

# THE CHILDWATCH PILOT PROJECT

Research toolkit to assess a set of child rights indicators for communities and cities  
at the local governance level

an initiative of

**Childwatch/IRC**

**with funding from the Bernard van Leer Foundation**

in alliance with

**UNICEF - BRAZIL**

Platform for the Urban Centers

## CONSTRUCTION OF PARTICIPATORY SELF-ASSESSMENT TOOLS

São Paulo and Rio de Janeiro, Brazil

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**Special acknowledgement to:** Jucilene Rocha, Anna Penido, Andreia Oliveira, Luciana Phebo

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An initiative of **Childwatch International and the Innocenti Research Centre (IRC)** in alliance with **UNICEF – BRAZIL / Platform for the Urban Centers.**

The Pilot Project was funded by the Bernard van Leer Foundation and is part of the **Childwatch/IRC UNICEF CFC Research initiative.**

## CONSTRUCTION OF PARTICIPATORY SELF-ASSESSMENT TOOLS

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## **Presentation and acknowledgements**

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Paulo Montenegro Institute – a non-profit organization created by IBOPE, one of the largest and most traditional providers of Market, Media and Public Opinion research in Latin America – has been invited by UNICEF Brazil to contribute to the Platform for the Urban Centers (the PLATFORM) with the development of Participatory Research tools. These tools will help the communities to define Action Plans, aimed at improving the access to services and opportunities that protect, respect, and guarantee the rights of children and adolescents living in poor communities of the main cities in the country.

Subsequently, Paulo Montenegro Institute was also invited by the UNICEF Innocenti Research Centre (IRC), Childwatch and UNICEF Brazil to participate in the pilot testing of a research toolkit to assess a set of child rights indicators.

This opportunity was received with great interest. The integration of these two projects allows for the extension of the scope and relevance of the PLATFORM consultation, with the inclusion of children and adolescents using the CFC Pilot methodology. It also creates the opportunity to learn from other experiences and challenges around the world.

In developing this task we counted on the help of many people without which the breadth and the richness of the final product would certainly not be the same! Taking this opportunity to thank them is not only fair, but especially very rewarding. It was a great pleasure to work with them all:

- Roger Hart, Selim Iltus and Childwatch / IRC teams , for the opportunity to participate in this initiative and for the confidence and respect for the work developed;
- Anna Penido, Luciana Phebo and their teams in UNICEF São Paulo and Rio de Janeiro, for their support;
- Kátia Edmundo (CEDAPS – Centro de Promoção da Saúde), Carolina Paiva (Viração), Adriana Toledo (CIEDS and Sou da Paz) and Renato Nascimento (Ação Educativa), for their attentive, experienced and sensitive critical contributions to the materials and for their ability to transmit its contents to the group of inexperienced young researchers;
- All the Monitors in São Paulo and Rio de Janeiro , who so successfully conducted the work in each of the communities;
- Fernanda Rosa, Marisa Villi and Vera Ligia Toledo (IBOPE Inteligência and Instituto Paulo Montenegro), for their technical insights and operational support;
- And last, but – as always – certainly not least, to Jucilene Rocha (UNICEF/SP) for the innumerable conversations, revisions and discussions required to make sure this initiative met the expectations of all parties involved and mainly those of the communities for which they are designed.

Thank you all, very much!

**Ana Lúcia D'Império Lima**  
Instituto Paulo Montenegro  
Executive Director

## Introduction and Context

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The Child Friendly Initiative (CFC) Pilot project was developed as part of the activities of the Platform for the Urban Centres (the PLATFORM), a program developed by UNICEF in Brazil.

A detailed description of the goals and the structure of the PLATFORM is available in the report “CFC Pilot project – Application of Methodology”. In short, UNICEF Brazil’s Platform for the Urban Centers contributes to promoting the commitment and participation of different sectors of society, including the adolescents themselves, in actions aimed at reducing the existing inequalities in Brazilian urban centers. Its purpose is to ensure that each child and each adolescent, especially those living in *comunidades populares*, has equal access to services and opportunities that protect, respect, and guarantee all of his/her rights. The PLATFORM aims to influence the development and execution of public policies, as well as the behavior of families, government and society, responsible under the Brazilian Constitution for granting children their rights in childhood and adolescence.

At the community level, the PLATFORM involves a series of actions aimed at empowering a network of community-based and governmental institutions as well as youth groups to have qualified discussions around the issues that affect the rights of children and adolescents living in poor communities and to establish an action plan to improve such indicators.

