



Frequently asked questions on INSPIRE in humanitarian settings – November 2019

The main purpose of this document is to facilitate the work of the Child Protection Area of Responsibility Helpdesks to address questions around INSPIRE. It has been developed based on the most frequently asked questions in the field and is considered as a living document which will be adjusted over time.

For general questions on INSPIRE, please refer to [WHO FAQ](#).

1. Can INSPIRE be implemented in both development and humanitarian settings, including refugee contexts? Are there any examples where INSPIRE was implemented in such settings?

Yes. All seven INSPIRE strategies may be applied in settings affected by conflict or natural disaster and the package includes several interventions shown to be effective in such situations. Since the launch of the INSPIRE package, more evidence-based interventions featured in INSPIRE have been implemented in humanitarian and refugee settings, some of which have been documented. This includes [parenting programmes in post-conflict Colombia](#), education programmes for refugees in Uganda, [social norms change in Haiti](#) and South Sudan. However, as with strategies that address other societal problems such as smoking, drug use and excessive alcohol use, mental health, crime, and road traffic injuries, the feasibility of successfully implementing them will vary according to the strategy and the context. In principle, because they do not depend upon intact social systems and functioning governance structures, interventions delivered through self-contained programmes can be delivered in any setting. These include, for example, parenting programmes, life skills training programmes, and services for victims of violence. By contrast, interventions involving the enforcement of laws by functioning police and justice systems will be difficult to implement where conflict or natural disaster have destroyed or severely eroded these structures.

2. INSPIRE strategies cannot be implemented in humanitarian settings due to the short-term nature of funding. Is that true?

No. Some of the interventions featured in INSPIRE can be implemented over a short period of time (e.g. 12 weeks parenting program, 16 sessions Trauma-focused cognitive-behavioural therapy), requiring less resources. Moreover, with the increasing number of protracted crisis, acknowledgement of the nexus between humanitarian and development interventions and advocacy for longer term funding, including through multi-year Humanitarian Response Plans, it is possible to advocate for longer and more flexible funding. Donors are also more willing to fund interventions that are evidence-based with demonstrable results in terms of prevention and reduction of violence against children.

3. How much does it cost to implement INSPIRE package?

Seventy-five per cent of the interventions featured in the INSPIRE Handbook were developed or implemented in low or middle-income countries. The [Handbook](#) provides an estimate of the cost for each intervention under each strategy. Some of the interventions, for instance parenting programmes, can be implemented over a short period (e.g. 12 weeks) and require fewer resources, while others would need more substantive resources over a longer period of time (e.g. community mobilization program to



address social norms). A problem as complex as violence against children cannot be solved only through short-term, project-based funding, however the use of some of the more shorter-term interventions featured in INSPIRE can already start making a difference as all interventions are cost-effective and evidence-based. Moreover, the cost of inaction is much greater in the long run. Studies have shown that VAC has high costs in terms of medical expenses, legal costs and lost productivity. For instance, in Nigeria, a 2017 study found that the economic burden of violence against children in 2014 was equivalent to US\$8.9 billion or 1.58 percent of the country's GDP¹.

4. How can you adapt INSPIRE to humanitarian settings?

For most interventions included in the [Handbook](#), a description is provided of the core elements that must be present to ensure effectiveness. It also includes estimated costs and links to existing resources and tools. Except the theory of change and core elements, all other elements would need to be adapted to the participants, culture and context to contribute to the success of the intervention. Implementers therefore need to find the right balance between maintaining fidelity to the intervention as it was originally developed when shown to be effective, and adapting it to new circumstances, whether it is in a humanitarian or non-humanitarian context. INSPIRE Handbook also provides some specific considerations in relation to humanitarian settings.

5. Do you have to implement all seven strategies?

No. It is not expected that a single organization/department/ministry will implement interventions from all seven strategies. In practice, interventions from each strategy will be implemented by different organizations/departments/ministries, based on their mandate, resources and expertise. Similarly, not all interventions are relevant to every specific context, and it is reasonable to initially prioritize just a few strategies/interventions based on available data, current needs and available resources. Implemented together, the seven strategies are complementary and mutually reinforcing.

6. At which stage of an emergency/when can INSPIRE be implemented?

Due to rapid changes in the context, moving population and focus on the most urgent needs, it might not be possible to apply INSPIRE strategies in a rapid onset emergency. However, nowadays, crises are increasingly protracted and therefore offer the opportunity to plan, design and implement longer-term interventions that can prevent or minimize the impact of violence against children in combination with other humanitarian interventions and as part of holistic multi-sectoral programmes. In addition, INSPIRE strategies should be implemented in preparedness efforts, including in countries regularly affected by natural disasters. Finally, in more stable contexts, it would be important to ensure that the most

¹ *The Economic Burden of Violence Against Children in Nigeria: Analysis of Selected Health and Education Outcomes*, November 2017, Xiangming Fang et al., College of Economics and Management China Agricultural University and School of Public Health Georgia State University.



vulnerable children, including migrants, refugees, stateless and internally displaced children are systematically considered when implementing INSPIRE strategies.

