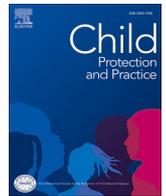




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# Child Protection and Practice

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## Protocol for a mixed-methods effectiveness evaluation of the community-led child protection approach (*Seeds*) in La Guajira, Colombia

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## ABSTRACT

**Background:** Globally, an estimated one billion children experience violence every year. The prevalence of violence is anticipated to be higher in low-and middle-income countries and particularly in humanitarian contexts. Colombia faces a protracted humanitarian crisis. It is affected by long-lasting internal conflict, high levels of community violence, the climate crisis, and migration due to the political crisis in Venezuela.

**Objective:** The aim of this mixed-methods study is to evaluate the effectiveness of a community-led child protection approach (*Seeds*) in La Guajira, Colombia.

**Participants and setting:** The study will be conducted in eight communities, randomly allocated to the intervention and control arms. Data will be collected from children and adults involved in *Seeds* activities, children targeted by community action, and natural helpers. The study will be conducted in La Guajira, a department in northern Colombia, with close proximity to the Venezuelan border and a history of armed conflict.

**Methods:** The study will follow a convergent parallel mixed-methods design in which quantitative and qualitative data are collected in parallel, analyzed separately, and then merged for interpretation. The quantitative arm of the study will follow a matched-control quasi-experimental design using a waitlist control. Qualitative data will be collected using semi-structured interviews, focus group discussions, and participant observation.

**Conclusion:** The results of the study will help address the lack of rigorous evidence on approaches to prevent violence against children, broaden understanding of changes driven by community-led child protection approaches, and offer an example of how to overcome challenges in evaluating community-led and prevention approaches.

## 1. Introduction

### 1.1. Violence against children

Globally, it is estimated that over one billion children, which is more than half of all children between 2 and 17 years, experience emotional, sexual, or physical violence every year (Hillis et al., 2016; World Health Organization, 2020b). Additionally, six in ten children under the of five

regularly experience physical punishment and/or psychological violence, and 90 million children currently alive have experienced sexual violence at some point in their lives (UNICEF, 2024; World Health Organization, 2020b, 2024a). Violence impacts children on an individual level, but it also impacts the close relationships children have with caregivers, families, and peers; it affects the community level, and it damages the fabric of society (World Health Organization, 2016, 2024b). The prevalence of violence is anticipated to be higher in

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Low-and Middle-Income Countries (LMIC) and particularly in humanitarian contexts, including natural and human-made disasters, where violence against children escalates with new risks arising and pre-existing protection mechanisms weakening (Machel, 1996; Rubenstein & Stark, 2017; Norman et al., 2012; Pinheiro, 2006; UNICEF, 2024; World Health Organization, 2024a).

Colombia faces a protracted humanitarian crisis, with a long-lasting internal armed conflict (ICRC, 2024b). Additionally, the country has been seriously affected by the climate crisis and the political crisis in Venezuela (ICRC, 2024a). The armed conflict has grown increasingly complicated due to the rise of organized crime and drug trafficking (Government of Colombia, 2019). Over the last few decades, numerous security, social, and political initiatives have aimed to address the internal conflict and limit the growth of organized crime. However, Colombia still faces persistently high levels of community violence due to organized crime, active guerrilla groups, paramilitary activity, and narcotics trafficking (Government of Colombia, 2019). In 2018, Colombia conducted the Violence Against Children and Youth Survey (VACS) to estimate the prevalence of different forms of violence affecting children and youth. Results demonstrated the complexity and multifaceted nature of the experiences of children and youth (Government of Colombia, 2019). Approximately, two out of five girls (40.8 %) and boys (42.1 %) have experienced physical, psychological, or sexual violence during their childhood. Half of the survivors of sexual violence did not tell anyone about their experience. Approximately one out of three girls (30.5 %) had been pregnant before the age of 18, and one in four (28.8 %) was married before the age of 18. Experiencing violence in childhood was strongly linked to committing acts of violence in later life, showing a transgenerational cycle of violence in families and communities (Government of Colombia, 2019). The Coalition Against the Involvement of Children and Young People in the Armed Conflict in Colombia reported a 33.9 % increase in armed conflict-related events affecting children in 2023 compared to 2022 (COALICO, 2024). Moreover, the number of children and youth in need of humanitarian child protection assistance continues to increase, with two million at the end of 2024 (OCHA, 2024).

## 1.2. Community-led child protection

Because of the ethical responsibility to prevent harm before it occurs, improve sustainability and the long-term impact of action, and increase cost-effectiveness, humanitarian and development actors have gradually focused more on the prevention of violence alongside responding to the needs of children who have experienced harm (The Alliance for Child Protection in Humanitarian Action, 2021b; Falconer et al., 2021). Local and national actors have increasingly led development and humanitarian action, activated by the global localization agenda (Barakat & Milton, 2020). However, little attention has been paid to the crucial role of communities in preventing risks that affect children (Kostelny et al., 2020). Yet, community-led action occurs before other actors arrive. Due to its proximity, the community is well-placed to support children facing risks. Community-led action tends to be highly acceptable in the community, results in action that is culturally appropriate and low cost, increases sustainability, and is more likely to reach large groups of children (Ellermeijer et al., 2023; Wessells, 2009).

In recent years, evidence regarding violence against children has grown. Violence Against Children Surveys (VACS) have been conducted in over 25 countries to measure how much and how often sexual, physical, and emotional violence occurs (Chiang et al., 2016; Together for Girls, 2024). The INSPIRE framework shares seven evidence-based strategies to prevent and respond to violence against children (World Health Organization, 2016), and in November 2024, the first global ministerial conference on violence against children was organized in Bogotá, which saw governments and organizations making pledges to take transformative action to end violence (Global Ministerial Conference on Violence Against Children, 2024). Despite recent years' work on

the topic, a need remains to develop rigorous evidence of interventions that prevent and respond to violence against children in LMIC, and more specifically, in humanitarian settings (Pundir et al., 2020; United Nations Children's Fund, 2014). Furthermore, there is limited evidence on effective methods that shift decision-making and implementation power to communities. There is also a lack of research on approaches that facilitate a process whereby communities take a leading role in prioritizing, planning, and implementing child protection actions, specifically in humanitarian action (Ellermeijer et al., 2023; Wessells, 2009).

