# Information Management & Analysis for Child Protection in Emergencies

# Alarm clock outline2hr

# Why does this session matter?

*Information and Analysis is fundamental to design responses for Child Protection in Emergencies. This session provides a basic understanding of what CP in Emergency is and what type of response activities can be done. It focuses then on how to identify the necessary information, how to gather and collect them, and analyse them, in line with the Global CP Area of Responsibility NIAF (Needs Identification and Analysis) Handbook.*

# Learning Objectives

At the end of this module, participants will be able to:

* Identify common information needed by Child Protection colleagues and what methods and sources you can use
* List some Tips for better cooperation between IM, DTM and Child Protection
* Know who to ask for help on challenges related to Data, Analysis and Child Protection

# Session Plan

[Intro (5’)](#_Introduction:_WELCOME,_OBJECTIVES)

1. [How can IM and CP colleagues work together?](#_Part_1:_How)
2. [Child Protection in Emergencies](#_Part_2:_Child)
3. [What information do CP colleagues need](#_Part_3:_What)
4. [How can this information be obtained?](#_Part_4:_How)
5. [Tips of better Cooperation – Lessons Learned](#_Part_5_:)

[Conclusions (5’)](#_Conclusions)

# ACTIVITIES

* Activities before the session: Send the 3-pager *Child Protection Analysis Scenario.pdf* to participants to read before the session.
* Activities during the session:
  + Participants use of the chat to answer specific questions. Clarity of question is essential to enable participation. *The facilitator should decide whether or not to allow the use of the mic to answer those questions. Using the mic makes the experience more interactive, however it may be chaotic if the group is very large and if there is a lot of participation in the group.*
  + Mentimeter or Chat, Whiteboard or Mural or similar tool
* Knowledge Test after the session
* Evaluation after the session
* Longer scenario is available for in –person training sessions

# Key Resource Documents

* *CP AoR – NIAF and annexes - Needs Identification and Analysis Framework (*[*https://www.cpaor.net/Needs\_Identification\_and\_Analysis\_Framework*](https://www.cpaor.net/Needs_Identification_and_Analysis_Framework) *)*
  + *NI*[AF in Comics](https://www.dropbox.com/sh/1gi1uq547ulq9t6/AAC3lquJnW2WBt9q3qXFoEK9a/Generic/NIAF/1.%20NIAF%20briefing%20docs/CP%20AoR%20NIAF%20Handbook%202021/Annex%2014%20NIAF%20Comic%20Strips?dl=0&lst=&subfolder_nav_tracking=1)  *- (Available in French, English, Spanish)*

*(https://www.dropbox.com/sh/1gi1uq547ulq9t6/AAC3lquJnW2WBt9q3qXFoEK9a/Generic/NIAF/1.%20NIAF%20briefing%20docs/CP%20AoR%20NIAF%20Handbook%202021/Annex%2014%20NIAF%20Comic%20Strips?dl=0&lst=&subfolder\_nav\_tracking=1 )*

* + *NIAF Handbook Annexes – (Available in French, English) (*[*https://www.dropbox.com/sh/1gi1uq547ulq9t6/AAAjDd08KI9Y6pUUSzHZyNGJa/Generic/NIAF/1.%20NIAF%20briefing%20docs/CP%20AoR%20NIAF%20Handbook%202021?dl=0&lst=*](https://www.dropbox.com/sh/1gi1uq547ulq9t6/AAAjDd08KI9Y6pUUSzHZyNGJa/Generic/NIAF/1.%20NIAF%20briefing%20docs/CP%20AoR%20NIAF%20Handbook%202021?dl=0&lst=)*)*
* *Child Protection AOR Guidance and DTM MSLA for CP:* [*https://dtm.iom.int/dtm-partners-toolkit/guide/dtm-child-protection*](https://dtm.iom.int/dtm-partners-toolkit/guide/dtm-child-protection)
* *Field Companion for Child Protection (https://dtm.iom.int/dtm-partners-toolkit/field-companion-pdf)*
* *CP Training Module for DTM Enumerators (https://dtm.iom.int/dtm-partners-toolkit/optional-module-2-cp)*
* [*Video (3:50 min)*](https://www.youtube.com/watch?v=pEaNwDtQRwI) *Child Protection in Humanitarian Action - This is Samira* [*https://www.youtube.com/watch?v=pEaNwDtQRwI*](https://www.youtube.com/watch?v=pEaNwDtQRwI)
* [Video (36 min) IM for Child Protection in Emergencies](https://www.youtube.com/watch?v=gDC2ksDo13g&ab_channel=DTMandPartnersToolkit)

