STRENGTHENING COMMUNITY-BASED CHILD PROTECTION REFERRAL PATHWAYS
A Resource Manual
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PURPOSE

ChildFund has commissioned this manual as a guide for community groups to create and strengthen a Child Protection Referral System to put into practice the principles of a country’s existing laws, policies, and procedures. Strengthening a Child Protection Referral System, at its most fundamental, means that leaders and practitioners take a broad view of how, when and why they will intervene where a child’s safety is concerned and make the necessary decisions on how to act. When a community cannot prevent the cause of the concern, a decision must be made to seek help from others who may be better trained to take action when a concern is raised. In brief, this means that community leaders and child protection activists need to create alliances together and with others who may be better able to prevent escalation and ensure an appropriate response in order to protect all children.

The goal of this manual, then, is to support community groups to strengthen child protection systems by creating a Standard Operating Procedure (SOP) that will define an approach and response mechanisms to coordinate between children, communities and support agents. An SOP creation process will help define roles, responsibilities and relationships between the different people involved in the system. It will also help recognize a need and make decisions on how to handle different child protection concerns. The SOP will give details of the process involved in each step of managing an abuse case, a process for working with children, and also provide a system for managing information that can assist communities in analyzing their own child protection patterns and needs. Specific activities in the SOP process will include establishing key roles, responsibilities, guiding principles, thresholds, and procedures for prevention of and response to protection issues. Thus, this manual will guide you through the process of strengthening your child protection system that is targeted specifically to your community, its needs, your own contacts, and your capacities. SOP creation is a process that involves consultation and deliberation with relevant actors from various sectors (health, social welfare, law enforcement, etc.) within a designated location. So, while each SOP creation experience will be unique to your location, all SOPs should promote cooperation, collaboration, and clarification across these networks through structured activities.

The manual designers also recognize that not all communities are ready to develop an SOP or have the necessary access to support services. Thus, each individual chapter can be used as a stand-alone module to assist communities to strengthen their own child protection systems, one step at a time. Strengthening of community-based child protection systems starts with a focus on the child and the family, and broadens out to include community and kinship groups, traditional authorities, and mediation structures — all of which play an important role in strengthening a child protection system. This process also embraces other actors, such as non-government organizations involved in work at local levels together with government authorities and agencies that provide support services. Local culture, tradition, knowledge, attitudes and practices shape how these different actors work together at the community level to prevent and respond to protection risks. Patterns of socialization, approaches to child-rearing, expectations toward your own children, gender roles, and the relationships between children and adults also influence these vital interactions. Thus, the first module of this manual begins with exercises to understand community concepts of child protection within global and local child rights frameworks.
The manual uses a participatory approach that attempts to define what communities themselves prioritize and need for their children. Facilitators are encouraged to understand that different people have very different understandings of universal child protection and child rights issues. Differing attitudes and understanding must not prevent participants from taking the lead in strengthening their child protection systems and designing their SOPs. Where there is a gap between universal ideals and principles and specific practices on the ground, community structures can become an essential bridge, opening opportunities for increased access to multiple child-rearing practices that can potentially lead to greater effectiveness in achieving positive outcomes for children and families.

**WHAT IS THIS MANUAL?**

This manual was designed to help strengthen capacity among community-based child protection mechanisms and key stakeholders responsible for preventing and responding to child protection concerns. Community-based child protection mechanisms go by different names in different country contexts — including Community-Based Child Protection Committees (CBCPC), Child Protection Volunteers (CPV), and Child Welfare Committees (CWC), — but they share a common concern for improving the quality of life for children in their community. Thus, the manual uses a systematic approach that builds contextual awareness in order to address the priority problems mentioned by participants. Surveillance, coordination, response and prevention are then the focus of an SOP design process that builds on existing resources and strengthens the linkage between community, family and child relationships with the relevant referral stakeholders. It is a collaborative process from beginning to end.

This manual aims to:

- Engage communities to derive background information on and define child protection risks based on, and distinguishing between, local knowledge, attitudes and practices and the broader legal framework.
- Present steps and guiding standards supported under a legal framework to build the capacity of community bodies responsible for child protection.
- Promote collaboration in the standardization and design of clear plans of action for intervention in cases of abuse, neglect, exploitation, or violence against children that will strengthen the community’s child protection system.
- Equip communities to deepen their collaboration with and trust for a wider range of key stakeholders in prevention and response, beyond the capacity of the community itself.
- Support community and other stakeholders to monitor and develop their own capacity in Child Protection and adapt and build their referral mechanisms as their own skills and capacities improve.
- Guide child protection groups through the processes of designing a referral network and developing an SOP to meet and strengthen their own Child Protection requirements.
- Ensure focus is guided toward not just response but also surveillance, prevention and coordination of a broader, better-targeted child protection system.

**WHO SHOULD USE THIS MANUAL?**

The manual was created for ChildFund partners, field staff, and technical officers that may facilitate and support efforts by communities to strengthen child protection referral pathways, or ways of strengthening community based child protection committees through creating links with other child protection resources in a community or district. The manual will also be useful for Country Directors, Program Managers, and regional and headquarters personnel as a way of supporting the partnership and capacity building work being done in ChildFund’s global child protection and referral system strengthening practice area.
Local child protection groups will engage with some or all of this manual, depending on local context and support needs. While it is envisioned that a facilitator will introduce the manual, through a combination of practice, skill building, and familiarity, those areas with strong enough facilitators may complete several modules through entirely community-driven processes that do not require an outside facilitator. Who and how facilitation is accomplished should be planned ahead of time with ChildFund partners.

How to Use This Manual

No manual could possibly address all the needs of all ChildFund child protection systems strengthening work worldwide. Nor is it possible for many people to take a week to attend a workshop. Thus, the manual provides a framework from which facilitators can pick and choose how long to run a workshop and what skills to emphasize.

For this reason, the manual is designed as seven stand-alone participatory workshops, where facilitators and community child protection volunteers can learn to collaborate on design of a local system-strengthening approach, and subsequently how to connect their efforts to district, county, or national child protection allies through robust referral pathways. Each module takes on a topic of significance to the process:

- Why we need a child-focused protection system
- Understanding international and local legal frameworks, policies and procedures
- Context-based needs analysis
- Assessing risk
- Mapping stakeholders
- Community engagement
- SOP creation

Each topic can be entirely participant-led and directed to ensure its relevance and to maximize community ownership of processes and results.

Follow-Up Activities: At the end of each section there is a series of no-cost activities that will assist participants to further investigate or implement the issues raised during the workshop. Follow-up is, in many respects, more important than the actual workshop because:

- Training is not an end in itself. It should be a continuous process to strengthen the capabilities of the trainees.
- We can see the real impact of training activities in the changed behavior, improved quality of life and active stake in community activities on the part of participants.
- Training is a vehicle for empowerment and transformation. It must be linked to everyday life of the participants and not to ideals discussed in a classroom.

Consider each activity an opportunity for expanding ideas and allowing communities to recognize possibilities for change – at their own pace. Ideally, if a one-day workshop is held once a month, participants have time to work on the lessons and try the follow-up activities over seven months. This approach minimizes investments (time, costs) and maximizes practical application of materials learned in between lessons. The materials provided here are not time-bound. They should comprise a continuous learning and self-analysis opportunity.

What Is a Standard Operating Procedure?

A Standard Operating Procedure (SOP) is a system of clearly defined processes that explains the approved conduct and actions to be followed for managing child protection issues. The SOP will clarify and standardize the steps that give direction to the agencies and community volunteers involved in child protection. Most Child Welfare Authorities, the Ministries of Social Development, Health, Education, and non-governmental agencies often have a child protection protocol that governs who and how to interact with children in ways that ensure no harm and how to respond to assist a child where harm is reported to have occurred. The SOP creation process followed here will assist child protection volunteers at community levels to
collaborate and clarify how they will interact with children as well as these formal agencies. This is achieved as a participatory collaboration aimed at encouraging as much sharing and cooperation as possible.

The process designed within this manual will assist your community group to identify and create links with the more formal support services, as it will promote strengthening the comprehensive and effective management of your child protection needs. In this regard, we should note that among the participating agencies involved in the referral pathway, the mandates of each agency are expected to be respected, overlapping areas of activities among professionals acknowledged, and partnerships expanded to more effectively meet the needs of children, families and communities.

In short, the child protection response and referral procedures that are developed at local level are guidelines and NOT a definitive answer to the larger challenge of strengthening the overall child protection system. It provides solutions for addressing child protection issues defined at the local level by local actors. This guide can also help field staff to facilitate awareness on the protection needs of children and simple steps for community-based child protection groups and committees to play a part in addressing them. These modules can be done respecting local customs and through participatory face-to-face processes. When the local volunteers have completed some exercises and developed a certain comfort level and confidence, later modules will require the inclusion of local social workers, health workers and police as a step toward building collaborative relationships.

A number of countries around the world are actively promoting the development or strengthening of referral systems as a means to achieve more effective and efficient child protection responses. Nevertheless, there remain many areas where community awareness of children protection is low and where child welfare and protection services and supports do not reach. Children living in such situations are particularly vulnerable to harm as there is both low recognition of their rights and also a lack of support and protection by duty bearers. Development of a referral system can be a beneficial process to address these gaps as it brings focus on the protection needs of children and the benefits of having an organized, enabling, holistic strategy to address them. It also highlights ways that strategic partnerships can increase protection for children through building new alliances, supporting localized approaches and encouraging multi-sectoral collaboration. For a child protection referral pathway initiative to work, a parallel goal must be to improve the protective environment by simultaneously addressing the risk factors through broader NGO collaborations.

GUIDING PRINCIPLES OF CHILD PROTECTION

This manual is informed by a set of principles that derive from the Child Rights and Child Protection legal frameworks:

- All children have a right to be safe at all times and everybody has a responsibility to support the care and protection of children;
- All children should be encouraged to fulfill their potential and inequalities should be challenged;
- All children have equal rights to protection against abuse, neglect, exploitation and violence.

Advocacy:

As one link in a referral pathway, all members should work with children and families in a way that enables them to be empowered to take responsibility for their own lives. This may include advocating on behalf of the child and family to get access to services. Wherever possible children and families should be actively involved in this process, so that once the case is closed, they are able to advocate for themselves and obtain any support services necessary to gain independence.
Best Interest of the Child:

The ‘Best interests’ principle sets out that measures must be taken to assess the factual and relevant elements of a case in light of the specific circumstances of a particular child to determine their best interest. Essential elements include ensuring the meaningful participation of the child and taking account of the child’s views giving these due weight according to age and maturity of the child (CRC article 12); taking note of the unique identify of the child (CRC article 8); upholding the child’s right to family life (CRC article 16) and its preservation (CRC article 9), assessing the child’s health condition and situation of vulnerability such as disability, street involvement, minority status as well taking into consideration the impact of any decision for ensuring the overall child well-being, protection and development.

Applying a ‘best interest’ approach means you must not do anything, or allow someone else to do anything that you have good reason to believe puts the safety, integrity or wellbeing of a child at risk, in the immediate or long term.

Child Rights:

Child Rights principles as defined in the Convention on the Rights of the Child (CRC) and other human rights treaties will inform the overall development and implementation of a child protection referral mechanism. CRC guiding principles would thus be reflected in the operation of a rights-based referral system through adherence to:

1. The definition of a child as any human being under the age of 18 years;
2. Non-discrimination;
3. Safeguarding the child’s right to life, survival and development;
4. Advancing the best interest of the child; and
5. Ensuring the child’s right to be heard and participate in matters affecting her/his life.

Confidentiality:

Social workers, case managers, support agencies and medical staff will have access to a considerable amount of personal information relating to the children, families and caregivers who use the referral system and relevant services that are linked to it. It is expected that staff will treat this information in a discreet and confidential manner and that information will only be shared with others on a ‘need to know’ basis.

An essential part of confidentiality is a trust-building process. To be successful as a member of the law enforcement or a social worker engaging with a child who is alleged or con- firmed to be a victim, you must first gain the trust of the child. You will need to gather various types of information from the child, but, without trust, this information will never be shared with you. Trust is the most important building block in confidentiality.

Do No Harm:

Do No Harm is based on the Hippocratic maxim, “First, do no harm”; in other words, that efforts must be made to minimize possible negative effects and maximize possible benefits. It is the responsibility of those engaged in addressing cases of child abuse, neglect, and violence to protect children from harm, and also to ensure that they experience no further harm by actions that are taken on their behalf.

Here are six steps to ensure that data (verbal and written) is kept confidential and protected in gathering information:

1. Disclose identities of those involved only on a need-to-know basis
2. Make all records and reports anonymous
3. Keep records secure and accessible only to appropriate persons
4. Conduct Interviews in a location that ensures identities will be protected
5. Ensure informed consent of the child or the parent/caregiver if necessary
6. Determine the Best Interest of the Child when gathering information
Effective Communication

All those involved in child protection systems must take all reasonable steps to make sure that they can communicate properly and effectively with children and families. This includes using simple language and not jargon. It also means that the preferred language of the child should be used as far as possible in all communications with the child. Where children speak a language that the interviewer does not speak, consideration should be given to use of interpreters. This may be especially important where children have moved from one part of the country to another, or have come from another country.