In response to the above-mentioned gaps in attention and evidence, a community-led child protection approach was developed: *Seeds* (Ellermeijer et al. under review). *Seeds* draws on WHO's community engagement framework that ranges from a community-oriented, community-based, community-managed, to a community-owned approach, with *Seeds* representing a community-owned approach where local resources are mobilized, and the community sets priorities and implements actions (World Health Organization, 2020a). The approach builds on intrinsic motivation and existing processes in the community to keep children safe. Implementing agencies play a facilitation role while community members collectively identify which child protection concerns to address, determine how to take action using available strengths and resources, and monitor and evaluate their actions.

A mixed-methods study was conducted in Colombia (2021–2022) to assess the feasibility of the *Seeds* approach and the study procedures (Ellermeijer et al. under review). Quantitative results showed an indication of change on a number of outcomes, but not on all, possibly due to the small sample size, the use of standardized tools that measure broad child protection concepts while communities address very specific risks in action plans, and the short implementation timeframe. Qualitative findings were promising: there was an indication of positive change in the attitude of women leaders regarding child protection, the awareness of community members regarding protective factors, the trust built between various community groups, and the agency of community members involved in the approach, most specifically amongst youth.

## 1.3. Study aim and research questions

The aim of the current mixed-methods study is to evaluate the effectiveness of *Seeds* in La Guajira, Colombia.

Following the guidance of Creswell and Plano Clark (2018), we are presenting the following quantitative, qualitative and mixed-method research questions to guide the study:

1. What is the effect of *Seeds* on (a) improving the protection of children from violence, abuse, neglect, and exploitation in their community; and (b) increasing children's sense of protection in their community?
2. What changes can be observed in the community during and after the implementation of *Seeds*?
3. How does the *Seeds* process enhance the protection of children in the community?

## 2. Methods

### 2.1. Design

The study will follow a convergent parallel mixed-methods design in which quantitative and qualitative data are collected in parallel, the two data sets analyzed separately, and the two results merged for interpretation. The intention of the convergent design is "to obtain different but complementary data on the same topic (Morse, 1991, p. 122), to allow for triangulation, and to expand the breadth of information" (Creswell & Plano Clark, 2018, p. 68).

The quantitative arm of the study will follow a matched-control quasi-experimental design using a waitlist control. Data will be collected, using standardized questionnaires at baseline, endline (at the end of the *Seeds* implementation) and follow-up (six months post

endline). The aim of the quantitative arm of the study is to evaluate the effect of *Seeds* on two primary outcomes: (a) improving the protection of children from violence, abuse, neglect, and exploitation in their community; and (b) increasing children's sense of protection in their community. Quantitative data will also be collected to assess perceived outcomes of *Seeds*, attitudes on child protection, and community ownership.

Qualitative data will be collected using semi-structured interviews and Focus Group Discussions (FGD) at baseline, endline and follow-up and using participant observation during the nine-month period of *Seeds* implementation. The aim of the qualitative arm of the study is to evaluate *Seeds* on the same primary outcomes as described under the quantitative study arm, by collecting data on the same constructs measured by the quantitative tools. Additionally, qualitative data will be used to explore change in the community during and after the implementation of *Seeds*, attitudes on child protection, and community ownership.

## 2.2. Setting

La Guajira is a department in northern Colombia with close proximity to the Venezuelan border, with a history of armed conflict and a geographical location making it vulnerable to the effect of climate change (OCHA, 2024). Historically, La Guajira has had an active presence of armed groups. At the moment, a territorial dispute between at least three armed groups has led to an increase in the recruitment of children and youth (Ombudsman Office, 2023). Due to the political and socioeconomic crisis in Venezuela, refugees, migrants, Colombian returnees, and members of transborder indigenous communities (Wayuu) irregularly enter Colombia. At the moment, at least 162,389 Venezuelan migrants live in La Guajira (Ministerio de Relaciones Exteriores, 2024). The number of unaccompanied children and youth migrating themselves has increased, and there is a growing risk of recruitment and use of Wayuu indigenous children and youth by organized armed groups (OCHA, 2024).

## 2.3. Intervention

*Seeds* is implemented of six phases across nine months: (1) community entry and building trust between the community and implementing agency, resulting in a joint decision to collaborate; (2) collaborative learning about child harms and existing protective factors; (3) inclusive prioritization of harms and identification of actions to implement; (4) community-led implementation and reflection whether actions contribute to the protection of children; (5) community reflection on progress, changes, and possible adjustments to the action plan; (6) a joint decision on whether to continue collaboration or for the community to proceed independently (Ellermeijer et al. under review). Per phase, meetings are organized with various community groups, including children, women and other often marginalized groups.

See Table 1: Detailed description of *Seeds*

The *Seeds* phases are implemented by community facilitators, who are community members identified by the community and trained and supported by a community coach. Community coaches, who are members of local, national or international agencies, work alongside community facilitators to facilitate community action. Community members involved in *Seeds* are children and adults, as individuals or organized in networks. This also includes 'natural helpers', who play a role in the lives and protection of children in an informal way, and other community members with certain skills and recognition, who are motivated to protect children (Ellermeijer et al. under review. p.4).