*(*[*https://www.youtube.com/watch?v=gDC2ksDo13g&ab\_channel=DTMandPartnersToolkit*](https://www.youtube.com/watch?v=gDC2ksDo13g&ab_channel=DTMandPartnersToolkit)*)*

* [List of Goods Produced by Child Labor or Forced Labor](https://www.dol.gov/agencies/ilab/reports/child-labor/list-of-goods) *(*[*https://www.dol.gov/agencies/ilab/reports/child-labor/list-of-goods#collapseExample*](https://www.dol.gov/agencies/ilab/reports/child-labor/list-of-goods#collapseExample)*)*
* *Do no Harm when collecting DTM data checklist:* <https://dtm.iom.int/dtm-partners-toolkit/guide/how-can-we-do-no-harm-when-collecting-storing-sharing-and-analysing-data>
* *PAF* ***Video on Methods and Sources*** *(PAF training package) also available at:* [*https://youtu.be/tJLHlM7\_M6c*](https://youtu.be/tJLHlM7_M6c)

Before the session

As part of preparation for the session, send email to the participants sharing the below listed resources/links. Make sure to share them at least one week before the session (or when the invitation is sent).

1. Needs Identification and Analysis Framework (NIAF) in comics: The [Child Protection NIAF](https://www.cpaor.net/initiatives/needs-identification-and-analysis-framework-niaf) is a conceptual framework that creates a common approach across Child Protection coordination and response actors on the continuous needs identification and data interpretation exercises.- *(Available in English, French, Spanish)*

<https://drive.google.com/drive/folders/16g3B77piJq_Rv9uaZEgTb9T06UvjTA6J>

# CONTENT slide by slide

## Introduction: WELCOME, OBJECTIVES and AGENDA

Activity on slide 1: For Webinars/Virtual sessions:

* This slide remains on the screen while wating for the participants to join
* Remind that the session is recorded, and that they should write their name on the chat, with job title and location, as a means of introduction.
* Ground rules: if you have a question during the presentation, write it in the chat. Somebody will monitor the chat to ensure no question is missed. However, When the presenter gives you space to ask questions, you can unmute your mic and ask your question directly.

*Organizer Introduces facilitators,* Slide 2 Objectives and Slide 3 Session at a glance

## Part 1: Child Protection in Emergencies

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| Slide 4: In this section we will give an overview of Child Protection in Emergency | |
| Slide 5: Let us start with clarifying what Child Protection in Emergency is and does.  Answer the Mentimeter: What risks can children face in a humanitarian crisis?   Go to the link in the chat or to menti.com and then insert this code. | |
| Slide 6: Summarize the answers provided and then show the participants this Video: https://www.youtube.com/watch?v=pEaNwDtQRwI | |
| Slide 7: Now, let us play a small quiz: Which CP Risk does this image suggest?  Write your answer in the chat - *Standard 11: Children associated with armed forces or armed groups* | |
| Slide 8. Which CP Risk does this image suggest?  Write your answer in the chat - *Standard 7: Dangers and injuries and/or Standard 12: Child labour* | |
| Slide 9: Which CP Risk does this image suggest?  Write your answer in the chat- *Standard 10: Mental health and psychosocial distress (or could be Standard 8: Physical and emotional maltreatment or Standard 13: Unaccompanied and separated children)* |
| Slide 10: Which CP Risk does this image suggest?  Write your answer in the chat - *Standard 13: Unaccompanied and separated children and Standard 7: Dangers and injuries (they are walking on the train track)* |
| Slide 11: What is in summary Child Protection in Emergency? The prevention and response to abuse, neglect, exploitation and violence against children” – Child Protection Area of Responsibility  Abuse: Deliberate act of ill treatment that can cause harm to a child’s safety, well-being, dignity and development. All forms of physical, sexual, psychological or emotional ill treatment  Exploitation: Use of children for someone else’s advantage, gratification or profit resulting in unjust, cruel and harmful treatment  Neglect: Deliberately (or through carelessness or negligence) failing to provide/secure child’s rights to physical safety and development  Violence: All forms of physical or mental violence, injury and abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse  Possible Perpetrators: adults are in a position of power over children (this includes relatives, teachers, leaders and agency staff).  Child Safeguarding are measures that we should take to ensure that our own staff are not perpetrators | |
| Slide 12: But what do Child Protection activities look like in an emergency?  There are 3 types of Child Protection Activities we implement: 1) Stand-Alone Child Protection Activities, 2) Child Protection Integration with other Sectors and 3) Child Protection Mainstreaming/ Safe Programming. | |
| Slide 13: Let us see some examples of Stand-Alone Child Protection Activities:   * Parenting programmes * Psychosocial support * Victim assistance * Case management * CP services to fill gaps * Strengthen laws to prevent harm to children * Advocacy for access to birth registration * Risks education * Training of local CP service providers/ social workers * Safety audits | |
| Slide 14: Let us see some examples of Child Protection Integration with other Sectors:   * **Food Security Sector:** Cash/vouchers to most vulnerable to mitigate child labour and exploitation * **Education Sector:** Training education providers on how to make safe referrals to child protection services * **All Sectors:** Working with service providers to help them adopt child safeguarding policies | |
| Slide 15: Let us see some examples of Child Protection Mainstreaming/ Safe Programming:   * **WASH & Education:** Separated girls/boys toilets * **CCCM:** Addressing hazards in camps/communities * **All sectors:** Priority Distribution Access for UASCs and other vulnerable groups * **All sectors:** Distance to distribution/service points * **FSL:** No children allowed working in Cash For Work projects | |