The community goals are measured at the beginning and at the end of a four-year cycle through participatory consultations. Those communities that are able to improve their position towards the proposed objectives receive a certificate from UNICEF, in recognition of their capacity of taking good care of their children and adolescents.

The PLATFORM initiative is being initially implemented in 126 communities of São Paulo and Rio de Janeiro.

## Objectives to be reached with the Pilot methodology

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IRC / Childwatch have developed a toolkit to assess a set of child rights indicators for communities and cities at the local governance level and considered Brazil, together with the Philippines, as an adequate environment for piloting these tools.

The synergies of these objectives with UNICEF Brazil’s PLATFORM were evident and allowed for a combination of both goals. It was our challenge, therefore, to develop a set of instruments that could satisfy the requirements of both entities.

Although only six of these communities were involved in the Pilot project for CFI methodology, the design of the instruments as well as the *modus operandi* for their application had to respect the structure planned for all the 126 communities and to consider the available human and financial resources already allocated to the PLATFORM.

UNICEF has designated **Technical Partners** (CIEDS in São Paulo and CEDAPS in Rio de Janeiro) for the execution of the PLATFORM activities in the communities, through a direct relationship with **Local Networks**: representatives of the local institutions (public services, NGOs, associations, movements, adolescents’ groups, etc.), who are responsible for the implementation of the activities promoted by the PLATFORM.

The PLATFORM also supports a group of **Youth Ambassadors**, adolescents, which participate in a two-year training program and are in charge of informing and mobilizing the community members around the initiatives of the PLATFORM. These teenagers (boys and girls aged 14 to 17 in most cases) were responsible for the application of the CFI methodology, as **Monitors**. In São Paulo, UNICEF has a specific partner – Viração - for coordination all the actions related to the Communicators, including their training as Monitors to the CFI Pilot. In Rio de Janeiro, the same organization in charge of the Articulators, CEDAPS, assumed the responsibility of training the Monitors and supervising the questionnaire application. Bem TV, another NGO, is in charge of informing the community and disseminating the results.

In detail, the Monitors were responsible for:

- Participating in training sessions, prepared by the Coordinators
- Applying the questionnaires to the different groups of Participants
- Tabulating the answers given by each group of Participants
- Discussing the results with each group of Participants
- Evaluating the process and the instruments with the Coordinators and Instituto Paulo Montenegro representatives

The groups to which the questionnaire was applied was formed exclusively by persons living in each of the communities involved in the pilot project, divided in 4 groups:

- Children between 7 and 10
- Adolescents between 11 and 14
- Adolescents between 15 and 17
- Mothers and fathers of children between 0 and 6

The Participants were asked to individually respond to the questionnaire, participate in the group discussion held after its application and evaluate not only the instruments but also its form of application as well as the performance of the Monitors.

The same structure used for the Pilot in 6 communities is being replicated in the other 120, around 45 days later. This larger scale application is still in course and its results will be shared with IRC and Childwatch when available.

The answers collected from children, adolescents and parents of small children through the instruments developed for the CFI methodology will be discussed with the Articulation Group and presented to a larger number of community members at the Community Forum, to be organized in September/October. The Forum will define the priorities for the local action plan, to be implemented over the next two years.

### **The instruments of the Pilot project**

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The CFC methodology to be tested consisted of the application, using participatory research techniques, of a set of questions to a group of children, adolescents and adults (parents of children aged 0-6), followed by a collective discussion of the main issues identified by the group. This approach was totally compatible with the PLATFORM targets and principles, which confirmed the adequacy of the combined initiative.

The set of instruments produced for the Pilot project consisted of:

- The questionnaire, to be individually answered in writing by the participants in the group
- The tabulation sheets, used by the Monitors to add up the answers to each statement

- The panel of results, to be fixed to a wall so that all participants could see the answers given by the group during the collective discussion
- Stickers to be placed in each of the statements once the group came to a consensus about the subject
- Other support materials to help the adolescents in the application of the methodology
- Manual of instructions for the Monitors

All materials produced for the Pilot have tried to take into account the following criteria:

- the application by non-professional young community members
- the ethical and practical implications of the young age of most participants
- the limited familiarity of children and adults with some of the issues
- the adoption, whenever possible, of colloquial vocabulary
- the inclusion of as many as possible areas of interest of Childwatch and of UNICEF's PLATFORM

### The questionnaire

There were two sources of inputs for the development of the CFC Pilot questionnaire:

1. The set of agree/disagree statements proposed by Childwatch
2. The PLATFORM framework of results and the respective outcomes and indicators

Although convergent, there were some important differences between the two sources (the table hereunder uses Childwatch's structure as a reference and tries to match the PLATFORM's into it):