7. What is new about INSPIRE?

INSPIRE is not a new, stand-alone initiative — many governments and organizations already use these strategies to address a range of issues. Rather, by highlighting the underlying evidence-base, INSPIRE is intended to help revitalize, focus and expand current efforts to prevent and respond to violence against children. Drawing on existing knowledge and experience, INSPIRE provides a framework for a *holistic, evidence-based, multi-sectoral commitment to ensuring children can achieve their full potential free from violence*. Together the strategies can be part of a comprehensive, system-wide approach to preventing and responding to violence against children.

8. What is the relationship between INSPIRE and the child protection minimum standards in humanitarian action?

INSPIRE and the [Minimum Standards for Child Protection in Humanitarian Action](#) (CPMS) are complementary. INSPIRE provides guidance on specific, evidence-based interventions to prevent and respond to violence against children with the core elements which need to be implemented to ensure effectiveness. It can be implemented in a variety of situations, including humanitarian contexts. The CPMS contains agreed universal standards of action to strengthen coordination and enhance the quality of child protection programming in humanitarian contexts. Both adhere to the socio-ecological framework. INSPIRE strategies can be used in complementarity to the minimum standards, for instance, by providing example of interventions which have proven effective and which can be replicated. References to INSPIRE strategies are reflected in the 2019 edition of the CPMS. For more detailed explanations on the relationship between both, please refer to INSPIRE-CPMS guidance note.

9. Where can I find resources on INSPIRE? In which language are they available?

All resources are available electronically [here](#). The core document is available in all UN official languages. Other resources are available in Spanish and there are plans for further translations in French and Arabic. In addition, some resources have been translated in local languages by INSPIRE working group members (e.g. Bulgarian, Ukrainian, Japanese). For more information, feel free to contact the CP AoR respective Helpdesks (CPAOR_SpanishHelpDesk@unicef.org; CPAOR_ArabicHelpDesk@unicef.org; CPAOR_EnglishHelpDesk@unicef.org; CPAOR_FrenchHelpDesk@unicef.org) or [End Violence team](#).

10. What does INSPIRE mean by ‘prevention’?

The INSPIRE package was developed using a public health model focusing on prevention. As such, six of the seven INSPIRE strategies are preventive by nature, and ‘Response and support services’ focuses on victim care. Prevention refers to all interventions, activities, legislation and/or policies aimed at preempting violence against children from happening in the first place (primary prevention); stopping further involvement in violence on the part of victims (secondary prevention) and reducing trauma and disability on the part of victims (tertiary prevention). It goes way beyond awareness-raising activities



and/or sensitization campaign and includes specific interventions with parents, on social norms and on legislation.

11. What does INSPIRE mean by ‘evidence-based’? Are all current evidence-based interventions included in INSPIRE?

With the exception of certain legislations, all interventions included in INSPIRE have been scientifically evaluated through Randomized Controlled Trials (‘RCT’s) and/or high quality quasi-experimental designs and found to be effective. They are based upon the best available research evidence, rather than personal belief or anecdotal evidence. The INSPIRE Handbook describes a selection of evidence-based interventions known through scientific publications at the time it was developed in 2016. Seventy-five per cent of the interventions featured in INSPIRE were developed or implemented in low or middle-income countries, however, the Handbook only includes a few instances of interventions implemented in humanitarian settings. It does not mean that interventions which have not been included are not evidence-based. It is anticipated that both the INSPIRE technical package and the INSPIRE Handbook will be updated periodically to reflect new evidence.

12. How can progress and impact of INSPIRE be measured? Are there any tools?

The [INSPIRE Indicator Guidance and Results Framework](#) provides a set of indicators and a results framework to support governments and organizations to monitor the prevalence of violence, risk and protective factors, and the implementation and impact of the INSPIRE strategies. Indicators are provided for each of the seven strategies and for multi-sectoral action and monitoring and evaluation. The indicators are designed for use at national and sub-national levels. Data for most of the indicators can be obtained using questions from existing survey instruments, which are highlighted in the guidance.

13. Must every organization implementing INSPIRE interventions do a Randomized Controlled Trial (RCT) to test if it is working?

