

PROTECT:
A Communication Strategy to End Violence
and Unnecessary Family Separation in Cambodia
2019-2024

Strategy



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Contents

Acronyms	3
Chapter 1: Background and situation analysis	4
Background	4
Situation Analysis	6
Role of C4D in addressing violence and family separation.....	7
Chapter 2: Conceptual framework for the strategy	9
Strategy development process	9
Social and behaviour change process	10
Cambodia PROTECT framework	10
Overall strategic approach.....	14
Chapter 3: Communication goals and objectives	17
National response to violence and family separation.....	17
Communication goal	22
Communication objectives	22
Participant groups	24
Expected behaviour and social change	26
Key messages	27
Chapter 4: Communication approaches and activities	36
Integrated entertainment-education	36
Mass media	38
Interactive communication technologies (ICTs)	40
Community engagement.....	41
Advocacy.....	44
Chapter 5: Implementation and next steps	47
Appendices	50
Appendix 1: Key determinants of VAC and residential care	50
Appendix 2: Media reach and communication landscape	57
Appendix 3: List of in-country consultations	60
Appendix 4: Rationale for an integrated entertainment-education approach.....	62



Acronyms

CCWC	Commune Committees for Women and Children
CDHS	Cambodian Demographic and Health Survey
C4D	Communication for Development
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
CVACS	Cambodia Violence Against Children Survey
E-E	Entertainment-Education
ICT	Interactive Communication Technologies
IVR	Interactive Voice Response
LGBTs	Lesbian, Gay, Bisexual and Transgender
M&E	Monitoring and Evaluation
MOCR	Ministry of Cults and Religion
MOI	Ministry of Information
MOSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation
MOWA	Ministry of Women's Affairs
RGC	The Royal Government of Cambodia
SSC	School Support Committees
SDGs	Sustainable Development Goals
SMS	Short Message Service
TOC	Theory of Change
TWG	Technical Working Groups
UNICEF	United Nations Children's Fund
VAC	Violence Against Children
VHSG	Village Health Support Group
WCCC	Women's and Children's Consultative Committee

Chapter 1: Background and situation analysis

Background

The Royal Government of Cambodia (RGC) signed and ratified the United Nations Convention on the Rights of the Child (CRC) in 1992. It is thereby committed to protecting and ensuring the rights of all children. The RGC has also ratified a number of other key international conventions aimed at the protection of children's rights, including the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the United Nations Declaration on the Rights of Indigenous People. Furthermore, the Constitution of Cambodia's Articles 31 and 48 require the State to recognize and respect human rights conventions and recognize the rights of children as stipulated in the CRC, particularly the right to life, education, and freedom from economic or sexual exploitation. To prevent violence against children, the RGC has promulgated legislation on violence, abuse, exploitation, and neglect; education and welfare; family and alternative care; and children involved with the justice system, as well as national and sub-national policies such as the *National Action Plan on Child Development* (2016-2018) and the *National Action Plan to Prevent and Respond to Violence Against Children* (2016-2020).¹

Cambodia's response to violence against children (VAC) is part of an ongoing global movement to end violence against children initiated by the *United Nations Secretary General's Study on Violence against Children* and integrated, more recently, in the Sustainable Development Goals (SDGs). As the first global report on VAC, the *United Nations Secretary-General's Study* made a clarion call for the need to prioritize prevention, promote non-violent values, awareness raising and end impunity relating to all forms of VAC.² The SDGs provide a global framework and set of goals to guide development priorities from 2016-2030 and include a new emphasis on child protection and addressing violence against children.

According to the *Cambodia Violence Against Children Survey* (CVACS),³ more than half of all Cambodian children have experienced some form of physical violence prior to the age of 18. Roughly one-quarter of Cambodian children reported having been emotionally abused by a parent, caregiver or other adult relative while growing up and about 5 per cent of both females and males aged 13 to 24 reported some form of sexual abuse prior to the age of 18. Among the children who experienced violence, a high proportion (70-80 per cent) reported multiple instances of violence. Furthermore, the CVACS data indicates that different forms of violence are often overlapping, with approximately 1 in 5 children experiencing more than one form of violence during their childhood. Evidence also indicates that gender and disability are among the key determinants of violence.

Despite a growing body of international research demonstrating that the institutionalization of children negatively impacts their social, physical, intellectual and emotional development, an increasing number of children in Cambodia are placed in residential care by their parents or extended family. Since 2005, Cambodia has seen a 75 per cent increase in the number of residential care facilities with a reported 406

¹ Ministry of Women's Affairs (2016). Action Plan to Prevent and Respond to Violence against Children 2016-2020. Royal Government of Cambodia, Steering Committee on Violence against Children, and Ministry of Women's Affairs. Henceforth referred to as the Action Plan on Violence.

²The United Nations Secretary-General's Study On Violence Against Children. (2006). Available at: www.violencestudy.org

³ Ministry of Women's Affairs, UNICEF Cambodia, US Centers for Disease Control and Prevention. (2014). Findings from Cambodia's Violence Against Children Survey. 2013.

facilities in 2016 housing almost 16,579 children (MOSVY, 2016).⁴ Among the children in residential care, 3 out of 4 are not orphans and have at least one living parent. Residential care is contrary to traditional Cambodian practices of family or community-based alternative care and places children at increased risk of neglect, emotional, physical and sexual abuse (UNICEF Cambodia, 2011).⁵

To this end, Rain Barrel Communications was tasked with developing a Communication for Development (C4D) strategy to address the social and behaviour changes required to prevent and respond to violence against children and unnecessary family separation. Specifically, the tasks for this assignment include:

- A Desk Review (Deliverable 1)
- A Conceptual Framework for the Strategy (Deliverable 2)
- A C4D Strategy (Deliverable 3)
- A Monitoring and Evaluation (M&E) Framework (Deliverable 4)
- A Costed Implementation Plan (Deliverable 5)
- A Final Consultation Workshop with National Stakeholders (Deliverable 6)
- A Final Strategy Package (Deliverable 7)

The strategy we propose here – in line with the Terms of Reference of the project – is national in scope, with focused implementation initially in five focal provinces (*see Figure 1*). The focal provinces are Phnom Penh, Kandal, Preah Sihanouk, Battambang, and Siem Reap. Subsequently, it is anticipated that partners can take on the implementation of the strategy in additional districts, using the same package of materials, messages, activities and indicators. The strategy provides an overall vision with a framework, measurable objectives and proposed activities for a five-year programme period covering 2019- 2024. The implementation plan details the activities and costs for the first phase of the strategy (2019 -2021), allowing for mid-term amendments and improvements to the design for the second phase (2022-2024). The strategy responds to the social and cultural norms that legitimize violence against children and support the belief that residential care facilities are beneficial to a child, by addressing knowledge, attitudes, practices and the underlying determinants that perpetuate violence and institutionalization. The strategy promotes positive parenting practices by supporting parents, caregivers and other duty-bearers to recognize the different forms of violence that threaten the well-being of their children, reiterating the importance of keeping families together and enabling them to take positive protective actions.

⁴ Ministry of Social Affairs, Veterans and Youth Rehabilitation (2016). Mapping of Residential Care Facilities in all 25 Provinces.

⁵ UNICEF Cambodia. (2011). With the Best Intentions... A Study of Attitudes Towards Residential Care in Cambodia.



Figure 1: Map of Cambodia

Situation Analysis

In Cambodia, as in countries across the globe, VAC covers a range of types and manifestations including but not limited to: physical violence, emotional violence, sexual abuse, neglect, trafficking, child marriage and child labour. Below is a snapshot of available evidence on VAC and residential care in Cambodia compiled from the national research studies and reports included in the Desk Review. The key determinants of violence and residential care in Cambodia are detailed in Appendix 1 and additional data and analysis have been provided in the Desk Review (Deliverable 1).

- **Physical violence:** About 1 in 2 children reported experiencing physical violence, making it the most frequent type of violence experienced by Cambodian girls and boys. In schools, the most common forms of physical violence were bullying, fighting, and beating by other students and corporal punishment by teachers.
- **Emotional violence:** An estimated 30 per cent of Cambodian children experienced emotional violence in the home by a parent or caregiver. This is perhaps a low estimate as emotional violence is not widely considered to be a form of violence by Cambodians. Children described being “blamed” and “cursed at” by parents, actions that made children feel “sad”, “depressed”, and “demotivated to study” and incited confusion as to what they had done wrong. Children said they would prefer if parents engaged in positive parenting practices, i.e., explained the situation, gave them advice, and engaged with them.
- **Sexual violence:** There is limited data on the prevalence of sexual violence. Sexual abuse affects an estimated 5 per cent of Cambodian children, although this is likely an underestimate as sexual violence tends to be underreported globally. While few respondents reported incidents of sexual abuse, as many as 24 per cent of females and 9 per cent of males who reported having had sex as a child reported that their first sexual encounter was “unwanted.” Moreover, the strong cultural stigma and shame associated with sexual abuse also suggests that these prevalence figures

underestimate the prevalence of sexual abuse among both boys and girls. In fact, among 18-24 year olds who experienced sexual abuse, half of females and only one in five males told anyone about the incident and only a third of females and less than 6 per cent of males sought help.

- **Child marriage:** An estimated 23 per cent of females and 6.5 per cent of males aged 18-49 reported living with their first partner in a marriage union before the age of 18 years. The rate of child marriage is much lower among individuals currently under the age 18, with only 6.5 per cent of females and 0.6 per cent of males reporting being married. Women from the lowest income quintile were two and half times more likely than their wealthier peers to have been child brides. Child marriage appears to be more of an issue in ethnic communities in the North East of Cambodia than in the rest of the country.
- **Child Labour:** Roughly 19 per cent of children in Cambodia are economically active and of those, about 57 per cent are child labourers and 31 per cent are engaged in hazardous labour. Older children appear to be more likely to be engaged in hazardous labour. Child labourers tend to work in the following sectors: agriculture, forestry, and fishing, manufacturing, trade, construction, and food and accommodation services.
- **Neglect:** There is limited data on neglect. The Cambodian Demographic and Health Survey (CDHS) was the only study that measured neglect, and even then the term was narrowly defined as inadequate care (i.e., a child being left alone for an hour or more). Data suggests that one in 10 Cambodian children under five receive inadequate care.
- **Trafficking:** Evidence on trafficking is difficult to obtain, given that most of it occurs clandestinely or “underground”. Cambodia is considered to be a “sending country”, “receiving country”, and “transit country” in the trafficking industry, indicating multiple risk factors for internal and cross-border trafficking for purposes of sexual exploitation and child labour.
- **Residential Care:** In recent years, Cambodia has witnessed a sharp increase in the number of residential care facilities. From 2005-2010, an estimated 44 per cent of children were placed in residential care by their parents or extended family. This worrisome trend is occurring despite legislative efforts to curb residential care such as the Policy on Alternative Care for Children (2006) and the Minimum Standards on Alternative Care for Children (2008) and despite Cambodian traditions of caring for vulnerable children within kinship care.

Role of C4D in addressing violence and family separation

“Communication for Development stresses the need to support two-way communication systems that enable dialogue and that allow communities to speak out, express their aspirations and concerns and participate in the decisions that relate to their development”

UN General Assembly Resolution, 1996

Globally and within UNICEF there is compelling evidence of the powerful role C4D can play in advancing human development and community participation (Inagaki, 2007; Lennie & Tacchi, 2011; UNICEF,

2009).^{6,7,8} Communication for Development has been used for several decades as a means of improving the situation of children and families by promoting health, nutrition, sanitation, education and numerous other dimensions of human rights. Communication is central to fostering social change and can inform, influence, motivate, engage and empower individuals and communities (Servaes, 2008).⁹

In order to address VAC, C4D can play a key role for prevention by raising awareness of the negative impacts of violence, enhancing knowledge and skills for alternative actions and by promoting protective parenting practices. It can build upon existing good practices, identify positive role models and build confidence, including among those most marginalized. Communication for Development also plays an important role in transforming attitudes, values and norms that condone physical violence, sexual abuse, exploitation, unnecessary family separation and gender-based harmful traditional practices. When abuse, exploitation or harmful practices do occur, communication can break the silence and impunity surrounding these offences and can promote disclosure, reporting and reintegration (Sood & Cronin, 2014; WHO, 2010; UNICEF, n.d.; Usdin, Scheepers, Goldstein, & Japhet, 2005).^{10,11,12,13} Overall, C4D can address both the prevention and response dimensions of child rights violations by generating awareness and dialogue, garnering commitment and encouraging actions by families and children themselves to end such practices.

⁶ Inagaki, N. (2007). Communicating the Impact of Communication for Development: Recent Trends in Empirical Research. Working Paper No. 120, World Bank, Washington, DC.

⁷ UNICEF (2009). Communication for Development (C4D) Realizing Strategic Shifts and Accelerating Results for Children. Position Paper. Available at: <https://www.unicef.org/cbsc/files/C4D-Position-Paper.doc>

⁸ Lennie, J. and Tacchi, J. (2011). Researching, Monitoring and Evaluating Communication for Development: Trends, Challenges and Approaches. Report on a Literature Review and Consultations with Expert Reference Group and UN Focal Points on C4D.

⁹ Servaes, J. (2008). Communication for Development and Social Change. Thousand Oaks, CA: Sage.

¹⁰ Sood, S. & Cronin, C. (2014). C4D Approaches to Address Violence against Children: A Systematic Review.

¹¹ World Health Organization (2010). Violence Prevention the evidence. Available at: http://apps.who.int/iris/bitstream/10665/77936/1/9789241500845_eng.pdf?ua=1

¹² UNICEF (n.d.). UNICEF's approach to child protection. Available at: https://www.unicef.org/protection/57929_57990.html

¹³ Usdin, S, Scheepers, E, Goldstein, S, and Japhet, G. (2005). Achieving social change on gender-based violence: a report on the impact evaluation of Soul City's fourth series. *Social Science and Medicine*; 61: 2434-2445.

Chapter 2: Conceptual framework for the strategy

Strategy development process

The strategy development process employed by the Rain Barrel team was evidence based and consultative. The initial step involved reviewing the available evidence on VAC and family separation in Cambodia, specifically the *CVAC Survey* and the *Cambodia Systematic Review on VAC* by Coram. Subsequently, the Rain Barrel team conducted a comprehensive Desk Review, which included 18 research reports and government documents provided by UNICEF, as well as 34 peer-reviewed and gray literature publications accessed through PubMed and Google Scholar and the *Global Systematic Review of C4D Approaches to Address VAC* (Deliverable 1). The Desk Review focused on the communicative aspects of VAC in Cambodia and culled out recommendations and entry points for the Conceptual Framework (Deliverable 2) and the C4D Strategy presented here (Deliverable 3).

Next, a series of consultations were held with key stakeholders at the national level to discuss gaps and opportunities in communication efforts addressing VAC and family separation. The consultations included meetings with key ministerial partners such as Ministry of Women's Affairs (MOWA), Ministry of Social Affairs, Veterans and Youth Rehabilitation (MOSVY), Ministry of Information (MOI), and Ministry of Cults and Religion (MOCR) and national and international organizations working on VAC (See Appendix 2 for the list of consultations). In addition, Focus Group Discussions were held with parents and caregivers, adolescents and children to understand both barriers and motivators for social and behaviour change and identify existing communication platforms and community networks that the strategy can leverage.

Drawing on insights gleaned from the in-country consultations and the robust evidence base on VAC and C4D both globally and nationally, a Cambodia-specific Conceptual Framework was developed, shared and agreed on with UNICEF. The Framework outlines the behavioural and social change dimensions required to address VAC and unnecessary family separation and charts the relevant C4D approaches. The Conceptual Framework was circulated to national partners for feedback. Following the finalization of the Conceptual Framework, the detailed strategy was drafted. Based on the draft strategy, the Rain Barrel team developed the accompanying M&E Framework (Deliverable 4) and Costed Implementation Plan (Deliverable 5). The validation process involved a final consultation meeting with partners in Phnom Penh and a detailed review of the strategy package by the Government. Figure 2 illustrates the strategy development process. The consultation meeting was chaired by Her Excellency Chan Haran Vaddey, Under Secretary of State, MOSVY and attended by over 60 participants from the Government, INGOs, NGOs, UNICEF and UN Agencies and other partners.



Figure 2: Strategy development process

Social and behaviour change process

The proposed change process builds on prominent theories of behavior and social change communication that have been used across several areas of health and human rights (e.g., Social Learning Theory, Theory of Planned Behaviour and Social Support Theory). The central premise guiding the social and behavior change posits that raising awareness and stimulating debate and discussion among different stakeholders about the unacceptability of all forms of violence and unnecessary family separation, can lead to transforming attitudes and practices that condone or perpetuate violence. Transformation of attitudes and building of critical negotiation skills and self-efficacy will lead to the ability to take action or make safer choices, contributing to changing normative practices and promoting social change. Ultimately the progression from knowledge gain to attitude change to garnering commitment will result in positive social and behaviour change, leading to lower levels of violence and family separation as illustrated in Figure 3.

