

A close-up photograph of a woman with dark hair, wearing a green t-shirt and a patterned shawl in shades of red, brown, and white. She is carrying a baby in a blue and white striped sling. The woman has a small gold nose ring and is looking directly at the camera with a neutral expression. The background is a blurred outdoor setting with green foliage.

# Women's Rights and Children's Rights

TOWARDS AN INTEGRATED APPROACH  
IN DEVELOPMENT COOPERATION

A co-edition of *Enfants du Monde* (EdM) and the Centre for Children's Rights Studies of the University of Geneva (UNIGE)  
With the support of the Swiss Agency for Development and Cooperation (SDC)



**UNIVERSITÉ  
DE GENÈVE**

CENTRE FOR CHILDREN'S  
RIGHTS STUDIES



Schweizerische Eidgenossenschaft  
Confédération suisse  
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**Enfants  
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“Governments that oppose human rights for women (...) are not likely to be strong advocates of human rights for children either.”

Jonathan Todres, 2004: 612



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# Introduction

**Carlo Santarelli, Enfants du Monde**

By adopting the 2030 Agenda for Sustainable Development, the international community has affirmed its political commitment to promoting a human rights-based approach to development. For this reason, and as part of the commemorations of the 30th anniversary of the Convention on the Rights of the Child (CRC) and the 40th anniversary of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), *Enfants du Monde* (EdM) organised, under the aegis of the *Association 30 Ans de Droits de l'Enfant* and in collaboration with the *Centre Interfacultaire en Droits de l'Enfant* of the University of Geneva (CIDE), a discussion on the articulation between children's rights and women's rights in the practices of development cooperation organisations in developing countries.

16 organisations (notably NGOs, but also universities and government ministries) responded to the call to co-construct discussions for development cooperation actors to better take into account women's rights during interventions in the field of children's rights, and vice versa. They met during a first session held on 26 June 2019 at the University of Geneva in order to establish the main conceptual elements around this theme, as well as to propose the first recommendations on the matter. A second brainstorming session was held as part of the conference "*Quel avenir pour les enfants et leurs droits?* (What is the future for children and their rights?). The event was organised by the *Association 30 Ans de Droits de l'Enfant* (30 Years of Children's Rights) – the major global event of the 30 years celebration of the CRC. Articles illustrating and exemplifying these discussions were written during 2020 and 2021, years heavily impacted by the COVID-19 pandemic.

This approach and willingness is based on the fact that social science research has shown that, very widely across the world, there are significant tensions between approaches to the protection and promotion of children's rights and those aimed at women's rights. One observation is that children's rights activists and scholars do not engage sufficiently with women's rights activists and scholars, and vice versa, yet this dialogue is essential for the promotion of social and economic justice for both groups in a given context, and more generally for a given society.

Indeed, although the lives of children and women are strongly intertwined, often through interdependent relationships, women's rights and children's rights are frequently two separate chapters in international law and policy, and in development programmes. This was the observation made during the first exchanges in 2019: international cooperation is also immersed in vertical and siloed programmatic logics, which limit the potential for synergies between these closely related fields.

Thus, not only do development programmes sometimes address the rights of children separately from those of women, but they also prioritise the rights of those they suppose weaker and in need of protection. This publication seeks to propose avenues of discussion that could allow for better consideration of the interrelationships and articulations between children's rights and women's rights within development programmes, which could easily lead to dynamics that would enhance the implementation of each of these two fields of law.

The contributions to this book are organised in two parts. The first part presents two articles that capture the tensions and synergies between women's rights and children's rights.

In their article "Children's Rights and Women's Rights: Convergence and Complementarity", Özlem Lakatos and Philip D. Jaffé, from the CIDE of the University of Geneva, interrogate some of the effects that the emergence of the field of children's rights, as symbolised by the CRC, has had on women's rights, as symbolised by the CEDAW. They address parts of recent history to highlight points of tension and convergence between children's rights and women's rights. They highlight the fact that these two fields are mutually reinforcing and even overlapping, and encourage a sustained dialogue between the CRC and CEDAW Committees. This natural convergence and complementarity of women's rights and children's rights would strengthen an inclusive approach to human rights, which in turn would strengthen both fields of law.

*Enfants du Monde's Susana Borda Carulla's article, "When the rights of the children prevail over the rights of their caretakers. A case study in the community homes of Bogotá, Colombia", combines a study of the legal corpus that governs the programme with an ethnographic study of its implementation. It exposes the continuing tensions between the Colombian government, which advocates for the predominance of children's rights over all other entitlements, and community mothers, whose labour rights are violated by the state, prompting them to sometimes act to the detriment of children's rights. By highlighting these tensions, she argues that in terms of social practice, if women's rights are not protected, the rights of the children they care for are likely not able to be protected either.*

The second part of the book presents examples of good practice in development cooperation, highlighting approaches where children's rights and women's rights are addressed in a joint and complementary manner. The authors reflect on the operationalisation of women's rights and children's rights in Turkey, Burkina Faso, India, Chad and more broadly internationally, in two distinct situations: 1) the promotion of the rights of girls, who are both women and children; 2) the promotion of the rights of women and children in the context of social reproduction practices.

In their article “Mother and Child Education Program (MOCEP) in Turkey and 14 countries”, Valerie Bichelmeier of Make Mothers Matter and Suna Hanöz-Penney of the Foundation for Mother and Child Education present a programme initiated in Turkey and replicated in 14 other countries around the world. Its aim is to provide quality education during the early childhood period, in order to mitigate the negative effects that insecure, stressful or violent environments can have on childrens’ development. The programme focuses on the child and their immediate environment, particularly the mother, rather than the child alone. The results are evident: programme participants experience less conflict and violence, greater harmony within their families, and greater empowerment of women.

“*The Pugsid Songo* (“Model Husband”)” strategy, implemented by *Enfants du Monde* in Burkina Faso in close collaboration with the Ministry of Health, is presented by Cecilia Capello, Nicole Curti Kanyoko, Mouna Al Amine and Carlo Santarelli. In villages where the health situation is characterised by high maternal and infant mortality rates, this strategy makes it possible to address both women’s and children’s (especially newborns’) right to health by involving all community actors, but especially men, who play a crucial role. Husbands are selected to serve as role models in their communities, supporting their wives during pregnancy and the perinatal period. This article demonstrates the value of an inclusive posture in addressing both fields of law in a logical and articulated way, and the benefits for both mothers and babies.

Two young women from the International Youth Council, an advisory body of *Terre des Hommes* Switzerland composed of 16 young people aged 18 to 25 from all over the world, testify in the article “Protection of Rights of Women and Children in India”. They report on violations of women’s and children’s rights in their community and share the actions they are taking to promote these rights within that community, in order to give them equal importance.

In a programme implemented by *Enfants du Monde* under a mandate from the Swiss Agency for Development and Cooperation in Chad, the onset of menstruation among girls was identified as a frequent cause of school dropout, constituting a major obstacle to the implementation of their right to education. In their article “Education Rights for the girls of Chad: The teaching of menstruation during puberty, from practical needs to strategic interests”, Mouna Al Amine and Susana Borda Carulla analyse a didactic document on the changes of the body during adolescence. The authors highlight the way in which each school subject is involved in reducing girls’s absenteeism, while contextualising the knowledge to be taught and integrating it into the official Chadian curriculum. The analysis also allows for the formulation of avenues for further development from a gender perspective and for the consideration of additional interventions to promote the right to education for girls.



Finally, Plan International has identified a legal gap in international law, that of the rights of girls. The last article in the book introduces the Girls' Rights Platform, a girls' rights advocacy tool developed by Plan International. The Platform offers several tools to strengthen the visibility of girls' rights: a human rights database and training tools for rights defenders. It is a call to the international community to create a specific status for girls in order to give them rights corresponding to their needs, while equipping them to realise these rights.

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The opinions expressed in this publication are those of the authors.  
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# PART I

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Tensions and synergies between  
women's rights and children's rights

# Children's Rights and Women's Rights: Convergence and Complementarity

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## INTRODUCTION

Within the conceptual field of human rights, certain principles are deeply rooted. Thus, the universal consensus is that, in order to respect and protect the dignity of human beings, these rights are inalienable, indivisible and interdependent, and apply to every person equally and without discrimination. At the same time, it is obvious that, on the one hand, certain categories of people do not currently feel that they are represented in the respect and implementation of their human rights in their daily lives and, on the other hand, that history is punctuated by sometimes extreme disharmonies in the exercise of the human rights of certain groups of people. In recent decades, there have been many attempts to redress these inequalities in order to realise the vision that Martin Luther King Jr. expressed with unparalleled poetic intensity: *"The arc of the moral universe is long, but it bends toward justice"*. In this chapter, we focus on women's rights and children's rights, two categories of people whose human rights advances are recent and dramatic, but also often achieved in parallel. From our perspective on children's rights, we will particularly question some of the effects that the emergence of the field of children's rights, symbolised by the UN Convention on the Rights of the Child have exercised on the rights of women. Without claiming to be exhaustive, we will selectively address parts of recent history and highlight points of tension and convergence between children's rights and women's rights.

## WOMEN AND CHILDREN: A COMMON HISTORY?

Throughout human history, the statutory starting point for women and children is much the same; both were survivors in the often oppressive, if not persecutory, orbit of men regardless of the social, clan or family organisation. The patriarchal primacy of families in most societies has led to women and children being closely associated, historically and traditionally, as groups without independent social legal status. Almost exclusively relegated to the private sphere until the industrial revolution and urbanisation, women and children were then integrated into the world of work and exploited in shockingly arduous labour... and, for women, their reproductive function was most important.

The low status of women and children has long persisted in most legal systems, with Goonesekere (1992) pointing out, for example, that in Roman, Anglo-American and Islamic law, women and children were placed under the control and protective power of a man, or that similar guardianship conditions for women and children have marked

legal systems on the Indian subcontinent, in Asia and in Africa. The same author describes that more favourable conditions for women in some societies (e.g., Sri Lanka, Kerala in India) were erased by European, mainly Dutch and British, colonisation.

Both women and children have long been considered as the property of men, first the father and later, for girls and women, the husband. Traces, not particularly ancient, in societies that have adopted the *common law* are to be found in the ancient doctrine of *coverture*, according to which the legal existence of the wife is incorporated and integrated into that of her husband. But the indisputable expression of the possession of women and children by men is the violence that has been inflicted on them with impunity and which, to a large extent, continues.

The case of Sweden, in many ways a country at the forefront of women's rights and children's rights, provides a striking illustration. Hindberg (2001: 10-11) traced the socio-legal evolution, recalling that in the old days husbands and fathers could freely beat wives and children. Women were almost imperceptibly better off than children, with a law dating from 1734 stating that beating a child to death was less serious than the same action against a woman. Domestic violence against women, including marital and private violence, was prohibited and the legal framework progressively tightened throughout the 20th century and in 1979, Sweden became the first country in the world to adopt an explicit legal ban on all corporal punishment of children. Despite this, the prevalence of domestic violence and, beyond that, all forms of gender violence remain high, so much so that the situation is referred to as emblematic of a 'Nordic paradox' (Gracia, Martin-Fernández, Lila, Merlo, & Ivert, 2019).

This is by no means the only paradox. Indeed, in a male-dominated world, if there is one characteristic that is almost universally attributed to women and children, it is their 'vulnerability'. However, codes of conduct to ensure their protection have been late in coming. For example, all the Victorian ambiguity about women and children is contained in the *Birkenhead Drill*, the gallant code of conduct that required women and children to be the first to be rescued in the event of naval disaster. This code is not binding and has not been incorporated into maritime law, and a retrospective study of many shipwrecks by Elinder and Erixson (2012) eloquently indicates that survival rates remain much higher for men than for women and children.

*In a male-dominated world, if there is one characteristic that is almost universally attributed to women and children, it is their 'vulnerability'.*

In the same vein, the notion that women and children have priority for codified protection in the context of armed conflict is belied by humanitarian law, which as late as 1949 generated the *Geneva Convention relative to the Protection of Civilian Persons in Time of War*, a preponderant proportion of whom are women and children. However, it should be



noted that the text restrictively provides that only children under fifteen years of age and women who are pregnant or whose child is under seven years of age explicitly benefit from all protections. Indeed, in practice, alternative explanations (e.g., Carpenter, 2016) argue that, in situations of armed conflict, women and children, but especially girls, are seen as property to be appropriated by combatants recalling the episode of the abduction of the Sabine women in Roman times. Even recent and tragic attempts at ethnic cleansing reserve the genocidal aspect for men; the use of mass rape of women to annex the reproductive function and remove women from their group of origin through the imposition of a gestation marked by the genetic heritage of the aggressor.

While our aim is not to proliferate examples of the subjugation of women and children in past and recent social, family and relationship structures, we would like to emphasize the history, extent and severity of human rights violations against them in common and demonstrate the obstacle that needed to be overcome in order to claim, have recognised, codify and progress towards the respect of the human rights inherent to each individual.

## ACTIVISM AND INTERNATIONAL INSTRUMENTS

The recent history of women's rights and children's rights has seen distinct legal developments and significant variations between countries. Progress has been spectacular overall, but far from linear and constant, and the long march towards the recognition and respect of the rights of all categories of people, including men, is still urgently needed. The adoption by the United Nations General Assembly of two fundamental conventions in the supranational legal architecture of human rights, the *Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)* in 1979 and, barely ten years later, the *Convention on the Rights of the Child (CRC)* in 1989, is by no means an end in itself, but a crucial step in the codified formulation of the rights of these groups of people in order to curb the persistent violations against them. These two conventions are the result of an activism and a struggle that history will remember as being essentially female, with some notable male support. In other words, CEDAW and the CRC came into being thanks to many exceptional heroines and a few heroes. But there is also an obvious commonality: the precursor movements for women's rights and children's rights were clearly an adult affair and children's participation was only peripherally on the agenda.

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In its presentation of Florence Rochefort's book, *Histoire mondiale des féminismes*<sup>1</sup>, Avdela (2019: 139) recalls that progressive movements were intertwined, marked by "major trends and important figures, women's gains and losses according to socio-political circumstances, references to the Western world and other regions of the world, and so on, thus taking into account resistances and oppositions, steps forward and backward, contradictions and missteps". Nevertheless, we recognise that the distant foundations of the CEDAW and the CRC are born out of at least three main converging movements: a charitable and protective concern for women and children, a pacifist and humanitarian impulse that will lead to the codification of children's and women's human rights in supranational legal instruments, all against the backdrop of what is now referred to as the first wave of feminist activism. The latter, the long march of women to vote on an equal footing with men, an important dimension of which was well documented and popularised by the British *suffragette* movement from the late 19th century onwards, only reached its goal in Britain in 1928 after the upheavals of the First World War.<sup>2</sup>

In addition to this early political struggle, many bourgeois and noble women were also involved in combating the deplorable treatment of women and children during the intense industrialisation of Europe. Various charities were formed to combat prostitution and the abuse of children and women, including, among many others, the *Society for the Rescue of Young Women and Children* in 1853<sup>3</sup> or the *Society for the Protection of Women and Children*<sup>4</sup>. From this concern for protection, a few decades later, at the beginning of the 20th century, there emerged the feminist figures who created the professional field of social work and campaigned internationally for peace and women's rights. Among the well-known representatives are often cited Jane Addams, who founded the *Women's International League for Peace and Freedom*, or Sophonisba<sup>5</sup> Breckinridge of the *Women's Peace Party*, who was particularly active in movements in favour of deprived children (Kosher, Ben-Arieh, Hendelsman, 2016).

But history particularly remembers the British Eglantyne Jebb who campaigned for women's rights, founded the *Save the Children Fund* in 1919 and, based on her charitable experience and observation of the devastation of armed conflict, transformed her empathy for the plight of children in the defeated countries of the First World War, the innocent victims of an unprecedented humanitarian tragedy, into a pioneering vision for the field of children's rights. Nicknamed the "White Flame", passionate, convincing and obstinate, Eglantyne Jebb, who lived in Geneva at the end of the Great War, drafted

1 Florence Rochefort (2018). *Histoire mondiale des f.minismes*. Paris : PUF, coll. Que sais-je ? 128 pages

2 In Switzerland, where both authors of this chapter live and work, women's right to vote dates only from 1971. And in 1945 for neighbouring France, the country of "human rights".

3 [www.ucl.ac.uk/bloomsbury-project/institutions/society\\_rescue\\_women\\_children.htm](http://www.ucl.ac.uk/bloomsbury-project/institutions/society_rescue_women_children.htm)

4 Source British Library <https://blogs.bl.uk/untoldlives/2018/11/a-case-for-the-society-for-the-protection-of-women-and-children-.html>.

