



CHILDREN'S BODILY

AUTONOMY

Dissemination Program Impact Assessment Report 2019 - 2021







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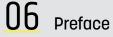
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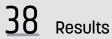
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Preface

Children make up 30% of the world's population and 26.9% of Turkey's population according to TÜİK (Turkish Statistical Institute) statistics. However, they are one of the groups with the highest difficulties in accessing equal rights. For this reason, The United Nations Convention on the Rights of the Child, which Turkey is a signatory of and took into effect in 1989, was prepared to ensure children live under equal conditions with adults in a world designed for adults. In societies where children are not seen as individuals and not given their rights, where there is no access to comprehensive sexuality education, and where adults exercise authority over children, children are more likely to be subjected to neglect and abuse, especially by people around them.

For this reason, even though the program whose impact is evaluated in this report is prepared for preventing sexual violence, the topic it focuses on is children's bodily autonomy. Because sexual violence is dealt with by leaving out children's rights and child participation. Cultural reasons such as adults having great authority over children, children not being seen as adults, their sexuality being ignored, them being expected to unconditionally obey and respect adults, family being seen as sacred, lack of knowledge or false beliefs alongside structural reasons such as lack of access to rights-based training and awareness studies such as comprehensive sexuality education, all increase violations of children's bodily rights and sexual abuse, and make them invisible. Sexual abuse and violent behavior are talked about after they occur and after children are harmed. Protective and preventive approach is not yet adopted by public institutions, and not enough preventive measures are taken. The approach and application of the support services provided by the relevant ministries are far from being rights-based and preventive. Children can be subjected to secondary trauma, and their accounts may not be taken seriously. When considering all this information, the need for a rights-based and preventive approach is imperative.

Protective-preventive approach is used especially in the health, education, and legal fields, and aims to prevent abuse and violence before it occurs and to protect individuals from the negative consequences of abuse and violence. We should not wait for cases to come to light to raise

the topic of sexual abuse. There are plenty of measures to be taken and programs/applications to develop prior to violence surfacing. Protection and prevention is the business of politics and systems. Decision-makers have the responsibility to create financial resources for these services, conduct these services, audit, and report. A comprehensive and inclusive protective-preventive application has to consider a need and risk analysis, cultural structure, problem identification, identification of environmental and institutional resources, interdisciplinary approach, and interagency cooperation. Additionally, all professionals (or occupational experts) must adopt and internalize a protective-preventive approach to effectively combat sexual violence.

As the Association for Struggle Against Sexual Violence, we adopt this approach and work to provide resources and support to help the professionals and parents we touch internalize this approach. We give many thanks to our colleagues and the implementation team who took this journey with us, helped us reach more people with seminars and applications, and gave their precious time for this impact assessment report. We wish to strengthen the transformation and struggle together, and increase solidarity...

Children's Bodily Autonomy Team, December 2022

Introduction

Children's Bodily Autonomy (CBA) Dissemination Program has emerged as a part of the Transformation and Prevention Program of the Association for Struggle Against Sexual Violence. It is expected to disseminate protective-preventive practices, prevent sexual violence before it occurs, and transform societal perceptions and practices that lead to sexual violence within the Association's Transformation and Prevention Program. The Children's Bodily Autonomy Dissemination Program was designed to target school counselors and professionals that work at city/district municipalities with this aim.



Image 1: CBA Dissemination Workshop Poster

The emergence of the program rests on the "Do not Silence Children, Combat Sexual Abuse" campaign that was started in March of 2018. The main aim of the campaign, which was led by the Şişli Municipality Social Equality Unit, was determined as creating protective and preventive work that local governments can develop.

With a deep interest in the campaign, a dissemination program was developed that focused on rights to privacy and participation, delivered by adults to adults. A 3-day workshop for the dissemination program was created with the cooperation of the Şişli Municipality Social Equality Unit, which was first done in 2019. As of 2020, the workshop duration has been extended to 5 days. The aim of the program was defined as disseminating a societal approach where children's bodily autonomy is defined, acknowledged, and respected.

a. About the Program

Within this dissemination program organized by the Association for Struggle Against Sexual Violence, it is aimed to reach school counselors and various professionals such as clinical psychologists, psychologists, counselors, social workers, and sociologists who work at city and district municipalities.

The design of the program is such that after attending the 5-day dissemination workshop, the professionals would start organizing dissemination seminars both within and outside of their institution and continue to be supported by the Association via supervision meetings throughout the process.

The main themes of the program, which are the perception of children, child participation, children's bodily autonomy, protective-preventive approach to sexual abuse, and responsibilities of adults are disseminated to professionals through seminars. As mentioned above, the dissemination workshop takes 5 days and encompasses the topics below:

- The Dominant Perception of and Approach Towards Children in the Society
- Children's Rights and Participation
- Children's Bodily Autonomy and Consent for Children
- Gender and Its Reflections on Life
- Supporting Sexual Development in Children
- Sexual Abuse and Societal Approach (Group Activity)
- Sexual Abuse: Definition, Myths, and Realities
- Recognizing Sexual Abuse and Intervention Strategies

- Responsibilities of Adults in Combating Child Sexual Abuse
- Introduction and Distribution of the Materials
- Obligation of Notification and the Legal Aspect
- Protective-Preventive Approach
- Supporting Materials
- Adult Seminar Examples
- Pre-Implementation Advice

Despite slowing down with the COVID-19 pandemic, 75 professionals attended the dissemination workshop between 2019 and 2021. The face-to-face and online seminars given by these professionals have been implemented 124 times, and have reached 2,623 adults and 800 children.

Awareness work within the Children's Bodily Autonomy Implementation Program is not limited to the dissemination workshop. Alongside the workshop, tools such as prepared publications, brochures, visual outputs (bookmarks, etc.), and podcasts make up a significant portion of the awareness work. In this context, the Dissemination Program conducts powerful awareness work both through the open source materials that can be accessed from the Association for Struggle Against Sexual Violence website as well as images that contain messages from the program.