### DEFINITIONS

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<td>Abuse</td>
<td>Child abuse is a deliberate act of ill treatment or omission that can harm or is likely to cause harm to a child's safety, wellbeing, dignity and development. Abuse includes all forms of physical, sexual, psychological or emotional ill treatment and results in harm: Harm can take many forms, including impacts on children's physical, emotional and behavioral development, their general health, family and social relationships, self-esteem, educational attainment and aspirations for the future.</td>
</tr>
<tr>
<td>Case Management</td>
<td>The process of assisting an individual child (and their family) through direct support and referral to other needed services, and the activities that case workers, social workers or other project staff carry out in working with children and families in addressing their protection concerns.</td>
</tr>
<tr>
<td>Child</td>
<td>The UN Convention on the Rights of the Child defines a child as any person under the age of 18, unless under the law applicable to the child, the age of majority is attained earlier. In US immigration law, a child is anyone under 21.</td>
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<tr>
<td>Child’s guardian</td>
<td>A person who has been formally recognized under national law as responsible for looking after a child’s interest when the parent/caregiver of the child does not have parent/caregiver responsibility over him or her or has died.</td>
</tr>
<tr>
<td>Child labor</td>
<td>Any work performed by a child which deprives children of their childhood, their potential and their dignity and that is detrimental to his or her health, education, physical, mental, spiritual, moral, physical or social development. The concept of child labor is based on the ILO Minimum Age Convention (No.138), which represents the most authoritative international definition of minimum age of admission to employment or work, while ILO Convention 182 prohibits the Worst Forms of Child Labor defined as all forms of slavery and slavery-like-practices such as child trafficking, debt bondage, forced labor including recruitment of children into armed conflict. It also prohibits the use of a child for prostitution, pornography, drug production and trafficking and in hazardous work.</td>
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<tr>
<td>Child marriage</td>
<td>Also referred to as early marriage, this term refers to any marriage carried out below the age of 18 years, before the girl is physically, physiologically and psychologically ready to shoulder the responsibilities of marriage and childbearing, in accordance with Article 1 of the Convention on the Rights of the Child.</td>
</tr>
<tr>
<td>Child protection</td>
<td>The prevention of and response to abuse, neglect, exploitation and violence against children.</td>
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<tr>
<td>Children without parent/caregiver care</td>
<td>All children not living in the overnight care of at least one of their parents/caregivers, for whatever reason and under whatever circumstances. Children without parent/caregiver who are outside their country of habitual residence or victims of emergency situations may be designated as unaccompanied or separated.</td>
</tr>
<tr>
<td>Community Based Child Protection Mechanism (CBCPM)</td>
<td>CBCPM are all the those structures in the community that function to protect children (prevent school drop-out, child marriage, promote registration etc.).</td>
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<tr>
<td>Community Based Child Protection Committee (CBCPC)</td>
<td>The CBCPC is the child protection group or committee that focuses on prevention and response to abuse, neglect, violence and exploitation. These are also called Child Protection Committees or CPC, or Child Welfare Committees or CWC.</td>
</tr>
<tr>
<td>Coordination</td>
<td>Coordination: Working together in a coordinated manner to make the best use of time and resources and to ensure that children are receiving adequate help. This is an important function of a child protection committee. Members can work together with others in the community to ensure that resources and services are coordinated to ensure that children are getting the help that they need.</td>
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<td>Discrimination</td>
<td>Bias or prejudice resulting in denial of opportunity, or unfair treatment. Discrimination is practiced commonly on the grounds of age, disability, ethnicity, origin, political belief, race, religion, and gender — factors that are irrelevant to a person’s competence or suitability.</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>A pattern of ill treatment behavior by parents or caregivers that affects the child’s emotional development and psychological wellbeing and includes active abuse demonstrated through humiliating and degrading treatment (e.g. name-calling, constant criticism, belittling, persistent shaming, confinement and limiting social contact and interaction with peers and others or engaging in developmentally inappropriate interaction with the child, and by indifference or the unavailability to provide love and meet needs of the child. Emotional and Psychological maltreatment is characterized by patterns of harmful interactions, requiring no physical contact with the child in a manner that is harmful or insensitive to the child’s developmental needs or can potentially damage the child psychologically or emotionally.</td>
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<tr>
<td>Exploitation</td>
<td>The coercion, inducement, tricking or leading of a child into harmful activities that bring someone else advantage, gratification or profit, such as in child labor, sexual exploitation and trafficking, resulting in treatment that violates the child’s rights and is detrimental to her/his physical and mental health, education, and social-emotional and spiritual development.</td>
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<tr>
<td>Female genital mutilation (FGM)</td>
<td>Female genital mutilation (also referred to as cutting) refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for nonmedical reasons</td>
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<tr>
<td>Gender Mainstreaming</td>
<td>The process of assessing the implications for women and men, girls and boys of any planned action, including legislation, policies, or programs, in all areas and at all levels. It is a strategy for making women’s, as well as men’s, concerns and experiences a dimension of the design, implementation, monitoring and evaluation of policies and programs in all political, economic, and societal spheres so that women and men benefit equally and inequality is not perpetuated.</td>
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<tr>
<td>Neglect</td>
<td>Persistently failing to provide for, or secure for a child, their basic physical, developmental or psychological needs, whether deliberately, or through carelessness or negligence. Neglect is sometimes called the ‘passive’ form of abuse, as it relates to the failure to carry out some key aspects of care and protection resulting in the impairment of the child’s health or development. It may include unresponsiveness to meet the child’s most basic emotional needs. Neglect does not include situations of poverty, where a parent/caregiver cannot afford to provide for their child but is trying to do so.</td>
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<tr>
<td>Orphan</td>
<td>An orphan is a child, both of whose parents/caregivers are known to be dead (double orphan). In some countries, however, an orphan is defined as a child who has lost one parent/caregiver (single orphan).</td>
</tr>
<tr>
<td>Palava Hut</td>
<td>A designated area where community members gather to deliberate conflicts, issues of concern, etc., until an amicable solution is found. State social workers facilitate through the same method. Palava Huts are common in Liberia, and many other locations in Africa.</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>The use of physical force to cause actual or likely physical injury or suffering (e.g. hitting, shaking, burning, torture, stoning, etc.). Physical abuse can take place in the home, the community and in schools.</td>
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<tr>
<td>Policy</td>
<td>A policy outlines the principles, strategies, methods, a course of action and other factors necessary to influence and determine decisions, actions, advance the goals of a government or an organization on a particular matter.</td>
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<td>Prevention</td>
<td>Through awareness of child protection issues, communities are mobilized to take action to mitigate and prevent abuses, based on available resources. Awareness and conscientization are developed through a sustained community dialogue that supports community members to transform their attitudes, challenge harmful social norms, strengthen positive actions for children, take action based on common solutions and use community resources.</td>
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<tr>
<td>Procedure or Protocol</td>
<td>The terms procedure or protocol are the documents or steps that give clear instructions on what action is to be taken, when and by whom to put a policy into practice. It must be supported by adequate supervision and training.</td>
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<tr>
<td>Psychosocial Support</td>
<td>The broad array of processes and actions that help individuals and communities to heal the psychological wounds and rebuild social structures after an emergency or a critical event. It includes support provided by family, friends and the wider community as well as formal programs by NGOs or government agencies that can help build resilience and coping mechanisms.</td>
</tr>
<tr>
<td><strong>Referral Network</strong></td>
<td>While a referral system may exist at the national level, referral networks tend to be contained within smaller geographical areas, such as districts. Referral networks consist of a group of service providers that refer clients to one another. Referral networks operate in smaller geographic areas so that clients can readily access the network’s services; thus, a national referral system usually comprises various district-level networks, and ideally creates linkages to the national system.</td>
</tr>
<tr>
<td><strong>Resilience</strong></td>
<td>The capacity of children and their families to recover from adversity and crisis, influenced by individual characteristics and external factors like: diversity of livelihoods, coping mechanisms, life skills such as problem-solving, the ability to seek support, motivation, optimism, faith, perseverance and resourcefulness.</td>
</tr>
<tr>
<td><strong>Child Protection Response</strong></td>
<td>The process by which a report of child abuse, exploitation, neglect and or violence is assessed and response determined to meet the needs of the child including urgent action to ensure safety if the child is in imminent risk of serious harm. Committees and other community members, such as religious leaders, teachers, neighborhood groups, can provide support to children and families including with referral to services and mobilize responsible actors to ensure justice and restitution.</td>
</tr>
<tr>
<td><strong>Separated child</strong></td>
<td>A child who is separated from both parents/caregivers or from his/her previous legal or customary primary caregiver, but not necessarily from other relatives.</td>
</tr>
<tr>
<td><strong>Sexual Exploitation of children</strong></td>
<td>Sexual Exploitation constitutes a form of violence and misuse of a position of power to threaten, induce, trick or coerce a child into sexual activity for the benefit of the perpetrator.</td>
</tr>
<tr>
<td><strong>Standard operation procedure (SOP)</strong></td>
<td>SOPs should define roles, responsibilities and relationships between the different people involved in the referral system, and how to handle different child protection concerns. They should give details of the process involved in each step of managing a case, the service mapping, and referral system, the method and process for working with children, and the system for managing information.</td>
</tr>
<tr>
<td><strong>Surveillance</strong></td>
<td>Collecting information about the situation of children in the community through receiving reports, monitoring and identifying particular vulnerable children. Other stakeholders also have this role. For example, religious institutions (e.g. mosques or churches) may make home visits to check on the situation of children in their homes. Teachers and school monitors should be able to recognize and report concerns.</td>
</tr>
<tr>
<td><strong>Threshold</strong></td>
<td>Broadly, the term “threshold” is used in the child welfare and child protection context to refer to a child’s and/or family’s entry into, and progression along, several points in the service continuum. For example, there is said to be a “threshold” at which a community sees the need to investigate and/or intervene on a report of abuse (e.g., monitor or manage internally) and a “threshold” at which a community or CBCPC will determine that a situation involves circumstances that require statutory intervention (e.g., an external referral to health, social affairs or legal services).</td>
</tr>
<tr>
<td><strong>Trafficking</strong></td>
<td>Recruiting, transporting, transferring, harboring or receiving a person through the use of force, coercion or other means, for the purpose of exploiting them. For example, a child has been trafficked, if he or she has been moved within a country or across borders, whether by force or not, with the purpose of exploiting the child.</td>
</tr>
<tr>
<td><strong>Violence</strong></td>
<td>All forms of physical or mental injury and abuse, neglect, or negligent treatment, maltreatment, or exploitation, including sexual abuse or the intentional use of physical force or power, threatened or actual, against a child, by an individual or group, that either results in or has a high likelihood of resulting in actual or potential harm to the child’s health, survival, development, or dignity.</td>
</tr>
<tr>
<td><strong>Vulnerability</strong></td>
<td>The physical, social, economic and environmental factors or processes that increase the susceptibility of a community or individuals to difficulties and hazards and put them at risk as a result of loss, damage, insecurity, suffering and death. Vulnerability is specific to each person and each situation.</td>
</tr>
</tbody>
</table>
STRENGTHENING COMMUNITY-BASED CHILD PROTECTION PATHWAYS

MODULE 1. HOW HEALTHY IS OUR CHILD PROTECTION SYSTEM?

In this introductory module we will cover the following topics:

• Analyze several case studies to examine participants’ capacity to recognize and respond to child protection concerns
• Start to develop a framework through which to strengthen community approaches to child protection
• Briefly analyze participants’ own child protection mechanism and its links beyond the community
• Review cultural traditions, knowledge, attitudes and practices toward children and participants’ understanding of child needs
• Examine why children need to have a voice in a child protection mechanism

As a Child Protection volunteer, your committee has accepted responsibility for a set of tasks. When a problem such as Jojo’s arises, you are faced with issues and questions that may require action.

Over the next several months/meetings, we will collaborate to improve the way you collectively manage these child protection issues that arise in your community. We will, together, clarify and standardize the way your local child protection committee functions. The table below will attempt to simplify and organize the steps taken by dividing them into categories:

Case Study: Jojo needs your help

Jojo is 8 years old, a helpful boy, living in a rural area in Ethiopia. He goes to school when the farming season allows. He is a dedicated learner. His father was injured in a mining accident and cannot work. He has started drinking since the accident and often comes home very drunk. He beat his wife who then ran away with her baby. Now he is beating Jojo. Your son, a schoolmate of Jojo’s, told you about this.

<table>
<thead>
<tr>
<th>SURVEILLANCE</th>
<th>COORDINATION</th>
<th>RESPONSE</th>
<th>PREVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>How will you find out about Jojo’s problems?</td>
<td>Who will inform you?</td>
<td>How will you talk to Jojo’s father without increasing the threat for Jojo?</td>
<td>How will you prevent such problems from occurring again?</td>
</tr>
<tr>
<td>What will you do based on a report?</td>
<td>How strong is your community information or monitoring network?</td>
<td>Who will you contact to help you intervene?</td>
<td>How aware is the community that this is a child protection issue and how can you raise awareness?</td>
</tr>
<tr>
<td></td>
<td>How will you analyze and weigh all the different information you receive</td>
<td>Can/should it be managed by the community?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Must you seek other external, professional help?</td>
<td></td>
</tr>
<tr>
<td>Are you aware of patterns and causes of child protection issues?</td>
<td>Who else in this community is able to help decide on an appropriate response?</td>
<td>If Jojo’s father apologizes and says he won’t do it again, what will you do?</td>
<td>Is there an awareness-raising program in your community?</td>
</tr>
<tr>
<td>Are you strengthening your protective environment?</td>
<td>How strong and reliable is your child protection network of responders?</td>
<td>If Jojo’s father throws you out of his house, what will you do?</td>
<td>Is there a peer support network for children?</td>
</tr>
</tbody>
</table>

With your group, try and answer the questions raised in table 1. Based on your answers, what additional questions arise?
Let’s take a deeper look at some of the essential questions that will help us to recognize the steps required for responding to a child facing a threat.

**Table 2: Standardizing the Steps to Response**

<table>
<thead>
<tr>
<th>Step</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Hear a report</strong></td>
<td>Who in your network will inform you? If most people in your community do not have mobile phones, how will you hear about a case? How will a reporter or a victim contact those who may be able to help them?</td>
</tr>
<tr>
<td><strong>2. Make a decision on urgent actions</strong></td>
<td>Based on a report, you must immediately decide if this situation is and endangering and threatening one for the child involved. How quickly must you act? What must you do? What steps can speed up the response process? What steps slow it down? If the case is life threatening, whom do you contact?</td>
</tr>
<tr>
<td><strong>3. Analyze and assess information/Seek support</strong></td>
<td>If the child is not in imminent danger you must decide who, or which agencies and services, must be involved for investigation and assessment of the child’s situation. Who must you contact for this support? If the case is not life threatening, how will you involve the relevant actors to assess how serious it is? Who must you contact to decide how to respond? When do you need to call a case review meeting? How do you do that? Who must you contact to respond to various issues? How quickly will they provide support?</td>
</tr>
<tr>
<td><strong>4. Follow up</strong></td>
<td>Why will every case need some kind of follow-up monitoring? In Jojo’s case, if his father promised to never hit him again, how will you monitor compliance to be sure? How else may you and others coordinate to support the family and to ensure the problem has been resolved? Have you identified supports that can you can refer to so as to help Jojo’s father find work again? Can JoJo’s mother whereabouts be traced and support provided for him to have contact with her if he wishes to re-establish it? Or, should Jojo be assisted to join his mother in her new location? What are the legal considerations to be taken? Who could pay costs involved (if any)?</td>
</tr>
<tr>
<td><strong>5. Record and Analyze</strong></td>
<td>Why must every case reported verbally be filed as a written report? Who will receive these reports? When will you need to write a report? What benefits will come from regular reporting and analyzing the patterns of cases in your community? How and with Who do you share these reports?</td>
</tr>
</tbody>
</table>

Are there questions that we forgot to list here? Can you answer them all?

**CHILD PROTECTION COMMITTEES: ROLES AND RESPONSIBILITIES**

In West Bengal, Save the Children UK facilitated the formation of village-level child protection committees. Typically, the committees had 13-20 members, including influential people, parents, school teachers, employers, and representatives of children’s groups.

The main roles and responsibilities of the committees were to:

- Raise awareness about child protection issues, particularly trafficking, abuse of children at work places, and use of corporal punishment;
- Take cases of abuse, exploitation or violence to appropriate authorities or facilitate a local solution;
- Provide information about where people should go if they have concerns about a child’s well-being;
- Disseminate information from the formal child protection system to children and others;
- Work as pressure groups for the appropriate implementation of laws and for improved service delivery by the government.

The committees collaborated with police, local government, the social welfare department, and parents, teachers, and children.

At village level, they connected with children’s groups that gave children a forum in which to raise their concerns and that in turn sent back to the child protection committees’ information about trafficking ploys, child marriage, and child abuse.

The committees have helped children to leave work and return to school, and they aided in the arrest of traffickers.

Source: Community-based Child Protection Mechanisms: Save the Children experience in West Bengal.
How Strong is our Child Protection System?

Based on our responses to Jojo’s plight, and how we answer these questions, let’s take a closer look at our own child protection system. The main aims of a child protection system are to strengthen the protective nature of the environment around children and to strengthen children themselves, in order to ensure their well-being and fulfill their rights to protection from abuse, neglect, exploitation and other forms of violence. This system, however, is not limited to the boundaries of your village. An ideal system would reach out to link with regional and national government agencies in ways that are mutually supportive.

How well does the child protection system in your community rate in the following areas?

1. **Surveillance:**

   **Surveillance** is the routine collection and monitoring of information on the situation and conditions of children in your community. Does your community collect information based on some type of local monitoring mechanism that records actions taken to prevent and detect children at risk of abuse, neglect and violence?

   - Who are the stakeholders who report to the committee on potential concerns? For example, religious institutions (e.g. mosques or churches) may make home visits where they include checks on the situation of children in their homes. Similarly, teachers and school monitors could contribute to identify and report concerns.
   
   - What resources in information, training, funding, support in the form of state and regional social workers, health workers, police, etc., are available to assist in monitoring child protection?
   
   - What actors play key roles in collecting and monitoring information on child protection issues in your country? Is there a ministry that provides guidelines, standards, and programs related to child welfare and protection at the national and provincial level?
   
   - Is there a provincial or regional office that supports your community child welfare and protection efforts? Can/Do you request guidance from them? Do they help by providing resources, funds, ideas, training based on your specific needs and identified risks?
   
   - Does your committee share child protection information on the needs and risks of children in your community with any provincial or national agencies?
   
   - Does your committee collaborate with community level forums or clubs to monitor child safety, or to share information and ideas on child protection?
   
   - Are any of the following done systematically in your community or region: Child screening, outreach, common assessments, information sharing, and mapping referral pathways?

If any of these surveillance structures or processes exist in your community, list them in the table below:

<table>
<thead>
<tr>
<th>NATIONAL LEVEL</th>
<th>PROVINCIAL LEVEL</th>
<th>COMMUNITY LEVEL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
2. Coordination:

Coordination is the extent to which all the various levels of actors in child protection – including children, parents, community residents, etc. – are able to harmonize their strategies, objectives and activities to ensure they are mutually reinforcing and to make the best use of time and resources in the best interests of children. Coordination means there exists an articulated and smooth flow from government and international agencies to regional bodies and local child protection organizations and other types of voluntary groups, ensuring that all those along the links know their roles. Promoting and ensuring good coordination is an important function of a child protection committee. Members can work together with others in the district and community to ensure that resources and services are functioning together to ensure that children are getting the services and support that they need. As you consider how to strengthen the coordination among local stakeholders involved in child welfare and protection you might ask the following:

- Is there a lead actor for child protection at the national level? Is there a lead actor for child protection in your province or district?
- Is there an agreed upon data collection priority, procedure or methods or a shared information collection system?
- Is there clarity about the specific services you can provide and those for which you must turn to other service providers such that you have a list of professionals and volunteers with special skills to be called upon based on the need of a given situation?
- Are there designated roles and responsibilities for covering a wide array of child protection needs?
- Are there local to national linkages strengthened through generating evidence for child protection advocacy to influence policy?
- Are you all aware of whom to contact and how to reach them in cases of emergencies?
- Are there effective and safe mechanisms established for children or adults to report abuse, neglect or exploitation of children?
- Are people in your community able to report on possible abuses and know who to turn to for help?

If any of these coordination mechanisms exist, list them in the table below:

<table>
<thead>
<tr>
<th>NATIONAL LEVEL</th>
<th>PROVINCIAL LEVEL</th>
<th>COMMUNITY LEVEL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

3. Response:

Response is how we are moved to action as a way of mitigating problems of abuse, exploitation, neglect and violence. Response decisions are based on the analysis of information collected during an assessment process made at a number of key stages in our interventions with children who may be suffering or are likely to suffer significant harm. In instances where a response decision is needed, there will be a range of questions to consider, including:

- Are there inter-agency guiding principles and standards for responding to child protection concerns?
- What support is available to assist in this decision-making process?
- Are you able to make quick decisions on when and how to respond to a raising child protection concern?
- Is there a network of people able to respond to reports of abuse or exploitation: such as police, legal counsel, judges, social workers and health workers?
- Do you have the capacity for appropriate responses to child protection violations?
• Have you identified the roles and responsibilities of key legal and other protective child protection agencies and know the relevant protection laws and policies?
• Do you understand traditional child protection actors and structures, and how to link them with formal agencies and services?

If any of these response mechanisms exist, list them in the table below:

<table>
<thead>
<tr>
<th>NATIONAL LEVEL</th>
<th>PROVINCIAL LEVEL</th>
<th>COMMUNITY LEVEL</th>
</tr>
</thead>
</table>

4. Prevention:

Prevention is all the steps taken to improve awareness of child protection issues, through which communities are mobilized to take action to mitigate and prevent abuses, based on available resources. Awareness and ‘conscientization’ are developed through a sustained community dialogue that supports community members to transform their attitudes, challenge harmful social norms, strengthen positive actions for children, take action based on common solutions and use community resources.

• Do national and provincial agencies provide any kind of guidelines or support for preventive action?
• Do you have a means of supporting your community to reevaluate harmful traditional practices, replacing them with widely practiced positive protective practices?
• Do you hold community mapping exercises to identify dangerous areas and infrastructure weaknesses that may lead to problems for children?
• Do you have the means to identify and support at-risk households to prevent violence, neglect, abuse and exploitation?
• Do you have the data and information to identify excluded groups of children and the causes and consequences of their exclusion?
• Do you have youth clubs or forums to help strengthen youth voices, allowing them a voice in community decisions?
• Are your children equipped with life skills training to build children’s capacity to make good decisions, influence their peers and environment positively, and build resilience to difficult situations?
• Do you have supportive links with NGOs and government agencies to petition for support to manage problems that may lead to child protection problems?