5 Sophonisba, a name that is unusual to say the least and, in a way, harmoniously in tune with Breckinridge's powerful convictions, is inherited from a Carthaginian heroine who chose to commit suicide rather than suffer the humiliation of the Roman conquerors.

the first Declaration of the Rights of the Child, surrounded herself with male notables from the International Committee of the Red Cross, and succeeded in having this text adopted by the League of Nations on 26 September 1924. The Declaration of the Rights of the Child, known as the Declaration of Geneva, was arguably the first international treaty on the rights of the child and generated considerable momentum until European tensions led to the conflagration of the Second World War.<sup>6</sup>

Women's rights would have to wait until the end of the Second World War for this cause to be integrated into the international agenda, notably following Eleanor Roosevelt's appeal (1946) during the inaugural and constituent sessions of the United Nations: *"To this end, we call on the Governments of the world to encourage women everywhere to take a more active part in national and international affairs, and on women who are conscious of their opportunities to come forward and share in the work of peace and reconstruction as they did in war and resistance"*.

In terms of international law, advances in women's rights and children's rights will follow broadly similar paths but staggered in time. They will be the product of the step-by-step work of new UN institutions, blending multilateral efforts, confrontations and inter-state collaborations that have resulted in the modern supranational human rights architecture of the Office of the High Commissioner for Human Rights (OHCHR), with the pressure of social realism and the relentless, forward-looking work of a multitude of non-governmental organisations.<sup>7</sup> The key steps are convergent:

- the adoption by the UN General Assembly in 1959 of a Declaration on the Rights of the Child and in 1967 of a Declaration on the Elimination of Discrimination against Women,
- the celebration in 1975 of International Women's Year and in 1979 of International Children's Year, and
- finally, the promulgation of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) by the United Nations General Assembly in 1979 and the Convention on the Rights of the Child (CRC) in 1989. These two treaties are markers of notable progress because of their binding scope for States Parties and the high rates of ratification, i.e., out of 197 countries, 114 for the CEDAW and 196 for the CRC.

<sup>6</sup> For the sake of completeness, it is worth noting the immense work and influence of the Polish doctor, educator and author Janusz Korczak (1878-1942, real name Henryk Goldszmit) who, to this day, rivals Eglantyne Jebb in terms of parenting the modern field of children's rights.

<sup>7</sup> The historical highlights are very aptly traced by UN Women (2019) for women's rights and by Cantwell (2019) for children's rights.

## BEYOND THE COMMON EXPERIENCE

Women and children have shared – and still share – a common experience of the oppression by the patriarchy and paternalistic attitudes. This is compounded by the traditional dichotomy between the private and public spheres in law, which has reinforced situations of vulnerability and discrimination for women and children (Chanock, 2000; Charlesworth, Chinkin and Wright, 1991, cited in Todres, 2016). On this point, Bond (quoted in de Silva de Alwis, 2009: 304) argues that it was the feminist critique of human rights that allowed for the gradual erosion of this dichotomy between the two spheres and thus allowed the state to protect women and children in the private sphere. De Silvia de Alwis (2009) points out that the CEDAW is a revolution in this respect, as it condemns traditional and cultural practices against girls and women which, for the most part, are committed in private spaces.

*Women and children have shared – and still share – a common experience of the oppression by the patriarchy and paternalistic attitudes.*

Thus, while it is true that historically, women's rights and children's rights movements share the desire to challenge the patriarchal organisation of the family and even of society, one may wonder whether, in addition to these similarities in the sources of oppression, there are points of convergence in the effective implementation of their reciprocal rights. In this respect, without excluding the importance of national law, we will focus on the two UN conventions that have marked a fundamental turning point on the international scene, both in the field of women's rights and in the field of children's rights.

## CONVENTIONS OF THE SAME ESSENCE, BASED ON CATEGORY EXCLUSIVITY

CEDAW and the CRC are binding treaties based on the human rights principles and standards of the Universal Declaration of Human Rights (1948). Like the other eight UN human rights treaties, these conventions have created committees to monitor the implementation of their provisions by States Parties. They are also based on common values such as non-discrimination, equality, the inherent dignity of each person and the rights to self-determination, peace and security (Goonesejere and de Silva de Alwis, 2005).

However, the two conventions differ. CEDAW aims to eliminate discrimination against women, thus creating an enabling environment for women and girls. The CRC addresses the unique needs of children, recognising their evolving capacities as subjects of rights (not as objects of protection or benefits). Thus, according to an initial analysis, both CEDAW and the CRC are concerned with the specific category of people they relate to, almost to the exclusion of the other, whereas, throughout history, the vicissitudes experienced by women and children were inseparable. A reading of the CRC, which

quantitatively identifies certain terms and language, shows the explicit absence of a gender perspective. This is precisely the starting point of our analysis before examining the spirit of the convergences between the two conventions and some of the tensions they create.

The Convention on the Rights of the Child has a lot to say about children. Throughout its 54 articles, the word *child* is cited 173 times, while the words *girl* and *boy* do not appear once, as if the generic child took precedence over gender reality. The “neutrality” of the CRC thus amounts to denying the realities of children, which differ profoundly according to their gender, and which have a definite impact on the application and respect of their rights (notably to education and health). For example, in 2018, girls were still the main victims of inequalities in access to education.<sup>8</sup>

*A reading of the CRC, which quantitatively identifies certain terms and language, shows the explicit absence of a gender perspective.*

What about the word *woman* in the CRC? Only once mentioned and only in the Preamble, the non-binding section of a convention, with a reminder of the importance of the Declaration on the Protection of Women and Children in Emergency and Armed Conflict. Finally, for completeness, the word *father* is mentioned 4 times and the word *mother* 5 times. This difference captures a significant gender inequality. The only time the word *mother* is mentioned without being in the phrase *father and mother* is in Art. 24 which covers the right of the child to enjoy the highest attainable standard of health. In Art. 24 (2) under small d) it is stated: “*States Parties shall endeavour to take appropriate measures to ensure appropriate prenatal and post-natal care for mothers*”. This formulation unquestionably introduces the notion of birth as the particular link between mother and motherhood. However, throughout the CRC, distinctions between *fathers* and *mothers* are blurred in favour of *parents*. Art. 5 clearly states that: “*States Parties shall respect the responsibilities, rights and duties of parents [...] to provide, in a manner consistent with the evolving capacities of the child, appropriate direction and guidance in the exercise by the child of the rights recognised in the present Convention*”.

<sup>8</sup> <https://www.plan-international.fr/info/actualites/news/2016-09-23-causes-et-consequences-des-inegalites-des-filles-face-leducation>.



## CRC AND CEDAW: FROM MUTUAL REINFORCEMENT TO OVERLAP

Indirectly, women's rights and children's rights are mutually reinforcing, as the implementation of these two conventions encourages equality from an early age, and thus prevents future inequalities (in the workplace, at home). Furthermore, since it remains true that in most of the world it is still women who are primarily responsible for raising children, if women's rights are respected, the situation of children can only be improved (Todres, 2003: 2016). Furthermore, children's rights can help to promote women's rights, since if these are fully realised, they provide a foundation that can enable young women to realise their rights (Cohen, 1997). In this sense, UNICEF and UNFPA (2011) recognise in their working papers that CEDAW and CRC are complementary and mutually reinforcing, as reading both documents allows for a gendered approach to children's rights and a smooth transition from girlhood to womanhood. Finally, CEDAW aims to protect women and girls from discrimination and therefore operates directly on these two issues. Thus, the overlap of women's rights and children's rights is illustrated with the rights of girls and their intersectional position. In sum, *“the two sets of rights are interrelated both because they implicate the same population (arguably at different stages in the life continuum) and because of the connections between women and children in many families, communities, and nations”* (Todres, 2016: 22).

*If women's rights are respected, the situation of children can only be improved. Furthermore, children's rights can help to promote women's rights.*

Thus, despite the categorical approach that emerges on the surface, these two conventions are mutually reinforcing in the context of a defence and promotion of human rights that fits into a holistic architecture of all human rights treaties and their monitoring bodies.

## “WOMEN AND CHILDREN”: A SYMBIOTIC RELATIONSHIP

The relationship between women's rights and children's rights could be summarised as 'symbiotic' (Todres, 2003). This term, which comes from the natural sciences, has three dimensions: mutualism, commensalism and parasitism. Mutualism means that both groups benefit from the situation. Commensalism, where one group benefits from the relationship but does not harm or favour the other. In the third dimension, parasitism, which has not been explored by the author himself, one group benefits at the expense of the other. Thus, while it is commonly accepted on the international scene that this relationship is complementary, and thus has dimensions of mutualism and commensalism, we would like to address here the third dimension of a symbiotic relationship: that of “parasitism”. This is a dimension that few researchers have ventured to address. The debates around this dimension emanate mostly from the feminist women's rights movements and researchers, and could be summarised in two dominant paradigms orienting the discourses on the relationship the relationship between women's rights and children's rights, what Erica Burman (2008) calls “*Womenandchildren*” and “*Women vs. children*”.

## “WOMENANDCHILDREN” OR THE FEAR OF ESSENTIALISM

This paradigm paternalistically positions children and women as a single entity (Sylvester 1998 cited in Burman, 2008; De Graeve, 2015). This single entity thus carries the assumption that these two groups are on the one hand “vulnerable” and on the other hand have similar characteristics and interests. This last point is of concern as the causes of vulnerability for each may be different, as may be the respective responses to it. It is therefore preferable to recognise vulnerability “to” (a situation, a phenomenon, a person, etc.) and not to assume an intrinsic vulnerability that would be unfavourable to the empowerment and agency of these two respective groups. In this sense, Carpentier (2016) details how women and children, perceived as the same group in situations of armed conflict, are wrongly considered to always be victims and innocent. The author denounces a gendered and Manichean view of the world, in which some are passive victims and others are aggressors. Moreover, this simplistic view does a disservice to the victims in that it takes away some of their autonomy.

*It is preferable to recognise vulnerability “to” and not to assume an intrinsic vulnerability that would be unfavourable to the empowerment and agency.*

Thus, this categorisation into the one group contributes to the essentialisation of women and children, and to the infantilisation of women (Fröden and Quennerstedt, 2020). According to Burman (2008) this essentialises the role and position of women as mothers, while fixing the position of children as incomplete, immature and deficient. The fear of essentialism is certainly the greatest fear of feminist women’s rights movements and researchers with regard to children. In this sense, it should be recalled that the CEDAW took shape in a context where radical feminist theories produced analyses in which the institution of the family is described as oppressive and primarily responsible for the denial of women’s rights. So, there is still some mistrust in linking women’s rights to children’s rights. A fear is that this could weaken women’s rights by relegating them to the role of mother, *caretaker* of children and housewife (Todres, 2003: 604).

For feminist researchers, such as Oakley (2002), the child is seen more as an “object” that participates in the construction of gender rather than as a gendered being. Indeed, the fields of education, care and healthcare of children tend to consider children as objects of *care*. Objects that participate in the construction of gender insofar as they are usually considered by some to be more the responsibility of mothers than fathers, citing a “feminine” or even “biological” nature as justification. This inequality in unpaid *care* work is an issue central to many debates on gender relations. The question of children (the care of children) thus turns out to be at the centre of feminist struggles, since it is ultimately a question of division of labour.

In addition to the debate on the division of labour within the family, we believe that the *care* relationship between parents and children certainly needs to be rethought. In this

sense, Cockburn (2005) indicates that parent-child care relationships as currently conceived are associated with a certain paternalism and that the child is not only a recipient of care. It is also necessary to recognise children as active agents in this relationship but also to recognise the care they take of themselves (Qvortrup, 1985; Cockbrun, 2005).

*The care relationship between parents and children certainly needs to be rethought.*

However, according to Burman (2008: 180) this model does have its advantages: “it does somehow assert the indivisibility of the relationship between women and children, the interconnectedness of their conditions and positions and, beyond this, the impossibility of separating an intervention for one from that for the other”.

### “WOMEN VS. CHILDREN”

This second paradigm tends to see the positions and interests of women and children as diametrically opposed. This opposition can lead to situations where their rights compete. The examples that have become “mythical” and illustrate this paradigm at its peak are the voluntary interruption of pregnancy (abortion), which opens up the debate between “the right to life vs. the right to abortion”, and the tension between “the right to give birth anonymously vs. the right to know one’s origins”, as illustrated by the controversial practices of childbirth under X in France and the use of baby boxes in certain cantons in Switzerland.

UNICEF and UNFPA (2011: 171-172) broadly identify two points of tension: women’s personal development and the best interests of the child; and child protection and women’s *disempowerment*. These two areas of tension are linked in particular to the labour market. The latter has traditionally limited access to women because of concerns about the welfare of children, but this has also resulted in a loss of autonomy and *empowerment* for women (Taefi, 2009, cited in Froden and Quennesrsted, 2020). Burman (2008: 181) tells us that women are not oppressed by their children but by the institution of motherhood, i.e., the way their roles as mothers are configured in our societies.

*Women are not oppressed by their children but by the institution of motherhood.*

## THE “BEST INTERESTS OF THE CHILD” AND WOMEN’S RIGHTS: A SOURCE OF TENSION?

“In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration” (Convention on the rights of the Child, Art. 3 section 1).

“Best interests” is a complex concept with general theoretical definitions, but with specific meanings *in concreto*, i.e., in contextual situations involving the child as an individual or children as a social group. First, it should be noted that the French translation of *best interests* can be confusing insofar as, in French, the formula implies that there is a single interest to be taken into account, whereas in English there are several. Furthermore, the adjective “superior” suggests a hierarchy between the interests of the child and the rights of others with which they may compete. However, for Eudes (2013: 6), this actually means that “any decision with a potential impact on a child must be assessed in the light of his or her interests, without this interest systematically prevailing over all others, whether those of his or her parents, in particular his or her mother, or those of society as a whole”. Thus, although the CRC enshrines the idea of the primacy of the rights of the child, and the idea that parents are seen to be “in the service of the child”, the best interests of the child does not mean that the interests of the child must be prioritised in all situations.

*The best interests of the child does not mean that the interests of the child must be prioritised in all situations.*

In this sense, the Committee on the Rights of the Child’s General Comment No. 14 (2013), in its paragraph 46, provides clarification on this notion. It states that “*the best interests of the child is a right, a principle and a procedural rule based on an assessment of all the elements constituting the interests of a child or children in a particular situation*” and that a process must be envisaged to assess and determine it. As Eudes (2003) points out, the best interests of the child is in fact a “*methodological obligation on the part of the competent authorities*”.<sup>9</sup>

<sup>9</sup> It should be noted that the notion of “best interests” exists in CEDAW, which ostensibly sets a higher standard than the CRC, since “the best interests of the child” is no longer “a primary consideration” (Art. 3 CRC), but “the interests of the child are the paramount consideration in all cases” (Art. 5, CEDAW). It should be noted, however, that caution should be exercised given the linguistic variations: in the CEDAW, the interest is not characterised as “superior” and it is the children as a class that are referred to and not the child as such.

## CONCLUSION

Despite the advances in human rights, a huge gap remains between what is theoretically guaranteed and what women and children experience around the world on a daily basis. These two groups remain most often disadvantaged and in situations of poverty and vulnerability that are more substantial than those of men.

In awareness of these challenges affecting women and children, the CRC and CEDAW Committees collaborated in the early 2000s on the co-authorship of a document that came to fruition in 2014: *The general Recommendation/ Joint General Comment no 31 of the Committee on the Elimination of Discrimination against Women and no 18 of the Committee on the Rights of the Child on harmful practices affecting girls.*

We therefore take the position that we would like to see more joint work between these two committees to promote an inclusive approach to human rights that emphasises the natural convergence and complementarity of women's rights and children's rights. And on the way to the recognition, respect, promotion and defence of these rights, we propose an alliance and participation of human rights defenders from all sides.

*We therefore take the position that we would like to see more joint work between these two committees to promote an inclusive approach to human rights that emphasises the natural convergence and complementarity of women's rights and children's rights.*



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# When the rights of the children prevail over the rights of their caretakers

*A case study in the community homes of Bogotá, Colombia<sup>1</sup>*

**Susana Borda Carulla, Enfants du Monde**

## **INTRODUCTION**

Children's and women's lives are deeply entwined and interdependent. As Rosen and Newberry (2018:121) suggest in this volume: "*Women and children are linked through species-being, a labour relation that anchors socially necessary labour*". Women take the greatest responsibility for children's care both in formal and informal settings, and in many societies bearing and raising children is seen as an essential component of womanhood (Twamley et al, 2017).

Despite their interdependency, children's and women's issues are two dissociated chapters of international law and policy, particularly since the adoption of the Convention on the Rights of the Child by the UN General Assembly in 1989. Not only are children's and women's issues addressed separately, but a clear hierarchy has been established by international organisations through promoting the idea that protecting children's rights is a lever for the social and thus the economic development of a nation (Borda Carulla, 2015). As UNICEF stated in its 1995 report on the *State of the World's Children*: "*It is UNICEF's belief that the time has now come to put the needs and the rights of children at the very centre of development strategy. (...) The world will not solve its major problems until it learns to do a better job of protecting and investing in the physical, mental and emotional development of its children*". The idea of prioritising children's issues is an 'active concept' (Ferguson, 1990) in the sense that it is a true motor of social change in contemporary societies.

*Despite their interdependency, children's and women's issues are two dissociated chapters of international law and policy.*

What are the social consequences, for children and for women, of putting children first?

