

**ANALYSIS, DESIGN
AND PLANNING FOR
CHILD PROTECTION
IN HUMANITARIAN
ACTION SYRIA**

ACKNOWLEDGEMENTS

This report was written by World Vision International (WVI).

This report was co-written by World Vision (WV) Syria Response, and the WVI Disaster Management and Technical Service Organisation teams, with the support and input of Andy Guth, in his capacity as Policy Analysis Consultant.

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Cover photo credit: One of the children who sought safety in the faraway displacement camps in Northwest Syria. ©Syria Relief and Development

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CHILD AND ADULT SAFEGUARDING CONSIDERATIONS

We ensured safe and ethical participation of children, or other adults when they shared their stories and insights. The assessment process was conducted in compliance with COVID-19 preventive measures, and in line with World Vision's safeguarding protocols. Names of adults have been anonymised and changed to ensure confidentiality. All photos were taken and used with informed consent.

TABLE OF CONTENTS

ABBREVIATION LIST	4
EXECUTIVE SUMMARY	5
BACKGROUND	7
COMMUNITY CONVERSATIONS WITH CHILDREN AND ADULTS	9
SCOPE AND SAMPLING	9
ASSESSMENT LIMITATIONS, CONSTRAINTS AND MITIGATION MEASURES	10
LOCAL LEVEL ASSESSMENT IN PRACTICE	11
ASSESSMENT PROCESS OBSERVATIONS	12
UNDERSTANDING VAC	13
PERCEPTIONS OF VAC'S PREVALENCE	16
UNDERSTANDING THE ROOT CAUSES	17
POLICY REVIEW AND ANALYSIS	21
CONCLUSIONS AND RECOMMENDATIONS	26
Annex 1: List of Documents reviewed	29
Annex 2: Policy Review and Analysis Scoring	30

ABBREVIATION LIST

CAY	Children and Youth
CBO	Community Based Organisations
CP	Child Protection
CPHA ADAPT	Analysis, Design and Planning Tool for Child Protection in Humanitarian Action
CSO	Civil Society Organisations
DM	Disaster Management
DM&E	Design, Monitoring and Evaluation
FGD	Focus Group Discussion
IDP	Internally Displaced Person
GBV	Gender-based Violence
GoS	Government of Syria
KII	Key Informant Interview
LA	Local Authorities
MEAL	Monitoring, Evaluation, Accountability and Learning
MMU	Mobile Medical Units
NGO	Non-Government Organisations
NWS	Northwest Syria
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
SBC	Social and Behaviour Change
SDG	Sustainable Development Goals
TSO	Technical Service Organisation
UN CRC	The United Nations Convention on the Rights of the Child
UN	United Nations
VAC	Violence Against Children
WV	World Vision
WVI	World Vision International

EXECUTIVE SUMMARY

In December 2021, the World Vision (WV) Syria Response undertook a context analysis to identify specific child protection needs and challenges faced by children in its areas of operation in Northwest Syria (NWS) and to better understand the root causes and risk factors. WV's **Analysis, Design and Planning Tool for Child Protection in Humanitarian Action (CPHA ADAPT)** was used. The tool included local level community conversations with children and adults, combined with a policy review and analysis of child protection challenges in NWS. This in-depth understanding of existing child protection issues and systemic gaps has been sought to inform programmatic priorities, programme designs and intervention strategies to address violence against children (VAC) in NWS.

A total of 112 (53 female/59 male) community members participated in the CPHA ADAPT assessment, including 72 girls and boys (36 female/36 male) and eight local child protection actors from Idleb and Azaz districts in NWS (see *"Community Conversations with children and adults"* on p.9 for details).

The data from community conversations revealed noticeable differences in the opinions of children and adults. Adults are more likely to rationalise some forms of VAC. For example, in cases of child marriage, many adult participants believe that child marriage protects girls from other forms of violence. Parents may also have expectations that children should support their families and may not consider child labour a problematic issue. In particular, many parents believe that through work, children become responsible grown-ups, and that it is essentially acceptable as it "does good to children". The assessment data conducted by WV shows that many of the pressures, stresses and hardships caused by ongoing conflict and associated economic stress have contributed to the adoption of negative coping mechanisms involving their children.

In addition, the analysis showed that new child protection concerns had emerged due to a rise in

vulnerabilities, inequalities and poverty caused by conflict and economic turmoil, including children being exposed to drugs in schools. In some cases, adults were unaware of some of these serious protection concerns affecting their children. Nevertheless, in all groups, participants mentioned that parents and caregivers are stressed and feel depressed themselves and therefore do not have the emotional capacity to support their children. The community members also mentioned living in a generally unsafe environment with a high level of exposure to violence that adds to their stress. Lack of employment opportunities and access to cash, in addition to the uncertainty of the future, impede the capacity for families to break the cycle of poverty and overcome their feelings of hopelessness.

This report also considers the rule of law in this jurisdictionally contested and fragile context. Participants suggested that limitations upon the rule and effective exercise of law, combined with a scarcity of relevant laws addressing VAC, also contributed to the incidents of violence. In fact, policy review and analysis, conducted as part of the assessment, reveal that Syria's legal and regulatory framework to end VAC meets about 13% of the total threshold, while the readiness of local authorities in NWS to implement the current policies¹, is at even lower level – meeting just 9% of the total threshold (*"Policy Review and Analysis"*, p.21, for details). The policy review and analysis considered the minimum provisions in Syrian law and policy needed to end VAC, in alignment with those stated in the United Nations Convention on the Rights of the Child (UN CRC)². This was taken into account of the complex realities of the Syrian context, where different actors, including from different states, are engaged in regulating child protection practices across Syria, while acknowledging that the Syrian Arab Republic, as a signatory to the CRC, is eventually accountable to the UN Committee on the Rights of the Child for the implementation of its commitments across the country, including in areas controlled by non-state

¹ Readiness to implement current policies to end VAC can be indicated by sufficient resourcing, coordination, awareness-raising and political momentum to equip the public sector workforce to implement laws, thereby allowing people to rely on these laws at the community level.

² Committee on the Rights of the Child (November, 2003). *General Comment No. 5 "General Measures of Implementation of the Convention on the Rights of the Child (Articles 4 and 42 and paragraph 6 of Article 44)"*, CRC/GC/2003/5



An internally displaced boy in one of the camps in Northwest Syria.
© ULUSLARARASI INSANI YARDIMLAŞMA DERNEĞİ

armed actors.³ Without clear accountability for acts of VAC, and clear mechanisms, rules and laws that help communities understand what is legal and illegal, the prevention and response to issues of violence will remain weak and ineffective. Laws and policies are critical components in a child protection system, providing a common reference point for all actors, including local authorities in NWS, in civil society and in communities, potentially enabling them to work together towards ending VAC.

Based on the CPHA ADAPT analysis results, we identified low levels of trust in local authorities and inadequate reporting mechanisms as requiring urgent action. Most specifically, additional steps need to be taken to create child-friendly reporting pathways in venues frequented by children such as schools, health clinics, alternative care and community centers,

creating more opportunities for people to openly report incidents of violence. Actors must strengthen and raise awareness around local level reporting and referral mechanisms and include children in the design and implementation process of such mechanisms. Otherwise, children may encounter violence but not consider it “serious” enough to visit relevant service providers, and therefore, receive little to no help to respond to violence they encounter.

Overall, the lack of action towards addressing VAC throughout the social and institutional environment of a child in NWS contributes to the current context in which VAC goes largely unnoticed, leaving affected children to suffer the consequences without help or hope for change. All actors, including authorities, civil society and communities, must work together and with determination to end VAC.

³ In the Concluding Observations on Syria’s latest fifth periodic report, the Committee on the Rights of the Child “reminds the State party that during any reconstruction efforts it has the obligation to guarantee all rights in the Convention to all children throughout the territory without discrimination, independently of where they live, and to promote a culture of tolerance, peace and reconciliation among all communities.”

BACKGROUND

In total, 13.4 million people are in need of humanitarian assistance in Syria – a 21% increase compared to 2020 – whose vulnerabilities have been further exacerbated by the COVID-19 pandemic and associated economic decline.⁴

A decade of conflict has trapped civilians in a pervasive protection crisis where people's rights to safety, security, and well-being are regularly violated. The overall protection situation created by the protracted crisis is dire, and is characterized by complex and interconnected protection challenges.⁵ Though the conflict is more localised than previously, much of the civilian population is still exposed to ongoing and new hostilities, resulting in civilian casualties and forced displacements as people seek safety. Since December 2019, around 900,000 people in NWS have been displaced, of which 60% of them are children.⁶

According to a report jointly published by Frontier Economics and World Vision, during 10 years of war, close to 600,000 people⁷, including 55,000 children, have been killed.⁸ More than 13 million people, half the population, have been forced from their homes, displaced inside their own country or across its borders. Half of those living inside Syria's displacement sites and camps are believed to be women and children. Children and their families live in constant fear of violence that threatens death or sexual assault, particularly against women and girls. The prolonged and widespread use of weapons has left behind a range of explosive ordnance, each posing its own risks which increase with each subsequent year of the crisis.⁹ In this

context children's life expectancy has been reduced by 13 years. Moreover, COVID-19 has made this dire situation much worse, with predictions the pandemic may push Syrians to the brink of mass starvation.¹⁰

The deteriorating economy and widespread poverty, lack and loss of livelihoods, destruction and loss of housing and property, protracted and multiple cycles of displacement, substandard living conditions, family separation and the breakdown of family or community support structures, have all depleted the coping abilities of individuals and communities and generated high levels of psychological distress. As a result, people resort to negative coping mechanisms, including child labour, child recruitment, different forms of exploitation and child/forced marriage, whilst an over-reliance on humanitarian aid persists¹¹.