The core characteristics of *Seeds* are: (a) it is primarily an approach aiming to prevent exposure of children to violence; (b) it aims to strengthen the protective environment for children in the community by using a strengths-based approach; (c) it is community-led, where the decision-making power is in the hands of the community rather than the

**Table 1**

Detailed description of *Seeds* (Ellermeijer et al. under review. p.20).

Phase 1: Community entry and building trust	This phase focuses on the preparatory work before starting <i>Seeds</i> in a community. After establishing initial contact and introducing <i>Seeds</i> to the community, mutual expectation, limitations, and boundaries for collaboration are discussed. This process is about building trust and reaching an initial decision to collaborate on a shared child protection interest.
Phase 2: Learning	This phase focuses on a process of collaborative learning by the community and the implementing agency. Inclusive methodologies are used to generate a wide range of perspectives and nuances on child harms and why they occur, as well as any local ways of protecting children, and any local resources or capacities that could be mobilized. Findings are discussed by the community for their reflection and validation.
Phase 3: Action planning	Based on the learning in phase 2, community facilitators, supported by a community coach, facilitate an inclusive community process during which harms to children are prioritized, and an action plan to address these is developed and validated.
Phase 4: Action plan implementation	A kick-off activity starts the implementation of the action plan, which is led by the community. Community facilitators follow up with the community on a regular basis to discuss how implementation is progressing, possible challenges, and whether the implemented action still contributes to the protection of children in the community.
Phase 5: Community reflection on progress and change	The community reflects on the progress of implementation of the action plan, potential adjustments, and any notable impacts on the lives of children.
Phase 6: Exit from the community	The implementing agency and the community decide together whether further collaboration and support is desired, or if the community feels confident in continuing without further support.

implementing organization: (d) implementing agencies use a facilitation approach, utilizing skills such as deep listening and empathy; (e) it often requires and leads to a shift of mindset for child protection practitioners used to more top-down ways of working; and (f) it aims to be inclusive, including focusing on the safe and meaningful participation of children while considering and balancing power dynamics in the community (Ellermeijer et al. under review. p.5-6).

## 2.4. Sampling

The study will be conducted in eight communities in the municipalities of Uribia, Riohacha and Maicao, located in the department of La Guajira in Colombia. The following six inclusion criteria will be applied prior to the start of the study to the total of the 3,128 communities in the abovementioned municipalities, which include migrant settlements and Wayuu indigenous communities: (i) a high level of multi-dimensional poverty; (ii) > 500 inhabitants, (iii) > 250 children and adolescents living in the community; (iv) recently (<1 year) impacted by natural disaster, armed conflict or human mobility; (v) communities with humanitarian access; (vi) indigenous authorities or relevant local civil society indicate that it is possible to access the communities. After the application of these criteria, a certain number of communities will remain eligible for inclusion in the study. Out of these eligible communities, 10 communities will be randomly selected. Eight of these 10 communities will be included in the study, the other two are reserve communities. These reserve communities will be included in the study in case a community does not want to participate in the study or when the decision is taken by the community and the external agency at the end of *Seeds* phase 1, not to collaborate on a shared child protection interest.

The decision to include eight communities in the study was taken based on the feasibility of the implementation of *Seeds*, i.e., the extensive time needed for implementation (nine months). The eight communities will be randomly allocated to the intervention and control arm of the study (1:1).

## 2.5. Control group

The study is employing a waitlist control as the comparison group. Waitlist communities will be invited to participate in *Seeds* shortly after the six-month follow-up assessment has been completed. The decision to use a waitlist control was primarily taken because of ethical considerations. Concerns about nocebo effects experienced by participants in waitlist control groups have been reported in medical treatment studies (Gold et al., 2017). It is unclear whether the same effects exist in prevention studies in the field of violence against children. In the feasibility study there was no indication of harm caused by the implementation of *Seeds* (Ellermeijer et al. under review). In case there is an indication of harm linked to *Seeds* implementation during the forthcoming study, or if no effects of *Seeds* are found as a result of the study, the waitlist communities will be offered another intervention aimed at the prevention of violence against children, relevant to the context. A War Child Alliance Research & Development adverse events reporting mechanism is in place and will be adapted for the study (see section 2.15).

## 2.6. Study participants

### 2.6.1. Quantitative study component

In eight communities, quantitative data will be collected from two groups of respondents: (i) those involved in *Seeds* activities (i.e., at prioritization of harm and the development of action plan), both children (13–18 years old) and adults, and (ii) those targeted by the action taken as a result of *Seeds* (i.e., assumed beneficiaries of the action that will be taken by the community instigated by *Seeds*). Due to the nature of the approach, where community members engage in a learning process (phase 2) and develop a plan of action based on prioritized risks (phase 3), the exact target group is only defined in the early phases of the intervention. Consequently, study participants can only be defined after phase 2 (those involved in *Seeds*) and after phase 3 (those targeted by community action), and baseline data collection for these groups will, therefore, only happen after these phases (i.e., baseline for those involved after phase 2; baseline for those targeted after phase 3). There may be an overlap between the group of children involved in *Seeds* and the group being targeted by community action. After identifying all children targeted by community action, the children already included in the study will be removed from the list before randomly selecting the sample of children targeted by community action.