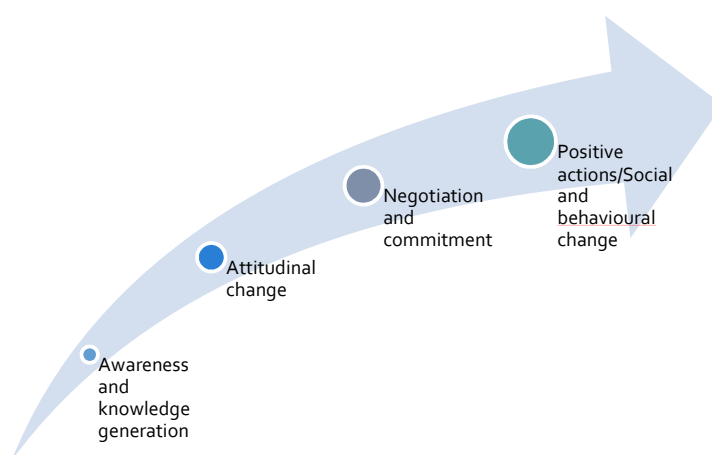


Figure 3: Social and behaviour change process

Cambodia PROTECT framework

Building on the social and behaviour change communication process outlined above and operationalizing a range of change theories that function at individual, interpersonal and community levels, a unique communication centred Cambodia PROTECT framework has been developed to guide the strategy. The proposed framework, developed specifically for VAC and piloted for the first time in Cambodia, builds on strong evidence of what has worked globally in various areas of VAC, including ending child marriage, domestic violence and bullying, and is well suited to preventing and responding to both violence and family separation (Ellsberg et al., 2014; Sood & Cronin, 2015; Usdin, Scheepers, Goldstein, & Japhet, 2005).^{14,15,16} Overall, the framework promotes an environment where no form of violence against children is accepted and all relevant duty-bearers or stakeholders take positive actions to protect children from neglect, harm,

¹⁴ Ellsberg M, Arango DJ, Morton M, et al. Prevention of violence against women and girls: what does the evidence say? Lancet 2014; published online Nov 21. [http://dx.doi.org/10.1016/S0140-6736\(14\)61703-7](http://dx.doi.org/10.1016/S0140-6736(14)61703-7).

¹⁵ Sood, S. & Cronin, C. (2014). C4D Approaches to Address Violence against Children: A Systematic Review.

¹⁶ Usdin, S, Scheepers, E, Goldstein, S, and Japhet, G. (2005). Achieving social change on gender-based violence: a report on the impact evaluation of Soul City's fourth series. *Social Science and Medicine*; 61: 2434-2445.

abuse and violence (see Figure 4). The strategy is designed to build upon and foster the protective factors and the positive aspects of current parenting practices prevalent in Cambodian culture. The strategy focuses on culturally appropriate, doable and practical steps that individuals, families and communities can take to both prevent and respond to violence and family separation. The components of the Cambodia PROTECT framework are described below.

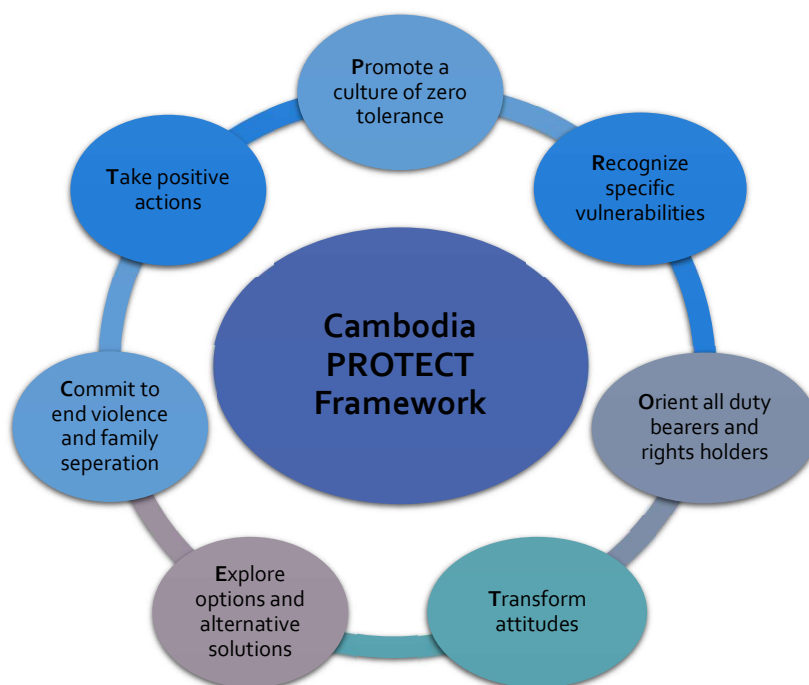


Figure 4: Cambodia PROTECT framework

Promote a culture of zero tolerance

The proposed strategy emphasizes that all forms of violence against children and unnecessary family separation are unacceptable, as articulated in the CRC and other international instruments and in national legislative frameworks. Evidence from Cambodia strongly confirms the widespread acceptance and normalization of multiple forms of VAC. Rain Barrel's Desk Review included additional analysis of the CVACS and CDHS data for the five focal provinces; these analysis revealed, for example, that roughly two-thirds of both female and male respondents reported that corporal punishment by a parent is justified in at least one of the five scenarios described to them.¹⁷ A deeper examination of the attitudes show that 20 per cent of respondents believe a parent is justified in beating a son in all five situations and 28 per cent believe this is true for daughters. This high level of support for corporal punishment as a disciplinary method – common to many countries and cultures – is further confirmed by data from the *Participatory Qualitative Research on Caregiver Practices*, which found that physical discipline of children is considered the most effective method of changing a child's inappropriate behaviour.

¹⁷ The 2014 CDHS included 5 questions asking if a parent is justified in hitting or beating his son or daughter for the following reasons: a) if s/he disobeys; b) if s/he is impolite; c) if s/he has embarrassed the family; d) if s/he does not do the housework or cooking; and e) if s/he does not take care of younger siblings. We created an additive index and reported the proportion of respondents who believed a parent was justified in hitting or beating a child in at least one of these five scenarios.

These data underscore the importance of countering the acceptability and normalisation of violence towards children. Protective practices and non-violent actions are stressed in this strategy to encourage prevention. In cases where violence or family separation have already occurred, all duty-bearers at the family level (parents, caregivers and extended family members), community level (teachers, religious leaders, local authorities and other influentials) as well as the right holders themselves are encouraged and empowered to take action to end violence and keep families together. Speaking up against violence, negotiating available options and reporting or accessing referral services are emphasized as part of recovering from and responding to violence and family separation.

Recognize specific vulnerabilities

While violence can affect all children, certain groups – including children with disabilities and those in residential care institutions – are at increased risk of violence. It is therefore critical for families to be aware of these vulnerabilities to prevent violence from occurring. For instance, the *Cambodia Systematic Review on VAC* highlights that younger boys and girls are more at risk for physical violence and that older children in higher grades are less likely to report violence. *The Systematic Review* also emphasizes that boys are more likely to experience physical attacks or be involved in fights at school than girls and that children with disabilities may be more exposed to physical and emotional violence and at higher risk of being sexually abused. As the data from Cambodia highlights, violence is often not a one-time occurrence; children face violence multiple times while growing up and those who experience one form of violence are likely to experience other overlapping forms of violence. Responding to and preventing violence and family separation need to take these vulnerabilities into account and protect children from additional or overlapping forms of violence.

Orient all duty-bearers and right holders

Individuals alone cannot prevent and respond to violence, embedded as it is in age-old social norms and community practices; it must be a collective responsibility. Children, families, teachers, local authorities, service providers, community leaders and public figures need greater awareness about VAC, including a better understanding that violence against children can occur in multiple ways and that practices such as corporal punishment and neglect can have immediate and long-term consequences for the health and well-being of children. All stakeholders need to know what they can do to protect or respond to children affected by violence. For instance, what should a parent do, what should a peer do, or what can a teacher or local official do? Furthermore, all duty-bearers and right holders need to be motivated and confident to act on the knowledge. Theories such as Social Learning Theory stress that behavioural capacity (i.e., knowledge and skills to perform a behaviour) and perceived sense of self-efficacy (i.e., the confidence to perform a behaviour) affect the likelihood of changing practices (Bandura, 2004).¹⁸ The awareness raising activities thus need to go beyond conveying of motivational messages but also strengthen duty-bearers' and right holders' confidence and capacity to perform positive actions. Caregivers and community members have a responsibility to protect children from harm, but this strategy also emphasizes the role of children and adolescents as being agents of change in their lives and in the lives of their peers.

Transform attitudes

Globally, research has shown that the normalization and acceptance of violence perpetuates abuse and also hinders help-seeking behaviours. Akin to prevalent beliefs and attitudes that condone several forms of VAC in Cambodia, according to the *With the Best Intentions...* report¹⁹ there is also an overwhelming belief that

¹⁸ Bandura, A. (2004). Health Promotion by Social Cognitive Means. *Health Education Behaviour*, (31), 2:143-164.

¹⁹ UNICEF Cambodia. (2011). *With the best intentions... A study of attitudes towards residential care in Cambodia*.

residential care facilities offer a good education, with roughly 92 per cent of family members stating they agreed or strongly agreed that a poor family should send a child to a residential care facility²⁰ for education if they cannot afford to pay for a child's education themselves. Likewise, a large majority of Commune Council members and Village Chiefs believed that residential care was the best option for a child without parents.

Shifts in attitude are required at both the individual and societal level to prevent violence from occurring and to respond to violence when it does occur. Change theories highlight the importance of an individual's attitude towards and intention to perform a certain behaviour as important predictors of behaviour (Ajzen, 2011).²¹ Individuals and community members need to better understand the physical, psychological and emotional impact of violence, both in the short and long term and, in turn, be convinced that no form of violence or unnecessary family separation is acceptable, for any child irrespective of gender, ability, ethnicity, sexual orientation or geographic location.

Explore options and alternative solutions

Decision making and negotiating between locally acceptable and available choices is an important step towards taking action to end VAC or family separation. Duty-bearers and children as right holders will be encouraged as this strategy is implemented to consider available options and seek alternative solutions. For instance, violent discipline can be replaced with positive discipline emphasizing love, dialogue and reassurance. Similarly, responding to violence and taking action may need to consider local mediation, psychosocial support or legal action. Younger children can learn to identify "safe" people and be encouraged to tell these persons if violated in any way. Older children can be encouraged to resolve conflict through non-violent means that include making better choices and building empathy, self-efficacy and life skills. In the case of unnecessary family separation, families and communities are encouraged to consider alternatives to residential care that build on Khmer family values and kinship care practices. This also builds on the notion that a basic set of critical thinking and decision-making skills – as well as the means and support necessary to exercise them – are needed for children and parents to ensure they are protected and cared for physically, intellectually and emotionally.

Commit to end violence and family separation

Behaviour change evidence highlights that awareness or knowledge are not enough to result in changed behaviours; perceived benefits, motivation and confidence are prerequisites to taking a stand or committing to adopt or abandon certain practices. Public commitments to end VAC also give visibility and highlight intentions to adopt a positive practice and denounce a negative behaviour. When key influentials or a critical mass of citizens demonstrate commitment towards an issue, it is considered a trigger for others to follow. Change theories also recognize that individuals learn by observation and are likely to model behaviours they see in their personal and social environment (Bandura, 2004).²² To this end, the proposed strategy highlights positive role models and champions among children, parents, teachers, local officials and leaders.

²⁰ The Best Intentions Study asked specifically if "a very poor family should send a child to an orphanage for education if they cannot afford to pay for the child's education in the village?" The response, however applies to residential care facilities in general and not just orphanages.

²¹ Ajzen, I. (2011). The theory of planned behavior: Reactions and reflections. *Psychology and Health*, 26(9), 1113-1127.

²² Bandura, A. (2004). Health Promotion by Social Cognitive Means. *Health Education Behaviour*, (31), 2:143-164.

Take positive actions

Going back to the idea of social responsibility and violence being everybody's concern, the strategy presented here strives for duty-bearers and right holders at all levels to take positive actions to either prevent or respond to violence. This could be a parent taking protective measures, or a peer providing counselling or a neighbour reporting violence when they observe it. Taking action ties in closely with ideas from Social Support Theory, which posits that community members can provide different types of support. For instance, a family member may provide emotional support through expressions of empathy, love or care. Likewise, friends or service providers may provide instrumental support such as a safe haven, aid or services or informational support such as advice and counselling (Rimer, Glanz, & Viswanath, 2008).²³ The Cambodia PROTECT approach emphasizes and elaborates on doable actions that are contextualized and specific to Cambodia through the key messages and activities. For instance, in the case of violent discipline, parents and caregivers will need to gain greater knowledge and skills about positive parenting techniques that focus on early attachment, loving and nurturing relationships between both parents and children. Similarly, for family separation, caregivers and extended family members will need to know about the harmful consequences of residential care and be able to take actions to support the reunification of children with their families and reintegration into their communities.

Overall strategic approach

The strategy is designed to help prevent and respond to VAC and unnecessary family separation by supporting families and communities to raise healthy, happy and confident children, thereby addressing physical and social-emotional well-being as well as the social competencies and life skills of all children, including the most marginalized. There is ample evidence to support that nurturing care and protection received from parents, family and community in the early years of a child's life can address and prevent multiple threats and has long term benefits that include reducing the impact of negative childhood experiences (e.g., neglect, abuse and exposure to violence) and improve cognitive and social-emotional development, physical health and wellbeing (Britto et al., 2016).²⁴ The strategy, therefore, emphasizes providing love, nurturing, care and protection right from the early years to address neglect and ensure that strong relationships with both parents are established early on in a child's life, which can in turn result in becoming a protective factor through childhood and adolescence. Figure 5 illustrates how the proposed framework addresses VAC and family separation, encompassing both the prevention and response dimensions and ultimately contributing to children's all around well-being.

²³ Rimer, B. K., Glanz, K., Viswanath, K. (2008). *Health Behavior and Health Education: Theory, Research, and Practice* (4th ed). San Francisco: Jossey-Bass.

²⁴ Britto, P.R. et al. (2016). Nurturing Care: Promoting Early Childhood Development. *Advancing Early Childhood Development: From Science to Scale 2*. Lancet 2016; published online October 4, 2016 [http://dx.doi.org/10.1016/S0140-6736\(16\)31390-3](http://dx.doi.org/10.1016/S0140-6736(16)31390-3).

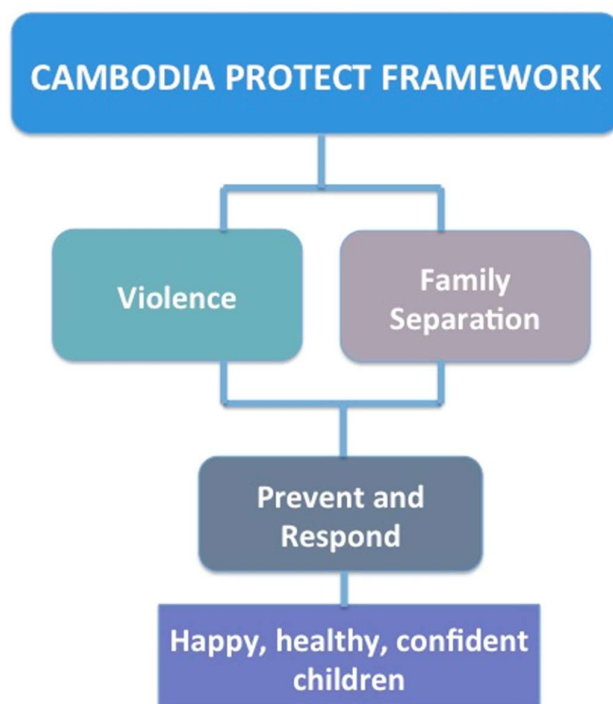


Figure 5: Strategy at a glance

The strategy addresses all forms of violence affecting boys and girls in Cambodia, focusing especially on those who are most at risk or more vulnerable to violence. It seeks to empower individuals, families and community members to protect children from violence and unnecessary family separation. Two-way communication and participation of children and duty-bearers is an important part of the community engagement. Violence related interventions that have demonstrated impact have been participatory, engaging multiple stakeholders or duty-bearers and have promoted enhanced communication and shared decision making among family members (Ellsberg et al., 2014).²⁵

Experiences in formulating interventions to address violence through communication have underscored the need to include efforts that are multi-layered and can impact change at multiple mutually reinforcing levels across the socio-ecology (Michau, Horn, Bank, Dutt, & Zimmerman, 2014; Usdin, Scheepers, Goldstein, & Japhet, 2005).^{26,27} The activities designed for this strategy (detailed in Chapter 4) build on C4D lessons learned across global communication efforts in ending violence. Figure 6 highlights the principles for effective violence prevention programmes. While the authors focus on violence against women and girls,

²⁵ Ellsberg M, Arango DJ, Morton M, et al. Prevention of violence against women and girls: what does the evidence say? *Lancet* 2014; published online Nov 21. [http://dx.doi.org/10.1016/S0140-6736\(14\)61703-7](http://dx.doi.org/10.1016/S0140-6736(14)61703-7).

²⁶ Michau L, Horn J, Bank A, Dutt M, Zimmerman C. Prevention of violence against women and girls: lessons from practice. *Lancet* 2014; published online Nov 21. [http://dx.doi.org/10.1016/S0140-6736\(14\)61797-9](http://dx.doi.org/10.1016/S0140-6736(14)61797-9).

