ASSESSING THE NEED FOR
A CHILD HELPLINE:

FINDINGS FROM A 2016 SURVEY IN LAGOS STATE.
THE CECE YARA FOUNDATION

Vision: A safe and happy childhood for Nigerian children – free from sexual abuse and violence, where every child has access to care, information, protection and emergency intervention when needed.
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1.1 BACKGROUND

Every child has the right to be protected from all forms of violence, and this right is protected by the UN Convention on the Rights of the Child (1989), and the African Union Charter on the Rights and Welfare of the Child, both which have been ratified by Nigeria. These conventions mandate every country to take all necessary steps to help families protect children's rights and create an environment where children can grow and reach their potential. As a result, Nigeria promulgated the Child's Rights Act in 2003 which provides that no Nigerian child shall be subjected to physical, mental or emotional injury or abuse. The Act has been adopted by some States of the Federation.

In 2015, Nigeria launched the Year of Action to End Violence Against Children in response to the findings of the Violence against Children Survey (VACS) which was carried out in 2014 by the Federal Government of Nigeria, through the National Population Commission by UNICEF Nigeria, and the US Centers for Disease Control and Prevention (CDC). The survey showed that:

- 1 in 4 girls and 1 in 10 boys in Nigeria experience sexual violence before the age of 18 years.
- 84% of females and 61% of males in Nigeria who experienced sexual violence before age of 18 years do not know where to seek help.
- Only 4% of girls and 2% of boys in Nigeria received help after experiencing sexual violence.

1.2 IMPACT OF CHILD SEXUAL ABUSE

Child sexual abuse or child molestation is a form of child abuse in which an adult or older adolescent uses a child for sexual gratification. Forms of child sexual abuse include engaging in sexual activities with a child, indecent exposure, child grooming, or using a child to produce child pornography. Child sexual abuse can occur in a variety of settings, including home, school, or work. The effects of child sexual abuse can include behavioral changes including withdrawal and delayed development, depression, shame, fear, post-traumatic stress disorder, anxiety, complex post-traumatic stress disorder, propensity to further victimization in adulthood, and physical injury to the child, among other problems.

1.3 ACTION REQUIRED

Following the VACS, National Priority Actions and Lagos State Priority Actions were launched which enjoin the organized civil society to:

- Create and promote safe spaces and platforms (children's clubs, youth clubs, and child parliaments) to encourage children to speak out about their experiences.
- Develop and implement strategies to increase knowledge and awareness on CY services.
- Promote awareness of existing police services and facilities for children.
- Support children to access justice throughout their case.
- Provide community based psychosocial support to children who have experienced violence and their care givers.

Underreporting may be seen as a major reason for the incidence of child sexual abuse in Nigeria - Most children
never tell anyone what has happened to them and few children ever get the help they need to recover. Violence during childhood has long lasting negative effects on mental and physical health and by not holding the abusers accountable to the law, the cycle of sexual violence is perpetuated.

It is worth commenting that Lagos State government is among the few states that have not only domesticated “The Child Rights Act” but commenced the implementation of a priority action plan in response to the findings of 2014 Violence against children survey. However, the magnitude of the problem requires a concerted effort from all stakeholders and concerned adults.

### 1.4 PROVIDING CHILDREN’S 24-HOUR HELPLINE

In joining the recently launched Presidential Campaign to “end Violence Against Children by 2030” The Cece Yara Foundation has incorporated the provision of a 24-hour toll-free helpline into its strategic plan as a timely intervention measure towards ending child sexual abuse. The Cece Yara Child helpline telecommunication and outreach service, including the live web chat will provide direct services, including counselling, advocacy, medical, referrals and active listening.

The child helpline will be accessible to children and young people around the clock and free of charge, enabling children who are victims or are vulnerable to sexual abuse to contact someone; it will provide children and young people with an opportunity to express their concerns and talk about the issues directly affecting them particularly on sexual abuse, and will provide intervention and support services.