### 2.6.2. Qualitative study components

In the same eight communities, qualitative data will be collected through semi-structured interviews with natural helpers (individuals who play an important role in the lives of children in an informal way) ( $n = 24$ ) because of their insight into the risks facing children and existing community protection mechanisms. An additional group of participants will be identified, using the same inclusion criteria as the quantitative sample: children involved in *Seeds* activities ( $n = 24$ ), adults involved in *Seeds* activities ( $n = 24$ ), and children targeted by the action taken as a result of *Seeds* ( $n = 24$ ). These participants will not be the same individuals included in the quantitative sample but will be identified from the same target group. Once participants for the quantitative research are recruited, a computer-generated random selection procedure will determine the order in which individuals are invited to participate in the qualitative portion of the study. The reason for including this sub-group is to increase the possibility of comparing quantitative and qualitative data on the same constructs in the same target group. In addition to interviews, we will also conduct FGDs with

children ( $n = 32$ ) and adults ( $n = 32$ ) in both intervention and control communities. The proposed sample sizes have been informed by a systematic review of empirical studies that assess saturation in qualitative research (Hennink & Kaiser, 2022). In addition to in-depth interviews and FGDs, participant observation will be conducted across the four intervention communities during a minimum of 40 activities related to *Seeds* and community gatherings to collect complementary data. Through participant observation, a deep understanding can be gained of topics such as community dynamics, ownership, and the protection situation of children. If saturation is not reached after the planned numbers, additional interviews, FGDs, and participant observation will be conducted. The total qualitative sample size will be smaller compared to the quantitative sample to allow for in-depth and rich data collection.

See Table 2: Participants

## 2.7. Inclusion and exclusion criteria

The following criteria have been used in the process to identify research participants. Inclusion criteria include: (i) being involved in *Seeds* activities (both adults and children); (ii) being targeted by community action as a result of *Seeds* (children); (iii) children aged 13–18 years old. Exclusion criteria include: unable to speak Spanish; unable, even with assistance, to complete the data collection process; and unwillingness to give informed consent and/or assent. Only one member per household will participate in the study.

## 2.8. Sample size calculation and selection

The sample size calculation was based on feasibility given the communities' population sizes, as well as recommendations from Brysbaert (2019) regarding power analysis. Specifically, we selected the primary analysis approach to reach sufficient power given the feasible sample sizes in the communities, in order to obtain reliable effect sizes. To detect a small effect of Cohen's  $d = .2$  with 80 % power using a paired samples  $t$ -test assessing changes from baseline to endline at a significance level of .05, the minimum sample size required is  $n = 199$  per treatment group. If an attrition rate of 10 % is taken into account, the required sample size is  $n = 222$  for each group of respondents (children involved in *Seeds*, children targeted by *Seeds* community action, and adults involved in *Seeds*), with same holding true for the control communities, making the total sample size  $n = 444$  for each group of respondents. This means that a total of 56 children involved in *Seeds*, 56 children targeted by community action, and 56 adults involved in *Seeds* will be randomly selected in each of the four intervention communities; the same number will be matched in each of the four control communities.

## 2.9. Randomization

Out of the full list of eligible communities, eight communities will be randomly selected, as described previously. These selected communities will then be randomly allocated to either the intervention or control arm (1:1). The sample of children involved in *Seeds* activities ( $n = 222$ ) and adults involved in *Seeds* activities ( $n = 222$ ) will be randomly selected from the total group of children and adults involved, and the sample of children targeted by community action ( $n = 222$ ) will be randomly selected from the total list of children targeted by community action. The same number will be matched in each of the four control communities. For the randomization process, a random number generator software will be used. The randomization process will be overseen by the lead statistician.

## 2.10. Recruitment

### 2.10.1. Access to communities

War Child has a local office in Riohacha, La Guajira, and has

**Table 2**  
Participants

		Children		Adults			
		<i>Children involved in Seeds</i>	<i>Children targeted by community action</i>	<i>Children not involved in Seeds/targeted by community action</i>	<i>Adults involved in Seeds</i>	<i>Natural helpers</i>	<i>Adults not involved in Seeds</i>
<b>Quantitative</b>	<i>Surveys</i>	n = 444	n = 444		n = 444		
<b>Qualitative</b>	<i>Semi-structured interviews</i>	n = 24	n = 24		n = 24	n = 24	
	<i>Focus group discussions</i>			n = 32			n = 32

implemented programs for humanitarian assistance, child protection, education and mental health and psychosocial support since 2019, making the organization well known in the area. War Child is a member of the Local Humanitarian Coordination Team and has worked closely with the local civil society and Indigenous Wayuu Ethnic Organizations. In order to access communities, we will take the following steps: (i) present the research process to the Local Humanitarian Coordination Team, inter-ethnic coordination platform, civil society coordination platform, local government and the Wayuu Ethnic Organization; (ii) have War Child engage in community dialogue, including key community actors to discuss the implementation and research process and make a joint decision to work together. After initial introductions, *Seeds*, phase 1, will start; (iv) implement phase 1 of *Seeds*, community entry and building trust.

### 2.10.2. Quantitative study component

In the intervention communities, all participants of the *Seeds* approach will be registered, and a number will be attached to their names. The sample of children and adults *involved* in *Seeds* activities will be randomly selected from the total group of *Seeds* participants. All children in the community identified as at-risk (following rapid assessment), according to the risk prioritized for community action (in Phase 3 of *Seeds*), will be listed, and a number will be assigned to their name. The sample of children *targeted* by community action will be randomly selected from this total group. The random selection of the study participants will be conducted using an online random number generator.

Each intervention community will be matched to a control community. An introduction session about *Seeds* will be conducted for the control communities, and the sample of children and adults involved in *Seeds* in the intervention communities will be matched with children and adults expressing a willingness to participate in *Seeds* after the introduction session. The sample of children targeted by community action in the intervention communities will be matched to the control group based on experiencing the same risk that was prioritized for community action in the intervention communities (based on the assumption that children in the control communities will face similar challenges and risks). This group of children will be identified in the community following a rapid assessment. If multiple risks are prioritized in the intervention communities, the sample per community (n = 56) will be divided per risk.

### 2.10.3. Qualitative study component

In both the intervention and control communities, children and adults will be purposively sampled to participate in qualitative data collection. The non-probability sampling technique was chosen to identify participants based on characteristics as discussed in section 2.6.2 (e.g., children involved in *Seeds* or targeted by community action). The full lists of children and adults involved in *Seeds* activities and at risk of prioritized community action will be used for the selection, minus the sample of participants for the quantitative study component, to prevent participants from being involved in both quantitative and qualitative data collection. Natural helpers will be purposely selected based on their engagement in community action related to children.