²⁷ Usdin, S, Scheepers, E, Goldstein, S, and Japhet, G. (2005). Achieving social change on gender-based violence: a report on the impact evaluation of Soul City's fourth series. *Social Science and Medicine*; 61: 2434-2445.

these principles apply to violence against children and complement the interventions put forth in the *Theory of Change on VAC* for Cambodia.

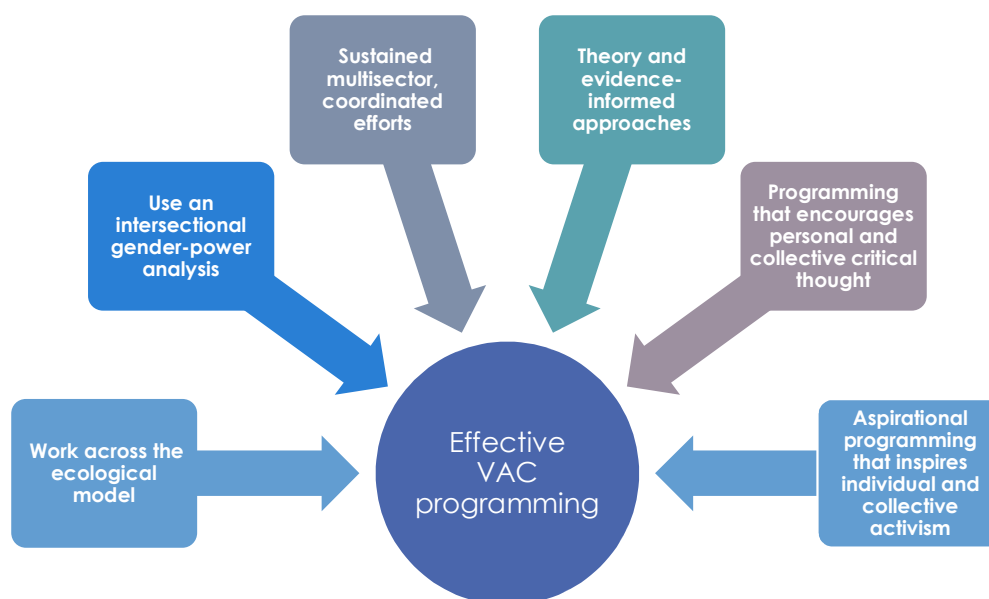


Figure 6: Principles for effective violence prevention programming (Michau et al. 2014)

In order to address the normative aspect of many of the underlying factors that promote violence and family separation, the activities proposed in this strategy build on principles for changing social norms. These principles stress engagement with communities and making the change public and highly visible (see Figure 7).

Be deliberative, not didactic or manipulative

Favour deliberative processes that mobilize core values already shared, rather than top-down strategies that employ overly negative messaging. People need shared reasons to change.

Be participatory

Involve the whole community in a participatory process that decides the nature and direction of change.

Make knowledge public, not private

Everyone must see that others want to change. Everyone must see that everyone else is changing.

Be creative!

Resort to art.

Bicchieri, C. and Penn Social Norms Training and Consulting Group. *Why People Do What They Do?: A Social Norms Manual for Vietnam, Indonesia and the Philippines*. Innocenti Toolkit Guide from the UNICEF Office of Research, Florence, Italy. 2016.

Figure 7: Fundamental principles for changing social norms

Chapter 3: Communication goals and objectives

National response to violence and family separation

The C4D strategy proposed by Rain Barrel builds on a range of past and current initiatives undertaken by the Royal Government of Cambodia. These include the development of the *National Action Plan on Violence* that calls for zero tolerance of violence and promotes social norms condemning all forms of VAC. The national action plan is supported by a *Theory of Change on Violence*²⁸ in Cambodia and includes cost estimates and a detailed results framework. Led by the Ministry of Women's Affairs (MOWA) and a multi-sectoral Steering Committee on VAC, the overall objective of the national plan is the reduction of violence against all children in Cambodia, especially those at increased risk, through increased prevention interventions, improved response, increased access to quality services, and multi-sectoral coordination and cooperation.²⁹ The plan aims specifically at achieving a reduction in VAC compared to the 2013 CVACS prevalence and at increasing the number of people who disapprove of all forms of violence in all settings (home, school and community).

The Government has also endorsed a *Positive Parenting Strategy* that strives to ensure safe, stable and nurturing relationships between children and their parents or caregivers, who adopt positive and non-violent parenting styles and disciplinary methods and promote children's safety and protection in and outside of the home. A *National Action Plan on Improving Child Care and Safely Returning Children in Residential Care to their Families* has also been developed and aims to scale-up child protection, prevention and response interventions, including de-institutionalization and reintegration services, and strengthen the capacity of partners and social service providers as well as commune councils and religious leaders to protect girls and boys separated from their families, or at risk of separation.³⁰

Under the current Programme of Cooperation between the Royal Government of Cambodia and UNICEF (2016-2018), the Country Programme seeks to ensure that girls and boys vulnerable to and exposed to violence, as well as those separated from their family, or at risk of separation, are increasingly protected by institutional and legislative frameworks, quality services, and a supportive community environment. The Programme aims for a 30 per cent reduction in cases of violence and a 30 per cent reduction in the number children in residential care in the five focal provinces mentioned earlier. As mentioned in the introductory chapter, partners can take on specific elements of the strategy and implement them in additional provinces, determining their own targets and baselines. Figure 8 illustrates how the proposed strategy contributes to the national policies and the UNICEF programme of cooperation targets.

²⁸ The Theory of Change on Violence against Children in Cambodia, is based on the findings from the systematic literature review and is intended to inform and feed into the five-year, inter-ministerial Action Plan to prevent and respond to violence against children.

²⁹ The Steering Committee on VAC comprises 13 key government ministries and agencies, with focal points from the Cambodian National Council for Children, Ministry of Cults and Religion, Ministry of Education, Youth and Sports, Ministry of Health, Ministry of Information, Ministry of Interior, Ministry of Justice, Ministry of Labour and Vocational Training, Ministry of Social Affairs, Veterans, and Youth Rehabilitation, Ministry of Tourism, Ministry of Women's Affairs, National AIDS Authority, and the National Institute of Statistics of the Ministry of Planning.

³⁰ Ministry of Social Affairs, Veterans and Youth Rehabilitation. (2016). National Action Plan for Improving Child Care, with the Target of Safely Returning 30 Per Cent of Children in Residential Care to their Families by 2018.

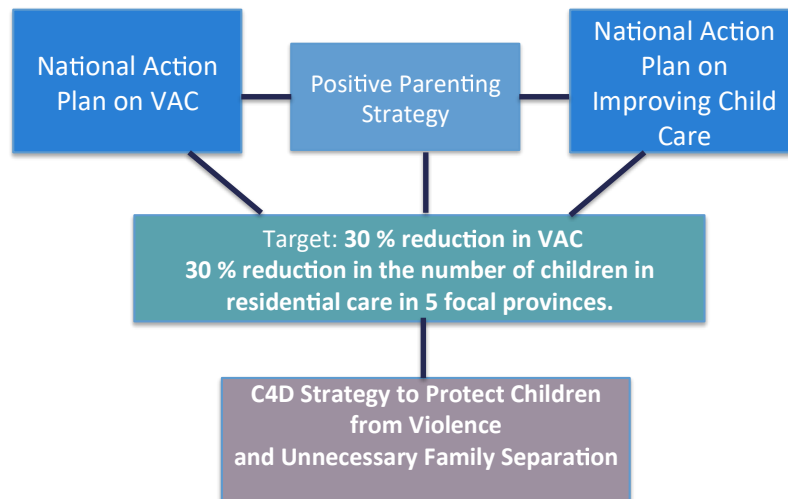


Figure 8: National response to VAC and unnecessary family separation

The *Theory of Change on VAC* in Cambodia draws attention to seven key determinants for VAC: (1) poverty/socio-economic inequality; (2) education; (3) norms that are supportive of violent discipline; (4) discriminatory gender norms; (5) impunity/lack of awareness about laws prohibiting violence; (6) previous experience of violence, and lastly, (7) lack of child protection services. The strategy proposed in this document focuses on these key determinants and distills aspects that can be directly addressed by C4D such as knowledge, attitudes and norms. Elements that are more structural, such as poverty and demand for child labour, cannot be addressed by communication interventions alone. Building on the risk and protective factors detailed in the *Conceptual Framework on VAC*,³¹ the strategy aims to raise awareness of the risk factors and vulnerabilities (e.g., previous abuse, gender, age, ability), alter attitudes that perpetuate violence and impunity and in turn enhance the communicative aspects of the protective factors (e.g., peer support, positive parenting, law enforcement and education), as shown in Figure 9.

³¹ Coram Children's Legal Centre (2016). Conceptual Framework on Violence Against Children in Cambodia.

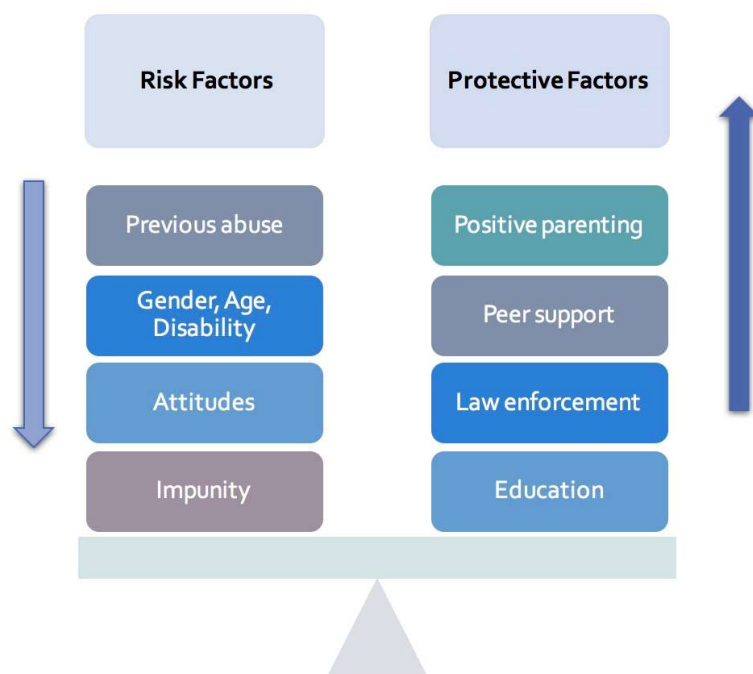


Figure 9: A Determinants based approach

The C4D Strategy aligns closely to the outcomes, outputs and initiatives identified in the *Theory of Change* (see Table 1). The overall approach and the activities under the strategy will contribute towards the areas of intervention identified in the TOC, for instance promoting zero tolerance to VAC, early positive parenting skills and alternative discipline, creating safer schools, challenging discriminatory gender norms and fostering inclusive communication with groups that are more vulnerable to violence. Table 1 presents the problem statement, determinants, initiatives and outcomes from the *TOC on Violence* and highlights – in the bottom row – how C4D interventions proposed in this strategy contribute to the TOC. The Table does not include the long-term super impacts and high-level outcomes presented in the TOC.

Table 1: C4D Contribution to the Theory of Change on VAC in Cambodia³²

Problem	Girls and boys are subject to different forms of violence and threats of violence in the home, in school and in the community, which violates their right to physical integrity and right to protection and impacts negatively on a range of other rights, including the right to education and the right to develop to their full potential						
Determinants	Poverty and socio-economic inequality	Education	Norms supportive of violent discipline	Discriminatory gender norms	Impunity/Lack of awareness about laws	Previous experiences of violence³³	Lack of services
Initiatives	Implement programmes aimed at reducing poverty and inequality (e.g., social protection programmes, livelihood empowerment interventions, employment opportunities, etc.)	Implement initiatives aimed at increasing school attendance, reducing (informal) fees, increasing school safety and improving quality of education, raising awareness about the benefits of education	Implement programmes aimed at changing social norms that are supportive of non-violent discipline and promote healthy and nurturing relationships; also building on norms of - non-violent behaviour found in religious teachings	Implement programmes aimed at changing discriminatory gender norms (e.g., include discussion of gender-based discrimination and violence in school curriculum; positive programmes such as girls' clubs)	Implement programmes aimed at raising awareness about laws prohibiting VAC and build capacity of police officers, social workers, prosecution, judiciary and teachers to engage in implementing the laws	Implement programmes that provide legal support, rehabilitation services, and life skills to victims of abuse	Establish a nationwide child protection system that is relevant to the Cambodian context and meets international standards. Build political will as well as legal and institutional capacity to prevent and respond to

³² This Table is adapted from the VAC Theory of Change (TOC). Refer to the TOC for a detailed discussion and diagrammatic representation of the causal pathways beginning with the problem and ending with the super impacts. This table does not include the barriers, high-level outcomes, impacts and super impacts.

³³ Existing evidence suggests that previous experiences of violence increase children's exposure to re-victimisation as well as the likelihood of violence perpetration later in life (as adults).

							VAC
Outputs	Social protection is improved so that children (and their families) are less vulnerable to abuse, exploitation and trafficking	Children have increased access to quality education at safe and child-friendly kindergartens, primary and secondary schools, as well as increased access to higher education and to vocational and technical training	Programmes aimed at raising awareness about the negative consequences of harsh and violent discipline and providing positive alternative discipline techniques reach an increasing number of government officials, teachers, parents, children	Programmes aimed at raising awareness about gender equality and non-discrimination reach an increasing number of government officials, teachers, parents, children	Programmes aimed at raising awareness about laws prohibiting VAC reach an increasing number of government officials, teachers, parents, and children. Training in the law and its implementation is provided to an increasing number of relevant actors in the justice sector. The legal system is better equipped to prevent, recognise and respond to all forms of VAC	Government policies, budgets and human resources are in place to deliver prevention and response services. Individuals who experienced abuse have increased access to legal, rehabilitation and life skills services, and have reduced perpetration/re-victimisation propensity	
C4D Contribution	Addresses vulnerable families and promotes inclusion and non-discrimination	Raises awareness about the importance of education, engages teachers and promotes schools as safe spaces	Promotes non-violent discipline and raises awareness of the consequences of violent discipline at home and in schools	Promotes inclusion and gender equality, engages fathers and mothers in positive parenting and violence prevention	Promotes zero tolerance in homes, schools and communities and promotes reporting and legal actions	Enhances life skills among children and parents encouraging negotiation and solution seeking, promotes disclosure and advocates for zero tolerance	

Communication goal

This communication strategy complements and builds upon the national level response to VAC and family separation.

The overall communication goal of the strategy is to enable children, their parents and caregivers and communities to prevent and respond to violence and family separation by raising awareness on the unacceptability of all forms of violence and unnecessary family separation, transforming prevalent norms and attitudes that condone VAC and promote unnecessary family separation, as well as building skills and self-efficacy to practice protective behaviours.

The strategy is envisioned as a multi-sectoral behavior and social change effort supported and implemented by several key ministries, including but not limited to the Ministry of Social Affairs, Veterans and Youth Rehabilitation; the Ministry of Women's Affairs; the Ministry of Interior; the Ministry of Cult and Religion; Ministry of Education; and the Ministry of Information. The communication strategy seeks to increase people's awareness of the negative impact of violence against children and develop or strengthen their ability to change social and cultural norms, beliefs and practices that lead to VAC. The ambitious but not impossible objective for the strategy is to have 25 per cent of commune councils in the five focal provinces implementing the strategy by December 2018 (*see Figure 10*).

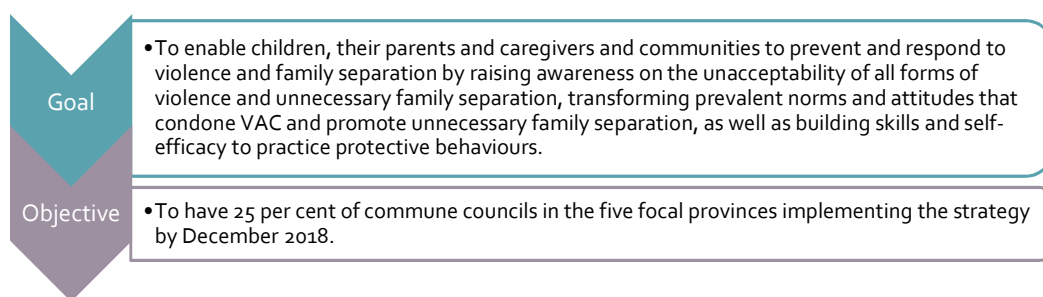


Figure 10: Strategy goal and objectives

Communication objectives

Communication objectives detail the desired changes in knowledge, attitudes and practices expected among the various participant groups. Communication objectives need to take into account barriers and motivators that can hinder or enable the adoption of desired behaviours. For example, in the case of VAC, a potential barrier to practicing positive discipline techniques may be the lack of awareness of the harmful impact of violent punishment or the lack of knowledge and skills of what constitute alternative or non-violent forms of discipline. In the case of unnecessary family separation, the belief that institutionalization is good for a child may be a barrier for promoting family or community-based care. Similarly, recognition of the benefits of positive parenting and early bonding or the positive consequences of staying in school and completing secondary education may serve as motivators to adopt these practices.

