



# MEETING THE DIFFERENT NEEDS OF BOYS AND GIRLS IN SERVICES FOR VULNERABLE CHILDREN

## Background

Programs for orphans and vulnerable children (OVC) aim to support, protect, and nurture the physical, emotional, and social well-being of children, ensuring adequate opportunities to achieve their full potential. Gender norms and inequities can interact with the access and delivery of services and resources and the impact of OVC programming for individual children, caretakers, and households. In most cultures, boys and girls are raised and treated differently and assigned different expectations within the family and community. These gender norms vary by region, community, environment, household, and age. Gender is therefore important to consider in all OVC service areas and at all levels: government, implementing partners, community (community-based organizations and structures), household, and individual.

The physical needs of boys and girls from infancy to young adulthood also require special attention. New HIV infections occur among adolescent girls at a rate eight times higher than among boys, suggesting differences in physical vulnerabilities and underlying social gender gaps (PEPFAR, 2012). Considering the separate needs of infant, youth and adolescent girls and boys and their caregivers in both individual and broader scale contexts will improve outcomes, cost-effectiveness and equity in OVC services. Addressing gender in services for children both overcomes gaps in access and capitalizes on an opportunity to educate and transform the emerging generation to challenge

cultural views and norms that place unjust burdens, restrictions, and risks on girls and women.

## Gender Issues in OVC Services

### Education

Girls face many barriers accessing education including cultural norms that belittle the importance of educating girls, household and childcare burdens, early marriage and pregnancy and increased risks of sexual assault in transportation to schools. A lack of separate lavatory facilities and sanitary napkins also may prevent girls from attending school.

Likewise, in some cultures and communities, pressures on boys to work and cultural rituals create a barrier to boys' access to education. Some national systems, aiming to promote gender equality in schools, actually give preference to girls, creating a reverse gap.

School and community environments can also promote inequalities between boys and girls both in attendance and performance in schools. Teachers may favor boys or girls in the classroom, and in

Gender issues in OVC services:

- Barriers to accessing education
- Health and nutrition needs
- Psychosocial needs
- Risk of violence and exploitation
- Economic opportunities

some cases teachers and administrators perpetrate gender-based violence. Studies in Ghana and Kenya found teachers justifying corporal punishment of boys, to 'toughen them,' or of girls 'to enforce submission' (Parkes & Heslop 2011). Peers may also act in gender abusive or exploitative ways in school. In a study conducted in Zambia, two-thirds of girls reported knowing of instances in which male classmates sexually abused or harassed girls at their school (Cornell University Law School 2012).

### Health and Nutrition

Vulnerable girls are at increased risk of

## Overcoming a school attendance barrier for girls in Kenya

A team of community members aiming to improve services to vulnerable children in Nyanza Kenya found many adolescent girls missing school for up to a week each month during menstruation. The team addressed this issue by training a group of girls to make sanitary pads and distribute them for free at school. This improved the attendance of 158 vulnerable girl children.

— Story contributed by Roselyn Were, URC Kenya

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Children from the small fishing village of Kansensero, the site of the first identified AIDS case in Uganda. Many of the children from the village are HIV orphans.

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HIV infection due to factors such as lack of self-worth, invisibility in the social and legal system, sexual exploitation in exchange for access to resources, and early marriage. Boys and girls served by OVC programs often live in HIV-endemic areas and need education on prevention and access to testing, counseling, and dual protection. Some gender-related tribal and cultural practices like intergenerational sexual partners and “beading” (a practice where a male relative places a necklace on a young girl to ‘claim’ her to commit to sexual intercourse with him) also encourage young boys or young girls to have multiple sexual partners, increasing the spread of sexually transmitted infections and risk of unwanted pregnancies. Gender norms may also restrict boys’ access to health services when community attitudes associate health-seeking and illness with femininity and vulnerability.

Cultural taboos and practices can also put girls at a nutritional disadvantage, for example, household practices that require girls to eat last or taboos against eating during menstruation. At the same time, the majority of OVC caregivers are women and often elderly women who struggle to provide adequate food for the children and themselves. Nutrition and agricultural initiatives that address gender equity can overcome this resource barrier.

