor, 1996) that was conducted by (Baardson, 1993) on 77 juvenile prostitutes in Addis Ababa confirms with the estimation as the findings reveled the mean age of children at starting commercial sex work to be 14.7 years.

### **Profile of victims of Commercial Sexual Exploitation and vulnerability Factors**

According to (Voss, 1999), the child victims of commercial sexual exploitation worldwide are both boys and girls, although the vast majority are girls aged between 10 and 18 years. Warburton & Cruz (1996), presenting the findings of the study on commercial sexual exploitation (Ethiopia was one the targets), suggested that vulnerability can be expressed by identifying children who are victimized and abused through commercial sexual exploitation, recognizing factors that indicate a high level of vulnerability which could be related to the individual and family dynamics, societal factors, political characteristics and

cultural ethos, combined to promote a situation in which the sexual abuse of children through exploitation.

The writers go further on the subject by dividing the vulnerability factors as Macro level and individual or family risk factors. The macro level factors in most of countries go with poverty, weak/confusing laws, consumerism/marginalization, Gender discrimination, weak/ contradictory legislative frame work, government corruption, political will, cultural beliefs, demand for sexual service and the AIDS pandemic. On the other hand, some of the factors associated with the individual and family situation are found to be family breakdown, abuse at home, being out of school and drug abuse.

It is true that the causes of CSEC vary from place to place, time to time and culture to culture. In the case of Ethiopia, the study by Radda Barnen and FSCE (1997) relates the major causes to poverty, migration, trafficking, sexual abuse, family pathology and AIDS. The same study identified vulnerable groups of children that are frequently involve in commercial sex work as street children, school children from destitute families, low achiever students, school drop outs, children of prostitutes, children of single mothers from slum communities and children trafficked or migrated from rural areas with the promise of employment in the urban area. There is also a case that most children who are sexually abused and exploited are used by their parents or bar owners as a means of income. Moreover, NAPSACE (2006) cites the study conducted by African Child Policy Forum (2005) that specifically identifies street girls and children with disability as a high risk group for sexual abuse and exploitation.

Trafficking in children for the purpose of commercial sex work is also prevalent in Ethiopia. A study conducted by FSCE (2003) in Shashemene and Dilla towns indicated that almost one-fifth of children exposed to CSE were victims of trafficking. The perpetrators involved in the practice are identified as brokers, relatives, bus drivers ,parents, owners of

bars, hotels and brothels who travel to other towns or send someone else to recruit and bring young girls to work as commercial sex workers,. Another study by Save the Children-Denmark (2003), in Addis Ababa identifies hotel owner, bars and landladies, in most of the case who are ex-prostitutes, involved in hiring and renting rooms for young girls engaged in commercial sex work.

In addition to the list, Getachew & Almaz (1997) included harmful traditional practices as a major cause of child sexual abuse and exploitation in the Ethiopian context. Early marriage which is practiced in all regions of Ethiopia except in Somali region, push children from rural areas into the life of commercial sex work as they attempt to escape from unhappy arranged marriages. Moreover, marriage by abduction which is mostly associated with the traditional practice of bride wealth is another harmful practice that is attributed as a push factor causing young girls to be victimized.

The other concern which is the “pull” factor is facilitated by hosts of exploiters of the vulnerability of young girls such as bar owners, madams/”Balukas” pimps, ex-prostitutes, smugglers to foreign lands, casual and habitual patrons such as older men with money and materials, etc. More over the loosening of family ties and the breakdown of moral values are also cited as factors behind sexual exploitation of children (Hope Enterprise, 1997).

### **Clients, customer, perpetrators who are they?**

The initial consideration for the question about clients should start from analyzing the demand for sexual service of children in a particular context. In other words why are children attractive to some customers? (Lalor, 1996).

The writer (Lalor, 1996), who was interested in the situation of juvenile prostitution in developing countries forwards three possible explanations for the question. In the first place

he puts into the picture the existence of local customs or traditions such as child brides (which are also practiced in Ethiopia within the 'appropriate' cultural context) that reinforce the attitude and rationalization of western Paedophiles to consider child or juvenile sex as something which is 'normal' in such cultures. According to the writer this scenario shows that there is certainly a market in developing countries that attracts child sex predators who dare to take the advantage that would not in other countries.

Secondly, because of the widespread of AIDS among the prostitute population in many developing countries, particularly in Africa, clients may prefer young girls who spent less time on the streets for sex thinking that they are less likely to have acquired the virus. However, the reality is that sex between a young child and an adult is more likely to transmit the HIV virus than sex between adults since the delicate blood tissues lining the genitals or sex organs of both young male and young girls are very thin and easy to rupture and bleed through which the HIV virus can easily pass.

The third possible reason for the growing demand for child prostitutes is attributed to the fact that in many developing countries child prostitutes are at the bottom end of the market, in terms of price. Accordingly, child prostitutes will be the only type of prostitutes affordable by youth and men who are characterized as urban poor customers Lalor (1996), quotes from (Ennew, 1986: 83) who describes this situation by stating;

These customers are not usually rich degenerates but poor, unemployed, and possibly homeless men. The attraction of children may be simply that they are the only sexual partners available to men who appear to be social failures and that the child's social status and small size provide a means of exercising power which is otherwise not available to them.

According to Bruce (1996), cited on Mekalm (2004), child sexual abusers come from different corners and from all walks of life. In this case abusers can be of different age groups, religious and educational background, economic status and occupations such as laborers, fishermen, sailors, port workers, taxi drivers, businessmen, soldiers, policemen, etc.

### **Consequences of CSEC**

Children and youth involved in sex trade are vulnerable to immediate harms and long term damages emotionally, mentally, physically, and sexually. The immediate risks include beating, rape and torture. The long term damages include potential drug addiction, contraction of sexual transmitted disease (including HIV), mental illness, adoption of a range of self destructive behaviors and exclusion from the society. In addition to these risks, commercial sex work could also be mentioned as a major cause for other health and public health problems such as tuberculosis, malnutrition, and a reason for exposing the victims to the inevitable hazards of a poor living environment, poverty and all the forms of neglect. The negative impact of CSEC also extends to the larger society by aggravating the HIV transmission, cost of sanctions for the sexual abuse of children, and the development of organized crime (Voss, 1999).

According to the findings of a study conducted on the victimization of Juvenile Prostitutes in Addis Ababa by (Lalor, 1996), young people who are engaged in commercial sex work are exposed to multitude of negative consequences. Among these rape, unwanted pregnancy, abortion(in extremely dangerous and illegal form), beating; attempted sexual assaults, theft, free sex, and protest or refusal to excess demand from clients, and harassment from police officers on the street are common among CSEC.

## **Intervention Measures**

Assisting the recovery and reintegration of sexually abused and sexually exploited young people is known to be one of the extremely difficult intervention activities in area of child care. Activities and services require large quantities of resources for each child as a result recovery and reintegration programmes are not considered to be cost-effective. In contrast, victims have a pressing need for appropriate psychosocial and medical services as a result of the a high risk of contracting sexually transmitted diseases, including HIV/AIDS, and developing many other physical, psychosocial and emotional problems. In other words these children are leading an extremely violent and dangerous lifestyle which calls for the attention of all responsible parties and those advocating for the rights of children. (ESCAP, 2002).

So far, in many countries including Ethiopia providing support, rehabilitation and reintegration for children exposed to commercial sex work has been very limited since the services have not received substantial resources. According Iwaniec (2000) cited on (Melkam, 2004), besides the allocation of sufficient resources successful intervention program require the involvement of the child, the family, groups of parents, of social institutions, government and non-governmental organizations and the community. Moreover, interdisciplinary professional involvement is highlighted to be very important for the successful interventions targeting RRR of children victimized by CSE. According to the author, the greater the range of involvement is always the better way towards successful intervention.

It is also believed that the primary focus of any intervention activities should be geared towards the provision of compensatory services for those in fluid situations, treatment and rehabilitation. Moreover, recovery and reintegration first of all should aim at reducing harm or further damage to child victims of sexual abuse or sexual exploitation. In that case the availability and accessibility of counselling, treatment and rehabilitation services for physical,

mental and social problems are crucial. These elements should be implemented through a range of approaches, such as residential care, psychotherapy and community-based programmes that nurture and promote local support groups and networks that seek to involve the child's family and community as appropriate care takers. The following points, put forward by (ESCAP, 2005) summarize the key values of recovery and rehabilitation initiatives for CSEC.

- (a) All services for the victims of sexual exploitation and sexual abuse must demonstrate respect for the child/youth and be non-judgmental. These programmes can be effective and efficient only if they adopt participatory strategies involving the child/youth, the family and the community.
- (b) Rehabilitation should be directed at the whole individual, so victims of sexual abuse and sexual exploitation can develop not only physically and socially, but also psychologically.
- (c) Community support networks for victims of child/youth sexual abuse and sexual exploitation should be established where they do not already exist and strengthened where they do.

Similarly, the study reports on child labor with particular reference to child prostitution in Addis Ababa released by Save the Children- Denmark (2003) puts forward the following areas of priorities or key components of intervention activities that should be taken in to consideration during any immediate and rehabilitative support programs for victims of CSEC. These recommendations include:

- The provision of social, medical, psychosocial and legal counseling and other supports paying particular attention to HIV/AIDS with due emphasis to promote self-respect, empowerment and the rights of the child

- The promotion of alternative means of livelihood through life skills training, alternative income generation, formation of peer support group
- Planning support program based on the particular situation of the target group focusing on the most needy.
- Supplementing support and rehabilitative programs by awareness raising and advocacy efforts.
- Organizing local support groups (community & religious leaders, CRC committee, schools) to form a protective system in local communities. And,
- Facilitation of networks with organizations working in the area of child protection, violence against women, civil and human rights, etc at various operational levels.

As the most accepted guideline world wide, applying the child right framework for developing intervention programs demands the inclusion of the following four basic principles which serve as an umbrella for addressing all the rights and privileges of children articulated on the child rights convention. The principles are:

- Non discrimination (Article 2): The article states that all rights apply to all children and any form of discrimination emanates from unconscious, insensitive or active/deliberate actions that can take place through institutionalized attitudes shall be avoided.
- Best Interest of the Child (Article 3). All actions concerning the child shall be in his or her best interest. Children have the right to influence matter affecting their lives so their voices should be heard before taking decision affecting them.
- Survival and Development (Article 6). This article states that all children should be allowed and be supported to develop to their full potential. And the child's development is a holistic concept, demanding consideration of the whole child. This

includes the physical, cognitive, emotional, social, cultural and spiritual development of the child.

- Participation (Article 12). Girls and boys have the right to be involved in decisions affecting them. In order to be able to make decisions, children have the right to relevant information provided in a form they can understand.

To conclude, as can be understood from the literature review, it is pretty clear that the issue of sexual abuse and exploitation of children in the form of commercial sex work is receiving a growing attention and concern from parties pertinent to the matter. This starts from attempting to understand commercial sexual exploitation in the context in which it takes place. The development of a separate discourse to deal with the issue of CSEC in Ethiopia is found to be on its infant stage but the attempts being made so far look encouraging for the decade old attention that the problem of CSEC children has received in the country. Although it is true that there are some other non governmental organizations highly contributing to the development of the discourse in CSEC in Ethiopia, it is evident that the share of FSCE in establishing clearly distinguishable sets of ideas, publications and other research products is quite significant.

When discussing the issue of CSEC in Ethiopia long with reviewing the existing literature in the country, the use of similar parameter and tone to that of the South East Asian literature is also observed. This can be attributed to the fact that campaigning against the problem of CSEC has a longer history in that region than any other region or country in the world. Hence countries like Thailand and the Philippines have remained a huge reference on the global debate on CSEC contributing much of the development of the knowledge base. As a result a frequent use of and referencing one or more sources is found to be unavoidable.

Referring to the most relevant sources like ECPACT and UN-ESCAP is also found to be very useful and informative about what is going on and what should be done in the course of combating CSEC. Beyond grasping commonalities and sharing experiences of those countries in various ways, attempts made so far to define and conceptualizing CSEC in Ethiopia reinforces the idea that the concept is still tied up to the function of various cultural and economic, political and social players in a particular context.

Despite some differences observed in defining concepts, most of the literature under discussion has a similar stand regarding the cruelty of CSEC and its impact on the victims as well as the larger community. This scenario serves as a common ground to qualify CSEC as a major universal child right violation and a global crisis that urges a concerted effort of every nation to eradicate the problem. And for that purpose employing the UNCRC as frame work for understanding, measuring, and combating the CSEC in a broader possible context is highlighted to be the best strategy.

## Chapter Three

### Methodology

The main focus of this chapter is to discuss the study design and methods implemented in collection, organization and analysis of the data.