CHILDWATCH/IRC	PLATFORM
<b>ORIGIN</b>	
Universal template	Brazil
<b>INITIAL TARGET</b>	
Children and adolescents living in poor communities	Community leaders and other representatives aged 16+
<b>AREAS COVERED</b>	
Home Environment	Children up to 6 years of age with ensured right to survive, to have a birth certificate, to receive care and protection and to develop fully
Educational Resources	Children and adolescents with universal access to good quality Education, able to progress in their studies and to learn, concluding basic education at the correct age (17)
Safety	Children and adolescents protected from the many forms of omission, negligence, discrimination, exploitation and violence
Work, Play and Recreation	<i>** Inserted in other areas</i>
Community Solidarity and Social Inclusion	Children and adolescents of different ethnical, racial and cultural background having their rights equally respected in all public polices
Community Governance	Adolescents having assured their full development, exercising their rights as citizens, of participation and being recognized for their great transforming potential
---	Children and adolescents protected from the transmission of HIV and, when affected, receiving adequate treatment and having access to their right to participate in family and community lives

<b>CURRENT OBJECTIVE FOR THE PILOT</b>	
1. Test the relevance of the template tools which enable data collection and assessment of communities 2. Assess children and adolescents opinions about their communities through easy-to-replicate participatory research,	Assess children and adolescents opinions through easy-to-replicate participatory research
<b>MAIN GOAL OF THE INITIATIVE</b>	
Stimulate children and adolescents ( <u>including but not limited to those living in poor communities of the urban centers</u> ) to assess and debate about their rights and mobilize them, as well as the adults, to work for the improvements of related indicators	Stimulate children and adolescents living in poor communities of the urban centers to debate about their rights and mobilize them, as well as the adults, to work for the improvements of related indicators

The steps followed in the construction of the instruments were the following:

- 1) Translation of the questions proposed by Childwatch into Portuguese
- 2) Elimination of some questions that are not relevant (or even meaningful) in the Brazilian context
- 3) Adaptation of the language used in all remaining questions so that the statements sounded more natural / comprehensible by the interviewees
- 4) Inclusion of statements related to the PLATFORM's framework, respecting the limits of the age group to which the consultations was targeted
- 5) Reordering of the resulting statements according to more effective blocks (more general topics in the beginning, more private issues at the end, and length of the blocks)
- 6) Rephrasing of some statements to fit different age groups
- 7) Elimination of some specific questions from questionnaire to be used with children aged 7-10

At an early stage of the development it was clear that a three-point scale should be used. Otherwise it would be extremely complicated for the young Monitors to apply the questions and, most of all, to tabulate the answers and summarize them for the debate. The initial propose was to use "Totally Agree", "Partially Agree" and "Totally Disagree". By suggestion of the Monitors during their training process, the options were changed into "Totally Agree", "Agree So and So" and "Disagree".

All statements were affirmative sentences, so that there would be no risk of misinterpretation a double negative (disagreeing to a negative statements = agreement). The statements were careful to avoid describing depreciatory conditions.

All the statements were made in the first person. It is important to notice that this decision was taken after pre-testing a third person alternative, which seemed, at the beginning, the ideal way to go. For this pre-tested option, the statements were also all affirmative and the alternatives would be: This happens/is true for "the majority/almost every", "a part/some" or "the minority/almost none" of the children / adolescents of your community. The results of the pre-test showed that:

- Younger children (7-10) had enormous difficult to decide what alternative to pick, as "they did not know all the children in their community, how could they know what happens to them?"
- Adolescents would more easily be able to make up their minds but the answers seemed less committed, as if what happened to others were not as interesting/as significant as what happened to themselves.

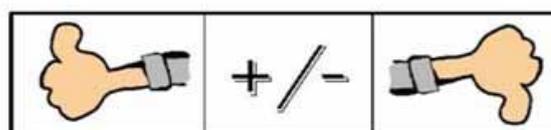
Four different booklets were prepared: 3 for the children and the adolescents, one for each age group, as some the questions differed from age group to age group. Some examples:

7 - 10	11 - 14	15 - 17
I can always meet other children to play with	I can always meet other adolescents my age to go out or talk with	I can always meet other adolescents my age to go out or talk with
-	My parents usually talk to me about the possibility of pregnancy and sexually transmitted diseases, including HIV/AIDS	My parents usually talk to me about the possibility of pregnancy and sexually transmitted diseases, including HIV/AIDS
-	I usually pay attention to the conversations about politics and try to be prepared for when I will be able to vote in the elections	I am registered to vote in the elections (16/17) OR As soon as I turn 16 I want to register and be ready to vote in the elections (15)

A fourth booklet was prepared for the parents of children aged 0 to 6. The statements, although different from the children's and adolescents', touched the same areas. In the interest of time, some of the statements suggested by Childwatch were combined into a single statement. Only statements related to 0-6 children were used in the parents' questionnaire.