These publications and images also become important information sources for those who want to get information on the subject. At this point, the "Responsibilities of Adults in Combating Child Sexual Abuse and Children's Bodily Autonomy" booklet becomes a significant resource that can be found in four languages (Turkish, Kurdish, Arabic, English) on the website.¹

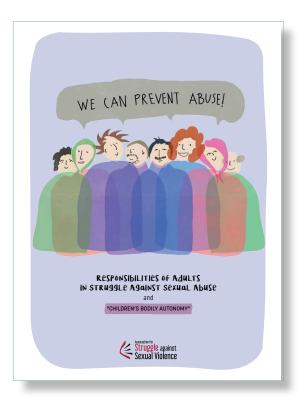


Image 2: Responsibilities of Adults in Combating Sexual Abuse of Children and Children's Bodily Autonomy Booklet - Cover Page

¹ https://cinselsiddetlemucadele.org/wp-content/uploads/2021/10/Responsibilities_of_Adults_in_Struggle_Against_Sexual_Abuse.pdf



Image 3: Example Bookmark Created within the Program

Image Text: "The best way to tell children what is unsafe is to create safe relationships with them". / "CHANGE STARTS WITH ME" / Association for Struggle Against Sexual Violence

b. About the Impact Assessment Report

This impact assessment report focuses on the implementations of the Children's Bodily Autonomy Dissemination Program's activities between 2019-2021 and their target group. In 2022, the Association for Struggle Against Sexual Violence has aimed to look at the time since the program's start until now with an impact perspective and to bring its impact to the maximum level by evaluating these years. It has aimed to utilize the result of the impact analysis in creating the strategy for the next term. With this aim, research focusing on the impact of work between 2019-2021 was conducted with an independent impact expert. In short, this report aims to present the impact of the Children's Bodily Autonomy Dissemination Program between the years 2019 and 2021. With this aim, the report first presents the program's theory of change, the research framework, and the methods used. Then, the results are shared. The final section provides conclusions and suggestions.

Theory of Change

The first step in finding the impact of a project, program, or organization is to create the "Theory of Change". Theory of Change can be thought of as a road map to how the activities with a project/ program are related, how they lead to outcomes/change with a cause-effect relationship, and how the ultimate aim will be reached through these outcomes/changes. For this reason, creating a theory of change is the first step, and this theory of change will be referenced throughout the impact analysis. In other words, a theory of change allows us to map the building blocks and their relations.

Outputs	Activity	Method	Outcome Indicator	Outcomes	Ultimate Aim
3 Children's Bodily Autonomy Dissemination Workshops implemented. 75 professionals reached.	Children's	- One-on-one interviews - Focus group interviews - Evaluation surveys	-Ratio of beneficiaries indicating changes in their behavior - Ratio of professionals who were able to implement seminars sufficiently and whose problems were solved - Municipalities making protective- preventive work sustainable and more widespread.	Increase in the transformation of societal practices that lead to sexual/ sexualized violence.	Transforming and preventing sexual violence before it occurs.
124 Children's Bodily Autonomy Dissemination Seminars implemented. 2,632 professionals reached.	Bodily Autonomy Dissemination Program			Increase in protective- preventive studies in order to prevent sexual violence before occurring.	

Table 1: Children's Bodily Autonomy Dissemination Program Theory of Change

The first step for the impact analysis of the Children's Bodily Autonomy Dissemination Program was also the theory of change. At this stage, the theory of change was based on the theory of change that was already created and being used by the Association, and it was the starting point of the impact analysis.

According to the theory of change, the ultimate aim of the Children's Bodily Autonomy Dissemination Program is **"Transforming and preventing sexual violence before it occurs"**. The expected outcomes (changes) to reach this aim are **"Increase in the transformation of societal practices that lead to sexual/sexualized violence" and "Increase in protective-preventive studies in order to prevent sexual violence before it occurs**".

The main indicators that are the basis for this impact analysis can be listed as:

- Ratio of beneficiaries indicating changes in their behavior.
- Ratio of professionals who were able to implement seminars sufficiently and whose problems were solved.
- Municipalities make protective-preventive work sustainable and more widespread.

Whether these indicators came true was examined in the impact analysis. The research questions followed for this examination were:

- What were the changes observed in the daily lives and interactions (with themselves and others) of the professionals who participated in the CBA Dissemination Program?
- What were the changes observed in the occupational capacities of the professionals who participated in the CBA Dissemination Program?
- What steps have been taken and what changes have been observed on CBA at the institutional level at the institutions of these professionals?

• What were the changes observed in the participants of the dissemination seminars given by these professionals?

The research questions outlined were also used in the categorization of the results. In the following sections, the report will follow the headings of **"Impact Observed at the Personal Level"**, **"Impact Observed at the Professional Level"**, **"Impact at the Institutional Level" and "Impact on the Participants of the Dissemination Seminars"**, after presenting the number of people reached. The methods used in answering the research questions will be outlined in the next section.

Research Framework: Methods and Limitations

For this research where the impact of the Children's Bodily Autonomy Dissemination Program between the years 2019 and 2021 is investigated, the professionals who attended the dissemination workshop were given semi-structured questionnaires. 16 people participated in this questionnaire sent to 75 people. Various question types were included in this questionnaire hoping to evaluate the impact of the Dissemination Program.

Psychological counselors showed the highest attendance (46.7%) to this questionnaire sent to professionals who were included in the program between 2019-2021. This was followed respectfully by social workers (20%), clinical psychologists (13.3%), and sociologists. 6.7% of the participants were made up of consultancy center coordinators with various academic backgrounds.

After the questionnaire, 18 people were reached for one-on-one and focus group interviews. These interviews were audio recorded with the consent of the participants and transcribed later. The interviews were used in the report in a way that did not include any personal details and complied with the Personal Data Protection Law. These interviews helped interpret the questionnaire data and provided a wide range of data about the program.

Children's Bodily Autonomy Dissemination Program Impact Analysis 2019-2021 2019-2021

1. Children's Bodily Autonomy Dissemination Program in Numbers

Between 2019 and 2021, the Children's Bodily Autonomy Dissemination Program reached professionals in different fields. The first group to be reached within these professionals, with collaboration from Şişli Counseling Research Center (CRS), were psychological counselors and school counselors working at primary and middle schools in the Şişli area. In the following years, professionals in different fields such as psychologists, unit supervisors, child development specialists, and social workers employed by the İstanbul Metropolitan Municipality and various district municipalities in İstanbul participated in the workshops.

Number of professionals reached/ Institution	Year of Dissemination Workshop	Number of Seminars	Number of Total Adults Reached
20/Şişli Counseling Research Center (CRS)	2019	6 seminars (2019) 8 seminars (2020) 11 seminars (2021)	128 people (2019) 162 people (2020) 530 people (2021)
20/İstanbul District Municipalities	2019	10 seminars (2019) 10 seminars (2020-2021)	360 people (2019) 298 people (2020-2021)
29/IMM (İstanbul Metropolitan Municipality)	2020	79 seminars (2020-2021)	1145 (2020- 2021)

Table 2: Children's Bodily Autonomy Dissemination Program in Numbers

When looking at the process focused on this impact analysis, it can be seen that the program reached 2,623 adults and 800 children with 124 seminars, despite the effects of the pandemic which has lasted 2 years.