### Research Approach

As a starting point in the presentation of the Methodology, clarifying the position of this research as the process of a qualitative study is found to be every important. Accordingly, this evaluative research is illustrated in the figure below as the design fits in to the four dimensions of qualitative research which is based on the purpose of conducting the envisaged study, the intended use of the research findings, the way the research strategy is going to handle the time dimension and the research techniques to be applied. By doing so it was possible to identify this outcome assessment serving both a descriptive as well as explanatory purpose. The descriptive parts go with those research questions that deal with the ‘How & what’ issues where as the ‘why’ questions that have to do with giving explanations to issues that appear on the course of conducting the outcome assessment fall in to the explanatory wing (Mwange, 2001).

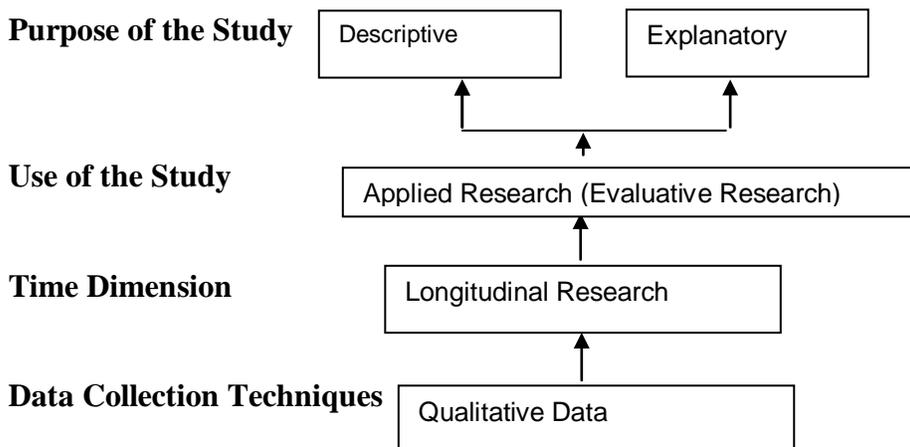


Figure 1 Dimensions of qualitative research (Mwange, 2001:16).

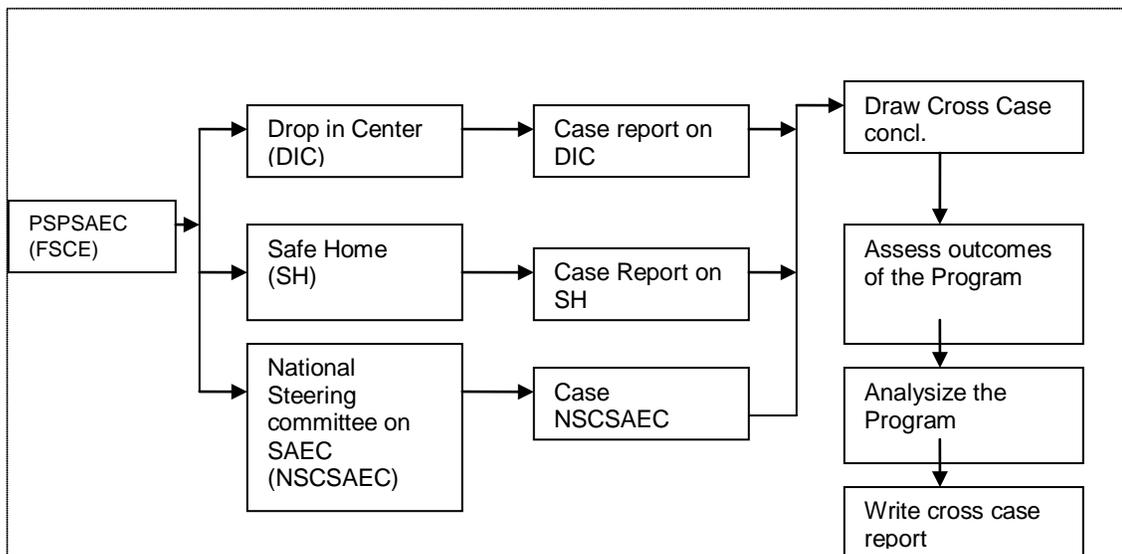
## Study Design

The study aims at examining the outcomes of the selected RRR intervention in a single system design with multiple sub parts. The data essential for dealing with the stated objectives and answering the stated questions will be collected from the Preventive and Support Program for Sexually Abuse and Exploited Children (PSPSAEC) in Forum on Street Children Ethiopia (FSCE). The program is taken as a Single Case because it has well rounded activities and services by itself. In this study the larger unit of analysis will be the program itself while the Drop in Center, the Safe Home projects and the National Steering Committee on Sexual Abuse and Exploitation of Children(NSCSAEC)will serve as embedded subparts.

## Data Analysis

An Embedded Single Case Data Analysis Model that is adopted from Yin (1994: 51) will be employed for the systematic analysis of the data. Multiple indicators from the Drop in Center and the Safe Home projects as well as the NSCSAEC the will be used as units or sub parts of the large program to do the outcome assessment and program analysis.

**Figure 2 Single Case Study Method**



(Yin, 1994, p. 51).

The single case study design fits with the outcome assessment model with an idiographic/qualitative design which is adopted from (Depoy and Gilson, 2003) and used in this research. According to the model such kinds of evaluative research tends to investigate a context embedded phenomena in a single instance of intervention or an individual unit of analysis.

At each project level or individual unit the four actions processes for outcome assessment suggested by the (Depoy and Gilson, 2003) are used as a model or discrete action elements in carrying out the Embedded Single Case analysis. These action processes in the outcome evaluation are;

1. Articulation of lexical definitions (definitions expressed in words) of desired outcomes and criteria for success.
2. Delineating the exact evaluation questions
3. Design the structure of assessment action process
4. Conduct the outcome assessment inquires with attention to ethical, field and resource constraints.

### **Sampling procedure**

Children who participated on the study are purposely selected based to their status on program attendance. Accordingly children involved in the Focus Group discussion are selected as they are picked as regular attendants or registered beneficiaries of the program. The identification of the children who participated on research is done with collaboration of youth worker in the projects. The same assistance was extended from the program while organizing focus group discussion with mothers of reunified children. The mother were primarily chosen for the discussion based on the fact that they currently work with the RRR their children with the program.

## **Data collection Techniques**

Since assessing the outcome of a particular program requires deeper, comprehensive and detailed information, different methods or techniques are implemented to extract data that would be employed at different levels of evaluating, discussing and analyzing the program under consideration. The techniques include key informant interviews, case histories, focus group discussions and document reviews. Each technique is assigned or tied to particular group/participants in the study and to specific research question based on the type and quality of information sought to be fetched from that particular source.

### **Focus group discussions**

The first category of the focus group discussions were arranged with children who are actively involved in the RRR intervention of the program for the purpose collecting the opinions of children related to the contribution of the program in changing their way of life. Selection of participants was deliberately aimed at recruiting older children among the group who have been attending the programs regularly and for a longer time as a result could be well informed about the activities of the projects. Discussions were held with the children for maximum of one hour with each group. Self introduction, briefing about the purpose of the interview and asking permission to use tape-recorder were some of the ways used to create a comfortable environment for the children so that they could be free to answer the questions and participate in the discussion.

In the other category families of children were brought together for another focus group discussion. The session was organized over a traditional coffee ceremony which made the participants (all were women) to feel relaxed and chat in the 'informal' looking settings and the discussion took about one and half an hour. In addition to this, the same steps and technical procedures used when conducting focus group discussions with

children were also strictly followed. The recording of the focus group discussions was followed by the transcription of the data which in turn was coded under different themes for the later analysis.

### **Key Informants Interview**

This technique was employed to collect data from those pertinent sources, specifically linked to the purpose of this study because of their post or being staff in a particular program or organization. In this case, respondents in the key informant interview are selected because they are found to be knowledgeable on the subject since they are in charge of facilitating, implementing, coordinating, and managing RRR at a different scale or level. In the case of this study, the key informants' interview was conducted with both internal staff and external agencies directly concerned with the RRR program and its outcomes. Transcription and coding of the information from the interviews is also carried out to use the data systematically.

### **Case Histories**

Using this technique, personal files of children were reviewed by looking in to the records compiled by the program either up on the graduation of the children from the projects or termination of attendance for different reasons. The cases were selected and presented for the study by the program picking ten from success stories and ten from defaulters. The case histories of the children are used to narrate and illustrate the progress achieved by the children in the course of attending the projects. In other words the case histories served as a source of evidence supporting other source of information at some point in the analysis of the findings.

**Document Reviews**

As a secondary source of information, the review of documents made on the PSPSAEC included strategic plan of the organization (FSCE 2000-2005), Operational manual of the Drop in Center and Safe Home Projects and the National Plan of Action on Sexual Abuse and Exploitation of children (2006-2010). It was from these sources that most of the background information on the projects was obtained.

**Data Collecting Instruments**

In the process of data collection, two instruments; interview guide, and focus group discussion guides have been used. Moreover, a check list was prepared and employed to identify and guide the review of documents. Summary of the participants and methods used to collect the qualitative data are presented in the following Table

**Table 3 Summary of participants and data collection techniques**

	<b>Focus Group Discussions</b>	<b>Key Informants Interview</b>	<b>Document Review</b>	<b>Case histories</b>
<b>Participants</b>	Children(7) Families(2)	1. RRR program coordinators/managers in the NGO (1)and INGO(1) 2. Government officials at the Ministry of Labor and Social Affairs (MOLSA)-(1) (partners)	Reports, Evaluation documents, Strategic Plan Documents. And Plan of Actions	Children Success stories(10) Defaulters (10)

**Limitation of the study**

Characteristically, this research is a qualitative, single case, outcome assessment and program analysis which is largely tied to the context of the particular setting under investigation. As a result it shares the inherent limitation of all such case studies. That is the

issue of making generalization based on the findings of this study to similar situations. In other words, the findings are only bound to the specific program under consideration. Moreover, the extensive resource and time requirements that go beyond the capacity of this investigation will also affect the extent or scope of the evaluation resulting in selection or delineation of specific units of the RRR program.

### **Ethical Issues**

Access to information from the NGOs and government agencies was secured as a proper letter of recommendation or support letter is collected from Addis Ababa University, Graduate School of Social Work. And approval of consent from participants in the study was handled through the program. In the case of dealing with children, as Gall, et al. 1996 cited on Melkam (2004) asserts that, researchers must obtain only their assent because minors cannot give legal consent. Hence in most cases consent is secured from child's a parent, or appropriate caretaker. In the context of this research in which most of the children participated on the study have no families around; approval for permission to involve the minors in the evaluation is secured from the PPSAEC that caters for the rights of the children.

Moreover, all the informants were provided with information about the objective of the study and who is going to have access to the data collected. They were also aware of the fact that they can give information only if they want to and they can skip question which they are not comfortable to answer. For the purpose of confidentiality and ethical considerations, in the discussion part and else where in the report, the names of the participants were not used at all as a result fictitious names are given to the respondents.

## Chapter Four

### Findings, Discussion and Analysis

This chapter focuses on the presentation of findings of the outcome assessment. Based on the results of the investigation the status and direction of the program will be analyzed across the research question set to guide the evaluation. Information collected from various sources that include target children of the program, families, program staff and partner organization and document reviews is combined to undertake the outcome assessment. Each data source is tied to specific evaluative objective or question that serves the purpose of assessing the outcome of the RRR intervention at that particular level. This arrangement of combining the evaluation questions and source data is presented in the following table:

**Table 4 Presentation of objectives of the study and source of data**

<b>Objectives of the study</b>	<b>Source of data</b>
To assess the major aspects of the RRR interventions in the selected programs	Program document review + logic model of the RRR projects
To assess the outcomes the RRR programs in changing the life and conditions children exposed to commercial sexual exploitation	Children, families, program documents and case histories
To review the RRR programs based on the clear and non-contentious standards based on various international instruments.	Document review
To examine major challenges of the selected program; both internal and external	Partners, program staff
To explore prospect for the sustainability of the RRR interventions	Program staff and partners
To come up with possible recommendation to improve services	Partners, program staff, Children, and families

#### **Program Background: Forum on Street Children-Ethiopia**

At the top of the child right movement aimed at building up a better life for children under difficult circumstance in the country, Forum on Street Children-Ethiopia is referred as the pioneer in assuming the role of an advocate starting from early the 1989. For the

realization of its mission FSCE is primarily guided by the fundamental principles of the UN Conventions on the Rights of the Child and harmoniously work together with those who share the same mission and bear the mandate to provide, care, sensitize, influence, empower, and advocate for children and their rights( FSCE, 2001)

Going beyond direct provisions and services, FSCE has been working on areas of public awareness creation, research and capacity building, lobbying and advocacy, gender, empowerment of children, families and communities as a major element of most of its programs. These programs are intended to promote children's entitlements to protection, survival and development, participation, positive and healthy environment, better treatment, non- discrimination and the best interest of children under difficult circumstances. In this direction, in the past one and half decade FSCE has flourished to become one of the leading non-governmental organizations in the country setting the grounds and standards for child care programs. Its horizons extend from small local communities to international and regional involvements. Characteristically, FSCE has been acknowledged for its distinctively innovative programs that are contributing for law creation, amendments, policy formulation, and reform in structures of concerned government agencies at higher level that let voices of children be heard in issue of child abuse, neglect, exploitation, and child protection themes (FSCE, 2005).