The booklets were organized into 5 blocks for the children and adolescents and 4 (longer) blocks for the parents of children aged 0-6.

The layout of the questionnaire appeared as follows:



FOLHA 1 - MINHA COMUNIDADE CRIANÇAS DE 7.A 10 ANOS	CONCORDA TOTALMENTE	CONCORDA MAIS OU MENOS	NÃO CONCORDA
1) Gosto de morar onde moro			
2) Dá para eu ir a pé de casa até a escola			
3) Eu me sinto seguro no caminho de casa até a escola			
4) Eu me sinto seguro em relação ao trânsito em minha comunidade			
5) Na minha comunidade, tem uma biblioteca onde posso pegar livros emprestados para ler em casa			
6) O ar que respiro aqui onde moro é limpo, sem poluição e não me faz tossir			
7) Existem lugares na minha comunidade onde posso ter contato com a natureza			
8) Eu tenho um lugar seguro para brincar bem perto de casa			
9) Na minha comunidade, tem lugares ao ar livre onde posso brincar a qualquer hora			

The Monitors' version of the questionnaire contained written instructions for the application of the survey as well as introductory texts for the activity and for the beginning of each block.

The tables in Appendix I summarize the final contents of the questionnaire indicating where each statement was derived from as well as the relevant comments and observations.

Intermediate revisions were made by specialists of different areas:

- UNICEF’s officers in São Paulo and Rio de Janeiro
- Members of the partner organizations (CEDAPS and Viração), in charge of the application
- Specialists in IBOPE, used to dealing with qualitative research with young children
- Other participants of the PLATFORM
- The final questionnaire was also approved by UNICEF Brazil Deputy Representative Manuel Buvnich

One should notice that the questionnaire used for the Parents of children aged 0-6 has required a higher degree of “creativity” in order to ensure that both Childwatch’s and the PLATFORM’s goals were met, within a reasonable number of questions.

### The tabulation sheets

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The Monitors were instructed to collect the sheets at the end of each block. One of the Monitors would tabulate the answers while the other Monitor applied the questions of the next block.

The tabulation sheets, used by the Monitors to add up the answers to each statement reproduced the same format of the questionnaire, with columns where the Monitors would add up all the answers given to each point of the scale, the questions left blank and would add the totals for control.

	CONCORDA TOTALMENTE	CONCORDA MAIS OU MENOS	NÃO CONCORDA	NÃO SABE	TOTAL	QUANTOS CONCORDAM?		
						QUASE TODOS	A MAIOR PARTE	QUASE NINGUÉM
1) I like to live where I live								
2) ... etc...								

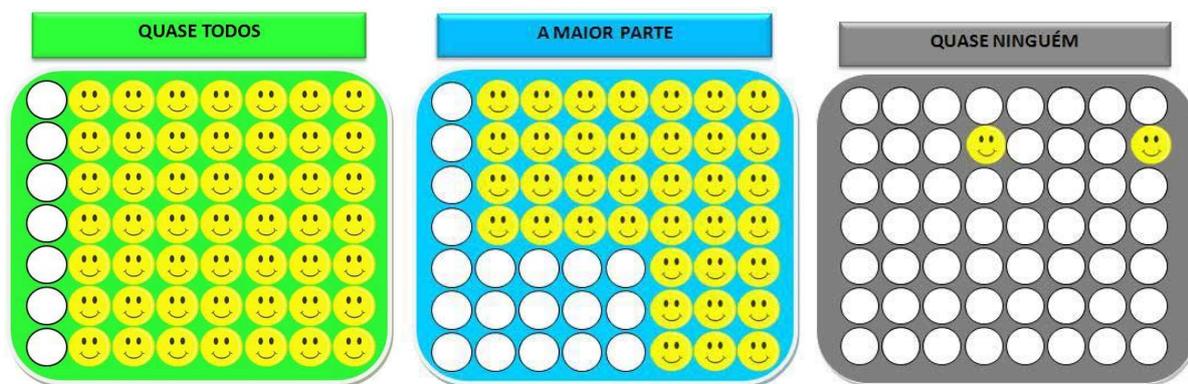
Then they would mark one of the columns to the right of the sheet: How many agree? “Almost all”? “Some”? “Almost no one?”. A table containing the number of answers to be classified in each of the three categories according to the number of participants in the group was distributed to the Monitors. These answers would then be marked in the results panel for the group discussion.