A considerably wide range of participants was seen when looking at their socio-cultural and class structures and education levels. In this aspect, it can be said that the program reached a very wide fraction of society through professionals. It should be noted that the years subject to this impact analysis were years in which the program was istanbul-based. It should be known that now dissemination workshops are conducted outside of istanbul as well.

With these professionals, the dissemination seminars have reached different units and professionals within their institutions, as well as different institutions through collaborations. Additionally, parent groups, dwellers via neighborhood studies, and mixed groups via open calls have been part of these seminars. Looking at the seminars conducted between 2019 and 2021 as a whole, we are presented with the below table:

Implementation Team	Distribution of Implementations		
Şişli Counseling Research Center	Publishers Education cooperatives Psychological counseling and guidance departments of various universities Quran courses Parent groups Primary, middle, and high school educators CSO volunteers Counseling research centers		
Şişli Municipality	Relevant directories Adults living in the municipality's field		
Kadıköy Municipality	Relevant volunteer houses Art centers Adults living in the municipality's field		
Kartal Municipality	Relevant counseling centers Various middle and high schools in the municipality's field		
Ataşehir Municipality	Cultural centers Municipality personnel Adults living in the municipality's field		
Beylikdüzü Municipality	Relevant units		

Implementation Team	Distribution of Implementations	
Sarıyer Municipality	Relevant units Neighborhood education centers Adults living in the municipality's field	
Beşiktaş Municipality	Relevant units	
Avcılar Municipality	Relevant units	
Küçükçekmece Municipality	Relevant units	
İstanbul Büyükşehir Municipality	Every district that has an İstanbul Family Consultancy and Education Center also known as İSADEM (Başakşehir, Bağcılar, Esenler, Güngören, Zeytinburnu, Küçükçekmece, Sultangazi, Sultanbeyli, Gaziosmanpaşa, Fatih, Eyüp Sultan, Ümraniye, Bayrampaşa, Avcılar, Bahçelievler, Bakırköy, Kartal, Pendik, Sancaktepe)	

Table 3: 2019-2021 Institutional Distribution of Dissemination Seminars

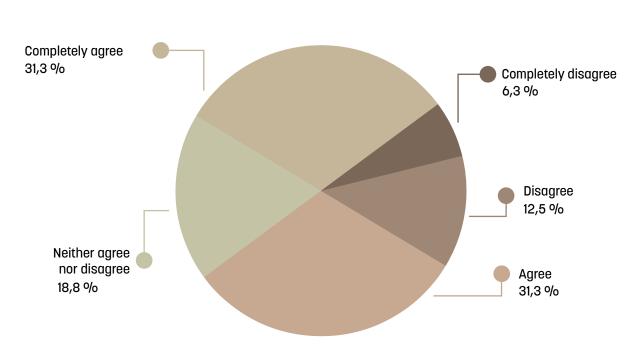
As seen in the table above, dissemination seminars were implemented mainly in İstanbul but also in cities such as Batman, Kırıkkale, and Bursa, broadening the impact area geographically.

2. Impact Observed at the Personal Level

It would not be incorrect to say that the most prominent impact area of the Children's Bodily Autonomy Dissemination Program was observed in the daily lives of the occupational experts. The impact observed at the personal level was seen most notably in the professionals' relationships with the children they are in contact with in their daily lives. As detailed below, the professionals question their relationships with children and their attitude is subject to partial change following the dissemination seminars.

2.1. Change in Relationship with Children and Perception of Children

The most critical change in the professionals who participated in the Children's Bodily Autonomy Dissemination Program was that they started questioning their attitude towards their own children and children who are their relatives or in their inner circle, with the effect of the program. The resulting change in attitude has formed a basis for them to increase awareness in their social sphere.



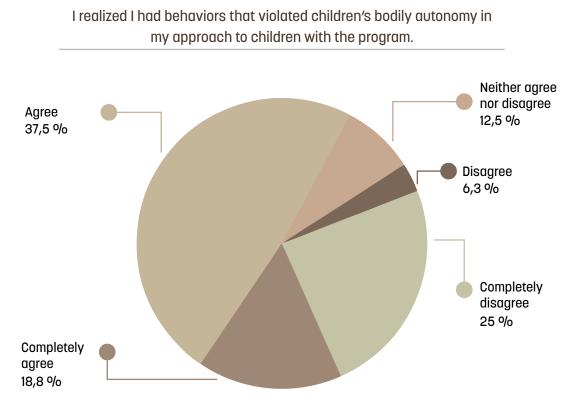
I started questioning my perception of children with the program.

Graph 1: Impact of CBA Dissemination Program on Professionals' Perception of Children

As seen in the social impact research questionnaire, 63.6% of professionals who attended the program started questioning their attitude toward children, whereas 18.5% said the program did not have an impact on questioning their perception of children.

It is very valuable and permanent for me. Because I have a cosmos where I can constantly implement this, waiting for me at home. It starts informing me every day, and it does have difficulties, but even still the most motivating factor for me is that this theoretical information was shared with me.

I do not remember how old I was during that time, but I had a 3- or 4-year-old daughter. The education I gave them as a parent was of course shaped by this education. It was the exact time to learn this. The reactions I give to my surroundings have also transformed. My own perspective has also transformed and still continues to transform. I am questioning, at the end of the day. I even question what I am teaching in my seminars. I question myself, and it transforms even more."sorguluyorum. Kendimi sorguluyorum, daha da dönüşüyor.



Graph 2: Awareness Generated on Children's Bodily Autonomy in Professionals

Even though some of the professionals had experience in working with children, the fact that they realized after the program (their own) behaviors which were violating children's bodily autonomy emerged as a positive impact. 56.3% of professionals indicated that they realized with the impact of the program that they had behaviors that violated children's bodily autonomy.

When I was patting a child, or in any circumstance, I would not have paid much attention in the past. But now, I always think about whether the child is saying no to me in any way. Not only when I am the one patting, but even when others are patting a child when I am there, I instinctively start to observe the child. I noticed this. This was not always the case but now I always observe with this perspective, to see if the child is trying to say no in any way. There may have even been times when I noticed and stopped. This was the most important change for me.