In order to put this effort in to effect and realize its vision that is to see the rights of urban disadvantaged children respected by the society, FSCE has adopted different strategic objectives to address the issue. Accordingly, FSCE implements multi-faceted activities under its goal directed and inter related programs. These programs are the Advocacy and Child Protection Program, Program for Sexual Abuse and Exploitation of Children, Child Resource Development center, and regional programs that implement integrated Child- Oriented

Community Based Development project in four major towns of the country such as Nazareth, Bahir Dar, Dire Dawa and Dessie.

Among its local initiatives, the Preventive and Support Program for Sexual Abuse and Exploitation of Children (PSPSAEC) is acknowledged to be a novel and commendable project on many forums and encounters with different parties; above all by children and their families. In addition to the benefits it offers for the children, the experience gained and lessons learnt from the program have been serving as a resources and ground for various other initiatives to build up the knowledge base as well as the practical aspects of dealing with the problem of sexual abuse and exploitation of children in Ethiopia. The Drop in Center, Safe Home and NSCASAE projects which are going to be thoroughly discussed and assessed in this outcome evaluation are generally meant to empower and protect children exposed to CSE and advocate for better laws and policies in the country (FSCE, 2005).

### **Goals and objectives of the RRR program**

This section gives a brief description on the projects that have been included in the outcome assessment.

### **Drop in Center for Sexually Abused and exploited children**

The Drop in Center project has been operating as an entry, recovery and transitory program for the rehabilitation and reintegration of children exposed to commercial sexual exploitation program of Forum on Street Children-Ethiopia, for the last nine years. The project incorporates multi dimensional services and approaches for the implementation of activities and provisions of services that have to do with protecting, supporting and empowering children in order to enable them recover from their physical and psychological conditions they have been through and develop a motivation to get out of the commercial sex work (FSCS, 2005).

Officially the major objective of the project is set to be assisting sexually abused and exploited children to bring about behavioral and attitudinal change, to acquire knowledge that could help them fend off harassment, sexual abuse and health risks and to prepare them to join the Safe Home Project that supports beneficiaries to eventually become productive and self-reliant (FSCE& SCS, 2004).

For these purposes, free access to ranges of services and provisions are provided to the children so that the children could recovery from their physical, emotional and social condition/ situation and change their way of life for good. These services include; education (both formal and informal), health care, guidance and counseling, recreation, informal skill training, family reconciliation and home visits, life skill training, and discussion forums and experience sharing activities. All these services and provisions have there own respective activities that are carried out at the Drop in Center on daily bases.

### **Safe Home for sexually abuse and exploited children**

At the end lane of the RRR program, Safe Home project has been operating under a declared goal of facilitating the rehabilitation and reintegration of sexually abused and exploited children through providing different services and creating opportunities that enable them to be self supportive and exit commercial sex work. It is believed that providing the basic services such as, food, shelter, access to medical care, and combining these provisions with other strategic essentials such as counseling, vocational training, education, income generation activities, work practice/ apprenticeship, training on life skills development etc, creates a fertile ground for the rehabilitation and integration of the children. In other words, these services and inputs guide the children towards learning vocational, social and personal skills serving as tools that can be applicable in their attempts to change their way of life.

## **Specific parts and Process of the Drop in Center and Safe Home Projects**

According to the operational manual of the project, children are screened to move from the Drop in center to the Safe Home based on the assessment done on their readiness to the reintegration phase. Children's readiness is measured based on the behavioral change they are able to achieve during their involvement at the recovery stage in the Drop in Center. Most importantly interest and motivation of the children to change their way of life is counted taking to account the level of their attendance and participation in program activities. This continuity of services retained and similarities of the activities carried out in the Drop in Center and Safe Home projects has made it is possible to illustrate the parts and processes of the projects, in a combined manner. Hence, specifying the parts and processes of the projects for the purpose of identifying the desired outcomes to be used as a guide, indicator or reference in carrying out this evaluation is the first step in the presentation of the findings.

The following logical model of the Safe Home and Drop in Center project demonstrates how the basic inputs and range of activities are put together to bring-about the desired outcomes of the projects. As can be seen from the chart the improvement on children's health status, general living conditions, education, attitudinal/behavioral change and social status are key elements of the program leading to the foremost outcome that is changing the economic and social status of the children. In other words, the central or ultimate outcome of the programs is sought to be the gain in new life style through social and vocational skills so that the children will be able to exit the commercial sex work. More over the logical model also shows that every activity, whether big or small, has its own due contribution and place in the overall nature and outcome of the program holding its unique position as a separate element.

**Table 5 Logic model for the Drop in center and Safe Home Programs**

<b>Inputs</b> ↓	<b>Activities</b> ↓	<b>Outputs</b> ↓	<b>Outcomes</b> ↓
Money Staff and staff time Volunteer and volunteer time Facilities Equipment	Health education	# of health education sessions conducted	} → Children's health status improved
	Medical services	# of children got curative treatment	
	Provision of contraceptives	# of children provided with contraception	
	Food	# of children received food provisions	} → Better living condition
	Sanitattion and Shower	# of children received sanitation facilities	
	Shelter	# of children benefited from the Safe Home	
	Peer Housing	# of children organized in to peer houses	} → Improved educational status
	Formal and non formal education	# of children attended formal school	
	Tutorial program	# of tutorial session conducted	} → <u><i>New skills, employment, and status gained</i></u>
	Skills training	# of children gained vocational skills	
	Apprenticeship	# of children involved in apprenticeship	
	Voluntary work practice in Factories	# of children practiced in factories	
	Income generating activities	# of children started their own business	
	Guidance and counseling	# of children sessions conducted	} → altered behavior, attitudes, or values
	Short term life skills training	# of training on personal development	
Recreation	# of children involved in recreational activities	} → improved family & social r/n	
Family reconciliation	# of children reconciled with their families		

In delineating the exact evaluation questions and setting the structure of the assessment the above mentioned five basic supporting outcomes of the projects such as, betterment in health status, living condition, educational status, and psychosocial conditions are employed in defining of the desired outcomes and criteria for success for the purpose of the evaluation. Accordingly, RRR programs related to health promotion, guidance, counseling and life skills development, education, family reconciliation and livelihood development are entertained as leading activities of the Drop in Center and Safe Home projects working to bring about the desired psychologically, socially and vocationally valued and desired outcomes to children exposed to Commercial Sexual Exploitation. The findings and discussion of the evaluation done on effectiveness of the services are presented below.

### **Summary of Case History Review**

#### **Case of Success Stories**

As can be summarized from the ten cases presented (refer to the annex attached), most of the children leave their home or migrate to Addis Ababa at the tender age of 14-16 years. Among the children three of them are from the rural background whereas four of them are born in Addis. And three of the children are raised in Cherkos which is one of the poorest neighborhoods of the city where as the problem of commercial sexual exploitation of children is known to be rampant. When the reasons for leaving home and joining the street are being summarized the causes are found to be mainly related to poverty and abuse by family members or employers, death of one parent (specifically father who are the prime bread winners of the families), or both parents and disagreement with family members.

Children with the case histories have lived on the street for minimum of two years before being rescued and the duration of stay in the recovery project that is the Drop in center

before being transferred to the Safe Home Program ranges from seven months to one year and six months. Since it is the first stage of the rehabilitation and reintegration of CSEC the times taken to assist children recover from their physical, emotional and social conditions is critical in order to insure success in later intervention activities.

The role of peer groups in inviting their friends to visit and attend the RRR program is found to be equally important as that of the outreach activities of the program which is conducted to pass information about the program and invite the children to sign up for the RRR intervention. This can be attributed to the fact that accessing targets is well handled by the children themselves as the peer groups could be of a big influence once they are made to be satisfied by the services of the program or they are sure about worth of visiting the projects.

The presence of a transient shelter in the Safe Home project has created a way for those children with no families and for those who came from rural places to be able to carry out the rehabilitation and reintegration activities successfully. In this regard the Safe Home project plays a big role in facilitating the favorable physical and social conditions that the children need in the course of the intervention program. Moreover, the family reunification/reconciliation program is also picked as a noticeable activity of the program contributing for the success of the children through restoring their social tie with their family and promoting their reintegration with the community.

The cases being reviewed also show that children from rural background are found to have low educational background that has confined their livelihood opportunities mostly to factory employment and petty trading since they do not qualify for most of the formal vocational trainings. Whereas those children from Addis have a better educational

background that has enabled them to attend skills training programs that in most cases require at least a junior high school education. This makes the vocational rehabilitation of children from urban place to be less challenging in terms searching placements for job opportunities since they could fit both into short term skills training and factory employments.

### **Cases of Child Defaulters**

The review of personal records of children who had been involved in the RRR program but quit attending for different reasons is believed to point out challenges that the program encounters as trying to change the life of children exposed to commercial sexual exploitation. According to the cases being presented, age of children when leaving their home to the streets go as low as 8 and 10 years. It is clear that these are children who had to stay a longer time on the street before being rescued. Accordingly, it is possible that the recovery could be more challenging and the possibility of defaulting from the program is higher for the children. The rest of the children fall in to the range of 14-15 years of age. The educational level of the children whose cases being presented on the summary ranges from grade two to seven. Children who are born Addis Ababa have a better educational level and yet there is one girl from Addis Ababa who dropped out from grade two and stayed on the street for six years.

Similar to that of the successful cases being reviewed on the previous section, those children born in Addis Ababa are brought up in poor neighborhoods of the city where they could get exposed to bad influences of commercial sex work and social disadvantages. When coming to the reasons for leaving home, the summary across cases shows that most of the causes are rooted in family problems. The death of either both or one of their parents seems to aggravate the family poverty pushing children out to the streets. Moreover, being abused by

family members or employers are other reasons appeared on the case summary pushing young girls out to the streets.

According to the review, peer invitation appears to be the major means for children to hear about the program and get convinced to start attending the projects. Duration of attendance of the Drop in Centers appears to take two years and above for five of the defaulter. This can be related to the age at which they first joined street life and how long they have been exposed to commercial sexual exploitation. As can be seen from the presentation those children whose recovery took longer years are found to those who have similar stories of longer exposure to street life.

The reasons for the children to drop out of the program or get dismissed are found to because of pregnancy, disagreement with other children and repeated misbehaving. Among the reasons, three of the cases are related to pregnancy which is strictly forbidden on the rules and regulations of the program. All of the three children who got dismissed from the program due to cases of pregnancy are found to be living with their families. This could indicate a possible gap in closely following up the conditions of children reconciled with family or the existence of other influences that need continuous attention from the program so that young girls could protect themselves from any obstacle hindering their success.

Moreover, children also get dismissed or quit the program for reasons related to behavioral problems or issues. According to the review, this appears to be the case specifically for children who had been exposed to CSE for longer period time. This tells that the program is facing a challenge in dealing with behavioral treatment of the children as the matter needs putting extra effort to respond to the problem accordingly.

## **Psychological, social and vocational outcomes of the RRR program**

The following discussion of the findings is done based the data collected from FGDs conducted with children and their families and individual interviews conducted with pertinent bodies (refer to the annex for presentation of the summary of the raw data).

### **Health Program**

Among all social services available in the program free access to relevant information on various health issues and provision of health services and medical care has been the foremost objective of both projects since the inception of the RRR program. In this respect the program has developed from information dissemination center to availing more integrated and all rounded health services for children engaged in commercial sex work. The range of activities include, health education; which is conducted by a health professional and peer group sessions, provisions of contraception, sanitation and shower facilitates and medical treatment.

The aim of these health related activities is to provide services and information on personal hygiene, Reproductive Health including STIs and HIV/AIDS so as to teach the children basic self protection skills and safe sex practices and prevent unwanted pregnancy. In this way children engaged in commercial sex work are encouraged and assisted to take responsibilities to look after themselves. As the discussants put it, “being involved in the health education sessions we are able to be aware of the dangerous associated with sex work and know how to protect ourselves from STI’s, HIV/AIDS and unwanted pregnancy through using condoms, contraceptives and refusing unprotected sex with clients”. Moreover, as they have further stressed, beyond gaining relevant knowledge from the sessions, the health

education programs have cultivated their self confidence and strength to be conscious about their sexual and reproductive rights and respond to circumstances in a proper manner.

Generally, the health education sessions were evaluated by the discussants as being well prepared, very informative, all rounded and participatory. The child participation strategy which encourages children to be actively involved in running peer education session by themselves for the purpose of passing information is reported to be a media for self expression and social interaction among the children, in addition to being a channel for reaching their peer groups in a creative and interactive manner. Moreover, the diversified ways of presenting health information such as organizing workshops on various health related issues directly linked to situation of CSEC and using visual supports, audio and video materials is commented to be very useful since it makes the sessions educative as the same time entertaining and lively. The children have also asserted that, the center has remained to be the only reliable and formal provider of health information since they have little access to public media and outreach programs set to reach specifically targeting street girls are rarely available in their locality.