### The materials for the group discussions

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The materials for the group discussion consisted of:

- The panel of results, to be fixed to a wall so that all participants could see the answers given by the group during the collective discussion
- Stickers to be placed in each of the statements once the group came to a consensus about the subject



The panel reproduced the same layout as the tabulation sheet. The Monitors were instructed to start the discussion of the issues that, in each block, received the least positive evaluation from participants (larger number of answers in the column “Almost no one agrees”, since all the statements were affirmative and reflected positive situations). They should also try to raise a discussion around those statements which polarized the opinions. The discussions should be aimed at identifying possible solutions for the benefit of the children of that community.

Once the subject was discussed the Monitors would place a sticker corresponding to the final “verdict” of the group.

### Other support materials

A series of other materials was prepared for the pilot:

- Presence list
- Authorization forms for the parents
- Evaluation forms for the Monitors and for the Participants
- Manual of instructions for the Monitors

### The main results – Children and Adolescents

There is no better way to evaluate the adequacy and the relevance of the questionnaire than to look at the actual answers. The sample distribution in each city varied, as not all groups have been completed as planned:

RIO DE JANEIRO		SÃO PAULO	
SANTA CRUZ	35%	CANTINHO DO CÉU	49%
COMPLEXO DO ALEMÃO	38%	ENTORNO DO ATERRO - ITAQUÁ	19%
P PRAZERES	27%	HELIÓPOLIS	32%
Children aged 7-10	35%	Children aged 7-10	35%
Adolescents aged 11-14	34%	Adolescents aged 11-14	16%
Adolescents aged 15-17	31%	Adolescents aged 15-17	48%

In São Paulo, as the groups were organized by gender, one can see that the participants of all ages were 55% female and 45% male. This information is not available for Rio de Janeiro, where the groups were mixed by gender.

The tables below illustrate the consolidated results for children and adolescents in all age groups and in both cities, showing the three most positively (more often agreed = more positive evaluation) and the three most negatively (less often agreed = more negative evaluation) ranked statements:

<b>MY COMMUNITY</b>	<b>TOTAL</b>		
<b>CHILDREN AND ADOLESCENTS 10-17</b>	<b>Totally agree</b>	<b>Agree so and so</b>	<b>Disagree</b>
2) It is possible for me to go on foot to school	68,1	14,3	17,6
1) I like to live where I live	67,6	25,5	6,9
8) I have a safe place to play right outside my house	65,7	15,7	18,6
.....			
4) I feel safe from traffic in my community	28,3	32,7	39,0
6) The air I breathe in the community where I live is clean and does not make me cough	20,8	31,6	47,6
9) The majority of the places in my community are clean, clear and do not bring risks to the health of the people who live here	14,9	33,7	51,5

<b>MY SCHOOL</b>	<b>TOTAL</b>		
<b>CHILDREN AND ADOLESCENTS 10-17</b>	<b>Totally agree</b>	<b>Agree so and so</b>	<b>Disagree</b>
1) I go to school, I am a student	89,8	7,5	2,8
15) I practice sports, take place in games and play at school	71,7	18,1	10,3
4) In school I have the necessary amount of notebooks, pens and books	62,4	22,6	15,0
.....			
11) I have classes regularly, without constant absences of the teachers	35,9	40,6	23,5
9) The toilets in school are clean and the children can use them without problems	34,3	23,4	42,3
17) I have the possibility of studying in schools that are near to my house and in the hours of my preference	31,5	32,3	36,3

<b>RELATIONSHIPS IN MY COMMUNITY</b>	<b>TOTAL</b>		
<b>CHILDREN AND ADOLESCENTS 10-17</b>	<b>Totally agree</b>	<b>Agree so and so</b>	<b>Disagree</b>
11) I am proud of my origins, my color, my culture, my religion and of the place where I live	74,8	20,6	4,7
8) I have friends of different races and origins and we live in harmony, without prejudice	71,3	18,9	9,8
12) I always find other children/adolescents who I can play/hang out with	65,4	28,4	6,1
.....			
5) In my school everybody is respected regardless of their color, religion, culture or physical condition	37,2	34,1	28,8
13) I feel safe in my community	36,1	40,8	23,2
3) In school there are adults I can talk to about my problems and feelings	29,4	21,7	48,9