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I realized that there were a lot of things I did, without noticing, like sharing my niece or nephews' photos, or other things. Many things mentioned in the workshop were what I was doing. They are things that look simple, but I realized I did not do things I needed to do in order to recognize children's bodily autonomy in daily life. In that sense, this was very beneficial for my awareness. The interviews and the questionnaire have demonstrated that these inquiries have led to the professionals developing new attitudes around children's bodily autonomy in their personal lives. Professionals, who explained the behavior of their close circles to touch children, generally with cultural norms, stated that they have developed new mechanisms to contact their close circles in this regard. However, many professionals have also added the difficulty -or even impossibility- of intervening when it comes to their own family members.

We live close to my mom's. And this is where they stand: They want to kiss and smell. Touch is very important in our culture. I actually think it is beneficial. Touch is not detrimental when certain permissions and consent are received. I am not saying we do not need to hug. I think communicating via touch is very important. But I argue that this can be done with certain rituals and consent. We were already sensitive around the issue but remembering the importance of it with this program was helpful. We updated ourselves with the workshop.

3. Impact Observed at the Professional Level

After looking at the impact at the personal level, the second step was to investigate the impact of the program on the professional lives of the professionals. Firstly, it can be said that professionals became better at identifying the steps to take in preventing child sexual abuse. On the other hand, it was also observed that they were strengthened professionally in terms of knowing how children become more susceptible to sexual abuse and negligence and what the responsibilities of adults are. Additionally, acquainting new conceptual information and increased conceptual awareness has had a positive impact on the professionals' professional lives. It is understood that the professionals were able to develop interventions more confidently after learning about the concept of "consent" and different types of sexual abuse.

3.1. Learning and Using New Concepts Related to the Field

One of the most obvious positive effects of the Children's Bodily Autonomy Dissemination Program is the increase in the capacity of professionals in terms of concepts related to the field. This research has shown that professionals could associate sexual abuse with the concepts from the field, which they learned through the program. Firstly, they stopped using the word "pervert" when talking about someone who has committed sexual abuse, and they were introduced to the legal term "perpetrator" instead.

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For me, saying 'pervert' to someone who is committing sexual violence or is negligent... Like, if I heard something, if someone told me such a thing, I would immediately use the word 'pervert'. But it benefited me to learn and use legal terms such as 'perpetrator'. This definitely is a benefit. Saying 'perpetrator' and starting to use legal terminology instead of saying 'pervert' or 'monster' was one of the things I learned. I noticed I stopped using these words.

Additionally, it was observed that some of the professionals did not know the word "vulva", which is a word related to genitalia, and that other professionals have heard the word but did not know which area it referred to. Understanding the use of the word "vulva" had an impact on strengthening the bodily awareness of the participants.

This was the most striking part for me. I learned myself at age 34. I did not know the term 'vulva'. This is really sad. The people who attended the dissemination seminars we gave did not know either. They were also surprised. Let me put it that way.

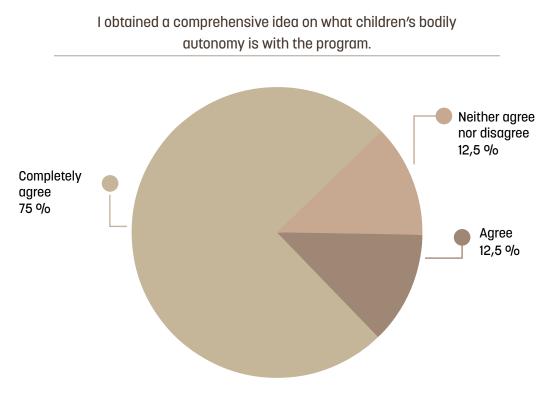
It can be said that the professionals who made the connection between these terms and sexual abuse had an increased intervention capacity in the field. The conceptual information they gained cemented the steps to follow in preventing child sexual abuse and developed their protective-preventive approach.

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Saying that children are subjected to less sexual harassment when we name sex organs as what they are. I think this affects everyone significantly. Because this was not something we knew. I remember, we do not have sexual health education in our schools, or it is given to us ashamedly.

3.2. Recognizing How Concepts Related to Bodily Autonomy Apply to Children

Based on the social impact research data, it has been observed that experts with academic and professional experience with children have become more equipped in terms relating to children's bodily autonomy. One of the factors contributing to this awareness could be because it was dealt with from the legal dimension. It is believed that the program had a positive impact on the knowledge of experts who do not come from the legal field about children's bodily autonomy, the legal bases of this autonomy, and the legal steps that should be taken in cases of abuse.



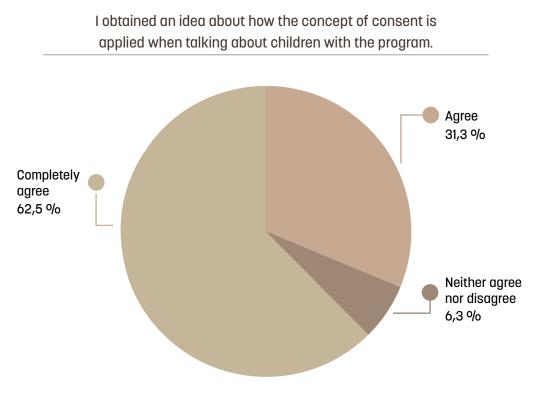
Graph 3: Awareness of Children's Bodily Autonomy

87.5% of participating professionals said they obtained a comprehensive idea on children's bodily autonomy with the impact of the program. There are no professionals who said they did not increase any awareness on this topic after the program.

My master's thesis was on trauma and I was interested in abuse, but... Well, I was giving seminars on abuse, but it was often limited to sexual violence. And when you say abuse in Turkey, I think sexual violence mostly comes to mind. The abused, abuser, sexual abuse, and all the images on media were on this and this was what I was working on. Children's bodily autonomy is a new concept I learned here, and what children's bodily autonomy is a part of but is not limited to.

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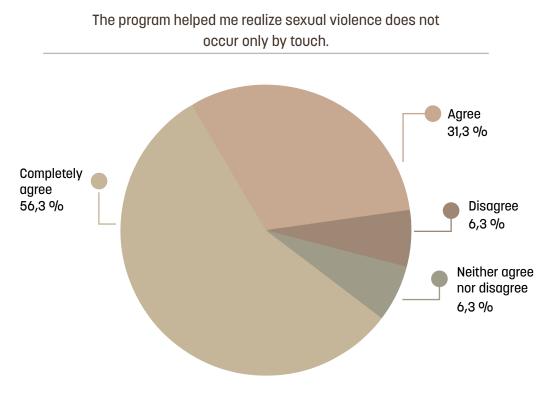
There were changes in my approach to children or things I never questioned before. For example, when 'Being circumcised is equal to genital mutilation' was said, I thought 'That is true. We do not actually have this right over children'.