Typically, communication objectives are categorized by what people “know” (cognitive changes), what people “feel” (affective changes) and what people “do” (behavioural changes). The Cambodia PROTECT Framework proposed here builds on the change process arising from knowledge gain, leading to altered attitudes, and resulting in changes in behaviors and practices. As such, the “know,” “feel,” and “do” objectives are integrated into the framework. These objectives are theoretically driven and build on tried and tested communication and social change constructs such as knowledge, perception of risk, motivation, self-efficacy, dialogue and collective action. The communication objectives inform the choice of activities,

key messages and training content. Communication objectives are also important for the M&E of the strategy as they form the basis of measurable indicators. The list of communication objectives for the strategy for VAC and unnecessary family separation grounded in the Cambodia PROTECT conceptual framework is provided in Table 2.

Table 2: Communication objectives	
Element of the framework	Communication objectives ³⁴ (Child, Parents and Caregivers, Community Influentials ³⁵)
Promote a culture of zero tolerance	<ul style="list-style-type: none"> • Know how violence and family separation impact the physical, mental and emotional development of a child • Know the importance of positive parenting ³⁶ • Know specific laws and policies to address violence against children and family separation
Recognize specific vulnerabilities	<ul style="list-style-type: none"> • Know that certain groups of children are at greater risk of experiencing violence (e.g., residential care, gender, disability, ethnicity, age, income etc.) • Know that all children can develop to their full potential when families practice positive parenting • Know about remedial actions for children who have experienced violence or family separation (seek informal support, seek formal support, seek formal services or legal action)
Orient all duty-bearers and right holders	<ul style="list-style-type: none"> • Feel it is a collective responsibility to prevent violence and keep families together • Recognize that all children have the same rights regardless of background • Recognize the benefits of children staying in school and completing secondary education • Feel confident to take remedial action when violence or family separation occur (seek informal support, formal support services, or legal action)

³⁴ Applies to both the prevention and response dimensions of VAC and family separation.

³⁵ Children include children (0-9) and adolescents (10-19) and will be further disaggregated in to – infant and young children (0-3), young children (4-9) and adolescents (10-19) - for programming and messaging purposes. Caregivers refer to all adults in a household who are responsible for child rearing and include grandparents, extended family and older siblings. Community influentials include both formal and informal community duty-bearers such as teachers, religious leaders, village and commune chiefs and CCWC members. See previous section on participant groups for a more detailed explanation.

³⁶ Positive parenting has been operationalized as consisting of four categories of practices: communicating with the child, creating structures and rules, giving directions and using discipline and consequences.

Transform attitudes	<ul style="list-style-type: none"> • Believe that all forms of violence and family separation are unacceptable and impact a child negatively • Believe that the best option for children is to receive positive parenting • Believe that all children irrespective of background should be treated with dignity and respect
Explore options and solutions	<ul style="list-style-type: none"> • Discuss safety measures to prevent VAC • Explore non-violent ways to deal with anger (e.g., dialogue, negotiation, breathing, meditation) • Explore options to keep children at home or bring them back from residential facilities • Negotiate available choices to protect children from violence and unnecessary family separation
Commit to end violence and family separation	<ul style="list-style-type: none"> • Intend to seek remedial actions (seek informal support, formal support services, or legal action) • Publically declare individualized actions to protect all children from VAC and family separation
Take positive action	<ul style="list-style-type: none"> • Adopt positive behaviours that are protective and non-violent • Act to help children recover, reintegrate and heal

Participant groups

The strategy aims to change knowledge and attitudes of different duty-bearers as well as the children themselves as rights holders, through awareness raising, community engagement, dialogue and decision-making. The relevant participant groups for the purpose of this strategy are the various duty-bearers that have both direct and indirect roles in the care and protection of children. In addition, the strategy also aims to enhance awareness and skills among children so that they can prevent violence, seek safe haven support and aid in response when they see violence occurring among peers.

The audience analysis conducted as part of the Desk Review points toward specific groups that need to be addressed by this strategy as a matter of priority: children and families who are most vulnerable to violence, including those with disabilities, as well as the common perpetrators of violence and those that can potentially play a protective role in preventing or responding to violence. Data on VAC in Cambodia highlights that many forms of violence are both accepted and perpetuated by adults responsible for looking after them or those who are known to them, including parents and caregivers, teachers, neighbours, friends and extended family members. Mothers were cited as the most common perpetrators of the first incident of childhood physical violence. Teachers were the most common perpetrators of physical violence outside of the home setting, with male teachers cited more often than their female counterparts. Mothers and stepmothers emerged as the most frequently cited perpetrator of the first incident of emotional violence by both males and females. Neighbours, family members, friends, and dating partners were commonly implicated as perpetrators of the first incident of childhood sexual abuse. Parents and local government

officials are the key decision-makers when it comes to placing children in residential care or keeping them with family.

Segmenting participants into groups allows for tailored interventions including designing specific activities for different groups and developing relevant approaches and messages. The primary participants comprise the group who are most directly affected by the problem and among whom the desired behaviour and social change efforts are focused. The secondary participants are the group who directly influences the primary group. The tertiary participants consist of those groups and actors who contribute to an enabling environment for the desired social change. This group indirectly influences the desired behaviour and social change by shaping the policies, resources and structures that enable or deter change.

Primary participants

The primary participants identified for this strategy are the children and their parents or caregivers. Caregivers include all adults in a household who are responsible for child rearing and include grandparents, extended family members, older siblings, nannies and non-family care providers. Children encompass young children (0-9 years) and adolescents (10-19 years) and are further disaggregated for programming and messaging purposes. While children's experience of violence cuts across all classes and levels of income, the CVAC study highlights that violence is exacerbated by several factors including urban and rural poverty, migration, gender inequality and disability (see *Figures 11 and 12*).

- Children living with disabilities and HIV/AIDS
- Children in residential care institutions
- LGBT children
- Children living or working on the street
- Out-of-school children
- Child migrants and children of migrating families
- Boy victims of sexual violence
- Children living in rural or remote areas
- Children from indigenous, ethnic, or religious minority communities
- Children in contact with the law
- Children of incarcerated women

Figure 11: Children at higher risk for VAC

Secondary participants

The secondary participants for this strategy are influential community members. This group includes both formal and informal community influentials. In the context of VAC and Cambodia, the key community level duty-bearers identified through research are teachers, religious leaders such as monks (for the majority of the population who are Buddhists), and priests, pastors and Muslim preachers (for the Christian and Muslim groups), village and commune chiefs and Commune Committees for Women and Children (CCWC) members. Village chiefs and local authorities are key decision makers for institutionalization of children. Village volunteers will be critical local level partners and advocates for the strategy. The secondary group also includes teachers as an important group of community influencers given the common occurrence of violence in schools and the vital need for schools to be safe spaces for children to learn and thrive. Engaging teachers also ties in with the aim to encourage children to stay in schools as a protective factor against several forms of violence (e.g., child marriage, trafficking, child labour). Likewise the local and national police force will need to be included to promote safer communities.

Tertiary participants

Tertiary participants indirectly influence the desired behaviour and social change. While this strategy does not focus as many resources on this category, service providers (health, education, legal and child protection) as well as lawmakers, judiciary and the media should be approached to contribute towards ensuring that boys and girls are free of violence and that when violence or family separation occur, children are able to access quality support services. The capacity of institutions (e.g., schools, police, hospitals), skills and attitudes of service providers (e.g., health workers, social workers) and the commitment of policy makers are important factors in enabling change. Indeed, C4D efforts work on the assumption that these enabling conditions and supply side factors will be in place. The strategy envisages recruitment of national and local level advocates to champion the ending of VAC as well as engaging media to support the national effort.

This strategy takes cognizance of the policy and institutional contexts but does not specifically address policy level advocacy and capacity building of multi-sectoral service providers, as it is beyond the scope of the strategy and will be addressed by the Government and partners. *The Action Plan on VAC* already addresses strengthening the capacity of service providers to ensure a multi-sectoral child protection response (Strategic Area III) and enhancing legislative and policy frameworks to protect children from all forms of violence, abuse and neglect (Strategic Area IV). *The Theory of Change on Violence* also articulates improving social protection to reduce the vulnerability of children to violence and ensuring that Government policies, budgets and human resources are in place to ensure prevention and response services.

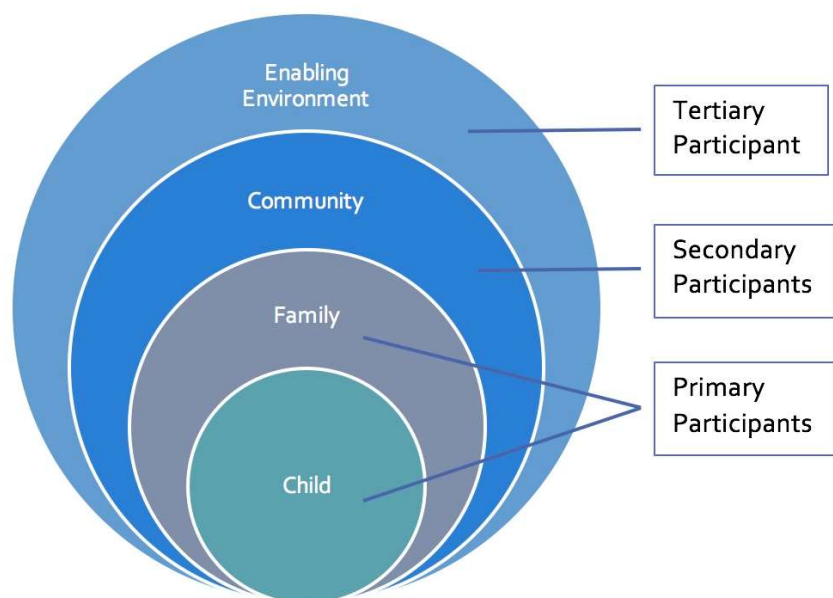


Figure 12: Participant groups

Expected behaviour and social change

The previous sections detail what changes are expected in terms of knowledge, attitudes and practices among key participant groups. Awareness raising and attitude change are important prerequisites for social change, but ultimately changes are also required in actual behaviours and practices. In this section, we define what change is ultimately expected as a result of this strategy and what parents and caregivers, children and adolescents and community influentials should “do.” The final element of the Cambodia

PROTECT framework is taking action and in the communication objectives we classify these actions as 1) adopting positive behaviours that are protective and non-violent to prevent violence and family separation and 2) acting to help children recover, reintegrate and heal as a part of responding to violence and family separation. The following section breaks these broad actions into specific behaviours:

Parents and caregivers: Adopt positive behaviours that are protective and non-violent

- Interact with young children (early bonding, play, sing, nurture)
- Discuss VAC related risks and protective factors with children
- Adopt non-violent discipline (model, praise, explain, listen)
- Supervise and guide children and adolescents (know where they are and what they are doing)
- Keep children with their families
- Support children to stay in school (enrolment and attendance)

Act to help children recover, reintegrate and heal

- Take remedial action (reporting, referrals for formal services or seek informal support)
- Bring children that are in institutions back home

Children and adolescents: Adopt positive behaviours that are protective and non-violent

- Identify safe people and places
- Engage in non-violent behaviours with their peers
- Discuss the risks of VAC and related safety measures with their family, teachers and peers
- Negotiate safer choices, both online and offline

Act to help children recover, reintegrate and heal

- Disclose or report violence and bullying

Community influentials: Adopt positive behaviours that are protective and non-violent

- Adopt non-violent discipline (model, praise, explain, listen)
- Discuss respect and non-discrimination in their communities
- Discuss the risks of VAC and related safety measures in their community
- Discuss the importance of family-based care
- Support vulnerable families to protect children or to access services
- Publically declare their intent to end VAC

Act to help children recover, reintegrate and heal

- Take remedial actions (reporting, referrals for formal services or seek informal support)

Key messages

The following section (*see Table 3*) presents the suggested messages directed at each participant group. These messages build on the Cambodia PROTECT framework allowing people to recognize the specific vulnerabilities to violence and promoting a sense of collective responsibility to end all forms of violence. Notably, these messages are positive, aspirational and action oriented. They focus on what people can and should do, rather than what they should not do. It is important to note that these messages will require validation from the Government and the various partners. It is vital for a national strategy to have a validated package of key messages that are used consistently across agencies and partners. The validated messages will then need to be refined by the creative team. The creative treatment of the messages will be

developed through a message development workshop with participation of stakeholders including vulnerable groups such as those with disability, ethnic and religious minorities, LGBT and out-of school youth. The messages will then need to be pre-tested with the intended participant groups.

Table 3: Key messages for participant groups ³⁷		
Children (0-3, 4-6, 7-12 and 13-18)	Parents and Caregivers (Includes grandparents, older siblings and extended family)	Community Members (Teachers, local authorities, religious leaders)
Foundational messages to prevent all forms of violence		
<p>0-3: Your family loves you and will always look after you.</p> <p>As a child you should always feel safe, feel loved and be able to play, have fun and laugh.</p> <p>4-6: You have people in your life that love you and you can trust.</p>	<p>As parents and caregivers, it is your responsibility to ensure that children grow up in a loving, caring and nurturing environment.</p> <p>Violence against children could be physical, emotional or sexual. All forms harm children and affect their health, development and well-being.</p> <p>No form of violence is acceptable, for any child, for any reason.</p>	<p>It is the collective responsibility of all members of a community to make sure all children are safe and not harmed in any way.</p> <p>Protecting children from violence now will help them become happy, confident, healthy adults in the future.</p> <p>No form of violence is acceptable, for any child, for any reason. Violence against children could be physical, emotional or sexual. All forms harm children and affect their health, development and well-being.</p>

³⁷ To make these messages further empowering, they may be converted to first person during the creative treatment and design. For instance, the messages could be something like - "I am strong and confident" or "The choices I make are important for my life," for children. For parents or caregivers, messages could be "It is my responsibility to ensure that my children are loved, cared for and nurtured," or "If I see a child who is experiencing violence and don't know how to help, I will call the free 24 hour hotline 1280."

<p>No one should be hurting you. If you feel someone is hurting you in any way, tell someone you trust.</p> <p>You should be kind to others because you like it when others are kind to you.</p> <p>7-12: No one has the right to hurt you, with words or actions.</p> <p>If you feel anyone is hurting or humiliating you in any way, or making you feel unsafe, tell someone you trust.</p> <p>It is healthy to tell people how you feel. You will not get into trouble if you share your feelings with others.</p> <p>You are strong, capable and confident.</p> <p>You should treat everyone the way you would like to be treated.</p> <p>You need to stand up for anyone who is hurt, bullied, left out or not being treated well. Say something or tell someone.</p> <p>13-18: No one should hurt you, with words or with actions. If you feel hurt, humiliated, harassed or unsafe, tell someone you trust.</p>	<p>Protecting children from violence now will help them become happy, confident, healthy adults in the future.</p> <p>As a father, it is important for you to bond with newborns and young children. Spend time with your children, this will make them healthier, happier and more confident.</p> <p>Children with involved fathers tend to do better in school and are less likely to act out or engage in risky behaviours as adolescents.</p> <p>Tell children they can always trust you, and share their joys, difficulties, secrets and sorrows. Remind them that you will always be there for them.</p> <p>If you see a child who is experiencing violence, do something. Speak to their parents or to someone in your community.</p> <p>Every child, irrespective of gender, ability, ethnicity, age or background, is precious and should be treated with love, respect and dignity.</p> <p>If you see a child who is experiencing violence and don't know how to help, call the free 24 hour hotline 1280 for advice.</p> <p>Children are protected by Cambodian law. Harsh discipline, sexual abuse, depriving children of food and care, marriage of minors and employment of children in hazardous work, are all forms of VAC and are against the law.</p>	<p>Every child, irrespective of gender, ability, ethnicity, age or background, is precious and should be treated with love, respect and dignity.</p> <p>A community that cares for children keeps them safe, away from harm and in school.</p> <p>Communities where all children are safe, protected and in school, will lead to respected and better off communities in the future.</p> <p>If you see a child who is experiencing violence and don't know how to help, call the free 24 hour hotline 1280 for advice.</p> <p>Children are protected by Cambodian law. Harsh discipline, sexual abuse, depriving children of food and care, marriage of minors and employment of children in hazardous work are all forms of VAC and are against the law.</p>
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<p>Treat others the way you would like to be treated, with respect and kindness.</p> <p>You are strong, capable and confident.</p> <p>The choices you make now are important for your future. Your decisions count.</p> <p>You need to stand up for anyone who is hurt, bullied, left out or not being treated well. Say something or tell someone.</p> <p>If you need to talk to someone and don't know who to trust, call the free 24 hour hotline 1280 for advice.</p>		
Neglect and keeping families together		
<p>0-3 and 4-6: Your family loves you and will look after you.</p> <p>Being with your family is important, because it makes you feel happy, loved and confident.</p> <p>When you are sad, scared, hurt or angry you should tell your family how you feel.</p> <p>7-12 and 13-18: Talk to an adult you can trust if you are being placed in an institution or being separated from your family.</p>	<p>Interacting with children in the early years through songs, play, reading books and games helps them grow into happy, confident adults.</p> <p>Early bonding and attachment with parents – fathers and mothers alike – can play an important role in the early years of a child.</p> <p>Children need adult supervision and care. Leaving young children unattended or in the care of an older sibling or another child can be unsafe and harmful for the child's development.</p> <p>All children should be loved, cared for, nurtured and treated with respect.</p>	<p>It is important for families to show their love, spend quality time and care for infants and young children.</p> <p>Children thrive and grow up to be healthy, happy and confident when they receive love and care from their family.</p> <p>No institution can replace the home and family.</p> <p>Find ways to keep children at home or in the community.</p> <p>Families at risk of sending their children to residential care facilities or those who are unable to look after them need support from the community.</p>