Curative services in the form of free medical support arranged in collaboration with local public health centers, while all expenses being covered by the projects, is the other major health related services in the RRR program. It is needless to say that provision of curative treatments has a great contribution to the success of the program with regard to the recovery of children from children CSE and facilitating successful reintegration. As one of the discussant put it by saying, "...most of us are either street girls, migrant from rural parts of the country, run away children or orphans, we are not registered residents of the local Kebele. So we have no access to any kind of public health care. In our situation we can neither afford to

buy the service from private clinics nor have identification cards to claim free or low cost medical care from public health centers”.

As can be seen from the procedural manual of the program(FSCE, 2004), Physical services like shower and washing facilities are also part of center provisions which are reported to attract most of the beneficiaries to the projects. Poverty and the extremely poor living environment of CSEC expose the victims to the inevitable health hazards and social exclusion. Beside the benefit of personal hygiene, appearing neat and healthy is believed to be the first requisite and has a considerable role in the attempt to assist the children reintegrate with the community. As the children said, ”... it is difficult for us to go to school, training institutions or think about any social activity looking dirty and physically deteriorated. In this case, the shower and washing facilities from the program has made us to regain our dignity and confidence and be presentable”

Generally speaking the health care activities, facilities and provisions in the RRR program is reported to be the most attracting and most needed of all other services availed in the projects. Because they had a chance to learn basic health related life skills, children who are rescued from CSE have a chance to recovery from their physical and social conditions that in intern contributed to increase their motivation and readiness for further endeavors toward reintegration. This has to be noted as the foundation for any further attempts to assist children exposed to CSE to be rehabilitated and reintegrated to the community.

### **Education Program**

Once children drop out of school for different reasons and join commercial sex work, their future prospects become bleak since they lack assets for self-employment, and also lack skills and knowledge necessary for employment. Giving due consideration to this fact,

children's right to education has been the other key agenda and dimension in the rehabilitation and reintegration of CSEC. This is so because the opportunities and success of children involved in intervention activities, mainly on the livelihood development, is found to be highly dependent on the level of their educational status in one way or another.

In order to accommodate children who vary in their level of education, the program is designed in a flexible way. As it is stated on the procedural manual documents of the program, in expressions of the educational background the children can be generally categorized as those who have never been enrolled to school, those who dropped out from primary level and very few others from high school backgrounds. In response to this, the RRR projects under discussion runs three sub sections under the education program that include formal and non formal education as well as tutorial support for children who are interested in upgrading their educational status (FCSE, 2004)

From the non formal education program children who have never been to school learn reading and writing as a preparation to join formal school. Appreciating the benefits of the program, one discussant said that, "...for children like me who had no opportunity to go to school, the non formal education opened our eyes and gave us a chance to start a new life. It is a sign that there is a possible way out from the 'business' that we are currently indulged in ...". As these children finally joined formal school they are able to acquire basic knowledge and information and get involved and integrated with the community while they attend school together with other children. Above all they take part in the typical process of socialization that takes place in school settings and they have got to get themselves involved in the system that is primarily based on values of productivity positively challenging their engagement in commercial sex work.

The education program also provides all kinds of school material support and covers tuition for the children. This provides a motivating effect on the children to start or resume school as it waives the load of school expenses and encourages children who have them to go to school. Discussing this, one of the children said that, "...though we always dream school and know that it is where we should be, it is the last thing that we think of while we struggle to survive on the street. This is because we have other immediate needs that we should meet with the money we get other than going to school. In this regard the support from the program has made it possible for us to think about school and the possibilities afterwards". Accordingly, the contribution of the RRR program to free the victims from this vicious circle is witnessed to be vital in laying the foundation for the children to take a step forward in changing their way of life.

As it is clearly indicated on the procedural manual of the Drop in Center and Safe Home projects (FSCE, 2004), supervising children at school and involving their teachers in the process of providing extra assistance is also part of the education program. Every time after the completion of a school semester events are organized to award those with outstanding school performance and in the center based non formal education performance. Such special events are stated to be incentives acknowledging efforts of the children, encouraging better achievements and motivating others to sign up for the education program.

Generally, the result of the evaluation shows that children in both of the projects are satisfied with the outcome of the education program. They said that the program had enabled them to read and write, as well as to continue their education. "I dropped out of school from grade seven because my parents couldn't afford to support my schooling. Then I run away from home and started a street life and commercial sex work till I joined this project. Now I

have completed my high school education and got a chance for vocational training as I qualify for the criteria of the institution because I was able to upgrade my educational status with the support of the project”. This and many more similar testimonies of the discussant put the education program in the RRR intervention for CSEC to be highly effective in preparing the children for the top most objective of the program that is exiting commercial sex work.

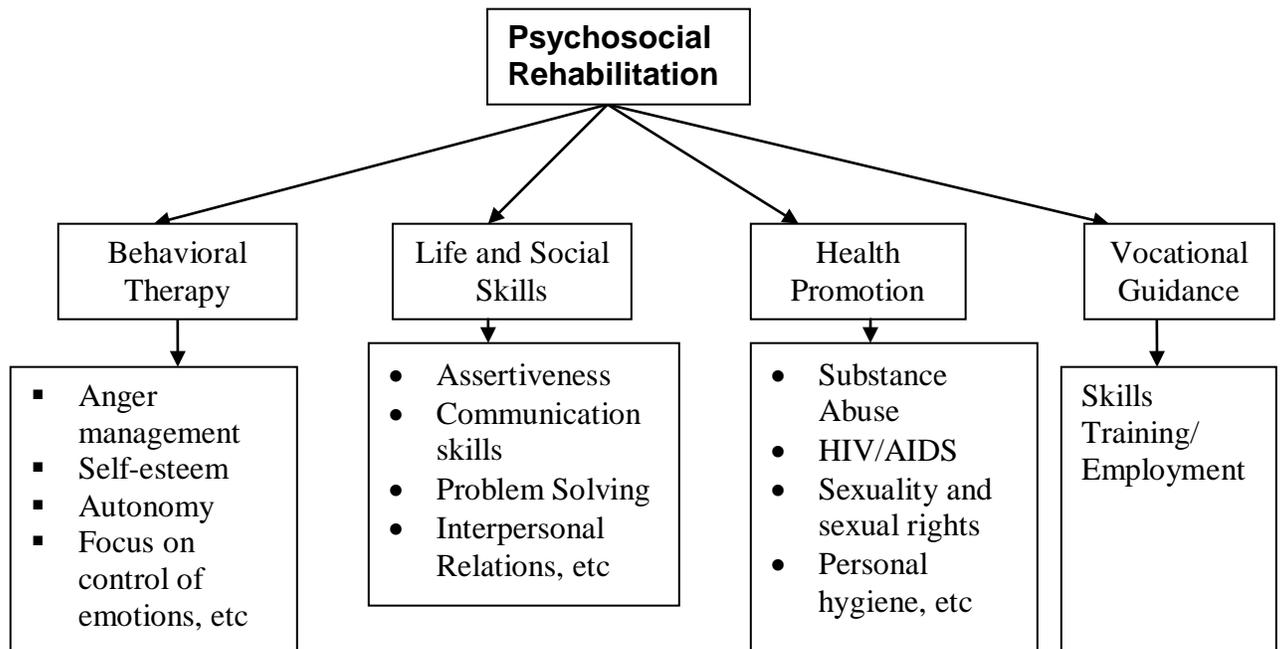
### **Guidance, Counseling and Life Skill Development**

It is true that even the best vocational training, educational programmes, health care and the most careful family reintegration as rehabilitation tools are likely to fail unless we are able to deal with the psychological and social issues which are affecting the child. This asserts the need to back up all interventions to recover and reintegrate children with some form of psychosocial counselling and life skill development activities. And if this is not the case children victimized by commercial sexual exploitation will probably be returning to a similar situation that forced him/her into CSEC in the first place. In the RRR program under discussion the counselling and life skill programs mainly targets child’s emotional, social and psychological states working towards achieving internal strength, growth in social and interpersonal skills and external support for children exposed to commercial sex work. These supports extended to CSEC are generally meant to cultivate their person growth, self control, behavioral change, and social relations.

In the RRR program issues that could be dealt with in counselling range from deep behavioural therapy or coaching to offering guidance on vocational rehabilitation of the victims. This vocational rehabilitation is set to be the ultimate means for the children to exit commercial sex work. The role of counselling in promoting the development of life and social skills is also very important as most of the issues linked to personal growth and reintegration

are found to be related to this specific component of intervention. Generally, whether it is delivered in one-to-one or group bases, psychosocial counselling in the setting of recovery and rehabilitative intervention for commercially sexually exploited children, is serving as an engine that keeps all the rest of the programs to run smoothly and effectively by giving the opportunity for children in seeking and sharing information, and identifying and releasing associated feelings and emotions related to their motivation, interest and ability to succeed in the RRR intervention.

The following chart is formulated to portray how the counselling program is linked to the psychosocial recovery, rehabilitation and reintegration activities of the program. With the overall goal of facilitating the social, psychological and vocational rehabilitation and reintegration of children exposed to commercial sex work, activities that demand either intensive or some element of counselling are put together to realize the specific objectives tied to each components.



**Figure 3 The psychosocial counseling service model of the RRR program**

Services provided in the area of guidance and counseling includes individual guidance, debating, group discussion, peer discussion, health guidance and life skill training workshops. The input of these activities to assist victims of commercial sexual exploitation to deal with issues such as substance abuse and HIV/AIDS has contributed a great deal to the success of an intervention program in promoting healthy life style among the children. Children willing to stop misusing/abusing different substances or drugs receive professional advice, technical support and encouragement to clean themselves up from addictions gradually. With respect to HIV/AIDS and other reproductive health matters counselling and life skills training are reported to be effective channels to spread information and means to communicate with each child concerning protection and care issues. This is found to be very important since children in commercial sex work live in constant fear and high risk of being exposed and affected by sexually transmitted disease.

Moreover, children participated in the focus group discussion have also identified major topics of the guidance and individual counseling program to be around issues of, relationship with families and other beneficiaries, coping mechanism (for street life and commercial sex work), health counseling that mostly includes contraceptive use, personal hygiene, educational and vocational guidance and behavioral counseling which they have commented to be vital in helping them achieve their aspiration to change their way of life in terms of acquainting themselves with ideas and practices of setting and achieving goals in life, problem solving, and on many other issues related to personal growth and development.

On top of the guidance and counseling services, the life skills training programs are recognized to facilitate the RRR of CSEC by making the over all efforts of intervention complete and integrated by empowering the children through awareness raising and

encouraging personal responsibility and social integration. The trainings conducted and activities carried out are successful in teaching life education and self protection skills so that the children learn and develop the right attitude, confidence, ability and gain essential information and skills to deal with different situation in life

Some of the common and specific areas for the life skills training program include child right education, assertiveness training, awareness on gender issues, HIV/AIDS, employer-employee relationship, drug and substance abuse and other health related issues. Furthermore, most of the topics that are raised either on the counseling or life education programs are also entertained by the children in the form of peer discussions known as ‘Lib-le-lib’ or on debate sessions.

According to the responses of the children, the activities have helped them gained the following benefits:

- Improved behavior, quitting self destructive habits like smoking and drug and substance abuse, improved personal relationship
- Developed skills in finding solutions to personal problems in a positive manner
- Gained skills on protecting themselves from diseases through experience sharing and open discussion
- Decrease emotional stress, learn self control , plan to change their life style
- The life skill development program has enabled the children to be aware of their rights, informed about different facts about life, create awareness on gender, HIV/AIDS, family planning and etc.

- The peer discussions and debate programs have enabled the children to exercise open discussions, self expression as well as to improve their communication skills and served as a medium for learning from each other.
- From counseling and life skill developments related to vocational training, education, apprenticeship and employment, children are able to gain relevant information and orientation, to be motivated and make appropriate choices and decisions to exit commercial sex work.

### **Family Reconciliation and Development**

Family reconciliation and development is the other major expected outcome of the RRR program identified to be an indicator of success of the program. This goes with the notion that a healthy and supportive family setting is always the first choice to carry out a successful rehabilitation of children exposed to sexual abuse and exploitation. And the reintegration of the children back in to their community is expected to be far better handled if it is done through the channel of the family system. In light of this fact the family reunification and development activities in the RRR projects is sought to reconcile the children with their families and facilitate the reconstruction of their relationship and the home environment so that the children could get hold of a secure state of support they are supposed to find from their families.

As it is clearly stated in the procedural manual of the program(FSCE, 2004), securing the interest of the children and the willingness from the part of the families is found to be the first step in the process of family reconciliation and development activities. But equally important to that is the outcome of the family assessment done to pose the final decision on whether or not to proceed to the second step. The over all assessment on families takes

account of the examination of the physical conditions of the house, the scene of the neighborhood, the family make up, financial/economic conditions of the family, records of pervious abusive behavior of the care taker and other vital family characteristics for the record. According to the program manager, from past experiences it has been observed that paying little or no attention to the above factors would lead to a failure in the reunification process and could be a possible reason for the children to default from the program. Otherwise, if the records came out as positively satisfactory, the children will be taken to their home and bound up again with their families either their biological parents, siblings or other relatives serving as guardians on wards.