## Part 2: What information do CP colleagues need?

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| Slide 16: What information do CP colleagues need? |
| Slide 17: In order to ensure we always keep the link between the use of an information and the data we collect, we walk backwards, starting not from the questions in a questionnaire, but rather from the use, the decisions to be made, and then we look at the information needed to make such decisions, that the data users do not have. Only at that point we consider the right method and source of the data and design the questions for the questionnaire. [Click when mentioning each step] |
| Slide 18: Information Needs in Program Cycle are clearly linked to the decisions that we have to make for response. For example, to plan a response, as agency or as clusters, we must do an analysis of Risk & Needs, and decide which ones are the Priority geographic areas, Priority groups, Priority response needs, and how many people are in need. This is because in our Response Strategy we will have to make decisions on:  Priority Activities, Activity Targets, and Budget. SO, the information we need are, among others, What’s the problem (how are they affected)? Who is affected? Where are they? How many are they? Are there response services available and accessible? |
| Slide 19: What information do you need for Child Protection response?  Go to the link in the chat or to menti.com and then insert this code. |
| Slide 20: Let us look at the CP Analysis Framework. The analysis framework helps us remember what information we need and how to use that in the analysis.  The AF is essentially an upside-down problem tree. At the top, we have the underlying factors that increase child protection risks, such as conflict and violence, barriers to goods and services, norms and values (like cultural practices that may include child marriage), and legal frameworks & rule of law (such as whether the justice system protects or punishes victims of rape).  The blue row includes the child protection risks themselves [*CP calls them risks but they are threats*]. You’ll recognize these risks from the standards we presented earlier. They include dangers and injuries, physical and emotional maltreatment, gender-based violence, MHPSS, Child Labour, recruitment into armed groups and family separation.  If a child has been a victim or survivor of a child protection issue, the degree to which they will physically and mentally recover will depend on their access and availability to response services. The red row includes the child protection response services that can help a child and their family recover, such as community mechanisms/systems to reintegrate and support affected children, basic services for children that have been impacted by a child protection issue (such as medical help, case management support, and psycho-social support), and finally, whether there is a legal system that will provide justice for the child.  All of these factors will have an impact on a child’s physical and mental health and mortality.  Now, let us look at what information we need. For example, *CLICK* for Causes related to the crisis (Conflict, Violence or Disaster), we need to understand the causal role played by unsafe physical environment on CP risks, and how Explosive ordnance impact risks, and how displacement impacts risks. For this last one, for example, we will need data on displacement numbers and locations of displacement, routes of movement, who in the population is displaced, whether displacement is slow or sudden, and if there is secondary displacement. These are quantitative and qualitative data. Let us now look at the second type of Causes, access to basic needs …*CLICK*. Can you give us examples of what data you think we need for this box? Be specific.and now examples of *CLICK*: XXX *[continue to cover all boxes - prepare examples in case participants do not contribute – use Annex 20 of the NIAF or slides in the next section 4*] |