Graph 4: Having an idea about consent for children

Professionals learned how the concept of consent is applied when it comes to children, with the impact of the CBA Dissemination Program. Realizing the importance of consent is important in their professional lives in the context of preventing bodily autonomy violations. The ratio of professionals who said they learned how the concept of consent applies to children was 93.8%.

I already said that I noticed I was doing some things unintentionally. I am finding myself to be -a little- more attentive to things I thought were very simple. For example, I get permission from them before posting a picture of my nephew. I even try not to share if possible.



Graph 5: Awareness of Types of Sexual Violence

One of the main goals of the program is to change the myth that sexual abuse occurs only through touch. Looking at the questionnaire results in this context, we see that 87.6% of participants raised awareness of the psychological, economical, and sexual dimensions of sexual abuse.

... [society] was doing so many despotic things to children outside of my awareness, the institution I work at to begin with, social media posts of children from those Instagram moms. Those cute, pretty, blonde children with blue eyes used by firms, just like those fit women. In reality, there is no one type of beautiful child or ugly child.

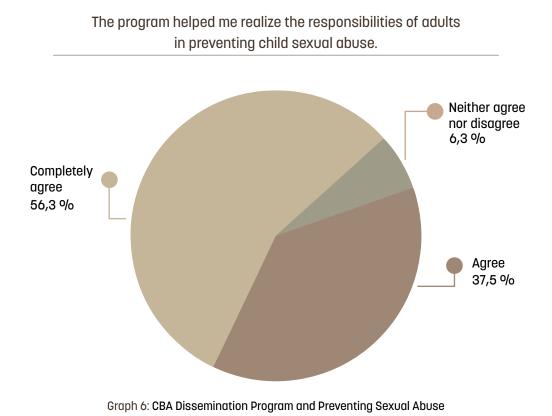
An important indicator that professionals were strengthened on how concepts about consent and bodily autonomy become operational for children was that they began new studies on their own initiative. An important example of this is the book "Ask Me" prepared by a professional who participated in the program in 2019. The main message of seeing children as individuals and respecting their bodily boundaries in the book highly relates to the goals of the dissemination program. Additionally, the fact that the journey of children becoming individuals is told through the lens of a child is significant in terms of solidifying the key concepts of the program "consent for children" and "bodily boundaries". 99

"I also wrote a book, a children's book, and an illustrated children's book on children's bodily autonomy. Nowadays, the field I work most in is children's bodily autonomy. The editor said 'You should write something on this'. And I scribbled something while I was questioning if I could do it, if it was my place, this or that, and they happened to like it."

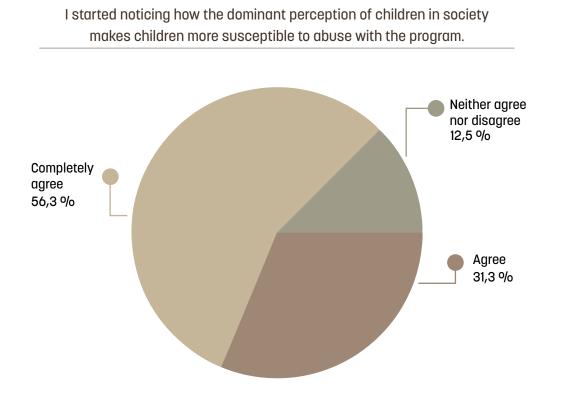


Image 4: Ask Me Book Cover Image Text: ÖZGE ÖZTÜRK BİRDAL / ASK ME / Illustrated by: Emel Alp Sarı / Altın Books

3.3. Questioning How Bodily Autonomy is Handled in Adult Perception/Approach



The increased awareness of adults' responsibilities in preventing sexual abuse in experts who attended the program also strengthens them professionally. An occupational expert who is aware of adults' responsibilities around children's neglect, abuse, and rights violations will practice their profession in a way that produces and uphold protective-preventive policies. In this context, with a ratio of 93.8% percent, almost all of the professionals said they realized the responsibilities of adults. There were no professionals who answered this question of the social impact questionnaire negatively.



Graph 7: Noticing the Relationship Between the Dominant Perception of Children in the Society and Abuse

Professionals who attended the Children's Bodily Autonomy Dissemination Program were asked about how the dominant perception of children in society makes children more susceptible to abuse. 87.6% of the participants said they started noticing how the dominant perception of children in society makes children more susceptible to abuse with the impact of the workshops. When looking at the results, we see that no professionals gave a negative answer to this question. 99

Some research findings were shared that I did not know about. I gained information on preventing sexual abuse through them. For example, I can cite some research and results. I am overall more knowledgeable on societal structures in terms of equality and received many tips on how we can provide it to children, or how we should teach.

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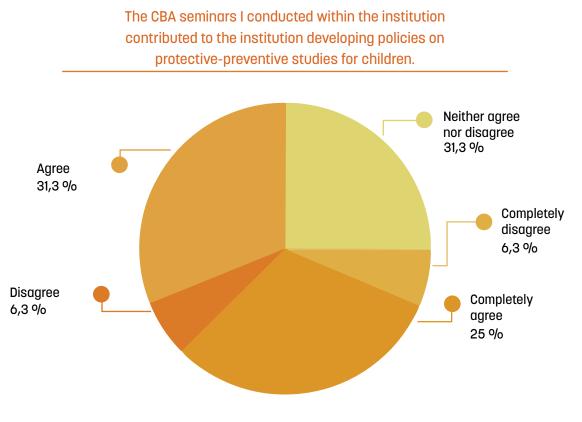
Based on the main theme, I can say that yes, we are all valuable individuals, and children are valuable too. I was already a child developmental specialist and have worked with children for years. But I learned even more about children having bodily autonomy and protecting themselves. I saw again how this topic can be very serious indeed with this training. That we should not focus on gender or do not differentiate girls too much, for equality. Because in our cultures we tend to have this distinction. Sometimes as a human being, but also with this program, I am more careful now. Especially in terms of sharing children's pictures on social media.

Impact Observed at the Institutional Level

In this section in which we evaluate the impact of the Children's Bodily Autonomy Dissemination Program, the aim is to understand the change that emerged in the institutions. With the impact of the dissemination to professionals, changes emerged in institution policies, and an increase was seen in the interest of occupational experts who did not attend the dissemination of this topic. This bi-directional change turned into a factor that helped maintain the sustainability of the information and awareness around children's bodily autonomy within institutions. At this point, it is possible to say that terms and approaches to children's bodily autonomy began to settle into institutional climates.