## 2.11. Data collection methods

### 2.11.1. Quantitative data collection

All questionnaire data will be gathered by a team of research assistants on tablets, using the free software program Kobo Toolbox. Questionnaires will be administered in Spanish by trained and supervised research assistants.

During the feasibility study of *Seeds* in Colombia (Ellermeijer et al. under review), we tested the use of standardized instruments to assess change. The results of that study indicated a couple of challenges when quantitatively measuring the outcomes of a community-led approach: (1) standardized instruments measure broad concepts of child protection, while communities address a very specific risk in their action plans; and (2) communities are likely to use a broader perspective on risks for children than the definition used as basis for standardized tool development. The qualitative results of the study showed an indication of change in constructs other than those measured with quantitative tools. For these reasons, we propose to include a different set of tools in the evaluation. Two tools will be adapted for the purpose of the present study (PSYCHLOPS and PROTECT), three standardized tools will be included (KIDSCREEN, a child wellbeing framework developed by the Alliance for Child Protection in Humanitarian Action, and the Perception of Child Maltreatment Scale), one tool will be developed for the purpose of the study to measure community ownership, and a maximum of five community specific items will be included in the questionnaire.

### 2.11.2. Instruments

**2.11.2.1. PSYCHLOPS.** To assess change regarding the protection of children from violence, abuse, neglect, and exploitation in their community, we will adapt a children's version of a participant-generated outcome measure, PSYCHLOPS (Psychological Outcome Profiles) (Ashworth et al., 2004). This instrument has been validated for use in adult mental health interventions (Ashworth et al., 2004; Héoinsson et al., 2013), and a version was developed to assess children's perspectives of the value of generic therapeutic mental health interventions (Godfrey et al., 2019). PSYCHLOPS includes a pre-therapy, during-therapy and post-therapy version, including four to eight items each. Prior to the start of the study, the instrument will be adapted by a group of child protection practitioners and researchers in Colombia. The tool will be used to assess the main protection risk for children, as well as perceived outcomes of *Seeds*, and will be administered to the sample of children involved in *Seeds* and the children targeted by community action.

**2.11.2.2. PROTECT.** To assess change regarding children's sense of protection, we developed a context-specific instrument, PROTECT (Ellermeijer et al. under review) for use in the feasibility study of *Seeds* (Ellermeijer et al. under review). The PROTECT tool was developed following a three-step process proposed by Bolton & Tang (2002) to develop a context-specific function assessment, using: i. free listing; ii. pile sorting, labelling and prioritization; and iii. translation in tool items. The final tool developed for use in the feasibility study included 11

items. The preliminary psychometric properties of the tool show good reliability:  $\omega = .84$  at T1,  $\omega = .81$  at T2, and test-retest reliability: ICC = .83. Due to the significantly different characteristics of the participants included in the effectiveness evaluation, we will adapt the PROTECT tool for this context with a group of children living in a community in Uribia, Riohacha, or Maicao in La Guajira, with a population <500, making the community non-eligible for participation in the study. The tool will be adapted using the same three-step process as the feasibility study and will be administered to the sample of children involved in *Seeds* and children targeted by community action.

**2.11.2.3. KIDSCREEN.** KIDSCREEN assesses the health and well-being of children and adolescents aged 8–18 years (Jaimes-Valencia et al., 2019). Cronbach’s  $\alpha$  values of the Colombian version of the KIDSCREEN-52 ranged from .74 to .89 in eight dimensions of the tool. Reliability was lower in the dimensions of self-perception ( $\alpha = .59$ ) and social acceptance ( $\alpha = .63$ ) (Jaimes-Valencia et al., 2019). A Colombian version of KIDSCREEN-27 was adapted and validated from the longer KIDSCREEN-52 questionnaire (Vélez et al., 2016). Person reliability was assessed using test-retest reliability, showing a reliability of .81 and .85 for the child self-report version and the parent-proxy, respectively. Both the child self-report and the parent-proxy include 27 items, assessing various dimensions of children’s well-being, such as physical and psychological wellbeing and social support. The child self-report will be administered to the sample of children involved in *Seeds* and children targeted by community action to assess their improved protection. The parent-proxy will be administered to adults involved in *Seeds*, asking them about the children in their community in general.

**2.11.2.4. The Alliance for Child Protection in Humanitarian Action – wellbeing tool.** The Alliance developed guidance and a measurement framework to assess child wellbeing. This encompasses safety from abuse, neglect, exploitation, and violence and also includes fulfilling basic needs, ensuring care from consistent, responsive caregivers, fostering supportive connections with family members, peers, teachers, and the wider society, as well as providing opportunities for children to exercise agency in accordance with their developing abilities (The Alliance for Child Protection in Humanitarian Action, 2021a). The tool consists of 31 items divided over four sub-sections: safety and security, basic needs, relationships with family and others, and agency. To the best of our knowledge, studies assessing the reliability of the tool are not available. The tool will be administered to the sample of children involved in *Seeds* and children targeted by community action.

**2.11.2.5. Perception of Child Maltreatment Scale (PCMS).** This instrument measures perceptions of child maltreatment in low- and middle-income countries and was developed and validated in Nigeria (Fakunmoju & Bammeké, 2013). The overall internal consistency of the PCMS was .95; subscales of Emotional/Psychological Abuse (.93) and Sexual Abuse (.91) were high, whereas those of Child Neglect (.89), Child Labor (.86), and Physical Abuse (.84) were good (Fakunmoju & Bammeké, 2013). The PCMS was used in the feasibility study of *Seeds* (Ellermeijer et al. under review) showing excellent reliability for the child labor (.96) sub-scale and acceptable reliability for neglect (.78) and psychological/emotional abuse (.70). Too little variance was shown for physical abuse. The PCMS includes 34 items and will be administered to the sample of adults involved in *Seeds* activities.