### Psychosocial support

Psychosocial support services can offer healthy ways for vulnerable boys and girls and caregivers to deal with difficult emotions without resorting to violent or aggressive behaviors. Psychosocial support

## Addressing a gap in boys’ school attendance in Kenya

A local organization providing support for services for vulnerable children in the Samburu region in Kenya observed high numbers of adolescent boys dropping out of school. Delving into the root causes, the service providers found that the gender gap in school attendance was largely attributable to community practices. The nomadic Samburu community employed and exploited many vulnerable boy adolescents to herd cattle and migrate to distant water sources during dry seasons lasting up to three months. Boys 12-15 years old also may become warriors, Morans, expected to defend the herds through violent fighting and to have many sexual partners to achieve status. To address these issues the team conducted community sensitization and education activities, identified and mapped resources for food provision support for child-headed households, and lobbied for waivers of school fees to reduce the pressures on boys to become Morans and herders for financial and food resources.

– Story contributed by Roselyn Were, URC Kenya

for caregivers is reflected in more nurturing home environments. Boys and girls benefit from gaining autonomy, communication and negotiation skills, and a sense of empowerment. These services can also be directed to counter harmful gender norms and cultivate respect between boys and girls. Successful interventions to bridge gender-related burdens include linking girl heads of households to women’s groups and faith based organizations and can assist girls in planning for financial and seasonal stresses that may lead to sexual exploitation while providing a space for group therapy and support (PEPFAR 2012).

### Gender-based violence and exploitation

Globally, approximately 150 million girls and 73 million boys under the age of 18 have experienced some form of sexual violence and exploitation, although only about 10-20% of child sexual violence and exploitation cases are reported (PEPFAR 2012). Children made vulnerable by HIV and in at-risk households are at increased risk of gender-based violence. Additionally, some vulnerable children may engage in sex trade and exploitation out of need for food or resources. Unfortunately, the perpetrators of gender-based violence are most often family members or service providers. Victims of violence may require immediate medical attention and shelter and specialized psychosocial support and legal and social protection to prevent future incidents and for continued monitoring and care. Informed and responsive community-based organizations, health care and service providers, and caregivers can all take steps to prevent gender-based violence. Communities need support to

defy gender norms that promote and accept violence by raising awareness of all who interact with vulnerable children on the importance of identifying cases of abuse (including countering common misperceptions that boys cannot be victims of gender-based violence). For example, the Biruh Tesfa project in Ethiopia addresses the sexual exploitation and abuse of girls by offering access to reproductive health information and to health and support services for rape victims. The program also offers “safe spaces” for girls, adult mentorships, and literacy and training in vocational alternatives for girls at risk of sexual exploitation (PEPFAR 2012).

### Economic strengthening

In many communities, the caregivers of orphans and vulnerable children are elderly women or adolescent girls who become the heads of household. In cultures where women already face unequal access to

## Economic Strengthening in Nigeria

In Taraba in North Eastern Nigeria, ten women caregivers were trained in savings and loans and given small loans for irrigation farming and land. These women were able to earn money from selling agricultural products, maintain these businesses, provide improved nutrition for the vulnerable children in their care and afford to send them to school.

– Story contributed by Josephine Ogazi, URC Nigeria

employment and economic opportunities, this puts a strain on caregivers and limits household access to essential resources. Economic strengthening programs that target women OVC caregivers will benefit the health, nutrition, and nurturing environments provided to vulnerable children. Girls not attending school due to household responsibilities or other gender-based barriers should be given alternative training to enable them to establish a livelihood through adulthood.