4.1. Establishment of Children's Bodily Autonomy Agenda at Institutions

In the social impact questionnaire, professionals who attended the program were asked if the in-house seminars they conducted helped the institution develop protective-preventive policies towards children. 56.3% of the professionals indicated a change for the better in this regard.



Graph 8: The Impact of the Program on the Institution Developing Protective-Preventive Policies

Collaborating with institutions that have a high capacity for dissemination, such as municipalities, is key for the program messages to reach different sectors of society. Institutions have great impact power by including the CBA seminars in the yearly program of relevant units and the CBA messages in their campaigns. It can be argued that through collaborations with municipalities, the main messages of the dissemination program have gained visibility and prevalence.

In this context, the attendance of occupational experts and unit supervisors working at the İstanbul Family Consultancy and Education Centers (İSADEM) of the İstanbul Metropolitan Municipality to the dissemination workshops is an important development. These centers have a high reach to people of every age who reside in their district. As such, they were impactful in the messages of the Children's Bodily Autonomy Dissemination Program reaching different sectors of the population.

Another significant example is the Struggle Against Abuse Commission formed within the Şişli Counseling Research Center. This commission includes founding members and members who attended the dissemination workshops and have conducted child workshops.

Afterward, we formed this Struggle Against Abuse Commission at the Şişli Counseling Research Center, just a few months before the pandemic. They included me in it. Because we were educated on the issue, they took me and other counselors who got training on bodily autonomy and we prepared a child workshop together.

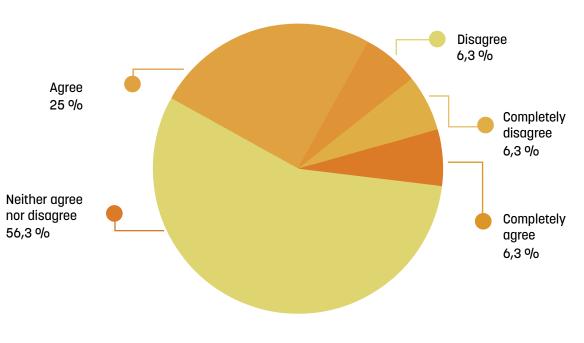
A final example of the power of municipalities to get across messages on children's bodily autonomy to large audiences, and publicize these messages is the joint social media and billboard campaign done in 2021. On the 23rd of April (National Sovereignty and Children's Day) 2021, Kadıköy, Sarıyer, Şişli, Ataşehir, and Avcılar Municipalities ran a billboard campaign together with the organization which focused on children's bodily autonomy. As part of this campaign, joint posters and messages were shared across certain billboards and social media accounts of the district municipalities.



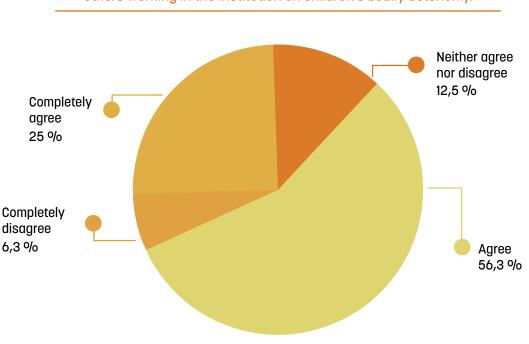
Image 5: Mutual Billboard Campaign Poster

Image Text: Children have a right to consent, choice, integrity, saying no, curiosity, asking questions, getting respect, gender expression, access to correct information, bodily autonomy, safety, exploration, participation, privacy

The in-house CBA seminars I conducted helped others working in the institution begin to attend projects/workshops/activities on protective-preventive approach to children.



Grafik 9: Impact of the Program on their Colleague Professionals in the Institution



The in-house CBA seminars I conducted increased the interest/awareness of others working in the institution on children's bodily autonomy.

Grafik 10: Impact of the Program on their Colleague Professionals in the Institution

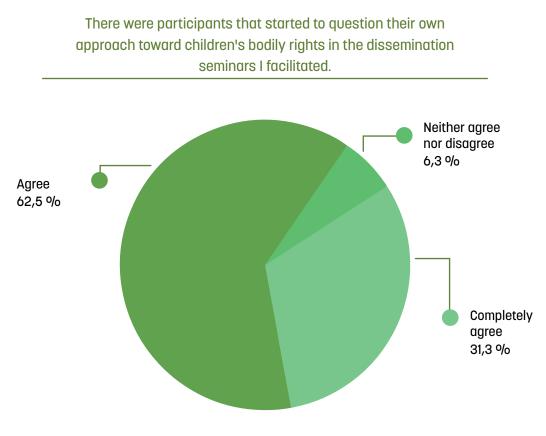
Another indicator that the program makes an impact at the institutional level is that employees who did not attend the dissemination workshop also showed increased interest in the topic. 31.3% of occupational experts who conducted dissemination seminars said their coworkers have attended different projects/workshops/activities on this topic. Moreover, the ratio of experts who reported an increased interest in children's bodily autonomy in their coworkers was 81.3%.

In this context, one good practice example is seen in İstanbul Metropolitan Municipality, in which those who attended the dissemination workshop supported other colleagues to become facilitators as well, by giving them more short-term, in-house workshops. This initiative, being an important indicator that this topic is handled with care, has also increased the number of facilitators within the institution.

People who attended the workshop were those with high rotation, like unit supervisors who would go on to different assignments. When the participant list was being created, it was believed that because unit supervisors could give 'training' in the field, their attendance would be most beneficial. For this reason, one person attended this facilitator workshop per unit, as the aim was to disseminate.

The Impact of Dissemination Seminars on Participants

In this research evaluating the impact of the program, the change in participants of the dissemination seminars was understood through the observations and experiences of the professionals.



Graph 11: Children's Bodily Autonomy Awareness in the Participants

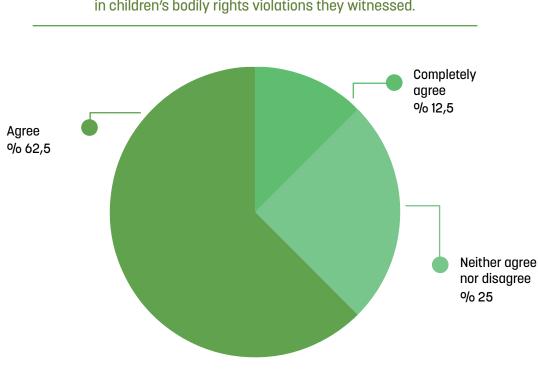
Professionals partaking in the program were asked about the impact they observed on the participants during the dissemination seminars. 93.8% of the professionals observed that participants started questioning their own approach toward children's bodily rights during the dissemination seminars. There were zero negative responses from the professionals on this topic.