Today, Syria has therefore become one of the worst places in the world to be a child¹². Children of all ages face violence and protection concerns in many life situations. Adolescence brings exposure to new forms of violence. Adolescent boys are more likely to be killed, injured, detained and recruited, or to be involved in child labour, while adolescent girls are particularly at risk of child marriage, cyber harassment¹³ and other forms of gender-based violence, including sexual violence. Boys are also at risk of sexual violence, as are men, primarily in the context of detention. Separation from caregivers and absence of alternative care options is common across Syria. High psychosocial distress prevails among children as well as their caregivers.¹⁴

⁴ <https://www.worldvision.org/refugees-news-stories/syrian-refugee-crisis-facts>

⁵ [The Syria 2022 Humanitarian Needs Overview \(HNO\)](#)

⁶ Ibid 4

⁷ Nearly 585,000 people have been killed since the beginning of the Syrian Revolution, Syrian Observatory for Human Rights, January 2020. Available online at: <https://www.syriahr.com/en/152189/>

⁸ Syria: Humanitarian Situation, UK Parliament, debated on Tuesday 3 November 2020, David Linden MP citing the Syrian Observatory for Human Rights, <https://hansard.parliament.uk/Commons/2020-11-03/debates/915133EC-13D7-4C1A-9543-D1741BEF8435/SyriaHumanitarianSituation#>. Note - statistics vary. Conditions in Syria have not been conducive to a precise counting of deaths, injuries and destruction.

⁹ [The Syria 2021 Humanitarian Needs Overview \(HNO\)](#)

¹⁰ Frontier Economics and World Vision (2021) TOO HIGH A PRICE TO PAY: The Cost of Conflict for Syria's children

¹¹ Ibid 7

¹² <https://www.reuters.com/article/uk-syria-crisis-un-idUKBREA291TA20140310>

¹³ https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/voices_2021_-_final_180521_eng.pdf

¹⁴ [The Syria 2022 Humanitarian Needs Overview \(HNO\)](#)

Approach and Methodology

In December 2021 World Vision (WV) Syria Response commissioned a context analysis in NWS, where WV is currently operating. The context analysis aimed to identify specific child protection needs and challenges faced by Syrian children in Bab Alsalameh, Alharamain, Bab Alnoor, Kafer Takharem, Aldana, Aqrabat & Atmeh Camp locations, and to better understand the root causes and risk factors. **WV's Analysis, Design and Planning Tool for Child Protection in Humanitarian Action (CPHA ADAPT)** was used as the main tool for the analysis. The tool has been specifically designed for analysing humanitarian crises to assist with the identification, prioritization and analysis of child protection issues and the child protection system, in order then to inform programme priorities, design and overall strategies. WV uses a systems approach¹⁵ to address the root causes of violence against girls and boys, by empowering both formal and informal actors to work together to create a more protective environment for children. CPHA ADAPT allows for integrated child protection systems analysis that includes a local level process of engagement and assessment to understand the root causes of child abuse, neglect, exploitation and violence, as well as to facilitate the identification and mapping of the formal and informal¹⁶ mechanisms that are in place to protect children even in time of crises.

This analysis is intended to guide the process of strategizing relevant interventions to address root causes of, and systemic gaps, in child protection, with a view to strengthening the protection of Syrian girls and boys from violence in the research locations. The analysis will also assist the WV Syria Response team and other humanitarian actors in designing programmes intended to strengthen the child protection system – both formal and informal, and reduce the risks of undermining them, in keeping with the Minimum Standards for Child Protection in Humanitarian Action (CPMS)¹⁷.



Internally displaced girl living in one of the camps in Syria. © Syria Relief and Development

¹⁵ https://www.wvi.org/sites/default/files/WVI%20CP%20Graphic_3.pdf

¹⁶ Formal" refers to established or sanctioned by the government and guided by laws, regulations or policies (World Vision, 2011, "A Systems Approach to Child Protection: A World Vision Discussion Paper). "Informal" mechanisms generally do not have government mandates for the protective mechanisms they fulfil. They may include, for example, extended family and kinship care, religious and cultural groups, friends, neighbourhood support networks etc. (Save the Children, 2010 "Child Protection Initiative: Building rights based national child protection systems: a concept paper to support Save the Children's work").

¹⁷ https://alliancecpa.org/en/CPMS_home

COMMUNITY CONVERSATIONS WITH CHILDREN AND ADULTS

Scope and Sampling

An assessment team comprised of six technical staff members of WV Syria Response team conducted community conversations with children and adults at the local level (here referred to as local level assessment). Two Protection Coordinators and three Monitoring, Evaluation, Accountability and Learning (MEAL) Officers facilitated the discussions. The Child Protection in Humanitarian Action (CPHA) Specialist in Amman – Jordan Office, led the CPHA ADAPT process.

Seven staff members participated in a 3-day virtual training, facilitated by World Vision International (WVI) Disaster Management (DM) and Technical Service Organisation (TSO) Advisors¹⁸, to prepare for conducting the local level data gathering applying the CPHA ADAPT methodology. For policy level data gathering, six staff members received orientation on the methodology, conducted by the WVI Policy Analysis Consultant.

Training of the assessment team also included orientation on WV's safeguarding policy, ethical considerations, data privacy and protection, behaviour protocols, and on the protection, and meaningful and safer engagement, of child and adult participants. This enabled the team to conduct a safe, ethical, and respectful process, ensuring that the procedures involved in the assessment did not trigger traumatising or secondary traumatising. The assessment team members also learned and agreed on approaches to identify and act on signs of distress or cases of abuse, recorded during the assessment times. Assessment team members were vetted according to the relevance of their skills and knowledge to conduct the assessment. Furthermore, the assessment team collected the data in strict adherence of public health measures related to COVID-19.



8-year-old Amira* [on the left] was forced to venture into this world on her own after the death of her family after a bombardment destroyed their home. "I lost my family, [mother, father and brother] my friends, and my flowers. As a result, her grandparents became her guardians and later moved into a displacement camp where Amira no longer feels scared and anxious. © Action for Humanity

¹⁸ The Technical Service Organisation (TSO) is a global consultancy group based within World Vision International. The Disaster Management is a team of humanitarian professionals who provide leadership and technical expertise to ensure timely and effective emergency responses of World Vision around the world.

Local Level Assessment Methodology

The primary purpose of the local level engagement is to understand the perspectives of children, families and local level child protection stakeholders on priority child protection issues and their root causes in a given context, as well as to assess what protective factors, assets and capacities exist. Emergencies and instability may entail the breakdown of these capacities and as such it is important to listen to local level stakeholders about how they are impacted and what could be done to help reduce risk factors and to restore protective assets.

To conduct the local level analysis, the assessment team used interactive focus group discussions and interviews with children, parents and caregivers, faith leaders, customary and traditional leaders, local authorities and key child protection stakeholders. Tools such as the problem tree, ranking, and key informant interview guides were applied in this process.

Prior to starting the local level engagement with children and adult stakeholders, the assessment team conducted a key document review to further inform the assessment process (*the list of documents reviewed is included in Annex 1*).

Assessment Limitations, Constraints and Mitigation Measures

In the table below, risks, limitations and assessment constraints are captured alongside mitigation strategies planned and applied by the assessment team.

Identified potential risks, constraints and limitations	Possibility of happening	Severity if should happen	Mitigation Strategies
	Rating from 1 (lowest) to 5 (highest) as per the implementing team's assessment		
Classroom learning interruptions	4	4	Scheduling two sessions per day during after-school hours.
Not having full attendance of the participants	4	4	Conducting FGDs in WV community safe centres that meet safety standards and are recognised by people in the community as safe settings. Planning with centre coordinators and confirming the names of participants. Supporting the confirmed participants with transportation. Providing clear communication with the participants on the process's purpose, expectations, and duration.
Physical violence or security incidents happening near the assessment meeting locations	2	4	Carefully monitoring the current situation in close coordination with WV's Security Department.
Military conflict escalation	1	5	Carefully monitoring the current situation in close coordination with WV's Security Department. Getting the centres ready and having a plan in place for quick evacuation.
Lockdown due to COVID	1	3	Follow up with the security department and local news on any lockdowns/restrictions. Readiness to conduct the data gathering through online and mobile platforms.
Facilitators getting sick and not being able to lead the sessions	2	4	Training an extra number of facilitators to be ready to support.

LOCAL LEVEL ASSESSMENT IN PRACTICE

The local level assessment was conducted in Idleb and in Azaz districts of NWS in Bab Alsalameh, Alharamain, Bab Alnoor, Kafer Takhareem, Aldana, Aqrabat & Atmeh Camp locations. Two qualitative tools – namely focus group discussions (FGDs) and key informant interviews (KIIs) were used for primary data collection at the local level.

Prior to starting the local level assessment, the team established participant selection criteria and obtained the required approvals to allow for children and adults to participate. This included ensuring equal gender representation. Male and female facilitators facilitated the respective gender groups.

Participants were informed about confidentiality and safety measures in place. A ‘Do No Harm’ approach was applied throughout the process following ethical considerations and safeguarding standards, while prioritising inclusiveness. This ensured that the participation of both children and adults was meaningful and safe. For children’s participation, the team obtained consent to participate from both children themselves and their parents or caregivers. WV’s long-term community presence and high

credibility contributed to maintaining trusting relationships with the participants and ensuring their active engagement throughout the process.