<p>You have the right to be with your family and to grow up in your home or community. That is what is best for you.</p>	<p>Children who stay in their home with their families, can receive the love, nurturing, security and support they need, much more than in any residential care setting.</p> <p>No institution can replace the love and care a child receives from their family at home.</p> <p>Growing up at home with family is the best for every child.</p> <p>If you are unable to keep and care for your child at home, talk to your family members or local authorities and seek support.</p> <p>If your children are in institutions, bring them back home. They need their family.</p>	<p>Growing up at home with family is the best for every child, no matter what the circumstances may be, except in the rarest of cases?</p> <p>Bring back children from residential care facilities, because the best place for children is their home and their community.</p>
Physical and emotional violence		
<p>0-3: Tell your parents or a grown up close to you if someone hurts you.</p> <p>4-6 and 7-12: If you feel scared, upset or are being hurt physically or emotionally, tell someone you trust.</p> <p>Talk to someone close to you and whom you trust if someone you know is being hurt, either by words or by actions.</p> <p>Schools should be a safe and fun learning space for you. Talk to a family member, teacher or friend if someone is hurting you, bullying you or treating you badly in school.</p>	<p>Hurtful actions and words can harm a child physically and emotionally.</p> <p>Explaining the consequences of actions, listening, setting limits and modelling the correct behavior are better ways to discipline children than using violence.</p> <p>When children make mistakes, remind them that everyone makes mistakes. Explain what they did wrong, listen to them, guide them and model the correct behavior.</p> <p>Children need limits and boundaries. Tell them what they can do and what they cannot do, but also listen to them.</p> <p>Children develop best when they experience boundaries and "discipline with love."</p>	<p>Teach children about kindness and empathy. Encourage them to be kind to each other including children who may be different from them in terms of ability, gender, background or ethnicity; ask them to think how they would feel if they were in the other child's position.</p> <p>When children make mistakes, remind them that everyone makes mistakes, explain what they did wrong, listen to them, guide them and model the correct behavior. Remember, children learn what they see.</p> <p>Support the community to learn about and practice positive discipline practices.</p> <p>Use positive words and encourage a child when they do something well or good.</p>

<p>Every child, irrespective of gender, ability, ethnicity, age or background, is precious and should be treated with love, respect and dignity.</p> <p>13-18: All children have a right to a life free of violence. Tell someone you trust or seek community support if you are being hurt physically or emotionally.</p> <p>Stand up and say something, if you see any child being hurt or humiliated.</p> <p>When you get angry or sad, find healthy ways to deal with your emotions. You can try breathing, counting, art or music or a physical activity. Seek solutions to the problems you encounter.</p> <p>When a conflict occurs in school stay calm, talk, explain and reason.</p>	<p>Use positive words, praise and encourage a child when they do something good.</p> <p>Find healthy ways to deal with anger and difficult emotions. You can try counting, breathing, meditating or some physical activity.</p> <p>Children learn from what they see. Children who grow up witnessing domestic violence can have problems and are more likely to experience or perpetuate violence as adults.</p> <p>Every child, irrespective of gender, ability, ethnicity, age or background, is precious and should be treated with love, respect and dignity.</p> <p>Schools should be a safe and fun learning space for your child. Talk to a school or local authority if your child is being hurt, bullied, left out or treated badly in school.</p>	<p>Find healthy ways to deal with anger and difficult emotions. You can try counting, breathing, or meditating. Try to find solutions to the problems causing those emotions.</p> <p>Listen to a child and talk to the parents or caregivers if you see physical or emotional violence against a child in your community and refer the child for appropriate services.</p> <p>Stand up for any child who is being hurt or treated badly in your community.</p> <p>Children see, children do. How you treat them is how they will treat others.</p>
Sexual violence		
<p>0-3: Tell your parents or a grown up close to you if someone hurts you.</p> <p>4-6: If someone is touching your body in a way that hurts or makes you feel uncomfortable, tell someone you trust.</p> <p>7-12 and 13-18: No one should be touching your body without your permission. If someone is touching you in a</p>	<p>Talk to your child about safe and unsafe touching and tell him/her that if an adult or child touches them in a way that makes them feel uncomfortable they should tell you.</p> <p>Remind your child that sometimes even those people they know or trust may touch them in a way that makes them feel uncomfortable. If this happens, they should tell someone they trust right away.</p>	<p>Talk to children about safe and unsafe touching and tell him/her that if an adult or child touches them in a way that makes them feel uncomfortable they should tell you or someone they trust.</p> <p>Refer a child who has been a victim of sexual abuse to service providers and local authorities for further assistance.</p> <p>Support families of children who have experienced sexual abuse. Remind communities about the importance to accept them and help them heal.</p>

<p>way that makes you feel uncomfortable, tell someone you trust.</p> <p>Talk to your older friends, parents and teachers about what you should and shouldn't do on the Internet.</p> <p>Remember the Internet is public space. Never share inappropriate photographs of yourself or your body online.</p>	<p>Always know where your children are, whom they are with and what they are doing.</p> <p>Talk to your child about what can go wrong on the Internet. Tell your child anything that is posted online can be seen by the world. They should never post explicit or inappropriate photographs of themselves showing their body parts online.</p> <p>Know that girls, children with disability, disease or those who are out-of-school are at higher risk of abuse. Be observant of changes in behaviour or habits or signs of injury. If something doesn't seem normal, talk to them.</p>	<p>Tell children about safe spaces and people in the community whom they can trust and go to if they ever feel hurt, troubled or need to talk.</p>
<h2>Trafficking</h2>		
<p>0-3 and 4-6: No one should take you away from your family.</p> <p>Don't trust strangers or talk to them without your parent's permission.</p> <p>7-12 and 13-18: Being separated from your family can be dangerous for you. Talk to your parents or someone you trust if anyone is trying to take you away from your family or hometown.</p> <p>Don't trust people who promise you jobs, money or better futures in far-away cities or neighbouring countries. This can put you at great risk of abuse and exploitation.</p>	<p>Talking to your child and giving them guidance and supervision can protect them from many forms of abuse, trafficking and exploitation.</p> <p>Always know where your children are, whom they are with and what they are doing.</p> <p>Don't trust anyone who says they will provide for your child or give them a better future by taking them away. The safest place for a child is home and with family.</p>	<p>Talk to adolescents and their families about the risks of trafficking. Remind them that children need supervision and guidance and can be at harm's way when they are away from their families.</p>

Child marriage and child labour		
<p>0-3 and 4-6: The best time to marry is after the age of 18. Your body and mind need to grow up and become strong before you can get married or begin work.</p> <p>7-12 and 13-18: All children should have a chance to complete their education.</p> <p>Early marriage or child labour denies you the chance for a better future. They are against the law.</p> <p>If you are being forced to leave school to either work or to get married, seek help and advice from someone you trust.</p>	<p>All children, including those with serious disabilities, have a right to education. This can benefit them and their family in the future.</p> <p>Working underground, deep-sea and off-shore fishing, near furnaces and kilns used to manufacture glass ceramics and bricks, handling and spraying pesticides and herbicides can be very dangerous or deadly for your child.</p> <p>Marrying daughters before they are 18 can be dangerous for their health, education and future well-being.</p>	<p>Support children from vulnerable families to stay in school and complete their education.</p> <p>Talk to your community about the benefits of education, play and leisure for all children.</p> <p>Identify families at risk for child labour or marriage and refer them to appropriate services and support.</p> <p>Reiterate your commitment to keeping children safe and supporting their education and development.</p> <p>Speak up against child labour or child marriage.</p> <p>Talk to parents in your community about benefits of delaying marriage so that children can learn more, get better jobs, live happier lives and have healthier babies.</p> <p>Talk to your students about waiting until they are older to get married, so they can have better jobs, happier lives and healthier babies.</p>

Chapter 4: Communication approaches and activities

Communication for Development uses a combination of complementary and mutually reinforcing approaches to promote behaviour and social change among the targeted participant groups.³⁸ In order to operationalize the Cambodia PROTECT Framework and foster changes among individuals, families and communities, the following C4D approaches are proposed: Mass Media, Interactive Communication Technologies (ICTs), Community Engagement and Advocacy. Drawing on multiple platforms and formats through consistent messages and common story-lines, a national conversation on ending violence and keeping families together through nurturing, caring and protecting children is envisioned. The proposed activities align closely with the ongoing RGC and UNICEF child protection initiatives such as the positive parenting, Pagoda programme, positive discipline in schools and work with the Cambodian national police. Materials and resources produced for the strategy can also be used for the specific child protection initiatives.

The proposed strategy relies heavily on the utilization of a range of communication channels including mass media, interpersonal communication and existing social networks such as commune councils and religious leaders in order to deliver and reinforce consistent messages through multiple channels. Based on the review of the communication landscape and the preferred channels of communication in Cambodia, television and radio are considered essential platforms for national level efforts (See Appendix 2).³⁹ Word of mouth and community-based efforts will be required to complement the mediated messages. The diverse media access and consumption patterns across the country and across the five focal provinces underscore the need for using multiple media and communication channels in a complementary manner. The media dark areas will require intensified community level outreach activities such as screening of audio-visual materials, local media and organization of discussion groups or community events. Interactive communication technologies such as the Internet, mobile phones, and social media are fast growing in Cambodia, especially in urban areas, and they can further buttress the traditional media and interpersonal communication channels. The mediated messages will be reinforced with community-based dialogue and advocacy in the five focal provinces.

Integrated entertainment-education

An integrated Entertainment-Education (E-E) initiative is proposed to achieve the changes in behaviours and norms expected from this strategy. Such efforts can tie together the various VAC issues, link the different participant groups and draw on multiple formats building on common story-line and characters. Television and radio broadcasts and video screenings will be complemented with ground based outreach,

³⁸ UNICEF Communication for Development (C4D) Strategic Framework and Plan of Action 2008-2011: Harnessing the Power of Communication to Deliver Results for Children (2008). C4D Section, UNICEF New York.

³⁹ Access to mass media is relatively high in Cambodia, with over two-thirds of women (69 per cent) and three-fourth of men (75 per cent) aged 14-49 accessing some source of mass media on a weekly basis. A vast majority of Cambodian households (87 per cent) own a mobile telephone, while two-thirds (66 per cent) own a television. Fewer households (40 per cent) own a radio. Ownership of these devices is higher in urban areas than in rural areas (CDHS, 2014).

community mobilization and collective action, engaging different participant groups (e.g., children and adolescents, parents, teachers and religious leaders).⁴⁰

E-E is well suited to address complex and multi-faceted issues such as violence as it allows complex and layered treatment of multiple themes through intertwined and on-going story-lines. There is already a precedent for effective use of multi-media E-E in Cambodia for health including sensitive issues surrounding stigma and HIV.⁴¹ The envisioned mediated components include a televised drama serial, a radio adaptation of the drama, child friendly storybooks and comics, films (for more focused reach on specific participant groups) and new media. The community engagement component includes child clubs, parenting support sessions, participatory theatre and wall painting. Advocacy activities include engaging champions and community influentials for high-profile public events. A national and sub-national level launch of the strategy will also be required, with a range of activities organized at different levels to highlight the strategy. All these communication activities will be linked to build on common messages, characters, scenarios and story-lines, under the umbrella of an integrated E-E initiative with a unique and memorable name and attractive branding (*see Figure 13*). In keeping with UNICEF Guidelines on Accessibility and the Convention on the Rights of Persons with Disabilities (CRPD), communication materials and activities will be adapted and be inclusive of and accessible to children and adults with a wide range of disabilities.

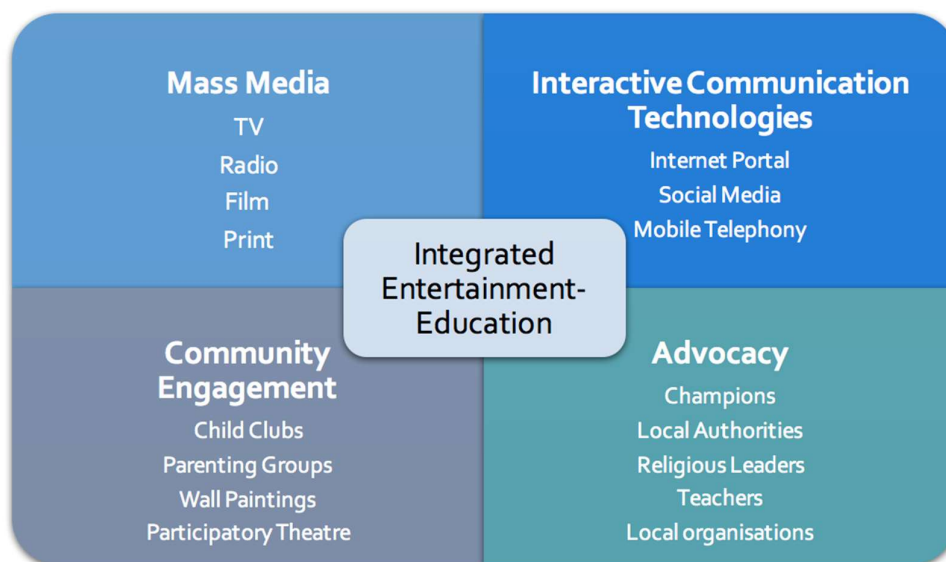


Figure 13: Integrated entertainment-education

⁴⁰ Singhal, A., Sharma, D., Papa, M. J., & Witte, K. (2004). Air cover and ground mobilization: Integrating entertainment-education broadcasts with community listening and service delivery in India. In A. Singhal, M. Cody, E. M. Rogers, & M. Sabido (Eds.), *Entertainment-Education and social change: History, research, and practice* (pp. 351-376). Mahwah, NJ: Lawrence Erlbaum Associates.

⁴¹ Taste of Life Series, Endline Assessments conducted by BBC World Service Trust (2016).

Mass media

Television series

Given the popularity of television as a favoured communication channel, a televised entertainment-education serial is proposed as an important component of the strategy.⁴² Two seasons with 52 episodes of 30-40 minutes can be planned to be broadcast over two years. The first season can cover VAC as a whole and focus on positive parenting to address neglect, emotional and physical violence and unnecessary family separation. Over time, as audience engagement increases, season two can include story-lines with more sensitive issues such as sexual violence, trafficking and child labour. The stories should be positive and aspirational, drawing on role models and problem solving. Story-lines also need to be culturally relevant and realistic, while being engaging, promoting deliberation and debate. Audience members should be able to identify with the characters and role model positive characters. Given the advances in media production and widening choices for media consumption, E-E products need to be of high quality and comparable to commercial media and should be aired during peak viewing hours over multiple channels.

Effective E-E initiatives are based on research. The overall content, message design and character delineation build on strong formative research followed by pre-testing. Cambodia is well placed in terms of existing research looking at the prevalence of different types of violence, the groups of children and adolescents that are higher risk of experiencing violence, as well as a strong understanding of the determinants of violence such as prevailing norms, attitudes and practices. The production and pre-testing process should ensure that the perspectives of key vulnerable groups such as at risk children and families are included. Formative research is usually a time and resource intensive step in E-E development. However, given the vast amount of existing research on VAC in Cambodia, it is not necessary to conduct extensive formative research. The materials can build on available evidence and then pre-test comprehensively, ensuring that the views of different participant groups across backgrounds (gender, disability, ethnicity, age, income etc.) are included.

Radio series

Radio and television can be used in conjunction for greater reach and higher reinforcement of messages. A radio adaptation of the television drama can be produced for areas with low or no television access. This can also be dubbed in languages of various ethnic groups for broadcast in specific areas. Assessments of E-E programmes addressing women's rights and school enrollment on Cambodian Women's Station FM102, demonstrate that radio is an effective medium to transmit information in marginalized areas for both poor and rural households, where media access and information technologies might be more unequally distributed (Cheung, 2012). Radio shows also allow for participation through call in programmes and are more cost effective than television.

Television and radio spots

Sustained media presence and visibility will serve to sensitize people on the key issues and reinforce messages. Sustained media also serves to highlight issues at a national level, contributing towards behaviour change as well as advocacy and social mobilization. Spots can also serve to highlight the overall

⁴² According to the Cambodia Demographic Health Survey (2014), a third of Cambodian households (66 per cent) own a television. Fewer households (40 per cent) own a radio. Ownership of these devices is higher in urban areas than in rural areas. Watching television is the most common way of accessing the media: 61 per cent of women and 62 per cent of men surveyed report watching television at least once a week. See Appendix 2 for additional information on the media landscape and reach.

campaign and brand identity. The spots should feature popular figures as brand ambassadors and influential policy makers and national leaders endorsing their commitment and support for the campaign and reiterating the need to protect children from all forms of violence.