## Considerations for Integrating Gender into OVC Services

National policies and standards, interaction with the community and community service providers, and the home environment impact the health, well-being and futures of each vulnerable boy or girl. Stakeholders at each level play an important role in protecting vulnerable children and shaping the outcomes of interventions. The needs, and the barriers and enhancers to successfully meeting those needs, differ between boys and girls and between age groups, economic and cultural contexts. Thus OVC services and care, at all levels, must look inward to assess for gender gaps, issues and inequalities and take evidence-based approaches to counter these challenges. In designing, evaluating or providing services, these considerations and steps can help you integrate gender considerations in your work:

### 1. Assess how gender affects programs and services

- All levels:
  - What are the attitudes towards and prevalence of gender-based violence?
  - Do men and women as caregivers face any gender-based constraints?
- National level:
  - Are there laws protecting against gender-based violence?
  - Are there laws against child marriage?
- Community level:
  - Are boys and girls equally eligible and referred to OVC services?
  - Are there equal extra-curricular and peer support activities for girls and boys?
- Community and household levels:
  - Are there cultural practices that prevent boys or girls from

benefitting from services, information, and achieving their highest potential in health, education and quality of life?

- Are their gender-related roles assigned to children (i.e., caregivers, breadwinners, cattle herders)
- Are education and health valued and prioritized equally for girls and boys?

#### ■ Household level

- How are household and nutritional resources distributed among girls and boys?

### 2. Address gender in education

#### ■ National level:

- Integrate gender rights and HIV education into the curriculum
- Include gender sensitivity in teacher trainings and qualifications

#### ■ National and community levels:

- Disaggregate school enrollment and attendance data by sex and age to determine gaps in enrollment and attendance which often differ between primary and secondary school
- Establish policies against gender-based harassment at schools and procedures for monitoring, reporting and rectifying situations of abuse
- Mobilize schools and community organizations to provide financial or in-kind support to girls or boys where they face gender-based expectations in labor and economic production that presents a barrier to school attendance

#### ■ Community level:

- Designate resources for safe transportation to schools, sanitary napkins for girls attending school and separate bathroom facilities

#### ■ Community and household levels:

- Speak to decision-makers about the long-term benefits of education for girls and boys and hold critical discussions about child marriage and other relevant gender barriers

### 3. Address the needs of girls and boys in health and nutrition

#### ■ National level:

- Adopt WHO growth standards as part of regular physical exams to assess proper nutrition and growth



Adolescent girls jump rope during a sports day at an all girl secondary school in Lilongwe, Malawi.

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- Adopt iron supplementation programs for adolescent girls if anemia is prevalent
- Train health care workers in providing gender-sensitive services

#### ■ National and community levels:

- Train health care workers in treatment and emergency protocols for cases of sexual abuse (see [http://www.aidstarone.com/focus\\_areas/gender/resources/prc\\_technical\\_considerations](http://www.aidstarone.com/focus_areas/gender/resources/prc_technical_considerations))
- Raise awareness about harmful taboos surrounding girls' eating habits and promote fair allocation of food in the household

#### ■ Community level:

- Implement home gardening interventions for female caregivers to produce food for consumption

### 4. Close gaps in economic opportunities and resources for female caregivers and vulnerable boys and girls

#### ■ National and community levels:

- Establish career and vocational training opportunities that are useful for boys, girls, men, and women
- Provide females with equal access to trainings in market-driven income-generating activities
- Provide cash-asset transfers for grandmothers or sick heads of household

### 5. Ensure Psychosocial Support

#### ■ Community level:

- Create clubs and safe spaces, particularly for girls



- Offer peer support for caregivers and parents as an outlet to reduce stress and prevent abuse of girls and boys
  - Engage boys and girls in role plays, poems and other artistic forms to express gender issues, cope with related emotional stress, and convey gender equity messages to the community
  - Provide young adult female and male mentors for boys and girls
- Offer trainings for girls and boys on self-defense and resources to access
  - Train community organizations to act as local emergency responders in cases of gender-based violence
  - Develop a system to link victims with local health, legal, and psychosocial services
- Household level:
    - Establish peer psychosocial support for adult caregivers; include monitoring protocol for gender-based violence in case management home assessments

## 6. Prevent and treat gender-based violence

### ■ At all levels:

- Strengthen linkages between households and community members who are likely to be the initial parties to identify cases of violence, with community and national health, social, and legal services

### ■ National level:

- Ensure legal protection and non-discriminatory laws that protect against gender-based violence, early child marriage, and rape
- Roll out protocol for health care providers to follow in cases of abuse and ensure health facilities are properly equipped to address emergency situations (i.e., administration of post-exposure prophylaxis, sexually transmitted infection testing kits, etc.)