At the Cece Yara Foundation, one of our core values is equal opportunity to every child. In order to provide uniform child protection services across the state and beyond, it is paramount that a Needs Assessment Study is carried out. The Child Helpline Needs Assessment Study Report will not only help us to understand the children’s perceptions of a child helpline but also strengthen consensus amongst stakeholders about the service.

The Needs Assessment can be seen as a systematic exploration of the divergence or discrepancy between the current situation or level of services and the desired situation or level of services. This need assessment report will serve as a perfect substitute for an individual’s observations and experiences. It gives detailed unbiased information from a larger and more representative group of people than could have been deduced from mere observation alone.

This needs assessment survey report presents a more trustworthy and objective description of the community needs at a given time for a successful intervention. This report will inform stakeholders of the likely impediments in the quest to respond to child sexual abuse in a given community. Going forward, this report is now a fundamental component of the child helpline monitoring and evaluation framework. The survey has provided us with a platform to secure more group and community support for the helpline to be launched – this is because people tends to support the intervention for a problem they identify with.
The target population for the needs assessment survey are the residents of Lagos state. This includes both adult and children who can read, write or provide answers to questions on the survey questionnaire.

For this study, a three-way cluster sampling method was adopted. The three-way cluster sampling method stratified Lagos state into 57 clusters base on Local Council Development Areas (LCDAs). Furthermore, 20 LCDAs were randomly but purposefully selected out of the 57 LCDA clusters, and finally, 40 persons (25 adults and 15 children) were randomly selected from each of the 20 clusters of LCDAs. Altogether, a total of 750 questionnaires were administered.

The questionnaire's questions and definitions were adapted from validated standard questions recommended by Child Helpline International Foundation. Using such a questionnaire makes it objective to compare data on various measures with other studies as a useful validation.

The questionnaire is divided into two categories. The first category of the questionnaire targeted the children between ages 12-17 years, while the second category targeted adults. The questionnaire for the children covered the following topics: demographics; education, problem identification, support, and phone-basics. On the other hand, the questionnaire for the adults covered the following topics: demographics; education, problem identification, willingness to help a child, willingness to support child helpline and publicity strategy.

2.1 FIELD WORK PREPARATION /TRAINING
To help facilitate trust and understanding with respondents, the selection of interviewers was critical. Interviewers were male and female Lagos State residents with a minimum of Bachelor's degree, culturally sensitive and emotionally intelligent. In addition, the interviewers had previous experience in confidential data collection and field survey. These criteria were used in hiring and selections so that the respondents could feel as comfortable as possible with the interviewer and the survey process. In additional to the selection criteria, interviewers were exposed to comprehensive training to better prepare them for the task ahead.
2.2 SURVEY PILOT

Prior to the implementation of the survey, the team leaders and principal researcher conducted a pilot survey. The pilot was a one-day exercise in two of the LCDAs in Lagos state. The pilot followed the framework of the Child helpline Needs Assessment Survey. The primary purpose of the pilot was to test the questionnaire and survey protocols including adequate preparation for full scale logistics. In addition, through administering the questionnaires in the pilot survey, the survey team was better able to assess the willingness to participate, average time taken per respondent and the cultural appropriateness of the questions. This helped to ensure that the questions being asked most accurately obtained the data the questionnaire was seeking. After the pilot survey, one of the major recommendations was to have a Yoruba language version of the questionnaire. This recommendation was implemented and each interviewer was given a Yoruba version of the questionnaire during the full scale survey. This facilitated consistency and easy interviewing.

2.3 DATA COLLECTION PROCEDURE

Precautions were used to ensure privacy during the interviews. The interviewers were instructed to conduct the interview in a safe and private location, in a public space without a risk of interruptions or in an appropriate place in the home or shop.

For all respondents under 18 years of age, it was necessary to first obtain the permission of the parent or primary caregiver to sign a consent form on behalf of the child.