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In this chapter, I will combine a study of the legal corpus which regulates the Colombian government's child day care programme (community homes, operated by female care-takers known as community mothers) with an ethnographic study of its implementation in an under-privileged neighbourhood on the southern periphery of Bogotá. I will expose the enduring tensions between the Colombian government, which advocates the dominance of children's rights over the rights of others, and the community mothers, whose labour rights are systematically violated by the state, prompting them to take action. Shedding light on how these tensions came to be will lead me to argue that if women's rights are not protected, there is a strong chance that the rights of the children they care for will not be protected either.

I will first discuss the history of the community homes programme: the legal situation and the ideological stance of the two social actors involved in the dispute (the Colombian state and the community mothers). I will then go on to analyse scenarios from daily life in the community homes, where community mothers break programme regulations. This will allow me to discuss the negative consequences of dissociating, in public policy terms, the rights of children from those of women.

### STATE POLICY: "CHILDREN FIRST"

The community homes are social child day care centres co-managed by the Colombian state and communities. They have been in operation since the 1980s in vulnerable neighbourhoods of large Colombian cities. Under this scheme, to become a community mother, a woman can offer to provide day care services in her own home, to approximately 15 children aged from birth to six.

The state provides resources to support the operation costs of the community homes, which are managed by associations comprising parents of the children and the community mothers from

*The community homes are social child day care centres co-managed by the Colombian state and communities.*

around twenty community homes. Programme implementation is the responsibility of the ICBF (*Instituto Colombiano de Bienestar Familiar* – Colombian Institute for the Wellbeing of Families), the public body responsible for child protection.

Since its inception in 1986, this child day care programme has grown exponentially and remained, until recently, the Colombian state's main child protection initiative. González and Durán (2012) estimate that in 2011, the programme involved 77,377 community mothers caring for 1,219,098 children, aged from birth to six, in 70,825 community homes based within the country's most vulnerable populations, both in urban and densely populated rural zones. According to the same authors, in 2011 the programme covered 13 per cent of the total Colombian population aged from birth to six. In the context of Latin America, this is exceptional coverage for a public child day care programme.

## **Responding to a national crisis**

Until 1979, the concept of child protection in Colombian legislation covered only judiciary protection and nutritional care (Malaver and Serrano, 1996: 27-49). It was the state's obligation to ensure that each Colombian child had a recognised father, even if he/she was born outside of marriage, and to ensure that all children received sufficient nutrition. In 1979, the notion of child protection was redefined within Colombian domestic law (Law 7 of 1979) as 'integral protection': this included the right to a name and a nationality, education, nutrition, special care for disabled children, as well as the right to medical assistance, culture, leisure, family and a home. In the same year, the provision of pre-school education and nutrition for all children also became an obligation for the state.

Enforcing the new child protection laws proved particularly challenging as Colombia was going through a profound social crisis. Between 1970 and 1980, the annual population growth rate was around 3 per cent. Internal migration rapidly transformed a rural country into an urban one: in only two generations, the urban population grew from 40 per cent to 74 per cent of the country's total (Palacios, 2003). As cities grew, the gap between the poor and the rich became more pronounced, leading to the development of segregated, concentrated zones of poverty, uncontrolled by the state. In this context, enforcing the new child protection laws also meant expanding provision to these new, rapidly growing and often very poor urban populations.

The community homes programme was born in response to this critical situation. During the 1970s, in the poor neighbourhoods of the large Colombian cities where the state was absent, there existed a multiplicity of autonomous community child day care initiatives. UNICEF showed interest in them and in 1977 began supporting the Colombian state, technically and financially, to identify, analyse and support the individual initiatives. The study produced positive results, leading to recognition of the use of autonomous community child day care initiatives as a model of intervention (Benítez-Tobón, 1995).

The social crisis of the 1980s went hand in hand with a profound political crisis in Colombia. After 20 years of generalised political violence (1945-65), the country found itself in the midst of an internal armed conflict involving left-wing guerrillas, right-wing paramilitaries and the military. Drug trafficking was at its peak, and the first extradition agreements signed between the Colombian government and the United States provoked a number of terrorist attacks in public spaces. The legitimacy of the state was called into question by a large part of the Colombian population (Palacios, 2003).

In 1985, at the very peak of the political crisis, President Virgilio Barco from the Liberal Party was elected. Social policy as a means of pursuing peace and reconciliation occupied a central place in his political agenda, with community homes playing a key role in the strategy. By 1988, only two years after the pilot programme was launched,

the government had created 100,000 community homes, mainly in the poorest parts of the country, to accommodate 1.5 million children aged from two to six. After only five years of operation, the programme covered 83 per cent of Colombian children living in poverty (Castillo-Cardona et al., 1993). For the World Bank and the Inter American Development Bank, the community homes were a 'model of social development' at this time (Presidencia de la República de Columbia, 1990: 94).

*For the World Bank and the Inter American Development Bank, the community homes were a 'model of social development' at this time.*

### **Child protection as the key to national integration**

In testimony published in 1995, Jaime Benítez Tobón, one of the main ideologists behind the programme and a key figure in Barco's government, describes the place of the community homes within Barco's political agenda as follows:

*"One of the keys towards the national integration we longed for was the child. Children would guide the general interest and would be the centre, the articulation of actions, the supra-value that would assemble citizens, providing them with common interests and objectives. Children would trigger the discovery of values of solidarity that would arise around them: friendship, neighbourly relations, work, joint effort, the interest in the common good. (...) In that manner, the State would act directly in favour of its citizens, (...) starting from the child; improving the life conditions of Colombian children would help to improve the Colombian State; by acting on the children, we would achieve the well-being of families and, at the same time, family integration; and family integration would necessarily provoke national integration, which would necessarily result in the well-being of the State and the reality of the Nation."*

(Benítez-Tobón, 1995: 97-99)

For the Barco government, child protection was the starting point, the rationale and the motor of a national integration movement. Barco's political desire was to articulate around child protection several processes: community-building within groups of forced migrants, who often had no shared cultural heritage; fruitful dialogue between the state and civil society that would progressively repair the legitimacy of the state; child protection education for the poorest populations; and modernisation of public institutions. In a society devastated by structural violence affecting family cohesion and the legitimacy of public institutions, child protection would be a vehicle for constructing a new national identity. Child protection was erected as a pillar of moral value, which could be shared by all across social and political divides.

*Child protection was erected as a pillar of moral value, which could be shared by all across social and political divides.*



## The birth of the predominance principle

Interestingly, a few years later, “children first” transitioned from a political ideal to a juridical principle and was enshrined in the Constitution. In 1991, following the surrender of arms by certain guerrilla groups followed by their reintegration into civil life, a plebiscite called for the rewriting of the Colombian political constitution. Jaime Benítez Tobón was elected as a member of the Constitutional Assembly. He was the author of Article 44 of the 1991 Constitution, which states, among other things, that “children’s rights” prevail over the rights of others’. This idea is often referred to as the “predominance principle”.

*Article 44 of the 1991 Constitution, which states, among other things, that “children’s rights” prevail over the rights of others’. This idea is often referred to as the “predominance principle”.*

Juridical principles are not only basic rights but also rules of procedure and hermeneutical statements (Quinche-Ramírez, 2010). The “predominance principle” thus has a particularly powerful juridical status: it is 1) a specific norm that contains obligations; 2) a general norm, applicable in many cases and in all domains of law; and 3) a norm that helps juridical operators take decisions in extreme cases. Through the drafting of the “predominance principle”, Benítez Tobón transformed the ideological basis of the community homes, child protection as a moral super-value, into the cardinal rule of the entire Colombian child protection system.

As previously mentioned, the idea of the predominance of the rights of children over the rights of others is not uncommon in international children’s rights advocacy. Nevertheless, from a human rights perspective, it is deeply problematic because it runs counter to human rights ideals. As Nigel Cantwell (2011) points out, children’s rights are part of the human rights system, within which all rights are universal, interdependent and deeply linked to each other. States are thus expected to protect and promote all human rights and fundamental liberties on an equal basis.

*From a human rights perspective, it is deeply problematic.*

## THE COMMUNITY MOTHERS' ONGOING STRUGGLE FOR THEIR LABOUR RIGHTS

As Linda Gordon points out (2008: 31), “The child-centred imperative has sometimes pitted children’s “interests” against those of parents, especially mothers”. This was certainly the case in Colombia: I will now argue that the Colombian predominance principle has had extremely negative effects on the community mothers’ well-being: it has legitimised an open violation of their labour rights.

### The legal situation

An exceptional administrative contract, the “contribution contract” (*contrato de aportes*), links the community mothers to the ICBF. The contribution contract was created in 1979 specifically to ensure the operation of community homes: the law stipulates that the contract cannot be established and enforced by any other Colombian public institution. Only the ICBF, because of the ‘special nature of its service’ – i.e. child protection – can enact this type of contract (Law 7 of 1979 and related Decree 2388 of 1979, Article 127).

The contribution contract stipulates that the ICBF should provide each association of community homes with the resources necessary for their operation. The community mothers themselves are defined in the contract as volunteers and, as such, are not employed by the state or the association. Through their association, the community mothers receive financial aid to support the operation of their community homes; a monthly ‘grant’ (less than the national minimum wage) to cover daily food provisions and some educational material for the children, plus funds to cover the public service expenses incurred by the community home. The community mothers may also benefit from financial contributions from the parents of the children they care for (up to 37.5 per cent of the minimum wage), of which 34 per cent must be invested in activities for the children. However, there is no obligation for parents to pay this contribution and a child cannot be removed from the community home if the parents do not pay. The community mothers thus face permanent financial insecurity and, despite recent legal changes (discussed below), they do not benefit from basic labour rights (e.g. social security or a retirement pension).

*The community mothers thus face permanent financial insecurity and they do not benefit from basic labour rights.*

### The social movements

As a social group, the community mothers soon realised that the contribution contract was not to their benefit. In 1988, only two years after the inauguration of the community homes, they began to take action, seeking recognition of their labour rights.

AMCOLOMBIA, the Colombian Association of Community Mothers and Fathers for a Better Colombia, was established in 1991. Created under the initiative of a group of community mothers from Bogotá who called upon their colleagues from all over the country to unite in the face of their shared challenges, AMCOLOMBIA has two missions: to defend the collective interests of the community mothers and demand protection of their rights by the Colombian State; and to influence public policy concerning childhood and families. Many NGOs focused on women's rights advocacy also support the cause of the community mothers. Currently, AMCOLOMBIA encompasses 20 municipal and regional associations of community mothers.

During the 1990s, other community mothers' organisations were created across the country, operating at the local, regional and national levels. Among the most powerful are SINTRACIHOBÍ (National Syndicate of Workers for the Protection of Childhood in the Community Homes), ADDHIP (Association for the Defence of the Rights of the Sons of the People), and USTRABIN (Union of Workers of the Community Homes). In the last decade of the twentieth century, these groups regularly organised demonstrations, public assemblies and occupations of public space, and held negotiations with the ICBF. All of these organisations fought for the same causes: 1) the effective inclusion of the community mothers and of their nuclear families in the national social security system; 2) the right for community mothers to have pensions; 3) community mothers' access to professional training in early childhood care; 4) designation of the status of public servant, and not volunteer, for community mothers; and 5) a minimum wage for those working as community mothers.

### **The judicial quagmire**

During the 1990s, the community mothers brought their case to the Constitutional Court three times<sup>2</sup>. Each time, the court ruled on an Action of Tutela<sup>3</sup> (Acción de Tutela) raised by a community mother on labour rights grounds, following the shutdown of her community home for reasons she deemed unfair. Each time, the court concluded that there was an absence of any labour relationship between the community mother and the state, or between the community mother and their association. For the Court, there was no legal basis on which to rule in favour of the community mother.

That being said, the three judgements of the Constitutional Court during the 1990s created strong disagreement among the Supreme Court judges. In 1998, three judges published their objections to the court's original judgement, coming out on the side of the community mothers. They argued that the court had only conducted a formal analysis

2 Judgment T-14-92 of 1992; Judgment T-269 of 1995; and Judgment SU-224 of 1998.

3 The Tutela Action is a mechanism established by Article 86 of the Colombian Constitution whose purpose is to protect the fundamental constitutional rights of individuals when they are threatened by the action or omission of a public authority and when there is no other means available to the victim to assert them. The court is obligated to deal with a Tutela case within ten days of its filing, and this action takes priority over any other legal action.

of the situation and omitted to take into account a number of social realities: 1) the existence of a relationship of subordination and dependence of the community mothers vis-à-vis the ICBF; 2) the existence of obligations for the community mothers defined by the ICBF; and 3) the fact that the community mothers' pay was inferior to the minimum legal wage. The judges argued that, had these elements been taken into consideration by the court, the conclusion would have been that *“what's at stake is the work of an important number of Colombian women, who are clearly discriminated in comparison to other employees, and whose only income, which allows only for minimum subsistence, is compromised”*<sup>4</sup>.

The United Nations Committee on Economic, Social and Cultural Rights, ratified by Colombia in 1969, also pronounced itself twice in favour of the community mothers' labour rights. Among its recommendations, the committee asked the Colombian state to *“improve the training of the “community mothers” and regularize their work situation, treating them for all purposes as workers in the employ of a third party”*.

Slowly but surely, under the pressure of social movements, women's rights advocacy organisations, and the international community, community mothers' social rights have evolved. In 1990, they were included in the social security system; in 2008, they acquired the right to earn a pension and their allowance was raised to 70 per cent of the legal minimum wage. Finally, in 2012, the community mothers' labour rights were fully recognised: confronted with a new Action of Tutela brought by a community mother following the shutdown of her community home, the court ordered the ICBF to install a process allowing the community mothers to progressively, but rapidly, earn the equivalent of a minimum wage. The judgement demanded that all community mothers who work full time must earn, throughout the year 2013, a minimum wage: by 2014, a work contract subject to domestic labour law had to be established between each community mother and the ICBF.

*Slowly but surely, under the pressure of social movements, women's rights advocacy organisations, and the international community, community mothers' social rights have evolved.*

However, to date, the implementation of this judgement is far from being realised. Community mothers still do not earn a minimum wage, nor do they have a proper work contract. Indeed, the fiscal impact of the court's judgement is such that it endangers the very existence of the ICBF. The Colombian president has recently rejected a new bill covering implementation of the law, thus blocking its submission to Congress. According to the president, the bill jeopardises children's rights because its implementation would inevitably result in the dissolution of the public

*However, to date, the implementation of this judgement is far from being realised.*

4 Judgment T-14-92 of 1992.

institution entrusted with their protection. On these grounds, the president argues, the bill is unconstitutional.

### **Breaking programme regulations**

Policies that put women's labour into the service of the state in the name of children's well-being, and mobilise it through spuriously gendered altruism, are a common liberal strategy (see Llobet and Milanich, 2018 ; Rosenand and Newberry, 2018). I will now go on to discuss ethnographic data showcasing daily interactions between community mothers and the children they care for, in order to highlight the contradictions and tensions produced on the ground by such policy. I will argue that the predominance principle does not achieve the purpose of ensuring children's well-being and the protection of their rights, but rather exacerbates the problem by creating a legislative framework for violating women's rights.

Ethnographic data was generated between 2011 and 2013 in Ciudad Bolívar, a southern suburb of Bogotá. Ciudad Bolívar is one of the poorest areas of the city: its population has been growing steadily since the 1980s due to the regular arrival of rural migrants, among whom many are internally displaced persons fleeing the armed conflict in their hometowns (Angulo-González and Núñez-Lozano, 2004). Ciudad Bolívar was one of the areas chosen by the Colombian state for piloting the community homes programme in 1986 because it was judged a true "governance challenge" by Latin American leaders at the time (Benítez-Tobón, 1995). Compared to other areas where the programme was implemented, in Ciudad Bolívar community homes developed rapidly and intensively (Herreño-Hernández, 1999). Not coincidentally, Ciudad Bolívar is also the birthplace of the community mothers' social movement (Sierra-Pardo, 1992).

The scenes described in the following pages all have one thing in common: they showcase community mothers breaking programme regulations. As a result, the children they care for are not fed as they ought to be; children's care is often delegated to non-qualified persons (most often, minors); and much of the community mothers' energy is diverted from child care tasks to the challenges of running a family enterprise.

### **Feeding the children**

Making sure that children are properly fed is a key dimension of the community homes programme. Children who attend community homes are given a snack upon arrival in the morning, then lunch at noon, and another snack in the afternoon. These meals are supposed to cover between 65 per cent and 70 per cent of the calorie input recommended for the age group. Menus are prepared each week by nutritionists at the local office of the ICBF and the community mothers are expected to adhere to them. Every month,

the ICBF transfers to the associations the money needed to buy the ingredients for meal preparation.

In the context of the poor communities involved, the provision of food in the community homes is a vital component of their offer. Accordingly to the community mothers interviewed, many parents whose children benefit from the programme rely almost entirely on community homes for provision of their child's daily nutrition. For unemployed young mothers, their key motivation for sending their children to the daycare centre is that the children will be well fed. For a family of three or four living on only one minimum wage, having their child fed is of significant importance.