Television spots will also be needed for pre-programme publicity. It is recommended that some spots use the same characters and format of the E-E drama series. This creates an ongoing link with the television series. Additionally, a series of animated spots can be produced to capture key aspects of violence. Animations and Japanese-inspired animé are very popular in Asia and will be well suited to younger children and for ethnic groups who may not necessarily identify with the characters in the televised serial. Animé can also be linked to the comic book characters for additional reinforcement and will serve to make serious and sensitive topics more appealing through humour and creativity. Spots featuring celebrities, local heroes who have overcome odds or broken the silence on VAC will enhance the profile of the strategy. Radio spots can aid with programme publicity and remind people about available services such as the child helpline. These spots can be used for the strategy launch and around special events and days (e.g. Children's day or ending VAC week).

Film

Films serve to raise awareness at different levels – families, communities, national stakeholders and policy makers. Films provide higher audience engagement and deeper understanding of the issues than spots. They are also well suited to focus on specific issues or audience groups. Based on the higher prevalence of child marriage among ethnic minority groups in the North East region of the country, child marriage appears to be a good issue for film treatment. It is therefore recommended that a film on child marriage focusing on and featuring ethnic groups in local dialects, be produced and disseminated in the relevant provinces. Experience in developing communication programmes with an equity focus for minority groups highlights the need to have tailored interventions with material designed especially for these groups.⁴³ A general, one-size-fits-all approach will not work for minority groups as they have very distinct cultural practices, languages and backgrounds. A second film can be produced for younger children in a child friendly-format using animation. Animé is an engaging format for children and adolescents and can be used to simplify and explain complex issues surrounding violence (e.g., safe places and people, good touch and bad touch). VAC related messages for young children need to be designed age-appropriately and thus would be best addressed as a separate product aimed specifically for young audiences. This film can be screened in schools and used as a discussion tool. Films can also be used as a tool to bring communities together to spark public discussion. Film screenings and mobile cinema can reach audiences who may not otherwise have access to electronic media. Mobile screening of films (or DVD adaptations of the television serial) will also be useful in attracting male caregivers.

Storybooks and comics

Two types of reading material are proposed. First, illustrated storybooks that can be read by dual audiences such as parent to child but also by children to other children. Such books serve two purposes: telling an educational story to children while engaging them through illustrations or photographs of children just like themselves. Secondly, these books offer positive role models and practical suggestions on how to provide love, safety, security and positive parenting and discipline. These books are primarily targeting infants, toddlers and early primary students. Secondly, comics can be developed for older school aged children focusing on specific violence themes such as bullying, sexual abuse, managing adolescent issues and

⁴³ Sengupta, A. (2007). "Enacting an Alternative Vision of Communication for Social Change in the Peruvian Amazon." Doctoral Dissertation. Ohio University.

making safer choices, inclusion and non-discrimination for children who are different. These materials can build on the same story-line and characters as the television series and become a print version of the stories that are aired. They can also include discussion questions and end with some things to think about, allowing for further dialogue and deliberation among readers. Children can take these comics to school or read them with friends or family members. Soul Buddyz, a popular and powerful South African television serial, used a multi-media format, where the television programme was complemented with print material and included a series of life skills based magazines that included comics with a story, followed by facts, discussion points and activities.⁴⁴ The books can also be developed over time, allowing for new themes or editions to be included in subsequent phases of the programme.

Interactive communication technologies (ICTs)

New digital technologies and social media are rapidly emerging as a popular channel of communication in Cambodia and can be used to complement the traditional media, particularly among urban, younger and more educated groups. Interactive communication technologies offer new possibilities for C4D as well as for E-E initiatives, providing an additional platform that crosses spatial boundaries and allows for cost effective and almost instant communication. The near universal access to mobile phones and the rapid increase in access to the Internet, making it the second most used channel after television, confirm that ICTs are a viable platform in Cambodia.⁴⁵

Internet portal

A web portal can provide an online base for the strategy. The website can be a one stop site on VAC issues in Cambodia offering information, links to services as well as access to the communication materials, including episodes from the television series. Online viewing reduces broadcast costs significantly and audience members can watch an episode online in case they missed it, or can re-watch an episode that they liked. If the issue is sensitive, viewers can watch it in a private space or with a group of peers. An example of such an approach is the highly-successful U.S. programme, East Los High⁴⁶, which offers cutting-edge innovations in using the Internet and new technology for E-E. Focusing on issues relating to Latino youth in the United States, the show is streamed online through video on demand and is well integrated with social media such as Twitter, Instagram and Facebook. The website features a self-help section with an online video blog, link to fan questions and answers and virtual counseling with cast members. There is also a section to help people take action and connect with ongoing initiatives or partners working on related issues (e.g., bullying, sexting, planning your future). Such an online platform can be modelled and will support the strategy and enhance reach, enable feedback and two-way communication among viewers, leading to online community building around a common issue.

Social media

Use of social media such as Facebook and YouTube is increasing, particularly among urban and peri-urban youth. The interactivity and ability for rapid responses make social media a useful channel. Furthermore, social media allows for virtual community building around a common cause. These platforms can be used to promote and disseminate the mass mediated messages proposed in the strategy. Audience feedback on

⁴⁴ To review an issue of the Soul Buddyz magazine on dealing with traumatic experiences visit: [https://www.unicef.org/cwc/files/Nozipho_Story\(2\).pdf](https://www.unicef.org/cwc/files/Nozipho_Story(2).pdf)

⁴⁵ Phong, K., & Sola, J. (2015). Research Report: Mobile Phones and Internet in Cambodia. USAID, Development Innovations, Asia Foundation and the Open Institute.

⁴⁶ For more information visit: <http://eastloshigh.com>

the television series can also be elicited through new media. The E-E series can have a social media presence and online fan groups can be formed to share information and spark dialogue on VAC related issues.

Mobile telephony

Use of cell phones and mobile technology for health and human rights is on the increase in Cambodia. Both text messages and interactive voice response (IVR) can be used to reinforce the proposed strategy's key messages, remind people of community events, disseminate referral and reporting information such as hotlines and response services. Mobile phones can also be used as feedback channels for the mediated programmes, a means of disseminating local stories and solutions and information about community level activities. The younger urban populations, including those in media dark areas as well as some parents and most community leaders, can be effectively reached through mobile telephones. There is also emerging evidence that mobile phones and SMS may be a feasible way to reach high-risk urban groups such as female entertainment workers in Cambodia.⁴⁷ Mobile telephones will be a useful vehicle to certain groups at risk of violence such as migrant families, out of school youth, children living on the street and in remote areas. Mobile telephones and other new technologies are also increasingly being used to reach people with disabilities. There are simple Apps and technology to ensure access, such as messages in Quick Response Code (QR Code) that allows for digital content to be accessible in a variety of formats, including videos in sign language.

Community engagement

The proposed community engagement activities will foster participation, generate dialogue and build skills and confidence to bring about meaningful change. Children will be engaged as change agents and solution seekers, with a focus to enhance inclusion, critical thinking, and confidence building. Age appropriate materials and activities that build self-efficacy, social and emotional learning and life-skills are envisaged to equip children and adolescents to better manage conflict, deal with negative emotions, prevent bullying, manage relationships and make informed choices. Likewise, parents and caregivers, including fathers and grandparents, will enhance their knowledge and awareness of positive parenting practices and be better equipped to take protective actions or seek community-based solutions to protect children. Furthermore, considering that various forms of violence are closely linked and those experiencing one form of violence are likely to experience both multiple types of violence and multiple incidents of violence, the linkages between the different forms of violence and family separation are emphasized through the community engagement activities. The content for both parents group and child clubs will stress a core set of informational takeaways and skills that are applicable across multiple forms of violence. For instance, critical thinking, discussion and decision-making or reporting or seeking support services are relevant for multiple forms of violence.

Child clubs

E-E interventions commonly use group listening or viewing followed by discussion. For example, the Soul Buddyz programme in South Africa has over 8642 Soul Buddyz Clubs with over 140 000 children participating in club activities. Today it is a national movement for children between the ages of 8-14 years and provides a space where children come together to learn, play, develop skills, read and act as agents

⁴⁷ Brody, C., Dhaliwal, S., Tuot, S., Johnson, M., Pal, K., & Yi, S. (2016). Are Text Messages a Feasible and Acceptable Way to Reach Female Entertainment Workers in Cambodia with Health Messages? A Cross-Sectional Phone Survey. *JMIR mHealth and uHealth*, 4(2), e52. <http://doi.org/10.2196/mhealth.5297>

for change in their schools and communities.⁴⁸ This model of child clubs allows for community-based engagement that is directly linked to the media messages. Furthermore, viewers relate to and role model attractive and engaging characters. DVD tools can be created with segments of various episodes of the drama series and these can be accompanied by a set of discussion questions or follow up activities that the club members can be involved in. Discussion among viewers can lead to dialogue and disclosure. Club members can over time become the changemakers taking positive actions to prevent violence and to respond to violence when it occurs. Club members can also be trained to produce short OneMinuteJr videos that enable them to share their views, ideas, dreams, concerns and solutions. Youth led videos such as OneMinuteJr. have become a powerful means for children, including those who are marginalized, to express themselves and have their voices heard.⁴⁹

Curriculum as well as communication materials will need to be developed for these clubs, linking closely with the television series and focusing on life skills. Promoting communication and life skills among children and adolescents will build their capacity and confidence (efficacy) in discussing violence-related issues among their peers as well as with their families. Self-efficacy is also important for disclosure and taking actions to protect themselves and their peers. These clubs can provide a safe space for children, where everyone is welcome and children are free to discuss their fears and failures as well as joys and successes. Child club members can also provide peer-support and positive role modelling with older members playing a mentoring role. Mentoring provides a supportive relationship and positive role modelling and has also been used successfully in violence and bullying prevention efforts in a range of countries. For instance, the Big Brothers Big Sisters of America is a century-old national programme that has shown lasting impact on mentees who are less likely to use drugs, skip school and use alcohol as a result of having participated in the clubs.

The clubs will enable children and youth to share their concerns, advocate for change, raise awareness and dialogue around solutions. These clubs should include vulnerable children including those with disabilities and from religious or ethnic minority groups. Adolescents from vulnerable groups who are out of school including those with disabilities, may also take on an active role in leading some clubs and supporting other children in safe spaces. There could be some sort of reward, recognition or incentive for clubs on a competitive basis for leading change, or for producing media products or coming up with innovative solutions. There is evidence of positive impacts of child clubs in Cambodia, showing that engagement in clubs has resulted in greater decision-making among youth.⁵⁰ The recommendation is that this component of the strategy builds on existing child clubs (both school based and community-based) in the five focal provinces. For instance, World Vision has child clubs where members are trained on various aspects of VAC, as well as communication including role plays. Save the Children also has child and youth clubs. During the in country consultations, government partners suggested refresher trainings and capacity building of existing child and youth clubs.

Parenting support groups

A key aspect of improving developmental outcomes for children and adolescents, especially in relation to early childhood development and protection, is engaging with their parents and other caregivers who are

⁴⁸ Soul City Institute for Social Justice at: <http://www.soulcity.org.za/projects/soul-buddyz/soul-buddyz-club>

⁴⁹ www.theoneminutesjr.org

⁵⁰ Jordanwood, M. (2016). Protecting Cambodia's Children? Phnom Penh: World Vision Cambodia.

primarily responsible for their growth and personal development.⁵¹ The Parenting support groups proposed here aim to generate dialogue to enable community-based local solutions to problems relating to VAC and family separation. This approach aims to enable parents to understand their critical role in their children's development and build on the positive things they currently do. They can also learn new skills or explore local solutions for areas of parenting they find challenging. Cambodia currently has several parenting education initiatives underway, however they are fragmented, the focus on VAC is not always clear and few of the programmes are based on a clear theory of change or evaluated stringently to assess effectiveness.⁵²

Similar to the child clubs, groups of parents or caregivers (including grandparents and extended family members who are responsible for raising children) can view the television series and follow the viewing with discussions aimed at finding solutions to common problems. A positive parenting module and discussion guide can be developed for parents and caretakers that builds on themes and story-lines from the television series. The component can link with parenting support interventions under the positive parenting strategy, targeting all parents (Level 1) as well as for those at-risk (Level 2).⁵³ Religious leaders as well as teachers can use the same content or training module for parents. These sessions should engage vulnerable families, including those with disabilities and from religious or ethnic minority groups.

The benefits of engaged fathers in early childhood development are well noted. Additionally, there is strong evidence to support the need to engage with men and boys to address the deeply gendered and normative aspects of many forms of violence and promote non-violent norms (Barker, Ricardo, Nascimento, Olukoy & Santos, 2010; Jewkes, Flood & Lang, 2014).^{54,55} Violence against children is often linked with domestic violence. Children who grow up in violent homes are more likely be victims or perpetrators of violence and carry on the intergenerational cycle of violence. Hence, special efforts will need to be made to engage men. Conducting the parenting session in the evening is one option so men can join after work. Local authorities who are often men can arrange for special sessions for fathers only. Men who are positive role models in the community can be invited and recognized, thereby encouraging other men. The Community-based engagement should work in conjunction with the mediated messages portraying fathers as supportive of women and children's rights and promoting non-violent disciplining practices within the home.

Participatory theatre

Participatory theatre can be used as a powerful tool to further community level participation and stimulate dialogue. Drawing on Augusto Boal's methodology, Theatre of the Oppressed or Forum Theatre

⁵¹ Britto, P.R., & Engle, P. (2013, unpublished). Parenting education and support: Maximizing the most critical enabling environment. New York: UNICEF.

⁵² Ministry of Women's Affairs (2015). Positive Parenting Strategy Cambodia. Promoting Positive Parenting: Preventing Violence against Children & Keeping Families Together.

⁵³ The Positive Parenting Strategy for Cambodia proposes three levels of interventions. Level 1, provides universal parenting support to promote knowledge and awareness on positive parenting amongst all parents and caregivers. Level 2, provides group-based parenting support to change parenting behaviour amongst parents and caregivers at risk of violence or unnecessary family separation. Level 3, provides specialised parenting support in response to violence and unnecessary family separation.

⁵⁴ Barker, G., Ricardo, C., Nascimento, M., Olukoya, A., & Santos, C. (2010). Questioning gender norms with men to improve health outcomes: Evidence of impact. *Global Public Health*, 5(5), 539-553.

⁵⁵ Jewkes R, Flood M, Lang J. (2014). From work with men and boys to changes of social norms and reduction of inequities in gender relations: a conceptual shift in prevention of violence against women and girls. *Lancet* 2014; published online Nov 21. [http://dx.doi.org/10.1016/S0140-6736\(14\)61683-4](http://dx.doi.org/10.1016/S0140-6736(14)61683-4).

encourages audience members to engage in critical reflection and problem solving. The scripts are developed by community members on relevant issues and themes and the ending is usually left open, urging the audience to deliberate on possible conclusions to the plot. Rather than being passive audiences to one-way messages, the viewers are transformed to become active *spec-actors*. Tools such as participatory theatre are particularly well suited to the Cambodia PROTECT framework as it allows audiences to join the stage and reflect and present alternative solutions that build on local realities and social expectations. This is closely aligned to recognizing the problem, exploring potential solutions and negotiating alternatives as put forth in the Cambodia PROTECT framework. Participatory theatre has the potential to convene large community gatherings, for instance, when scheduled on weekends or holidays. Furthermore, when used for issues such as VAC, participatory theatre can break the silence around violence and bring private or taboo issues to a public forum, where children, families and community members can discuss the issue as well as possible solutions. The participatory theatre can be filmed and used for screenings and discussion in additional areas. This will limit the cost of training and organizing the theatre performances but still use the same format to spur discussion. Organizing such public events are central to changing norms and making the new norm visible and salient while questioning prevailing norms and expectations. It is recommended that the participatory theatre be part of the child club activities.

Wall paintings

Visual communication methods such as murals, graffiti and wall paintings have been commonly used as means to raise awareness as well as express resistance. As part of the child clubs or school-based activities, children can create wall paintings in key places in the village such as schools, health centres, commune office or other public spaces. This becomes a way to reinforce the proposed messages and allows children and youth to present their perspective on how they envision a world free of violence and links closely to the idea of promoting zero tolerance to violence. When done on school walls, it is a public reminder that schools should be safe spaces for children to learn and thrive. As a participatory exercise to engage children, the portrayals are local, representing a message from the community rather than a message for the community. Wall painting is a relatively inexpensive medium and children can repaint the walls on a frequent basis to illustrate new themes or issues around VAC.

Advocacy

Building on existing networks and leveraging the role of community influentials to promote positive parenting, disciplining with love and preventing violence and family separation is an important element of advocating for change. Community influentials can inform caregivers on the benefits of protecting children, listen to their perspectives and encourage dialogue or exploring solutions. When children or adolescents need support or guidance beyond the family, they can turn to community influentials such as teachers, religious leaders and local authorities. When community influentials publically denounce certain practices or support new norms, community members are likely to follow. Champions as well as key influentials are pillars of the proposed strategy and the movement to end VAC and keep families together.