2.4 DATA ANALYSIS

The statistical package for social science SPSS (version 21), Microsoft Excel (version 2013) and QSR NVIVO qualitative professional software (version 11) were used for data management and analysis.

A total of 750 questionnaires were administered. The combined individual response rates provide an overall response rate of 94%. When calculating the valid percentage for most measures, missing values were excluded from the analysis.
For all respondents under 18 years of age, it was necessary to first obtain the permission of the parent or primary caregiver to sign a consent form on behalf of the child.

750 QUESTIONNAIRES
94% RESPONSE RATE
TARGET POPULATION
LAGOS STATE

Interviewers were...Lagos State residents with a minimum of Bachelor's degree, culturally sensitive and emotionally intelligent. ... have previous experience in confidential data collection and field survey.
3.1 RESULTS ORGANIZATION

The result of this survey is sectioned into two categories. The first section presents the children responses while the second section presents the Adult responses. Finally, the general discussion of findings from all respondents is followed by recommendations and conclusions.

3.2 CHILDREN CATEGORY

RESPONDENTS’ CHARACTERISTICS

This section covers selected demographic and socio-economic characteristics of survey respondents, including age, sex, educational status and occupation.

GENDER AND AGE DISTRIBUTION

![Age Distribution Of Children Respondents](image)

Figure 1.1 shows the age distribution of children who participated in the needs assessment survey, from this figure it is evident that majority (74.7%) of the respondents are within the age range of 12-17 years.
Figure 1.2 shows the gender distribution of children who participated in the needs assessment survey. From this figure it is evident 53.1% of the children respondents are female while 46.5% are male. Thus, there were more female children respondents than male counterpart.

**EDUCATIONAL STATUS**

Figure 1.3 shows the educational qualification of children who participated in the needs assessment survey. From this figure it is evident that a significant number of respondents (73.2%) are secondary school students.
2 in 5 children identified “abuse” as the most significant problem they face in their community.

Figure 1.4: Categories Of Problems Children Face In Their Community

Figure 1.4 shows the various categories of problems children face in their community. From this figure, it is clear that 2 in 5 children strongly identified “abuse” as the most significant problem they face in their community.

It is worth knowing that each category of problems does not occur in isolation. This is evident in the “Combine bar chart” which showed that “abuse” and other forms of problems often occur in synergy. In fact, 1 in 4 problems that were identified often occur in a combination with others.

Furthermore, other categories of problems mentioned by the children respondents were financial hardship, hard drugs, bad roads, poor upbringing and nagging parents.

“THE COMBINED BAR CHART...SHOWED THAT “ABUSE” AND OTHER FORMS OF PROBLEMS OFTEN OCCUR IN SYNERGY."
1 IN 4 CHILDREN BEAR THE BURDEN OF PROBLEMS FACING THEM IN THEIR COMMUNITY ALONE.

Figure 1.5 shows the various reactions of children to the various problems facing them in their community. From this figure, it is obvious that 1 in 2 children report these problems to their parents while 1 in 4 children bear the burden alone. It is also worth knowing that each of the children’s reactions to problems does not occur in isolation.

Furthermore, 7.4% of the children resort to self-help in tackling the problems facing them. Other means of solving problems identified by the children is through prayers to God.
1 IN 4 CHILDREN ARE SADDENED THE MOST WHEN SOMETHING “BAD” HAPPENS.

<table>
<thead>
<tr>
<th>Occurrence</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Someone behaves inappropriately</td>
<td>5.0</td>
</tr>
<tr>
<td>Something bad happens</td>
<td>22.2</td>
</tr>
<tr>
<td>Someone is rude/Insults you</td>
<td>17.6</td>
</tr>
<tr>
<td>Parents hits you</td>
<td>5.0</td>
</tr>
<tr>
<td>Someone hits you</td>
<td>5.4</td>
</tr>
<tr>
<td>Someone Shouts at you</td>
<td>8.1</td>
</tr>
<tr>
<td><strong>Combination</strong></td>
<td><strong>36.7</strong></td>
</tr>
</tbody>
</table>

