# *DTM for Children on the Move*

# Using DTM Data for the Child Protection Area of Responsibility

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| **Information /Assessment Category** | **How DTM data can contribute to CP programme planning/coordination/response** |
| *Population Data* | Can be obtained from location master-lists, flow monitoring registry, event tracking, registration data.  Population data from DTM can be used to determine the scale of a humanitarian emergency for situational analysis, to obtain estimated sex and age disaggregated data (SADD) and vulnerable groups\* for strategic planning, to prioritize CP assessments and protection monitoring in locations with high numbers of IDPs/migrants, and to trigger response or surge capacity in areas with sudden increases in the number displaced/transiting people.  The following DTM data can be quoted numerically in reports and should reference DTM as the data-source:   * # of people in transit (keep in mind that this is an estimate) * # of migrants/IDPs * # of informal and formal sites * SADD   \*DTM population data from mobility tracking, flow monitoring registry and event tracking are normally obtained from key informants. Data from key informants on the number of people within vulnerable groups (such as unaccompanied children) are estimates and should be triangulated with other data sources before being quoted numerically or used for strategic and programmatic planning. |
| *Needs Assessments* | **DTM data cannot replace CP sectoral assessments.** Questions on humanitarian service provision in location assessments may be used as a high-level snapshot of the evolving humanitarian context/situation, and to help identify services gaps and unmet humanitarian needs for strategic planning and response coordination. Using DTM CP proxy indicators and integrated analysis can help to select priority locations for CP assessments or protection monitoring, and can serve as an early warning trigger for a situational change significant enough to merit a CP assessment. DTM data cannot be used as a standalone tool for understanding the underlying causes and types of CP violations. |
| *Protection Monitoring* | * **DTM does not collect protection incident data**. It is possible however, that a protection incident may be disclosed to DTM field staff. It is therefore important to ensure that DTM is informed of established referral pathways, of available response services in areas without a referral pathway, and that DTM enumerators receive training on what to do if an incident is disclosed to them. The GBV Pocket Guide: <https://gbvguidelines.org/en/pocketguide/> may provide you and DTM with more information on how DTM field staff should respond to disclosed incidents in areas where there are no established referral mechanisms. * DTM master-lists, coupled with service mapping (DTM location assessments or 4w) assist in identifying locations for prioritization of where protection monitoring should be implemented. * DTM flow monitoring reports may trigger specialist monitoring mechanisms when transit routes traverse areas controlled by known perpetrators of violations.   DTM does collect data on select child protection and protection risks through regular rounds of location assessments and flow monitoring surveys. Although this data collection is not protection monitoring, the information and trends that it captures can be used to indicate changes in the context affecting protection for situational analysis, and as a red-flag for specialist protection monitoring. |

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| *Case Management* | * DTM is not a technical partner for case management, however may refer survivors/victims who choose to disclose their experience, as outlined above. * DTM master-lists, coupled with service mapping (DTM location assessments and 4w) assist in identifying locations that should be prioritized for setting up referral mechanisms and case management services, and provide alerts to large influxes of populations requiring the scale-up of case management intake capacity. |
| *Protection response monitoring (4W/HRPs)* | * DTM does not collect data to monitor non-IOM programmatic response, and therefore cannot contribute to HRPs.   At the beginning of an emergency response when the 4W has not yet been established however, if DTM is operational, they may collect information on service-provision at location-level (through Location Assessments) to assist the humanitarian community to map service gaps. This data maybe triangulated with 4W data to determine if key informants are aware of available services, and to compliment the 4W with available services provided through the private sector or the Government. |
| *Situation Analysis*  *HNOs* | * **DTM data cannot replace CP assessments.** It can however be used as a high-level snapshot for ongoing context/situational analysis, service provision gaps and needs identification for strategic planning. It can also help to select priority sites for CP assessments based on proxy indicators for increased CP and GBV risks, and serve as an early warning trigger for a change significant enough to merit an updated assessment. DTM can provide: * DTM population data can be quoted **numerically** to ***report on the scale*** of a crisis: displacement + # in host community can roughly provide the # of persons in need, demographic breakdown, and displacement trends. Note: whether to quote numbers of vulnerable groups must be determined on a case-by-case basis, based on perceived reliability of the information vis-à-vis potential programmatic and reputational impact of quoting incorrect numbers. * Other DTM data can be used for descriptive and interpretive analysis to ***describe the impact*** of the crisis in narrative form: description of evolving situation, needs and heightened protection risks faced by an affected population and vulnerable groups. |
| *Protection Mainstreaming* | DTM data may help CP specialists ensure that the following protection mainstreaming elements are taken into consideration in humanitarian activities:   * **Prioritize safety & dignity, and avoid causing harm:** Location assessments may include multi-sectoral data on proxy-indicators for CP risks (such as whether there are locks on toilets, lights in camps, high-risk shelter types, issues with distance or process to access goods/services, etc). * **Meaningful Access:** Location assessments and flow monitoring surveys may include questions on barriers to accessing goods/services.   When working with DTM to incorporate questions into a location assessment to ensure that protection has been mainstreamed in DTM questions for other sectors, reflect on how you will use the data, and whether humanitarian actors in other sectors are already collecting this data through other mechanisms. |
| *Accountability to Affected Populations* | * DTM location assessment may provide data on reported priority community information needs, as well as available technology/preferred communication tools for community outreach. * DTM location assessments collect information on available services, which can be triangulated with the 4W to see if key informants are aware of CP response services that are available in their sites/locations. * DTM flow monitoring surveys may provide information on the ethnic and linguistic profile of the target population to enable planning of appropriate programmes and communication materials.   The above is not always collected in location assessments. There are however, useful questions in the Field Companion: <https://dtm.iom.int/dtm-partners-toolkit/field-companion-sectoral-questions-location-assessment> of the DTM & Partners Toolkit, which may be used for location assessments. Speak with the DTM coordinator if the above is an information priority for the CP AoR and partners. |

*For more tools and information on integrating CP into the DTM, visit the DTM Partners Toolkit:* [*http://dtm.iom.int/dtm-partners-toolkit/*](http://dtm.iom.int/dtm-partners-toolkit/)

*Want help on integrating CP into DTM systems, or analyzing DTM data for CP? Contact the inter-agency helpdesk:*

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