A total of 112 (53 female, 59 male) community members participated in the CPHA ADAPT assessment, including 72 girls and boys (36 female, 36 male) and eight local child protection actors from Idleb and Azaz districts in NWS.

Eight FGDs with children and four FGDs with adults were conducted, followed by eight KIIs with child protection actors, in order to gather the views of children, parents and caregivers, and other local level stakeholders on prevailing community child protection issues and root causes and existing protective factors that keep girls and boys safe from violence.

After contacting local partners to arrange FGDs and KIIs in their respective districts, data gathering at the local level was completed within a week and took place within the community-based centres supported by WV. Two WV Syria Response CPHA Specialists conducted periodic quality checks for the

TABLE 1: Number of participants and conducted discussions per district

Respondents	Method	# of participants in Idleb Area	# of participants in Azaz Area
Girls aged 11 – 14	FGD	9	9
Girls aged 15 – 17	FGD	9	9
Boys aged 11 – 14	FGD	9	9
Boys aged 15 – 17	FGD	9	9
Adult – female caregiver	FGD	9	8
Adult – male caregiver	FGD	7	8
Mosque Imam	KII	1	1
Head of tribe	KII	1	1
School principal	KII	1	1
Doctor from a local clinic	KII	1	1
Total # of participants		112 participants (53 female/59 male)	

data gathering process, organised reflections with the interviewers and prepared the data for analysis.¹⁹

The community conversations started with listening to children in separate age and gender groups (refer to Table 1 for details). The issues identified and prioritised by children were discussed in the adults' groups, and root causes of these issues were further discussed and ranked in order of perceived priority. The assessment team then compiled and analysed the results from all the children's and adults' groups and individual interviews, with the findings presented in the following sections of the report.

Assessment process observations

WV considers children's and youths' meaningful, safe, and appropriate participation in programming, advocacy and strategy development essential for ending VAC and this approach is fully integrated in the organisation's advocacy efforts at all levels, enabling children to be agents of change. In contexts like NWS, the WV Syria Response focuses on addressing both current and emerging child protection needs despite the shrinking humanitarian space. Recognising the complex realities of the humanitarian context, WV prioritises sensitively designed and inclusive community engagements, whereby we acknowledge that the perspectives of children and adult community members are essential to finding child-focused and community-led solutions for addressing VAC.

Throughout the community conversations, it was encouraging to see community members' enthusiasm, including children's, to contribute to the process. Participants told us that they were motivated by the opportunity to share their opinions and discuss their day-to-day experiences. People spoke openly about the issues children face as they felt it was a safe space to share and discuss. The high credibility and WV's long-term community-based presence, that includes maintaining safe spaces for various population groups, contributed to participants' openness to participate and actively engage. At the same time, participating children mentioned that the analysis process was a learning opportunity for them. They were happy to analyse the protection situation, exchange ideas and think about possible solutions to identified problems. Although quite challenging topics and difficult issues of VAC were discussed, all participants mentioned that overall, it was a positive and empowering experience.

“

A boy participant from Idleb:
“I am so happy to see that I am not the only one who feels that way. I see the support of others in this group and I feel strong!”

“

A girl participant from Azaz:
“Yes, I am a female, but it does not mean that the only place I belong is the kitchen. It's been a long time since I talked, and I am happy to find that someone actually listens to what I share.”

Children and adults agreed that few opportunities existed for community members to participate in community development processes. In fact, no formal processes or mechanisms enabled children to be involved in decision-making processes. With the low level of trust towards local authorities, efforts to engage children and adults in strengthening the informal protection and reporting mechanisms are even more critical when there are major gaps in the formal system in fragile and humanitarian contexts.

“

WV staff member from Azaz:
“It was obvious that people had a lot of things that they wanted to share and discuss. Many times one piece of paper was not enough to capture everything. People were adding more and more, drawing, sharing and showing the connections between various issues and factors. It was an eye opener for all of us, including the facilitators, how “hungry” people were for an opportunity to share and be listened to, how eager they were to have an opportunity to contribute and be part of finding solutions. We were happy that the CPHA ADAPT was not just a simple data gathering exercise, but an empowering process that mobilised people to want to act on various issues of concern that they've got a better understanding of as a result of their engagement in CPHA ADAPT process.”

¹⁹The quality checks included daily meetings with the facilitators to discuss the conducted FGDs and KIs and to capture their observations and feedback on the process. Supervising CPHA Specialists also conducted random observations of the community conversations and shared their recommendations with the facilitators. They have also reviewed all the notes, compiled by the note-takers, clarifying various aspects on the documented information as required. CPHA Specialists then compiled the documented data sets and shared with DM and TSO Advisors for further review and analysis. There were also two Zoom meetings organised to discuss the initial assessment findings among assessment team members.

Understanding VAC

Community conversations started with listening to girls and boys and then further discussing the issues related to child protection with parents and caregivers. All the group discussions with adults begun with the presentation of summary results and reflections from the children's groups. Such an approach gives priority to children's voices, perspectives and experiences on issues of abuse, neglect, violence and exploitation against them. This approach created the space for adults to listen to the voices of children. For example, in both the male and female adults' groups, parents pointed out that the information shared with them from children's FGDs was surprising and shocking to them. Parents/caregivers confessed that they were unaware about the depth and seriousness of the issues their children were experiencing.

The top five child protection issues that local level assessment participants were particularly concerned about were:



Exposure to drugs (such as strong painkillers) in schools, including use of drugs by both girls & boys



Child Marriage



Child Labour



Forcible engagement of children by adults to act as smugglers or sellers of restricted products (cigarettes, gasoline)



Children experiencing constant significant stress

Assessment results revealed that there was a significant difference between how children viewed the existing situation and the perception of adults (refer to Table 2).

Both boys and girls in all eight children's FGDs shared that the engagement of children with drugs – specifically selling and using drugs and medication, which is happening mainly in schools, affecting both girls and boys – is the most prevalent issue and of most concern to them. It is likely that children and adolescents are engaged in drug smuggling as a way of coping with dire poverty as shared by them during the FGDs. Drug dealers may also cause children to become addicted to drugs in order to

exploit them. Even casual drug use in teenage years puts the individual at greater risk of developing substance abuse addiction. The earlier teens start using substances, the greater their chances of continuing to use substances and developing substance use problems later in life²⁰.

Drug dealing and abuse relates primarily to the use of strong painkiller medications, such as Vicodin, or drugs used to treat narcolepsy or epilepsy. These drugs are not sold without prescriptions. Although it is unclear how children get access to such drugs, participants shared that deals were made with health care providers to obtain expired drugs, or that drugs were stolen from medical points, drug stores or warehouses of Non-Government organisations (NGO).

Although both girls and boys were affected by the use and sale of drugs at schools, the issue seemed more pervasive among boys, particularly from the 15-17 years old age group. Drug abuse may lead to long-term implications affecting the growth and development of adolescents, especially brain development. These brain changes can be long lasting, and lead to harmful and violent behaviours, like stealing and vandalism. Moreover, a teen's mental health can deteriorate over time with substance abuse and addiction, leading to issues like depression, withdrawal and extreme irritability, with increased risks of teen suicide²¹.



During our KIIs with the school principal, [s/he] told us: ***“The scale and nature of the emergency situation has drastically changed since the beginning of the war. Before, we haven't heard about so many cases of child labour or about children dealing with drugs – either about children taking drugs or selling them; there were not so many instances of children smuggling gas to other areas. Hearing about all these examples, where children were used just as a tool to engage in risky situations, sounds really desperate, sad and heart-breaking. It cannot go without causing serious consequences to our young generation.”***

²⁰ Centers for Disease Control and Prevention (CDC) *Teen Substance Use & Risks*. Available online: <https://www.cdc.gov/ncbddd/fasd/features/teen-substance-use.html>

²¹ Ibid



An internally displaced child in one of the camps in Syria trying to make the best out of a difficult situation. Most tents in the displacement camps do not have a heating method. © World Vision local implementing partner in Northwest Syria

In both FGDs 15- to 17-year-old adolescent girls mentioned child marriage as a priority issue. At the same time, in the parents and caregivers groups, adult participants had not considered child marriage as a form of VAC, but rather believed that child marriage protects girls from other forms of violence. Also, while talking about the issue of child marriage, both adolescent girls as well as adult participants shared that there were simply no other opportunities, and getting married might be the only option available for girls in their context.

In all eight FGDs, children mentioned that both boys and girls aged 11 to 14 years, are mainly the ones who engage in child labour. Child labour included selling goods (candies, food products, etc.) at stoplights and on the streets, as well as working at car repair shops or in construction. Children had to sell various goods in places that were not very safe and had to miss school or drop out of school altogether in order to work. Boys mentioned that for working children there is almost no free time for play and to interact with friends.

In all eight children's FGDs, both girls and boys stated that boys of a younger age (11 to 14 years old) are most often involved with smuggling restricted products hidden in their backpacks – such as cigarettes and gasoline – between checkpoints. As explained by the participants, these children are less likely to arouse suspicion, or be stopped and searched at the checkpoints due to their younger age.



“A boy from the area was smuggling cigarettes. He was caught at one of the checkpoints. People who caught the boy, tortured him forcing to tell what he was smuggling and who was involved. The boy had to tell everything. His family was fined 3,000 dollars.” (Boys' FGD)

Girls and boys in all eight FGDs also mentioned frequent exposure to domestic violence and fights, or situations where children become witnesses of their parents' involvement in illegal and dangerous businesses.