Figure 1.6 shows the various occurrences that sadden children in their community. The figure shows that, 1 in 4 children feel most sad when “something bad” happen while 22.2% feel most sad when someone is rude/insult them. Further analysis was carried out to unveil what “something bad” is. The result of the further analysis shows that “abuse” is the “something bad” that makes children feel most sad. In addition, 8.1% of the children also feel sad when someone shouts at them. Contrary to expectations, only a few children (5.0%) feel sad when their parents hit them. It is worth knowing that occurrences that sadden children are never in isolation in fact, about 36.7% (*Combinations) of the occurrences are concerted. Finally, a few children identified hunger as a major reason while they feel sad.
1 IN 4 CHILDREN SIMPLY KEEP QUIET AND DON’T REACT OUTWARDLY WHENEVER THEY ARE SADDENED.

![Graph showing reactions of children when they are sad](image)

Figure 1.7: Reactions of Children When They Are Sad.

Figure 1.7 shows the various reactions of children to instances that sadden them in their community. From this figure, it is obvious that 1 in 4 children prefer to keep quiet about occurrences that make them feel sad, and don’t react outwardly. Since it has been established in figure 1.6 that “abuse” is “something bad” that makes children feel sad; thus, it can be inferred that children do not speak out whenever they are abused. This assertion is in line with the findings from the national Violence against Children Survey, 2014.

Furthermore, about (16.1%) of children are angry whenever they are sad. Unfortunately, very few children (13.4) express their feelings by telling someone. Finally, 1 in 10 children resort to crying whenever they feel sad. Other things children do when they feel sad is to sleep, get busy or pray to God.
1 IN 3 CHILDREN DO NOT TO TELL ANYONE ABOUT THINGS THAT SADDEN THEM

Figure 1.8 shows the attitude of children towards reporting things that sadden them. The result from figure 1.8 shows that 1 in 3 children do not tell anyone about things that make them feel sad. Two of the major reasons given are the fact that they are afraid of talking about it (34.0%) and the fact that no one can do anything about it (29.8%). On the other hand, about 70% of the children spoke to someone about things that makes them sad, of the children that spoke out, 35.3% speak to their parents 17.6% speak to friends while 15.6% speak to brothers/sisters. It is also worth knowing that an insignificant number of children (4%) reports to neighbour about things that saddens them. This observation corroborates similar studies that exclude neighbours from children's trusted circles. Others reason children gave for not reporting things that sadden them is the fear of being ridiculed.

Figure 1.8: Children’s Mindset And Feelings Towards Reporting Things That Sadden Them.
4 IN 5 CHILDREN ARE WILLING TO CALL A CHILD HELP LINE SPECIAL NUMBER

Figure 1.9 shows the willingness of children to call the Child help line, from figure 1.9, it is evident that 4 in 5 children are willing to call the child help line. A few of the children who may not call gave reasons that pose a challenge to all stakeholders. One of the major reason is lack of access to phone (28.2%), lack of confidence in the capability of the service (20.5%) and lastly, the fact that their parents might not like the idea. It is also worth knowing that these reasons are never in isolation, in fact the combination of two or more of these reasons accounted for about 23.1% of the reasons why the children may not call the child help line.

Conversely, a significant number of children would love to call the child helpline to discuss abuse in school (16.4%), physical abuse (7.6%), medical issues (19.9%) and unhappiness (11.7%). It is also worth knowing that the discussion topics are not in isolation (*Combinations), 32.7% of the children would call child help line to discuss two of more of the identified topics. Other issues the children might call to discuss is “neglect”, “hunger” and “education”.

Figure 1.9: Children's Willingness To Call The Help Line

*Combinations
Afraid of what will happen to me or my family
My Parent might not like it
I can’t pay/No airtime
Afraid of talking to a stranger
I am not sure they can help
No phone accessible

Unhappiness
Physical Abuse
Abuse in School
Bad Stuff
Shelter
Medical

23.1%
5.1%
12.8%
2.6%
7.7%
20.5%
8.2%
78.3%
7.6%
11.7%
16.4%
4.1%
7.6%
19.9%
21.7%
32.7%
84.1% CHILDREN HAVE USED A PHONE BEFORE.