## Part 3: How can we obtain the information we need for Child Protection analysis?

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| Slide 21: How can we obtain the information we need for Child Protection analysis? |
| Slide 22: This is a flow chart from the CP AoR Assessment Handbook: the NIAF. It helps us get the data we need: It starts by advising to: *CLICK*: ID info needed, then *CLICK*: Search for existing data, then *CLICK*: use Primary data collection, Use someone else's data collection and only if all of this is not sufficient to get all the data we need, then*CLICK*: Collect the data yourself through Primary data collection. This is a very useful approach. |
| Slide 23: **Analysis** considers multiple datasets from different sources, obtained through different methods. This enables validation, spotting of errors, identification of areas of further inquiry and **increased understanding.** Complementarity amongst datasets and sources is essential. Data from different sources will be the *bricks* that build your understanding of the situation: the analysis. |
| Slide 24: Each method and source provide some information, not others. No one tool can collect all the information we need for CP. And each tool is specific to a level of analysis, from Community, to groups, to facility, to Household (HH) and to individuals. - Key Informants Interviews and Community Group Discussion can provide info on the community, but for info on groups we need the Focus Group Discussions. For info on Households, we need to interview households, we cannot try to collect information on HH by interviewing Key Informants (who speak on behalf of the whole community).  Of course, the time, resources and staff needed will increase with the more detailed level of analysis we use (from Community to Individual). |
| Slide 25: These are other sources for CP data. It is important to clarify to CP colleagues what we cannot collect for them, and suggest they use other sources.  The Global Child Protection AOR is trying to minimize primary data collection by more effectively using sources of secondary data. They have published the NIAF (Needs Identification and Analysis Framework) guide in 2021. DTM is included in the sources of data, as DTM Mobility Tracking can provide crucial information for CP Situation analysis  and alert monitoring. |
| Slide 26: Let us now give more example and see how we can get information for each of the different components of the Analysis Framework! |
| Slide 27: Looking back at our child protection analytical framework, let’s take a look at where we can find the information we need. Let us consider the first group of causes and underlying factors: where could you find data on Unsafe Physical Environment? And Explosive Ordnance? And Displacement?*[Ask Participants]*  *CLICK* ***Unsafe Physical Environment:*** *Secondary data on area and impact of earthquake, floods, front lines, presence of armed groups in the area: OCHA, UNDSS, Media, Research Institutes like International Crisis Group, debrief with staff and NGOs in the field….*  ***Explosive Ordnance:*** *UNMAS maps, DTM data on Explosive ordnance, Government agency for demining*  ***Displacement:*** *Locations, numbers of IDPs, SADD, place of origin and routes: from DTM KII MSLA, UNHCR (refugees), OCHA.*  Let us consider the second group of causes and underlying factors: where could you find data on barriers to access to basic goods and services? |
| Slide 28: This can be tricky. We need to differentiate between Availability, Access, Quality, Appropriateness, Use and Awareness. Let’s start with one source we can use for all: *CLICK: Existing Authorities’ data and Reports & Research by Humanitarian, Development Organizations & Academia*   * Use the chat and tell us, what method and source can you use to collect data on **availability** of basic goods and services? *CLICK*: Key Informants Interviews (KII e.g., DTM MSLA), Facility Assessment/ service Mapping/ Expert Interviews, Focus Group Discussions (FGD) * Use the chat and tell us, what method and source can you use to collect data on **access** of basic goods and services? *CLICK*: KII (distance), FGD (barriers by group), Household Interviews (barriers by HH), Individual Interviews (barriers by Individual and SADD) * Use the chat and tell us, what method and source can you use to collect data on **quality** of basic goods and services? *CLICK*: Facility Assessment/ service Mapping/ Expert Interviews, FGD (by group), HH (by HH), Individual Interviews (by Individual & SADD) * Use the chat and tell us, what method and source can you use to collect data on **appropriateness** of basic goods and services? *CLICK*: FGD (for each group), HH (for HH), Individual Interviews (by Individual and SADD), Expert Interviews * Use the chat and tell us, what method and source can you use to collect data on **use** of basic goods and services? *CLICK*: Household Interviews quantitative, FGD (qualitative for each group), Individual Interviews (by Individual and SADD) * Use the chat and tell us, what method and source can you use to collect data on **awareness** of basic goods and services? *CLICK*: Household Interviews –quantitative, FGD (qualitative for each group), Individual Interviews (by Individual and SADD) |
| Slide 29: Let us now consider the threats (called Child Protection Risks in the *Minimum Standards* *for CPiE*), The 2nd row of the Analysis Framework. |
| Slide 30: Now, we said that we cannot collect **prevalence**: but then how can we prioritize WHERE to respond?  [*Ask participants to give ideas*] For example, Find out where **the living conditions and other situational factors will increase the RISK** of child protection incidents using proxy indicators. You will respond where the **risk is higher** (higher threat, larger vulnerable population and fewer resources). |
| Slide 31: **Information needs FOR CHILD PROTECTION – WHAT IS THE PROBLEM?** |
| Slide 32: Let’s Simplify the problem: Your role is to: obtain enough information to support decision making  You do NOT need to know everything on each issue in order to make response decisions.  You do not need to prove that child protection incidents are happening. |