No. It is not required that an RCT is conducted every time an INSPIRE intervention is implemented in unmodified form or when it is only superficially adapted. However, whenever any intervention in INSPIRE undergoes major modifications, it cannot be assumed that it will work in the same way as the proven intervention on which it is based, and, in all such cases, the adapted intervention should be tested for effectiveness prior to being scaled up. In addition, while RCTs will not be required in most cases, a robust monitoring and evaluation framework is still needed to ensure that the intervention is producing the desired results.

14. How can Inter-Agency Child Protection coordinators use INSPIRE?

Coordinators can use INSPIRE to facilitate: 1) establishing inter agency mechanisms to measure impact and increase quality; 2) engaging other sectors in interventions through cross-cluster collaboration, and 3) including some interventions in humanitarian response plans to support resource mobilization.

INSPIRE is a tool and a framework which can help coordinators ensure that more evidence-based interventions are implemented and, in this way, enhance the quality of child protection programming



within the AoR and across the sector. Based on existing data (e.g. Violence against Children Surveys), analysis and discussion during the country workplan/strategy events, working groups can identify ways of strengthening existing interventions or initiating new evidence-based interventions relevant to their context. Through fostering a multi-sectoral approach, the INSPIRE package can also contribute to better inter-sectoral cooperation. Its focus on prevention can also contribute to better preparedness and/or support transition to recovery phase. Members of the child protection/inter-agency working group can use INSPIRE indicators to measure and evaluate the impact of their interventions in terms of reduction of violence against children. By becoming a member of the INSPIRE working group, they can also benefit from exchanges of best-practices with other members facing similar challenges. Finally, INSPIRE strategies can be implemented both at local and national level at the same time. It is not necessary to wait for the government to have developed a national action plan to implement it.

15. Does INSPIRE also address issues of external violence such as armed conflict?

Collective violence such as armed conflict or terrorism are not addressed in INSPIRE. Holistic efforts to reduce violence, protect children, change norms and support families can however potentially reduce the risks and impact of these types of violence.

16. What kind of support does the CP AoR/Global Partnership to End Violence against children provide on INSPIRE?

The CP AoR and the Global Partnership to End Violence against children are working together to accelerate ending violence against children with a focus on humanitarian settings. Dedicated support is provided to coordination groups and governments on the implementation of the seven INSPIRE strategies to end violence against children through remote or in-country support. This can include linking coordinators/coordination groups with relevant experts, organizations and resources on end violence (e.g. Violence against children survey, specific interventions) and providing technical support and/or in-country capacity building on INSPIRE and related issues upon request. Contact: chantal.neuweiler@end-violence.org

17. What is the relationship between INSPIRE and the [RESPECT](#) framework to end all forms of violence against women?

RESPECT is an acronym that stands for Relationship skills strengthened; Empowerment of women; Services ensured; Poverty reduced; Environments made safe; Child and adolescent abuse prevented, and Transformed attitudes, beliefs and norms. The RESPECT framework launched in May 2019, and complements INSPIRE. Some of the interventions included in INSPIRE address intimate partner violence (IPV) as well as social norms which condone gender inequality and the use of violence. Similarly, RESPECT includes a strategy to prevent child and adolescent abuse. There is growing evidence of the intersections between IPV and violence against children. These types of violence share risk factors and have similar negative health and psychological outcomes for victims. Both are influenced by social and gender norms that condone violence and violent punishment of children and reinforce gender inequality. IPV and



violence against children often co-occur in the same families, and the behaviour can be passed on through generations.

18. What is the INSPIRE Working Group (WG)?

The INSPIRE Working Group is co-led by WHO and the Care and Protection of Children Learning Network (CPC). The Global Partnership to End Violence against children is part of its Secretariat. The role of the WG is to provide leadership in the implementation of INSPIRE-related interventions; harmonize the work of members to achieve collective impact; identify emerging implementation support opportunities, and generate, collect and share new evidence on what works to address violence against children. Membership is free and include representatives from UN agencies, bilateral agencies, international professional associations, NGOs, governments, philanthropic foundations and academia working towards ending violence against children and committed to implement INSPIRE related interventions. Currently, it includes about 500 members.

19. What is the relationship between the Global Partnership to End Violence against children and INSPIRE?

The Global Partnership to End Violence against children contributed to the development of the INSPIRE package and is promoting its use to accelerate action to end and prevent violence in countries and communities. The Global Partnership is also part of the Secretariat of the INSPIRE working group and one of its active contributors.

20. Is membership of the INSPIRE WG and of the Global Partnership to End Violence against children related?

Not directly. Both entities are independent and have separate application processes, however work closely together.