One of the mothers from the focus group discussion commented on the program saying "...there were times that I thought my daughter is dead because I couldn't trace her whereabouts at all after she left home. I never imagined seeing her face again after three years. What the project is doing is life saving, I think all the rest is secondary." This testimony stresses the contribution of the family program in restoring the life of the children as the best possible alternative in promoting reintegration of children exposed to commercial sex work. It is also clear that it is a privilege for the projects to work with families in sharing the responsibility, providing care and emotional support to CSEC that only few children in the RRR program are lucky enough to get.

Except for the change in their address, reunified children receive equal support from the program similar with other children who are staying in the shelter provided at the Safe Home program after they got transferred from the Drop in center. So the family is left with no trouble about additional expenses imposed related to the child as the program takes care of it whether it is for health care, education, food, skill training or any other important request.

Since the children leave the program obtaining a certain means for earning their own income, they should be less of a burden than assets to the family in many ways. (FSCE, 2005)

Talking about the impact of the family program another parent said that “... my daughter has become a role model to the rest of my children at home. Having her back home has changed not only her life but also did a lot of good to our family since she will always be a living witness to the rest of the kids about life on the street. Even people in the neighborhood always wonder about how she has changed herself to be such a fine girl after passing through all the tough life she had.”

According to the project manager, families get linked to the program in a manner that encourages sharing the responsibilities in assisting the children to be able to change for a better life. Family visits and regular monthly meetings as well as the guidance service are among the list of activities associated to the reconciliation program. In order to impart some knowledge and skills that would be useful to manage their families in a better way, parents and guardians get continues guidance, advices and training on effective parenting, child development and resolving possible disagreements that could occur at home from the program.

It is also reported that, as part of the family development task families are able to get assistance to promote their living conditions. Families who need economic support are screened in way that gives those who already have experience in running small business extra credit. After picking up the beneficiaries training on how to run and manage their businesses was offered and the program also facilitated opportunities for the families to locate grants to enhance their business afterwards. It has been asserted that assisting families to improve their economic conditions does not only ease the burden of taking in additional child up on their

fragile economic status but it also helps to prevent risks of other children getting involved in similar danger trying to get away from unpleasant economic conditions at home.

### **Livelihood Development**

The livelihood development is identified to be the fundamental area of the RRR program which is directly linked to children's ability to gain a new life style, exit commercial sex work and being able to reintegrate and gain new social status. Currently there are three types of schemes that the children are placed for the purpose of economic rehabilitation and reintegration after they move from the Drop in Center to the Safe Home. These are employment in factories/ enterprises, skills training program, and income generation activities. The effectiveness and contributions of each scheme in meeting the aim of providing alternative means of livelihood to the children is presented as follows.

### **Work practice and Employment in Factories**

Prior to joining any of the above listed schemes, every child enrolled to the Safe Home is assigned for a voluntary work practice or free service at different factories, enterprises or organization for a three to nine months time. This is believed to facilitate a favorable condition for the children to learn and exercise work discipline, partnership, taking responsibility, team work, communication and social skills from their work mates through observation and participation. According to the children this experience has also helped them to acquire useful skills which they can transfer to any form of work condition they get engage in afterwards (FSCE, 2004).

According to the program manager, the other advantage of placing children for voluntary work practice has been linked to the purpose of searching job opportunities. From experience it has been observed that, as a result of continuous lobbying and promotions

carried out, attempts to convince owners and managers to hire children who are offering free services at their premises has been successful in a number of cases. As a result most of the children placed in to free service stay on practicing while the search for employment possibilities are proceeding with close assistance from immediate supervisors of the children. In conditions in which securing job placement is found to be not viable, children get transferred either to another factory or other alternative livelihood streams in the project. When the children leave the factories, letters of participation and experiences is collected from the organizations for each of them.

...I got transferred to Safe Home after I strictly attended the Drop in Center for ten months, besides joining formal school at night and giving free service at the National Alcohol and Liquors Factory as a work practice. After my free service for one year and two months, I got employed in the factory with a salary of Birr 140 per month. Now I live with my friend whom I met in the Safe Home. The project has facilitated the process of getting us the kebele house we rented after the owner passed away. Living together with my friend helps to maintain the spirit of the project; which is all about being there for each other and keep on working hard for a better future together.

### **Skill Training Program**

The skill training program carried out in the RRR program is the other major component of the overall objective of the project. It is believed that teaching the children some sort of trade not only helps them to earn money but it makes them to sustain them selves since they will acquire a skill they always carry with them. Children have appreciated the fact that they are able to make money in a healthy way provided with the confidence to call

themselves qualified in some kind of field. And as a result they have become competent, independent and assets to the community and the family they live with as productive citizens.

One of the unique features of the project in relation to the skills training program is identified to be its intensive and one to one or child centered approach being followed while following up the progress of the children participating in the RRR program. The specifications for the interventions designed and carried out for the skill training program are based on the background of the each child and with the appreciation of the realities in ground. The background refers to many issues related to children's educational status, behavioral condition, family, health and physical conditions and etc.(FSCE, 2005).

As the project manager describes it, this aspect is also reflected on the ways how a child is treated and the needs are addressed. This entails the fact that there is no single formula to relay on for entire process of the rehabilitation. In order to be responsive to the ongoing encounters that the project comes across while dealing with the issues of rehabilitation and rehabilitation, procedures are found to as flexible as possible. The same is applied for the skills training program starting from the stage of recruiting the children, selecting the appropriate type of training and choosing the training institute as these actions are known to demand a critical assessment and analysis of the conditions, interests of the children as well as the reality in the ground.

For the purpose of identifying potential areas of marketable skills in the city, the program has under taken a market survey in 1999; right after the opening of the Safe Home program. Accordingly, areas for short term, low cost, sellable, and reliable types of trainings are identified taking in to consideration the notable reality connected to the children. The most frequently recommended training areas for the children are found to be catering and culinary,

hair dressing, photography, video-graphy and tailoring. Most of the children have been placed for vocational training in the past in one of these areas (FSCE, 2005).

According to the views of the children, along with paying the tuition fee and all the necessary materials and resources for the trainings, the programs is also reported to be successful in maintaining close supervision and follow up on the children who are attending to the trainings. The project keeps records on the progress of the children by letting their trainers or supervisors fill up the trainees evaluation form regularly. The comments on the general conditions and performance of the children are brought up on the group guidance sessions for discussion and individual issues are handled separately.

According to the view of the project manager, combining supervisions with emotional care and social support and involving the families of the children both as means for supervising and supporting system is found to be a very useful strategy in the case of reunified children. And as for the rest of the children, facilitating a supportive and sensitive living and working atmosphere is known to be equally important as giving a chance for the skills development. Foremost the children need a reassurance about their competence and ability to keep on and successfully finish the road they started to become a better person. For that reason the program is always found to be on the side of the children dealing with any kind of inconvenience the children might face that could hinder their success.

After the completion of the skills training program in any of the areas, the children are given a chance to apprentice, aiming at developing their mastery of the field. In some cases the children are encouraged to start the apprenticeship even before graduation to let them be more experienced and competent when contending for jobs afterwards. Searching for placements for apprenticeship is facilitated by the program but some training centers assign

the children for practical field work by themselves. As is it is stated on the Operational Manual of the program (FSCE, 2004), a job after graduation is secured mainly by three ways. The first one is through directly contacting employing agencies. And the rest of the options are through the link between training centers and employers, and by using job brokers who already have established a relationship with the program to find jobs for the children with their own connections.

...among many other things that I got from moving to the Safe Home, I appreciate most the opportunity I got to resume my education and the chance for skills training. After graduating from Niana School of Beauty on Hair Dressing, I proposed to go back to Dessie to find job and live there. Now I have changed myself to be self supportive and lead a healthy life.

### **Income Generation Activities (IGAs)**

As the project manager describes it, the IGA program is reported to be a recently initiated scheme up on the request of some children who already had some experience on street vending or petty trade. Involving children who had previous knowledge and experience on running small business is found to be a good point to start the IGAs. According to the program manger, prior to the provision of the grants secured from the Trickle Up program, children who are interested in starting IGAs received training on how to run small businesses. Components of the training module incorporate market assessment, preparation of business plan, setting prices, managing clients, record keeping, and many other issues related to starting and improving ones own business.

According to the procedural manual of the program (FSCE, 2004), alike children who are engaged in other alternative schemes of livelihood development, beneficiaries the IGAs

are also provided with the necessary materials and psychosocial support they need while under taking their businesses. Moreover, close follow up on the progress of the children is carried out to make sure that things are going well and to assess if there are any changes or adjustments the children need to make in order to run their business in the right direction. Consultation with people who have the expertise on the subject of Income Generation Activities is known to be vital to backup the program.

As it is being presented on the best practice document of the program(FSCE, 2005), the above discussed six major activities (in the Drop in Center and Safe Home projects) of the RRR program have brought the following positive outcomes on the life of children exposed to commercial sexual exploitation who have been participating in the intervention actions.

- Provisions of basic services such as food, health/medical care, sanitation and shower facilities and shelter have got big role to improve the living conditions of the children and facilitated the conditions for all the rest activities of rehabilitation and reintegration.
- With the assistance from the RRR program children are able to be reconciled and reunified with their families. This has enabled the children to get a safe and stable place to stay and reestablish the relationship of care and support with their families.
- In relation to teaching the children life education and self protection skills the training workshops and counseling sessions conducted at different occasions on a range of topics have brought a significant impact on the behavior and motivation of the children to develop relevant social and personal skills as well as raising their awareness on different health, social, personal and vocational issues.

- Planning and executing peer education and discussion session, children in the Drop in Center and the Safe Home are able to send out information on various health and social issues to children visiting the program. This has given a chance for the children to promote their participation, develop their communication and interpersonal relations or skills.
- In the course of the educational programs carried out in the Safe Home and the Drop in Center children are able to learn how to read and write for the first time, upgrade their level of education by starting formal school by taking part in the tutorial support sessions offered on weekends.
- As a result of work practice opportunities arranged, children who have been able to gain very important knowledge and social skills through the free service program arranged at different assignments. This is true for all children who are transferred to the Safe Home program apart from two special cases that required making direct move to the skill training and IGA schemes.
- A total 27 children has been able to gain different types of vocational trainings as a result they are able to link themselves to employment and life opportunities. With the cooperation from the factories, enterprises and agencies the program has been able to secure 14 permanent and another 9 contract jobs for the Safe Home children. Moreover, conditions were facilitated for 5 children to receive a \$100 grant for each of them to start their own business together with all the necessary training, guidance and follow up they were provided from the program.
- The support from the Safe Home is also extended to 10 families who received basic training on promoting their business and granted \$100 to increase their working

capital. To some extent the grant has contributed in improving their economic conditions and facilitated the successful reintegration of children back in to their families.

- With cooperation from the local kebeles, the program has obtained Identification Cards for 25 children with no families or registered households. Securing the ID cards guarantees children's access and right to benefit from any public services. The ID card is required to get services from government health posts and applying for jobs in government owned organizations.

### **National Steering Committee against Sexual Abuse and Exploitation of Children**

The National Steering Committee against Sexual Abuse and Exploitation of Children is a committee formed comprising government, non government and international NGOS formed after a national conference that was held in July 1996 in Addis Ababa to seek solutions for the protection of children from sexual exploitation, and to provide proper care and assistance to the child victims. It comprises of representatives from concerned organizations, namely: Ministry of Labor and Social Affairs (MOLSA)-Children, Youth and Family Affairs Department, The Women Affairs Bureau in the Prime Minister's office, Ministries of Education, Health, Justice, Information, UNICEF, Radda Barnen, Redd Barna, ANPPCAN-Ethiopian Chapter, and Forum on Street Children Ethiopia. In the network MOLSA is working as a chair organization whereas FSCE has a role as a secretary.

With the objective of building strong partnership, public mobilization and protecting and assisting child victims of sexual abuse and exploitation, the network undertakes different activities related to awareness raising for the general public, sensitize and lobby policy makers, media personnel and community leaders, mobilizing youth and women associations,

undertaking studies and sharing information and knowledge on sexual exploitation of children. Strategically, these activities are sought to facilitate the right policy environment for the prevention of sexual abuse and exploitation and rehabilitation of those already being victimized. As a result it would be a rational attempt to review what has been done so far by the national committee in terms of promoting the appropriate condition to handle the recovery, rehabilitation and reintegration of children exposed to commercial sexual exploitation.

For this purpose a key informant interview has been conducted with head the unit for Children and family affairs at the Ministry of Labor and Social Affairs, which is a department in charge of chairing the NSCASAEC. According to the finding of the interview, the department runs two units that are linked to the welfare and care of children in the country. These are the child right protection and follow up unit and unit for vulnerable children. Matters of commercial sexual exploitation of children are reported to be treated under the domain of vulnerable children.

