Preventing child maltreatment through multisectoral action in the Philippines

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Building Support for the Primary Prevention of Child Maltreatment

2010
- National Multisectoral Consultative Meeting on Strengthening Responses to Child Maltreatment
- Formation of National Steering Committee

2011-2015
- Proposal for National Prevalence Study on Violence Against Children
- National Consultation on a Parenting Program

2015
- Completion of the National Baseline Study on Violence Against Children
- Review of the Drivers of Violence Against Children

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### National Baseline Study on Violence Against Children, 2015

<table>
<thead>
<tr>
<th>Type of Violence</th>
<th>Lifetime Prevalence</th>
<th>Current Prevalence (Last 12 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Violence</td>
<td>66.3%</td>
<td>35.1%</td>
</tr>
<tr>
<td>Psychological Violence</td>
<td>59.2%</td>
<td>33.0%</td>
</tr>
<tr>
<td>Sexual Violence</td>
<td>17.1%</td>
<td>1.6%</td>
</tr>
<tr>
<td>Severe Physical Violence</td>
<td>2.3%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Severe Psychological Violence</td>
<td>7.9%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Severe Sexual Violence</td>
<td>3.2%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Bullying</td>
<td>65.0%</td>
<td>35.4%</td>
</tr>
</tbody>
</table>

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COMMUNITY STAKEHOLDER STUDY

• Response to VAC mainly reactive.
• No separate budget for child protection and no unified program.
• Municipal social workers expected to take charge of all social development programs, from conditional cash transfer programs to services for the elderly, migrants, children, etc.
• In terms of prevention readiness, most are in the pre-planning and preparation stages.
COMMUNITY STAKEHOLDER STUDY

• High acceptability of corporal punishment by everyone.
• Parenting programs may be a key intervention.
• Child protection service providers lack prevention skills.
• Availability of services depends on resources: cities have more resources than municipal towns.
• NGOs important in initiating innovative programs, but these are few and mostly in the cities.

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Identifying the drivers of violence against children

- Scientific and grey literature reviewed
- Secondary analysis of the 2014 Philippines Demographic Health Survey
Socio-Ecological Model for Child Physical Abuse in the Home, Philippines

- Socioeconomic disadvantage
- Normality of corporal punishment in the community
- Violent neighborhoods
- Availability of alcohol
- Presence of drugs

- Parental History of PA
- Parental education
- Parent believes in the necessity of corporal punishment
- Financial stress
- Substance abuse esp alcohol
- Externalizing problems (child)

Cultural norms supportive of violent discipline
Weak legislation preventing child corporal punishment & PA
Poverty as a stressor
Migration

Domestic violence
Poor Parenting
Migrant parent/s
Structural Drivers and the SDGS
Violence Prevention in All Policies

- High Poverty
- Lack of Employment
- High Inequality
- Violent Neighborhoods
- Frequent Disasters
- Climate Change
- Areas of Armed Conflict
- Poor Implementation of Laws

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Health Impact Pyramid for Interventions for Child Physical Violence
(Adaptation of Frieden’s Health Impact Pyramid, 2010)
Philippine Conditional Cash Transfer Program
(4Ps: Pantawid Pamilyang Pilipino Program)

• *social assistance*, giving monetary support to extremely poor families to respond to their immediate needs; and

• *social development*, breaking the intergenerational poverty cycle by investing in the health and education of poor children.
4P Conditions:

- Pregnant women must avail pre- and post-natal care, and be attended during childbirth by a trained professional;
- Parents or guardians must attend the family development sessions, which include topics on responsible parenting, health, and nutrition;
- Children aged 0-5 must receive regular preventive health check-ups and vaccines;
- Children aged 6-14 must receive deworming pills twice a year; and
- Children-beneficiaries aged 3-18 must enroll in school, and maintain an attendance of at least 85% of class days every month.

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Parenting for Life-long Health Philippines

- Philippine Ambulatory Pediatric Association
- Ateneo de Manila University
- Department of Social Welfare and Development
- Oxford University
- University of Cape Town
- Bangor University
- Child Protection Network Foundation
- UNICEF Philippines
- Optimus Foundation

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Parenting for Lifelong Health Philippines

- Proof-of-concept study

- Phases of the research:
  - Cultural adaptation;
  - Training of 32 facilitators;
  - Delivery of parenting modules to 240 families

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Framework for prevention of child maltreatment and associated impairment and the SDGs

- Prevention before occurrence
- Prevention of recurrence
- Prevention of impairment

- Physical abuse
- Sexual abuse
- Psychological abuse
- Neglect
- Exposure to intimate-partner violence

- Mental Health
- Alcohol & Drug Rehab

- Long-term outcomes

- Universal
- Targeted

- Parenting Programs
- Home Visitation
- 4Ps

- Multi-sectoral services for abused children & their families (WCPUs)
- WCPD, Family Courts
- Parenting for Lifelong Health

- 4 Quality Education
- 1 No Poverty
- 3 Good Health
- 5 Gender Equality
- 16 Peace and Justice Strong Institutions
Collective Impact

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