| Slide 33: The 2nd row is a bit trickier! We can obtain information on where existing dangers exist that can result in injuries (like exposed wiring in a camp for example, or Unexploded ordnance in the area) from HH and KI. We can also find out how many children (KIs) ESTIMATE are unaccompanied in a location. Remember that KIs are answering on behalf of a population, so they cannot know the precise numbers because they haven’t interviewed and registered each child. An HH survey may collect an estimate of Unaccompanied and Separated Children UASC, as this is often too rare compared to the sample used for a HH survey in a crisis to give accurate numbers. We can collect the number of UAC through a registration exercise. We may also collect prevalence of child marriage through a HH survey, or registration.  However, we cannot collect prevalence data for other threats: violence, maltreatment, Psychological distress, Children in Armed groups and child labour. And we should not ask such questions through any method: Why can’t we ask about the other child protection risks that are linked with violence?   * The first obstacle is ethical: It is not ethical to ask a question that could put the enumerator at risk, put the respondent at risk, or do harm by asking sensitive questions without an available referral mechanism to provide support to the victim or survivor. For example, if we ask about the presence of armed groups, this could put our enumerator or respondent at risk. If we ask about missing children, and the key informant says “yes, my child has gone missing” – yet we don’t have any way of helping them, then we would be doing harm by asking them to disclose something painful and leaving without providing help. * The second obstacle is that asking about these questions does not give us accurate data. These issues are under-reported, so no one knows exactly how many children victims or survivors of each child protection issue are. It doesn’t matter if we are asking at household level, or asking a child protection specialist, or a non-specialist key informant, we cannot obtain data on the number of children, (or women or men) have been raped, maltreated, trafficked, involved in hard labour, abused, exploited, or recruited into armed groups... and other such information are not going to be collected in most of the contexts where we work. The reason is that these phenomena are hidden, taboo and crimes: the people interviewed will not be able to answer honestly or openly or with precise information because they either do not know or do not dare to respond. * If your donors are pressuring you to collect this information, remind them that the Inter-agency Standing Committee directs humanitarian service providers to assume that gender-based violence is happening in every community, and that emergencies create harmful living conditions and break down social protective structures that increase risk. * Some of our protection experts on the call may wonder whether they can use aggregated case management data (or data from the police on reported cases) as prevalence. The answer is also No. Aggregate case management data tell us about beneficiaries of child protection services, rather than the number of child victims or survivors. It only tells us about the incidents that have been REPORTED to a Child Protection Implementing Partner that is doing case management or to police. These data tell us the number of cases that were reported, which are far fewer than the actual cases. The limitation with using this aggregate data is that firstly, all incidents are under reported so case management data doesn’t capture unreported cases. Secondly, case management data only captures incidents reported in places where we or another organization already work, so it won’t provide information in locations where no one is working. * If we communicate reported cases and donors interpret them as prevalence, we can also contribute to lower funding for child protection programs. * The good news is that the usefulness of this type of data - prevalence data - is deeply overestimated: We do not need to know how many cases of violence there are in a community to decide to open a service to help survivors. There is an agreement in the humanitarian community, written in the 2015 Inter-Agency Standing Committee (IASC) Guidelines on Gender-Based Violence (GBV), which states this, saying: “all humanitarian personnel ought to assume GBV is occurring and threatening affected populations; treat it as a serious and life-threatening problem; and **take actions based on sector recommendations in these Guidelines, regardless of the presence or absence of concrete ‘evidence**’.” So, let's learn to program, work and survive without prevalence data, and collect the data we really need: For example, we can use Focus Groups and interviews with experts to understand common patterns of protection incidents, which groups are most at risk for each type of violence, and which elements increase or decrease the risk of violence for each group. You can use data on reported cases to obtain qualitative information on the types of child protection incidents that are being reported and the dynamics, modalities of incidents. You can also use the data from case management to make decisions on additional staff and budget needed, but don’t ever present the numbers as prevalence of an issue.   What data can we then obtain and through which method?   * *CLICK* **For Dangers and Injuries**, Observation and Key Informants interviews (e.g., DTM MSLA) can tell us about the main infrastructure threats to children, and where they are, while KII or existing data and reports on Explosive Ordnances can tell us the locations where EO are a threat (UNMAS, Mine Risk specialized NGOs like Danish Demining Agency or MAG, or country agency for demining). We can also find out what the heads of HH think may be dangerous for the children through HH Survey * *CLICK* **For Maltreatment and GBV,** we can use Expert Interviews to find out *what are the main threats and where - e.g., school? Family? Work. We can use a*ggregated data from case management to understand dynamics and modalities of threats, and if the situation seems to be *changing. We can use e*xisting reports from development organizations or academia, to learn about *modalities of FGM and Child Marriage. As said, we can use the d*emographic roster in HH surveys with indirect questions *to estimate Child Marriage prevalence, but* NEVER try to collect data on prevalence of other threats and incidents. * *CLICK* **For Mental Health and Psychological Distress,** we can use Interviews with