“There is a boy whose father sells drugs. At times when the father is not at home, the boy himself has to deal with those who come to buy drugs. These people are dangerous and it is not safe at all for a child to have anything to do with them, or be involved in dealing with drugs.”
(Boys' FGD group)

Although children seemed to understand that the situation is very depressing for adults, as they feel the burden of responsibility to provide for their families, children mentioned that chronic inattention of caregivers and their 'psychological unavailability' creates a big gap in relationships between adults and their children. They do not understand each other and when they most need it, the connection between a child and their parents is broken. In addition, adolescent girls in all four FGDs with girls, shared their concerns about psychological or emotional neglect, including a lack of emotional support and love from their parents or caregivers, particularly toward girls.

Adults, particularly mothers, also recognised that parents and caregivers are so stressed by the overall situation that many lack the strength to provide consistent emotional care to their children. Both male and female adults' groups identified "living in and experiencing constant significant stress", as the main issue that people, including children, were facing.

TABLE 2: Child protection issues identified by various groups, presented in order of importance as ranked by various groups' participants.²²

Identified by:	Priority Child Protection Issues					
	Most Important			Least Important		
Girls under 18 years old	Dealing with drugs (such as strong painkillers) at schools, including use of drugs by both girls & boys	Child Marriage	Boys and Girl (mainly 11-14 y.o.) are forced by adults (primarily by parents) to act as smugglers and sellers of restricted products, such as cigarettes and gasoline	Psychological or emotional neglect (including lack of emotional support and love, caregivers being 'psychologically unavailable', exposure to partner violence, domestic fights or drug abuse)	Child Labour - boys & girls have to drop out of school for work	Bullying and Assault: (Sexual assault by adult male strangers in the streets. Bullying of younger-age boys and engagement in fights, provoked by older boys in schools).
Boys under 18 years old	Dealing with drugs (such as strong painkillers) at schools, including use of drugs by both girls & boys	Child Labour - boys & girls have to drop out of school for work	Boys and Girl (mainly 11-14 y.o.) are forced by adults (primarily by parents) to act as smugglers and sellers of restricted products, such as cigarettes and gasoline	Bullying and Assault: (Sexual assault by adult male strangers in the streets. Bullying of younger-age boys and engagement in fights, provoked by older boys in schools).	Children live in and experience constant significant stress	
Adults Group (Female)	Psychological or emotional neglect (including lack of emotional support and love, caregivers being 'psychologically unavailable', exposure to partner violence, domestic fights or drug abuse)	Children live in and experience constant significant stress				
Adults Group (Male)	Child Labour - boys & girls have to drop out of school for work	Children live in and experience constant significant stress				
Kills	Boys and Girl (mainly 11-14 y.o.) are forced by adults (primarily by parents) to act as smugglers and sellers of restricted products, such as cigarettes and gasoline	Child Marriage	Adolescent girls, who were forced into marriage, who are divorced and abandoned with small children			

²² With application of interactive tools, such as the 'Problem Tree', through the CPHA ADAPTs process participants are invited to identify and discuss what types of child protection issues exist in their context and why these issues occur. Then the facilitators ask the participants to rank all of the answers in order of importance from least important to most important.

Perceptions of VAC's Prevalence

In the group discussions, adults identified poverty and war as the main issues affecting them and their communities. Related to that, adults tried to justify and accept some forms of VAC as “being good for children”. Most of the parents and caregivers did not consider that harmful practices, such as child marriage, are forms of violence. On the contrary, adult participants believed that in some cases these practices “do good to children” and protect girls and boys from other forms of violence and that there are no other viable opportunities for them. Therefore, such practices are not only acceptable, but also encouraged. Parents and caregivers also mentioned that sometimes children should work to support their families. Adult participants were convinced that both child labour and child marriage are necessary for the survival of their families and children in a time of war and extreme poverty. It's not clear from the data whether these attitudes and practices were commonplace before the conflict, or whether communities have adopted them as negative coping mechanisms to overcome life-hardships and protect their families and children.



From the discussion with female caregivers:

“After 15 our girls and boys are not children anymore, they are grownups. When girls are married they can live better lives, as they have someone to protect them and someone to look after them. It is good for them.”



A Syrian woman living in a tent in one of the displacement camps in Northwest Syria. © ULUSLARARASI INSANI YARDIMLAŞMA DERNEĞİ



From the discussion with male adults:
“Making boys work is the only way for them to become a responsible person. Besides, children must help their families to survive during these difficult times – there is no other way.”

In all four adults' groups, the participants mentioned that the information coming from children was surprising and shocking to them. Adults – both male and female, confessed that they were unaware about the depth and seriousness of the issues their children were experiencing.



From the FGD with mothers:

“We did not know about what was happening in schools. It was alarming for me to realise that schools were not the safest places for our children, as we tend to believe.”



From the FGD with fathers:

“Hearing about this drugs business in schools; learning how widespread is the smuggling of restricted goods that involve children; hearing about such hidden stories, where people offered smuggled goods – learning about these all was really an eye opener... an overwhelming one... We definitely need to wake up and do something about all these. We need to better protect our children, our nephews and nieces, children of our neighbours. Any child can be affected – it could happen to anyone. We cannot neglect this situation.”

Understanding the Root Causes

If people believe that certain acts towards children are “violent”, then why do they occur? In FGDs, both adults and children considered this question. Table 3 below presents the most frequent causes of acts of VAC as identified by participants in the local level discussions.

TABLE 3:

Actors	Root Causes of Child Protection Concerns
Children	<ul style="list-style-type: none"> • Not wanting to add further burden on the family • Extreme Poverty • Children have no voice/low self-esteem • Lack of basic life skills and resilience; lack of spaces/opportunities for life skills development • Devaluation of education • Social norms for girls to get married early • Child marriage is allowed for both girls and boys under Sharia law • Risk-taking – children are less suspected as smugglers • Boredom – lack of space/activities to spend time • No formalised spaces for children’s participation – children have not been involved in/consulted on any policy development regarding them • School life skills training/curriculum does not include informed decision-making and gender-related issues • Low quality of education in schools, unsafe environment in the schools • No VAC safety environment norms or standards for schools • Unable to change the unsafe environment
Parents/ Caregivers	<ul style="list-style-type: none"> • Don’t see various issues as VAC. Harmful traditions and norms normalise common VAC issues/practices • Child marriage is allowed for both girls and boys under Sharia law • There is no legal/regulatory framework provision to specifically forbid VAC in family settings • Child labour and involvement of children in the trafficking of drugs or prohibited goods is not specifically forbidden by the legal/regulatory framework • Extreme poverty • No opportunities for employment, lack of access to cash • Feeling stressed and depressed themselves • Devaluation of education for their children • Lack of information about community-based services and supports available • Do not see a big role of authorities and opposition groups, relying more on NGOs and UN agencies as the main source of protection • Parents don’t have time to communicate with children and do not prioritise it • Unable to change the unsafe environment
Community/ Religious Leaders	<ul style="list-style-type: none"> • Child marriage is allowed for both girls and boys under Sharia law • Do not prioritise child protection • Limited capacity/knowledge on VAC
NGOs	<ul style="list-style-type: none"> • Inadequate resources/funding • Limited capacity/knowledge • No legal power • Lack of capacity and limited measurement on the impact of its ending VAC related interventions

Actors	Root Causes of Child Protection Concerns
Local Authorities	<ul style="list-style-type: none"> • No authority to hold people accountable • No rule of law • Child marriage is allowed for both girls and boys under Sharia law • Child labor and involvement of children in the trafficking of drugs or prohibited goods is not specifically forbidden by the legal/regulatory framework • Social work/family support actions are missing • There are no VAC response services available • There is no VAC data management system in place • There are no Strategic Operations Plans developed for any VAC issue • Inadequate resources/funding – there are no budgetary commitments for ending VAC provided by the authorities at any level. • There are no VAC reporting protocols provided for any professional category, with the exception of the Code of Conduct available for teachers/educators • There are no women or children's desks mandated in police stations or other public spaces, no VAC reporting hotlines, to facilitate reporting and streamline referrals and response, and no specialised units or individuals trained to follow gender-sensitive or child friendly protocols • No VAC-related public awareness campaigns have been funded or endorsed by the authorities during the last 3 years at national or local level • Do not prioritise child protection • There is no ombudsman office in place

Extreme Poverty (lack of basic needs, such as food; no way of making a living; no appropriate physical living conditions) was most frequently identified as the root cause for many of the VAC issues. The community members also mentioned the unsafe environment with many mentions of guns and violent acts. A lack of employment opportunities and access to cash, alongside uncertainty about “what will happen tomorrow”, were mentioned as preventing families from breaking the cycle of poverty.

In all groups, parents and caregivers talked about being stressed and feeling depressed leaving them lacking the emotional capacity or availability to support their children. Being in such a difficult psychological state, parents and caregivers are unable to prioritise spending meaningful time with their children and listening to them, which leads to weakening parent-child relationships.

Opportunities to learn and develop social and emotional life skills in a safe environment is a key protective factor for children. In the FGDs with children, particularly in girls' groups, they mentioned that being illiterate causes low esteem among children and feelings of worthlessness. Despite the benefits of education, both the children's and adults' groups talked about the low quality of education in schools, as well as the increasingly unsafe school environment (such as issues of bullying, drug dealing, etc.). Having insufficient quality educational services available results in a lack of trust in the value of education and a weakening parental commitment to sending their children to school. In the FGDs, many of the children

and adults stated that they do not consider dropping out of school a big problem.