If any of these prevention mechanisms exist, list them in the table below:

<table>
<thead>
<tr>
<th>NATIONAL LEVEL</th>
<th>PROVINCIAL LEVEL</th>
<th>COMMUNITY LEVEL</th>
</tr>
</thead>
</table>

Review the findings from your system analysis. You have a strong system if your group can answer ‘yes’ to almost all of the above.
Throughout this manual, we will move toward addressing many of these child protection issues in a comprehensive and sustainable manner. This approach will help to affirm the role of parents and caregivers as well as the broader community to take primary responsibility for the care and protection of all children. We will also help to affirm the responsibility of the state to guarantee the care and protection of children, through respecting, protecting and fulfilling children’s protection rights as outlined in the United Nations Convention on the Rights of the Child (UNCRC) and other international and local child rights and protection instruments. Overall, we will work together toward strengthening the protective environment for all children.

A SYSTEMS APPROACH TO CHILD PROTECTION

As we saw in the previous exercise, standardizing our steps toward strengthening our child protection pathways means that we are formalizing it into a broad, functioning child protection system. A child protection system is based on the recognition of responsibilities – the family’s responsibility to protect the child and obey the laws of the community, the community’s responsibility to protect its children and its families, and the state’s responsibility to support and protect families to fulfill their role to protect children. Working together for successful outcomes for children is essential. To facilitate this, it is important that all participants and agencies coordinate their activities and are clear about both their responsibilities and their expectations of others. Even though one designated child protection agency should have overall accountability, it may not provide all services.

A system involves a collection of components or parts that are organized around a common purpose or goal—this goal provides the glue that holds the system together. In our case, the glue is common concern for child protection. As a system, then, we need to recognize children as nested within a structure: children live with families, that live in communities, that exist within a wider societal system. Given that each ring in the system is ‘nested’ within the larger one, specific attention needs to be paid to coordinating how these various levels interact, so that the work of each system is mutually reinforcing to the purpose, goals, and boundaries of related systems. That coordination is like your infrastructure. Well-designed, well-coordinated systems (i.e., those with strong infrastructure) will be better prepared to manage and prevent emergencies.

Strengthening a child protection system should be based on analysis of existing structures and processes (like we did in the previous exercise) and a clear vision supported by a strategic plan. This plan helps to define and shape a coherent set of actions that can then be undertaken in support of creating more protective environments for children. A coherent system is one where the different components and processes of the system are working together and functioning effectively.
The key features of a child protection system include:

- Laws, policies, standards and regulations
- Local capacities and needs
- Identifying and assessing risks
- Services and delivery mechanisms
- Cooperation, coordination and collaboration mechanisms: roles and responsibilities
- Accountability: Engaging your Community
- Building children’s resilience

Subsequent modules will guide you through each of these points listed here toward strengthening your child protection systems. We will not find answers to all of the questions that arose in thinking about how to respond to Jojo’s problems, nor will we be able to put in place all parts of a broader system that perhaps is still under development and thus does not yet exist. We will, however, simplify and provide a clear structure to guide and improve the effectiveness of your child protection efforts, as well as provide you with a foundation for improved advocacy beyond your own community.

**Defining a Child & Understanding Child Development**

The next exercises will help to uncover community concepts of child protection. Local culture, tradition, knowledge, attitudes and practices shape how different elements work together at the community level to prevent and respond to protection risks. Patterns of socialization, approaches to child-rearing, expectations toward your own children, gender roles, and the relationships between children and adults all influence these vital interactions.

Different cultures have different definitions of what it means to be a child. The universal standard under international law defines a child as any individual under 18. This definition may be important as an international standard, but we know this is not universally accepted. Let’s work on defining what a child is here:

1. When you hear the word ‘child’, what comes to mind? Discuss your answers.
2. Complete the following sentences:
   - A child is …………………………………
   - A child has ……………………………
   - A child can…………………………
   - A child is not ……………………………
   - A child does not have …….……………
   - A child cannot ……. …………………
3. Compare your responses to these sentences.
4. Topics for further discussion:
   - What are a child’s main tasks or roles in the family and in the community?
   - How do we in our culture view children?
   - What rights do they have?
   - What expectations do we have for them and from them?
   - How broadly does our community adhere to international child rights standards?

In order to adhere closely to international child rights law, children need to be respected as complete human beings who are actively engaged in the process of constructing their own lives. How those lives are constructed and influenced depends on what level of respect, participation, or voice children have in the home, public forums, schools, community, and as citizens of this country. It is important to reflect on how children in your local context experience their rights and to what extent adults facilitate its realization. Analyze asking some of the following questions:
• What does being a child mean in the context of your community?
• How do people in your community demonstrate respect for a child?
• When do adults ask for a child’s opinion on matters impacting them in their community?
• Why or why are children not given a voice in local decision-making?
• What do you think your community’s standard behavior toward children teaches them about social relations, personal identity, or confidence?
• How does this behavior increase or decrease instances of child abuse or neglect?

Activity 1: Experience and a child’s development

Purpose of the Activity
• To recognize how adult behavior impacts the child’s development

Steps: PART 1 – Childhood Influences
• Pair up with your immediate neighbor.
• Each of you is to share one positive and one negative childhood experience. Specify who was responsible for it and how it influenced or affected your life as an adult.
• Participants should then be asked to share their experience in plenary. Be supportive of anyone who choses not to speak. Presentations should be random and based on the principle of voluntary participation.
• Compare boy to girl child experiences if patterns of difference occur.
• Write up the experiences as participants present them as in the table below, separating men, women, and children’s experiences – if these groups are all represented.

Examples of negative and positive experiences shared during a previous workshop are provided below and could be used as examples to start discussions.²

<table>
<thead>
<tr>
<th>EXPERIENCE</th>
<th>PERSON RESPONSIBLE</th>
<th>REACTION</th>
<th>IMPACT ON ADULT LIFE</th>
</tr>
</thead>
<tbody>
<tr>
<td>POSITIVE EXPERIENCES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>My first day at school the teacher was so kind! She smiled at me and made me feel very welcome.</td>
<td>My first teacher</td>
<td>Made me feel liked, important, valued</td>
<td>I loved going to school, studied hard and went on to university.</td>
</tr>
<tr>
<td>My parents’ home caught fire when I was very young. Even though we lost everything, our neighbors helped us rebuild and gave us clothes and other needs.</td>
<td>My neighbors</td>
<td>Made me feel safe, secure, loved</td>
<td>I still go home to my village at every opportunity. I hope to raise my own children there.</td>
</tr>
<tr>
<td>NEGATIVE EXPERIENCES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>One of my teachers was so mean! She always shouted at us and we were so scared of her.</td>
<td>My 2nd year teacher</td>
<td>Made me feel stupid, hated school</td>
<td>I hated going to school, failed at math. Soon I dropped out.</td>
</tr>
<tr>
<td>I was molested by a family member when we went to live with them after the fire.</td>
<td>Uncle</td>
<td>I felt vulnerable</td>
<td>I do not trust men, even my own brothers.</td>
</tr>
</tbody>
</table>
Steps: PART 2 - Discussion: Models of Behavior

• Ask participants what conclusions they can draw from the exercise.

What happens in our childhood shapes our adulthood. Positive and negative experiences can shape people’s lives in both positive and negative ways. The way children are treated and handled both at home, in the community, and at school informs and shapes the child’s future understanding of how to communicate and interact as part of a community. Children learn how to become adults by observing, copying, and learning from peers and adult role models around them. **How adults express their emotions will influence the reactions of children and youth.**

Violence, in the form of hitting or harsh discipline, is damaging and counter-productive. Children exposed to violence often exhibit violence with younger and smaller siblings or friends, whereas disciplining with kindness, patience, and understanding in turn teaches these behaviors. A child brought up in a violent environment is more likely to see violence as an acceptable behavior than one raised in a non-violent environment – unless there are also non-violent behaviors in the child’s life to counter this perception.

Parents and teachers can help young people manage their feelings by both modeling healthy strategies themselves. Managing negative experiences can expose sources of great strength within families and communities and open opportunities for positive learning, growth, and unity. Parents, teachers and other community leaders have a unique role to play in the lives of children, especially in the lives of girls who in many communities don’t have the same opportunities. Consider how these measures of support for children are reflected in your community:

• Guiding them.
• Listening to them and encouraging them to share their views.
• Providing and being positive role models.
• Understanding what is likely to cause problems for the child.
• How can the child solve problems for themselves? Or do they need an adult to help them?
• Understanding that children are not adults and need to experience a proper childhood.

Analyzing Children’s Participation

It is important to recognize how children are being viewed and supported in their home environment. How well are parents and children coping with the day-to-day difficulties they face, and how does this impact on the role of children in the home and in the community?

• What influences the way you see the children in your environment?
• How does the wider community see the children of different ages in your community?
• What are the strengths of children in the community?
• What are the types of vulnerabilities that children you know have?
• What are the issues and concerns that most affect children in your community? Are these the same or different from the concerns you have?
• Are you even aware of what most concerns your children?

An important aspect of understanding what children need is to also facilitate their active involvement in sharing their opinions and voices on issues that affect them.

• What is the role of children in participating in decision making processes and any activities that affect their well-being?
• What opportunities exist for children to influence their peers, family or community to be safer for children?
• Are there any children’s clubs, parliaments or forums in the community and, if so, what are they? What activities do they encourage?
• Are children involved in strategic planning processes?
• What channels do children receive information through?
• Do children have life skills training opportunities?
• Who teaches your children about sexuality, respecting self and others, and making decisions?
• Are there individuals in the community that are especially good at supporting children to participate in decisions that affect their lives?
• What information could you receive from a child that could help you to improve your work in child protection? Do children and adults share the same perspective?

Children and young people are often much better placed than adults to take the lead in assessing and analyzing their situation – and in coming up with possible solutions. Planners often discount their participation under the pretext that the job at hand (for example drafting a policy) requires expertise and skills only obtained through maturity or special training. But young people are well placed to determine, for example, whether a health facility is responsive to their particular needs; young girls may know best why they or their peers drop out of school, and so on.

Some of the key benefits of children and young people’s participation in child protection advocacy are:
• It will bring ideas from their reality to the discussion, allowing adults to see problems and the solutions from a child’s perspective, and which adults might not have realized or thought of.
• Children and young people will have ownership of the solutions.
• Children and young people will be visible, and there will be greater acceptance of children as social actors and active citizens.
• Children and young people will learn new skills and gain self-confidence.
• Children who feel respected and that their opinions are valued will often develop into a person who earns that respect and value.
• When children and young people act, they often generate more commitment from adults and from other children.

Activity 2: Case Studies - Children and Families in Crisis

Divide your group into two and have half do Case 1 and the other Case 2. When they have done, select a presenter to explain what the groups have found in their assessments.

CASE STUDY 1 - BINTA

Binta is a 15-year-old girl. One Sunday she was brutally attacked by two young men who both raped her and mutilated her face. A neighbor reported the case to a community child protection committee member who immediately contacted the police. The police apprehended the two suspects, who admitted to violating Binta. The girl was taken to the hospital and received treatment for her injuries, accompanied by the police.

Following the attack many neighbors started talking badly behind Binta and her family’s back. It was said that Binta must have been at fault in order to bring this upon herself. Many neighbors also came out in support of the two young men, who were known in the community. Binta’s family therefore considered whether they should withdraw the case from the police in order to protect their daughter.

ACTIVITY:

Binta lives in your community and is in the same class as your daughter. She is known as a hard worker, polite, and kind.

Pick out the key issues from the case study to inform the areas that you will focus on in your assessment of the case. You will need to consider the issue of general safety for children, and especially girls, prevailing attitudes toward sexual violence and gender roles, and how those attitudes line up with the legal framework, as well as family and legal responses.

Based on the way we discussed Jojo’s experience, try deepening your understanding of Binta’s experience according to the framework provided in Tables 1 and 2. How would you support Binta, the family, the community? Does the framework assist you to analyze the risks to children and how your committee can improve its support? Example questions are provided to help you navigate the analysis.
• Do you think adults would have the same responses as Binta’s peers or children? How would you find out what younger people think about such a situation?
• How can Binta be supported to regain her pride and dignity in the community?

<table>
<thead>
<tr>
<th>SURVEILLANCE: (How common are such crimes? What places young women at risk for rape? How does such information reach your committee?)</th>
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<tr>
<th>COORDINATION: (How strong is your coordination system? How efficiently can help be mobilized for action?)</th>
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<table>
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<tr>
<th>RESPONSE: (Can the committee manage the situation or is external support required? What steps does the committee need to take here? How can your response guard Binta’s confidentiality?)</th>
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<tr>
<th>PREVENTION: (How can you prevent such incidences from occurring again? What kind of prevention measures could you take that targets boys?)</th>
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**CASE STUDY 2 - THREE BROTHERS SOLD BY FATHER FOR LABOR**

A father in Benin negotiated a “good price” for his three 10-12 year-old sons. He received 10,000 Centrale Franc Africain (about $20) as a down-payment from a trafficker for the boys to leave their village to go to work in Nigeria, and was told he would get 90,000 CFA ($180) for his sons’ labor for a year.

The money was about enough to keep the man’s large family fed for a month. But his three sons had no idea what faced them in Nigeria.

“They told us we were going to work with chickens and collect eggs,” said one of the boys, “but when we arrived in Nigeria, we had to work like adults crushing stone at the quarries. It was terrible work, really tough. We got very little to eat and we were not allowed to go anywhere.”

For his part, the father explained: “It is what is done around here. I was promised good money for the boys for one year. We are very poor.”

**ACTIVITY:**

Imagine child trafficking and labor also exists in your community. What could your committee do, if anything, to find alternative opportunities for poor families? Can you prevent child labor? What is acceptable and unacceptable work for children?

Analyze the case in a table format like that found in Tables 1 and 2. Pick out the key issues from the case to inform the areas that you will focus on in your assessment. You will need to consider the issues of siblings being exploited together, and how to meet the needs of sibling groups. How would you support these children, the family, the community? Does the framework assist you to analyze the risks to children and how your committee can improve its support? Example questions are provided to help you navigate the analysis.

Do you think adults would have the same responses as the boy’s peers or other children? How would you find out what younger people think about such a situation?
LISTENING TO CHILDREN

In many places, children and youth form the majority of the population in the communities in which they live; yet they have traditionally been excluded from voicing their opinions – not just in communities but in families as well. How would increasing the inclusion of children and youth improve the function of your communities and families? Children can learn to become agents of change as active contributors to the well-being and development of their family and their community. Child protection and well-being consist of reducing risks of violation of child rights, making children’s rights a reality, and creating an enabling environment that supports children’s positive development. In this regard, creating a children’s club in every village, for example, can establish a foundation for child protection activities and increase child participation. It can actively create a supporting network of children, by children, and for children.

EXAMPLE: CHILD-LED SOCIAL CHANGE

A group of street kids involved in gang related activities in Mexico City decide to establish “safe zones” for younger children in their communities following the death of a number of their younger brothers and sisters in drive by shootings. The “safe zones” begin to take on a life of their own as the children’s grandmothers and other adult guardians begin to engage the children in educational activities, story telling, and making crafts. Soon the “safe zones” have become a project led by a newly established NGO of former gang members called “Urban Courage.” The community youth centers incorporate day care centers for young children, spaces for creative child and youth expression, and vocational training for gang members and other children living on the streets. The street kids approach the local municipality for support and are connected with child and youth workers, social workers, and other human service workers to provide more access to basic services as well as an after school education program. The program continues to evolve and grow as the younger children take over the leadership from their older colleagues and the municipality partners with these children to engage other marginalized children in their city.

Source: Children as Partners: Child Participation Promoting Social Change. CIDA; 2004; p. 25
Child protection activities and interventions ideally involve children as their wellbeing and protection is the primary focus. However consideration is not always taken to ensure children’s participation is a feature of all aspects of child protection. Children’s participation is essential for understanding and identifying the changing protection problems in the local environment and the issues and experiences they encounter. Mechanisms for children’s participation need to be included in the development of plans for strengthening child protection referral mechanisms. This includes defining means of consulting and learning from children, involving children in decisions, and identifying issues and solutions—as a means of empowering children to contribute to their own protection. Participatory processes promote resilience and psychosocial support and thus are useful strategies for prevention and for rehabilitation work.

**CONCLUSIONS AND FOLLOW-UP ACTIVITIES**

In this session we have already tackled some highly complex issues where different norms and attitudes exist and can be controversial. Examining these can lead us to question long-held traditions and expectations toward children in our communities.

**Child participation:** By child participation we mean creating opportunities for children to provide their views and opinions on matters that affect their lives and taking these into account in decision-making.

**Adult support:** Adult support means actively facilitating and supporting the participation of children through concrete measures and giving due consideration to their views and opinions in the taking of decisions.

Why do you think this is important for the strengthening of our child protection systems?

Your follow-up activities will help guide you towards interacting with children in a more substantive and productive way. Take notes of your successes and failures in these exercises. They will be discussed as we move forward.

---

**ENGAGING CHILDREN - LAOS**

ChildFund Australia engaged children in Laos in the design of a new school in the Nonghet district of Xieng Khouang Province. The consultation process involved both children and adult community members, and the children’s opinions were asked for their desired school location and the reasons, as well as the design of the school. The main method used to engage with children throughout the project was drawing. Children were asked to draw their ideas of where they would like their school built, its layout, color etc. The children then explained their drawings to the group and to the facilitators. Some of the drawings were done in small groups and some were done individually.

The result of consultations with children was presented to authorities and technical officers at all levels. Comparisons were also made between the children’s views and comments and those of the adults in the community. The final decision around location and design of the school was based predominantly on technical expertise. However, where children didn’t see their suggested outcome they were informed about the final decision and why that decision was made.

Anonymous feedback revealed that children found they had more confidence as result of their involvement. Additionally, the process of feedback to the children about the outcome of the consultation resulted in a feeling that their participation had achieved change and that they had been included in every aspect of the process.

ACTIVITIES:

Training is not an end in itself. Each module we complete will have a section called Follow-Up Activities that provide guidance for actually using the materials studied in ways that require no monetary input, just your time and effort. Consider these activities as your ‘homework’. They will be discussed at the opening of your next workshop.