Claudia, a young community mother, discovered after only one year of being involved in the programme that within her association the prescribed menus were not respected by the other community mothers, who used the associated funds for other purposes:

*“I struggle so that they [the other community mothers from the association] give me my groceries, because they have to give me what's written there, what Bienestar [the ICBF] writes on the menus. They give us money to do what's written you understand? But I'm often told that we don't have enough. (...) I struggle because I see there is so much corruption with the money for the children's food. (...) I often fight with them [the other community mothers from the association] because of the food. I have a child under my care who eats only the cheese I give him, I know it's the only one he'll eat during the week because I give it to him, because his mother has other things to do or maybe has no money, (...) so I tell myself that if I have the possibility of giving the child a yoghurt then I should give it to him. And I struggle for my yoghurt! If it's written that you have to give them pasta and cheese, well then give me the cheese: if you have the money to buy the cheese, why don't you give it to me? They [the other community mothers] are not used to these kind of remarks, if they don't have the cheese they don't stress (...). They tell me I'm a beggar, but I demand it, they must give me what's written because many children only eat what I give them.”*

Claudia is implying that some of the community mothers in her association are keeping for themselves a part of the funds intended to buy food for the children. Thus, Claudia cannot always buy all the products required for the ICBF menu, and so the children she cares for are not fed as they ought to be. Unlike most other community mothers, Claudia does not rely on the food she buys for the children in order to feed her own family; her husband has relatively good employment, and as a couple, they reside at her in-laws' family home.

Numerous examples of corruption in the use of public funds intended to buy food for the children were revealed during field work. The ICBF is well aware of this, and closely supervises the beneficiary children's nutritional status: each month, the community



mothers must submit the weight curves of the children they care for and special utensils for measuring the exact quantity of food that must be given to each child are provided. When officials pay their surprise visits to the community homes for programme evaluation purposes, adherence to menus is a major component of their assessment.

### **Choosing an assistant**

Caring for the children during the day is not the only activity expected of community mothers engaged in the programme. Systematic observation conducted in five community homes revealed that the community mothers spent most of their work time away from the children under their care. A certain number of obligations require them to regularly leave the direct supervision of the children: cooking three meals each day for the children, attending the numerous compulsory training sessions offered by the ICBF and attending to administrative tasks linked to the operation of the community home. Leaving the children without supervision is a big a risk for any community mother. The law is clear that temporary abandonment of the children or even lack of attention are sufficient reasons to close a community home. Engaging an assistant to run the community home is thus a necessity for most community mothers. Accordingly, since 1989, the law states that in order to run her community home, each community mother must have the help of an assistant, who can be the mother or another relative of a child she cares for. According to the law, the assistant should help the community mother in carrying out activities with the children, but should not be regarded as a substitute. Indeed, delegation of the children's care to a third person is a justifiable cause for immediate closure of a community home. No money is transferred to the association in order to pay these assistants and, per a law passed in 2011 to regulate food rations within the community home, no ration is allocated to the assistant (the community mother's ration is included in the count).

Counting on the children's parents to assist them, as the law suggests, is unrealistic, since most of them work full-time and far from their homes. Under these conditions, meeting these legal requirements seems like an impossible task. How do the community mothers deal with this legal quagmire? Many community mothers, like Carolina<sup>5</sup>, rely on their own daughters:

*“I have three daughters: one is 17, the other is 15 and the other is 11 years old. They are my right hand. In the evening, they help me out a lot. (...) For example, today it was Leidy – they alternate. In the evening, she woke the children from their nap, she gave them their snack and she brushed their hair and cleaned their face and teeth before sending them back home.”*

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5 All names have been changed to ensure the confidentiality of those interviewed.

Having teenage daughters is certainly an advantage. But sometimes, even small children have to contribute to running the community home:

*“Susana (ethnographer): So, someone helps you out with all these children?”*

*María (community mother): Mmm... no, not always.*

*Susana: Not always? So sometimes, yes?*

*María: Well when I really need it I look for someone to help me out, because to tell you the truth, I like to work alone.*

*Susana: In spite of everything you have to do?*

*María: Yes, in spite of that, I try to handle everything myself.*

*Susana: And when you need someone, what do you do?*

*María: Well we help each other out, among family members or with the daughters of other community mothers. Actually, only recently did I start to work alone, because my children used to help me out a lot, even when they were little.*

*Susana: How did they help you?*

*María: Well by playing with them... also my daughter, when she was eight, had to stay alone with them one time. It was a risk, but I really didn't have a choice because the lady who told me she'd come finally didn't show up, and I left convinced that she would come later! (...) Another time, it was the same story with my son—he was seven or eight: I had to go to training and the lady didn't show up, so he prepared the milk for the children himself!”*

When the family network is missing, there are always alternative solutions. In these very poor neighbourhoods, it is not difficult to find a vulnerable person who agrees to help the community mother on a regular basis, in exchange for food only. I observed two examples of this approach. On one occasion, a young woman with a mental disability was helping one community mother on a regular basis; she was fed at noon but received no financial compensation. In another instance, the three daughters (15, 11, and 9 years old) of an internally displaced woman who had just arrived in the neighbourhood were helping out the community mother: *“I pity them,”* she said. *“Their mother left to do some ironing and earn some money, so I take them in: they help me out with the children and I give them food in exchange.”*

*Although delegating the care of the children to a minor is, according to the law, a cause for immediate closure of a community home, this practice is very common.*

Although delegating the care of the children to a minor is, according to the law, a cause for immediate closure of a community home, this practice is very common, certainly because it is difficult for the ICBF to detect it, and it thus is of less risk to the community mothers.

## Small family enterprises

As Llobet and Milanich (2018) point out, the position and the social status of 'mother' can be used strategically by women living in constrained circumstances. This is undoubtedly the case in the community homes, where women mobilise their good reputation within the community and the rich social networks created across the associations to set up and run small, often successful, family enterprises from their home.

*Women mobilise their good reputation within the community and the rich social networks created across the associations to set up and run small, often successful, family enterprises from their home.*

María runs a tailoring business, specialising in repairing clothes and in producing cheap covers for the mattresses where the children take their naps. She sells them by the hundred to counterparts in her association, as well as those across other associations in the neighbourhood.

Ana also runs a tailoring business. With the help of her daughters and two mothers of children she cares for, she makes uniforms for children in the programme. She sells them in large quantities to other community mothers in the neighbourhood, who in turn rent them out to parents for "graduation day" when six year olds leave the community homes to go to school. Ana's sister Camila, who is also a community mother in the same association, creates personalised diplomas for each child, which parents enthusiastically purchase. Needless to say, the graduation day is the community mothers' invention.

Carolina's husband is retired. He bought a bus and set up a small group transport enterprise. His wife likes to promote the fact that she is the only community mother in the association who often takes her children out for 'educational excursions'. Her husband takes care of the transport, and parents are willing to pay for excursions promoted by the ICBF. Marta's daughter, who is 16 years old, takes full advantage of her mother's community home to offer her own day care services. According to regulations, among the 14 children who can be cared for in any given community home, only two can be under two years of age. In the neighbourhood, the day-care offer for children under two is therefore more limited than it is for children between two and six, and young mothers often struggle to find a place for babies within the community homes. Marta's daughter, who still lives with her parents, offers day-care services to children under two, in parallel to her mother's community home.

The ICBF is conscious of this reality as well; in 1996, a law was issued indicating that offering child care services for financial compensation is cause for immediate closure of the community home. Nevertheless, this too seems to be a law that is readily circumvented.

## CONCLUSION: THE PARADOX OF THE PREDOMINANCE PRINCIPLE

Through this case study I have shown how, on a daily basis, community mothers utilise both individual and collective strategies in order to make their daily child care activities financially sustainable. These strategies involve breaking programme regulations regarding the children's nutrition, their supervision and their early education. I have also shown that the driving force behind these strategies are the social injustices faced by the community mothers, namely the flagrant, long running violation of their labour rights by the Colombian state for almost 30 years.

I can now come back to the question raised in the introduction: What are the social consequences, for children and for women, of putting children first? This case study demonstrates that if women's rights are violated, children's rights will most probably be violated as well. The predominance principle enshrined in Article 44 of the Colombian Constitution intends to give absolute priority to the protection of children's rights but paradoxically, by legitimating the subordination of the women's labour rights to those of the children, the children's own well-being is negatively affected, and they are neither being fed nor cared for as they ought to be from a children's rights perspective.

This is yet another example of 'what is wrong with putting children first', as Linda Gordon would put it (2008). Achieving social justice for both women and children requires working beyond liberal, individualist understandings of rights, towards a recognition of children's and women's social interdependency.

*Community mothers utilise both individual and collective strategies in order to make their daily child care activities financially sustainable. The driving force behind these strategies are the social injustices faced by the community mothers.*

*Achieving social justice for both women and children requires working beyond liberal, individualist understandings of rights, towards a recognition of children's and women's social interdependency.*

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## PART II

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# Examples of good practices in development cooperation

# Mother and Child Education Programme (MOCEP) In Turkey and 14 countries

**Valérie Bichelmeier, Make Mothers Matter (MMM) and  
Suna Hanöz-Penney, Mother Child Education Foundation (AÇEV)<sup>1</sup>**

The Mother and Child Education Programme (MOCEP) is the flagship programme of AÇEV, a Turkish NGO whose activities focus on quality education in early childhood, gender equality, the role of the family in educating the next generation, and lifelong learning. MOCEP has been implemented in Turkey and 14 other countries since 1993 (Bahrain, Belgium, Brazil, France, Germany, Jordan, Lebanon, Mexico, Palestine, Netherlands, Saudi Arabia, Switzerland, the Turkish Republic of Northern Cyprus and the United Kingdom).

Studies indicate that quality early childhood education programmes, including those that target improving parental knowledge and behaviours, are essential to mitigate the negative effects that unstable, stressful or violent environments can have on early childhood development (Britto et al., 2016; UNICEF & ISSA, 2016; WHO, 2020; WHO et al., 2018).

*Quality early childhood education programmes are essential to mitigate the negative effects that unstable, stressful or violent environments can have on early childhood development.*

MOCEP focuses on mothers and children from low-income families, who do not have access to quality social services and are at greater risk of exclusion. It has also been successfully implemented in Lebanon in refugee camps to reduce violence and strengthen bonds within families and communities.

## **DESCRIPTION OF THE MOCEP PROGRAMME**

MOCEP focuses on the child and their immediate environment (family, school), especially the mother, rather than the child alone. It is aimed at children aged 4 to 6 and their parents. The programme has two main components: the Cognitive Education Programme (CEP) and the Mother Support Programme (MSP).

The main objective of the CEP is to prepare children for school by stimulating their pre-literacy and numeracy skills, hand-eye coordination, sensory discrimination, language development, categorization, seriation, concept formation (direction, size and place), colour and shape learning, problem solving skills and general skills. Eight

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<sup>1</sup> MMM and ACEV are member of the Early Childhood Peace Consortium (ECPC).



Photo courtesy of ACEV

*MOCEP focuses on the child and their immediate environment (family, school), especially the mother, rather than the child alone.*

picture storybooks are used to develop listening comprehension, speaking, vocabulary, question-and-answer activities and reasoning skills; as well as 25 workbooks of 20-25 pages containing various exercises that mothers do with their child for five days a week, over 25 weeks.

The MSP aims to increase mothers' sensitivity to the child's cognitive, social and emotional development and to help her prepare a family environment that is conducive to the child's development. It also aims to help parents create a consistent mother-child interaction to strengthen the mother-child bond and develop positive parenting.

MOCEP is implemented over a period of 25 weeks, through weekly group meetings of 20-25 mothers that last about three hours. During the first part of the session, a pre-determined theme is discussed (themes related to parent education, but also more personal themes such as the mother's feelings about being a wife and mother). Group dynamics techniques are used to support the mothers active participation. Mothers are encouraged to ask questions, express their opinions and share their ideas and experiences.

In the second part of the meeting, the mothers are invited to form groups of five or six and, using role-playing techniques, they learn the CEP exercises they will do during the week with their children at home.<sup>2</sup>

## RESULTS OF THE PROGRAMME

Empirical evidence from a 5-country study (Bekman & Koçak, 2013) suggests that the MOCEP programme has a transformative impact on the lives and well-being of

<sup>2</sup> For more information on MOCEP, see <https://www.acev.org/en/> and <https://ecdpeace.org/search/node/MOCEP>.

participating families<sup>3</sup>. This data indicates that programme participants experience less conflict and violence, greater harmony within their families, and greater empowerment of women. These positive results can be attributed to the improved quality of the parent-child relationships and interactions that are at the heart of the programme.

*Programme participants experience less conflict and violence, greater harmony within their families, and greater empowerment of women.*

The participating mothers specifically reported many changes in several areas:

- **Social, physical and cognitive development of their children:** acquisition of basic cognitive skills, social and caring skills, increased self-confidence and better organisation in their daily lives.

*Before the programme, when we went somewhere he didn't know, he would cling to me, get bored and cry from boredom. Now it's different. When we go somewhere, he sits and talks comfortably, his relationships with his friends are better. He wants to play with his friends. When we go to the park, he asks others to be his friends – A Turkish mother*

- **Increased awareness of their educational practices:** mothers report feeling more valued and confident as women because they have been able to contribute to their child's development. These changes are reflected in their plans for the future; for example, the desire to continue their studies and start working.

*I was very nervous and had no confidence. My self-confidence has increased. I remembered that I am also a person, that I am me. I can say that I am present. I learned to value myself – A mother in Belgium*

- **Their behaviour and relationship with their child:** due to their better knowledge of child development, mothers use less negative discipline and more tolerant and understanding behaviour; they spend more time and communicate better with their child. These changes in behaviour and attitude create a more harmonious, close and peaceful mother-child relationship.

*I realise that I don't beat them like I used to. My behaviour has changed. I'm still nervous, but not as much as before. I used to beat them a lot, but now I talk to them. Before the programme, I used to beat them without asking them anything – A mother from Bahrain*

3 The study evaluates the results of MOCEP in 5 countries: Turkey, Saudi Arabia, Bahrain, Belgium and Switzerland. One hundred mothers, 20 from each country, were interviewed on a voluntary basis. The mothers in Turkey and Bahrain were living in their own countries; the mothers in Belgium, Switzerland and Saudi Arabia were Turkish emigrants.

- **Their behaviour and relationships with their husband, other children and people around them:** they have a more tolerant and understanding attitude and argue less with their husband.

*I'm talking about patience; your attitude towards people changes, whether it is your child, your spouse or other people around you – A mother in Switzerland*

- **Fathers' behaviour and attitudes,** which have led to positive changes in family relationships - especially when they share with them what they have learned in the programme. Fathers would then also have a closer relationship with their children.

*I continued to talk to my husband and say "I". I continued to talk to him and tell him what we did at the meetings. He also read the documents and was influenced by them – A Turkish mother*

## INSTITUTIONALISATION

From the beginning, for greater impact and sustainability, MOCEP has been implemented in partnership with public and private institutions. To date, more than 1,000 adult educators have been trained, and more than 400,000 mothers and children in 76 of Turkey's 81 provinces have benefited from MOCEP.

Turkey's Ministry of National Education has become the most important institutional partner of AÇEV. In this partnership model, the Ministry provides teachers, counsellors and trainers, as well as premises in schools and other public education centres to implement the programmes.

This partnership has enabled AÇEV to focus its resources on developing programme content and training instructors rather than on infrastructure and staffing issues. In this way, AÇEV was able to strengthen the capacity of the Ministry of Education by providing curriculum content, training instructors, and providing ongoing supervision to monitor quality and support these instructors.

The quality of the programme is ensured by a continuous cycle that starts with training instructors, and continues with follow-up through field supervision and a structured evaluation system that prioritises participant feedback. This feedback allows for the continuous development of instructors as proactive advocates and implementers of the programme.

MOCEP has proven to be dynamic and has benefited from the confidence of large-scale national investment while maintaining the quality of the programme, with lasting effects for beneficiaries.



In 2010, the Ministry of Education decided to launch its own "National Family Education Programme" for parents of children aged 0-18, and adopted MOCEP's content as part of this effort, recognising AÇEV's innovative and sustainable contributions to parenting practices in Turkey.

## INTERNATIONAL DEVELOPMENT

To date, MOCEP has been implemented with partners in 14 countries in Europe, the Middle East and Latin America<sup>4</sup>, bearing positive results with both migrant and indigenous populations. The replication model relies on local partners in each country who translate and/or adapt the programmes, mobilise trainers, recruit beneficiaries and raise funds to implement the programmes locally.



Photo courtesy of AÇEV

Organisations such as the Federal University of São Paulo in Brazil, the Childcare Association in Saudi Arabia and the Arab Resource Collective in Lebanon have asked MOCEP to translate the programme into Portuguese and Arabic, to adapt it to the local context and to help them implement programmes in these different countries.

In societies where there are few or no public early childhood development programmes, MOCEP can serve as a model for an informal programme. Nevertheless, as its European expansion shows, even in contexts where public programmes exist, MOCEP has proved to be of value in supporting parents in their role and responsibility as “first educators” and “education partners” for their children. MOCEP has shifted the concept from formal, centre-based early childhood education programmes to more informal programmes that focus on supporting parents in the home.