Service providers to understand common types of issues, groups, dynamics, changes, attitudes. We can get some information on the % of HH with children manifesting signs of stress through HH Survey. * *CLICK* **For Children Associated with Armed Forces and Groups (CAAFAG)**, we can find out about the modalities, the actors, the changes and areas through reading existing MRM reports, or interviews with Expert (e.g., MRM focal point in UNICEF). Carefully managed FGD can also give us a sense of the reasons and groups’ attitudes towards recruitment and reintegration of children. * *CLICK* **For Child Labour**, we can use existingreports and data from authorities and specialized organizations and academia to identify reasons, modalities of recruitment, types of work. * As mentioned before, we can get the **number of UASC** through *Registration, while Interviews with* Non-specialist key informant (as DTM MSLA) can give us *alerts on larger numbers of UASC, that will have to be verified by CP actors.* We can interview experts to understand modalities of separation, changes. |
| Slide 34: Let us look at how we did this in the field. An example from Mozambique, a Child Protection Needs Assessment. DTM worked together with CP colleagues to identify first what they needed to decide, what they needed to know for those decisions and then what method and source they could use for each information they needed. We used a tool, *Mapping information needs*- that is available on the DTM&Partners toolkit in the work with DTM and CP colleagues |
| Slide 35: and this is how we calculated severity, using no data directly from the risks row, but rather from the underlying causes, from row 1, and from the services, from row 3. |
| Slide 36: Severity for Case Management Prioritization. We then used the severity levels to compile this map, that guided the colleagues from CP to decide what districts to prioritize to establish CP services. This is a good example of how it is possible to prioritise without asking direct and harmful questions, that would likely produce inaccurate and misleading data. |
| Slide 37: Let us try using data to analyse! Use the data to name the Child Protection RISK and the group of children it likely affects the most. This is an Example of risk/gap statement:  *90% of sites do not have male/female separated toilets, which puts children at enhanced risk of GBV, particularly for girls aged 8 and above.* |
| Slide 38: Proxy Indicator Practice 1: Use the data to name the Child Protection RISK and the group of children it likely affects the most.  Let us look at the data, and propose a child protection risk statement in the chat or using the mic. [after a few suggestions, click to get an example of statement: *In 62% of locations, over half of the households are sleeping outdoors or in emergency shelters, putting a significant number of children and women at higher risk of GBV*. ] |
| Slide 39: Proxy Indicator Practice 2: Use the data to name the Child Protection RISK and the group of children it likely affects the most.  Let us look at the data, and propose a child protection risk statement in the chat or using the mic.  [after a few suggestions, click to get an example of statement : *The majority of IDPs (70%) are moderately to severely food insecure, leading to greater risks of GBV and injury from dangers for children left alone during the day.]* |
| Slide 40: we have created examples of statements of CP risks. Now, let us see how we can move from Risk Statement to Response Strategy: Risk + Gap = Need.   Need informs response strategy (activities, targets, costs etc...). If this is clear, let us take our last example of risk statement, and propose a statement of humanitarian need, to recommend a response. [CLICK] This was our risk statement: “*90% of sites do not have male/female separated toilets, which puts children at enhanced risk of GBV, particularly for girls aged 8 and above.” . For this risk statement, we can propose this example of* Humanitarian need statement: [CLICK]*. Case management* ***services are needed****, as they are only available in 5% of sites.”* This is an example as you see it recommends the response to the identified need. |
| Slide 41: let us now try to take another example of risk statement, and propose a statement of humanitarian need, to recommend a response. [CLICK]  This was our risk statement: “*The majority of IDPs (70%) are moderately to severely food insecure, leading to greater risks of GBV and injury from dangers for children left alone during the day.”*  [CLICK] Let us look at the data we have on the slide. What should be our humanitarian need statement?  [after a few suggestions, click to get an example of statement]: .”*Protective child friendly spaces are absent in 85% of locations, and are therefore* ***needed*** *”* This is an example as you see it recommends the response to the identified need. We used the data from Key Informants on availability of child friendly spaces in only 15% of locations, together with the knowledge from our CP colleagues , that Child Friendly spaces reduce those specific risks to identify the need that the response will have to address. |
| Slide 42: Let us now go back to Proxy Indicator Practice : Use the data to name the Child Protection RISK and the group of children it likely affects the most. **This time, though, carefully consider the reliability of SOURCES of the data before you answer.**  [after a few suggestions, tell them: ] this was indeed a Trick Question! Look at the information sources!  The Estimated number of Unaccompanied Minors come from enumerators, who are NOT CP experts. They cannot and have not interviewed all children, so their number is an estimate from non-CP experts. We cannot consider it reliable, and indeed it is often inaccurate in the practice. However, we can still use this information for analysis and response and write a Risk statement and recommend a follow up action, as, for example: “Key informants have reported unaccompanied minors in Districts A, B and C, with District C being of particular concern. Due to the lack of services available to positively identify and trace unaccompanied minors, it is necessary to deploy experts to verify the information and plan appropriate action, including programs to mitigate separation, (particularly for households with children with disabilities), and plan appropriate response/family tracing.” |