1. Based on the concepts and standards of practice that we have discussed in this workshop, ask children, who are in Binta’s age group, (15-18 years old), what forms of violence most affect them and what can be done to prevent and address these. Ask boys and girls what they think separately. Facilitate a discussion with both groups, if appropriate to do so in your particular social context and otherwise separately, what they believe could be done to prevent such violence.
   • Are boys’ and girls’ responses the same or different?
   • Are children’s responses the same or different from adult responses? Are they the same or different from how your group assessed the situation in our workshop?
   • Does this problem exist in your community? What do children and adults think could be done to prevent it from happening again?

2. Now try asking children about child labor as happened to the 3 brothers who were sold by their father.
   • Are boys’ and girls’ responses the same or different?
   • Are children’s responses the same or different from adult responses? Are they the same or different from how your group assessed the situation in our workshop?
   • Does this problem exist in your community? What do children and adults think could be done to prevent it from happening again?

3. Try facilitating a discussion on a child-engaging topic with children:

Follow-Up Activity: Community Mapping on Children’s Issues

AIM: Exploring children’s issues in the community, identifying problems and suggestions for change.

GROUP SIZE: If the group is large, divide into smaller groups of 6-8. Divide them according to general age and sex.

MATERIALS: Different natural materials found in the local environment (e.g. twigs, leaves different types of stones), found materials (bottles, bottle caps, wrappers, be creative!). Paper, colored markers or pens, if available.

DURATION: About 1 to 2 hours

Activity:
   • Ask the groups to build a map of the community on the ground, using the local natural materials. Examples of landmarks could be fields, schools, family-houses, different community facilities, hospitals, workplaces, government offices, play grounds etc.
   • Ask the groups to discuss whether children are happy or unhappy in the different settings on the map, and to put marks on the map symbolizing a happy child and an unhappy child (these could be happy and unhappy faces). Ask the groups to discuss the reason behind the judgments.
   • Ask the groups to identify and note down 3 things that they would like to change in the community to improve the situation for children in the community.
   • Let the groups present their work to each other.

Reflection and discussion:
   • What makes a setting a good feeling or a bad feeling place for children?
   • Are there differences between the maps of the different groups? Are there similarities?
• Can you agree on the 3 most important things that you would like to change in the community? Why those 3?
• Are there differences between the opinions of boys and girls? If yes, why?
• Are there differences between different groups of children in the community? If yes, why?

Documentation:

List the places mentioned by the children and the reasons behind their classifications. List the issues the children would like to have changed. Keep the lists in the file of the group and be sure to share it at your next committee meeting. Have children provided you with ideas to help prevent injury or danger? How can you follow through on some of these suggestions? What else can you learn from children?

Variations:

1) You could ask the groups to build maps on the situation of different groups of children, e.g. certain age groups, boys and girls, rich and poor, disabled children, albino children, etc. If there are visually impaired children in the group, make sure that they are given a chance to be involved in the discussions.
2) Activity: What makes us happy, what we would change (simpler version of the above mapping exercise)

Duration: 1 hour

1) Ask each person to write down 3 things they are happy with in their lives and 3 things they would like to change.
2) Bring participants into groups of 5-8 and ask them to share and discuss their points, and to make a common list on a piece of paper.
3) Let groups present their findings.

Reflection and discussion:

Facilitate a discussion on the following:
• Are there any similarities between the things that are making us happy? Why do they make us happy?
• Are there similarities between the things that make us sad? Why do they make us sad? What can we do to change them?
• Are there differences between the opinions of boys and girls? If yes, why?
• Are there differences between different groups of children in the community? If yes, why?

Documentation:

Summarize the findings and keep them in the files of the group.

Alternative Activities:

• Form a children’s or youth group in your community which reflects activities that children identify as a focus (cultural, recreational, skill focused, etc)
• Identify ‘ambassadors’ in the community who support child participation and are willing to try to influence others.
• Ask parents for consent for their children’s participation in a children’s group.
• Keep parents informed about what is going on in the children’s group, and involve them in discussions.
• Keep other important adults (e.g. teachers and community leaders) informed about the work in the children’s group, your progress and your challenges.
• Discuss with children how they could address skepticism from adults in a culturally acceptable way.
• If working with illiterate adult groups, emphasize on oral discussions and drawings rather than text.
MODULE 2: LEGAL FRAMEWORK

Recap – Module 1

Ask volunteers to review what we covered in our last meeting. Discuss the pros and cons of interviewing children. What problems arose and how did you solve them? What benefits, if any, came from actively seeking children’s input? What did children teach you about your own community? How will you maintain these advances in your child protection work?

Preparing for Module 2

Depending on the capacity of your participants, request they bring to the session any documentation they have on child rights, laws, policies or any guiding principles they have used in their child protection work. For Activity on Legal Framework, you will need to expand the exercise to suit the abilities of your participants. UNICEF (nd) Child Protection Programme Strategy Toolkit. p. 9-14. http://www.unicef.org/eapro/Protection_Toolkit_all_Parts.pdf.

The exercises in this module range from very basic to quite advanced. Facilitators can select which to use and how to adapt to the needs of the group.

How do we use our legal framework?

Every society has standards and norms that shape how it will protect its children. These standards include the laws, cultures, religions, and traditions that guide members of a community in the ways they choose to protect and interact with their children. These choices may well affect the very nature of childhood. When it comes to protecting children, the family (including relatives) plays a central role, particularly during the child’s earliest days. Children are also part of a broader community where their relationships and roles deepen over time and take on increased significance. For this reason, protecting children is both a private and a public responsibility.

A first step in strengthening child protection mechanisms is to understand the components of the system in some detail: What are the laws required, or which should be in place? How are they – or how should they be – implemented and reinforced? What are the necessary elements of a social system for protecting children? What are the links between the legal system and a social system? What social behaviors, norms, attitudes and practices will support these systems?

The legal system is not simply laws and policies, ‘things on paper’, that are meant to protect children. A legal system is part of the broader living system through which laws and policies are made and enforced to protect children from harm. In practice, laws and regulations govern – and are implemented through – the justice system, the social welfare system and other systems within a country. This means that the work and operation of the legal system must be considered in conjunction with other core prevention and response systems (social welfare and social behavior change) that sustain the protective environment for children.

International and national instruments for child protection

The Convention on the Rights of the Child (CRC)\footnote{See a Child Friendly version of the CRC here: http://www.unicef.org/pacificislands/CRC_CHILD_FRIENDLY_VERSION_%282%29.pdf and Annex 2 for a plain language version.} and its three Optional Protocols provide the foundation for advancing the rights and protection of children. Regional child rights instruments such as the African Charter on the Rights and Welfare of the Child (ACRWC) and the Iberoamerican Convention in the Rights of Youth, among others, further reinforce the rights and protection of children worldwide. The ILO Convention 182 on Elimination of the Worst Forms of Child Labor and the Trafficking Protocol to the Palermo Convention add to the long list of relevant international instruments we use to safeguard children. Children’s rights to protection are enshrined in numerous other international instruments, including but not limited to the CRC Optional Protocols, CEDAW, the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, the Geneva Conventions, the Refugee Convention, and UN guidelines relevant to juvenile justice. Despite many governments ratifying these international commitments, in reality they have not had the practical impact we hope for.

Each nation through its constitution establishes the powers and duties of the State as well as the rights and duties of the people within its jurisdiction, including children. These fundamental ideals and rules of the country are further supported through national legislation and policy. The legal framework that relates to children may be codified in a set of specific laws such as a child rights act or policies such as for example, a child protection code that is applicable to all the organs of the State and others duty bearers responsible for the care and protection of children. The legal framework that ensures delivery and enforcement of child rights and protection can differ significantly across countries. Thus even where strong laws may exist to protect children, these can lack accompanying policies and procedures to translate them effectively at the level of social programs that support for realization of rights and protection for children against all forms of child neglect, abuse, violence and exploitation.

The CRC is the most widely adopted international legal instrument and a sign of a global commitment to the rights and protection of children. It requires countries to reassess their national legal framework and corresponding systems and ensure that any additional safeguards needed for the wellbeing and protection of the child are put into place to fill existing gaps. Knowledge of the national legal framework for protection of children is essential as the laws and policies that form part of it give authority and legitimacy for actions taken to advance child rights as well as to prevent and address infringements.

\section*{LEGAL FRAMEWORKS}

Children’s rights worldwide are protected by the UN Convention on the Rights of the Child (CRC) in Africa, by the African Charter for the Rights and Welfare of the Child (ACRWC), and the Iberoamerican Convention in the Rights of Youth in Latin America.

- BUT has your area also signed the Convention on the Elimination of Discrimination Against Women, the Optional Protocols to the CRC and the ILO Convention on the Worst Forms of Child Labor? Is it a signatory to the Palermo Convention against Trafficking?
- NEXT, are domestic laws fully compatible with these conventions?
- FINALLY, although the CRC states that local or customary laws should be brought into compliance with the CRC, a dual system operates in many countries that recognizes both formal and customary laws. This duality creates difficulties for women and children who are often treated as having a lesser status under ‘traditional’ law.
Thus familiarity with the legal framework for child protection is a necessary first step for strengthening a child protection system. For example, it is critical to know how well and if the UN CRC is reflected in national law and to what extent its provisions have been integrated into a child protection code. A child protection code provides an overview of existing laws, ensures consistency, and provides a platform from which to build a collaborative mechanism for work across the different agencies that have responsibility to serve children through the child protection system. Child protection systems "comprise the set of laws, policies, regulations and services needed across all social sectors- especially social welfare, education, health, security and justice- to support prevention and response to protection related risks." 5

With the above in mind, gaining an understanding of the laws that impact on child wellbeing and protection, how they are implemented, understood, upheld and enforced, is your first big step.

Guiding principles of the Convention on the Rights of the Child

The four guiding principles outlined here represent the underlying requirements for any and all rights of the Convention to be upheld. These principles must be respected in order for children to enjoy their rights.

<table>
<thead>
<tr>
<th>1. NON-DISCRIMINATION AND EQUAL OPPORTUNITY</th>
<th>2. BEST INTERESTS OF THE CHILD</th>
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<tbody>
<tr>
<td>(Article 2)</td>
<td>(Article 3)</td>
</tr>
<tr>
<td>All children have the same rights. The Convention applies to all, whatever their ethnic origin, religion, language, culture or sex. It does not matter where they come from or where they live, what their parents do, whether they have a disability, or whether they are rich or poor. All children must have the same opportunity to reach their full potential.</td>
<td>The best interests of a young person must be the primary consideration when making decisions that may affect children. When adults make decisions, they should think about how their decisions will affect children.</td>
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<tr>
<th>3. RIGHT TO LIFE, SURVIVAL AND DEVELOPMENT</th>
<th>4. PARTICIPATION</th>
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<tbody>
<tr>
<td>(Article 6)</td>
<td>(Article 12)</td>
</tr>
<tr>
<td>Children have the right to life. Children must receive the care necessary to ensure their physical, mental and emotional health as well as their intellectual, social and cultural development.</td>
<td>Children have the right to express themselves and to be heard. They must have the opportunity to express their opinions regarding decisions that affect them and their opinions must be taken into account. This being said, a child’s age, level of maturity and best interests should always be kept in mind when considering their ideas and opinions</td>
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Activity 1: Understanding Child Rights in our Community

Purpose of the Activity

• Involving adults in discussing child rights and child protection to encourage actions on child rights violations. Child protection refers to preventing and responding to violence, exploitation and abuse against children – including commercial sexual exploitation, trafficking, child labor, and harmful traditional practices, such as female genital mutilation/cutting and child marriage.

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Group size: If the group is big, divide into smaller groups of 6-8.

Materials: Cards/pieces of paper, flip charts and marker pens.

Duration: 2 hours

Steps: PART 1 – Child Rights

1) Introduce participants to the concept of child rights and the child rights convention, using a simple language version of the convention (See Annex 2 or use the table 3 below). If adults are illiterate, then present the main points with drawings or symbols.

2) Ask participants to pick the 3 rights they find most important. Then ask the participants to join in groups of 4 and discuss their selection.

   The group should reach consensus on which 3 rights are most important to the group.

Steps: PART 2 – Child Rights and Responsibilities

3) Next using table 3, have groups decide what state responsibilities are connected to the rights for children, families, and communities.

   For example, in order for that right to be upheld, what must states and communities do to realize it as a right?

Table 3: Child Rights State

<table>
<thead>
<tr>
<th>THE CHILD’S RIGHT</th>
<th>THE COMMUNITY’S RESPONSIBILITY</th>
<th>THE STATE RESPONSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>To feel safe</td>
<td>Ex: to respect and guard the safety of children, to monitor possible dangerous elements in the</td>
<td>to ensure children are safe from harm, taught to avoid danger, raised with love and kindness</td>
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<tr>
<td></td>
<td>physical environment</td>
<td></td>
</tr>
<tr>
<td>To have a good education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To be treated with respect</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not to be hurt mentally or physically</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To have property protected</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To speak and be heard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To have basic needs met</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To play</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To be informed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To have a name and a legal identity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To be respected</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To be treated with equality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To engage in culture and beliefs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To access special care if disabled</td>
<td></td>
<td></td>
</tr>
<tr>
<td>To access healthcare</td>
<td></td>
<td></td>
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<tr>
<td>Privacy</td>
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</table>

4) Each group will present their findings to plenary.

Steps: PART 3 – Discussion on Child Rights

5) Was it difficult to agree on 3 rights? Why, why not?

   • Are the main child rights in accordance with or in conflict with traditional norms in your community?
   • Are any child rights being violated in the community? Give examples.

6) Ask groups to discuss what could be done about particular children’s rights that are being violated in the community. Discuss examples of child rights violations and make a list of institutions or persons in the community whom you can approach for help if you know about
children having problems related to these areas. Discuss which institutions or people can assist with which issues.

Examples:
- District Child Protection Teams
- Social welfare officers (district office)
- Legal aid centre (magistrate on legal issues, Community Justice Facilitators, etc)
- NGOs
- Police
- Doctors, nurses, hospital, clinic
- Village/community leaders
- PTA/Teachers

LEGAL FRAMEWORK, LEGAL SYSTEM, LEGAL CODE

Below you will find a basic list of issues that are affected by the existence or lack of implementation of a legal framework, or the failure to enforce child protection laws. We will now guide you through the process of outlining such information for your specific national context, which can assist you in defining target priorities, policies, strategies, plans of action and guidelines. Laws do not exist in isolation, however. We will examine them within the context of other factors such as poverty reduction, HIV/AIDS, infrastructure and access to basic needs (such as water), health and education strategies, all of which can have an impact on specific child protection issues.

Each context will require specific considerations, as not all these steps outlined below will be relevant to your needs. In some cases, you may already have information available through your organizational information management system or that of your partners. In brief, the key element is to know what laws exist, and the application and impact of these laws on the protection needs of children. In this regard, you will need to answer the following questions as best you can in creating the foundation for elaborating your response and referral procedures. This will also serve as a point of reference to guide and inform your child protection activities and reports.

In groups and using whatever resources you brought, try to answer the following questions:
- What are the principle laws for protection of children from abuse, neglect, exploitation and violence in your country?
- Is there one comprehensive child protection law?
- What is the connection between traditional justice systems and the formal legal system?
- What customary laws are operating locally and how do these support or undermine child protection efforts?
- How will you deal with comments like the quotation below?

The reason infibulation is practiced is because the girl will be insulted and be looked at as something open and used. In our society, FGM takes place mainly to reduce high sexual desire of a woman and to develop high confidence during marriage. With the women who are circumcised and stitched together, it is like packing the confidential resource that will be opened by the owner.

—Response from a married woman during field interviews regarding child marriage, Ethiopia (Widyono 2006)
- To what extent are different populations in the country aware of and understand the child protection laws and conventions?
- What roles do government agencies and NGOs play in dealing with these child protection issues that involve legal measures?
- Do they work in collaboration or in opposition?
- How are NGOs involved with government or independently in maintaining child protection and referral mechanisms?
- How well are the laws applied to specific cases as needed?
- How aware of child protection processes are those whose job it is to protect children? For example, police, teachers, social workers, etc.
- What laws govern the following issues of primary concern to child protection?
THE DIFFERENCE BETWEEN A ‘LEGAL SYSTEM’, ‘LEGAL FRAMEWORK’ AND A ‘LEGAL CODE’

A country’s legal system is a constantly evolving entity that develops and enforces rules with the purpose of regulating behavior. It is generally composed of three parts: a) legal and policy frameworks; b) law-making and law-enforcing structures; and c) processes.

A country’s legal framework is a core part of the legal system and refers to ‘things on paper’: the broad range of laws, regulations, resolutions, rules, proclamations, orders and other instruments carrying the force of law.

A legal code refers to a single piece of legislation generally covering an entire subject or area of the law.

Child protection is interlinked with all aspects of children’s survival, development and well-being. This includes laws relevant to the underlying or structural factors that may impact on children’s vulnerability to harm. Promoting the civil, political and cultural rights of children, such as their right to a name and nationality, can reduce children’s vulnerability to harm. Universal birth registration is essential for protecting children’s right to identity, including the right of every child to know his or her parents. It also offers evidence of family relations in situations of trafficking or family separation. Proof of age can facilitate children’s entitlement to special protections in areas such as early marriage, work, juvenile justice and recruitment into armed forces. Birth registration and certification also can preclude denials of citizenship based on lack of documentation. Recognition of cultural identity and realization of a child’s right to nationality, without discrimination on any grounds can preclude statelessness, which renders children highly vulnerable to denials or violations of their fundamental human rights.

Components of a legal system

There are specific components common to every legal system, although there are variations in detail from country to country.

The legal system is composed of:

i. norms (laws, subsidiary legislation and policies) that regulate behavior;

ii. structures (set of institutions and bodies) that make, interpret and enforce norms;

iii. processes by which these norms are created, interpreted and enforced.

Laws set out the ideal for what and how – the standards and rules governing different spheres of public and private life. Laws are binding.

Policies outline principles and strategies, while the measures of implementation and enforcement are set out within administrative measures such as guidelines, rules and other methods necessary to advance the goals of a government on a particular matter.