**2.11.2.6. Tool to measure community ownership.** Prior to the start of the study, a tool will be developed to measure community ownership. A maximum of five questions will be formulated by a group of child protection practitioners and researchers in Colombia, with input from members of a community in Uribia, Riohacha, or Maicao in La Guajira, which is ineligible to participate in the larger study. Here, children and adults will be asked how they define ownership.

**2.11.2.7. Context specific questions.** Following the prioritization of risks in the community, a maximum of five items will be added to the questionnaire to assess change over time on these risks.

See Table 3: Instruments

**2.11.3. Qualitative data collection**

Qualitative data will be collected through semi-structured interviews, FGDs, and participant observation to identify what changes can be observed in the community because of *Seeds*. Through semi-structured interviews, the research team will use a predefined set of topics (such as community ownership, meaningful participation of children, agency, and attitudes towards reducing violence against children) to explore what participants’ thoughts are on these topics. The team has the flexibility to adapt the interview and ask probing questions based on the participant’s responses, leading to rich data (DeJonckheere & Vaughn, 2019). FGDs will be organized, following a topic guide. A safe environment will be created where participants will feel comfortable expressing their views. Discussion amongst participants in a group may spark new insights that may be missed in one-on-one interviews and will capture social interaction in relation to the protection of children (Hennink, 2014). During participant observation, the research team will observe behavior, interactions, and dynamics in the community related

**Table 3**  
Instruments

Sample	Outcome	Instrument
Children involved in <i>Seeds</i>	Improved protection of children from violence, abuse, neglect, and exploitation in their community	- PSYCHLOPS - KIDSCREEN - Alliance for Child Protection in Humanitarian Action – Well-being tool - Context-specific questions
	Increasing children’s sense of protection in their community	PROTECT
	Perceived outcomes of <i>Seeds</i>	PSYCHLOPS
Children targeted by community action	Community ownership	Community ownership tool
	Improved protection of children from violence, abuse, neglect, and exploitation in their community	- PSYCHLOPS - KIDSCREEN - Alliance for Child Protection in Humanitarian Action – Well-being tool - Context-specific questions
	Increasing children’s sense of protection in their community	PROTECT
Adults involved in <i>Seeds</i>	Perceived outcomes of <i>Seeds</i>	PSYCHLOPS
	Community ownership	Community ownership tool
	Improved protection of children from violence, abuse, neglect, and exploitation in their community	KIDSCREEN (parent-proxy)
	Attitudes on child protection	Perception of Child Maltreatment Scale (PCMS)
	Community ownership	Community ownership tool

to the protection of children (Bernard, 2017). The research team will specifically observe *Seeds*-related activities and other activities related to the protection of children but will also be present during general community gatherings to better understand the community's organizational and leadership structures and community members' participation practices in community-related activities.

Topic guides will be developed for semi-structured interviews and FGDs, and an observation guide will be developed to support participant observation. Constructs included in quantitative questionnaires will be matched with topics included in these qualitative tools to allow for a comparison of data from these two sources. Interviews and FGDs will be recorded and transcribed verbatim, and detailed notes will be taken during and after participant observation. The three methods combined allow for a diverse and more complete understanding of change in the community because of *Seeds*.

Questionnaires and interviews will be administered individually to adults and to pairs of children by a team of trained research assistants. Research and *Seeds* activities will be scheduled on days and times that do not conflict with income-generating activities.

See Fig. 1. Study flow diagram

## 2.12. Procedures

### 2.12.1. Training

Community coaches will go through a skills-based capacity strengthening process prior to and during their engagement in *Seeds*, which includes formal training (eight-days), an exchange of experience with other practitioners (community of practice), and on-the-job learning. Community coaches will facilitate a five-day skills training session for community facilitators at the start of *Seeds*. This training will be organized in a flexible way, preventing overlap with facilitators' income-generating activities or other responsibilities. A team of research assistants, who are from the same area as the communities included in the study, will be trained for a period of at least five days on topics such

as research foundations, ethical principles, quantitative and qualitative data collection, considerations when working with child participants, adverse events, and safeguarding.

### 2.12.2. Translation and cultural adaptation of tools

A translation and cultural adaptation process will be followed in preparation for the study. First, the questionnaires and topic guides used in the study will be translated into Spanish (if no Spanish version of the tool is available) and back-translated to English by bilingual topic experts. Second, the questionnaires and topic guides will be discussed with a group of community members, including children and child protection practitioners living and working in La Guajira, to ensure cultural and contextual relevance of the constructs and terminology used. Third, adapted questionnaires and topic guides will be assessed during cognitive interviews with children and adults to determine whether the included items are understandable to respondents (Beatty & Willis, 2007). Based on these steps, changes will be made to the questionnaires and topic guides prior to the study. The psychometric properties of the tools will be assessed prior to the start of the study.