*In societies where there are few or no public early childhood development programmes, MOCEP can serve as a model for an informal programme.*

4 Bahrain, Belgium, Brazil, France, Germany, Jordan, Lebanon, Mexico, Palestine, Netherlands, Saudi Arabia, Switzerland, the Turkish Republic of Northern Cyprus and the United Kingdom.

## CONCLUSION

MOCEP is a proven programme that has already been applied in different contexts. It is easily replicable and adaptable to the needs of the target population. MOCEP has become a benchmark among early childhood development programmes.

MOCEP is an example of good practice that has positive effects both on the child, whose development it promotes not only cognitively, but also socially and physically; and on the mother, who is valued in her role as a mother/wife, increases her self-confidence, and acquires interpersonal skills that transform her immediate environment. The positive effects of the programme thus extend to the family and beyond to the community, helping to reduce violence. In the longer term, children are better prepared for school, have lower drop-out rates and are more successful in their studies, giving them better life chances.

However, from a feminist/women's rights perspective, this mother-centred programme has two disadvantages: it increases a mother's unpaid family work, as she is entrusted with the implementation of the CEP; and it reinforces gender stereotypes about the place of the woman in the home.



*MOCEP has positive effects both on the child and on the mother.*

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# The Pugsid Songo (“Model Husband”) strategy in Burkina Faso

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Enfants du Monde**

## INTRODUCTION

Rights related to maternal and newborn health (MNH) are fundamental rights, as part of the basic right to health of every human being. This responsibility is constitutionally and primarily the responsibility of states, which is also enshrined in all major international legal charters. However, individuals, families and communities can also make a valuable contribution to the health of women and children. Within families, in most countries and cultures, men play a key role in the realisation of women’s and newborns’ rights, due to family structures and to the roles and responsibilities of each member within the family.

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The principle of men’s involvement in maternal and newborn health (as well as in sexual and reproductive health) is in fact already enshrined in the outcomes of the 1994 International Conference on Population and Development (“Cairo Conference”). Men were recognised not only as beneficiaries of the right to health, but also as partners with a responsibility to support the health of women and children. They were also recognised as agents of positive change with the capacity to act on the issue of health and its gender implications.

The Global Strategy for Women’s, Children’s and Adolescents’ Health<sup>1</sup> confirms the importance of involving men and boys in health programmes to improve maternal and newborn health, as well as child and adolescent health. It encourages health care providers to seek support from men and boys in health and to welcome partners of pregnant women into health facilities if they wish.

This article tells the story of women, men and newborns from the villages of Malengha and Basbédo in the Tenkodogo Health District (DS), in the Centre East region of Burkina Faso, who have been involved in Enfants du Monde’s maternal and newborn health programme since 2012. It highlights a strategy for addressing both women’s and children’s (especially newborns’) right to health, in which all community actors – including men - play a crucial role. Thanks to an inclusive and relatively global posture, the strategy makes it possible to address these two fields of law – that of women and children - in a logical and articulated manner.

1 The Global Strategy for Women’s, Children’s and Adolescents’ Health 2016-2030. Every Woman, Every Child. 2015. [http://www.who.int/maternal\\_child\\_adolescent/documents/strategie-mondiale-femme-enfant-ado-2016-2030.pdf?ua=1](http://www.who.int/maternal_child_adolescent/documents/strategie-mondiale-femme-enfant-ado-2016-2030.pdf?ua=1)

## CONTEXT

As in the rest of the country, in the villages of Malengha and Basbédo, the health situation is characterised by high maternal and infant mortality rates. According to WHO estimates for 2011, the national maternal mortality ratio is 377 per 100,000 live births (by comparison, it was 6 per 100,000 in Switzerland<sup>2</sup>), and the under-five mortality rate is 76 per 1,000 live births<sup>3</sup>. Use of maternal and child health services remains low: in 2011, according to statistics from the Tenkodogo Health District (DS), barely 35% of pregnant women utilised antenatal care in their first trimester of pregnancy and only 38% of women sought postnatal care in the Moaga health and social promotion centre (CSPS) (the closest to the intervention villages).

Participatory community assessments conducted between 2009 and 2013 by the Ministry of Health with support from Enfants du Monde and other partners had highlighted factors that affect the decision to use health services. In their homes, women, their husbands and families are mostly unaware of the causes of death of mothers and newborns, often attributing them to supernatural explanations. They are also unaware of the importance of antenatal care, as well as the danger signs during pregnancy and the post-natal period, which should prompt immediate referral to a health centre. Women and their families do not recognise these signs and are reluctant or do not systematically seek health services, often turning to traditional health actors in the village or surrounding area. In addition, women are not able to make the decision to seek care.

*As in the rest of the country, in the villages of Malengha and Basbédo, the health situation is characterised by high maternal and infant mortality rates.*

Women's low social and economic status, gender inequalities and other socio-cultural dimensions explain, but do not justify, women's lack of power. On the other hand, even when it is decided they will seek care, women encounter practical difficulties in accessing health services, due to the long distances to be covered, the lack of transport or financial means. Finally, men are reluctant to take an interest in maternal and newborn health issues and actions, which are seen as 'women's matters'. A saying from the community involved sums up the phenomenon: "Lower abdominal pain (pregnancy and/or childbirth) is not a man's business." Moreover, they are systematically excluded from this field – health care providers are not in favour of including men during consultations or childbirth.

*Men are reluctant to take an interest in maternal and newborn health issues and actions, which are seen as 'women's matters'.*

2 [https://www.who.int/data/gho/data/indicators/indicator-details/GHO/maternal-mortality-ratio-\(per-100-000-live-births\)](https://www.who.int/data/gho/data/indicators/indicator-details/GHO/maternal-mortality-ratio-(per-100-000-live-births))  
3 <https://www.who.int/data/gho/data/indicators/indicator-details/GHO/number-of-under-five-deaths>

## THE MNH PROGRAMME SUPPORTED BY ENFANTS DU MONDE

Among the many possible strategies for improving MNH, the Ministry of Health of Burkina Faso, with technical and financial support from Enfants du Monde, adopted the strategic framework for health promotion in Burkina Faso: ‘Working with Individuals, Families and Communities to Improve Maternal and Newborn Health’ (IFC framework). Developed by the World Health Organization (WHO)<sup>4</sup>, the IFC framework aims to empower individuals, families and communities and facilitate their access to and use of skilled health services.

In particular, the IFC framework calls for greater involvement of men in MNH, not only because they are key decision-makers in care-seeking behaviour, but also to better enable them to fulfil their roles as husbands and fathers.

Of course, this is complementary to other actions aimed at developing women’s skills to stay healthy, make decisions that support MNH and respond appropriately to obstetric and neonatal emergencies. Actions to facilitate access to and quality of care are also being undertaken.

## HUSBANDS GET INVOLVED

As part of the health programme supported by Enfants du Monde, an approach called ‘pugsid songo’ (model husband) has been implemented since 2012 in several villages in the health area of the Moaga CSPS, in the Tenkodogo health district. A successful forum theatre piece on this aspect initiated the process. Part of it was about a husband accompanying his wife to a antenatal consultation. This part of the play literally thrilled all the women in the audience who applauded warmly and even spontaneously stood up to salute the action. This event further motivated the Tenkodogo District Team (ECD), the NGO Fondation pour le Développement Communautaire/Burkina Faso (FDC/BF), Enfants du Monde (EdM) and the United Nations Population Fund (UNFPA) to set up a specific project in this area, first in the villages of Malengha and Basbedo. It will be called the ‘pugsid songo’ strategy, which means “model husband” in Mossi, a language of the majority ethnic group in Burkina Faso, referring to the fact that men are selected to serve as role models in their communities by supporting their wives during pregnancy and the perinatal period.

## THE STRATEGY IMPLEMENTED

The ‘pugsid songo’ strategy was implemented in several stages. Community participation has been a key element throughout the process:

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<sup>4</sup> “Working with individuals, families and communities to improve maternal and newborn health.” World Health Organization, 2013. [http://whqlibdoc.who.int/hq/2010/WHO\\_MPS\\_09.05\\_fre.pdf](http://whqlibdoc.who.int/hq/2010/WHO_MPS_09.05_fre.pdf)





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## 1 – Selection of implementation villages

Community members, health workers and representatives of the management committee of the Moaga CSPS defined the objectives of the awareness raising project and the villages covered by the project, under the leadership of the Head Nurse (ICP) supported by the ECD. Two villages were thus identified to initiate the project (20 spouses per village), joined later by 8 other villages (15 spouses per village).

*Men are selected to serve as role models in their communities by supporting their wives during pregnancy and the perinatal period.*

## 2 – Community leaders' awareness and advocacy day

An information and awareness-raising meeting brought together community leaders (religious, traditional leaders, municipal councillors, members of the Village Development Committee) to push for their involvement and establish criteria for the selection of model husbands within their communities.

### 3 – Choice of husbands

Husbands were then identified on the basis of criteria defined with community representatives: i) being married; ii) being concerned about the health of their family; iii) having demonstrated a spirit of solidarity within the community; iv) being patient and accepting of criticism from community members. These criteria were to give them a certain legitimacy to intervene with their peers. Once chosen by the village chief, the nominated husbands were free to accept the offer.

### 4) Information meeting and presentation to the community

An information meeting was held with the chosen husbands to encourage their support. Those who agreed to be ‘model husbands’ were then presented to the community in a formal ceremony celebrating their commitment to do their best to change their behaviour and that of their peers in supporting pregnant women and newborns.

### 5) Training of model husbands

The “pugsid songo” were trained on MNH and adult education techniques in a 3-day session. Through highly participatory methods (illustrated presentations, role-playing, demonstrations) and with the help of health education tools (flipchart on birth preparedness and obstetric and neonatal complication readiness (BPCR) and the BPCR card<sup>5</sup>), the importance of the husband’s involvement during pregnancy and childbirth was discussed and emphasized.

At the end of the training, the husbands make a commitment to accompany their wives during check-ups and consultations, as well as to support them at home during their pregnancy and with the baby. They also commit to promoting the involvement of other men and influential people in their community in actions that will improve MNH. T-shirts, hats, and bibs made it easy for the model husbands to be identified.



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5 A training guide on this subject was developed on the basis of the teaching tools of the husbandry schools, by the FDC/BF and the Ministry of Health, with the technical support of EdM.



## 6) Preparation of the action plan

At the village general assembly, a community mobilisation action plan is drawn up based on the needs expressed by the communities, which also defines the actions to be taken by the model husbands.



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## ACTIONS OF MODEL HUSBANDS

The actions of the model husbands in support of MNH take place at different levels:

- In their own families: model husbands assiduously implement all measures and attitudes that are conducive to the health of their pregnant wife and newborn child.
- Among their peers: Accompanied by health professionals, they organise home visits to talk to other husbands to convince them to get involved in their wife's health and, if she wishes, to accompany her to the health centre for her antenatal visits. In particular, they approach men who they know do not want their wives to go to health facilities or who do not prepare for childbirth or possible obstetric emergencies.
- With leaders and at the community level: the “pugsid songo” address the problems that prevent pregnant women, mothers and children from enjoying good health and seek solutions to them. For example, they mobilise the community to solve problems of transport and access to health facilities.

In addition to monthly meetings with each other, the model husbands report regularly to the community and to healthcare providers. An annual review meeting at the CSPS level is also an opportunity to identify the needs for strengthening the knowledge of spouses.

## PROMISING RESULTS

In 2013, 160 spouses were trained in the Tenkodogo DS. According to the external evaluation conducted in 2014<sup>6</sup>, husbands could already demonstrate a good level of knowledge of practices conducive to MNH, including that with relates to: (i) adequate nutrition and care during pregnancy and after birth for mothers and newborns; (ii) relevance of preparation for childbirth and emergencies; (iii) promotion of rights and needs related to MNH; (iv) importance of giving birth at the health centre; and (v) awareness-raising of traditional birth attendants to refer women to health centres.

6 Evaluation report of the programme to support the implementation of the framework “Working with Individuals, Families and Communities in the districts of Tenkodogo and Zabré.” Ouagadougou, January 2015.

The evaluation reported an improvement in the involvement of men in the follow-up of pregnant women in the area served by the Mouaga CSPS. They felt valued and, as a result, more involved in MNH. For example, they accompanied their wives more often to the CSPS for MNH care. The increase is also remarkable: the number of women accompanied by their husbands for MNH services rose from 0 in 2011 to 688 in 2014.

*The evaluation reported an improvement in the involvement of men in the follow-up of pregnant women in the area served by the Mouaga CSPS. They felt valued and, as a result, more involved in MNH.*

**The testimonies of wives and husbands are revealing:**

*“Our husbands help us a lot, they give us what we ask for to eat, when we are sick, they take us to a health facility for treatment, they honour the prescriptions...”*

*-Women of childbearing age from the villages of Pargou and Guirmongo.*

*“We prepare young men to be husbands by teaching them the role of a husband in health. We explain the contents of the childbirth preparation card. We encourage them to bring the mothers and wives of their brothers to the health centre so that they can become familiar with it; in this way, accompanying your wife will no longer be a taboo.”*

*-Hamidou Zoanga, model husband in Igwenda.*

*“I have been helping my wife with housework since I was trained and I have understood the consequences of hard work on her and the unborn child. So when she was pregnant I brought her water and wood for cooking and she didn’t go to the field anymore. I continue to do this even after she gave birth.”*

*-Sana Haroune, Malengha model husband.*

In addition, the evaluation noted a gain in harmony within the families with more involvement and concern on the part of the husband towards his wife. This strengthens the dialogue within the couple. Moreover, the “pugsid songo”, by carrying out the various activities, such as talks or the implementation of solutions to problems in MNH, like the construction of a maternity waiting home for pregnant women or the development of transport for maternal emergencies, enable to strengthen social cohesion and community action on a larger scale.

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Provider-user relationship in health services is also improving through increased encounters and collaboration between health workers and the community. Periodic visits to the communities to support the model husbands in health education activities have played an important role in improving this relationship and increasing the use of health services.

The project seems to have had a positive influence on the use of care. The Mouaga CSPS reports a significant increase between 2011 and 2014 in the rate of pregnancies seen in the first trimester from 35% to 47%, and in the rate of use of family planning methods from 32% to 58%. The number of home childbirths decreased from 37 in 2012 to 6 in 2014. Although this data is statistically insignificant and was collected very soon after the start of the intervention, it is nevertheless promising and encouraging.

### RISK ASSOCIATED WITH THESE INTERVENTIONS

As highlighted by WHO<sup>7</sup>, interventions to involve men in MNH are only recommended if they are implemented in a way that respects, promotes and facilitates women's independence in decision-making and helps them to care for themselves and their newborns. In other words, it is not a question of making 'pugsid songo' husbands better informed and therefore even better able to take decisions for their wives.

*It is not a question of making 'pugsid songo' husbands better informed and therefore even better able to take decisions for their wives.*

To reduce this risk, the project is strongly committed to the promotion of women and their empowerment, while rigorously monitoring the implementation, with a particular focus on this aspect.

### WOMEN'S RIGHTS AND CHILDREN'S RIGHTS TO HEALTH

Given the prominent role that men play as partners, spouses, fathers and community members in decision-making on maternal and child health, their involvement and commitment is much needed. Cultural, social, economic and especially gender-related factors do not generally prepare them to feel jointly responsible for their wife's pregnancy or their baby's health, even though they assume decision-making roles.

Our experience has shown that men are willing to change, and in particular to establish a better dialogue with their wives and family members. Provided they have the knowledge, skills and community recognition, they are thus ready to take on a new role as spouses and even challenge the traditional view of other spouses.

7 WHO recommendations on health promotion interventions for maternal and newborn health 2015. World Health Organization. 2015. [http://apps.who.int/iris/bitstream/handle/10665/172427/9789241508742\\_report\\_eng.pdf;jsessionid=6748BDC74434507E5DF6A7D0E2382812?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/172427/9789241508742_report_eng.pdf;jsessionid=6748BDC74434507E5DF6A7D0E2382812?sequence=1)

However, while male involvement appears to have beneficial effects on the use of MNH services, it is currently difficult to comment on its effect on gender inequalities and women’s rights. Indeed, although the involvement of men was requested by the women themselves, the ‘unilateral’ and circumscribed nature of their training does not allow them to question the existing power relations between men and women, nor the values traditionally attached to each sex. It would therefore be interesting to analyse in greater detail whether women who have been made aware of their rights, in parallel with the actions carried out with their husbands, have gained in independence and decision-making capacity, as well as to better understand the dynamics within the households.

*This experience enables to address both women’s rights and children’s rights, in particular those of newborns. It is notably an inclusive and global vision that enables to address these rights in a logical and articulated manner.*

To sustain the gains of such an intervention, continuous monitoring and national ownership is crucial throughout the process, as well as funding for the roles assumed by health care providers, especially in monitoring and motivating spouses.