People do not have any hopes in, or expectations of, local authorities in NWS. Based on 112 (53 female, 59 male) child and adult respondents' accounts, there was overwhelming evidence that the participants do not trust services provided by local authorities. People placed more reliance and trust in NGOs and UN agencies, which they thought had more power, more resources and greater means to help the communities.



From the KII with the tribal head in Azaz: “Unfortunately, we don't even want to talk about the authorities. There is no place where we can refer to and know there will be local authorities' support of any kind. NGOs are more reliable. They also have cluster meetings where they can coordinate and decide on priorities to intervene, that will be helpful to people. The NGOs' and CBOs' interventions are getting better now. There is hope for a better Syria.”

The following table summarises the root causes of child protection concerns identified by children and adults in the FGDs and KIIs. The points listed are the factors leading to VAC within the NWS contexts across

all levels of the socio-ecological model.²³ The socio-ecological model provides a concrete framework that supports systems thinking for child protection programming. The socio-ecological model looks at an entire situation to (a) identify all the different elements and factors and (b) understand how they relate to and interact each other. Rather than looking at a single protection issue or a specific service on its own, systems thinking considers the full range of problems facing the child, their root causes and the solutions available at all levels. It promotes flexible programming that integrates new learning and adapts accordingly throughout implementation.

Sources of Support to Prevent, Report and Respond to VAC Situations

While participants in the local level conversations identified risks that can cause harmful impacts on children, they also identified a number of protective factors within the NWS context that supports individual, family and community resilience. Programmes should build on these protective factors to prevent and mitigate the risks of children being exposed to harmful events.

TABLE 4:

Actors	Protective Factors Identified
Children	<ul style="list-style-type: none"> • Being in school • Asking support from friends • Relying on extended family members • Trust in NGOs facilitating child-focused activities
Parents/Caregivers	<ul style="list-style-type: none"> • Value for family • Relying on extended family members for childcare
Community/Religious Leaders	<ul style="list-style-type: none"> • Faith and religious leaders are respected figures in the communities – community members listen to them
NGOs	<ul style="list-style-type: none"> • Deliver services directly • Support communities and children to report and refer VAC incidents • Increase awareness of children and communities • Support other actors to protect children • Run community centres, child-friendly spaces for children of various age groups
Local Authorities	<ul style="list-style-type: none"> • Coordinate with NGOs • School curriculum for secondary education includes life skills education for managing the risks of violence • Availability of regulatory framework provisions to specifically forbid VAC in the education system (based on the code of conduct which forbids VAC)

Participants in the local level assessment were not aware of any actors who engage in specific activities that strengthen the prevention of VAC. Despite multiple VAC prevention interventions by the UN and NGOs, few of the children and adults knew about the objectives and outcomes of such programmes.

During KIIs, the interviewed child protection actors also mentioned that they have not implemented any VAC prevention initiatives. They mentioned that most actors, except NGOs and UN workers, lack the basic knowledge and skills on child protection required to lead VAC prevention work.

Interestingly, both children and adult participants identified a limited number of places to refer child protection cases. This is an important factor that affects people's awareness of, and their demand to address, VAC. When children and community members are unable to report VAC, prevalence rates remain hidden and under reported. Silence creates a lack of impetus to take action or galvanize the work of local CP actors and service providers.

Actual Sources of Support

Boys and girls both identified their peers as their main source of support in situations of violence. In all eight children's groups both girls and boys stated that they would share any instances of violence primarily with their friends. This raises questions about how much responsibility children can take on in terms of support, especially when their friends share serious VAC incidents with them.



From the discussion with boys:
“We are all here in the same situation, share same problems. It is just easier to discuss and find solutions with peers. They will understand and will help with advice.”

Both adults and children viewed the community and children's centres, such as Child Friendly Spaces (CFS), run by NGOs including WV and local partners, as an important second source of support and referral. In the majority of cases people feel safe to apply, share and ask for support when needed, particularly at the centres where they know and trust the people who work there.

²³ https://alliancecpa.org/en/CPMS_home



Observation from WV staff:

“Both children and adults mentioned that those centres have rules that respect children, that’s why they feel comfortable to apply to these centres for support when needed. It was interesting to observe how well aware all the participants were of what kind of centres for children are run by which NGOs and where exactly those were located. It was surprising even for us, as WV workers, to see such high level of awareness. There was also high level of trust people expressed towards the centres run by WV, which was encouraging.”

Although there seemed to be a good understanding on what kind of services were provided by NGOs and CBOs, there seemed to be overall lack of knowledge and awareness on services and support provided by local authorities. This may be due to the very limited services they provide, or lack of trust towards them. As one of the stakeholders mentioned in a KII, “mapping of the services, provided by local authorities, and raising public awareness of what kind of services people can get, is required”. However, in order to Do No Harm, only those services that are safe, appropriate and in line with humanitarian standards should be introduced to the populations. As much as possible, efforts should be made to strengthen collaboration between the local authorities, the UN and NGOs, and informal support mechanisms.

Children also mentioned that as a last resort they turn to their families when in need of support, particularly extended families, for example, boys approaching their grandfathers or uncles. Children said that they would prefer not to go to their families for support, in fear of adding further burdens on them. They said that they did not want to become an additional source of trouble for their families, who already face enough difficulties and stress. As one of the boys mentioned, “as the saying goes, children don’t want ‘to add salt to their families’ wounds”.

No reliable additional services for support were mentioned, services run by local authorities are notably absent. This corroborates the policy level review and analysis’ findings showing almost non-existent VAC prevention and response services provided by local authorities.

While people adopted coping strategies that harm children (e.g. pulling children out of school, sending

children to work, offering children for marriage, etc.), many adults do not think about reporting such issues as they do not consider such practices as VAC. These attitudes contribute to making VAC go unnoticed and unchecked, leaving affected children to suffer the consequences without any help or even hope for change. If these attitudes continue to prevail, there will be little urgency or demand for action to address these issues.

There is still work to be done to improve community reporting pathways and mechanisms. This includes a lack of child-friendly reporting pathways at the community level to report child protection violations – especially in places children frequent or where they should be encouraged to report violence (such as schools, community centres, and health clinics). There is a need to extend pathways to report violence in communities, with advocacy efforts to lobby for supportive regulations, so that children feel safe to report violence in confidence.

Apart from the NGO and UN workers, both formal and informal actors recognised a lack of capacity to receive reports on VAC incidents as well as lack of competencies and resources to deal with child protection issues. To address this, key informants spoke about the need for additional training and capacity building on child protection, as well as to identify appropriate methodologies and platforms to increase the effectiveness of organised capacity building interventions for both formal and informal child protection actors.



In the KII with the Imam, he told us:

“People are usually reluctant to apply for various CP actors for support, as they are afraid of being stigmatised. Besides, there is usually not much either formal and informal actors can do, as there is lack of specialised knowledge and skills. In majority of cases these actors can make even more unintentional harm with their limited understanding of how to deal with child protection cases. For example, I have recently heard about a situation when a father came to a local Mukhtar and asked him if it would be ok to send his 12 old son to Libya to work and earn some money to support their family. The Mukhtar assured the father that it was a great idea and encouraged him to send his son away. Such situations show how much work still needs to be done for child protection here.”

POLICY REVIEW AND ANALYSIS

This report reviewed the progress of local authorities in creating the minimum conditions in law and policy needed to end VAC. These minimum conditions align with provisions stated in the Convention on the Rights of the Child (CRC) and described in General Comment, General Measures of Implementation of the Convention on the Rights of the Child²⁴ that clarify necessary government and local authority actions to protect children from violence. Without these critical, foundational steps, it will be impossible to enable all actors, including within local authorities in NWS, in civil society and in communities, to work in unity towards ending VAC. *(The detailed scoring for 27 policy related questions and sub-questions is presented in Annex 2.)*

Syria became a signatory to the Convention for the Rights of the Child (CRC) on 15 July 1993, as well as the two out of three Optional Protocols²⁵ to the CRC in 2003. The Government of the Syrian Arab Republic submitted its last periodic report to the Committee on the Rights of the Child in July 2017.²⁶ There are no separate compliance and reporting requirements for NWS. The Committee on the Rights of the Child considers reports from the signatory country, including areas controlled by non-state armed actors. In the Concluding Observations on Syria's latest fifth periodic report, the Committee on the Rights of the Child "reminds the State party that during any reconstruction efforts it has the obligation to guarantee all rights in the Convention to all children throughout the territory

without discrimination, independently of where they live, and to promote a culture of tolerance, peace and reconciliation among all communities."²⁷



Two Syrian children walking around in a displacement camp in Syria. © ULUSLARARASI İNSANI YARDIMLAŞMA DERNEĞİ

Policy Review and Analysis Methodology

World Vision bases the policy progress scores on 27 questions and sub-questions that review policy status, regulatory frameworks and other commitments targeting VAC. These questions are in accordance with the Convention on the Rights of the Child and General Comment No. 5 on the Rights of the Child. Each assessed sub-question receives one of three answers: yes, no, or partial, scored 1, 0 or 0.5 respectively. The final score for each of the 27 questions is the average of its respective sub-points. Scores are noted by colour in the policy table Annex 2 (1 = green, 0.5 = yellow, 0 = red). In addition, the policy table in Annex 2 provides legal and policy references that determined each score.