Engaging champions

The strategy will need champions to support the effort and to enhance visibility and credibility. National level leaders and celebrities as well as provincial and local level leaders can be part of the advocacy effort. Public events featuring these champions will generate buzz and excitement. At the national level, when important figures support a cause it lends credibility and reflects commitment and buy-in. As a national strategy to protect children it is important to identify and partner with well-recognized and respected individuals from a range of spheres. Some suggestions received during our consultations were the Queen mother, the Prime Minister or his wife, as well as popular singers such as Meas Soksophea and sports personalities such as Sorn Seavmey. Partnering with popular male figures can help change dominant

gender roles and promote engagement of fathers. Likewise, female figures such as sportswomen and successful professionals can help highlight changing gender norms and stereotypes. People with disabilities can help address stigma and promote inclusion. Events such as concerts or sports events can also be organized to raise awareness and advocate for change. To the extent possible, these events will be accessible and welcoming to children and adults with disabilities.

Engaging religious leaders

Religious leaders are influential community members and their role can be leveraged further in protecting children and promoting messages of positive parenting, disciplining with love and guiding and supervising adolescents. The Ministry of Cult and Religion is already among the line ministries coordinating on the National action plan on VAC. UNICEF and partners are working with the Buddhist leadership to include child protection messages in the curriculum for monks. Additional orientation on violence prevention and response and keeping families together will need to be conducted to ensure harmonization of content. Monks have direct access to communities and families during major life events such as births, naming ceremonies and marriages and can include relevant messages in their sermons. Additionally, community sessions can be organized and led by monks to discuss violence and how communities can explore options to protect children, prevent violence and keep children with families. This builds on the idea of exploring local solutions and publically committing to taking positive actions put forth in the Cambodia PROTECT framework. For Muslim communities and minority groups, relevant religious and ethnic leaders will need to be included.

Engaging teachers

Teachers are a critical group to engage with for this strategy, to end violent discipline, promote positive discipline and to ensure schools are safe spaces for children. Teachers can organize school-based initiatives such as the child clubs, participatory theatre and wall painting. They can also work closely with the School Support Committees (SSC) and engage with parents and reinforce key messages on positive parenting. Special events can be organized in the school, inviting families and community influentials for concerts by children, participatory theater or other events celebrating children. These activities will need to align with ongoing efforts involving teachers and promoting positive disciplinary practices.

Engaging local authorities

The village and commune chief are important local authorities who will need to be oriented and can orchestrate community level engagement. Local authorities can organize community events and discussion forums. Discussion and public declarations are an important part of the strategy and closely linked to the Cambodia PROTECT Framework. Regular events should be organized where people can come together and take collective actions to prevent violence and to explore solutions. Special events are proposed on a regular basis. These events should be conducted over a full day, starting with village level mobilization and culminating in the Commune Office. Local leaders and advocates can give motivational speeches, local role models can be celebrated and recognized and all stakeholders can be involved in parades showing their commitment and solidarity towards ending VAC. In addition to the village and commune chiefs, local law enforcement officials and the Cambodian National Police will be another key group to engage with. The strategy will include orientation workshops to sensitize police officials and strengthen their capacity to respond to violence and enhance interpersonal and child friendly communication skills.

Engaging local organizations

The Commune Committees for Women and Children (CCWC) is an informal community-based child protection mechanism that will play key role in ground-based efforts to end VAC and institutionalization. CCWCs engage in a wide range of activities including planning, supporting, advocating, raising awareness,

and monitoring child protection issues. In some areas, they also act as a mechanism referring cases of abuse to NGO child protection services and some have even moved beyond their policy mandates to deliver their own child protection services. While the CCWCs are a critical player for child protection and would be the most appropriate coordination body at the commune level, it is important to note that they are already overstretched with requests from families and with having to coordinate with multiple partnering NGOs. Additionally, the assessment of the role of CCWCs also points attention to the fact that they lack technical capacities. The strategy cannot rely solely on this body for implementation. The Village Health Support Group (VHSG) is also another group the strategy can draw on as they have a presence in every village. The School Support Committee is another local group that provides an important link between schools and communities and can become an important group to work with. Village level volunteers such as those working with Red Cross can also be mobilized and will be an important group to partner with for the community level implementation of the strategy.

Chapter 5: Implementation and next steps

The previous chapter delineated the various mediated and community-based activities that need to be carried out to achieve the desired behaviour and social change. The overall strategy and the specific communication activities will require several planning and implementation steps in order to be conducted at the national level and in the five focal provinces over the duration of the strategy. The immediate next step to conclude the strategy development process is for the Government to review and endorse the strategy. Once approved, it is envisioned that the strategy will be implemented by the Government in collaboration with national and international partners. A detailed implementation plan with the estimated costs and suggested timeline has been developed for the first three years (2019-2020) of the strategy. This includes the planning and material development phase, as well as full roll-out and re-planning for the second phase (2022-2024) of the strategy. Provincial level work plans will also need to be developed in consultation with provincial level authorities and partners once the implementation sites are selected and the coordination mechanisms are agreed upon.

This section of the strategy outlines the steps required for the planning, launch and implementation of the strategy.

Establish management and coordination mechanisms

As a national strategy, the initiative needs to be owned and championed by the Government. An inter-ministerial and inter-agency steering committee will be needed to coordinate, manage and oversee the strategy roll-out. The coordinating body will need to establish specific roles and responsibilities for the planning, implementation and monitoring of the strategy and must also establish a schedule for regular meetings and progress reports. There is already a strong precedent for inter-ministerial coordination as part of the national response for violence and family separation. For VAC, the Steering Committee led by MOWA with the membership of 13 key government ministries and agencies and four Technical Working Groups (TWG) with members including government, development partners, civil society organizations, UN agencies, and youth has driven the drafting and finalization of the national action plan on violence. Similarly, for family separation, a partnership programme for the protection of children (3PC) with MOSVY, UNICEF, Friends International and nine non-governmental organizations and 40 civil society organizations has been established and is currently operational in seven provinces.

At the national level, it is recommended that the strategy be led by one key ministry heading the Steering Committee and leading on the implementation and coordination while also convening and coordinating between the relevant line ministries. At the sub-national level, the existing government structures will have to be leveraged and strengthened. During the consultations with Government partners, the recommendation was to build capacities of existing national structures. At the provincial and district level the Women's and Children's Consultative Committee (WCCC) is an important mechanism that is responsible for women and children's issues including child protection. However, the reality is that they are already overloaded and are not adequately engaged or coordinating effectively with the CCWCs. Likewise, the Commune Council and the CCWCs will need to be the formal structure at the commune level, responsible for managing and reporting the strategy roll-out. As mentioned previously, the CCWCs already have a lot of responsibilities and limited capacity (e.g., leadership skills including communication and facilitation as well as subject specific skills such as knowledge of child protection issues). The social service delivery mechanism at the commune and village is limited, leading to many CCWCs having to go beyond their mandates and provide child protection services (without the required training) as they are unable to

refer families to formal services.⁵⁶ The role of Community-based volunteers will also be critical and will provide support to the formal structures. Ensuring the commitment of CCWCs, village volunteers and local organizations will also require investments – capacity building and incentives or recognition of some form. Further consultation is still required to decide on the implementation modalities and how the strategy will be lead, coordinated and managed at the national and sub-national levels and will be included in the discussion during the validation process.

Select intervention sites

The mass media related interventions will be at the national level, and the community-based interventions will need to be implemented in specific sites in the five focal provinces, in order to achieve the objective of implementing the strategy in 25 per cent of the commune councils by 2018. UNICEF and partners will need to identify the intervention districts and communes in consultation with the Government. The implementation plan provides the costing for 25 per cent of the communes in the five provinces (116 Communes and approximately 927 villages). The recommendation is to select sites with a strong UNICEF or partner presence, to provide an existing base to build the community engagement component. Other partners, including NGOs, will no doubt identify additional intervention sites.

Allocate resources

Financial and human resources will need to be allocated for the strategy implementation. An impactful and visible communication strategy requires high quality production of media material and considerable investments to reinforce the messages and engage communities and champions at the local and national level. The implementation plan lays out the estimated costs for each of the activities. Depending on the available budget, the suggested activities can be phased or adjusted. Dedicated human resources will be required to coordinate the implementation, management and monitoring of the strategy. Considerable coordination will be required among the national partners for implementation. Regular planning and reporting meetings will be essential for accountability. Close co-ordination will also be required for the media material development and the community mobilization. It is recommended that two staff or consultant positions be created. One person will need to be based in UNICEF to provide overall management and monitoring oversight. The second person will need to be positioned in the Ministry to manage the Steering Committee and coordinate closely with the national and sub-national partners.

Campaign design and branding

The strategy will need to be branded with a catchy and culturally appropriate name, tagline and logo. Publicity material will need to be designed and produced. The logo and slogan will be the brand identity for the entire strategy and will be a cohesive force that can unite the various components and should be on all the communication material and products. In addition, high profile brand ambassadors can lend credibility and add to the brand image. The campaign branding will need to be pre-tested and finalized prior to the launch.

Material development

The mediated materials and communication tools (briefing kits, guidelines, orientation modules) will need to be developed. The suggested key messages have been included in this document. Once the national partners agree on and validate the messages, a message development workshop should be conducted. This will be an important step for the material development, following which the materials can be designed, pre-tested and finalized. It is recommended that an overall design document or creative brief, in keeping with

⁵⁶ Jordanwood, M. (2016). Protecting Cambodia's Children? Phnom Penh: World Vision Cambodia.

the child-centered, inclusive, positive action oriented approach of the strategy, is developed for the entire campaign covering all materials. This will ensure harmonization of messages and allow the different media products to reinforce common themes and messages. A common approach and principles can be agreed upon to cover all material produced for the campaign. For instance, it is important to promote the positive aspects of Khmer culture rather than to bring attention to the negative aspects of current parenting practices or Cambodian society. Subsequently, detailed creative briefs will need to be developed for each material. For instance, the creative treatment for the storybooks for young children will be very different from the television serial aimed at the general audience, as will be the treatment for the films. Each product will need a specific and detailed brief and will be developed by media experts working specifically on that product.

Considering the link between disability and violence, it is important to make the communication material accessible to people across a range of disabilities. The disability community promotes an universal approach that enables not only people with disabilities, but everyone, to the extent possible, to access the same material. Some useful tips to consider are using sub-titles for individuals who have hearing impairments or those who are not fluent in Khmer; electronic format or Braille for individuals who have a visual impairment; easy-to-read formats with large fonts and sharp contrasts for persons with intellectual impairments or those who are partially sighted, as well as children and persons with low literacy or language barriers.

Invest in research

There is already robust research on VAC and family separation in Cambodia so additional research to inform the strategy is not required. Instead the materials can be pre-tested across a range of participants keeping in mind gender, geographic location, disability, ethnicity and age. Also in order to ensure that the behaviour and social change resulting from the strategy is tracked and measured, a baseline study is recommended. Additional details for the research including indicators and tools are provided in the M&E Framework.

Orient community influentials

Establishing partnerships and orienting community influentials on the purpose of the strategy and the key messages will be an important preparatory step. A training of trainers will need to be conducted at the national level to build capacity of future trainers and advocates. The trainees will then conduct orientation and capacity building workshops for the community influentials at the Provincial level. In addition to information on VAC and family separation, the training content should include modules on interpersonal communication and how to inform, guide, counsel and support community members. A series of orientations may be required to cover the various stakeholders. To ensure quality and consistency of trainings, innovative training tools such as audio-visual and participatory learning tools should be considered.

In conclusion, this strategy provides guidance on delivering a comprehensive C4D response to protecting children from violence and family separation in Cambodia. A long-term strategic vision aimed at changing behaviours and practices across the different socio-ecological levels is presented. The strategy strives for behaviour and social change, informing children and their families, while also engaging and empowering them to make better-informed choices and adopt practices that will impact multiple facets of child development and well-being, thus contributing to healthier, happier and more confident children, families and future generations.

Appendices

Appendix 1: Key determinants of VAC and residential care⁵⁷

Violence against children: Just as the type and manifestations of VAC are numerous, so too are the determinants that play a key role in putting children at risk for violence or protecting them from violence. Findings from the Systematic Literature Review and Existing Datasets on Violence against Children in Cambodia (henceforth referred to as the Cambodia Systematic Review on VAC) provides the most comprehensive picture of these determinants for 9 types of violence: physical violence (in homes and in schools), emotional violence (in homes and in schools), sexual violence, neglect and negligent treatment, child marriage, child labour, and trafficking.

Some determinants are common across multiple forms of VAC while others are unique to specific types of VAC. Table 1 draws out these connections by looking at the data on VAC from a determinants perspective. The table has been abridged to include mostly those that can be addressed by C4D and lists the determinants by levels of the social ecological model (individual, family, organizational, community, and policy/legal).

Analysis clearly shows that household poverty and acceptability/normalisation of violence by the perpetrator are the most salient cross-cutting determinants. Discriminatory gender norms also appear to play a significant role, affecting four types of VAC—physical violence in the home, sexual violence, child marriage, and trafficking—all of which have clear gender dimensions. Other notable determinants identified for three out of the nine types of VAC include: disability & HIV/AIDS⁵⁸, education, and urbanisation.

Given that the behaviour change campaign is supposed to address a wide spectrum of VAC issues, focusing on specific cross-cutting determinants of VAC is one way of providing focus to the campaign's broad scope. If the behaviour change intervention is to be successful, then linkages should also be made across key determinants. In other words, work to address attitudes that normalise violence should complement and supplement efforts rewriting gendered norms and vice versa. Such harmonization between and across determinants that C4D can address will set the strategy up for long-term success. The C4D strategy should also take a holistic approach to addressing VAC and be sure to address determinants situated at each level of the socio-ecological model.

⁵⁷ Taken from the Rain Barrel Desk Review (Deliverable 1).

⁵⁸ The *Cambodia Systematic Review on VAC* lumps disability and HIV/AIDS together. We see these as two separate determinants with their own unique effects and contexts to consider. Since we are summarizing the other work, we have kept them together.

Table 1: Linking determinants of VAC to the 9 types of VAC

SEM Level	Determinants	Physical Violence (Home)	Physical Violence (School)	Emotional Violence (Home)	Emotional Violence (School)	Sexual Violence	Child Marriage	Child Labour	Neglect	Trafficking
Individual	Child's age	✓	✓							
	Child's gender		✓							
	Child's weight		✓							
	Mother's age								✓	
	Mother's education								✓	
	Alcohol consumption (child)				✓					
	Alcohol consumption (father)		✓	✓						
	Pornography					✓				
	Childhood trauma		✓							✓
	Disability & HIV/AIDS	✓		✓		✓				

	Education		✓				✓	✓		
Interpersonal	Family size								✓	
	Household poverty	✓	✓	✓	✓		✓	✓	✓	✓
	Parent-child relationship dynamics	✓		✓						
	Peer support	✓			✓					
	Fragile/ dysfunctional family					✓				✓
Organizational	Presence of school security guard		✓							
	Gender-separate toilets at school		✓							
Community	Acceptability/Normalisation of violence by perpetrator	✓	✓	✓	✓			✓	✓	✓
	Discriminatory gender norms	✓				✓	✓			✓
	Violent masculinities					✓				
Societal	Urbanisation	✓		✓			✓			

	Market demand for children							✓		
	Sex tourism									✓
	Socio-economic inequality (global, national, and household levels)									✓
Legal/Policy	Border control & law enforcement									✓
	Impunity					✓				

Using data available in the 2014 CDHS, we examined attitudes towards beating and hitting sons/daughters across the five focal provinces⁵⁹. The acceptability of physical violence towards sons and daughters is high across the five provinces. Roughly two-thirds of both female and male respondents reported that corporal punishment by a parent is justified in at least one of the five scenarios asked about⁶⁰ (see Table 2). There were some significant province level differences with respondents from Battambang and Preah Sihanouk exhibiting significantly more negative attitudes as compared to the three other focal provinces. A deeper examination of the attitudes shows that 20 per cent of respondents believe a parent is justified in beating a son in all five situations and 28 per cent believe this is true for daughters. This high level of support for corporal punishment as a disciplining method is further validated by data from the *Participatory Qualitative Research on Caregiver Practices* which found that physical discipline of children is considered the most effective method of changing a child's inappropriate behaviour. These data underscore the importance of addressing the acceptability and normalisation of violence towards children.

Table 2: Attitudes justifying beating and hitting by focal province

	Kandal	Phnom Penh	Siem Reap	Battambang	Preah Sihanouk	Total
Attitudes justifying beating sons	60.34	62.29	63.94	82.58	72.57	67.75
Attitudes justifying beating daughters	57.37	53.21	54.61	79.47	69.6	61.9

While addressing the negative determinants of VAC should be a critical component of the communication campaign, it is also worth thinking about how to promote protective factors. The Cambodia Systematic Review on VAC and its Theory of Change identified several protective factors – education, child's weight, parent-child relationship, peer support, gender-separate toilets, urbanisation, and law enforcement – could be leveraged by the communication strategy as a way of building on the positive.