Figure 1.10: Children knowledge of phone basics.

Figure 1.10 shows the prior experience of children with phone and phone conversation. From this result it is evident that significant majority (84.1%) of the children have used phone before. Of the children who have used phone before, 23.5% called their parents, 11.8% called their family, 12.3% called friends while 38.2% (Multiple choices) call combinations of any of the listed categories.
3.3 ADULT CATEGORY

SOCIAL DEMOGRAPHICS

Figure 2.1: Age Distribution Of Adults Respondents.

Figure 2.2: Gender Distribution Of Adults Respondents.

Figure 2.3: Educational Background Of Adults Respondents.

Figure 2.4: Occupations Of Adults Respondents.
Figure 2.5 shows the respondents’ selection for the category of children which requires the most assistance. The results show that street children (21.2%) followed by children with disability (18.3%) require most assistance. Other categories of children who require attention are orphans (6.2%), children with emotional problems (6.5%), children in domestic work (3.9%), children in prostitution (7.1%) and child labourers (5.8%). Furthermore, 12.8% of the respondents agreed that all categories of the children could be inclusive.
90.2% ADULTS HAVE SEEN A CHILD IN NEED OF ASSISTANCE.

Figure 2.6 shows the frequency of children in need of assistance and attitude of adults towards them. The figure 2.6 shows that about 90.2% of adults have seen a child in need of assistance. 29.5% of adults gave money, 23.5% talked to the child while 7.8% do not know what to do when a child was seen in need of assistance. The attitude of adults towards children in need are concerted. This in evidence in the multiple choices bar with a cumulative percentage of 19.3%. This implies that 19.3% of adults will react in two or more manners identified.

ABOUT 90.2% OF ADULTS have seen a child in need of assistance.
SIGNIFICANT NUMBER OF ADULTS ARE WILLING TO GIVE FINANCIAL SUPPORT TO CHILDREN IN NEED OF ASSISTANCE.

Table 2.1: Content analysis of responses given by adults on what they would have preferred to do for a child in need of assistance.

This shows the commonest words used by adults to describe what they would have love to do for children in need of assistance. From this table it is evident that majority of the adults are willing to render assistance, give money, education or counsel the child in need of assistance.

<table>
<thead>
<tr>
<th>Word</th>
<th>Count</th>
<th>Weighted Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistance</td>
<td>29</td>
<td>2.18</td>
</tr>
<tr>
<td>Give</td>
<td>28</td>
<td>2.11</td>
</tr>
<tr>
<td>Call</td>
<td>26</td>
<td>1.95</td>
</tr>
<tr>
<td>Take</td>
<td>23</td>
<td>1.73</td>
</tr>
<tr>
<td>Like</td>
<td>21</td>
<td>1.58</td>
</tr>
<tr>
<td>Care</td>
<td>15</td>
<td>1.13</td>
</tr>
<tr>
<td>Education</td>
<td>14</td>
<td>1.05</td>
</tr>
<tr>
<td>Things</td>
<td>13</td>
<td>0.98</td>
</tr>
<tr>
<td>Love</td>
<td>12</td>
<td>0.9</td>
</tr>
<tr>
<td>Financial</td>
<td>12</td>
<td>0.9</td>
</tr>
<tr>
<td>Best</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>Feel</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>Government</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>Person</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>Render</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>School</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>Talk</td>
<td>11</td>
<td>0.83</td>
</tr>
<tr>
<td>Case</td>
<td>10</td>
<td>0.75</td>
</tr>
<tr>
<td>Loved</td>
<td>10</td>
<td>0.75</td>
</tr>
<tr>
<td>Provide</td>
<td>10</td>
<td>0.75</td>
</tr>
<tr>
<td>Help</td>
<td>9</td>
<td>0.68</td>
</tr>
</tbody>
</table>
The above figure corroborates the results of table 2.1. From the word cloud image in figure 2.7 it is evident that adults are willing to render assistance, give money, refer, call authorities or support the education of a child in need of assistance.