Given the multi-factoriality of maternal and newborn health, this intervention can only have an impact if it is implemented as part of a package of interventions that also strengthen women’s skills to stay healthy and care for themselves and their newborns, as well as women’s empowerment in relation to MNH and their rights. The behaviours of other influential people in the family (such as mothers-in-law) and in communities (such as traditional health workers, who are often a woman’s first point of contact in an emergency) also need to change.



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Finally, and in relation to the theme of this publication, if this experience enables to address both women’s rights and children’s rights, in particular those of newborns, it is notably an inclusive and global vision that allows to address these rights in a logical and articulated manner. Women’s and children’s health are intrinsically linked, like two sides of the same coin, and we have everything to gain by designing programmes that not only address both aspects, but also have positive and favourable outcomes for both, or even a favourable impact on one (in the case of the newborn).

The issue here is not just to consider the rights of women in their role as mothers, but to make motherhood a spearhead for the promotion of their rights as women.

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# Protection of Rights of Women and Children in India

**International Youth Council, Terre des Hommes Switzerland**

The International Youth Council, made up of 16 young people between the ages of 18 and 25, is a consultative body of the NGO Terre des Hommes Suisse (hereafter TdH Suisse). These young representatives, coming from all over the world, have the mission to exchange their experiences and know-how in the defense of children's rights and sustainable development. They exchange in particular on how they protect themselves against violence (self-protection groups), on the different ways of exercising their right to participation within their communities, especially in educational spaces, and on the protection of their environment. These young people also aim to gain visibility to be able to advocate, at national and international level, for better respect of their rights and those of their peers.

In November 2019, as part of the commemoration of the Convention on the Rights of the Child, some members spoke at round tables organized by various international NGOs<sup>1</sup>. They were able to issue recommendations and messages of hope to policies and authorities of international institutions<sup>2</sup>. During the Conference on "Children's rights and women's rights in development cooperation: field of tension or synergies"<sup>3</sup>, Jui and Reshma were able to testify about violations of women's and children's rights in the Indian context. They highlighted the factors that make women's and children's rights highly vulnerable, including strong patriarchal beliefs, gender discrimination, domestic violence, early marriage. In general, they commented that the status of girls and women is lower than that of men, despite the fact that the Indian constitution grants women equal rights with men.

*Two young women, members of the International Youth Council of Terre des Hommes Switzerland, testify to violations of the rights of women and children in the Indian context and share the actions they are implementing in order to promote them within their community, while giving them the same importance.*

Girls are socialized to be subservient to male family members and are considered second best when it comes to their education and even their lives. The use of female foeticide by families and forced marriage are, for example, discriminatory and alarming practices against the integrity and dignity of girls and women in the making.

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- 1 The round tables focused on: child/youth migration, child protection, protection of environmental rights and the tension between children's rights and women's rights.
  - 2 In particular, the United Nations High Commissioner for Human Rights, the Swiss representative of the Committee on the Rights of the Child, the United Nations special representative on violence against children.
  - 3 Organized by Enfants du Monde, and which took place on November 18, 2019 in the presence of Koumbou Boly-Barry, United Nations special rapporteur on the right to education.

*Jui**Reshma*

For Jui and Reshma, it is essential to recognize the rights of women and children with equal importance. Thus, in partnership with local partners of TdH Suisse, they coordinate and animate children's clubs (dedicated community spaces) in which they regularly offer workshops to raise awareness about their rights and gender equity. For these young people, it is important to work closely with community women's groups, families and young people. They offer them dialogue and training sessions, particularly on issues of multiple discrimination. They also facilitate the dissemination of information on legal services/assistance that children and women can access to protect their rights. To this end, they organize, in partnership with local legal experts, orientation programs on available legal services and assistance. Finally, Jui and Reshma help children to access and enjoy their rights to various government services (such as social welfare) by accompanying them in generating applications to the authorities or by organizing interfaces with local authorities.

# Education Rights for the girls of Chad: The teaching of menstruation during puberty, from practical needs to strategic interests

Mouna Al Amine and Susana Borda Carulla, *Enfants du Monde*

## INTRODUCTION

As part of its mandate for the Department of Development and Swiss co-operation in Chad, the non-governmental organisation 'Enfants du Monde', in 2013, put in place the 'Promotion of the Quality of Basic Education' programme (ProQEB) in Chad, aiming to provide quality education to children and illiterate people in the Batha and Moyen-Chari regions. Since 2019, thanks to financial aid from the French Development Agency, the program also extends to the Wadi Fira and Mandoul regions.

One of ProQEB's major focuses is the provision of educational equipment, notably under the name 'Didactic Sequences' (DS). The Didactic Sequences are a mix of educational activities, systematically organised around a learning object (for example, a type of spoken or written text, the study of the human body, operations, a historical period, a type of government, etc.) which aims to allow the student to develop the understanding of a problem and/or a mix of knowledge and know-how, all while developing physical and cognitive capacity. They are built around a contextualisation process which allows the revival of teaching/apprenticeships in the students' daily life. Highlighting the problems encountered on a daily basis by children is thus the starting point which makes the process of teaching/apprenticeships important and relevant. The ProQEB develops the Disciplinary Didactic Sequences (DDS) as well as the Interdisciplinary Didactic Sequences (IDS).

After several years of intervention in literacy schools and administrations, the ProQEB's teaching team<sup>1</sup> identified factors impacting schooling as well as public health problems which aren't acknowledged, or which are insufficiently dealt with, in the education system. In particular, the onset of menstruation has been identified as a frequent cause of dropping out of school in the schools supported by the program, thus constituting an obstacle in regard to quality of education for Chadian girls<sup>2</sup>. In

*The onset of menstruation has been identified as a frequent cause of dropping out of school.*

- 1 The teaching team of ProQEB is composed of a dozen Chadian practitioners in the education domain, notably including the Minister of Education in Chad and Chadian training institutes, as well as the Disciplinary Didactic Specialists and the teaching collaborators from the Headquarters of the Children of the World in Geneva.
- 2 Within this document, the terms "girl" and "boy" are references to the the assigned sex at birth, unless otherwise specified.

order to address this problem, the ProQEB team has formed an IDS which helps transmit useful knowledge on puberty to students, also allowing girls to better manage their periods, including with their group.

Following an experiment in several Chadian classes in January 2021, this IDS has been made more available to nearly 2,000 classes in the four regions of ProQEB's intervention. Despite the fact that, to date, we do not possess data on the effects of this IDS on the representations and the practices of students in place with their periods, nor its impact on the school absences of girls, it seems to us nevertheless interesting to carry out a gendered analysis of the IDS (including its preparatory diagnosis), in order to determine its contribution and position in regards to the practical needs of the girls (facilitating their daily life) and to their strategic interests<sup>3</sup>.



Based on the results of the preparatory diagnosis as to the educational needs (and in particular the aspects related to the status of menstruation in the Sar community) and how these educational beliefs have then been addressed in the IDS, research will be carried out around the themes of language and of the body, according to gender. Language will also be analysed as a tool of constructing gender and sexual identity. Defining language and the body (primarily the female body) will help acknowledge and approach the question of practical needs and strategic interests and therefore, to bring up the topic of girls rights.

## MENSTRUATION AND GIRLS' EDUCATION IN MOYEN-CHARI

The ProQEB team has called on two consultants to carry out a diagnosis of the educational needs of the beneficiaries of the program in Moyen-Chari to do with several public health issues, in particular menstruation (cf. Billoir & Borda, 2017). This diagnosis, carried out in the Sar ethnic group, with the majority being Christian and agro-pastoral, revealed several related topics around the subject of practices and representations of menstruation. It is on this basis that the consultants decided on a series of educational needs.

The diagnosis was first of all highlighting the fact that menstrual blood is a taboo within the Sar community. A taboo is "*an animal, a person or a thing that is not allowed to be*

3 The practical needs allow the improvement of life conditions (Hoffmann, 2006: 12) it is primarily about questions of access Strategic interests, according to them, refer to lasting changes in the social relations between the sexes ; it is notably about issues of social status.



*touched because it is filled with a sacred power deemed dangerous or impure*” (Billoir & Borda, 2017: 29). It entails a whole series of social prohibitions: initiated men<sup>4</sup>, for example, cannot consume prepared food or water brought by a woman when she has her period (even if the woman in question has no relation to them); young girls cannot sit on the same bed as their mother once their first period appears. At the heart of the Sar community, menstruation corresponds therefore to a system of informal moral standards, regulating group practices imposed on individuals.

*Menstrual blood is a taboo within the Sar community.*

According to Billoir and Borda (2017), the taboo nature of menstrual blood would therefore make the menstrual cycle a social fact. According to Émile Durkheim (1895, cited by Boyer, 2016).

*“A social fact is any way of proceeding, fixed or not, which is likely to exert an external constraint on the individual; or else, which is general throughout a given society while having an existence of its own, independent of its individual manifestations”.*

Therefore, menstruation *“is not an affair of the private life of women but is instead a true social phenomenon: It punctuates their daily life and governs their activities and relations, at home and equally within the community”* (Billoir & Borda, 2017: 28). These don't concern only women who menstruate, but also the community in its entirety: the daily life of all individuals of their group is affected by their regular occurrence. Thus, it imposes a moral order and dictate their behaviour to individuals, which in turn reinforces social norms through their non-deviant conduct.

*Menstruation “is not an affair of the private life of women. It punctuates their daily life and governs their activities and relations, at home and equally within the community”.*

Billoir & Borda (2017) thus highlight that the moral norms linked to menstruation, as well as their powerful ruling nature on the community as a whole, have significant repercussions on the schooling of girls. If, overall, both girls and boys are aware of social prohibitions related to menstruation, children and youth, particularly girls, receive very little information on the biological aspects or the practical aspects (managing menstrual blood) related to periods.

Not knowing how to manage the flow of menstrual blood in an adequate way, certain girls don't go to school when they have their period, out of fear of staining themselves (which is seen as humiliating). The current lack of toilets for girls, as well as running

4 An initiated man is a young man who has passed through the traditional rite of passage to become an adult; practised in most traditional societies, the initiation rite marks the end of childhood and grants the individual with a new status, allowing them to marry for example.



water in most school establishments where the diagnosis was conducted, also makes it difficult for girls to consider managing their period at school. Finally, several little girls are made the object of mockery by boys when their breasts start to grow: in their eyes, contrary to a girl, a woman has no place at school.

*Certain girls don't go to school when they have their period, out of fear of staining themselves (which is seen as humiliating).*

### THE INTERDISCIPLINARY DIDACTIC SEQUENCE “MY BODY CHANGES”

Individuals learn to internalise the social norms and values through the process of socialisation, which can be latent (no real comprehension of taking part in the process) or manifest (voluntary). After lineage - first agent of socialisation in West African societies (Cf. Rabain, 1994) - school holds a special place in the social construction of a child. However, according to Assié Lumumba (2004), school is not “neutral” as an institution, but is the vector of societal norms, values, and models of social behavioural. Relativising the prohibitions linked to menstruation at school is therefore the first step in the deconstruction of representations and prohibitions linked to menstruation in the Sar community.

It's in this optic that the IDS “My body is changing” was produced in 2019 by the ProQEB pedagogical team, with the help of three Burkinabe contributors<sup>5</sup>. The IDS is aimed at pupils in the CM1 class, aged 9-10 years, and is the first in a trilogy of IDS focusing on the topics of reproductive and sexual health, also aimed at older pupils<sup>6</sup>.

**Table 1** summarises, in the form of an analytical summary, the responses made by the IDS on the subject of school absence of girls who have already started menstruating. Reading it allows to understand the articulation between the educational needs identified in the diagnosis and the IDS “My body is changing”, and in particular, how the IDS is a first response to the problem of young girls missing school in Moyen-Chari. The identified elements guided the collaborators in the development of nine learning workshop in life and earth sciences, social sciences, mathematics, and languages, proposed within of the IDS.

**Table 2** shows the overall structure of the IDS. The activities are structured in three phases: simulation, learning workshops and project implementation. In the learning workshops, the students acquire the useful knowledge needed in order to respond to the educational needs, as well as the know-how to allow them to create a class project. Thus, for example, in the case of workshop 4 in social sciences and life and earth sciences (Cf. Table 2), the social restrictions linked to menstruation are discussed and

<sup>5</sup> It is important to note that the collaborators, even though some have knowledge and skills, are not gender experts.

<sup>6</sup> Due to operational constraints, there are currently no longer any plans to develop the two other IDS.



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then analysed in comparison with other cultures in order to enable the learners to realise the variability of representations. The students become aware that within other societies, menstruating women are treated differently than in the Sar community. The students then discover the scientific explanation of menstruation. The proposed exercises are designed to make the students aware that menstruation is a natural phenomenon and that in their community, cultural beliefs prevent menstruating girls from doing many activities - in particular going to school.

Thus, within the IDS “My body is changing”, each school discipline is serving the vision of the IDS’s aim of contributing to reducing the school absenteeism of young menstruating girls, all the while fitting into the official Chadian school curriculum. This allows the teacher to dedicate a number of significant class hours to the implementation of the IDS with students, while respecting curricular constraints.

*Each school discipline is serving the vision of the IDS’s aim of contributing to reducing the school absenteeism of young menstruating girls, all the while fitting into the official Chadian school curriculum.*



## SEXUAL LANGUAGE IN THE IDS: THE SAID AND THE UNSPOKEN

As mentioned, one of the educational needs identified by the consultants during the diagnosis, and which the IDS proposes to meet, is to “name the genital organs and the physiological phenomena associated with puberty in a precise manner” (Cf **Table 1**). This need is addressed in particular in the framework of Workshop 1 in life and earth sciences (Cf **Table 2**). In activity 1.4, children are asked to name in several different languages (French, Arabic, and the national language in the case of the Sar community), terms like “puberty”, “vagina”, “menstruation”, or even “hormones” in several different languages (French, Arabic, and the national language – in this case Sar). **Table 3** shows the vocab proposed to the teacher (male or female) as an example, so that he/she can elaborate on the subject with their students. It should be noted that the teacher is invited to add or choose other terms that seem important.

It is important to highlight that the bodily phenomena occurring during puberty are gendered in language. Thus, while the terms related to boys are primarily addressed from a physiological perspective and some definitions go beyond the physiological and address issues of pleasure, such as the definition of “erection”, which it is specified that



“it is maintained during sexual pleasure”. On the other hand, terms related solely to girls do not address issues of pleasure at all.

Moreover, while the clitoris is mentioned in other moments in the IDS, but this organ is absent from the glossary, and no definition is proposed. Is it because it is a sensitive subject in the Chadian context? The rate of female genital mutilation (FGM) in Chad is 44% (UNICEF, 2013), and even if its prevalence is weaker in the Sar community (38% according to Sibaye Tokindang, 2004) it is still an important phenomenon. Is it advisable to address the issue of FGM in an IDS on menstruation, in a context such as Chad? It should be noted that an IDS specifically on FGM, intended for the training of trainers (male and female) and not of children, produced in the framework of ProQEB, has been used since 2014 in Chad.

This being said, not mentioning and defining a part of the female body (in this case the clitoris) deprives women not only a part of their biological, anatomical identity, but also their sexual identity, at the interface of gender and sexuality (Broqua & Eboko, 2009). Indeed, according to Wald (1999), language is also a social fact: independent of individual action, it imposes itself on society. It dictates our way of thinking and communicating. Thereby, language plays an important role in the production, reproduction, and contestation of gender relations. If language is a social fact, speech – as a phenomenon of language in which language occurs – is an individual phenomenon. And it is indeed speech that the diagnosis carried out has made it possible to liberate. However, it is not enough just to free speech at a given point to allow an evolution of language and its use: it is therefore necessary to go through a social institution – in this case school – to allow a potential change in practice. Thus, language has often been considered by feminists as a tool for political action against the androcentric system (Chetcuti & Greco, 2012). Language practices engrave on the body the identity inscription of boys and girls.

## **THE FEMALE BODY, FROM PEDAGOGY TO POLITICS**

At the heart of the IDS “My body is changing”, the body is, like the title indicates, a central theme.

In pedagogical terms, as menstruation is a taboo topic in Sar society, it was unthinkable to address the issue directly with students. Especially as the children for whom this IDS is intended have not yet reached puberty, they have no concrete experience of the physiological phenomenon - though it is important to note that the classes are not homogeneous and there are sometimes older children. The diagnosis (Billoir & Borda, 2017) shows nevertheless that the general rule is that pre-teen girls, as well as boys, know that a woman goes through a particular period every month, because she changes her behaviour in society, without knowing the physiological reasons behind it. Specifically,

a young girl knows that, periodically, her mother stops preparing meals and drinks and working the fields for several days, but she is often unaware that this is due to the presence of menstrual bleeding. Indeed, if the girls are warned of social prohibitions on the subject of menstruation, when their breasts start to grow, a mother never discusses the topic of menstrual bleeding with her daughter, until the arrival of her first period. So, many little girls do not even know that one day, they will have their period. Many girls are caught off guard when they have their first bleeding.

In order to be able to address the topic of menstruation with the children, it was therefore important to do it in an effective way, which makes sense for the children in the context of their culture, and which would also allow to organise the teaching-learning content in a coherent way. The theme of the body and its changes during puberty made this possible. The choice of the body as a guiding theme can therefore be seen as a pedagogical choice.