## Part 5: Some tips for better cooperation between IM & Child Protection

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| Slide 43: Let us now hear some tips for better cooperation between IM & Child Protection |
| Slide 44: First tip based on lessons learned, to consider when designing the questionnaire: Will the answer tell me something I don’t already know?  Do you need the KI to confirm that child marriage is happening when it’s a cultural phenomenon? Or are we looking at information about the impact of the crisis on child marriage? Changes within a time-frame, e.g., child marriage becoming relevant for a younger age group now. Example: GBV AoR Voices in Syria. |
| Slide 45: Also a tip to consider when designing the questionnaire: Questions must not contain technical lingo or words/concepts influenced by culture.  Examples of Technical & cultural lingo:  Child: Some cultures consider that a child becomes an adult at the onset of puberty. Remember, UNICEF’s definition is a child is anyone under the age of 18 years.  Unaccompanied child: Some cultures interpret this as any child who is not accompanied by a man (even if with a female family member).  Head of household: Is unclear for many on whether this is the economic-head of the household, or the oldest family member, the care-giver, the decision-maker or a combination of several of the above.  “Association” with armed groups. What does association mean? Is it fighters? Is it also cooks/cleaners?  Protection: usually understood as “close protection”, “security” or “safety”.  In several countries, we tried including glossaries in the enumerator package, however it did not work. You need to write the questions clearly and simply in the question text. It is advised to have national staff check the language for clarity. For example, asking “are there unaccompanied children in this location” to a key informant, and having the definition in a glossary, doesn’t work. The question needs to be worded “are there any children under 18 years here, without their mother or father or any other adult family member?”. As it is in the DTM Field Companion for Child Protection, available in English and French on the DTM and Partners Toolkit page. |
| Slide 46: A final tip to consider when designing the questionnaire: Check questions with national staff for risk assessment/ sensitivity. Culturally, we may not know what is taboo. In Iraq for example, we could ask about armed persons in or near the camps, but the question on pregnant and lactating women was very hard for the enumerators to ask, and probably did not give us very good data. |
| Slide 47: a tip to consider when choosing source and method: Can I obtain more ACCURATE data from another source and method? Does the method match the data-need: WHO is being interviewed? Ask yourself:   * + Are they k**nowledgeable about the subject matter (**for example, are you asking a male key informant whether girls have barriers to accessing healthcare)?   + Are they **connected enough to the persons of concern** to answer on their behalf (for example, would a municipal representative know how many internally displaced persons don’t have their identification documents?)   + Are they **biased** (for example, if I ask about child marriage, will they answer honestly?)   + On whose behalf are they answering? Their own? Their group? Their community? As professionals? And CAN they answer the question? (For example, are you asking a question that should be asked at household level?).   This leads us to: Can we obtain the data from a more reliable source?   * + Prevalence data on violence against children and child marriage can be obtained from a national census or the World Health Organization. For example, a national census may estimate that 15 % of girls and 10% of boys are married before they reach 18 years of age. This is enough to prove that there is a vulnerable group that requires help. |
| Slide 48: Plan for analysis and prepare mock-ups (simulations) or results using fake data.  A draft outline of the final product(s): report-template with headlines, description of visuals, requested maps, etc., will ensure that you will know how to analyse the data that you will get, and will enable you to double check that the question is worded correctly to provide you with the information you need.  Examples:   * **Libya** : the child protection team in UNICEF had wanted a question that requested a key informant to rank their top 3 concerns, however once they saw the mock-up, they didn’t know how to analyse data that was ranked. * **Bangladesh** : the reporting and visuals designed didn't meet the expected outputs * **Mozambique:** A household assessment in Mozambique was implemented, and UNICEF requested that a question be included that stated “which of the following symptoms of stress/trauma are experienced by a child or children in your household”, and the response options listed the symptoms of stress trauma like “headaches, crying etc”. When the data collection was complete, they wanted to know how many children were affected by symptoms of stress/trauma, however that was not the question we had asked. We had asked about the types of SYMPTOMS, not HOW MANY CHILDREN in the household were experiencing the issue. So, we could tell them how many households had at least one child experiencing symptoms, and the % of symptom types experienced. |