<b>MY ROLE IN THE COMMUNITY</b>	<b>TOTAL</b>		
<b>CHILDREN AND ADOLESCENTS 10-17</b>	<b>Totally agree</b>	<b>Agree so and so</b>	<b>Disagree</b>
3) I know people that are dedicated to improving the life of children / adolescents in this community	59,9	25,5	14,6
1) I know what my rights are as a child / adolescent	57,8	27,2	15,0
4) I participate in activities to make my community a better place to live	48,0	31,6	20,4
.....			
8) I can participate in programs for professional qualification and placement	35,8	37,4	26,8
5) I participate in the students group (gremio?) and in the school board, influencing the decisions that affect the day-to-day in my school	23,0	26,8	50,2
9) I try to be informed about how the resources dedicated to programs which support children and adolescents are spent	20,0	29,6	50,4

<b>MY PERSONAL AND FAMILY LIFE</b>	<b>TOTAL</b>		
<b>CHILDREN AND ADOLESCENTS 10-17</b>	<b>Totally agree</b>	<b>Agree so and so</b>	<b>Disagree</b>
3) My parents/caregivers recognize the importance of studying and stimulate me to go to school	83,9	10,9	5,3
4) I feel safe at home	68,5	24,5	7,0
6) I get along well with the people who live in my house	67,1	26,2	6,8
.....			
2) I spend part of my time helping my family	44,2	44,5	11,2
11) If I need I can get support and orientation from health professionals about HIV/AIDS	39,2	40,8	20,0
5) I feel safe even when I am out of home alone	35,2	45,6	19,2

A brief analysis of these answers indicate that the overall results of the Pilot were definitely very interesting and confirm the potential of this methodology for the participatory assessment of children and adolescents rights in popular communities.

In particular, it is worth noticing:

- **There was high variation between all statements, with levels of agreement ranging from almost 90% to as low as 15%**
- **The three point scale worked well with little concentration in the intermediate point**
- **The length of the questionnaire, although often criticized by both Participants and Monitors did not seem to affect the quality of the answers, as one can see from the analysis of the non-response: the table below shows those statements that were left blank by more than 5% of the participants. In most cases they refer to items in the beginning of the questionnaire, not at the end**

## STATEMENTS WITH LESS THAN 95% RESPONSE - CHILDREN 7-10

Area	Statements	Response rate
My community	9) In my community there are places where I can go play with my friends at any time	91%
My community	7) There are places n my community where I can be in contact with nature	88%
My community	8) I have a safe place to play right outside my house	88%
My school	3) My ideas are listened to by teachers in school	88%
My community	1) I like to live where I live	87%
My community	2) It is possible for me to go on foot to school	87%
My community	3) I feel safe on my way to school	87%
My community	5) In my community there is a library I can borrow books to read at home	87%
My community	6) The air I breathe in the community where I live is clean and does not make me cough	87%
My community	4) I feel safe from traffic in my community	85%

## STATEMENTS WITH LESS THAN 95% RESPONSE – ADOLESCENTS 11-14

Area	Statements	Response rate
My community	2) It is possible for me to go on foot to school	94%
My community	3) I feel safe on my way to school	94%
My school	4) In school I have the necessary amount of notebooks, pens and books	94%
My personal life	8) My parents are used to talk to me about the possibility of adolescent pregnancy and sexually transmitted diseases, including HIV/AIDS	93%
My school	9) The toilets in school are clean and the children can use them without problems	91%
My personal life	5) If I am out of home and am running some risk or someone is trying to hurt me I know that some adult will come and help me	91%
My school	8) The classrooms in my school are roomy, airy and have enough light	87%
My school	7) There is enough good water in my school for drinking	83%
My personal life	5) I feel safe even when I am out of home alone	82%

## STATEMENTS WITH LESS THAN 95% RESPONSE – ADOLESCENTS 15-17

Area	Statements	Response rate
my cummunity	7) There are places n my community where I can be in contact with nature	94%
my cummunity	11) I can count with the help of health and social assistance professionals who know how to deal with issues that are specific to the adolescents	94%
my cummunity	3) I feel safe on my way to school	93%
my cummunity	5) In my community there is a library I can borrow books to read at home	93%
my cummunity	8) In my community there are cool places where I hang out with my friends and do things together	93%
my school	9) The toilets in school are clean and the children can use them without problems	93%
my cummunity	4) I feel safe from traffic in my community	92%
my cummunity	9) The majority of the places in my community are clean, clear and do not bring risks to the health of the people who live here	92%
my role	1) I know what my rights are as an/ adolescent	91%
my role	2) "They" are used to asking my opinion about programs and services offered to the children / adolescents in my community	90%

## The main results – Parents of children aged 0 to 6

Similarly to the younger groups, the analysis of the answers given by adults can help us understand how the methodology worked for this group.