However, the body is not a neutral individual entity - on the contrary, it is a space for social, political, and cultural inscription (Fournand, 2008). It is inhabited by the norms and discussions which are exerted on it and is traversed by power dynamics. The body is socially constructed – bodily and sexual issues are not only individual, but also subject to social and political regulations (Foucault, 1985). As with other parts or expressions of the body, menstruation links the intimate to the rest of society, to others.

Therefore, the educational choice of the the collaborators to use the body as a gateway to address puberty has a political character with implicit issues: *what is addressed* (vs. what is not) in the IDS and *how it is addressed* is not “neutral”. The topics dealt with in the IDS are in fact the vector of social norms, values and social behavioural models.

Within the IDS, the social dimension of the body is addressed within workshops 4 and 9.

In Workshop 4 (Cf **Table 2**), first of all, the students discover, through reading of a text, the different representations in relation to menstruation in several different societies (Ethiopia, Uganda, India, among the Native American cultures) and they are encouraged to compare them.

*The students discover, through reading of a text, the different representations in relation to menstruation in several different societies.*

Then follows a physiological explanation of the phenomenon, which allows the teacher to note with their students that “menstruation is a natural phenomenon of the female body” which “societies may consider in a positive or negative way” (ProQEB, 2019): 45). Chadian students thus have information allowing them to rethink the representations and opinions of menstruation within their own society and to envisage other possible ways to represent them.



If in workshop 4, social aspects are mentioned that are not under the direct control of the students, in workshop 9 (activity 3), the students are encouraged to reflect on concrete problems (lack of toilets, lack of water at school) and possible solutions (sensitising peers to the fact that mockery contributes to girls' school absences) they can implement to enable girls to experience their periods peacefully.

Despite these occasional links between the biological facts (periods) and the social facts (representation of periods within the Sar community and the impact on school attendance) mentioned above, the vision of girls' (as well as boys) puberty transmitted through the IDS remains largely biomedical. While it is clear from the diagnosis that the onset of periods signifies the passage to adulthood, there is no questioning of what it means socially to pass through puberty and what it means socially to become a woman or to become a man. Yet puberty is traversed by dynamics that question the definitions of what a woman's body or what a man's body is, and therefore, gendered body norms (Piccand, 2016: 522). Indeed, social and cultural affiliations shape corporeality, i.e. the individual's relationship with his or her body, just as much as biology. And puberty - as a period of identity transition - affects the definition that girls and boys have of themselves, and what they think others think of them. And therefore, the vision they have of women and men. Indeed, studying the biology body in relation to social representations opens the possibility of dialogue on gender relations in a global sense - the social norms linked to being a woman or a man being inscribed in the bodies.

## **PRACTICAL NEEDS AND STRATEGIC INTERESTS**

Distinguishing between the practical needs and the strategic interests of women is an essential component of the gender approach. The practical needs arise from the roles that women and men perform. Practical needs express a "*need for immediate change in living conditions*" (Hoffmann, 2006: 12), which stakeholders are easily aware of and which are relatively easy to obtain. Strategic interests, on the other hand, refer to lasting changes in the gender relations that are likely to improve the long-term quality of life of those who have them.

It is established that the IDS deemed it important to respond to the very concrete practical needs, of girls in particular: to prepare them for the onset of their first menstrual period and the management of menstrual blood flow. Moreover, the IDS provides girls with concrete solutions to identified problems related to menstrual blood management. For example, in Activity 3 of Workshop 9 (Cf Table 2), problems like the lack of toilets and water at schools are identified, and elements that the pupils themselves can change (for example, raising awareness among peers that bullying and mocking contributes to girls' absenteeism) are highlighted. Table 4 summarises the problems and the possibilities for action brought by the IDS.



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*The IDS provides girls with concrete solutions to identified problems related to menstrual blood management.*

However, it is necessary to keep in mind, as recalled by Harrus-Revidi (2005), that “(...) to talk about women’s blood, is to talk of the differences between sexes, and to talk of the differences between sexes, is to introduce oneself into knowledge with is only as neutral as it claims to be.” Therefore, by addressing menstruation and therefore the body, the designers of the IDS have unconsciously shifted from responding to practical needs to responding to strategic interests. Within the IDS, questioning the representations around periods, putting words on biological realities and understanding the relationship to the body, especially via language, seem in the first instance aimed at meeting the practical needs of girls. But this could also help meet their strategic interests such as accessing education, gaining better knowledge and control over their own body and initiating changes in gender relations, as well as in their families and communities. Indeed, accessing quality information is a right that potentially enables the realisation of other rights: allowing girls and boys to access important information concerning their bodies can lead to the beginning of empowerment but also to an awareness of oneself and gender dynamics, for oneself and for people close to them. Thus, the choice to thematise puberty and in particular menstruation allows, in the Chadian context, the beginning of a response to the strategic interests of the girls. Moreover, putting words on things allows them to better understand changes caused by puberty, and in so doing leads to the beginning of empowerment in the management of their periods and their body, all while addressing broader related social issues. By enabling girls to go to school and receive information about their own bodies there, we therefore address a strategic interest - access to education impacts other areas such as their health,

*Accessing quality information is a right that potentially enables the realisation of other rights.*

*Putting words on things allows the beginning of empowerment in the management of their periods and their body.*



economic development opportunities and social status as a woman, while equipping them for autonomy and empowerment.

## CONCLUSION

Following the description of the results of the diagnosis of educational needs, the IDS and the way in which the educational needs expressed by Billoir and Borda (2017) were addressed by the IDS designers, the gender analysis was conducted around the themes of language, the body and practical needs and strategic interests. It has highlighted the importance of linguistic choices made within the IDS in relation to the construction of a sexual identity as well as the impossibility of neutrality when matters of the body are involved. Finally, the analysis has brought practical needs and strategic interests into dialogue, suggesting the shift between the two when an issue as the body is addressed.

The diagnosis opened on the hypothesis that *“it is difficult to talk about sexual and reproductive health in Moyen-Chari without looking at the status of the female body in the community - in particular, in with regard to her menstrual cycle.”* (Billoir & Borda, 2017). This established direct link between menstruation and the status of the female body, and consequently, between menstruation and a woman’s status, is the centre of the argument presented: it is the passage from the material, from the biological (biological functions) to the “symbolic”, to the social (legal and social status of women<sup>7</sup>). By addressing menstruation, the IDS necessarily touches on gender issues.

The analysis carried out remains partial and it would also be interesting to address the issue of gender through other entries such as gender neutral language, binarity, heteronormativity, gender mixity, the possible link between boys’ initiation and girls’ menstruation, as well as the role of each gender in the construction of the other. Moreover, while an analysis of the IDS allows for an appreciation of the needs and interests of girls and boys, and how they are addressed, it is only one of a number of factors that can influence girls’ rights, in particular their right to education. Other factors must also be taken into consideration, such as the role of facilitators - who should be trained in the implementation of a gender-sensitive pedagogy - as well as a broader analysis of the institutions (school governance, infrastructures, etc.) and policies affecting these issues.

Finally, it is necessary to consider that gender is experienced and reproduced differently, depending on language and culture (Butler, 2012). Therefore, it is important to take into account the context of elaboration of this IDS – it is possible that several choices were made consciously within the design team in order to allow this theme to be addressed without offending sensitivities – as well as the angle of view and analysis that has been carried out in this article.

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7 Here the term “woman” references the social construction (gender) and not to the assigned sex at birth.



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**Table 1.**

Identification of the strategy for remedying the **problem of school absenteeism for young girls having their periods** in Moyen-Chari, at the heart of the IDS “My body is changing”.

| Question  | Parts of an answer   | Status of the response within the IDS   |
|---|--|---|
| <b>What causes the problem?</b>   | <ul style="list-style-type: none"> <li>• Menstrual blood is taboo: people don't talk about it;</li> <li>• Girls are caught off guard by their first periods;</li> <li>• Girls don't know how to deal with the blood;</li> <li>• For some people, girls with their periods are women and they no longer have a place at school;</li> <li>• The lack of toilets and areas with water at school (particularly places reserved for girls)</li> </ul>   | <b>The main results of the diagnosis</b> , retaken in the introduction of the IDS |
| <b>What are the identified educational needs?</b>   | <ul style="list-style-type: none"> <li>• To precisely name the genital organs as well as the physiological phenomena linked to puberty;</li> <li>• To prepare the girls for the advent of their first periods and how to take care of their menstrual blood;</li> <li>• To help boys accept the beginning of puberty in girls without questioning the legitimacy of their place at school</li> </ul>   | <b>Vision</b> of the IDS  |
| <b>What knowledge is useful for students</b> , likely to help change the views on menstruation?   | <ul style="list-style-type: none"> <li>• Biological description and explanation of menstruation;</li> <li>• Management of menstrual blood: traditional practices and modern practices;</li> <li>• Representations around the subject of menstrual blood in the Sar environment;</li> <li>• Transition to adulthood and the rights of the child, according to international conventions;</li> <li>• Rites of passage to adulthood;</li> <li>• Psychological, biological and social consequences of puberty</li> </ul> | <b>Teaching-learning content</b> covered within the IDS                           |
| <b>How to learn</b> about menstruation so that it makes sense to students, and in a way that helps provide solutions to the problem identified? | <ul style="list-style-type: none"> <li>• Production of a brochure made for young people on the changes taking place in the bodies of girls and boys from childhood to adulthood;</li> <li>• Creation of sanitary towels to help girls manage their bleeding;</li> <li>• Put in place a supply schedule for water at school, allowing girls to wash their intimate areas when they are on their period</li> </ul>   | <b>Class project</b> proposed to the students within the IDS                      |

Source: Table created by the authors on the basis of the analysis by Billoir & Borda (2017) and ProQEB (2019).

**Table 2.**

Overview of the “My body is changing” IDS.

| Activities   | Learning objectives   |
|--|---|
| <b>PHASE 1 : REAL LIFE SITUATION</b>   |   |
| Neloumta and Magadji   | To identify the different representations on the topic of puberty<br>To establish behavioural rules   |
| Creation of a brochure   | To understand and adhere to one of the projects of the DS   |
| <b>PHASE 2 : LEARNING WORKSHOPS</b>  |   |
| <b>Workshop 1 – Earth and life sciences and Social sciences – Puberty</b>          |   |
| 1.1 The physical transformations during puberty                                    | To identify the different parts of the human body<br>To note the morphological differences: men, women, boy, girl at different ages   |
| 1.2 Puberty  | To understand and identify the morphological development during puberty   |
| 1.3 The physical transformations during puberty                                    | To identify and describe the physiological transformations and the changes in the young person’s mood during the period of puberty  |
| 1.4 Multilingual vocabulary  | To produce a provisional (collective) vocabulary on the scientific terms of sexual and reproductive health  |
| <b>Workshop 2 – Mathematics – Growth</b>   |   |
| 2.1 Questions of growth  | To understand the concept of growth (the change in height)  |
| 2.2 Decimal Numbers  | To measure height by using the unit of meters and centimetres<br>To convert units of measurements<br>To understand and use decimal numbers<br>To order decimal numbers                                |
| 2.3 Changes in size over time  | To measure time (months and years)<br>To extract information from a table<br>To interpret the meaning of decimal numbers in relation to units of measurement<br>To understand the concept of the mean |
| 2.4 Measuring growth   | To read a graph<br>To solve a problem to do with growth by using decimal numbers  |
| <b>Workshop 3 – Languages – Situation of the production of an explanatory text</b> |   |
| 3.1 The explanatory text   | To discover the explanatory text<br>To identify the situation of production and the characteristics of the explanatory text   |
| 3.2 Sorting texts  | To distinguish between several textual genres<br>To identify the explanatory genre in contrast with other textual genres  |
| 3.3 The organisation of the explanatory text                                       | To identify the different parts of the explanatory text   |
| 3.4 The title  | To identify the functions and constituents of a title<br>To formulate a title   |
| <b>Workshop 4 – Social sciences and Earth and life sciences – Menstruation</b>     |   |
| 4.1 Our thoughts on our periods  | To identify the representations of learners around the subject of menstruation<br>To confront the representations of learners around the representations of Chadian practices                         |
| 4.2 Thoughts of others on periods  | To confront the beliefs of learners with those of other communities around the world  |

**Table 2.** (suite)

| Activities  | Learning objectives  |
|---|--|
| 4.3 The scientific explanation of menstruation                        | To compare society's point of view and the scientific point of view on menstruation  |
| <b>Workshop 5 – Languages – The production of an explanatory text</b> |  |
| 5.1 Problematization  | To formulate relative questions on the topics or texts read  |
| 5.2 Introduction  | To produce the introduction of an explanatory text   |
| 5.3 Textual organisers  | To identify and use the markers of cause and consequence   |
| 5.4 Explanatory procedures  | To identify different explanatory procedures and their role (definition, comparison, reformation and recourse for example)<br>To use explanatory procedures          |
| 5.5 The explanatory part  | To produce the explanatory part  |
| <b>Workshop 6 – SVT – The hormonal system</b>                         |  |
| 6.1 Hormones during puberty   | To understand the role of the hormonal system in the physical changes and physiological changes during puberty   |
| 6.2 The hormonal system   | To explain the role of the hormonal system in metabolism and its function<br>Identify the organs in the hormonal system  |
| <b>Workshop 7 – Languages – The explanatory text</b>                  |  |
| 7.1 The nominal and pronominal repetition                             | To recognise anaphoric repetitions and their roles, in the explanatory text<br>To identify and use anaphoric repeats   |
| 7.2 Conclusion  | To produce the conclusion of an explanatory text   |
| <b>Workshop 8 – Mathematics – The menstrual cycle</b>                 |  |
| 8.1 The frequency of periods  | To know the menstrual cycle<br>To define the periodicity of periods and their variation  |
| 8.2 Duration of the periods   | To measure the length of periods   |
| <b>Workshop 9 – Social Sciences – The management of menstruation</b>  |  |
| 9.1 Menstrual symptoms  | To know and to comprehend how to better understand menstrual symptoms  |
| 9.2 Daily actions   | To acquire appropriate hygiene routines during each menstruation<br>To understand and fight against the discriminations faced by girls just because of their periods |
| 9.3 Attendance at school  | To understand the discrimination faced by girls<br>To explain that periods should not be an obstacle for school attendance   |
| <b>PHASE 3: CREATION OF A CLASS PROJECT</b>                           |  |
| The explanatory text  | To produce an explanatory text along the lines of changes in the body during puberty   |
| Consider the creation of sanitary towels                              | To create a sanitary towel (pad)   |
| Access to water for girls' intimate washing                           | To train in the exercise of an active, united and responsible citizenship  |

Source: ProQEB (2019).

**Table 3.**

Vocabulary on the scientific terms related to sexual and reproductive health which are given to students.

| French                   | Arabic                    | National language (s)<br>(Using Sar as an example) | Definition  |
|--------------------------|---------------------------|--|---|
| Puberty                  | غولبلا                    | Kəba mandə / tɔgə balsa                            | Period between childhood and adulthood, where many changes appear. Growth accelerates and the sexual organs develop.  |
| Genital or sexual organs | سنجلا وأقيلسانتلا ءاضعألا | Loo dəyā / loo dəngam                              | Organs in our body which exist to help us reproduce, that is to say to give birth to new humans. In women it is the “vagina” and in men it is the “penis”.  |
| Testicles                | ناتيصخلا                  | Ndam / gum   | Testicles always come in pairs; they are situated under the <u>penis</u> . Testicles are the <u>male genital glands</u> that produce <u>sperm</u> .   |
| Penis or rod             | بيضقلا                    | Mətə / bar   | The penis is the <u>sexual and urinary organ</u> of a man and certain <u>male animals</u> .   |
| Vagina                   | لبجمللا                   | Ngir   | The vagina is the sexual organ of a female.   |
| Periods or menstruation  | ضريحلا وأقيرهشلا قروءلا   | Mosə kəhɔ  | Menstruation, which people often call periods, is the flow of blood which marks the beginning of the menstrual cycle. This blood comes from the <u>uterus</u> of a woman.   |
| Hormones                 | تانومرهلا                 | « ɔrmɔn »  | Hormones are the <u>molecules</u> produced by certain <u>organs</u> , in living beings (humanity for example). They serve to transmit messages from one organ to several others. The hormones travel mainly in the <u>blood</u> (which travels everywhere in the body). |
| Erection                 | باصتنإ                    | Mətə kji / Mətə bay                                | An erection is the reaction in which the <u>penis</u> grows, stands up and becomes hard. The erection occurs during sexual arousal or even for no reason. It supports itself during <u>sexual pleasure</u> .  |
| Ejaculation              | فندقلا                    | Loo bokə man dəngam                                | From <u>puberty</u> , an erection can lead to <u>ejaculation</u> during <u>intercourse</u> or by <u>masturbation</u> . Ejaculation is the release of <u>sperm</u> by a man.   |
| Sperm                    | يؤنجللا لئأسلا            | Man dəngam   | Sperm is a thick white liquid forced out by the <u>penis</u> during ejaculation.  |

Source : ProQEB (2019), p. 20.