²⁴ Committee on the Rights of the Child. (November, 2003). *General Comment No. 5 "General Measures of Implementation of the Convention on the Rights of the Child (Articles 4 and 42 and paragraph 6 of Article 44)", CRC/GC/2003/5.*

²⁵ *Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict and Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography - Ratification/Accession: 2003*

²⁶ Fifth periodic report submitted by the Syrian Arab Republic under article 44 of the Convention, due in 2015: <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G17/330/89/PDF/G1733089.pdf?OpenElement>

²⁷ https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fSYR%2fCO%2f5&Lang=en

Legal Progress

13%



The Sustainable Development Goals (SDGs), the Convention on the Rights of the Child (CRC), and regional commitments such as the European Convention on Human Rights (ECHR)²⁸ all enshrine national government commitments to protect children from violence. To fulfil these promises to children however, it takes complex and coordinated actions. Laws and regulations to end VAC are a necessary first step.

Authorities must establish laws and regulations that forbid violence, prevent violence, create pathways to report violence, and respond to violence. These four actions also create a clear approach to review and benchmark the progress to create and reform laws that adequately protect children from violence. They represent the minimum effort needed to end VAC. According to these benchmarks, our policy review and analysis indicated that overall Syria’s legal and regulatory framework²⁹ achieves a 13% total compliance with the four necessary actions, with specific conditions that apply only in NWS contexts:

	<p>Forbid</p>		<p>Prevent</p>
	<p>Report</p>		<p>Respond</p>
<p>Governments must create laws that forbid all forms of VAC. These laws help set community values; laws must ban VAC in all its forms and punish actions that contradict those values.</p>	<p>Governments must create laws and regulations that prevent VAC. Proactive policies can stem behaviors and actions that lead to violence.</p>	<p>Governments must create laws and regulations that encourage children to report violence and mandate communities and professionals to report violence; such pathways should be accessible and confidential.</p>	<p>Governments must respond to violence in ways that protect a child from future violence and provide rehabilitation and justice to remedy the violent act.</p>

Forbid 33%

Authorities must create laws that forbid all forms of VAC. These laws can inform community values. Laws must ban VAC in all its forms and punish actions that contradict those values.

Syria’s current legal provisions protect children from sexual violence both under the penal and Sharia laws. Involvement of any person, including children, in the trafficking of drugs or prohibited goods is forbidden under the Syrian general penal laws. Children are specifically protected from involvement in trafficking of prohibited goods under the provisions of the Child Protection Law (Article 63). Legal provisions protect, to a certain extent, children from labour that is harmful,

hazardous, interferes with their education or involves cruel or degrading treatment. It is, however, important to mention that Government of Syria (GoS) legal provisions are not observed in the NWS region.

There are no legal provisions to specifically forbid VAC in family settings, alternative care or the juvenile justice system. The only exception is the education system – based on the code of conduct (applied only in NWS) which forbids VAC. However, even in this case, the law does not forbid the use of VAC in school as a form of discipline.

Child marriage is allowed for both girls and boys under Sharia law.

²⁸ [Convention on the Rights of the Child](#), Article 19 and [European Convention on Human Rights](#), Section 1

²⁹ See details in Annex 2

Prevent 8%

Authorities must create laws and regulations that prevent VAC. Proactive policies can stem behaviours and actions that lead to violence. Prevention policies empower children, peers, parents, caregivers, and professionals to identify risks, seek help and create solutions before violence takes shape.

Syria's current legal and regulatory framework in NWS does not empower social service providers or educators to prevent violence. Social work and family support interventions are missing. Schools are not required to draft and implement violence safeguarding policies. While safety environment norms and standards for school buildings require separate toilets by gender and adequate lighting of classrooms and building spaces, still there are no provisions for the protection of the school courtyard and surroundings with adequate lighting (at night) and fencing. The official national school curriculum for primary and secondary education does not include any life skills education on managing risks of violence, informed decision making, and gender-related issues.

Report 0%

Authorities must create laws and regulations that encourage children to report violence and mandate communities and professionals to report violence; such pathways should be accessible and confidential. Once reported, professionals need guidelines and training to understand their roles and coordinate with other key actors.

Syria has not yet taken legal steps to establish reporting pathways for children and communities. There is no mandatory or non-mandatory responsibility for any

professional category to report situations of VAC – identified or suspected. There are no protocols to follow if health, education, social work, or police witness or detect acts of VAC. Without these protocols in place, natural advocates to protect children from violence, including health workers and educators, will not know what steps to take and what resources are available to help them.

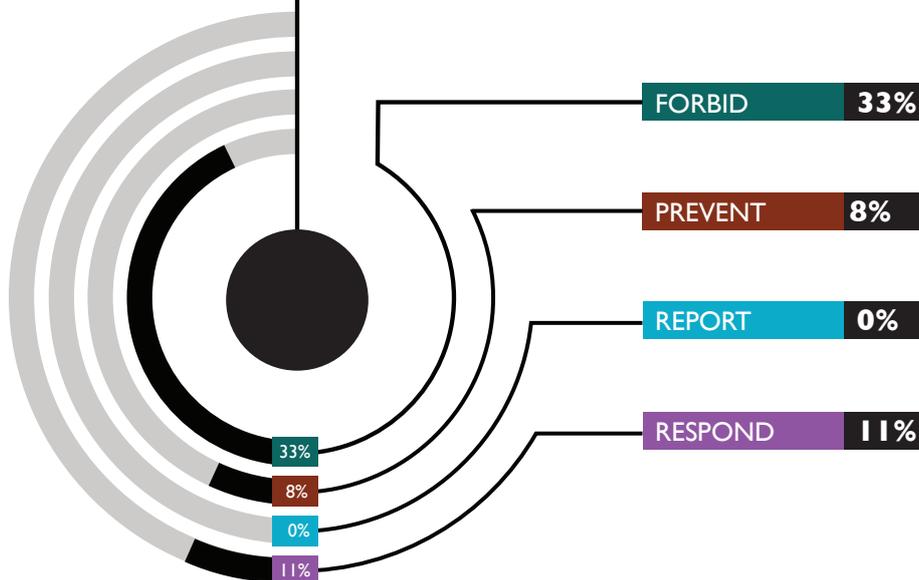
There is no VAC reporting hotline or any other emergency hotline to allow for reporting on incidents of VAC. At police stations, or in other public spaces, there are no women's and children's desks, mandated to facilitate reporting and streamline referrals of, and response to, incidents. There are also no specialized units or individuals trained to follow gender-sensitive or child-friendly protocols.

Respond 11%

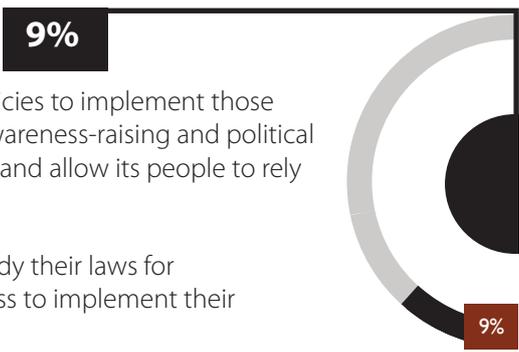
Authorities must respond to violence in ways that protect a child from future violence and provide rehabilitation and justice to remedy the violent act. Without a path towards recovery, authorities cannot end VAC.

Syria's laws do not provide a system of responses that integrate the majority of essential services in health, justice and social protection. With the exception of primary and emergency healthcare (which is to be provided by default in any situation requiring such healthcare, and is not specific to addressing VAC cases), there is only a provision for legal compensation for the victims of violence which also applies in NWS. All the other necessary services, such as removal of the perpetrator, protection placements for victims, extended medical care and rehabilitation, psychological support, legal aid and protection, witness protection, judicial review, are all missing from Syrian legislative framework.

Syria's Legal Progress



Preparing to Implement



Once governments adopt laws to end VAC, they must also create policies to implement those laws. These policies provide for sufficient resourcing, coordination, awareness-raising and political momentum to equip the public sector workforce to implement laws and allow its people to rely on these laws at the community level.

There are four distinct policy actions that authorities must take to ready their laws for implementation. According to these four benchmarks, Syria's readiness to implement their current policies to end VAC achieves a score of 9% compliance.

 <p>Fund</p> <p>To prepare for policy implementation, national governments must provide budgets to fund services, personnel and trainings to implement laws and policies to end VAC.</p>	 <p>Manage data</p> <p>Governments must create centralised information systems or national databases that host information on children victims of all types of violence, abuse and neglect.</p>
 <p>Promote accountability</p> <p>Participation in accountability processes can provide national governments with new funding, political and technical support, citizen approval and oversight to strengthen policies and move towards the implementation of policies.</p>	 <p>Raise awareness</p> <p>Governments must take steps to inform its citizens about issues of VAC; public awareness builds momentum around behaviours to prevent, report and respond to violence and invites citizen responsibility.</p>

Fund 0%

To prepare for policy implementation, authorities must provide budgets to fund services, personnel and trainings to implement laws and policies to end VAC. These resources are hard-won, given competing political and funding interests, however, funding from official development assistance budgets coupled with partnerships from civil society can amplify state budgets. Authorities must create a detailed budget for action plans and current laws and policies; budgets must identify activity-related costs and implementation.

In Syria, including in NWS, there are no budgetary commitments for ending VAC, provided by the authorities; and there are currently no Action Plans or Strategic Operations Plans developed to address any issue of VAC to support such commitment.

Manage Data 0%

It is critical for authorities to create centralised information systems or databases that host information on child victims of all types of violence, abuse and neglect, segregating data by type of violence, age, gender and disability and assigning responsibility to manage the database to a specific public sector workforce. Centralised information systems provide the tools for individual case management that enable referral and coordination between workforce experts. Such a system also creates consistent prevalence data on VAC that is necessary for evidence-based policymaking and budget allocation.