In this case, the execution of the Pilot in Rio de Janeiro was consistently better succeeded than in São Paulo. In fact, there were 6 groups of parents of children aged 0 to 6 in Rio, with a total of 61 participants whereas in São Paulo only one community was able to organize the meetings: 2 groups with a total of 19 parents. In both cities, only mothers participated in the activities.

Another difference noted in the application of the questionnaire to the groups of Parents of children aged 0-6 was a higher level of non-response to some specific statements, when compared to the children and adolescents. In fact, only 23 of the 56 statements presented to these groups had a response rate above 95%. The statements listed hereunder were the ones with the lowest level of response:

Area	Statements	Response rate
relationships	7) If my small children are out of home and run some kind of risk or danger I know someone will come and help them	84%
services	5) My children have enough drinking water at their nursery/pre-school	83%
relationships	3) My children grow up in a serene family environment	83%
relationships	5) I attentively follow the development, the health, the safety and the nutrition of my baby/my small children	83%
services	12) There are programs that help the families with children aged between 0-6 to generate income and find work	81%
relationships	9) My small children always find other children to play with	80%
relationships	10) I know people who do all they can to improve the life of the children in our community	80%
relationships	13) My small children have access to outdoors spaces in the community where they can go play whenever they want	80%
services	10) The representatives of the health and social assistance services visit our home at least once a month	78%
relationships	4) At home we take care of the health of our children according to recommendations received before and after their birth	78%

These differences between the younger groups and the adults' may have been caused by a combination of different factors:

- The adolescent Monitors were not as at ease with the adults as they were with the younger groups and vice-versa: adults were more concerned in speaking to the adolescents about certain issues than they would be if interviewed by people their own age
- The subjects proposed to the Parents as well as the language and vocabulary used were significantly more complex, possibly too complex both for the Monitors and for the adult Participants, who quite often had very limited access to education
- The adults are overall more self-conscious about expressing their opinions about delicate subjects than the children

Even with these limitations, the responses given by the group of Parents of children aged 0-6 offered interesting indications on the most significant issues affecting the rights of infants, toddlers and small children in the communities. These results will help the community to identify the most fragile areas and prioritize actions to improve them.

A summary of the main results can be seen in the tables hereunder. Once again the tables present the 3 items more positively and the 3 less positively evaluated. In the case of the adults, though, some statements were – incorrectly – built as negative sentences (ex: “in my house my children do not suffer from cold” and had to be eliminated from tabulation as they may have misled respondents.

STRUCTURAL CONDITIONS OF THE COMMUNITY	TOTAL		
	Totally agree	Agree so and so	Disagree
<b>PARENTS OF CHILDREN AGED 0-6</b>			
14) There are places in my community where I can be in contact with nature	69,2	20,5	10,3
17) I can give my opinion about the resources, programs and services offered for babies and small children in the community	61,5	24,4	14,1
18) I am actively involved in planning and in the decisions in my community	61,0	20,8	18,2
.....			
10) The place we live in is safe, without risks for me and for my small children	21,1	25,0	53,9
5) People living in our community care for the environment avoiding pollution and promoting for actions to improve it	18,2	33,8	48,1
7) The majority of the streets are paved, have public illumination and garbage collection	11,5	47,4	41,0

PUBLIC SERVICES IN THE COMMUNITY	TOTAL		
	Totally agree	Agree so and so	Disagree
<b>PARENTS OF CHILDREN AGED 0-6</b>			
6) My children are fed at their nursery/pre-school	77,9	13,2	8,8
5) My children have enough drinking water at their nursery/pre-school	69,7	24,2	6,1
7) The working hours of the nursery/pre-school satisfy my needs	66,2	25,0	8,8
.....			
17) If I were worried about the safety of my small children I could look for some public agent who I could talk to	24,6	29,0	46,4
15) There are places close to the community that can take care of health emergencies or more serious health problems of my small children	22,5	36,6	40,8
14) There are adequate places in the community to attend to the health problems of my small children	21,6	27,0	51,4

THE NETWORK OF RELATIONSHIPS IN THE COMMUNITY	TOTAL		
	Totally agree	Agree so and so	Disagree
<b>PARENTS OF CHILDREN AGED 0-6</b>			
2) My small children have adequate time to play, rest and enjoy themselves	75,0	20,6	4,4
3) My children grow up in a serene family environment	71,2	24,2	4,5
1) In our family the adults have time and availability to take care of our children	64,7	32,4	2,9
.....			
14) My children are respected by other children in the community without risks of being hassled, humiliated	32,4	35,3	32,4
15) Besides the people of my family, there are other adults in the community who my small children can trust and to whom they can talk about their problems	30,4	31,9	37,7
16) In our community my small children are respected regardless of their color, religion, culture of physical condition	20,6	25,0	54,4