Researchers on the field
ADULTS BELIEVE THAT THE CHILD HELPLINE WILL WORK AND SHOULD PROVIDE MULTIPLE SERVICES

Figure 2.8: Perception of Adults on Child helpline

Figure 2.8 shows that perception of adults on the workability of child helpline in Lagos state. From the figure, it is evident that 93.7% of the adults believed that child help line would work when introduced in Lagos state. This figure further presents the thoughts of the respondents on the services that is expected of the child helpline. The result shows that 31.8% of the respondents suggested education, 13.8% suggested psychosocial, 8.3% suggested protection. While 7.2% suggested all services. It is also worth knowing that, 32.0% of the suggested services are never in solo, rather they are suggested alongside with one or more of other services. Of the adults who do not think child helpline would work, 62.5% said children would not call while 25.0% doubted the sustainability of the service.

If yes is your response to “Helpline”. What services should be required for children?

- **All Choices**: 7.2%
- **Multiple Choices**: 32.0%
  - Recreation: 1.7%
  - Psychosocial: 13.8%
  - Protection: 8.3%
  - Shelter: 3.9%
  - Medical: 1.4%
  - Education: 31.8%

If a child helpline services were introduced in Lagos state, do you think it would work?

- Yes: 93.7%
- No: 6.3%

If no is your response, Why?

- Sustainability: 25.0%
- Few Children are in need: 12.5%
- Children wont call: 62.5%

**93.7%**

of the adults believed that child helpline would work when introduced in Lagos State
94.5% OF ADULTS WILL HELP CHILDREN IN NEED OF ASSISTANCE, AND 65% WILL CALL THE CHILD HELPLINE.

Figure 2.9 shows the diverse willingness of adult to help children in need of assistance. This result shows that 94.5% of the respondents are willing to help children in need to assistance while 5.5% are not willing to help. Out of 94.5% who are willing to help, 65.7% are willing to call child help line and wait with the child while 26.4% are willing to take photo and post on the internet for help. On the other hand, out of 5.5% who are not willing to help a child in need of assistance, 30% were unwilling to help because the child is not their family, 20% for fear of taking responsibility, while 25% would not help out of ignorance of who to call.

Figure 2.9: Willingness of Adults to help children in need of assistance.

UNEDITED TOP TEN REASONS AN ADULT MIGHT NOT CALL CHILD HELP LINE FOR A CHILD IN NEED.

1. "I mind my own business. I will take responsibility provided I am dealing with the right organisation”
2. "I will wait because I need to know the outcome of the call I have made.”
3. “If the child won’t implicate me, I will help.”
4. “If it will not become a problem for me”.
5. “If there will be protection, i.e. if am sure I won’t be attacked by the culprit afterwards and also if my identity can be kept anonymous by the organization I called”.
6. “I am afraid of implicating myself while helping people.”
7. “I won’t want to help and then I will enter trouble for offering assistance. Also, not all children really need help. Some are just rebellious.”
8. “No police oooooo, police will just make things worse. Just call”
9. “I can’t take the responsibility of going through legal system”.
10. “What is my own business with another person’s problem when I have mine”.