For example:
Although distinct from each other, laws and policies are often interlinked. Anti-trafficking or child labor laws, for instance, generally provide the foundation and momentum for social policies, such as national plans of action on trafficking or child labor while guidelines provide more operational direction for implementation. For example, the National Policy Guidelines for Victim Empowerment, of the Government of South Africa, related to victims of forms of crime and violence.

Fulfillment of children’s rights enshrined in various laws also relies on economic policies. Resources are necessary to implement both laws and policies. Thus, economic policies omitting budgetary allocations for social welfare services for children and families, or reducing allocations for children’s access to and safeguards during justice processes, will adversely impact the protection and well-being of children.

Integrating child protection policies into laws leads to a more sustainable means of advancing child protection for the long term.

Laws affecting children’s protection rights are extensive, with distinct provisions or sections found in existing criminal laws, family laws, immigration laws, labor laws, inheritance and property laws. Sometimes there is comprehensive legislation covering all child rights (such as a children’s code) or legislation specific to child protection issues, such as juvenile justice, child pornography, child labor, anti-trafficking, etc. The overall goal is to create an environment that promotes children’s full enjoyment of basic civil, political, economic, social and cultural rights in line with the CRC.

Legal frameworks should be viewed in their entirety. Rather than review laws one issue at a time, an analysis should focus on the interrelatedness and interdependence of children’s rights to protection. This applies to child protection in both the public and private spheres. Moreover, laws directly targeting children are not the only ones affecting their lives. For this reason, it is important to have an understanding of the child’s relation to his or her family, community and wider society. Laws granting inheritance and property rights to women, for instance, impact the care, development and protection of children.

### Activity 2: Applying our legal framework

**Purpose of the Activity**

- To identify what aspect of our legal system applies to international child rights laws

**Steps: PART 1 – How does our legal system apply?**

- Based on all the work we have accomplished so far, see if you are able to complete the following table that specifically compares how your country has implemented laws in relation to specific aspects of international law. To get started, two examples are provided. How many other laws can you add to the following table?

<table>
<thead>
<tr>
<th>LAWS</th>
<th>POLICIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child protection acts</td>
<td>Bilateral memoranda of understanding</td>
</tr>
<tr>
<td>Immigration regulations</td>
<td>National plans of action</td>
</tr>
<tr>
<td>Criminal procedures</td>
<td>Inter-ministerial working group plan</td>
</tr>
</tbody>
</table>

---

**Laws Affecting Child Protection**

<table>
<thead>
<tr>
<th>LAW</th>
<th>RELEVANCE TO CHILD PROTECTION</th>
<th>CRC REFERENCE</th>
<th>LEGAL REFERENCE IN MY COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor</td>
<td>Labor law (also known as employment law) governs the legal rights of, and restrictions on, working individuals and their employers. Among other areas, labor laws cover: employment contracts, minimum wages, working time, health and safety, and employment termination. Child labor is the employment of children younger than a certain age or subject to certain conditions considered to be dangerous or exploitative in many countries pursuant to ILO Conventions and Standards.</td>
<td>Art. 1: definition of a child Art. 2, 3, 6, 12: core principles</td>
<td>Art. 32: child labor Art. 34: sexual exploitation and sexual abuse Art. 35: trafficking Art. 36: exploitation</td>
</tr>
</tbody>
</table>
| Birth Registration | Birth registration is generally covered under civil registration laws or civil codes. Birth registration legally acknowledges a child’s existence and also provides proof of age. Universal, compulsory, free, non-discriminatory, permanent, continuous, accessible and practically expedient birth registration and certification are important for a number of reasons:  
• enforces laws relating to minimum age for employment, thereby reducing child labor;  
• counters early marriage of girls;  
• ensures children in conflict with the law are given special protections, including minimum age of criminal responsibility;  
• protects children from under-age military service or conscription;  
• secures children’s right to a nationality, at the time of birth or at a later stage;  
• protects children who are trafficked and who are eventually repatriated and reunited with family members. | Art. 1: definition of a child Art. 2, 3, 6, 12: core principles | Art. 7: right to name and nationality Art. 8: right to identity Art. 32: child labor Art. 34: sexual exploitation and sexual abuse Art. 35: trafficking Art. 36: exploitation Art 38: armed conflict Art. 40: children in conflict with the law |

**Steps: PART 2 – Capacity analysis of child protection laws**

- Now that we can compare the laws on how international protocols are adapted, what can you say about law enforcement?
- In groups, answer the following questions, as best you can. If you cannot answer these questions, consider where could you find the answers?

**Capacity analysis:**

- Who is responsible for ensuring that children are protected and that their rights respected and enforced? Who addresses rights violations?
- What are the underlying and contributing causes of child protection violations?
  • Why is it so or what causes this to happen or not to happen?
  • Who is supposed to do what to help solve the problem at various levels?
- What capacities are weak or lacking for these institutions or individuals to carry out their duties?
- Do officials accept their duty? If not, why not?
- Do officials have the authority to carry out the role? If not, who does?
- Do officials have the knowledge, skills, organizational and human/material resources necessary to carry out the role?

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7 Adapted from UNICEF (nd) *Child Protection Programme Strategy Toolkit*. Ibid. p. 9-14. The chart can be expanded as needed depending on your group’s capacity.
Legal Systems and Legal Traditions

While a country’s ‘legal system’ and ‘legal tradition’ are interlinked, they refer to different concepts. A legal system entails rules (legal and policy frameworks) and structures that regulate behavior and processes by which these rules are created, interpreted and enforced. The legal system is based on the legal tradition.

The legal tradition is the cultural perspective under which the legal system is created. It provides the philosophy for how the legal system should be organized and how law is created and implemented. Legal traditions are based on historic perceptions about the role of law in society.

Every country follows one of these legal traditions: common law, civil law, religious law, customary law, or some combination of them. In very basic terms, legal traditions have the following features:

<table>
<thead>
<tr>
<th>Legal Tradition</th>
<th>Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common law</td>
<td>Decisions of courts and similar tribunals</td>
</tr>
<tr>
<td>Civil law</td>
<td>Legislation, codifications in constitutions or statutes</td>
</tr>
<tr>
<td>Religious law</td>
<td>Sharia (Islamic), Halakha (Judaism), Canon (Christian)</td>
</tr>
<tr>
<td>Customary law</td>
<td>Unwritten local or tribal custom</td>
</tr>
<tr>
<td>Mixed/pluralist</td>
<td>Two or more legal traditions apply</td>
</tr>
</tbody>
</table>

Legal traditions are not static or rigid. Although court decisions are an important source of law in countries governed by common legal traditions, these countries also codify their laws within the constitution and statutes. There are points of overlap in practice between civil law and common law approaches, and either may be combined with Islamic or customary/traditional law in a given country. Within broad categories of civil law and common law, there are variations from country to country, and thus the historical background and particular situation of a country should be taken into account.

Legal traditions also shape the roles of different branches of government. In countries following the civil legal tradition, the judiciary applies laws created by the legislature. In countries following the common legal tradition, the judiciary also can create law. Thus, judges are critical partners in broadly defining children’s protection rights, either using the CRC as persuasive authority or interpreting national laws that incorporate provisions of the CRC or other relevant international instruments.

Countries following civil legal traditions are generally (although not always) ‘monist’ systems. Monist is the legal term referring to the integration of international law and national law. Thus it is not necessary for separate legislation to enforce ratified international law. Once a country ratifies the CRC, for instance, it becomes part of a country’s domestic law and prevails over national legislation in cases of conflict.

Countries following mixed legal traditions are the most complex to navigate and analyze in terms of how best to support law for child protection. A mixed tradition system may involve different combinations of legal traditions, with customary or religious law that are operating separately. It is challenging to balance the different legal approaches of mixed legal traditions governing a country. The existence of laws and policies alone (on the books) is never enough to protect children. To make a real difference to children and their families, the broad range of children’s rights spelled out in laws must be put into practice. However, the realities of practical implementation issues on the ground will determine if it is possible to uphold the laws and where advocates need to work on strengthening child protection policies.

In many of the countries where ChildFund works, many child protection issues are managed by elders or religious leaders through a village based committee or body. These elders may or may not be familiar with international protocols or laws.

- Going back to the template we used earlier for organizing our child protection volunteer work in our communities, discuss in your groups what laws or common beliefs can guide how you conduct each of these main child protection activities?
- How do traditional practices in communities harmonize or conflict with international law? How does this impact on your work?

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8 Adapted from UNICEF Toolkit ibid. p.22 and Part 2.
**SURVEILLANCE: What laws protect children within the private sphere of the home? Are these in contrast with traditional practices?**

**COORDINATION: Are there any policies or guidelines that set out how different government institutions are to work together? Who answers to whom?**

**RESPONSE: What are the key national laws to protect children and how are they upheld? What laws guide how you may or may not intervene?**

**PREVENTION: Who is responsible for prevention, awareness raising, or creating protection networks? Are there laws (either civil or customary), policies, guidelines or regulations that set this out?**

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**Activity 3: Legal Procedure Analysis**

**Purpose of the Activity**

- To use a legal basis for grounding our child protection work

**Steps: Writing a Legal Analysis**

- Pick a particular child protection issue and see if you can write an analysis of how the legal framework in your country either supports or undermines efforts. Examples below can serve as a guide. This short written document can serve as examples for any proposal writing or report writing we need to do.
- Select a narrow topic through which you can focus your assessment. Examples can be Trafficked Children; Child Labor, Child Headed Households, Domestic Violence, etc., etc.
- What is the country’s legal tradition in relation to this topic – common, civil, religious, customary, mixed?
- In common/religious law countries, is there a clear line between the common/religious law and the national and international laws? Compare how formal systems work with or against these informal systems within this topic.
- In (mixed) customary law countries, in what areas is customary law dominant? What is the implementation system for customary law? Who are the main actors involved? How does customary law interface with national legislation and international law? What is the process for resolution of conflicts between customary law and national legislation? Are there dispute resolution mechanisms in customary forums?
- Is there a clear and adequate approach to your selected aspect of child protection? Is this accompanied by an explicit policy? Are there adequate resources necessary for implementation?
- Does your country list reservations to the CRC or other international protocols that apply directly to your topic?
Legislation Framework Examples: Kenya on Refugees

Describe protection problems for children noting gaps in the protection system (legal & policy framework coordination):

Legal and Policy framework:

- A strong national legal framework exists but implementation of that framework remains a challenge within the urban context due to factors associated with advocacy, capacity and budget constraints.
- The biggest challenge towards inclusion of refugee children within the national legal framework is the lack of human and finance resources in the government of Kenya children's department under the Ministry of Gender, Children and Social Development.
- The Department of Refugee Affairs (DRA) does not have sufficient capacity to address child protection. Its linkage and engagement with the children's department is also minimal.
- UNHCR has an urban refugee policy which highlights child protection strongly but it has not been entirely translated into programming and so some key components such as reaching out to the community, promoting self-reliance of caregivers/parents, promoting durable solutions in children’s best interest remain unfulfilled.
- The Kenyan government does not have a parallel refugee policy or strategy on children to reinforce UNHCR’s strategies and UNHCR has not dedicated enough funds to bridge this gap.

Coordination:

- The Children Act of 2001 established the National Council of Children Services in 2002, is a semi-autonomous government body with inter-ministerial representation to plan, coordinate and regulate children’s rights and activities in Kenya. However, this body is operating as an independent entity with very little coordination with the children’s department. For instance, the NCCS has developed a framework for protection of children with very little participation from the children’s department. This disconnect between the NCCS and the children’s department is negatively affecting both Kenyan and refugee children since they are getting left out from this mechanism.

Source: Nairobi Urban Refugee Program 2011

Legislation Framework Examples: Liberia on Ebola

Existing legal and policy framework for Ebola affected children in Liberia

Under the leadership of the Ministry of Health and Social Welfare, Liberia already had a well-developed legislative and policy framework for child protection and specifically for alternative care.

- At the end of June 2014, the “Guidelines for kinship care, foster care and supported independent living” were officially launched, just as ebola was rapidly evolving in the country. They were not designed with the care of ebola-infected or -affected children in mind, but they provide an excellent framework for the different types of care that will be applicable within the current emergency.
- In addition, Liberia has a “Children’s Law”, providing legal protection for children, a Social Welfare Policy, an “Essential package of social services to guide the provision of Child Protection services” and Guidelines for Residential Care.
- In addition – and potentially importantly in the current context – an Adoption Law was being drafted at the time of the onset of the crisis.

The Ebola emergency makes these frameworks and the acceleration of their application and implementation more relevant than ever.

Source: (2014) Provision of alternative care to children affected and infected with Ebola in Liberia

**LEGISLATION FRAMEWORK: CHECKLIST**

*NOTE: This checklist includes some key elements for analyzing the legal framework but they are only illustrative.*

<table>
<thead>
<tr>
<th>DO YOU HAVE.......</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information on the mandate, responsibilities and structure of government bodies or organizations with statutory authority for the safeguarding of children?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A national plan of action or other policy frameworks in place?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Summary of legislation, policies and procedures governing welfare/safeguarding/protection of children?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CRC core principles explicitly articulated, including non-discrimination; commitment to the best interests of the child; right to life, survival and development; and respect for the views of the child?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>International conventions to which the country is a signatory or has ratified (for instance: UN Convention on Rights of the Child and its 3 Protocols)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brief analysis of implementation/enforcement of legislation as far as this is known?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laws governing the legal age of majority, the legal age of consent and analysis of their application and impact on children?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laws governing gender equity, gender based violence and analysis of their application and impact on girls and boys?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laws regulating different forms of child labor, including worst forms of child labor?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laws acknowledging the rights of children to be protected, treated with respect, listened to, and have their views considered?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policies that guide the organization’s intent to keep children safe?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Precise definitions of key terms such as abuse, neglect, violence and guidelines for response actions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MoU with Government and other relevant Partners signed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engagement with local authority and other stakeholders organized?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partnership agreements with a close medical clinic established?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coordination and cooperation mechanisms?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Blank spaces are for you to fill in yourself as required by your particular areas of focus.*

With more advanced groups, specific areas of child protection can be assessed such as the following two:

### SPECIFIC AREAS OF CHILD PROTECTION: VIOLENCE AGAINST CHILDREN

| Stand-alone national legislation? | Law: ______________________ |
| If yes, statement of guiding principles drawn from CRC and other international standards in legislation? | |
| If no, protections covered in existing legislation – such as family law, child welfare, education, criminal, etc? | Law(s) ______________________ |
| Contradictions, conflicts, or gaps between legislation and the CRC and other international instruments? | Provisions ______________________ |
| Intersections, contradictions, conflicts or gaps between violence legislation and other national laws relevant to child protection? | |
| Gender analysis: disparities between girls and boys? | |
| Structures (ministries/departments) charged with implementing national legislation? | Justice system: |

---

<table>
<thead>
<tr>
<th>Legal standards for decision-making at critical points of the process depending on the nature of the decision and seriousness of consequences?</th>
<th>Social welfare system:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explicit provision of services?</td>
<td>Justice system:</td>
</tr>
<tr>
<td>Social welfare system:</td>
<td></td>
</tr>
<tr>
<td>Complaints/reporting mechanism(s)?</td>
<td>Social welfare system:</td>
</tr>
<tr>
<td>If yes, children have a right to report independently?</td>
<td>Yes No</td>
</tr>
<tr>
<td>If yes, child-friendly procedures (please note what these are)?</td>
<td>Yes No</td>
</tr>
<tr>
<td>If yes, confidentiality assured?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Monitoring mechanism(s)?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Budget allocation in law?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Subsidiary legislation, such as regulations?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Budget allocation in law?</td>
<td>Violence Other</td>
</tr>
<tr>
<td>Contradictions, conflicts, or gaps between subsidiary legislation, the CRC, and other international standards?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Intersections, contradictions, conflicts, or gaps between legislation (including other relevant laws/regulations) and subsidiary legislation?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Structures (ministries/departments) charged with developing and implementing subsidiary legislation?</td>
<td>Yes No</td>
</tr>
</tbody>
</table>

### SPECIFIC AREAS OF CHILD PROTECTION: COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN

<table>
<thead>
<tr>
<th>Stand-alone national legislation?</th>
<th>Law: ______________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, statement of guiding principles drawn from CRC and other international standards in legislation?</td>
<td>Law(s) ______________________</td>
</tr>
<tr>
<td>Provisions ______________________</td>
<td></td>
</tr>
<tr>
<td>If no, protections covered in existing legislation – such as criminal, evidence, labor, etc?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Contradictions, conflicts, or gaps between legislation and the CRC, Optional Protocol on the Sale of Children, Child Pornography and Child Prostitution, Palermo Protocol and other international instruments?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Intersections, contradictions, conflicts, or gaps between CSEC legislation and other national laws relevant to child protection?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Gender analysis: disparities between girls and boys?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Structures (ministries/departments) charged with implementing national legislation?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Legal standards for decision-making at critical points of the process depending on the nature of the decision and seriousness of consequences?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Explicit provision of services?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Complaints/reporting mechanism(s)?</td>
<td>Yes No</td>
</tr>
<tr>
<td>If yes, children have a right to report independently?</td>
<td>Yes No</td>
</tr>
<tr>
<td>If yes, child-friendly procedures?</td>
<td>Yes No</td>
</tr>
<tr>
<td>If yes, confidentiality assured?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Monitoring mechanism(s)?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Budget allocation in law?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Subsidiary legislation, such as regulations?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Contradictions, conflicts, or gaps between subsidiary legislation, the CRC, and other international standards?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Intersections, contradictions, conflicts, or gaps between legislation (including other relevant laws/regulations) and subsidiary legislation?</td>
<td>Yes No</td>
</tr>
<tr>
<td>Structures (ministries/departments) charged with developing and implementing subsidiary legislation?</td>
<td>Yes No</td>
</tr>
</tbody>
</table>
CONCLUSIONS AND FOLLOW-UP ACTIVITIES

We have just reviewed the legal aspects of child protection from international protocols to the legal and policy frameworks used in our country. Understanding these frameworks, along with the socio-economic and political context, are essential to recognize how they influence implementation of the CRC and its impact on systems-building interventions for child protection. The political, economic, social and cultural context and local customs also help determine the law, including whether a law can be enforced and how particular laws work in tandem or in conflict with cultural beliefs.