### ■ National and community levels:

- Train service providers on gender-based violence and establish monitoring systems and regulations to prevent such abuse and punish perpetrators
- Strengthen linkages between national/legal services and community-based organizations and caregivers

### ■ Community level:

- Map available services and resources and make this information available to caregivers
- Build local capacity to prevent gender-based violence: sensitization and awareness for community groups to promote a critical reflection on gender norms and to educate on signs of abuse and appropriate steps to take

## Resources to learn more

Management Sciences for Health. 2010. Community-Based Support (CUBS). Developing a Program Framework, Approach, and Activities to Address the Vulnerability of Girls, Young Women, and Female-Headed Households within the Context of OVC Service Delivery and HIV Risk Reduction. Available at: [http://www.msh.org/sites/msh.org/files/Engendering\\_CUBS\\_Report\\_FINAL.pdf](http://www.msh.org/sites/msh.org/files/Engendering_CUBS_Report_FINAL.pdf). *This framework is based on the findings of a gender assessment of the Community-Based Support (CUBS) for Orphans and Vulnerable Children funded by PEPFAR in Nigeria. The resource provides activities and approaches to address the vulnerabilities of girls and young women at risk and female-headed households within the context of OVC services and HIV risk reduction.*

Cornell University Law School. October 2012. They are Destroying Our Futures: Sexual Violence Against Girls in Zambia's School. Available at: <http://www.lawschool.cornell.edu/womenandjustice/Conferences-and-Events/upload/Sexual-Violence-Against-Girls-in-Zambia-s-Schools.pdf>. *This report examines the issues surrounding sexual violence against girls in Zambian schools perpetrated by teachers and male classmates. The report includes findings from literature and interviews with school girls and key stakeholders providing insight into the drivers, consequences, nature and scope of sexual violence in schools in Zambia. It addresses the issues through an international human rights law context. It provides recommendations for government, education administrators, and law enforcement.*

Day K, Pierce-Weeks J. 2013. The Clinical Management of Children and Adolescents Who Have Experienced Sexual Violence: Technical Considerations for PEPFAR Programs. Arlington, VA: USAID's AIDS Support and Technical Assistance Resources, AIDSTAR-One, Task Order 1 Available at: [http://www.aidstarone.com/focus\\_areas/gender/resources/prc\\_technical\\_considerations](http://www.aidstarone.com/focus_areas/gender/resources/prc_technical_considerations). *This technical resource provides evidence-based considerations for medical providers to address and respond to the medical needs of child and adolescent victims of sexual abuse and a compendium of job aids for clinical use. It guides providers in both identifying cases of sexual abuse and in responding to identified cases. The resources focus on clinical post-rape care services, complete physical examinations for child and adolescent victims, conducting forensic evidence collection and ensuring proper follow up for additional physical, psychological, social and legal needs. Tools include checklists for nurses and doctors, explanations of normal and abnormal sexual behavior in children and physical symptoms to assess for in victims.*

Parkes J, Heslop J. 2011. Stop Violence Against Girls in School: A cross-country analysis of baseline research from Ghana, Kenya and Mozambique, University of London for ActionAid International. Available at: [http://www.ungei.org/resources/files/svags\\_-\\_a\\_cross\\_country\\_analysis\\_of\\_baseline\\_research\\_from\\_ghana\\_kenya\\_and\\_mozambique.pdf](http://www.ungei.org/resources/files/svags_-_a_cross_country_analysis_of_baseline_research_from_ghana_kenya_and_mozambique.pdf). *This report documents the findings of baseline studies carried out in Kenya, Ghana and Mozambique to identify themes and implications for policy, practice and research to counter violence against girls in schools.*

The US President's Emergency Plan for AIDS Relief (PEPFAR). July 2012. Guidance for Orphans and Vulnerable Children Programming. Available at: <http://www.pepfar.gov/documents/organization/195702.pdf>. *This guidance places orphans and vulnerable children services in the continuum of response to HIV at the country level. Designed to help PEPFAR country teams and implementing partners to design and implement programs adopting evidence-based best practices and cost-effective strategies, the document outlines general strategies and interventions for consideration.*