### 2.13. Data management

Participants will be assigned a study ID at the start of their participation. Only this number will appear on any data set. A separate file connecting the study ID with identifiable information will be stored separately and securely. Questionnaire data will be uploaded by the research team to the secure KOBO Toolbox server, from which it will be downloaded by the research coordinator to the secure server of the War Child Alliance and entered into JASP open-source statistical software (Version 18.2) (JASP Team, 2023) for analysis. Semi-structured interviews and FGDs will be recorded and transcribed verbatim in Spanish. Identifiable data will be removed from the transcripts, and the transcripts will be saved on the secure server of the War Child Alliance. Detailed notes taken during participant observation will be uploaded to

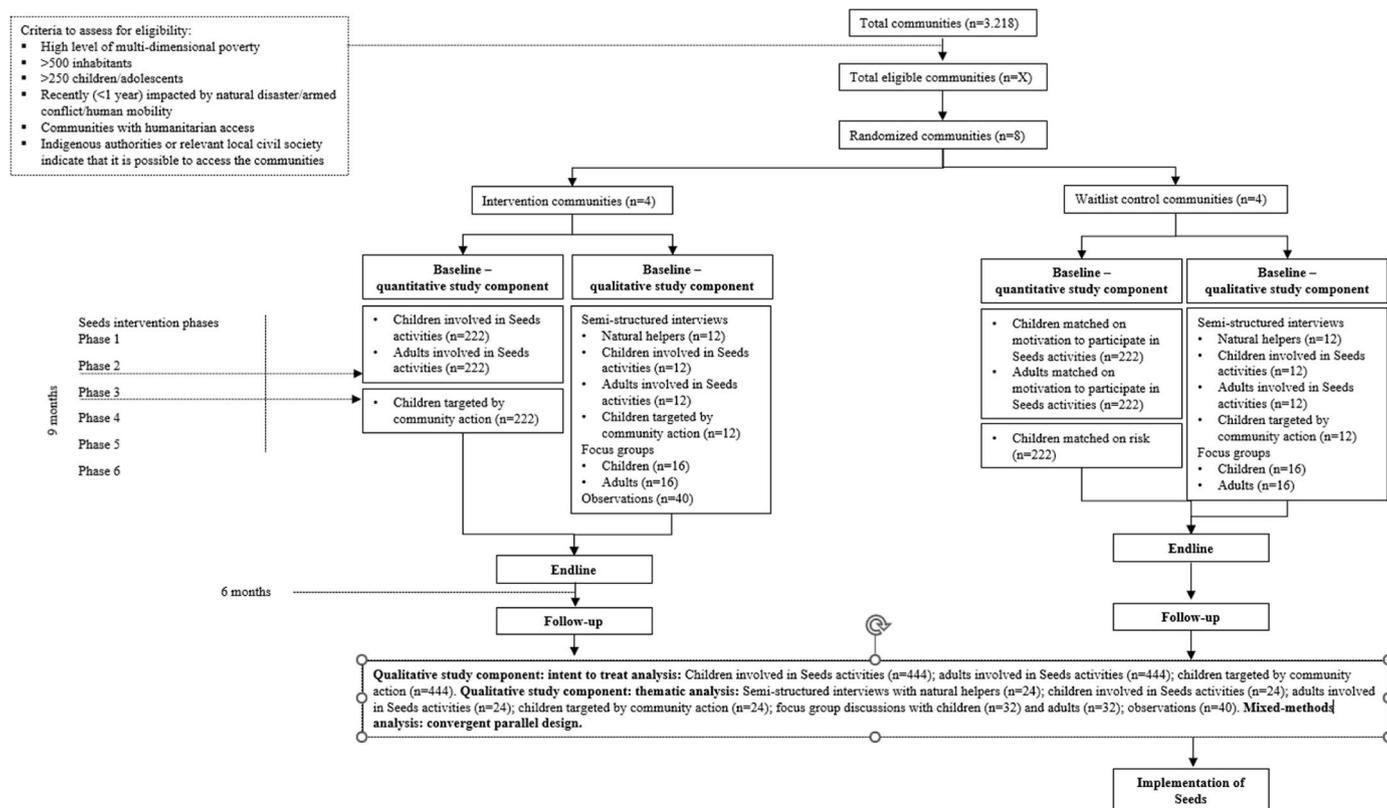


Fig. 1. Study flow diagram.

the same secure server. Qualitative data will be entered in NVivo 12 qualitative data analysis software for coding and analysis. For all questionnaire data, consistency checks will be performed within days post-data-entry, which will occur during and immediately after each phase of data collection (BL, EL, and follow-up). Any queries identified will be resolved promptly by the research coordinator and principal investigators of the study. All transcripts will be checked for accuracy by the research coordinator, using the recordings; detailed notes will also be checked to ensure clarity. A detailed War Child data management policy will serve as guidance on all data management issues.

#### 2.14. Data analysis

##### 2.14.1. Quantitative data analysis

Quantitative data will be analyzed using JASP open-source statistical software (Version 18.2) (JASP Team, 2023). The internal consistency of the included instruments will be assessed using baseline data. McDonald's Omega will be used to assess internal consistency (McDonald, 1999), taking into account the ordinal scale of items and the underlying assumptions which are less strict than Cronbach's alpha (Dunn et al., 2014).

Descriptive statistics of the demographic variables (frequencies, mean, SDs, min, and max) will be calculated using baseline data. Descriptive statistics of the outcome variables (means and SDs) of the total scores and subscale total scores will be calculated for each outcome at baseline and endline.

Paired samples t-tests will be conducted as primary analysis for this evaluation for the intervention and control groups separately (following power analyses and as explained above). Change will be assessed primarily by comparing baseline and endline data on both primary outcomes: (a) improving the protection of children from violence, abuse, neglect, and exploitation in their community; and (b) increasing children's sense of protection in their community. This will be performed for the total sample of children as well as separately for the children involved and targeted by the community action.

Additional analyses will be conducted using repeated measures ANOVA. Within-group changes will be assessed between baseline, endline, and follow-up, and between group differences will be assessed between the intervention and control groups, taking the matching of each intervention community with a control community into account. An exploratory mediation analysis will be conducted, hypothesizing that community ownership and positive attitudes towards child protection mediate the effect of the *Seeds* approach on both primary outcomes.

##### 2.14.2. Qualitative data analysis

To understand what change can be observed in the community during and after the implementation of *Seeds*, qualitative data will be analyzed using NVivo 12 qualitative analysis software. Multiple researchers will review a sample of the transcripts to generate a coding framework. Data-driven coding will be used to identify broad themes (thematic analysis). The analysis will include both an inductive and deductive approach (Braun & Clarke, 2006). The findings will be discussed by the research team during a sense-making session.