In highly decentralized countries, national law may have less impact or resonance for children and families than provincial laws. It is also important to know if customary law prevails over national law when inconsistencies exist. Many of your countries demonstrate pluralistic legal systems that incorporate modern and customary law. In Sierra Leone, for example, the role of chiefs as overseers of customary law is formally accepted in the national legal framework. This understanding will help inform your strategy to resolve conflicts and effect social behavior change in line with international principles and standards of child protection.

Activities

Go back to the Legal Framework mapping questions and select several of the questions you could not answer in workshop. Find the answers either in your community or by asking people who may know. How does this information assist you in doing your child protection work?

Now that you are familiar with various child protection common, civil and customary laws, conduct research in your community on:

1. How well the law is understood by people, both adults and children. Why is the law violated?
2. How are child protection laws and regulations implemented in the community?
3. What are the barriers to effective implementation of the child protection laws and regulations?
4. Ask for advice on how people could be made better aware of the law.
5. Ask for advice on what type of surveillance system could be used to stay informed of violations in the law.
6. What policies would community members (adults, those who are tasked with up-holding a law, and children) suggest need to be enacted in order for laws to be up-held?
MODULE 3. CONTEXTUAL MAPPING AND NEEDS ASSESSMENT

Recap – Module 2

Ask volunteers to review what we covered in our last meeting. Discuss their experiences in analyzing their legal context. What problems arose and how did you solve them? What benefits, if any, came from actively seeking children’s input? How will you maintain these advances in your child protection work?

Preparing for Module 3

Community mapping will require some field practice. It may be best to select a community near to the majority of your participants to guide them through the mapping and analysis process. This will need to be cleared with the community in advance, so they will be prepared to meet with participants.

While in the field, the various data collection activities should be conducted. This will require preparation. These field activities should be arranged in the morning (near the training facility) so that discussion activities can be done together later. A way to save time could be to split the groups so that one group does a transect walk (described below) and another group does the interviews. Together in later sessions, experiences and findings can be shared.

You have already identified your legal framework as well as compared legal issues to traditional means of managing child protection concerns. Now, you need to be sure that your systems strengthening work is in line with the specific needs and goals of the community. While most of the literature on CBCPMs focus on their links to a formal referral system as central to their success, in reality these links are not always possible, nor are they needed for responding to every case, as we discussed in the previous module. Many child protection issues can be prevented and handled within existing community structures and traditions.

In this section, we will:

• Map the existence and effectiveness of the elements of the child protection system in the community
• Analyze the issues and systems and identify next steps for community actions and for identification and design of child protection activities.

To begin, we must build up from what already exists in communities, to avoid “a risk of overlooking efforts within the community or damaging pre-existing mechanisms, developing parallel systems and alienating community members”11. Thus, Step 1 is to know your context, recognize a community’s own strengths and weaknesses, and examine how it interacts with children.

Research, even within a community in which you are a member, requires certain ethics12.

• Especially when working with children, establish as much equality as possible: Facilitators should always strive to sit, speak and act in ways that are child-friendly and that minimize power inequalities with participants as much as possible.
• Avoid raising unrealistic expectations: The facilitators should not make any promises to participants that they cannot keep, and should follow through on all commitments made. This includes a broad range of possible commitments, such as promising to return and see a child to saying that we will implement a project in their community.

12 Adapted from WV ADAPT p.12-3.
• Reciprocity: Any compensation to participants (such as refreshments) should be agreed upon in advance. Avoid giving money because it can result in raised expectations, lead to tension and jealousy in the community, and bias participants’ contributions (especially in research).

• Respect privacy: Facilitators should not probe for information if it is clear that a participant would not want to answer. Also, facilitators should always ask for permission to use stories, pictures, or other information.

• Ensure confidentiality: Data must be stored in a safe place where unauthorized people cannot access it. The facilitators should protect the identity of all participants by changing their names or not collecting names at all. Participants should not be named in reports or be traceable by anyone without permission. As far as possible, share research results with participants before making them public and seek their consent to plans for distributing publications or communicating information. Confidentiality can be breached to provide immediate protection to a child.

KNOW YOUR CONTEXT

Informal child protection mechanisms throughout much of the world are based on cultural and traditional definitions of child protection that are shaped by local sources of authority that may or may not be in line with international or national laws. Community level mechanisms are mostly voluntary and driven by the concepts of shared responsibilities for childcare. The nature, scope and efficacy of informal child protection systems could vary significantly across communities in any given country or across countries and societies.

Strengthening your child protection system, therefore, takes account of and responds to the needs of the local context. This means your first step will be to understand the knowledge, attitudes and practices of people living in that context. Even if you are a member of this community, unless you have been trained in social research, there is much about the everyday behavior of your own community that you will not have paid attention to. For example, how does the informal system function? When and how does the formal system take over? How well are the systems coordinated? How does prevention and surveillance work in the community? What kinds of problems exist for children that remain undetected and not responded to? Who are the children not reached by protective services and why? Are the issues most important to adults also important to children?

In order to answer these questions, we use qualitative methods of assessment, which are ways of gathering information that yield results that can’t easily be measured by or translated into numbers. They are often used when you need to understand the subtleties behind the numbers – the feelings, small actions, or pieces of community history that affect the current situation. They acknowledge the fact that experience is subjective – that it is filtered through the perceptions and worldviews of the people undergoing it – and that it’s important to understand those perceptions and worldviews, especially as they impact on the lives of children.

Here are a few suggestions to help you manage your key informant and group interviews13:

• Record carefully the time, place, circumstances, and details of the interview. This includes a description of the location (the neighborhood as well as the space, if you’re interviewing a community member), other people present, other factors influencing the interview or the situation. Include a general description of the interviewee (married woman, farmer, age 25, three children aged 6, 4, and 1).

• Think out and frame your questions carefully, and ask directly for the information you’re seeking. Memorize your basic questions (not necessarily word-for-word, but know what they are), so that you refer to notes as little as possible. Make your questions clear and unambiguous, so that questions aren’t vague or difficult to understand.

• Ask open-ended questions. These are questions that require an “essay” answer, rather than a yes-no response. For example, instead of asking, “Did you enjoy being in the program?” you might ask, “What was participating in the program like?” Try to give people the chance to answer as fully and thoughtfully as possible.

• **Probes.** Ask follow-up questions to get at what people are really saying, or to keep them talking about a topic. ("Why did you like it when the teacher asked your opinion?") Don’t be afraid to pursue what may seem to be a sidetrack. Sometimes the best or most important information lies off the beaten path.

• **Confirm what you’re told by checking with others to the extent that you can.** Remember that you’re getting people’s perceptions, which aren’t always the same as objective reality. Ask similar questions in other contexts with other people to triangulate or verify your findings.

• **Teamwork.** Work in pairs at least so that one member can focus on questions/discussions and the other can take down notes. The strength of your data is in your notes so be sure to record as much as possible.

• **Analyze your findings.** Compile all the information you have collected for review. Data analysis methods will be discussed further below.

### Activity 1: Community Orientation and Transect Walk

Contextual mapping of the community, its characteristics, its own identification of what is a child protection problem and what is not, will help you to identify a community’s capacity to recognize and understand its child protection risks. It will expose where the gaps are that need to be filled as well as expose what enabling programs are required in order to formulate the foundation from which to strengthen your child protection work. Most importantly, your transect walk data can be compared to the community mapping you conducted with children following module 1. Where are the similarities and differences between these maps and what do they tell you about child protection issues?

**A Transect Walk** is a systematic walk along a defined path (transect) across the community/project area together with the local people to explore by observing, asking, listening, looking and producing a transect diagram (see figs. 1 & 2).

### Purpose of the Activity

• Conducting a transect walk will help you to answer the question: What are the primary and secondary issues that may be affecting a community’s stability and the safety of its children?

Issues, such as the availability of water and sanitation, have far ranging consequences on child safety that were not considered or mentioned during our fieldwork with community child protection committees in Liberia (see box and table 4). During the same visit, a facilitator asked how many babies die each year from diarrheal diseases for infants and safety—especially for girls—becomes a major concern, even though our interviewees did not mention it. Something so common and with no solution is not recognized as a problem.

**WATER AS A CHILD PROTECTION ISSUE**

Weala, Liberia: In an area with no water and sanitation, immediate concerns regarding diarrheal diseases for infants and safety—especially for girls—becomes a major concern, even though our interviewees did not mention it. Something so common and with no solution is not recognized as a problem.

Bombali, Sierra Leone: Lack of a water pump means that children must fetch water for the family’s cooking and cleaning each morning, a prime child responsibility that can interfere with their schooling. If a child is consistently late for school, or has little time for study, their interest drops, their grades fall, and they tend to drop out of school, commonly leading to child labor and early marriage.

**Steps: Transect Walk**

• Select the community in which your child protection work is done.

• Go there with paper and notebook.

• Draw a map of the area to identify key landmarks like schools and religious centers, community gathering areas, and sites that could contribute to the protection or vulnerability of children.
• It is best to walk a route (for example, diagonally from one extreme side of a community to the other), which will cover the greatest diversity in terms of community infrastructure in a way that allows for maximum interaction between the research team and community members.

• The information collected during the walk is used to draw a diagram or map based on discussions held amongst the participants.

• After completing a map, each team member revisits the sites that could be important to child protection as well as visiting areas off the main road that were missed during the original mapping.

• During all transect walks team members should introduce themselves and chat with members of the community, explain the research and ask people about areas where children congregate, where do they often go, what areas do they avoid, and anything else that may be relevant. Locations of schools, play, work, water sources, sanitation (defecation and bathing), rubbish disposal, shops, fields, factories, anywhere a child may go, should be noted. How safe, how far, how dangerous are these areas? Do children need to cross a highway, a river, pass an alehouse or roadhouse, to get to their destination?

• Compare this map with the map created with children following module 1. What similarities or differences are there?

Maps can be updated with information gathered during later walks, and can be used during interviews to ensure geographical diversity within the town and identify key locations for observation, meeting marginal groups (street kids, drug dealers, sex workers, gang members, etc.) and other key informants.

Now that you are aware of where children go, what they do, how they interact in a community, you are ready for further analysis of the risks faced by children. Keep in mind that any surveillance or prevention work needs to be based on awareness of what these risks are and targeted to monitor or mitigate problems.

**Activity 2: Guided Interviews on Family Life**

How families care for their children can help direct you toward identifying how to target your surveillance and prevention initiatives. These questions can be answered in several ways. You can try directly asking in one-on-one interviews or in small groups. Alternatively, try some of the exercises below as a way of guiding participants to respond with a bit more support.
<table>
<thead>
<tr>
<th>GUIDING QUESTIONS</th>
<th>SUPPLEMENTARY QUESTIONS</th>
<th>METHOD(S) FOR DATA COLLECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What are the attitudes and beliefs in the community about children, child development and child protection?</td>
<td>• How do families care for and protect children at different ages?</td>
<td>• FGD with adults (men and women separately)</td>
</tr>
<tr>
<td>• What are the most positive/protective parenting practices in this community?</td>
<td>• What do parents expect from their children at different ages?</td>
<td>• Key informant interviews</td>
</tr>
<tr>
<td>• Are there any harmful traditional practices in this community? What is their prevalence?</td>
<td>• How does the gender of the child change care and expectations?</td>
<td></td>
</tr>
<tr>
<td>• Are certain types of children in households more likely to be abused, neglected or exploited (such as girls, children with disabilities, etc)?</td>
<td>• What can be changed in common family behaviors to strengthen the protection of children?</td>
<td></td>
</tr>
<tr>
<td>• Are faith based organizations playing a positive, negative or neutral role in preventing abuse, exploitation and neglect?</td>
<td>• How are children disciplined in families?</td>
<td></td>
</tr>
<tr>
<td>• Do children know the difference between good and bad treatment in the home, school, and communities? Who do they contact if they are in trouble?</td>
<td>• Are sensitive child protection issues discussed or addressed in this community? If so, how?</td>
<td></td>
</tr>
<tr>
<td>• Are children’s voices being taken into account on child protection issues within households and the community?</td>
<td>• How are children participating in local governance related to child protection issues?</td>
<td></td>
</tr>
<tr>
<td>• How are children influencing their own environment to be more protective?</td>
<td>• How are children participating in community-based child protection mechanisms/groups?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• How are children participating in the design, monitoring and evaluation of child protection services?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Are there any organized programs to build life skills for protection among children?</td>
<td></td>
</tr>
</tbody>
</table>

Activity 3: Parenting Challenges

Purpose of the activity

This activity gives participants the opportunity to share and gain knowledge about the challenges of caring for babies and young children these days. It also provides the facilitator with good information on what caregivers perceive as the main challenges they face. Allow 40 minutes for this activity.

Preparation

Be familiar with mapping exercises

Materials needed

- Flipchart paper and colored markers
- Index cards

Explaining the activity

Explain to participants that they will brainstorm all the kinds of challenges parents/caregivers of babies and young children have these days.
Implementing the activity

On flipchart draw a simple picture of a parent/caregiver in the middle of the paper.

- Ask participants to suggest any challenges that parents/caregivers of babies and young children experience these days.
- Write these ideas on the flipchart. You can draw lines from the drawing of the parent/caregiver and write their suggestions using a few words or phrases next to the lines. Alternatively, write the words and phrases on index cards and categorize them according to the source of the challenge: family, community, economy, environment, violence, culture, education, etc., etc.

Reviewing the activity

Upon completion of the activity, review the findings and confirm the biggest challenges families face. Ask participants to explain why. Do they all agree? This can help target later sessions.

Expanding the activity

Go over the challenges and ask participants for suggestions on how to overcome these challenges. What suggestions do they have to prevent or mitigate the problems?

Activity 4: Gendered Roles in Family Life

Purpose of the activity

- Identify the different roles the community imposes on female and male members of the community.
- Explore how gender impacts personal experience and the community as a whole.

Preparations for Facilitators

- Where groups are low-literate, prepare flipchart paper with columns for age, boys and girls. In the age column, draw a picture or use photographs of a child at the age in question. On top of the boy/girl columns, draw a picture of a boy and girl. Participants can then draw their responses and verbally describe them.

Part A: Creating Gender Lifelines (30 min)

1. Divide the participants into two groups.
2. Ask both groups to discuss the lifelines of a girl and a boy in your community, starting from birth to 25 years old. Ask them to think about how boys and girls are expected to behave, how they are treated, the importance and value placed on the individual. For example, during childhood, the girl may take care of younger siblings, while the boys play. How do boys and girls share household chores? Do they both go to school? Are they equally expected to behave? Are they given equal amounts of food?
3. Ask each group to draw three columns on the flipchart, and to title column one, Age, column two, Girl, and column three, Boy. So, in column one, the first entry would be 0-5 years. In column two, there should be a description of the girl’s life during these years. In column three, do the same for the boy’s life during these years. Ask each group to record the life of a boy and then that of a girl on the flipchart in five-year increments.

Example of growth/development chart – this has an added column called needs, which can be used to discuss what the child needs at each age. Do boys and girls have different needs? If so, describe them!
### Part B: Discussion

1. Ask each group to present and discuss their work with the main group.

2. Discuss why there is a difference in the way we socialize girls and boys. Emphasize the point that we teach girls to behave in a different way compared to boys. **Sex is determined biologically, but gender is the social roles that the culture and community imposes on individuals. Explain that the sex of a person is biological and fixed but gender is social and can change. Sex is what we are born with; gender is what society teaches us about how we should behave based on our sex. As communities and cultures change and grow, so can our rigid expectations about how we should behave simply because of our sex.**

   - **Sex** is determined biologically
   - the **sex** of a person is biological and fixed
   - **Sex** is what we are born with; female or male (sex)
   - **Sex** does not change no matter what the country or the conditions.

   - **gender** is the social role that the culture and community impose on individuals
   - gender is social and can change
   - **gender** is what society teaches us about how we should behave based on our sex; we learn how to be girls and boys, and then become women and men (gender)
   - gender is based on the power relations between men and women and always changes

3. **Gender** refers to what it means to be a boy or girl, woman or man, in a particular society or culture. Each society teaches its members the expected attitudes, behaviors, roles and activities that define our belonging. **Gender** defines the roles, responsibilities, constraints, opportunities and privileges of men and women in any context. This learned behavior is known as **gender identity**.

4. Ask the group to discuss what this might mean and why this point is important. Emphasize that how we expect girls and boys, women and men to behave is socially developed and is not determined biologically. In this way, the culture in which girls and boys grow up determines their quality of life by the difference in opportunities it offers them. For the most part, your work as a community leader is to

<table>
<thead>
<tr>
<th>AGE</th>
<th>MALE’S LIFE</th>
<th>FEMALE’S LIFE</th>
<th>NEEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Boy" /></td>
<td><img src="image" alt="Girl" /></td>
<td><img src="image" alt="Girl" /></td>
<td><img src="image" alt="Boy" /></td>
</tr>
<tr>
<td><img src="image" alt="Stability, support, love, trust, safety" /></td>
<td><img src="image" alt="Support in taking care of themselves, cleanliness, understand environment &amp; safety, social supports, discussion, learning" /></td>
<td><img src="image" alt="Express ideas, feel valued, respected, discipline" /></td>
<td></td>
</tr>
</tbody>
</table>
explain how these different expectations and roles can be unfair and impose unjust restriction on women and girls, assigning women and girls a lower status compared to men and boys. This inequality, in turn, prevents our communities from prospering since it oppressed half of its members.

a. Try to think of ways in which gender inequality has hurt you personally.

b. How has it hurt the community? How has it hurt children in particular?

c. Why does this happen?

d. How does this lead to violence in the home?

e. What could a leader do to start to make changes that will benefit the community?

**FORMAL AND INFORMAL COMMUNITY STRUCTURES**

Children and youth are actors in different environments. Often environments include: the household, school, the wider community, and sometimes their work environment. It’s important to understand the risks of these different environments and how children and youth experience these risks. First, you need to structure your analysis. You have already engaged children in an exercise to map their community and identify areas that make them happy, and areas that are not as happy. You asked children what they wish to change. You can then compare children’s maps with your transect walk map and discussions with community members. What differences and similarities did you find in these maps? Body mapping, community mapping and drawing spaces are additional tools to help probe with young people for specific protection risks and possible resources to reduce these risks.