**Table 4.**

Actions proposed within the IDS to help girls manage their periods in a school environment.

| Problem   | Actions   |
|---|---|
| No toilets to get changed in  | Build private and clean space for girls<br>The girls provide spare towels .   |
| Fatigue<br>Pain   | Go to the school nurse if there is one<br>Have medicines available in the school, such as paracetamol<br>Refer girls to the nearest health centre if the pain and tiredness is too much.  |
| Bullying  | Make classmates aware that bullying plays a part in young girls missing school.   |
| Unexpected periods, stains on clothes   | Know one's own menstrual cycle and calculate when the next ones will arrive<br>Provide extra clothes/sanitary towels<br>Establish a system whereby two girls commit to helping each other during their periods, watching for signs of oozing blood on their clothes, guarding the door of a toilet to allow each other to change in private, etc.<br>Encourage boys to stand by girls and not mock or bully them. |
| Questions about puberty, on the changes in the body (a breast which grows and not the other one, breasts that grow in a boy, no period by 15) | Direct the student towards health centres – the student (male or female) must learn that he/she can go to an appointment<br>Organise a meeting at the midwifery school with students so that the students know about and feel at ease going to an appointment at the health centre.   |
| No water and vase   | Install a bucket in a corner with a vase which can be used to wash intimate parts of the body (water also for washing hands with soap).   |

Source: ProQEB (2019), p. 69.

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# Plan International’s “Girls’ Rights Platform”: towards the effectiveness of children’s and women’s rights

## **Plan International**

The Convention on the Rights of the Child states in Article 2 that “*States Parties undertake to [...] ensure that every child within their jurisdiction, without discrimination of any kind, irrespective of the child’s or their parent’s or legal guardian’s race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status*”.

The Convention on the Elimination of All Forms of Discrimination against Women states in Article 4 that “*States Parties condemning discrimination against women in all its forms, agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women*”.

In many countries, however, girls are the primary victims of child and women’s rights violations and are subject to discrimination and violence. They experience what can be identified as double discrimination: because of their age and because of their gender (Plan International, 2017). This gap between what is stated in international law and the factual reality in many countries refers to the notion of the effectiveness of law.

*In response to the discrimination and violence suffered by thousands of girls around the world, Plan International has set up the Girls’ Rights Platform to raise the profile of girls’ rights to ensure they are respected and, more generally, to strengthen the position of girls in international law and highlight their plight.*

The effectiveness of law is not clearly defined and involves complex theoretical questions. However, whatever definition one adopts of effectiveness, it appears that this notion refers to the application of the law in practice, or in other words to the passage from the statement of the legal norm to its concretisation and implementation in practice (Champeil-Desplats, 2008).

In response to the discrimination and violence suffered by thousands of girls around the world, Plan International has set up the Girls’ Rights Platform to raise the profile of girls’ rights to ensure they are respected and, more generally, to strengthen the position of girls in international law and highlight their plight.

The position of girls in international law therefore raises the question of the effectiveness of human rights, and in particular the rights of the child and the rights of women.



The challenge here is not so much to resolve these far-reaching questions as to try to show the contribution of the girls' rights platform to the effectiveness of human rights.

**“GIRLS’ RIGHTS”:  
IDENTIFYING A LEGAL GAP IN INTERNATIONAL LAW**

12 million girls are forcibly married each year. 200 million girls and women alive today have been subjected to female genital mutilation/cutting. Half of all sexual assaults are committed against girls under the age of 16. In view of these few figures, it is reasonable to say that girls are particularly discriminated against.

In 2017, Plan International published a report entitled “Girls’ rights are human rights, an in-depth study of the status of girls in international law” in which an analysis of existing references to girls and their rights in more than 1,300 international law documents, over an 87-year period from 1930 to 2017 was conducted. The report shows that international law does not accurately reflect the situation of girls.



Although international law tends to protect the rights of all human beings, there are in fact very few clauses in human rights treaties that set out girl's rights specifically.

Two conventions on women's and children's rights are fundamental to the protection and promotion of girls' rights: the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child. Girls are rarely referred to or mentioned as a demographic entity in their own right in these two conventions, and when they are, it does not do justice to the obstacles they face. The Convention on the Rights of the Child is gender neutral and the Convention on the Elimination of All Forms of Discrimination against Women sets out the rights of women of all ages. These age- and gender-neutral approaches make girls invisible in this legislative process.

*Although international law tends to protect the rights of all human beings, there are in fact very few clauses in human rights treaties that set out girl's rights specifically.*

It also appears that while girls are mentioned more in soft law documents, they are often simply added to the term 'women'. Thus, soft law documents often do not refer to the rights of girls in their childhood and adolescence, but to adult women.

This report identifies a legal gap in international law, that of the rights of girls. Identifying the concept of a legal vacuum, which refers to the absence of standards applicable to a given situation, is a first step towards the full effectiveness of children's rights and women's rights.

## **A NEW READING OF EXISTING LEGAL INSTRUMENTS**

Beyond identifying the existing legal vacuum in terms of girls' rights, Plan International calls on the international community to recognise the specificities of girls, and fulfil their rights so their needs are met. The affirmation of girls' rights as specific rights brings a new reading of existing legal instruments.

Firstly, women's rights and children's rights are seen as interdependent. On the one hand, the ratification of the Convention on the Elimination of All Forms of Discrimination against Women and the Convention on the Rights of the Child is an absolute prerequisite for guaranteeing girls' rights. On the other hand, these legal instruments need to be adapted to the specific reality of girls so that girls' rights can be fully respected.

In practice, asserting the rights of girls involves both a clear differentiation between the human rights of girls and those of women, and the use of gendered rather than neutral language. These rights also imply increased interaction between the CEDAW and CRC Committees. Plan International recommends that UN Women and UNICEF broaden

their focus on girls; differentiate between “women” and “children”; and strengthen co-operation between these agencies to prioritise girls.

Placing girls at the heart of the international agenda is therefore both a call for the ratification of the conventions on children’s and women’s rights and a call to close the gap between women’s rights and children’s rights that renders girls invisible. Thus, this new, more specific reading of children’s rights and women’s rights guarantees a better application of these rights.

## CREATING A SPACE FOR DIALOGUE AND TRAINING IN THE INTERNATIONAL AGENDA

Plan International is working to put girls at the heart of the international agenda. It is within this framework that the Girls’ Rights Platform was developed. This platform offers several tools to strengthen the visibility of girls’ rights in international policies:

- the human rights database provides a specific terminology of these rights which contributes both to safeguarding the progress made so far in this field and to creating a legal lexicon;
- the platform also acts as a training hub providing key elements for understanding the issues related to the specific situation of girls in its report and the resulting fact sheets.

The platform developed by Plan International is aimed at NGOs, activists, diplomats and UN agencies. It gives civil society tools to ensure the protection and effectiveness of girls’ rights.

While international law renders girls invisible, with this platform, Plan International offers a space for political dialogue and tools to hold states to account. International law is a law of states created by states for states. By positioning girls as an international policy priority, Plan International is affirming the role of civil society as one of the watchdogs for the effective implementation of human rights. In a broader sense, the Girls’ Rights Platform represents a contribution to the democratisation of international law.

*The platform developed by Plan International is aimed at NGOs, activists, diplomats and UN agencies. It gives civil society tools to ensure the protection and effectiveness of girls’ rights.*



## CONCLUSION

The latest report from Plan International and the Girls' Rights Platform aims to strengthen the position of girls in international law and highlight their challenges. The very reason for the existence of this platform – the identification of a legal vacuum in international law – puts girls' rights high on the international agenda. A re-reading of existing legal instruments reminds us of the interdependence between girls' rights on the one hand, and children's rights and women's rights on the other. The call for ratification of the conventions and the closing of the gap between women's and children's rights that renders girls invisible contributes significantly to the effectiveness of these rights. Finally, by equipping civil society to respond to the protection of girls' rights, the Girls' Rights Platform strengthens their role in the enforcement of international law and takes a step towards its democratisation.

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# Conclusion

## RECOMMENDATIONS FOR AN INTEGRATED APPROACH TO WOMEN'S AND CHILDREN'S RIGHTS IN DEVELOPMENT COOPERATION

Carlo Santarelli, *Enfants du Monde*

The articles collected in this book allow us to recommend that in development cooperation programmes, children's rights or women's rights should be promoted and implemented within a systemic human rights approach. This is also what the SDC reminds us, by promoting a human rights-based approach in all its cooperation engagements<sup>1</sup> and providing tools for its implementation throughout the programme cycle, as part of a systemic vision. Recognising the social interdependence of women and children and how this is embodied in context-specific social practices is also essential.

It is also clear from the discussions of the working groups behind this publication that although many development cooperation actors have already considered the issue, many still treat children's and women's rights issues separately. It remains difficult to integrate a systematic approach to the subject at all levels of intervention, which is often at odds with targeted projects or institutional specialisations. The separation between these two fields of law is also reflected in the governance systems and public policies of many countries with which development cooperation actors have to deal.

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<sup>1</sup> TCS (2019). SDC's Human Rights Policy for Development - towards a life in dignity, freedom and peace. Swiss Agency for Development and Cooperation (SDC), Bern.

In order to contribute to greater coherence in the interventions of development cooperation actors with internationally promoted human rights values, we propose the following recommendations:

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**Internationally:**

- Promote joint work between the CRC and CEDAW Committees, in order to give substance to an inclusive approach to human rights, which emphasises the convergence and natural complementarity of women's rights and children's rights.
- Increase the visibility of girls' rights and strengthen the position of girls in international law and development programmes.

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**In the context of field interventions:**

- Favour a systemic approach that does not focus solely on children's or women's rights, but embraces a sustainable development approach, based on all human rights. An analysis grid could be developed.
- Recognise the social interdependence of children and women within any intervention.
- Build on existing successful strategies for the implementation of children's rights and women's rights.
- Rely on local agents of change, including children, youth and women, and don't forget to involve men!
- Helping to value (socially and financially) the care and attention given to children by women, while seeking greater involvement of men.
- Contribute to changing stereotypes about masculinity and femininity, particularly in education programmes and in teaching-learning approaches and content in schools.
- Build partnerships with other NGOs and academic actors in order to bring together the skills needed for a systemic and quality approach, especially during the diagnosis.

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**Within our own organisations:**

- Promote gender diversity and gender-sensitive language, as well as gender equality.
- Train our staff in the gender approach, which is sometimes misunderstood or insufficiently applied.

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The implementation of an integrated approach to women's and children's rights in development cooperation remains an open field: the approaches discussed in this book need to be fleshed out and nourished by new practices that we will try to promote. In particular, we invite all readers of this book to actively contribute to these approaches within their own organisations by sharing them with contributing organisations and more widely.



# Author Biographies

## **MOUNA AL AMINE**

Born in Lebanon in 1983, Mouna Al Amine studied political science in Geneva. She joined *Enfants du Monde* in 2010 after having had various experiences working with NGOs and continued to train, notably in interculturality and gender issues within the field of development, by completing postgraduate qualifications. As a programme officer, she acts as a kind of focal point within the organisation, in connection with projects, but also in a cross-disciplinary and institutional manner.

## **VALÉRIE BICHELMEIER**

Valérie Bichelmeier trained as a computer telecommunications engineer and worked in this field for ten years in large companies in France, Japan and Hong Kong.

Returning to Japan to follow her husband's professional transfers, she then made the first change in her career path to marketing and business strategy consulting, working for 3 years with the Japanese subsidiary of a French consulting firm specialised in the telecommunications field. This was a business she continued to work for, for a few years in Munich, Germany, in collaboration with the same consulting firm.

A new family move brought her to Geneva where she joined Make Mothers Matter, marking the occasion of a second change in her career path, to immerse herself in the international world of the UN, and to defend a cause that is dear to her: better valuing the work of mothers and their essential role in our societies, and advocating for the implementation of policies that support them in this role.

Valerie Bichelmeier has been the senior representative of Make Mothers Matter at the UN in Geneva for the past ten years. She has also been a member of the Board of Directors since 2012 and Vice-President of the association since 2018. She is the mother of three children who are now adults.

## **SUSANA BORDA CARULLA**

Susana Borda Carulla is an Education for Sustainable Development Specialist and is a focal point for Child Protection for *Enfants du Monde*. As a trained anthropologist, she studied the tensions between children's rights and women's rights in the context of the state-run crèche programme in Colombia, and has conducted a diagnosis of children's educational needs in Moyen-Chari (Chad) in terms of sexual and reproductive health. Her doctoral thesis won her the 2018 Veillard-Cybulski Prize.

## **CECILIA CAPELLO**

Cecilia is a medical doctor with a Master's degree in international health and has been working in development cooperation for 18 years. She has been a Health Specialist at *Enfants du Monde* since 2010. After 8 years of involvement with international NGOs as a medical coordinator in Africa, she has been working with *Enfants du Monde* since 2010 with a focus on health promotion and maternal and neonatal health, supporting

Ministries of Health and local NGOs in the development of training for educators and healthcare providers, in the development of pedagogical and health education materials, and not least, by means of digital tools.

### **NICOLE CURTI KANYOKO**

Nicole is a public health doctor with a degree in tropical medicine. She has worked for international NGOs, multilateral and bilateral development agencies in Europe, the East and West Africa. For 20 years, she has supported governments, ministries of health, local authorities and civil society organisations in strengthening health systems, non-communicable and communicable diseases and in promoting health and rights related to maternal and infant health.

### **SUNA HANÖZ-PENNEY**

Suna Hanöz-Penney works as the Director of International Programmes at AÇEV - Foundation for Mother and Child Education, based in Istanbul, Turkey. Her work consists of establishing and nurturing collaborative partnerships with local organisations for the implementation of educational programmes developed by ACEV, both in Turkey and abroad. Such partnerships have been established in many countries, including Lebanon, Saudi Arabia, Laos and Brazil.

Her work focuses on the design and supervision of early intervention programmes for children and families. Suna Hanöz-Penney is co-author of ACEV's Maternal Early Childhood Education and Support Programme (MOCEP). She is therefore able to provide key technical expertise to national and international partners in the design, management, implementation, and evaluation of the results in the field of parent training and development programmes.

Suna Hanöz-Penney holds an M.A. in Early Childhood Education from Teachers College, Columbia University, and an MBA from the John F. Kennedy School of Government, Harvard University. Suna Hanöz-Penney is a Fulbright Scholar.

### **PHILIP D. JAFFÉ**

Trained in clinical and forensic psychology in Switzerland and the United States, Philip D. Jaffé is a professor at the University of Geneva. He co-founded and, until 2019, directed the Centre for Children's Rights Studies of the University of Geneva, located in Sion, Valais. In 2018, on the proposal of Switzerland, he was elected member of the Committee on the Rights of the Child at the United Nations.

For many years, his academic and professional activities have focused on the field of children's rights from a protection perspective. He is also a specialist in child participation in the civil and criminal justice system and in juvenile detention issues. He has also conducted clinical consultations and training for a wide range of international humanitarian, governmental and non-governmental organisations.

Philip D. Jaffé is a registered psychotherapist and still enjoys working part-time in his private practice and provides expertise for tribunal courts.

Beyond the traditional “teach, research, publish or perish” assignments required by a great university, his vision of the academic role is to serve both the community and the city as a practising scientist.

### **ÖZLEM LAKATOS**

Ozlem Lakatos is a doctoral student and research and teaching assistant at the Centre for Children’s Rights Studies of the University of Geneva. She has an interdisciplinary background in law and political science. She studied in France, Canada, Switzerland and Belgium.

Özlem has worked as a researcher at the Directorate General for International Relations and Strategy (DGRIS) of the Ministry of Defence in Paris, as well as for the Permanent Representation of the *Organisation Internationale de la Francophonie* (OIF) to the United Nations in Geneva, and for the Council of Europe in Strasbourg. She has also carried out several volunteer missions in the field of children’s rights in Senegal and Bulgaria. She is currently writing a doctoral thesis in social sciences at the University of Geneva where she is taking a gender and postcolonial approach to addressing the issue of representation and rights of “girls” in the international sphere. Her thesis is entitled: “Universal category, specific rights? From the rights of the child to the rights of ‘girls’ at the United Nations (1989-2019)”.

### **CARLO SANTARELLI**

Carlo Santarelli has been Secretary General of *Enfants du Monde* (EdM) since 2003. Carlo Santarelli graduated in Geography and Political Science from the University of Geneva and also obtained a Diploma in Development Studies from the Graduate Institute of Development Studies (IUED) in Geneva. Prior to assuming his position as Secretary General of EdM, Carlo Santarelli was responsible for programmes in Latin America and Africa since 1988, within EdM and *Geneva Tiers-Monde*. He has been a member of several national committees and foundation boards, and is currently a member of Education21. He is the author of the Strategic Health Promotion Framework “Working with Individuals, Families and Communities to Improve Maternal and Newborn Health” (IFC Framework), developed under a World Health Organization (WHO) mandate and mobilised within EdM’s health programmes.











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