So far the committee has been working in areas of undertaking researches, awareness rising, and development of instruments dealing with sexual abuse and exploitation of children. Specific achievements of the committee are pointed out to be translation of the Stockholm agenda of action against SAEC in to Amahric language, the preparation of a format that is being used by police officers, prosecutors and hospitals when reporting sexual abuse of children, conducting pilot studies on sexual abuse and exploitation of children in Nazareth, Dessie, Dire Dawa, Shashemene, and Dilla towns commissioned by save the children Norway and Save the Children Sweden. Above all the committee has completed the preparation of the National Plan of Action on Sexual Abuse and Exploitation of children that is to be used as a

guide to make the efforts of combating sexual abuse and exploitation to be more systematic and coordinated.

According to the head of the department, the production and validation of the National Plan of Action (NPOA) which has been made official recently has an international implication designating the realization of the commitment of the government to address the problem of sexual abuse and exploitation in Ethiopia. At the national level, the NPOA illustrates the integration of different organizations exerting a collected effort towards facilitation of programs and actions to prevent SAEC and providing legal and psychosocial support to victims.

The overall goals of the NPOA is stated to be working in the direction of reduction/minimization of sexual abuse and exploitation of children through informed participation of stakeholders, provision of a more accessible and effective legal protection of child victims of sexual abuse and exploitation, increasing availability of integrated rehabilitation and reintegration services for victims of sexual abuse and exploitation and putting in place effective coordination and monitoring systems for interventions on sexual abuse and exploitation of children at all levels.

In other words, as it is clearly described in the document of NPOA, areas identified for intervention include Prevention of sexual abuse and exploitation of children, Protection of victims of sexual abuse and exploitation of children, Rehabilitation and Reintegration of child victims of sexual abuse and exploitation and Coordination and Monitoring of interventions in the area of sexual abuse and exploitation of children. Moreover, the NPOA is also expected to help in pulling resources, strengthening data base and manual development that is going to be used for implementation of programs. The Child and Family Affairs Department also has

developed a plan to popularize and strengthen the already existing Standard for Social Services for Children to bear a binding effect by revisiting and refining directives guiding child care services in the country that include programs for the recovery, rehabilitation and reintegration of CSEC.

According to the head of the department, the Drop in Center and the Safe Home program run by FSCE have been used as a ground to gain practical information about the recovery, rehabilitation and reintegration of children while preparing the NPOA Experiences gained from the two projects are used for gap identification and collecting best practice experience which can be scaled up or replicated at different levels.

### **Review the RRR programs based on International Standard**

As it was discussed elsewhere in the paper the UNCRC is considered to be a universal guide and reference for designing and monitoring actions meant to privilege children under difficult circumstances. In that case the content of the convention is condensed in to four basic principles namely, non discrimination, survival and development, best interest of the child and participation, that serve as basic components holding all the rest rights articulated in the document. Accordingly the following brief review of the RRR program is done taking the basic principles in to consideration to assess the content and direction of the intervention projects addressing the needs and right of children exposed to commercial sexual exploitation.

- Non discrimination (Article 2): The article states that all rights apply to all children and any form of discrimination emanates from unconscious, insensitive or active/deliberate actions that can take place through institutionalized attitudes shall be avoided. With regards to this the RRR program under discussion is evaluated to be sensitive in terms of the inclusion of children from all kinds of social and economic

background as long as they are identified to be victims/survivors of CSEC. However, some of the screening criteria are found to narrow the opportunity to access for some groups of children such as those with physical disabilities and pregnant children or children with babies.

The 'no pregnancy' policy of the program which is justified by the belief to discourage or caution children from being involved in unsafe sex and promote feelings of responsibility among the children. Concerning the issue of disable children, the rule has been kept intact since taking in children with some kind of disability has been putting a challenge to the program as it takes a double effort and resource to produce a successful rehabilitation and reintegration in most cases. The program should find ways to deal with these challenges so that more children who equal deserve the service could be reached.

- Best Interest of the Child (Article 3). This articles entails that all actions concerning the child shall be in his or her best interest. Children have the right to influence matters affecting their lives so their voices should be heard before taking decision affecting them. In other words, this principle goes with children's right to the protection of their interest when there is a need to make important decisions in their life. For the very beginning of the projects the RRR program is identified by committing it self to work in this direction incorporating the principle as its primary mission. While planning and implementing every activity such decisions which are made by respecting the best interest of a child are sought to bring about the most appropriate and effective results in that particular circumstance leading to the bring the best outcome to the children.

- Survival and Development (Article 6). This article states that all children should be allowed and be supported to develop to their full potential. And the child's development is a holistic concept, demanding consideration of the whole child as this included the physical, cognitive, emotional, social, cultural and spiritual domains.

As can be seen from the logic model, the RRR intervention comprises lists of services, provisions and activities that have to do with the promotion of both dimensions of survival and development of children exposed to commercial sexual exploitation of. Basic services such as food, shelter, health/medical care, sanitation and shower extended to the children have a big role in promoting recovery and keeping the physical well being the children. As a result of this children are able to maintain the status in which they could pursue in other engagements to change their way of life.

Services and activities carried out in relation to information dissemination, awareness rising, educational support as well as the skills training programs run by the program are directly or indirectly related to the cognitive development and vocational rehabilitation of the children. Whereas the psychosocial counseling and life skills development activities meet the need to address the emotional and social aspects of RRR program and the cultural and spiritual dimensions of the program are tackled through various recreational, communal and social engagements of the children while attending the projects and being integrated with in the community.

- Participation (Article 12). Children have the right to be involved in decisions affecting them. In order to be able to make decisions, children have the right to relevant information provided in a form they can understand. With regards to this

principle, the RRR program is assessed to be effective in teaching the appropriate skills and knowledge on various life and social skills to enable the children to make well informed decisions in their life. These decisions could be around any of the matters related to their personal and social life to succeed in the RRR program

However, because of issues related to resource availability and limited opportunities with regard to livelihood promotion, respecting the interest of the children in every aspect of RRR process has been taking in to consideration the best possible way that could compromise between the capacity of the program and the interest of the children. Otherwise, it has been discovered that children are assisted and empowered to take full control of their life and take actions in every angle that has to do with their involvement in the recovery, rehabilitation and reintegration activities.

### **Expenditure of Resources for the Intervention Program**

For the purpose of assessing the worth of the outcomes that RRR program has brought to the children as it compared to the resource that has been invested a key informants interview was conducted with the program officers the Save the Children Sweden (SCS). As SCS has been engaged in activities related to supporting direct services, high level advocacy, child protection, awareness rising, SCS has been one of the major partners of FSCE specially supporting the SAEC program. The same questions were also raised to the program manager to find whether or not the expenditures warrant the success of the program.

As a long time partners, SCS and FSCE have a relationship that extends beyond a donor and an implementing agency and both have been in the front line actively involved in child right movement in the country. SCS has strengthened the partnership through supporting

the direct service projects, extending technical support and capacity building for FSCE specifically funding the child protection and the prevention and support program for sexual abuse and exploitation of children. Funding the program for SAEC has been a primary interest of SCS as it considers the problem of CSEC as a major violation of rights of children and double exploitation threatening the life of significant number of children in Ethiopia.

For the purpose of supervision and monitoring of the program SCS collects reports and holds partners meeting regularly. In addition to these, SCS had undertaken an evaluation assessing the effectiveness of the program two years back. The findings of the evaluation have revealed that the program has opened a life opportunity to children being exploited by commercial sex work giving them a chance to release their potential to deal with their situation in a positive way through cultivating their resilience. The head of the program have also mentioned that the RRR program is contributing a lot in promoting participation of children as they are being empowered through the existing activities and services that provide relevant information and teach appropriate skills to be assertive and take control of their life.

When it comes to the worth of expenditure being spent on the RRR program, the intervention has been commented as being very expensive since bringing the desired change in the lives of the children demands a lot of resources and a long time to bear a fruit. This fact is said to be linked to the nature of activities and direct services that include provisions which are costly but unavoidable as they are basic to the survival, recovery and development of children involved in the rehabilitation and reintegration program. In addition to this the very characteristic or nature of CSEC that does a deep damage to the physical, social and psychological well being of the children is also put as a major reason why the RRR program is identified as expensive.

This being the fact, the RRR program is still viewed as worth funding by SCS as it serves as a model for other interventions attempting in tackling CSEC and a base or ground for advocacy works. As the program manager of the RRR program further commented, in this respect the solution has to come from being able to draw more resources to run the projects.

## **Chapter Five**

### **Summary**

This chapter presents the section that discusses the strength, challenges and prospects of the RRR program. The points being mentioned are summarized from the finding of enquires made involving all participants in the assessment.

#### **Strengths of the Program**

- The sensitivity, responsiveness and innovative nature of the program lies in its ways of understanding the unique profile and background of each child and designing the intervention in a manner that fits the particular child. The physical, social, behavioral, and educational statuses of the children need to be carefully appraised before any steps in the engagement period are pursued with the children. Similarly external factors that have to do with training demands, job market or employment possibilities and for seeing future prospects are taken into account each time a decision is made regarding placement of children in any of the livelihood schemes.
- The exposure of the goal of the RRR program has reached out a lot of people. And many have positively responded to establish a partnership with the program in creating better chance for the survival and development of the most ignored constituency, children exposed to sexual abuse and exploitation. To arrive at this point, many steps have been taken; many doors and hearts had been opened. Perhaps the most impressive action that affected the success of the program is the partnership of government and private enterprises, individuals, schools, health care institutions etc whose good will and collaborations stretched out to change the life of many young girls in the program.

This speaks out loudly for of the potential, capacity and possibilities out there to count on for partnership to achieve the goal of the program. This goes with acknowledging the roles and responsibilities of the community and the public at large and working in that direction for the creation of alternative means of livelihood opportunities for children exposed to sexual abuse and exploitation and this has been one of the unique as well as the successful efforts of the RRR program.

- With facts and realities in Ethiopia where livelihood opportunities are very much limited so that those who can have the access and privilege are those few who possess the best educational and social status. In light of these criteria, women and girls, especially those in disadvantaged spots, rest at the bottom of the list. Hence, creating and developing livelihood opportunities is a big challenge and demands an insightful, innovative, and responsive approach like the Safe Home to put up the demand. This endeavor is worth praising by it self since facing the challenges of creating life opportunities for children in such circumstances is an indication of a great courage and commitment presenting only few daring to involve in.
- The other major feature of the RRR program which can be cited as exemplary in many ways is the enormous quantity and quality of work carried out to integrate the entire economic, social and behavioral dimensions as part of the whole issue in the rehabilitation and reintegration of children exposed to sexual abuse and exploitation. In the program all elements are weighed as equally important elements in bringing real change in the over all status of the children. This is evident in the kinds of services carried out, provisions offered and activities undertaken by the program with the aim of serving the economic, social and psychological needs of the children.

- Working with families or close relatives of children who are engaged in the process of rehabilitation and reintegration has been the other major strength of the Safe Home program. More than any thing else families are the main concern because they are prime partners to hold on to. They provide sustainable care and support for the children. For this purpose the Safe Home has registered an incredible success in creating and maintaining family links and helping to develop suitable relations with in the family and improve the economic conditions of the households for successful reintegration.
- The very nature of the Safe Home program demands a time and resource conscious or sensitive way of doing things. In this regard, the approach being used toward the rehabilitation and integration of children exposed to sexual abuse and exploitation has proved to be time and staff intensive. In the program, procedures and activities are rigorously carried out until children happen to be self supportive and graduate with in the time due for a child to stay in the program. As a result costs of the program are considerably reduced and inputs are efficiently used.
- To some extent the credit for the success of the program could also go to the existence of the transient shelter. This nature of the program has made it possible to provide a temporary home which has a great contribution for and leaves a pressing impression on those children who have no families or relatives near or at all to link with during the time of rehabilitation and reintegration. For these children the Safe Home is a place where they are secure and are able to learn and practice a number of social and personal skills that goes with living in a positive family like environment with their friends. It also makes the activities of the program to be focused and concentrated

since contacts and supervisions of children are better managed as compared to those living else where with families, relatives or in peer houses.

- Staying in RRR, children not only engage in learning vocational and marketable skills or how to make money and be self supportive but also get chances to involve in life skills development. Issues related to health, self protection, social relations, assertiveness, child right, gender, work, house keeping, and saving have been some of the areas of focus so far. Now through the life skills trainings provided, plus to the success in being self supportive, they are more confident, articulate and unafraid to express themselves, do well in social relations and they are well informed about their rights, and various health issues including HIV/AIDS.
- In the RRR program child participation is viewed as a basic strategy as well as a child right issue that governs the moves of the program in any direction affecting the life of the children. All the way from the Drop in Center, child participation is promoted so that children could realize their value, contributions, responsibilities and special place they have in the programs. The feeling and attitudes the children have regarding the inputs they bring in to the program to run their own dream and interest is always very important. So, children are highly encouraged to take part in the day to day activities of the program in terms planning, running, supervising and evaluating different activities. Opinions, views, comments and recommendations gained from the children are always the major source of inspirations for new endeavors in bringing the RRR program up to this point.
- In addition to the issue of cost reduction, buying services from community facilities such as local schools, private training institute and public health posts has simulated

further advantages. By not confining children in centre based institutional like setting, isolation or segregation is prevented and integration of the children is promoted through their day to day relations and contacts with the community.