##### 2.14.3. Mixed-method analysis

After separate analysis of quantitative and qualitative data, the results will be merged. The intent of this integration in the proposed convergent mixed-methods design is "to develop results and interpretations that expand understanding, are comprehensive and are validated and confirmed" (Creswell & Plano Clark, 2018, p. 221). The research team will compare the quantitative and qualitative results of the study by presenting these side-by-side and considering how the confirming, disconfirming, and expanded results answer the mixed-methods research question: How does the *Seeds* process enhance the protection of children in the community?

A detailed analysis plan will be developed before data collection has

been completed, including procedures for addressing any interpreting and discrepancies between the quantitative and qualitative datasets.

#### 2.15. Ethical considerations

A detailed study protocol will be shared with the Ethical Review Committee of Universidad de Los Andes in Colombia prior to the start of the study for culturally and contextually relevant ethical assessment. Informed consent and assent will be gathered prior to baseline data collection for participants included in the study. Research assistants will distribute a consent form in Spanish and read it aloud to participants to ensure full comprehension regardless of literacy levels. The research assistants will allow time to address all questions and concerns participants may raise. A War Child adverse events reporting mechanism is in place, which will be adapted for the study, providing a clear overview of response and referral options and ensuring alignment with Colombian law. Since the study involves research with children and adults, research and implementation staff will be trained in War Child safeguarding protocols and reporting procedures. A Data Safety Management Committee will be established for the purpose of this study.

### 3. Discussion

The *Seeds* approach was developed with the aim of preventing violence against children by operationalizing existing lessons from promising community-led approaches in the sector to date (Ellermeijer et al. under review). The ultimate aim of the development and evaluation of *Seeds* is to create an evidence-based, scalable approach that can be adapted and implemented in diverse low- and middle-income countries and humanitarian contexts. If the findings of this study show a positive effect of the approach, this will lend support to the idea that a community-led approach, in which external agencies take a facilitation approach and actions build on existing practices and the intrinsic motivation and strengths of community members, can increase the protection of children. It can then contribute to filling in the gap in rigorous evidence on approaches to prevent violence against children. Second, by combining quantitative and qualitative methods in this mixed-methods study, we aim to gain further insight into changes that can be observed in the community when a community-led child protection approach is implemented, and to address the methodological limitations of a Randomized Controlled Trial (RCT), which risks reductionism. Third, if the proposed methods prove to be effective, the study can be an example of how to overcome a couple of measurement challenges, such as the challenge of evaluating an approach in which the specific focus, the harm prioritized for community action, is part of the approach itself and can, therefore, not be determined or measured prior to the start of implementation. Additionally, changes observed as a result of *Seeds* through qualitative data collection can inform which outcomes can be measured quantitatively in future studies.

Several issues require special consideration during the planning and implementation of the study. First, gathering both quantitative and qualitative data within the same community can generate a rich understanding of the topic, but it may also risk placing a burden on the community and introducing bias. To mitigate this risk, we aim to include large enough communities in the study and to monitor the perceived burden throughout the study implementation. Second, to prevent contamination during the mixed-methods study, the research team involved in data collection will be well trained and will follow strict protocols to maintain the integrity of the data to be collected. Third, the decision was taken to include different participants in the quantitative and qualitative samples of the study. This risks introducing extraneous information into the study and potentially influences the ability to converge results (Creswell & Plano Clark, 2018). This risk will be mitigated by purposefully incorporating the constructs included in questionnaires into qualitative topic guides. Fourth, to mitigate the risk of social desirability bias, research assistants will be identified from a

similar context and will spend time within the community to establish rapport. They will receive training using neutral, and non-judgmental language when posing open-ended, non-leading questions. Notes taken through participant observation will enable the research team to compare observed realities in the community with the responses provided by participants, and the consent and assent procedures includes clear statements emphasizing that respondents are free to say whatever they want without any consequences.

In conclusion, *Seeds* was developed to prevent violence against children through fostering community ownership and building on intrinsic motivation and existing resources within the community that keep children safe. The proposed evaluation will help strengthen the evidence base for community-led child protection practices to prevent violence against children, which is much needed given the scarcity in rigorous evaluation of effectiveness of such child protection approach. The mixed methods research design integrates quantitative instruments co-developed with and for the study population, including adolescents, and qualitative methods provide a deeper understanding of the change process within the communities where *Seeds* is implemented. The proposed design specifically addresses the challenge of evaluating interventions developed by the community, rather than relying on predefined samples and interventions. Since community-led practices do not have these predetermined parameters, this protocol aims to address that complexity.

If the evaluation demonstrates effectiveness, the community-led approach can be adopted and scaled by local, national, and global humanitarian organizations, as well as government stakeholders. Scaling up implementation means that power is shifted from external organizations to communities and that community-led strategies for child protection are expanded. This approach is expected to enhance sustainability and foster local ownership of these initiatives. The study's design and methods can be adapted to evaluate *Seeds* in different contexts and can also be applied to effectiveness research of other approaches aimed at strengthening child protection.

#### CRedit authorship contribution statement

**Rinske E.C. Ellermeijer:** Writing – review & editing, Writing – original draft, Methodology, Conceptualization. **Gabriela V. Koppenol-Gonzalez:** Writing – review & editing, Methodology. **Juan Jose Castellanos Piedrahita:** Writing – review & editing, Methodology. **Maria Cecilia Dedios Sanguinetti:** Writing – review & editing, Methodology. **Lauren Stephens:** Writing – review & editing, Methodology. **Ria Reis:** Writing – review & editing, Methodology, Supervision. **Mark J.D. Jordans:** Writing – review & editing, Supervision, Methodology, Conceptualization.

#### Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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