Guiding questions can structure the information collection.

**What structures already exist that can become the central focus for strengthening a child protection pathway?**

The formal child protection and social welfare system, where it does exist, is shaped around notions of child rights, that may or may not mesh with long-standing childrearing practices and daily realities. Many countries incorporate both modern and customary law, in accordance with their local needs. Some aspects of these issues have been covered in module 2 on Legal Frameworks.

In rural contexts in particular, communities will use local mediation structures to resolve the majority of cases of abuse, neglect or exploitation. Given the traditional role of the Chief, religious leaders, or elders as mediator within communities, engagement with customary child protection mechanisms and resolution practices must be considered more strategically.

**FORMAL AND INFORMAL SYSTEMS**

Weala, Liberia: Has a functioning, trained CBCPC as well as a Women’s Peace Hut and Youth Forum. Such groups are on the border between informal and formal if only because they were created by NGOs to strengthen their roles as mediators and links to more formal systems. Their awareness is limited, however, to issues they can easily recognize and resolve, such as violence, but not to the less obvious issues of health and child labor for which they have no means of prevention. Watsan and income generation projects are needed to help raise awareness and provide a means to overcome these challenges.

Bombali, Sierra Leone: Has an extremely well designed and functioning Munafa-M’Patie Federation of concerned parents and children that since 2007 has become a registered CBO with NGO, INGO, and GOSL partners. Their work is on both prevention and response to child protection issues as the link between ideas and issues from villages and the ability to carry out actual prevention plans. CBCPC is functioning but has had their focus shift toward Ebola since the crisis began. Village Development Units (VDU) exist in each village to represent the family level in council meetings where all child protection issues can be discussed and action plans created with Federation support. More mapping and analysis is required to identify the roles of these various organizations as well as the gaps.

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14 See ChildFund (nd) and Child and Youth-Friendly Participatory Action Research Toolkit for more examples.
It is important to note that **Formal and Informal** should be considered as the two ends of a continuum and that there is likely to be much crossover between them. In many locations it might be challenging to define where one ends and the other begins. How, why and where the informal crosses into the formal is an important part of your analysis and mapping.\(^{15}\)

Table 4 will show what steps were taken to understand the context of Weala, in Liberia\(^{16}\) in relation to our child protection categories.

**Table 4: Overview of Contextual Mapping with Examples from Weala, Liberia**

<table>
<thead>
<tr>
<th>STEPS IN THE PROCESS</th>
<th>ACTIVITIES</th>
<th>OUTCOMES</th>
<th>EXAMPLES FROM THE FIELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Define community characteristics of the Referral Pathway in which you are working</td>
<td>Mapping the current network – how do people respond to child protection needs? (surveillance, coordination, response)</td>
<td>Recognition of strengths and weaknesses</td>
<td>Strong community, trained in child protection, GBV, good organizations, wise elders. Understaffed county social workers. DSW has good data management system. Weak health environment</td>
</tr>
<tr>
<td></td>
<td>Ranking specific risks to children (fig.x). Which are important here and which are not recognized? (surveillance)</td>
<td>Identify what are perceived and non-perceived problems. Who and/or what org is best set to identify and/or respond to set needs.</td>
<td>Risks Listed: GBV, child labor, poverty/lack school fees. Risks Not listed: illness from lack of watsan, child labor for water collection, mother/child mortality, bush school/FGM. Risks mentioned by women: child abandonment, cruelty toward non birth child.</td>
</tr>
<tr>
<td></td>
<td>What are the entry points for identifying children in distress? (surveillance, coordination, response)</td>
<td>Identify who people turn to for various problems</td>
<td>Close community self/other monitoring within limits. Designated elders (CBCPC and Women’s Peace Hut) do intervene, recognize own limitations, when and who to call for support (police only in case of rape.</td>
</tr>
</tbody>
</table>

**Mapping Community Networks**

The next step in developing or strengthening a child protection system in your area is to learn about the functioning of existing community mechanisms, indigenous or externally facilitated, for identifying, intervening or supporting children at risk (see table 4). Ethnographic methods such as participant observation and in-depth interviews, together with transect walks, timelines, group discussions, and other tools will show how community people view children, childhood, risks to children and how or if they respond to those risks. Particular emphasis should be placed on mapping what is recognized as vulnerability and what is not, and pathways of response. That is, what did people do when faced with a particular problem? The common enemies of child protection: poverty, illiteracy, and disease need to be mapped, as these result in many of the protection problems we are looking to resolve.

A basic necessity of any fieldwork\(^{17}\) is to validate information you receive by inquiring about the same things with different people. That is why triangulation of data is ALWAYS required. You can triangulate, or use several methods to confirm what people say, by using more than one source

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15 Ibid.
16 The information on Weala and Bombali is based on very brief FGDs and KIIs. All information is provided as example only. It needs to be verified through further and deeper analysis that requires more than a few hours’ interaction. Structure of information in Tables 4 and 5 is adapted from formats found in World Vision 2011.
17 See also ChildFund (nd) Modules on Planning Children and Youth’s Protection Through the Area Strategic Planning Process for many examples and guides to participatory planning.
or data collection tool or activities. This is because, as we experienced in our own mapping in Liberia and Sierra Leone, communities may not recognize a problem despite it having serious consequences for their children. Table 4 (above) lists risks mentioned, not mentioned and risks mentioned by women but not men. During our transect walk, we were able to ask about basic community needs, such as watsan, food sources, electricity/lighting as access to entertainment, etc., and basic safety which were verified verbally from several sources. Annex 1 has suggested questions that can help you in your mapping. In brief,

- Use your eyes to see what is around you, how people, interact, what their environment looks like, how healthy the children look, how involved youth are in the discussions with adults, etc.
- Listen to what and how people respond to your questions. Ask follow-up questions to probe responses.
- Repeat your questions with other community members away from the leaders who most likely dominated your initial discussions. Hold separate FGDs or KIIs with men and women, youth and younger children.

Table 5: Steps to Pathway Identification and Formalization with Examples from Weala, Liberia

<table>
<thead>
<tr>
<th>STEPS IN THE PROCESS</th>
<th>ACTIVITIES</th>
<th>OUTCOMES</th>
<th>EXAMPLES FROM THE FIELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Define strengthening process for links in pathway to formal system</td>
<td>What issues are best managed locally and which require entry into formal systems? (response)</td>
<td>Recognize local capacity and where further support is required. Assume MOST child protection issues can be managed locally.</td>
<td>Child neglect, violence, GBV, managed through palava deliberation. If they fail to reach consensus, contact police. Rape directed to police.</td>
</tr>
<tr>
<td></td>
<td>Assess scope and quality of available resources. Assess how enabling the environment for child protection is (response, coordination).</td>
<td>Know who affects children and whether they are trusted, respected, accessible</td>
<td>Traditional Palava system – consultation and deliberation works well to solve problems. CBCPC (m&amp;f) well trained, anxious for more. DSW understaffed and stressed. Police trusted first call for help; clinic poor quality, no meds. Feel disrespected there. School monitor system works to keep girls safe from predatory teachers.</td>
</tr>
<tr>
<td></td>
<td>Assess awareness, adherence to child protection principles (surveillance, prevention).</td>
<td>Understand child protection principles – link possible awareness raising activities to targets.</td>
<td>Basic awareness strong but tradition, poverty, lack of basic services, prevent improvements. (no electricity, no watsan, clinic is not trusted).</td>
</tr>
<tr>
<td></td>
<td>Determine pathways, hubs (response, coordination)</td>
<td>Have reliable focal points designated by each member</td>
<td>CBCPC and Women’s Peace Hut are capable within limits. Will need capacity building but should be supported to lead the referral pathway.</td>
</tr>
<tr>
<td></td>
<td>Design intake/assessment forms (response)</td>
<td>Standardized assessment procedures</td>
<td>Elders see a role for this to ‘formalize’ their support for child protection. More respected if on paper. Need to identify local formats/templates used by government agencies.</td>
</tr>
<tr>
<td></td>
<td>Formalize commitments, pathway relationships with MoU (coordination)</td>
<td>Format for MoUs negotiated together to specifically ensure commitment, designate roles and responsibilities, build ownership, shared, signed.</td>
<td>This may not work at community level because of illiteracy. Strength is in face-to-face bond and trust. MoU only between NGO and government agency such as Social Welfare. MoU between CBCPC and partners MUST be carefully negotiated as verbal contract; then written 1 page commitment, time frame, responsibilities.</td>
</tr>
</tbody>
</table>
Data Analysis Techniques

Now that you have collected a great deal of data, what do you do with it? A simple way to assist analysis is to review your notes and transfer your main points onto a data matrix as seen also in Tables 4 and 5. Here you can classify your information according to your main questions. It can be reviewed by anyone and used to summarize your findings.

<table>
<thead>
<tr>
<th>GUIDING RESEARCH QUESTIONS</th>
<th>INFORMATION ELICITED FROM INTERVIEWS AND FGDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>What are the priority child protection issues within this community?</td>
<td></td>
</tr>
<tr>
<td>What are the root causes of the priority child protection issues?</td>
<td></td>
</tr>
<tr>
<td>What is being done to prevent child abuse, exploitation and/or neglect in the community?</td>
<td></td>
</tr>
<tr>
<td>Are there formal or informal mechanisms of support for households that are identified at high risk of child abuse or exploitation?</td>
<td></td>
</tr>
<tr>
<td>What child protection laws or regulations are known in the community? How are they implemented?</td>
<td></td>
</tr>
<tr>
<td>What do people usually do when a child is abused or exploited in this community? Are people satisfied with the outcome of the response?</td>
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</tr>
<tr>
<td>What services exist in the community (formal and informal) to protect and provide support to children who are at risk or have experienced abuse, neglect, or exploitation?</td>
<td></td>
</tr>
<tr>
<td>Do children and their families who are vulnerable or have been affected by abuse, violence or exploitation have access to these services?</td>
<td></td>
</tr>
<tr>
<td>What are the linkages and gaps between informal and formal parts and actors of the system? How do community members view the formal child protection mechanisms?</td>
<td></td>
</tr>
<tr>
<td>How satisfied are community members with the common response to child protection issues and current child protection services?</td>
<td></td>
</tr>
<tr>
<td>What are the prevailing attitudes and beliefs in the community about children, child development and child protection?</td>
<td></td>
</tr>
<tr>
<td>What are the most positive and protective parenting practices in this community?</td>
<td></td>
</tr>
<tr>
<td>Are there any harmful traditional practices in this community? What is their prevalence?</td>
<td></td>
</tr>
<tr>
<td>Do parents and primary caregivers have capacity to prevent the cases from happening? Why not? Why yes?</td>
<td></td>
</tr>
<tr>
<td>What should be done to improve prevention and protection against violence, abuse and exploitation in the community?</td>
<td></td>
</tr>
</tbody>
</table>

CONTEXT MAPPING AND NEEDS ANALYSIS: KEY POINTS & CHECKLIST

A sustainable child protection system must start from the community itself and its own recognition of child protection issues and capacities. Therefore, mapping capacities is a necessary first step. These questions will help clarify what is known and what needs to be known about a given community. It should also help you prioritize what areas of child protection – prevention and response - a community is able to manage and where gaps are that need to be bridged through further or on-going support.
<table>
<thead>
<tr>
<th><strong>DO YOU ……</strong></th>
<th><strong>YES</strong></th>
<th><strong>NO</strong></th>
<th><strong>NOTES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognize what communities understand to be their strengths and weaknesses?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognize what communities DO NOT YET understand to be their strengths and weaknesses?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Know what the community considers its child protection priorities?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand why these are priorities and what their root causes are?</td>
<td></td>
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</tr>
<tr>
<td>Know what child abuse issues affect the community but are not prioritized (such as FGM, water &amp; sanitation issues, etc)?</td>
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<tr>
<td>Know what formal and informal child protection actors have the capacity to perform their designated child protection roles?</td>
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<tr>
<td>Know if teachers, health workers, police, social workers or counselors have the capacity to identify, report and respond to cases of abuse, violence and exploitation?</td>
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<tr>
<td>Know what child protection laws and regulations the community already knows and which are not known?</td>
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<tr>
<td>Know what the community is already doing to prevent abuse, exploitation and neglect in the community?</td>
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<tr>
<td>Know what groups may be more vulnerable than others to abuse, exploitation, neglect?</td>
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<td></td>
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<tr>
<td>Know what formal or informal mechanisms of support exist for households that are identified at high risk of child abuse or exploitation?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Know what processes or mechanisms (formal or informal) are normally used by families or children when a child has been abused or exploited?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Know what services exist – and are accessible – to provide support to children who are at risk/have experienced abuse, neglect or exploitation?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Know what referral links already exist, and how and why they are used?</td>
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<td></td>
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<tr>
<td>Have referral contacts that can be introduced to the community and designated focal points?</td>
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<tr>
<td>Know what the gender roles and expectation are in this community, and how these affect girls and boy’s development?</td>
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<td></td>
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<tr>
<td>Know how or if children have the voice or ability to influence their own protection?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Know the attitudes and perceptions in relation to differently abled children and how their care and protection is promoted?</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**CONCLUSIONS & FOLLOW-UP ACTIVITIES**

Regardless of the situation in any community, all child protection work will benefit from knowing exactly where community members stand in terms of their knowledge, beliefs, and practices regarding children and child rights.

It is impossible to impose change on a community including a new way of understanding children when it is in conflict with deeply held traditions and behaviors. Yet by knowing what people do, believe, expect, demand from their children you create a base and starting point for exchange of ideas, and a foundation for change.

Ask participants to review what they learned from today’s activities and discussions. What do they see as the most supporting and challenging for their future child protection work?
Activities

If you split the group in conducting the various activities, the groups should switch and try the other activity that they did not experience.

Try conducting more field research with different community members to compare results. Try asking children some of these questions to compare answers.

Analyze the results of your community map with that of the children’s maps created for module 1. What similarities or differences are apparent? Try asking children and adults to explain further.

Write up your data collected during activities in a data analysis matrix. Experiment with the format to try and find the format best for you. Look also at the tables 4 and 5 to compare how that data was organized.
MODULE 4. ASSESSING CHILD PROTECTION NEEDS

Recap – Module 3

Ask volunteers to review what we covered in our last meeting. Discuss the pros and cons of interviewing community members and the processes of verifying data. What problems arose and how did you solve them? What benefits, if any, came from actively seeking people’s input? How will you maintain these advances in your child protection work? How did filling in the data matrix help, or not help, you to analyze your information? Do you have other suggestions for managing data?

Preparing for Module 4

For this module, field interviews in the community are requested. Depending on the experience levels of participants, hold practice interviews and focus groups together first. Participants should be divided into groups with designated roles for interviewers, note takers and observers. Prepare a few groups of community members to provide information and have other groups decide where they could find the more marginal groups to interview.

Information is key to knowing the prevalence of risk factors in your area. A strong child protection system requires an information system able to identify and monitor key risk factors (such as children living in poverty or children living without parental care) that make children more susceptible to protection concerns. The ability to identify a vulnerable child before he or she becomes a victim of a more serious problem allows child protection actors to monitor the child and provide preventive support. A system that is well-equipped to identify risk factors and implement prevention strategies will result in lower prevalence rates of key child protection problems. Additionally, knowing which children are at risk is key to defining prevention activities and programs.

In this section, we will:

- Identify and prioritize child protection issues in the community
- Identify the most important root causes of those issues

Activity 1: Guided Questions for Identifying Child Protection Priority Issues

We will start by identifying child protection priorities in the area, their root causes, and possible prevention ideas. Identification of concerns is necessary for targeting your surveillance and prevention.

The table below has a questionnaire matrix with sample questions to ask with children’s groups (aged 9 and above) and adults. Try out the questions among your colleagues first. Then, we will schedule interviews with your communities.
Table 6: Identify Child Protection Priority Issues (Surveillance and Prevention)

<table>
<thead>
<tr>
<th>GUIDING QUESTIONS</th>
<th>SUPPLEMENTARY QUESTIONS</th>
<th>METHOD(S) FOR DATA COLLECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What are the priority child protection issues and their root causes within this community?</td>
<td>• Are children trafficked, sexually abused, physically abused, missing, engaged in child labor, living or working on the street, living without parents, etc…?</td>
<td>• FGD with children</td>
</tr>
<tr>
<td>• Are any particular groups of children more vulnerable than others to abuse, exploitation or neglect?</td>
<td>• Are there harmful traditional practices present here such as female genital mutilation or early child marriage?</td>
<td>• FGD with adults</td>
</tr>
<tr>
<td></td>
<td>• What are the main violence, safety or crime problems in this area? Affecting men / boys? Affecting women/girls?</td>
<td>• Key informant interviews</td>
</tr>
<tr>
<td></td>
<td>• How affected by poverty are families here?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Can all children go to school?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Who is mostly affected by/vulnerable to the identified child protection issues and why? How do same issues affect different groups?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• What are particularly risky situations, places or times when crimes happen?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• How long have these problems been occurring?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• What are the main causes of the identified issues and problems and why?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• In contexts of armed conflict: How are children directly and indirectly affected by the armed conflict?</td>
<td></td>
</tr>
</tbody>
</table>

Activity 2: Defining Vulnerability

Purpose of the Activity
- To develop a shared definition of vulnerability for this area.
- To recognize which child risks are hidden or stigmatized.

Materials Needed:
- Flipchart paper, markers

Steps: PART A – what is vulnerability?
- Divide the participants into small groups. Give each group a piece of flipchart paper and some colored markers.
- Ask each group to draw a picture of a child who is not doing well in the center of their paper.
- Ask them to add notes or pictures to describe some of the signs of how they know the child is not doing well.
- After the groups have finished their drawings, ask each small group to present their drawing to everyone in the starter group. Discuss similarities and differences between groups.

Tips for Facilitators
- If participants are writing statements such as ‘not healthy’ or ‘not educated’ ask them to describe or draw how they know that the child is ‘not healthy’.
- Be careful not to give descriptions, these should come from the participants.