NWS does not maintain any centralised information system to manage cases of VAC, neither do Syrian laws or any local regulations in NWS mandate VAC surveys or other representative population surveys to baseline the prevalence of VAC issues.

Promote Accountability 17%

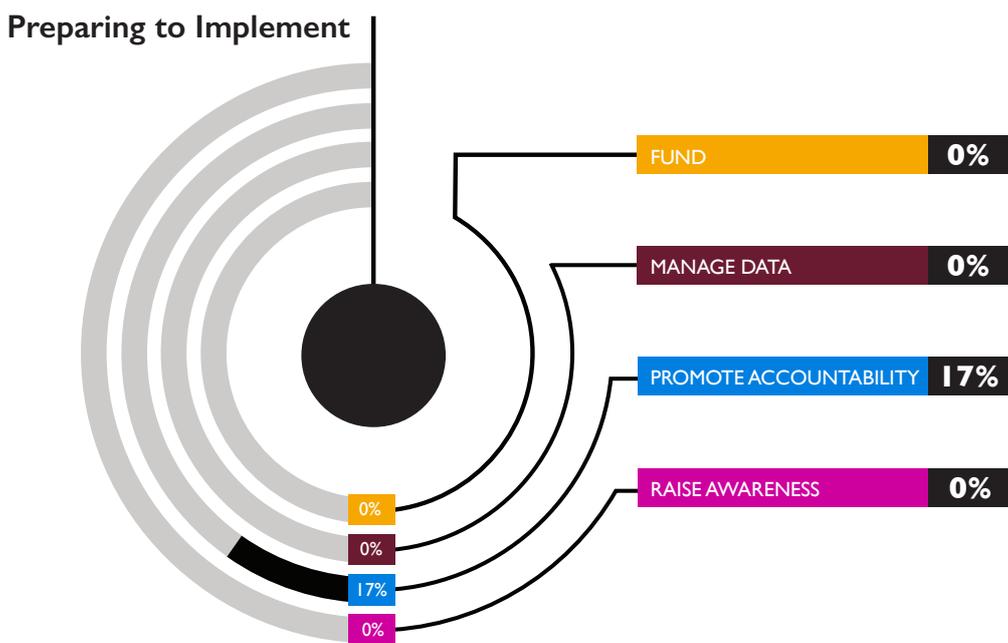
Participation in accountability processes can provide authorities with new funding, political and technical support, citizen’s approval and oversight to strengthen policies and move towards the implementation of policies. There are global, regional and national level accountability mechanisms that authorities can harness to seek new support and partnerships.

The Syrian government has complied with a UN CRC requirement by adopting the Child Protection Law in 2021. However, the country has not yet submitted to relevant international treaty bodies and there were no Voluntary National Review (VNR) reports developed. There is also no ombudsman office in place. Children have not been involved in any way or consulted on any policy development regarding them.

Raise Public Awareness 0%

Authorities must take steps to inform its people about issues of VAC. Public awareness builds momentum around behaviours to prevent, report and respond to violence and invites public responsibility. Although donors and civil society can be key partners in this process, authorities must provide leadership and systematic actions (not least assigning responsibility to specific actors and ministries) to change ad hoc messages into well-managed and targeted campaigns.

Syrian authorities have not yet taken systematic actions to achieve these objectives. There were no VAC-related public awareness campaigns funded or endorsed by the authorities during the last three years. At present, civil society organisations and international institutions fund and sponsor public awareness campaigns in the whole of Syria, including the North West.



CONCLUSIONS AND RECOMMENDATIONS

The local level assessment conducted in the Idleb and Azaz regions, coupled with the Syrian policy review and analysis regarding child protection in NWS, provides a real time record of how VAC is addressed in this context. The identification, prioritisation and understanding of existing child protection issues and systemic gaps provides an evidence-based understanding of the situation on the ground to inform programmatic priorities, designs and overall intervention strategies.

According to the CPHA ADAPT data from the local level, there is a considerable difference in priorities identified by children when compared with those of adults. Communities sometimes normalise common VAC issues and behaviours and therefore, civil society and local authority actors must take additional initiatives to overcome normalisation. Activists and humanitarian actors must educate all stakeholders about the status and potential consequences of these acts and help different groups speak to each other about their concerns and divergent experiences. Together, their experiences can cover many of the possible knowledge gaps that remain in communities and build consensus on how everyone in communities has a role to protect children from violence.

Ongoing conflicts and economic hardships continue to exacerbate vulnerabilities, inequalities and poverty that emerged with the outbreak of war in 2012, leading to new child protection concerns, such as children being exposing to drugs in schools. Poverty, unsafe environments and lack of opportunities for economic development were mentioned most often as the underlying reasons for child protection issues. This highlights the importance of inter-sectoral programming that address the needs of the affected population holistically.

The children and adults who participated in community conversations, suggested that limited rule of law and the inadequacy or absence of specific laws to address VAC, contribute to increases in violence. Without clear accountability for acts of VAC and laws that help communities understand what is legal and illegal, the prevention and response to issues of VAC will be weak and ineffective. Authorities must establish laws and regulations that forbid, prevent, create pathways to report and respond to violence.



Syrian children living in a camp in Northwest Syria. © ULUSLARARASI
INSANI YARDIMLAŞMA DERNEĞİ

Our policy review and analysis results reveal that Syria's legal and regulatory framework, and particularly NWS's readiness to implement the current policies to end VAC, achieves about a 13% compliance with international standards. Moreover, there is a low level of trust in local authorities in NWS, with people relying heavily on NGOs and UN agencies as their main source of protection.

Lack of intentional actions towards addressing VAC throughout a child's social environment contributes to making VAC unnoticed and to its spread, leaving affected children to suffer and live through the consequences without any help or hope for change. All actors, within authorities, in civil society and in communities, should work in unity towards the goal of ending VAC.

The **recommendations** present the programmatic priorities that can contribute to strengthening child protection through prevention and response measures in NWS. These are relevant and can be considered for implementation by both formal and informal child protection actors, such as International NGOs,

local NGOs, faith communities, service providers, local authorities and other social institutions such as tribal leaderships or community stakeholders. With consideration of the recommendations listed below, the local formal and informal actors should scale up multi-sectoral actions to ensure women and children are kept safe from harm in situations of protracted crisis, and in emergencies.

- Consider integrated programming across the social ecology of the child (e.g. World Vision implemented integrated livelihood, cash and protection interventions, which demonstrated positive results for the protection and well-being of women and their children). Similar multi-sectoral programs, including with application of approaches, such as **World Vision's Child Protection & Advocacy model**, are much needed to address the root causes of various child protection risks, including those associated with economic hardship. In this process, a stronger focus on measuring and documenting the protection outcomes will be required.

WV's flagship Child Protection & Advocacy (CP&A) model promotes a systems approach and addresses the root causes of violence. The model integrates strategies across the ecological model that can be contextualised but also employed simultaneously in the most tactical way to address the complex driving factors of violence. These strategies include the use of programme approaches and methodologies such as Channels of Hope (CoH) for Child Protection, Citizen Voice and Action, Celebrating Families, Peace Road, Community Change. It is essential to adapt the CP&A model as situations evolve in a fragile context. An important balance must be made between meeting humanitarian needs and working towards the establishment and strengthening of child protection systems in the long run.

More specific interventions to consider include:

- Implement targeted adult psycho-social support programming that includes addressing gender norms and supporting positive coping strategies. Link such interventions with informal education or with conditional livelihoods/cash for education initiatives, in which adults attending the sessions, or children's school attendance, are a condition for receiving cash transfers.
- Explore the feasibility, in line with the common practices and guidance of the Child Protection Sub-

cluster for the Whole of Syria response, to engage older adolescents in cash for light work – with close supervision and time allocation for study – or organize apprenticeships after their participation in the vocational training. This could be particularly important for adolescents at risk of not returning to school, or for those who are already working in hazardous work. Such an intervention could also help to relieve the feeling of being a burden to their family as well as providing an opportunity for them to learn and acquire important skills outside of school.

- Create opportunities for children and parents to spend quality time together, have conversations and experience fun days. Such activities can be organised in the safe space, school or other venue, or be included as part of the positive parenting sessions. This can help to improve mutual understanding and strengthen child-parent relationships.
- Provide continuous and tailored capacity building sessions for key community child protection actors, including on remote case management, basic psychosocial support, family tracing and reunification, alternative care, etc. These can serve also as disaster preparedness actions in case humanitarian access becomes limited or if insecurity increases.
- Explore additional entry points to engage with faith, tribal and community leaders, particularly in programs that may be of particular interest to them.
- Identify a strong focus of civil society is public awareness raising, while more focus on identifying opportunities to promote and measure social and behavioral changes would be hugely beneficial. It is also important to strengthen collaboration with local authorities, supporting these actors to take leadership in public awareness raising and prevention of VAC.
- Strengthen joint planning and programming between Child Protection and Education sectors to address issues with unsafe school environment, including issues of drug trafficking and smuggling. Interventions might include:
 - Engaging boys and girls in child-led accountability activities, to provide feedback on the school policy, facilities, curriculum; to strengthen the school council, etc.
 - Developing and implementing VAC-safe policies in each partnering school (as a joint effort

of teachers, children and parents), including child-friendly reporting mechanisms for VAC and applying clear measures to respond to violence. Gender preferences should be a key consideration when designing reporting & referral mechanisms or training various actors to receive reports.