	TOTAL		
	Totally agree	Agree so and so	Disagree
<b>PRE-BIRTH AND EARLY CHILDHOOD HEALTH ASSISTANCE</b>			
3) At the pre-birth visits I was informed about the importance of eating healthy food and about the risks generated by cigarettes, alcohol, drugs and HIV/AIDS	86,3	7,5	6,3
2) In the pre-birth visits I had several tests made, received immunization and received my pregnancy follow-up card	82,1	7,7	10,3
1) I had access to pre-birth health assistance, with regular visits since the first months of my pregnancy	76,9	14,1	9,0
6) I know the benefits of exclusive breast-feeding and intend to maintain it for 6 months	73,1	14,1	12,8
5) When we left the maternity I already had scheduled my first visit for follow-up	61,5	12,8	25,6
4) At the pre-birth visits I received instructions as to where to go for the birth of my child	57,7	14,1	28,2

In spite of the limitations discussed above, there is still a good level of consistency and coherence in the answers given which show that the instruments used in the Pilot project for the adults as well as for the younger groups:

- **There was high variation between all statements, with levels of agreement ranging from almost 86% to as low as 11%**
- **The three point scale worked well with little concentration in the intermediate point**

## Final considerations

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The detailed analysis of the responses given by children and adolescents of the six communities of Rio de Janeiro and São Paulo who participated in the Pilot project for the evaluation of the toolkit proposed by Childwatch and adapted to the needs of UNICEF Brazil's PLATFORM corroborates the conclusions driven from the observation of the Coordinators and from the evaluation form compiled by Monitors and Participants: **the initiative, as designed, has strong potential for replication and continuity.**

**The involvement of adolescents as Monitors was clearly positive** in the application of the questionnaire, especially among Children and other Adolescents. Further testing is needed to verify the possible improvements to be made for the application with Adults.

**The instruments used for the participatory consultation have proven to be adequate** for the Children and the Adolescents, as well as for the Adults, subject to minor adjustments. It should be noted that most of the statements that received a more negative evaluation (and therefore the ones that represent a more significant disrespect to the rights of Children and Adolescents living in poor urban communities of Brazil) were the ones created locally, focused on those issues that the local experts of UNICEF had already identified as being more critical. It is important that the future adoption of the toolkit allows for the creation of local statements, possibly covering not only the areas suggested by Childwatch but also including new areas.

The group discussion did not produce the expected level of debate and interest from some of the participants. It is evident that **the training offered to the Monitors needs to prepare them more thoroughly for the moderation of the group discussions** and the materials used for the replication of the Pilot methodology must include suggestions of activities and techniques that should guarantee the richness that these opportunities may bring to all participants involved.

**Different forms of documentation (reports, photos, video, etc.) of the activity should be foreseen and planned with the Monitors**, especially with regards to the group discussion phase. Several valuable elements raised during the group discussions may simply get lost for lack of systematic registry.

**Additional emphasis must also be put into the tabulation process during the training of the Monitors.** The lack of familiarity with this quite simple task ended up generating delays and loss of interest from some of the groups.

**The use of stickers needs to be reevaluated, their design improved and their function during the group discussion enhanced.** The fixing of the stickers after a rich discussion over some items can generate conclusions and consolidate the consensus of the group around common objectives. This opportunity was not sufficiently or satisfactorily explored during this Pilot.

It is also recommended that the application of this methodology **be anticipated by strong promotion, raising awareness about its objectives amongst community members.** This effort would contribute for

an easier and more fruitful recruitment, ensuring the involvement of a larger variety of participants and a higher level of commitment on their part. Otherwise there is a significant risk that people belonging to less active groups, with smaller social engagement will not be listened to.

**The replication of the methodology in large scale presents some challenges** yet to be analyzed more in-depth, as some particular circumstances – which were considered key for the success applied of this Pilot and to ensure relevance of its application – may not be present in other occasions:

- The existence of a broader initiative, the PLATFORM, in which the participatory consultation was inserted, substantially increasing the possibilities of concrete intervention by the community members to improve the critical issues unveiled
- The Monitors liaison to a Local Network, composed by adults from different social representations (local government, local NGOs, community leaders), which opens doors and supports their actions
- The training of the Monitors, not only for the application of the Pilot but also in a series of long-term activities related to the PLATFORM
- The adaptation of the questionnaire to local issues, derived from a qualified analysis of the context by UNICEF Brazil and managed by specialized professionals