- The fact that FSCE has made the recovery, rehabilitation and reintegration components accessible under the umbrella of the same program, allows exercising flexibility in approach and strategies to develop an ideal program built up on feed backs and experiences gained from both the Drop in Centre and the Safe Home projects. The very tone of the relationship and integration between the two projects tell that, one is incomplete with out the other. As for the children the separation of the two projects marks a boundary of aspiration where as the link serves as a reference to their past life that triggers a sense self respect leading to cherishing their own success.

### **Challenges and Implications**

In this section some lessons, experiences and challenges that came up as special concerns of the program and picked as would be useful tips for programs of this nature are summarized and presented as follows:

- The struggle with behavioral issues of the children, especial those with a long history of abuse and exploitation, is always one of the major challenges for the program highly affecting the success in whole other activities that the children get involved. From the experiences of the program, strength based or resilience oriented, deep counseling or therapy to heal the psychological trauma that the children sustained due to the abuse and exploitation they have been put through is a leading recommendation. In this row a lot has to be done to restore and promote emotional stability of the

children, self respect, self efficacy, and internal locus of control that reflects the degree to which they are the prime agent in charge of success or failure in their life.

- Taking in to consideration the risks and high probability of the children to be exposed to HIV/AIDS and the apparently suspect full fragile health conditions of the children, the demand and the urge for introducing adjoining HIV/AIDS programs have popped out gradually. This is calling for the attempt to integrating a Voluntary Testing and Counseling (VCT) as well as a care and support program to the rehabilitation and reintegration endeavors.
- Empowering children and promoting their sexual reproductive health rights should involve those who possibly have a direct stake in their life. In this respect working deeply and consistently with the boyfriends and possible partners of the children is the one thing that is found to be missing. Dealing with this challenge will treat the root cause of the problem other than expelling children who are victims of the overall failure. Would it be too late for the project to have a second thought on the issue to give a second chance to these children? Otherwise more and more children will keep on falling out of the program and those tempted to sign up will keep on hesitating because of their fear of being letdown by the project incase they happen to get pregnant.
- In some case reunification of children with their families have caused children to be exposing to the risks of bad influence from neighborhoods or immediate living environment again leaving a dilemma to the program to deal with while planning and undertaking a process of reunification. The lesson learned from this challenge necessitates the need for a thorough prior assessment and investigations to be done on

the general characteristic of the families and conditions of the neighborhood and simultaneously work towards changing the environment receiving the children.

- Particularly related to emerging alternative livelihood opportunities, the program has been facing another big challenge that has to do with the educational level of the children. Their educational status has made their options to livelihood opportunities to be limited and circle around low scale obviously less financial rewarding schemes. For most of the children bringing up a major change in their educational status is hardly possible within two years of time. So it is learned that the duty of such programs should be directed towards the mission of digging varieties of alternatives suitable for the capacity of the children at hand.
- If the search for partners is carried out in a systematized, purposeful, formal and organized way towards changing attitudes, raising the awareness and concern of the general public on the issues of the rehabilitation and reintegration of children exposed to sexual abuse and exploitation, it is expected to transfer the present relationship which is based on the good will's from few people to the next stage where collaboration are offered out of sense of responsibility.
- Launching outreach services provisions should be considered to reach more children who fail to attend the program regularly or respond to the mobile nature of the children.
- Special effort to increase the cooperation, involvement and networking with concerned governmental agencies is the major means required to insure the sustainability of the RRR program and way of promoting the approach at national and to be incorporated within the policy issues.

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## **Annexes**

### **Key Informants interview Guide/ Save the children- Sweden**

1. How do you describe the overall mission of the SCS programs?
2. How does the CSEC program of FSCE relate to the overall mission of SCS?
3. How long have you been working with the organization?
4. What kind of support do you extend to the program?
5. What is the role of SCS in the planning and implementation of the program?
6. What is so special about the organization? Or why did you pick FSCE?
7. Can you describe the trends observed in addressing the RRR intervention issues so far?
8. Is it the only organization in partnership with SCS working in area of CSES?
9. Is there any standard (local or international) SCS put as a guide of the RRR intervention it is funding?
10. How is the follow up done?
11. Is there any kind of evaluation done so far?
12. If not how do you evaluate the success of the program?
13. If yes, what does the outcome of the evaluation show about things that should be changed or added on the current status of the program?
14. What are the things that you mention as challenges of the program in your side?
15. What are the opportunities you have identified at different level that would positively contribute for the success of the program?
16. What often do you work with government authorities? Policy and facilities
17. According to your observation to what extend does the outcomes of the program warrant the expenditure of resources that you extend to the program? Cost effective and beneficial?
18. What are the challenges and prospects of the RRR intervention program?
19. How do you see the program in five years from now?
20. Do you want to continue working together with the program? If not why?

### **Checklist for Focus Group Discussion with children in the Drop in Center**

1. Self introduction (age, current living status, family background)
2. How do you describe your present living condition as a victim of CSEC?
3. How did u come to know about the project?
4. How long have you been attending the program?
5. How often do you visit the center?
6. What is your reason for visiting the Drop in Center?
7. Which one of the services or activities do you use or attend most and why?
8. Are there any other programs or projects in the locality established to meet the needs of children exposed to commercial sexual exploitation?
9. How do evaluate the contribution of the health facilities, education program, Guidance and counseling services offered at the program?
10. How do you view the contribution of the services to change your life? Or how do you think will the services help you recover from your present situation?
11. How do you describe the changes in your life after you started attending the services?
12. Are there any ways which are facilitated by the project to let you participate in program activities?
13. If yes what are the specific areas that you get involved in day to day activities of the center?
14. How do you comment on the advantage of being involved in those activities to you?
15. How do you evaluate the services being provided at the center?

### **Checklist for Focus Group Discussion with children in the Safe Home**

1. Self introduction (age, current living status, family background)
2. When did you get transferred to the Safe Home and how long did you attend the Drop in Center before you join the project?
3. On what bases were you screened to be transferred to the Safe Home?
4. What are your aspirations or goals that you want you achieve by attending the project?
5. How do you describe your role in achieving the goals?
6. What kind of livelihood scheme are you currently involved in?
7. Did you choose the scheme by yourself or you got assigned by the project?
8. How do you evaluate the contribution of the health facilities, education program, Guidance and counseling services and the livelihood development offered at the program in assisting you to change your life?
9. How do you describe your current relationship with your family?
10. What is the contribution of the project in fixing your relationship with your family?
11. How do you evaluate the relationship between your family and the project?
12. If you are staying with your family after reconciliation, how do you express the advantage that brings to you and your family?
13. Are there any ways which are facilitated by the project to let you participate in program activities?
14. If yes what are the specific areas that you get involved in day to day activities of the center?
15. How do you comment on the advantage of being involved in those activities to you?
16. How do you evaluate the relevance of the services being provided at the project in promoting social integration with the community?

## **17. Checklist for Focus Group Discussion with children in the Safe Home**

1. Self introduction
2. What was the reason for your daughter to leave home?
3. How old was your daughter when she run away?
4. Did you attempt to find trace her where about? Were you successful?
5. How long did you stay separated before you got reconciled with the help of the project?
6. How is your relationship with your child right now?
7. How do you view the role of the project in fixing your relation with your daughter?
8. What is your role in assisting your daughter to get rehabilitated from her condition and change her life after reconciliation?
9. How do you describe your relation with the project?
10. Is there any formal way you happen to involve in following up the progress of your daughter together with the project?
11. How does having your child back home change your life the status of the whole family?
12. Is there any form of support that you receive from the project to improve your living condition?
13. If so how does that help you maintain the family environment that strengths your capacity and commitment to keep the family tighter?
14. What kinds of changes have you observed in the behavior and general condition your daughter after being involved in the projects?
15. What are the elements or things that you would pick as strength of the project?
16. What are the things that you pick as weakness of the project from your part?
17. What are the comments that you suggest or put forward to improve the current status of the project?

## **Interview Guide**

### Ministry of Labor and Social Affairs

1. Is there any specific unit in the ministry that deal with issues of CSEC in Ethiopia?
2. If yes which unit is responsible in handling the CSEC issues?
3. Where does the role of NSCASAEC fall in the goal of the unit?
4. What were the major reasons behind establishing the committee?
5. What are the specific objectives of the NSCASAEC?
6. What is the responsibility of MOLSA in the NSCASAEC?
7. What other organizations are participating in the NSCASAEC?
8. What are the major accomplishments of the NSCASAEC to date?
9. What was the role of FSCE in running the committee?
10. What is the implication of the production of the NPOA on SAEC bears at international and local level?
11. How much emphasis is given to issues of recovery, rehabilitation and reintegration of children exposed to CSE in the NPOA?
12. How would the preparation of the NPOA facilitate a favorable policy environment to deal with intervention activities benefiting CSEC?
13. What is the next step on the part of the government to put the NSCASAEC in to effect?
14. What do you describe the role of local NGOs like FSCE in implementing the plans described in the NPOA?
15. What kinds of assistance are sought to be extended to NGOs working with CSEC from the part of the government?
16. How do you evaluate the capacity of the government to extend the necessary resource and technical support to back up implementing agencies?
17. How do you generally comment on the role of FSCE and the projects being carried out to address the problem of SAEC in the country?

## **Interview Guide**

### Project Manager PSPSAEC

1. What do you think makes the RRR program attractive to CSEC in the target area?
2. What are the presumptions behind rendering the currently available services?
3. How do you comment on the outcomes of the Health, education, counseling, family development and livelihood programs being carried out in the projects?
4. How do the services and activities currently available at the projects are designed or made available? How do the projects measure the worth of the services and activities?
5. On what bases does that program set rules and regulation that govern the day to day activities of the program?
6. How do you evaluate the progress of the program across time in dealing with RRR of CSEC since its establishment?
7. How far do the projects go in taking the child programming principles in to account while dealing with the designing and implementation of the RRR programs?
8. How far does the project go in respecting the interest of the children on matters affecting their success in the program?
9. How do the projects let the children participate in program activities?
10. How does child participation strategy contribute for the success of the project?
11. What are the issues which are related to capacity of the project directly or indirectly affecting the success of the program?
12. What are the major challenges that the program faces while striving to promote the recovery of the children at the Drop in Center?

13. What about the challenges that the program comes across regarding livelihood development at the Safe Home project?
14. What is your comment regarding the cost effectiveness of the projects?
15. What do you think is the major strategy to attract more resource or donors to make the projects appealing to donor organizations?
16. What do you comment on the involvement of the government in facilitating the necessary conditions that facilitate the appropriate working atmosphere for NGOs to that deal with CSEC?
17. What other parties are acknowledged most for their input in the attempt to change the lives of the children?
18. How do you describe your relationship with other partner organizations in combating CSEC in Ethiopia?
19. How do you think is possible to make the effort of dealing with RRR of CSEC more systematic and integrated for better outcomes?