| Slide 49: Agree on sharing quickly Data Requiring Urgent Action: For examples of Urgent Action data - # unaccompanied children (Nigeria). Reference to Interagency Data Sharing Guideline on the DTM and Partners Toolkit, under “data sharing guidelines” (<https://displacement.iom.int/dtm-partners-toolkit/data-sharing-guidelines>). |
| Slide 50: Prepare for Protection Incident Disclosure: this is more than a tip: we must do this in our planning. There is a whole session on how to safely respond to incident disclosures – but it is important to remember here that **enumerators should be equipped to respond to incidents disclosures** and need the support from Protection colleagues in referring to services. They should be ready to know how to safely respond to incidents disclosures **before they go to the field.** It means **knowing what to do and what NOT to do, and having the up-to-date information to share on available services, and know who to reach in the protection team for advice if needed.**  **There is a training for coordinators, Protection, GBV staff and also a training for enumerators on the DTM&Partners Toolkit, as well as a handout on safely responding to incidents disclosures during data collection. In addition to** *a 4 min video on Responding to Disclosure of a GBV Incident -* [*https://www.youtube.com/watch?v=n\_YhXzMv1E4*](https://www.youtube.com/watch?v=n_YhXzMv1E4) *]*  *[More resources: guidance Document "Urgent Action Process Guideline for DTM on the DTM and partner toolkit ]* |
| Slide 51: Let us now look at a lesson learned on using data: Not all data are for publishing, and not all data are to be used in the same way. For example, some data can be used as alerts, but not published as their accuracy is not likely. An example is data on number of unaccompanied minors collected through KII. These are Red-flag data, i.e., data that should trigger a closer look. Because a key informant is not a child protection specialist who has interviewed all of the children in a site, they cannot know how many unaccompanied children are in their area. They can give an ESTIMATE which is a red-flag of a potential issue and share with CP officers to follow up on through field visits. These data should not be published nor used as accurate.  Examples:  - In Baghdad, all requests were received by email, with a clear description of how the data would be used before sharing. An SOP was also signed by the recipient  - In Ethiopia, data that was meant to be a “red flag for follow up” was published. The result was that the donor saw it and said, “protection is clearly not an issue so we will cut your funding” |
| Slide 52: more guidance and help is available on the DTM&Partners Toolkit website, under DTM for Child Protection:( <https://dtm.iom.int/dtm-partners-toolkit/guide/dtm-child-protection>) and on the AoR website. |

## Conclusions

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| Slide 53: and now let us conclude |
| Slide 54: Remember: CP Programming in Emergencies focuses on preparedness, prevention and response to protect children from Abuse, Neglect, Exploitation & Violence; **Data** is **not the same** as ***number***: CP analysis needs data on access to goods & services,  underlying factors, dynamics of CP risks, resources of communities, and more; Key Informants can provide information on population figures, Red Flags, availability of services and proxy indicators for CP; Each method /Source provides some data, but not all. Analysis must be complemented with data obtained through other methods /sources. |
| Slide 55: You can contact HQ IOM support on Child Protection, IM & DTM: Shannon Hayes |
| Slide 56: Did we reach our Objectives? Check with participants if, at the end of this module, they feel able to:   1. Identify common information needed by Child Protection colleagues and what methods and sources you can use? 2. List some Tips for better cooperation between IM, DTM and Child Protection 3. Know who to ask for help on challenges related to Data, Analysis and Child Protection |
| Slide 57: Goodbye, see you at the next webinar, on XXX, on this date (XXX) |