- **Education:** Education is a significant protective factor in reducing the risk of child marriage among girls. It also reduces the likelihood of children being engaged in child labour. It turns out that for mothers, education is also a significant protective factor against child neglect. With each additional year of schooling by the child's mothers, the odds of receiving inadequate care decreased by 9 per cent.
- **Child's weight:** Weight is a protective factor against physical attacks in school. With each additional kilogram, respondents are 2 per cent less likely to report having

⁵⁹ The 2014 CDHS data did not collect data from each province individually, but instead grouped some provinces together. For instance, Battambang and Pailin were combined as were Preah Sihanouk and Koh Kong

⁶⁰ The 2014 CDHS included 5 questions asking if a parent is justified in hitting or beating his son or daughter for the following reasons: a) if s/he disobeys; b) if s/he is impolite; c) if s/he has embarrassed the family; d) if s/he does not do the housework or cooking; and e) if s/he does not take care of younger siblings. We created an additive index and reported the proportion of respondents who believed a parent was justified in hitting or beating a child in at least one of these five scenarios.

been physically attacked

- **Parent-child relationship:** Having a close relationship with one's father may be a significant protective factor against severe physical violence and emotional violence
- **Peer support:** Peer support may be an important protective factor against physical violence, but the direction of causality is still unclear. There is also some evidence suggesting that peer support is a protective factor against bullying.
- **Gender-separate toilets:** The availability of gender-specific toilets at school reduces children's exposure to peer-to-peer violence and sexual harassment.
- **Urbanisation:** Residence is an important protective factor for certain forms of physical and emotional violence. It is associated with a decrease in children's exposure to physical and emotional violence in the home as well as physical violence outside the home. In addition, urbanisation is an important protective factor for child marriage with fewer child marriages occurring in urban areas.
- **Law enforcement:** Law enforcement was found to be a protective factor for all types of violence. It prevents impunity, addresses offending criminals and thus strengthens the child protection system. In addition, the presence of law enforcement and the enforcement of child protection laws can help shift attitudes towards violence by making it clear that violence against children is a criminal offense. At a larger scale, this can also counteract Cambodia's reputation as a child sex tourism destination.
- **Residential Care:** Findings from the With the Best Intentions... report and the Participatory Qualitative Research on Caregiver Practices discussed attitudes of overseas donors, government officials, families, children living in residential care facilities, and directors of residential care facilities towards residential care. Government and parent attitudes are the most relevant to consider in the development of the behaviour change campaign, as local government leaders and parents are the individuals making the decisions that determine whether a child stays with her family or is sent to a residential care facility.⁶¹

While there is active support for family- and community-based care options at the national government level, local government leaders tend to favour residential care. In fact, 71 per cent of Commune Council members and Village Chiefs believed that residential care was the best option for children without parents. Access to education is the single largest contributing factor for placement in residential care. Food is seen as another major benefit of placing children in residential care. While a majority of Village Chiefs support residential care, this may be because they are not aware of community-based care options such as livelihood support programmes which could keep children connected to their families while addressing socio-economic factors driving residential care placement.

At the family level, it is clear that a sense of love and familial responsibility drives both the decision to keep families together and to send a child to a residential care facility.

⁶¹ A signature from the Village Chief is usually required to place a child in residential care.

- **Family attitudes driving placement in residential care:** Poverty is a driving factor for placement in residential care facilities, especially if families cannot afford school fees or food. There is an overwhelming belief that residential care facilities offer a good education with roughly 92 per cent of family members stating they agreed or definitely agreed that a poor family should send a child to an orphanage for education if they cannot afford to pay for a child's education themselves. Residential care centres were also described by some parents as remedial options for rebellious children, as an avenue to a modern/urban life, and as a refuge from discrimination in the community. Most families who were interviewed said they would prefer community-based care options for the simple reason that their children would be able stay at home, but pointed out that these options were often unavailable.
- **Family attitudes driving community care:** The most common reason parents and elders gave for not placing a child in residential care was love for the child. Caregivers believed children should grow up in the family and community environment, a sentiment rooted in the strong sense of family obligation that exists in Cambodian culture. Families migrating for work often leave their children with elderly relatives, but fear for the welfare of the children as the relative ages and is unable to provide for them. The elderly, however, express a strong desire to live with and care for the grandchildren. Some grandparents also stated that they cared for their grandchildren in order to accrue merit in accordance to Buddhist belief. Interestingly, in the *With the Best Intentions...* report only some parents described their mistrust for residential care facilities, whereas data from the Participatory Qualitative Research on Caregiver Practices found that most caregivers did not trust that others would be able to provide the same level of care.

Appendix 2: Media reach and communication landscape

According to the Cambodia Demographic Health Survey (2014), a vast majority of Cambodian households (87 per cent) own a mobile telephone, while a third (66 per cent) own a television. Fewer households (40 per cent) own a radio. Ownership of these devices is higher in urban areas than in rural areas. Access to mass media is relatively high in Cambodia, with over two-thirds of women (69 per cent) and three-fourth of men (75 per cent) aged 14-49 accessing some source of mass media on a weekly basis. Men have higher access to all three media on a weekly basis (9 per cent for men and 5 per cent for women). Watching television is the most common way of accessing the media: 61 per cent of women and 62 per cent of men surveyed report watching television at least once a week. Listening to the radio is less common (32 per cent of women and 45 per cent of men listen at least once a week), with newspapers being the least utilized form of media (8 per cent of women and 15 per cent men read a newspaper at least once a week). Urban residents are more likely to read newspapers, watch television, and listen to the radio at least once per week than rural residents. Women residing in Phnom Penh have the greatest exposure to all three media (17 per cent). Among men those residing in Preah Sihanouk have the greatest exposure to all three media (35 per cent). Women and men residing in Kratie are least likely to be exposed to the media, with 65 per cent women and 59 per cent men having no weekly access to media.

We conducted secondary analysis of the media habits of women 15-49 years of age in the five focal provinces using data from the 2014 CDHS. Overall, the provincial data indicates that television is the most commonly accessed channel (76 per cent), followed by radio (38 per cent), Internet (20 per cent), and newspaper/magazine readership (14 per cent). Disaggregation of the data by age (women less than 19 years of age) and residence (rural versus urban) reveals vast differences. Younger, urban women have significantly higher newspaper and magazine readership as compared to their rural and older counterparts. While the access varies by province – the highest being in Phnom Penh and far lower in Preah Sihanouk, Siem Reap and Kandal – the overall pattern is similar to the national figures, with more people accessing television and radio over print and Internet. The data on media access clearly supports using television as a primary media channel for the activities, with a radio component for areas where there is limited or lack of access to television.

Data from the *Media Index Insights* study illustrates similar differences in media consumption between urban and rural populations. Internet use is eight times higher and smart phone use is about four times higher for urban populations. About twice as many urban residents watch two or more hours of television a day as compared to rural residents and almost twice as many urban residents listen to the radio daily as compared to their rural counterparts. Radio may have the highest penetration rate in Cambodia, but it is fragmented across the country. And while television viewership is nearly universal in urban areas (94 per cent), the same is not true in rural areas (55 per cent). In terms of the strategy design, the differences in media access between urban and rural population requires the need for interpersonal and community-based communication in addition to mass media in rural areas.

Interestingly, even those who do not own a television set report watching television. Home was the most common place to watch television programs while relatives, friends, neighbours' house and café/restaurant are reported as secondary or occasional places to view television. Viewers mainly watched serials or soap operas (Khmer, Korean, Chinese

etc.). Reach of print is low with only 27 per cent reading newspapers and 45 per cent occasionally reading magazines. These readers are typically urban with higher education and income.

According to a more recent Study on Mobile Phones and Internet in Cambodia⁶² the reach of mobile phones is near universal, with 94 per cent owning a phone and 99 per cent reachable through a phone. Mobile phone ownership is slightly higher for men (97 per cent) than women (93 per cent) and for urban (96 per cent) areas compared to rural (94 per cent) areas. The study indicates an increase in the percentage of mobile phone users owning phones that can send and receive messages in Khmer (63 per cent reported in 2015 compared to 23 per cent reported in 2013). Approximately 4 out of 10 Cambodians own smart phones and almost a third have access to the Internet and Facebook. Internet access has increased in the past years, making it the second most used channel after television. Most people with internet access have their own Facebook accounts. Smartphones are by far the most common means of accessing Facebook; only 3 per cent of users access the social media site solely through computers, while 80 per cent access it exclusively through phones. New technology and social media are rapidly emerging as a popular channel of communication and can be used in a complementary way with the traditional media, particularly among urban, younger and more educated groups.

Preferred channels and sources of communication

According to the Participatory Qualitative Research on Caregiver Practices and the Media Index Insights the main communication channels in Cambodia are: 1) word of mouth (especially in rural areas); 2) traditional media (including newspaper, magazines, television, and radio); 3) community approaches; and 4) information and communication technologies (ICTs) such as mobile phones, the Internet, and social media platforms. The role of interpersonal communication has important implications in the design of the strategy. Evidence highlights the role of word-of-mouth communications in the sourcing but also in the spread of news and information, particularly in rural areas. Opinion leaders or trusted sources of communication thus play a vital role in spreading information. Teachers and school professionals were considered the key source regarding education concerns, which included quality of education, child development, and children's behavior and future. Village chiefs and local authorities were noted as important gate keepers, who control the type of information brought into the village by NGOs and business entities. In addition to controlling the flow of information in villages, chiefs and local authorities are seen as trusted and influential sources of communication.

In the *Media Index Insights* study, participants who were individually interviewed were asked to rank the following issues by importance: health, violence, drug use, and news – security and living condition. Violence emerged as the second most important issue after health. Key sources of information about violence, according to the Media Index Insights study included: 1) own or others' experiences with violence which were discussed, overheard, or observed; 2) NGOs who dealt with domestic violence or violence in general and provided

⁶² Phong, K., & Sola, J. (2015). Research Report: Mobile Phones and Internet in Cambodia. USAID, Development Innovations, Asia Foundation and the Open Institute.

talks or demonstrations; 3) television and Radio that portray violence in programming. Of these sources, NGOs were deemed to be the most reliable.

The *Adolescent Engagement Study* highlights that television is the best way to reach adolescents in poverty, survivors of trafficking, adolescent drug users, adolescents with HIV, and adolescents with low levels of education but adolescents at risk of child marriage or trafficking require community outreach (*see Figure 11*). In terms of information sharing, according to the *Media Index Study*, children in orphanages are more likely to share with others compared to street children who are more likely to be on their own.

Appendix 3: List of in-country consultations

Table 3: Meetings held with Government and partners			
Date	Name	Designation	Agency
December 6, 2016	Excellency Ms. Sy Define	Secretary of State	MOWA
December 6, 2016	Excellency Ms. Nhean Sochetra	General Director, General directorate of Social Development	MOWA
December 6, 2016	Ms. Te Daline,	Deputy Director, Department of Women and Education	MOWA
December 6, 2016	Ms. Pen Kunthea,	Deputy Director, Information Department	MOWA
December 7, 2016	Excellency Ms. Chan Haran Vaddey	Under Secretary of State	MOSVY
December 7, 2016	Mr. Ros Sokha,	Director, Child Welfare Department	MOSVY
December 7, 2016	Ms. Van Kanha,	Chief of Inspection, Child Welfare Department	MOSVY
December 7, 2016	Excellency Ms. Chan Thy	Secretary of State	MOI
December 7, 2016	Ms. Aimyleen V. Gabriel	Technical Manager for Child Protection	World Vision International
December 7, 2016	Mr. Channy Sar	Senior Technical Officer for Child Protection	World Vision International
December 7, 2016	Mr. Savath Kuch	Sector Technical Officer for Child Protection	World Vision International
December 7, 2016	Mr. Vutha Phon	National Programme Officer, EVAW	UN Women
December 8, 2016	Ms. Map Somaya	Program Director	Mith Samlanh
December 8, 2016	Sebastien Marot	Executive Director	Friends International

December 8, 2016	Mr. James Sutherland	International Communications Coordinator	Friends International
December 8, 2016	Mr. Suth Chan Vannak	Deputy Director, Department of Child Welfare	MOSVY
December 8, 2016	Ms. Srey Chan Dinna	Deputy Director, Department of Child Welfare	MOSVY
December 8, 2016	Ms Thor Peou	Director of National Center for Infant and Child Care	MOSVY
December 8, 2016	Mr. Choeum Chan Dara	Officer of Residential Care Institute Inspection Office	MOSVY
December 8, 2016	Mr. Seng Sokmean,	Operation Supervisor of Social Department	Pour un Sourire d'Enfant (PSE)
December 8, 2016	Ms. Emily Kenney	In-Country Coordinator	Results for Development Institute, Rapid Feedback MERL, Family Care First
December 8, 2016	Ms. Bianca Collier	Project Director	FAST, Save the Children
December 8, 2016	Ms. Tara Winkler (via phone)	Managing Director	Cambodian Children's Trust
December 9, 2016	Mr. Savath	Programme Manager	Komar Pikar Foundation
December 9, 2016	Ven. Dr. Sok Bunthoeun	Director, Department of Buddhist Undergraduate and Post-graduate Education, General Inspectorate of National Buddhist Education	MoCR
December 9, 2016	Mr. Uch Sombat	1 st Deputy Chief, Sangkat Kh'muonh	Sangkat Kh'muonh Phnom Penh municipality
Focus group discussions held with UNICEF national staff and stakeholders			
December 5, 2016	UNICEF National Staff		UNICEF
December 6, 2016	Parents and caregivers		ICS - Skillful Parenting

December 7, 2016	Adolescents	NGO CRC
December 8, 2016	Children	Mith Samlanh

Appendix 4: Rationale for an integrated entertainment-education approach

Over the past two decades Entertainment- Education (E-E) has evolved to embrace new mediums, approaches and issues and continues to be on the cutting edge of social change. Historically, defined as the process of purposely designing and implementing mediated messages to both entertain and educate, with the aim of changing knowledge, attitudes, norms and behaviours, E-E today is seen as an integrated approach tying together mediated and ground based responses (Singhal, Cody, Rogers, & Sabido, 2004).⁶³ E-E efforts are increasingly using participatory methodologies and community engagement to foster social change. The adaptability of the approach can be attributed to three themes, namely the emphasis on increasing equity, affirming the power of narrative and expanding opportunities for dialogue and participation. E-E has the potential to address people's needs, model healthy behaviours, create demand, increase access to services and support community engagement (Storey and Sood, 2013).⁶⁴

Social or educational content dramas and soap operas on radio or television have been used as the central component of effective social and behavior change efforts in several countries across Africa, Asia and Latin America. Entertainment-Education programs have covered a range of development issues from reproductive health and family size, to HIV/AIDS, gender, violence, education, adult literacy, children's health and adolescent issues including sexuality. There are several advantages of using entertainment-education based dramas over documentaries or other forms of audio-visual materials. Foremost, the narrative appeal of E-E allows the audience to relate to the mediated characters and form emotional bonds with them over time. E-E relates to the head and heart and audience members often feel the character or that situation is familiar, real and could be their story, or the story of their neighbour. The aim should be for the audience member to say or feel "I know that character, he or she is just like my neighbour" (Ryerson and Teffera, 2004).⁶⁵ Furthermore, the life like relationship audience members form with characters prompts them to reflect on and role model the behaviors of the character. Audience members begin to identify with the character and their actions and over time feel they too can do it. Role modelling is key to promoting socially desirable behaviours. Secondly, E-E allows long-term repeated exposure and ongoing engagement to different aspects of the same theme. For instance, the plot may show how two characters deal with the same situation differently, or how a character evolves over time. Thirdly, E-E has the ability to weave common story-lines across media, allowing for stronger message reinforcement.

⁶³ Singhal, A., Cody, M., Rogers, E. M., & Sabido, M. (Eds.). (2004). Entertainment-Education and Social Change: History, research, and practice. Mahwah, NJ: Lawrence Erlbaum Associates.

⁶⁴ Storey, D., and Sood, S. (2013). Increasing equity, affirming the power of narrative and expanding dialogue: the evolution of entertainment education over two decades. *Critical Arts*, 27,(1), 9-35.

⁶⁵ Ryerson, W.N., & Teffera, N. (2004). Organizing a Comprehensive National Plan for Entertainment-Education in Ethiopia. In A. Singhal, M. Cody, E. M. Rogers, & M. Sabido (Eds.), *Entertainment-Education and social change: History, research, and practice* (pp. 177-189) Mahwah, NJ: Lawrence Erlbaum Associates.

There is already a precedent for effective use of multi-media E-E in Cambodia for health. Impact assessment of the series Taste of Life focusing on HIV and maternal and child health issues provides clear evidence that multi-media interventions can lead to change in knowledge and behaviours related to health and change attitudes about sensitive issues such as HIV.⁶⁶ In the case of HIV, data indicates an increase in dialogue about sexual health, as well as acceptance of condoms and reduced stigma.

Types of changes fostered by E-E: Examples from Cambodia

Increased **knowledge** that HIV infection is preventable

Increased **discussion** about sexual health and HIV testing

Increased condom **use**

Increased acceptance of women buying or requesting condom use

Decreased **stigma** towards HIV positive family members

Increased handwashing **practice**

Increased **knowledge** of early and exclusive breastfeeding

Increased **intake** of iron supplements among pregnant women

Integrated E-E efforts aiming to reach out to whole societies to foster multi-level changes send mutually reinforcing messages through a range of media formats. Based on experiences in carrying out comprehensive national plans in several countries, the key steps identified are: 1) segmentation research to identify audience segments and the media formats consumed by each; 2) research to identify media formats that can leverage other media to stimulate cross-segment reinforcement; 3) multiple media formats to address critical cohorts; 4) ongoing research to fine tune the activities; and 5) collaboration with government and NGO activities through partnerships.

⁶⁶ Endline Assessments conducted by BBC World Service Trust.