- Continuing life skills education for children to help them recognize and prevent VAC (including risk management, informed decision making and gender stereotyping). Consider engaging with the authorities to include such life skills activities as part of the school education curriculum.
- Training teachers and parents to build understanding and capacity to recognise VAC and properly respond to it.
- Emphasising the value of education and potential risks for dropping out of school during the positive parenting sessions.

Such actions would help developing trust in education facilities as safe places for children, would

encourage parents to allow their children to go to school, and in a long run would set a ground to work jointly with the authorities on CP-focused education policy development.

- Conduct stakeholder analysis to map existing service providers, local authority structures and UNICEF projects with the authorities. Identify entry points especially with the representatives of the Ministry of Education and Family Ministry in NWS through supporting them with Strategic Operations Plans development, providing in-kind support, and involving them in the case management process (when appropriate) to build trust and relationships.
- Establish a data collection and information management system. There is lack of a centralised data management system to host information on children victims of various types of violence in NWS. Such data and the collection of this data is essential for evidence-based policymaking, budgeting and planning specific actions at the community level, including raising awareness.



Syrian children giving a thumbs up in the middle of a displacement camp. © Action for Humanity

ANNEX 1: LIST OF DOCUMENTS REVIEWED

Prior to starting the local level engagement with children and adult stakeholders, the assessment team reviewed the following documents to further inform the assessment process:

[The Syria 2022 Humanitarian Needs Overview \(HNO\)](#)

[The Syria 2021 Humanitarian Needs Overview \(HNO\)](#)

Frontier Economics and World Vision (2021) [TOO HIGH A PRICE TO PAY: The Cost of Conflict for Syria's children](#)

[Northern Syria Child Protection Situation Monitoring Dashboard \(OCHA\)](#)

World Vision (March 2020) "NWS Gender Analysis: A Comprehensive Gender and Age Analysis for the Northwest Syria Humanitarian Response"

World Vision (June 2020) "[Stolen Future: War and Child Marriage in Northwest Syria](#)"

World Vision Syria Response Office Strategy FY21 – FY23

Vulnerability mapping conducted by WV Syria Response Team in 2019

WV Syria Response Programming evaluation reports for the last two years

ANNEX 2: POLICY REVIEW AND ANALYSIS SCORING

Main and Sub-Indicators	Legal/Policy Source	Score
1 Forbid in all settings all forms of physical and mental violence		
Corporal punishment at home	No specific provisions	
Corporal punishment at school	Decisions and circulars (534-545) issued by the Syrian Ministry of Education prohibiting the use of VAC. On the other hand, laws allow the use of violence in home and school as discipline.	
Corporal punishment in alternative care	No specific provisions	
Corporal punishment in penal institutions	No specific provisions	
2 Forbid sexual violence		
Sexual abuse and violence	Forbidden under Sharia law	
Commercial sexual exploitation	Forbidden under Sharia law	
Child pornography, online and offline	Forbidden under Sharia law	
3 Forbid female genital mutilation		
Female genital mutilation	n/a for Syria	
4 Forbid Child labor		
Child labor that is hazardous (identifying specific activities)	Article 36 of the Child Protection Law; no definition provided for hazardous work	
Child labor that interferes with a child's education	Art.36 of the Child Protection Law; minimum age for employment is not connected to the age of completion of compulsory education	
Child labor that is harmful to a child's health or physical, mental, spiritual, moral or social development	Art.36-1 of the Child Protection Law; worst forms of child labour are not defined	
Child labor that involves cruel, inhuman or degrading treatment	Art.36 of the Child Protection Law (general provision, not specifically connected to child labour)	
Child labor that involves the sale of a child or servitude	Articles (47-63) Child Protection Law and the Law against Human Trafficking (4-8)	
Child labor that involves activities in which a child is used for legally punishable criminal acts	Article 39 of the Anti-Narcotics Law No. 2 of 1993 (not specific on children); General provisions according to the Child Protection Law (31-32-36)	
5 Forbid Early Marriage		
Marriage under the age of 18 for men and women without exception	Child marriage allowed and practiced under Sharia law	
6 Home visits to Prevent Violence		
Home visits by Social welfare specialists	No provisions	
Home visits by Health care workers	No provisions	
7 VAC Safe Policies and Measures in Schools to Prevent Violence		
Laws or regulations that mandate in schools anti-bullying and / or VAC safe policies	No provisions	
Laws or regulations that mandate in schools mechanisms to report all forms of violence	No provisions	
Laws or regulations that mandate in schools clear measures planned and in place to respond to violence	No provisions	
Laws or regulations that mandate in schools training and capacity building for teachers to recognize and respond to violence	No provisions	
8 School Safety/Environmental Standards to Prevent Violence		
Laws or regulations that mandate safety / environment standards in schools: separate toilets by gender	Provided under school building norms (documents not available)	

Main and Sub-Indicators	Legal/Policy Source	Score
Laws or regulations that mandate safety / environment standards in schools: adequate lighting	Provided under school building norms (documents not available)	
Laws or regulations that mandate safety / environment standards in schools: school yard fencing	No provisions	
9 Life Skills Education for Children to Recognize and Prevent VAC		
Official national education curriculum includes life skills education to help children manage the risks of violence	No provisions	
Official national education curriculum includes life skills education to help children equip them with informed decision making	No provisions	
Official national education curriculum includes life skills education to help children addresses gender stereotyping	No provisions	
10 Mandatory Reporting of all Cases of Neglect, Abuse, Violence and Exploitation against Children		
A mandatory reporting law for professionals who work with children	No provisions	
A mandatory reporting law for citizens	No provisions	
11 Reporting Protocols / Guidelines in place for Service Providers		
Reporting protocols and referral guidelines for police	No provisions	
Reporting protocols and referral guidelines for health professionals	No provisions	
Reporting protocols and referral guidelines for educators	No provisions	
Reporting protocols and referral guidelines for social workers	No provisions	
12 Free and Publically Accessible Hotline to Report Violence		
Government-operated national helpline/hotline, free and publically accessible	No provisions	
13 Facilitate and Streamline VAC and GBV Reporting/Referrals		
Mandated units / desks at police or other community spaces that encourage reporting and streamline referrals	No provisions	
14 Create Specialized Police Units / Individuals to Receive Reports		
Regulations require specialized police units / individuals trained to receive reports on VAC	No provisions	
Regulations require specialized police units / individuals trained to follow gender-sensitive protocols	No provisions	
Regulations require specialized police units / individuals trained to follow child friendly protocols	No provisions	
Regulations require specialized police units / individuals trained to follow protocols to involve/ work with other specialists as needed	No provisions	
15 Child-friendly Reporting Pathways Provided in Places Frequented by Children		
Regulations require child-friendly reporting pathways / mechanisms in schools	No provisions	
Regulations require child-friendly reporting pathways / mechanisms in health clinics	No provisions	
Regulations require child-friendly reporting pathways / mechanisms in alternative care	No provisions	
Regulations require child-friendly reporting pathways / mechanisms in community centers	No provisions	
16 Respond to Reports of Violence		
Removal of offender (in domestic violence cases)	No provisions	
Protective placement (in alternative care)	No provisions	

Main and Sub-Indicators	Legal/Policy Source	Score
First aid and medical assistance in cases of violence	The law mandates the provision of first aid and medical assistance to all people including victims of domestic violence (under the law of hospitals under the Syrian Arab Republic law). There is no specific provision for VAC or GBV.	
Long-term medical and mental health services	No provisions	
Psychological counselling and rehabilitation	No provisions	
Access to legal support / aid	No provisions	
Access to legal protection	No provisions	
Witness protection	No provisions	
Judicial review (holding offenders criminally responsible)	the general provisions on compensation, Article 164 of the Civil Code	
17 Fund National Action Plans on VAC		
National action plans on VAC are costed out with identified sources of funding	There are no up to date strategies on VAC issues	
18 Clear, Transparent Budgetary Commitments to End VAC		
Data is available on government budgetary commitments for ending VAC at the national level	Not provided	
Data is available on government budgetary commitments for ending VAC at the local level	Not provided	
19 Centralized Database with Disaggregated Data on VAC to Manage Cases and Analyze Policies		
Centralized database on child victims of violence by type of violence	Not provided	
Centralized database on child victims of violence by age	Not provided	
Centralized database on child victims of violence by gender	Not provided	
Centralized database on child victims of violence by disability	Not provided	
20 Regular VAC Surveys Mandated by Law for Prevalence Data		
Law or regulatory framework requires a representative population survey that provides a baseline on prevalence data (including VAC)	No provisions	
21 – 26 Accountability Mechanisms at the National and Global Level		
Mandated independent human rights institution operates a child rights unit	No provisions	
Active National Action Plans to Forbid Violence	Not provided	
Government regularly reports on national action plan progress (regarding VAC)	Not provided	
Government regularly reports on ending VAC to global accountability processes, including UPR, VNR, CRC	Not provided	
Children meaningfully participate at key stages of policy development for ending VAC	Not provided	
Government has complied with a recommendation from the CRC process from the most recent reporting period or last 3-5 years	Adoption of Child Protection Law No. 21 of 2021	
27 Raise Awareness on VAC to Citizens		
Government has funded a public awareness campaign to address VAC in the last 3 years	Not provided	
Government created public awareness activities by relevant professionals at the community level in the last 3 years	Not provided	

World Vision is a Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. Inspired by our Christian values, we are dedicated to working with the world's most vulnerable people. We serve all people regardless of religion, race, ethnicity or gender.

We believe a world without violence against children is possible, and World Vision's global campaign *It takes a world* to end violence against children is igniting movements of people committed to making this happen. No one person, group or organisation can solve this problem alone, it will take the world to end violence against children.

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