(99)

The thing is, I think how you enter the subject and not being in a very large crowd is effective. It creates a more intimate setting, they feel more secure. When we say we are going to talk about a topic that is not often talked about but is in our lives, they realize it is in their lives too. And when we talk about concepts that are usually glossed over or talk about issues that touch their lives I feel it in their mimics, expressions, and looks: They feel themselves, their own experiences, and relate them to us through these. They thank us for touching on these topics when we are leaving. We receive feedback such as 'It's very good that you are doing this project'. That always makes us feel good.

To be honest I talked to people from every gender. Every education level. Every age group. Many groups over 18. People in their 50s, 40s, 30s, 20s. I received positive feedback from most of them. I understood that we should be talking even more about this, and we should relay this to the public. Initially, we were thinking that we would face backlash but society -or the participants I should say- had a positive reaction. They said they agreed with and internalized the information we shared.

The feedback was quite good. We received feedback such as 'We did not know', 'Turns out it was actually this way', 'So, it is better if we do it like this' and so on. I observed that even outside of this training, the awareness level is slowly increasing in the public. Asking for permission from kids to kiss them -even when their mothers are there. Even that was something that families started to learn and internalize in terms of getting permission and consent. This is pleasing. Of course, I am not as knowledgeable as my friends who facilitated a lot of these seminars.



The CBA seminars I conducted helped the participants intervene in children's bodily rights violations they witnessed.

Graph 12: Participants' Intervention to Violations of Children's' Bodily Rights

75% of professionals observing the impact of the dissemination seminars indicated that the participants began intervening in violations of children's bodily rights they witnessed. The rest gave an indecisive response on the topic. There were no professionals who said there was no impact on this topic.

And the 'Don't stay silent' part, that part comes a little more towards the end. After about 45 minutes to an hour, that part comes, and you feel like the crowd unites, the participants unite around that topic. Before saying yes, we should make noise, we talk about the myth 'What will people say'. We talk about that myth and with the making noise part, that myth can be shattered a little. This is also a positive outcome. I generally received positive feedback from the participants. Were there people who opposed it? Yes of course, but you could count them on the fingers of one hand. So, I can say I received positive feedback 99% of the time.



I learned concepts around bodily autonomy. This enlightened me. That enlightened me. I asked what they got out of this training and one woman (participant) said 'I found this training very beneficial and I noticed that we learn to protect our children from abuse, from pain. Even from the media. And this is what we practice in our daily lives. Like we never create the abuser. From this training I learned that we create the abusers, they do not fall down from the sky. And this training taught me about creating abusers.' This was very important to me. I thought they were right. We always try to protect ourselves and our children like the abusers fall down from the sky. So that anecdote from the participant was very meaningful to me. It made me realize why I like this training.

5.1. Resistance Observed in the Participants as an Impact Indicator

From time to time, different responses were observed to the dissemination seminars, due to differences in the participant profile. Experts participating in this research called these differences cultural differences. These types of differences have uncovered various resistances.

So, I work at Zeytinburnu and the homes are crowded there. Mother-in-law, father-in-law, mom, dad, uncle, niece, everyone. I have not given this training in 7 months, so it has been a while but from what I remember I did receive some feedback. The feedback was 'I am living with my in-laws and I am uncomfortable about them kissing my children all the time. I see it. I respect my child and my child's body, but they pick my kid up, kiss them, love them, squeeze them and I can't say anything. Because culture comes into play. If they can get past culture, the spouse factor comes into play. If they say something negative to my in-laws, all hell will break loose. This is why I can't put things in order'. The feedback I received was of this sort.



Sometimes this was said about resistance: We go to bairam celebrations and a kid goes around and kisses everyone and celebrates their bairam. Another parent says 'What a sociable child. Mine does not do this'. Some put pressure on the kid. Not pressure maybe, but they question why their kid does not kiss, why their kid is like that, and why their kid is asocial and withdrawing into a corner. Some said they realized they were putting pressure on their kid. Others still find it normal. They say we are making a big deal, that they should just kiss. Or that they would be pleased if their kid kissed their uncles and granddads on bairam. Some said they got it. Some said we were making a big deal. 'This is not autonomy,' said some of the participants with resistance. Or some said we were being paranoid about social media, that they were just sharing good moments with their kids. I felt resistance there.

People showed resistance about not calling children 'my love, my princess'. Some just thought it. Some said it out loud. This comes back to what I said earlier as these are all parts of a whole. Because we can't give the entirety in one hour, we give them the most striking parts. Maybe what we are trying to explain doesn't always come across. I don't know.

Children and consent when it comes to kissing. They'll kiss their kids. They'll give them a smack. At that point, there was some resistance. I felt they were saying we were going too far. Like 'You are telling me this, but I am still going to do it'. Or one day this happened: We were talking about not changing children in public spaces. After the training, their kid was sweaty, and the mom just took off their clothes in front of everyone. Like, what were we talking about just five minutes ago? Whom was I telling? After that, I questioned if I was unable to do this job.

While the resistance around some topics in the dissemination seminars may be seen as a negative impact, the interviews indicate that an interest in and inquiry about this topic has emerged.

That love behaviors, the ones that are wrong, they are very common. Relatives loving your child, trying to kiss them, and the child being labeled fussy because they didn't let the relatives kiss. That's not fussiness. We told the participants not to be insistent. A parent interrupted and said, 'I teach my kids 'special areas' already'. That is very dangerous. The entirety, the existence of the child, these are all special. But when we limit to 'special areas', the child will not be able to differentiate between safe and unsafe behaviors. The parent stopped and thought about this.



There are people who say 'I also don't like it. The grandmothers keep kissing'. I'm also uncomfortable with it. I don't want it to happen, but I don't know how to say it. If I say something, it will be misunderstood or seen as rude. As Mr. Yücel said, it is not possible to impact lives in one minute. But as Mr. Emre said, we also see some signs of change. I had many experiences like that.

In moments where the occupational experts are met with resistance, they needed to feel more equipped and that the comprehensive resources the Association shared with them supported them in dealing with this resistance.