WWW.CECEYARAFOUNDATION.ORG
97.7% ADULTS ARE WILLING TO SUPPORT THE CHILD HELP LINE IN LAGOS

Figure 2.10 shows the willingness of adults to support the child helpline in Lagos. The result confirms that 97.7% adults are willing to support the child helpline in Lagos. Out of the 97.7% adults who are willing to support the project, 19.9% are willing to donate cash, 22.4% are willing to share ideas/time while 32.2% are willing to publicize.
04 HIGHLIGHTS OF FINDINGS

4.1 CHILDREN CATEGORY

- 2 in 5 Children Identified “Abuse” as the most significant problem they face in their community;
- 1 in 4 children bear the burden of problems facing them in their community alone, without telling anyone;
- 1 in 5 Children are most saddened when “something bad” happens. “Something bad” was found to be abuse;
- 1 in 4 Children simply keep quiet and don’t react outwardly whenever they are sad;
- 1 in 3 children do not to tell anyone about things that sadden them;
- 4 in 5 children are willing to call Child helpline special number;
- 84.1% children have used a phone before.

4.2 ADULTS CATEGORY

- Street children and children with impairment require the most assistance.
- 90.2% Adults have seen a child in need of assistance.
- 94.5% of Adults are willing to help children in need of assistance.
- 93.7% of the adults believe that child help line will work when introduced in Lagos state.
- 97.7% Adults are willing to support the Child help line in Lagos

A CROSS SESSION OF CECE YARA RESEARCHERS AFTER TRAINING
Respondents indicated fear and reluctance to help a child in need due to the fear of legal repercussions or retaliation or attack by the perpetrator. More adults are willing to support a child helpline and help children in need if the State Government could enact some specific “Good Samaritan laws”—legal protection for adults who give reasonable assistance to children who have been, or are vulnerable to sexual abuse.

More children would call the helpline if public phone booths can be made available at strategic safe places within each community.

While the helpline primary target is sexual abuse, a significant number of children expect the helpline to provide educational, feeding and financial assistance.

The child helpline needs assessment survey was successfully carried out, and provides evidence that the child helpline intervention is a welcome and timely intervention. It also gave a strong indication that the general public is ready to support the program.
OUR VISION: To create a safe and happy childhood for every Nigerian, child free from sexual abuse, with easy access to care, information, protection and emergency intervention.

OUR MISSION: Preventing child sexual abuse through community empowerment and support.

The Cece Yara Foundation is a child-centered, not-for-profit organisation established to promote a safe childhood for children; access to care, information, protection and emergency intervention for children who are sexually abused or at risk, and their non-offending family members. We focus on preserving the joyfulness of an innocent childhood by upholding the rights of the child as enshrined in the Nigerian Child's Rights Act and the United Nations Convention on the Rights of the Child.

The Foundation was founded by Mrs. Bola Tinubu, a child advocate, mother and lawyer on a quest to prevent Child Sexual Abuse in Nigeria. Motivated by her belief that childhood should be a period of innocence, safety and happiness for all children, she established the Foundation at a time when research reports estimated childhood sexual violence occurrence in Nigeria to be as high as one in four girls and one in ten boys.

“Cece Yara” means “Save the Child” in the Hausa Language.
Recognising and understanding the depth of the problems caused by child sexual abuse, and in accord with the Governments’ Action Plans, The Cece Yara Child Advocacy Centre provides a child-centred, community-oriented, facility-based service in which child-focused community stakeholders will work in concert for the well being of children and their families traumatized by sexual abuse. The Centre has established programs to prevent child sexual abuse, to serve victims of child sexual abuse in order to promote healing and to educate the public to protect children from sexual abuse. Our Services include:

- Empowering adults in the community to protect children aged 0-18 years old from sexual abuse by teaching them how to prevent and recognise child sexual abuse and how to react responsibly;
- Providing a free 24-hour helpline for children experiencing sexual abuse or who are at risk, or have suffered abuse with a listening ear, counselling or referral services;
- Providing children who have suffered abuse with legal, medical and specialised psychosocial support, free of charge, and providing safe, neutral, child friendly and supportive environments for the children we serve;
- Providing an extensive outreach program to schools and the community which includes a variety of prevention services, education on child abuse dynamics and information on healthy child rearing practices;
- Strengthening, through advocacy and collaboration, the existing support structures and Institutions for child protection services;
- Providing a multi-disciplinary team approach to the investigation, intervention and prosecution of child abuse.
CONTACT INFORMATION

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