## Demographic Data of Research participants

### Demographic data of children participated in the FGDs

Age	Number of Children
13	2
14	16
15	10
16	12
17	4
18 and Above	2
<b>Total</b>	<b>46</b>

Educational Background	Number of children
illiterates	4
1-4	23
5-8	13
9-12	4
12+	2
<b>Total</b>	<b>46</b>

Living Condition	Number of children
On the Street	3
With 'Madams'	21
With Family	12
Safe Home	8
<b>Total</b>	<b>46</b>

Occupation	Number of children
Commercial Sex Work	15
Commercial sex work + begging	11
Skills Training or work practice in the RRR program	11
Employed	9
<b>Total</b>	<b>46</b>

**Demographic Data of Parents (Mothers of children in the RRR program) participated on the FGDs**

<b>Educational Status</b>	<b>Number mothers</b>
Basic Education	14
1-4	1
5-8	1
8+	
<b>Total</b>	<b>16</b>

<b>Marital Status</b>	<b>Number mothers</b>
Married	6
Divorced	2
Widowed	8
<b>Total</b>	<b>16</b>

<b>Occupation/Source of Income</b>	<b>Number mothers</b>
Petty Trade	12
Pension+ Petty Trade	4
<b>Total</b>	<b>16</b>

### Summary of data presentation - FGDS

Themes	FGD1-DIC	FGD2-DIC	FGD3-DIC	FGD4-DIC	FGD5-DIC	FGD6-SH	FGD7-SH	FGD8- Family	FGD9- Family
Positive Outcomes of the Education program	Learn reading and writing  Preparation for formal school  upgrade educational status	The informal education makes us be interested to resume school  Going back to school makes us hope for a productive way of life  Learn reading and writing	Learn reading and writing  Makes us think about a better future  Prepare ourselves to join the Safe Home	Learn reading and writing  The educational support makes us to resume school	Upgrade our educational status  Learn reading and writing  Get motivated for better future	Learn reading and writing  Enables us to attended vocational trainings  Improve our educational status	Makes us competent for job promotion  Improve our educational status  The collaboration with the school let us receive special care from teachers	-	-
Health Program	Make us keep our self clean and presentable  Prevent communicable disease,  We get free curative treatment  Distribution of	We can get relevant health information( Personal hygiene, communicable diseases, STIs)  Free distribution of condoms  Share	Keep ourselves clean  Receive health education on HIV/AIDS and STDs  Free medical treatment from the public	Learn about hazards of using drugs  Provides treatments of STIs also for boy friends  We get early treatment before our cases get worse	Receive information on how to use condom  We share information with our friends through the peer education programs We protect ourselves	We learn how to protect ourselves from HIV/AIDS  We get free medical treatment Awareness on reproductive health  Share information on health issues with friends	We become healthy to attend skills training and school  We get various health information to protect ourselves from diseases  Distribution of contraceptives let us protect ourselves from		

Themes	FGD1-DIC	FGD2-DIC	FGD3-DIC	FGD4-DIC	FGD5-DIC	FGD6-SH	FGD7-SH	FGD8- Family	FGD9- Family
	contraceptives and counseling	health information among ourselves  We get a place to wash our cloths and take a bath  Free medical treatment	health center  It is the only place we get free Laundry service and shower for free	Receive counseling on Reproductive health	from unwanted pregnancy  We keep our personal hygiene  Get informed about HIV/AIDS	We protect ourselves from unwanted pregnancy	unwanted pregnancy		
Counseling and Life Skills Development	Improve our behavior  Quit smoking and stop taking other drugs  Helps us to develop good relations with our friends	We get aware of risks of street life  We learn how to behave in socially accepted way  Manage or anger and learn discipline  Discuss our personal problem with our friends and share	We get motivated to attend the program regularly  We are able to quit smoking and chewing chat  We learn to be conscious about various facts of life(HIV/AIDS,	We share ideas on how to deal with personal problems from each other  We get feedback from the program staff concerning our progress in improving our behavior  We get motivated to quit	Encourage s us to participate in day to day activities of the program  Learn how to get along with friends and our families  We practice expressing ourselves while participatin g in peer counseling	Children are able to gain relevant information and orientation on the skills training and work experience programs  Learn how to get along with friends in the Safe Home and our families  Encourages us to participate in program activities	We share ideas on how to deal with personal problems from each other  We get practical information on how to succeed in the vocational trainings and school Learn how to get along with friends in the Safe Home and our families  Learn skills to deal with our personal		

Themes	FGD1-DIC	FGD2-DIC	FGD3-DIC	FGD4-DIC	FGD5-DIC	FGD6-SH	FGD7-SH	FGD8- Family	FGD9- Family
		experience	Family Life)  Reestablish our relationship with our family	commercial sex work  Quit self destructive habits like smoking and chewing chat		Share each others life experience	problems positively		
Livelihood Development	-	-	-	-	-	learn and exercise work discipline, partnership  Acquire useful skills which we can transfer to any form of work condition  Gain vocational skills that makes us to be competent and have a decent life  Escape exploitation and hazards and harsh life on the street	Learn taking responsibility & team work  Learn communication and social skills  Escape risks of commercial sex work  Being able to be self supportive  Extends opportunities for us to be productive citizens  Supervision by the program is a source of feedback regarding our progress		

Themes	FGD1-DIC	FGD2-DIC	FGD3-DIC	FGD4-DIC	FGD5-DIC	FGD6-SH	FGD7-SH	FGD8- Family	FGD9- Family
Family Development and Reconciliation	-	-	-	-	-	<p>Being accepted again our family</p> <p>Restored our relationship with our family</p> <p>Maintained close relationship with the program</p> <p>Improve the livelihood of our family</p>	<p>Restore our relationship with our family</p> <p>Helped to improve livelihood of the family</p> <p>Could find love and care we lost while we were on the street</p>	<p>Saved the lives of our children</p> <p>Reunite us with our children</p> <p>Made the children to be role models to other kids in the family</p> <p>The relationship we have with the program is strong and makes us to be concerned about our children</p>	<p>Gave a chance to involve in assisting our children to change their life positively</p> <p>Improved our livelihood situation</p> <p>The children have become assets to the family as well as the community</p>

### Case Review- Child Defaulters

Case	Age at leaving home	Place of Birth/vicinity	Level of Education	Reason leaving home (street life)	Number of years on the street	How she came to know about the projects	How long she attended the projects	Place of stay in the RRR program	Kind of livelihood scheme	Reason for leaving the RRR program
A1	14	Ambo	4	Death of her father and poor economic condition of her family	4yrs	Through Friends	3yrs	Safe Home	Income Generation	Dismissed from the program due to repeated misbehaving
B1	16	Addis Ababa/Cherkos	7	Death of her father and poor economic condition of her family	1yr	Through the outreach program	7months	With family	Vocational Training	Pregnancy
C1	14	Addis Ababa /Merkato	6	Economic condition of the family and disagreement with her parents	2yrs	Through the outreach program	2 yrs	With family	Vocational Training	Pregnancy
D1	15	Addis Ababa / Mamo Kacha	7	Death of her father and poor economic condition of her family	3yrs	Through Friends	1year and six months	Safe Home	Vocational Training	Disagreement with other children in the program
E1	10	Addis Ababa/Kolfe	4	Poor economic conditions of her family	5yrs	Through friends	3yrs	Safe Home	Vocational Training	Repeated misbehaving
F1	16	Hosanna	3	Death of her parents	2yrs	Through friends	1 year and six months	Safe Home	Factory work practice	Disagreement with other children
G1	8	Addis Ababa /Keranio	2	Poor economic conditions of her family	6yrs	Through friends	4 years	Safe Home	Factory work practice	Repeated misbehaving

Case	Age at leaving home	Place of Birth/vicinity	Level of Education	Reason leaving home (street life)	Number of years on the street	How she came to know about the projects	How long she attended the projects	Place of stay in the RRR program	Kind of livelihood scheme	Reason for leaving the RRR program
H1	14	Addis Ababa/Merkato	7	Disagreement with her step father	3yrs	Through friends	1 year and 4 months	With family	Factory work practice	Misbehaving
I1	16	Addis Ababa/Merkato	6	Death of her father and poor economic conditions of the family	2yrs	Through friends	2 years	With Family	Factory work practice	Pregnancy
J1	15	Gondor	2	Being abused while working as a domestic servant	2yrs	Through friends	1 year	Safe Home	Income Generation Activities	Misbehaving

### Case Review-Success Stories

Case	Age at leaving home	Place of Birth/vicinity	Level of Education	Reason leaving home (street life)	Number of years on the street	How she came to know about the projects	How long she attended the projects	Place of stay in the RRR program	Kind of livelihood scheme	Current status
A2	14	Addis Ababa/Kolfe	9	Economic condition of the family after the death of her family	3yrs	Through Friends	8months	With family	Vocational Training	Employed in a private studio and reunified with her family
B2	15	Addis Ababa /Mesalemia	8	Poor economic condition of her family	2 yrs and 8 months	Through friends	1 yr	With family	Vocational Training	Employed in a private studio and reunified with her family
C2	15	Addis Ababa/ Cherkos	9	Economic condition of the family after the death of her father	2yrs	Through the outreach program	10months	With family	Factory employment	Employed in a factory and reunified with her family
D2	16	Addis Ababa / Cherkos	9	Disagreement with family	2yrs	Through the outreach program	1yr	With family	Factory employment	Employed in a factory and reunified with her family
E2	14	Ambo	5	Poor economic conditions of the family and disagreements	2yrs	Through friends	9months	Safe Home	Factory Employment	Employed in a factory
F2	15	Wollo/saynt	2	Abused while working as a domestic servant	3yrs	Through the outreach program	1yr and six months	Safe Home	Factory employment	Employed in a factory
G2	16	Hosanna	8	Abused by her uncle at home	2yrs	Through friends	1yr and six months	Safe Home	Factory Employment	Employed in a factory and reunified with her family
H2	14	Addis Ababa/ Cherkos	8	Death of her parents	3yrs	Through the	9months	Safe Home	Factory Employment	Employed in a factory and

Case	Age at leaving home	Place of Birth/vicinity	Level of Education	Reason leaving home (street life)	Number of years on the street	How she came to know about the projects	How long she attended the projects	Place of stay in the RRR program	Kind of livelihood scheme	Current status
						outreach program				reunified with her family
I2	16	Wollo/ Dessie	6	Disagreement with her step father	2yrs	Through the outreach program	7months	Safe Home	Vocational Training	Employed in a private hair studio and reunified with her family
J2	15	North Shewa/Merabete	3	Being abused while working as a domestic servant	2yrs and 4months	Through friends	8months	Safe Home	Income Generation Activities	Engaged in Petty Trading

### Summary of data presentation- Individual Interviews

Themes	FSCE(Project Manager)	SC-S(Program coordinator)	MOLSA(Department Head)
Strengths of the RRR program	<p>Promoting ways that facilitate child participation</p> <p>Pass relevant information on various health issues</p> <p>Assisting children to clean themselves from addictions and promoting healthy life style</p> <p>Closely working with families give the reintegration process a stronger base of success as it facilitates social ties and support mechanisms for the children</p> <p>The life skills program enabled children to learn social and personal skills as well as raising their awareness on different health, social, personal and vocational issues</p> <p>Implementing child focused activities which are sensitive to specific profile of the children</p> <p>Connecting children with livelihood Opportunities so that they could exit commercial sex work</p> <p>Being able to involve government and private enterprises for work practice, apprenticeship and employment</p> <p>Time and resource intensive nature of the program</p> <p>Combination of basic services with strategic needs of the children has empowering effects</p>	<p>As a pioneer in the intervention against CSEC the program serves as a model for other projects</p> <p>The child participation strategy promote rights of the children develops their resilience</p> <p>Sending health and other life skill messages and empowering children to take control of their situations</p> <p>Rescuing children from exploitation is a life saving intervention for the survival of children exposed to commercial sex work</p> <p>Combining the recovery, rehabilitation and reintegration under a single program creates a condition to provide integrated services for the children</p> <p>Commitment of the program in promotion of right's of the child in the country</p>	<p>The program served as a ground for the development of the NPOA against SAEC so the RRR could get high emphasis from the government</p> <p>Able to maintaining positive partnership with higher government body especially with the child and family affairs department</p> <p>Commitment to combat CSEC both in national and international level</p>
Challenges of the RRR program	<p>Challenges with dealing with behavioral issues of the children</p> <p>Fluctuation of number of children attending the</p>	<p>High demand time and financial resources</p> <p>Fluctuation of number of</p>	<p>High demand of time and financial resources</p> <p>The growing number of</p>

Themes	FSCE(Project Manager)	SC-S(Program coordinator)	MOLSA(Department Head)
	<p>program</p> <p>Emergency of HIV/AIDS as a major issue among the children</p> <p>High mobility of the children causes irregular attendance of children</p> <p>Low education background of the children makes reintegration time taking and challenging</p> <p>Limited opportunities for securing employment opportunities</p> <p>Occurrence of considerable number of unwanted pregnancy among the children</p> <p>Limited Cooperation from government and private enterprise willing to offer employment opportunities</p> <p>Family reconciliation sometimes fails as it exposes children to bad influences in slum neighborhoods</p> <p>Resource limitation forces the program to narrow its capacity of the program to accommodate more children</p>	<p>children attending the program</p> <p>The challenge in dealing with emotional and behavioral problems of the children</p>	<p>children exposed to CSEC from time to time</p> <p>Limited experience in child welfare and care system in the country</p>
<p>Recommendations and prospects</p>	<p>More linkage with the community is needed to facilitate acceptance of children and their reintegration,</p> <p>Starting up mobile services to avail services to the children at their disposal</p> <p>Strengthening the counseling program</p> <p>Launching VCT in response to the prevailing HIV/AIDS cases and incorporating care and</p>	<p>Strengthening the counseling program</p> <p>Working closely with government and other concerned parties</p> <p>Early intervention or rescuing should be considered before children get profound damage to their social and</p>	<p>Preparation of guideline to put in to effect the plans to set in the NPOA</p> <p>Popularizing the already existing standard for social service providers which is prepared by MOLSA</p> <p>Pulling more resource through systematized and integrated</p>

Themes	FSCE(Project Manager)	SC-S(Program coordinator)	MOLSA(Department Head)
	<p>support activities</p> <p>Possible ways for early intervention should be searched to pick/rescue children who joined commercial sex work immediately</p> <p>Better involvement of people who directly influence the life style of children eg. boyfriends, partners and madams</p>	<p>psychological conditions</p>	<p>manner</p> <p>Strengthening the partnership among all stakeholders to contribute for the efforts in combating CSEC</p>

## **Declaration**

I Meseret Daniel Desta confirm by signature that this thesis is my original work and has not been presented for a degree in any other university, and that all source of material used for the thesis have been duly acknowledged.

Name: Meseret Daniel Desta

Signature: \_\_\_\_\_

Date: July, 2006