The part I found difficult was the circumcision topic. Both the participants and I tightened up. My audience was well-educated people, but I wonder how it would be taken if it was a different audience. Was I strong enough to defend myself? I had this worry.



We can also use the information we learned [at the dissemination seminars]. That made me feel comfortable. I can lean my back against the training given by the association. That information relaxes our participants too. They talk about moments they find difficult in life, like the names of sex organs. We tell them to teach the anatomically correct names to their children. And they say 'Yes, these scientific terms can make it easier'. It was nice to remind them that families should use scientific information when teaching their children.

Results

The findings of this impact research focusing on the Children's Bodily Autonomy Dissemination Program between 2019 and 2021 provided an opportunity to reach some conclusions and suggestions for bettering the program. The results and suggestions are shared below:

• Firstly, a positive change is seen in the personal lives of experts who attended the dissemination workshops. The change in their approach to children around them is followed by the change in their attitude toward the relationships with those children. With increased self-awareness due to the program, the professionals have started thinking more about how they violate children's autonomy and develop new attitudes and behaviors in this direction.

• Professionals who started gaining awareness around children's bodily boundaries and autonomy have started making associations between society's perception of children and children's bodily boundaries as well as children's bodily boundaries and abuse. This associative thinking has made them stronger professionally.

• The association between terms and concepts relating to children's bodily autonomy and abuse is another change observed prominently. The workshops have made the professionals more equipped to talk about sex organ names such as "vulva" and taboo topics such as "circumcision". As such, an important step was taken for the association of these terms with child sexual abuse. Moreover, the professionals gained significant awareness about their own bodies, especially about the correct use of the term "vulva".

• Professionals who attended the dissemination workshops noticed the other topics in this field they need to improve in. They noticed they needed additional information on the legal steps to be taken in cases of abuse, and more detailed information on child development stages, in addition to the workshop topics.

• Another impact area of the program is observed at the institutional level. Children's bodily autonomy being included in institutional agendas and seminar programs, and the messages of the dissemination program being spread and more visible through campaigns is observed as a significant impact.

• Additionally, the interest in and curiosity around children's bodily autonomy in the institutions have increased due to dissemination seminars, which has led to other employees taking action and improving themselves on this issue.

• The impact of the dissemination seminars led by the professionals on the participants has been interpreted through the facilitating professionals.

• The most significant outcome observed in the dissemination was an improved awareness of children's bodily autonomy and capacity in intervening in bodily violations of children.

• Additionally, resistance has come to light in the participants around topics that potentially contradict societal norms, like in the circumcision example. Occupational experts point out that this is a positive indicator, as these resistances trigger a questioning of these norms.

• Finally, a high interest in continuing to be a part of the Children's Bodily Autonomy Dissemination Program is observed in the occupational experts, whether or not they were able to conduct dissemination seminars. One of the main reasons is that these experts have always felt the full support of the Association. As such, the strong connections they formed with the Association have kept this motivation alive. In short, it can be said that the level of adopting the Association and the Dissemination Workshops among professionals is quite high.

Suggestions

The results uncovered by the impact analysis of the Children's Bodily Autonomy Dissemination Program have allowed for the development of some suggestions. At this point, the suggestions developed after the independent research process are listed below:

• It is believed that occupational experts make an impact both as employers of their institutions and as independent facilitators for the Association. As such, creating a facilitator platform should be considered. As such, their strong bond with the Association can be made more permanent. Difficulties in facilitating were seen in the experts due to changing jobs or workloads. On the other hand, it is true that their motivation to continue as a part of the program is strong. Convening willing experts in a single medium will increase their motivation and feeling of belonging to the program further and make facilitating dissemination seminars easier for them.

• Professionals who conducted the dissemination have often mentioned the supportive impact of the resources and materials shared by the program. They also point out the importance of updating these resources and sharing with them continuously throughout the process. For this reason, sharing resources can be done in given intervals, containing updated versions of the resources. This will help the professionals to be carriers of current information in this field, while also keeping their motivation alive.

• Including judicial workers and child psychologists in the Dissemination Workshop or the following supervision meetings is seen as a supporting factor by the professionals. Making these attempts more systemic will not only increase the interest of professionals in the topic but will also enhance their knowledge and awareness levels.

• It is important to routinely investigate the impact of the seminars by giving question forms, in addition to expert opinions and observations. This will allow for a more realistic picture of the impact on the participants.

• As the effect of the pandemic is decreasing, a face-to-face meeting gathering professionals who attended the dissemination workshops will be beneficial to refresh their information and energize them to conduct seminars.

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With this Children's Bodily Autonomy Dissemination Program Impact Assessment Report you are reading, we first hoped to strengthen children's studies in Turkey with a rights-based approach. With this report, we hope to help create personal and societal awareness on preventing child abuse, spread the topic of children's bodily autonomy, occupational experts and institutions to develop protective-preventive policies and make them permanent.

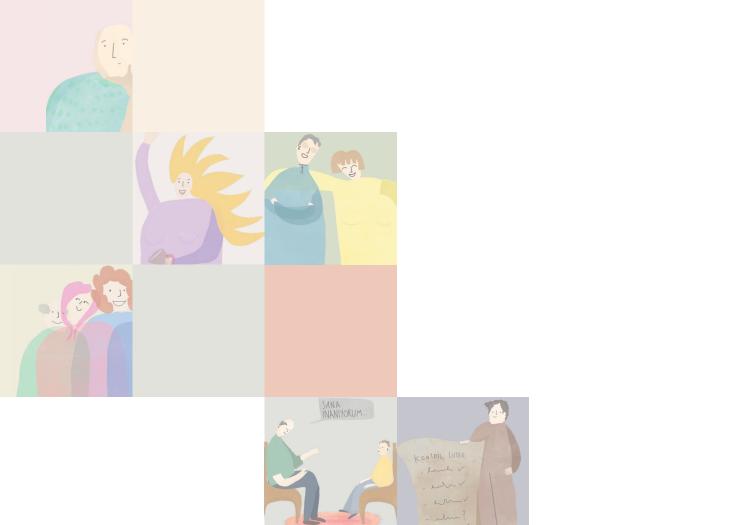
Appendix

1- Evaluation Survey

https://docs.google.com/forms/d/e/1FAIpQLSdV8J6oz77RXUXboCrMk1TCcOj_ptGMjd2LNbRpQw3EvCMNSg/viewform

2- Questions for One-on-One and Focus Group Interviews

https://docs.google.com/document/d/1WetVZMg9mqB70U03XRK3zJEQ2R3QfixMxIqjT9jhPYE/edit?usp=sharing







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