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Adapted from WV-ADAPT p63-66

DEFINING VULNERABILITY

Vulnerability is the physical, social, economic and environmental factors or processes that increase the susceptibility of a community or individuals to difficulties and hazards and put them at risk as a result of loss, damage, insecurity, suffering and death. Vulnerability is specific to each person and each situation.
• If groups are having difficulties coming up with descriptions, consider using these probing questions:
  • Do you see any types of exploitation or abuse? If so, what types?
  • Do you see any types of disasters affecting certain households? If so, how is it affecting the children?
  • Do you see extreme situations of children not having what they need? If so, what types of needs are unmet?

Steps: PART B – why vulnerable?

Now that we have these drawings of children who are not doing well in this area, we are going to use these to help us define vulnerability.

• Divide the participants into small groups and give each group 8-10 blank cards. (Assigning participants to new groups will encourage them to share from the last exercise.)
• Ask each group to use one of the drawings they created earlier. Ask them to use this drawing to identify the reasons why these children are not doing well.
  For example, if a description says, ‘this child is crying’, the group would write down on a blank card a reason why they think the child is crying.
• The groups will work through their drawings, writing on cards the reasons why the children are not doing well. Write one reason per card.
• After the groups have written all the reasons, each group works on their own to arrange their cards in the order of increasing seriousness of each reason.
• Once each group has completed, the exercise, they should present and explain their answers.
• Post all of the cards on the wall and arrange them so that cards that have the same or similar reasons on them are grouped together.
• Based on all the reasons posted, work with the starter group to come up with a list of the top 8 to 10 agreed-upon reasons causing vulnerability.
• Give each participant 8 to 10 colored dot stickers. Ask the participants to place stickers on the cards that they think are the most important reasons that cause vulnerability in their area. Identify the top 8 to 10 selected reasons.

Write this list on a flipchart paper. This list summarizes the most important factors causing vulnerability in children in this area.

Steps: PART C - Identifying the most vulnerable children

We have now looked at what it means for children to be vulnerable in this area. We have discussed the characteristics of children who are not doing well and identified some of the reasons why the children are not doing well. Now, we are going to look at which groups of children are vulnerable in our communities.

• Using the definitions developed in the previous exercise, consider the following questions together and develop a list of the groups (or types) of most vulnerable children from the discussion.
  • Which children are living in the worst situations in this community? Why?
  • Which children face the most discrimination in this community? Why?
  • Which children have the lowest possibility of a bright (good) future? Why?

Tips for Facilitator

Initially, the facilitator should try not to give any examples, but if the group is really struggling with these questions, the facilitator may give 1-2 examples so that they understand the exercise (such as, a child is vulnerable if his mother is chronically ill; or a child is vulnerable if she is a member of a certain tribal minority group; or children working in the brick factory are very vulnerable).

• After the list is generated, the facilitator can use the list below (considering the local context and which of these are relevant) to help the group consider if there are children in the area who are:
PART D - Discussion

After the list has been developed, discuss how you would prioritize the vulnerability of the different groups. Which groups are more vulnerable than others? Recognize that different participants may have different perspectives and views. This is an initial discussion and can highlight the need for gathering more information from the individuals from the vulnerable groups, including children.

Finally, go back to your community maps and see if there are specific areas of your community in which children are particularly vulnerable. Are there areas of risk for children? Are there areas where vulnerable people tend to live? Are there places of safety? Are there places where children (disaggregated for boys and girls, as well as other groups of children) gather during the day and night?

DESIGNATING THRESHOLDS FOR RISKS

As we have seen, many child protection risks can occur in our community. In strengthening our child protection mechanisms, we will need to discuss the various vulnerabilities and identify the threshold at which a problem demands we act. Although there is a common goal for child protection in terms of preventing, mitigating and protecting against neglect, abuse and exploitation, what the supports and services look like may differ from country to country as well as community to community within countries. The primary work now is to have a participatory process that includes children, families and community participation on what this should look like on the ground and what it should be called.

We have just defined vulnerability. How does your community define child abuse, neglect, exploitation, and where do they see the need for intervention? These risks have different meanings in different contexts and can even be considered controversial. Therefore, contextualizing child protection in terms of language and meaning can have far-reaching benefits, especially when it comes to the delivery of specific job functions and approaches. Participatory research is an excellent means of identifying how language, needs and possible solutions can be assessed with the help of children, parents and other caregivers and community leaders.

Risk management, or identifying risks to children is an important step in developing and reviewing your child protection mechanism. Child protection risk management should become an ongoing activity, and be considered integral to the planning of all new activities or expanding existing ones.
Activity 3: Identifying risks to children

Purpose of the Activity

• To reach consensus on what is a child protection risk
• To create guidelines on when and how to respond by recognizing when a threshold has been met
• To understand formal categories of risk (use Annexes 6 and 7)

Steps: PART A – Is this Risk?

• Together let’s look at these scenarios and decide if it is:
  I. a vulnerable situation;
  II. a child abuse violation;
  III. a problem that requires community, committee, or external, professional monitoring; or
  IV. a candidate for referral because the situation has exceeded the threshold for what can be managed locally.

  a. Hanna is 12 years old. She comes home late from school crying and sobbing. When you finally get her to talk, she tells you that she was raped. What will you do?
  b. Your neighbor’s child is roughly 9 years old but has never been to school. He is often filthy. You overheard the neighbor screaming at him for not bringing home enough money. What do you do?
  c. You notice your cousin’s baby does not seem to be growing properly and you suspect neglect. What is improper baby care? What do you do?
  d. A neighbor’s 15 year old boy, Moses, is too wild. You see him hanging out with bad people, sniffing glue and behaving and speaking rudely to young girls. You are afraid for what may happen to your own children – your 10 year old boy admires him, and Moses seems to have eyes for your pretty daughter. What will you do?
  e. You do not have enough money to pay your daughter’s school fees for the 6th grade. An auntie you have never met comes to the village offering to take her to Monrovia and pay her fees. What will you do?

Guided Discussion

1. Is this child vulnerability, abuse, neglect, exploitation, violence? (Probe why? What law does it violate if any?)
2. Does it require intervention? (Probe: by whom, community (internal) or referral (external)? How? Why?)
3. Would this require follow up? Why, by whom, and how?
4. Try practicing intervening through role-play.
5. What does this exercise show us? Do we all agree on how to identify risks?

Part B: What makes this a risk?

The following is a list of many of the kinds of child protection issues that can arise (these may need to be adapted based on previous findings). Some require intervention and it is your task to decide when and what type. Some situations may represent violations of the law while others do not. Work through the list in your groups and decide which are the kinds of issues you would monitor internally, i.e., through community means, and which require external support, i.e., outside professional service through referral. What would trigger you to want to intervene? Write what these triggers or indicators (i.e., the threshold) that would push your community to require some kind of intervention.

• First, decide if the situation is one of vulnerability, abuse, neglect, or violence.
• Discuss in your group what indicates that the level of vulnerability is extreme, moderate, or mild.

19 http://www.children.gov.on.ca/htdocs/English/topics/childrenaid/childprotectionmanual.aspx#26
• When a situation of each type occurs, do you resolve it within the community? How? List your indicators for monitoring in column 2.
• Where do you draw the line from what you can resolve yourselves and what must be referred to a trained individual in the social services (social welfare/police/health services)? List the indicators for seeking external help in column 3.

**Vulnerability criteria** are the elements that define how we target a response.

**Vulnerability triggers** are the risks we identified in previous activities where indicators of the level of vulnerability are identified.

Vulnerability can also be categorized by other criteria to help us reach decisions:

<table>
<thead>
<tr>
<th>Threat</th>
<th>extreme</th>
<th>moderate</th>
<th>mild</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timeframe</td>
<td>permanent (chronic)</td>
<td>steady</td>
<td>short term (acute)</td>
</tr>
</tbody>
</table>

This exercise will help us to determine how we know if something is vulnerability, abuse, neglect, violence or exploitation. What are the entry points for identifying children in distress? Where do we stop ignoring a situation and begin to intervene? When do we stop managing a problem internally and decide to seek external help? In addition to our vulnerability criteria, Annex 6 and 7 have a risk assessment guide that may provide some guidance. All these guides, however, need to be adapted to the needs of your community and your contexts.

**Table 7: Measuring Risk**

<table>
<thead>
<tr>
<th>IS THIS A CHILD PROTECTION CONCERN? Y OR N</th>
<th>WHEN DOES THIS BECOME AN ISSUE THAT REQUIRES INTERNAL, OR COMMUNITY GROUP, INTERVENTION OR MONITORING? (What indicates it has become a problem that needs to be resolved?)</th>
<th>WHEN DOES THIS BECOME AN ISSUE THAT REQUIRES EXTERNAL REFERRAL? (What indicates you should call for help?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What kind of concern? vulnerability, abuse, neglect, exploitation, violence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Street child – living or sleeping on the street</td>
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<tr>
<td>2. Unaccompanied, abandoned or separated child</td>
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<tr>
<td>3. Orphan</td>
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<tr>
<td>4. Child-headed household</td>
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<tr>
<td>5. Child branded as a witch</td>
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<td></td>
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<tr>
<td>6. No birth registration</td>
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<td></td>
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<tr>
<td>7. No vaccinations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Rape or sexual assault</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Child marriage, or forced marriage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Female genital mutilation/circumcision</td>
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<td></td>
</tr>
<tr>
<td>11. Girl not given as much food as her brothers</td>
<td></td>
<td></td>
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<tr>
<td>12. Trafficked child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Child working long hours in a brick factory</td>
<td></td>
<td></td>
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<tr>
<td>14. No schooling</td>
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<tr>
<td>15. Abducted or missing child</td>
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<tr>
<td>16. Child in conflict with the police</td>
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<tr>
<td>17. Child with a disability (e.g., blind)</td>
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<tr>
<td>18. Physical abuse, extreme beating</td>
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<td></td>
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<tr>
<td>19. Reintegration from armed conflict</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Domestic violence</td>
<td></td>
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<tr>
<td>21. Neglect</td>
<td></td>
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<tr>
<td>22. Child being mocked and humiliated by school peers</td>
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<tr>
<td>24. Child affected by unhealthy environment</td>
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</tbody>
</table>
25. Sugar daddy or mama/sex with older men or women/teachers

26. Child frequently ill

27. 

28. 

29. 

30. 

Add more as needed in your area.

• How difficult was it to achieve consensus on your answers?

Conclusion

You have just created a range of generic risk indicators relevant to your context that the child protection committee members can refer to. These examples focus on the 1) condition of a child 2) condition within the family 3) conditions within the child’s environment 4) the level of risk and 5) the timeframe in which it remains a risk.

Responding to Reports

Wherever and whenever information on a possible case of abuse reaches you, you must decide quickly what the best course of action will be. It is always preferred to have a trained social worker accompany you during investigations. Where no social worker is available, addressing these protection concerns requires a sensitive approach that ensures no harm to the people concerned and leads to effective resolutions. Always keep in mind that in most cases, involvement of family is critical for long-term protection of the child.

As a first responder, your goal is to make contact with the child, build trust with the family and assess the situation reported so as to determine immediate needs and other action needed (whether by the community group or other agencies - if they exist.)

To assist you in determining whether the situation or allegation reported poses a risk to the child, consider:

• The situation in relation to the child’s age and development;
• Significant events that have taken place in the past. Is this a pattern?
• The child’s likely reaction to the concerned enquiry (how to approach it without causing more harm);
• The knowledge of the parent or caregiver of the suspected abuse (how to approach it sensitively);
• Knowledge of the wider family environment.

Consider how you gather information to determine the level of risk on a reported case: You may want to consult or work with a member of the Child Welfare Agency and other relevant agencies or form a multidisciplinary response team that works together to establish the risk level for the child in a particular situation.

CHILD RESILIENCE

Resilience refers to how a child is influenced by the qualities and environmental factors that enable a child to recover and develop positively despite adversity and traumatic experiences.

There are a number of internal and external factors that can contribute to increased resilience such as: a good relationship with a least one caregiver, positive parenting, educational opportunities and social relationships. Importantly, a positive interaction with a service provider can be a factor that increases a child’s resilience.

Children who are more resilient tend to have higher self-esteem and self-worth, and have a sense of being able to have some control over their lives and the ability to make a difference. The child protection team can support and strengthen these qualities in children by facilitating children’s participation, focusing on children and family’s strengths and resources, and acting with respect, care and empathy.
Where the abuse in not life threatening, the situation can be addressed through mediation and reconciliation support between the child and family. For example, designated Committee members could share information on positive discipline techniques (see box) and provide ongoing support to reinforce positive behavior change while also enlisting support of a social worker to address stressors within the family.

Where physical abuse of a child is evident or there is reason to believe that there is serious risk to the safety and wellbeing of the child, protective services must be notified for immediate action to ensure the child’s safety (Below and Module 6 deal with coordination and collaboration with protective services).

It is necessary, when selecting appropriate responses to a situation of actual or potential abuse, to examine the sources of the hazards to the child. Such factors can be broadly grouped into those associated with the parent(s) or caregiver(s), those associated with the child, those located within the family or household, and those operating in the broader society.

The choices made for a particular child will differ. Using the templates for analyzing risk in Annex 6 & 7, consider what you would do in the following scenarios:

- A child’s mother has just given birth and the father is working in the fields and balancing the needs of the household while his wife is recuperating. The father has been neglecting his other children and clearly not getting enough rest during this difficult time.
- A child’s parents display violent behavior patterns based on what seems to be alcoholism or drug addiction. Both parents display long-term emotional disturbances, neglect and exploit their children. They have rejected outside assistance.
- A small-holder farming family has recently had their house burn down and lost all their possessions. Suffering from homelessness and acute poverty until they can rebuild, the family is able, with help, to provide adequate child care. But they now live in an environment where violence and other social problems are rife, exposing their children to many threats.

How does the **vulnerability criteria** of **timeframe** or **level** of threat affect your response?

Identification of vulnerability is made during the initial contact with a child who may have protection needs, and the point at which a community elder, designated focal point, or team member determines the next steps to be taken to assist the child or its family. Specific **vulnerability criteria** will help determine whether a child’s case is appropriate for local management or should be referred on to other experts.

During the assessment process, team members/interviewers must explain why they are there and why they are collecting information. Interviewers need to request the child’s (and their parent or caregiver) permission to collect enough information to make an informed decision. This process is called **informed consent**. Interveners must provide information on the case decision process based on potential risks; the information to be collected, how it will be stored and with whom it will be shared. Children old enough and capable of understanding what is happening to them can participate in the informed consent process individually. However, their parent or caregivers should be included with the child’s permission.

The interview process should be limited to the necessary information for understanding and making a preliminary decision on the case. A trained team member or social worker should interview the child. If the child needs to be interviewed by policemen or other officials, the team member or social worker has to provide them with the appropriate support. Every effort should be made to avoid the child having to have multiple interviews by different officials.

Interviews need to take place in locations where confidentiality and privacy can be respected.
USING A HELP-SEEKING AND REFERRAL PATHWAY

To effectively address child protection issues at the community level, there are a series of steps that each stakeholder should be aware of and follow to ensure that children are appropriately supported. In other words, a long-lasting intervention that protects the child, provides psychosocial support and services where needed, and empowers and builds on a child’s resilience to support full reintegration and recovery and prevents future problems.

The flowchart below is not a process that must happen each and every time a child is identified as at risk. For example, a child who is identified as having been recently taken out of school and sent to work, and has not yet experienced any form of exploitation may not need each step to take place.

Help-Seeking and Referral Pathway Flowchart

<table>
<thead>
<tr>
<th>1. Recognizing or learning about a child protection problem can begin with a report, gossip, overhearing an argument, seeing a beating, seeing a child at work during school hours, or not seeing a child going to school. Not all children will seek help.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TELLING SOMEONE AND SEEKING HELP (REPORTING)</strong></td>
</tr>
<tr>
<td>Survivor tells family, friend, community member; Abuse is witnessed and reported to parent, other community member.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Suspected problems need to be brought to the attention of your Child Welfare Committee – or, if there is no CBCPC, who in your community has the ability and training to make such decisions?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PARENT or OTHER PERSON REPORTS TO CBCPC (REPORTING AND DELIBERATION)</strong></td>
</tr>
<tr>
<td>The CBCPC/Elders must convene to a) provide a safe, caring environment for the child based on the best interests of the child; b) learn the child’s immediate needs; c) weigh out honest and clear options available – with parent or guardian, if able.</td>
</tr>
<tr>
<td>CBCPC determines if a law was broken: IF no law was broken decide with child and family on the best way forward.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Based on the findings or results of CBCPC deliberation and/or conference with families involved, either a solution is agreed upon or further steps need to be taken through referral. List names and contacts for each category of referral:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>IMMEDIATE RESPONSE</strong></td>
</tr>
<tr>
<td>The CBCPC or parent must provide a safe, caring environment and respect the confidentiality and wishes of the survivor/family; learn their immediate needs; give honest and clear information about services available. If agreed and requested by survivor or family or elders, obtain informed consent and make referrals; accompany the survivor to assist in accessing services.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Locally Managed</th>
<th>Medical/health care entry point</th>
<th>Social Worker entry point</th>
<th>Legal support entry point</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow community tradition of deliberation to resolve a temporary or manageable problem</td>
<td>[Enter name of the health centre(s) in this role and contact information]</td>
<td>[Enter name of the Social Worker(s) in this role and contact information]</td>
<td>[Enter name of the police or legal service provider(s) in this role and contact information]</td>
</tr>
</tbody>
</table>
4. Cases that are in conflict with the law will require police contact. Write the names and contacts of trusted and known police and legal service providers here:

**IF THE SURVIVOR WANTS TO PURSUE POLICE/LEGAL ACTION – OR – IF THERE ARE IMMEDIATE SAFETY AND SECURITY RISKS**

Refer and accompany survivor to police/security – or – to legal assistance/protection officers for information and assistance with referral to police.

<table>
<thead>
<tr>
<th>Police/Security</th>
<th>Legal Assistance Counsellors or Protection Officers</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Enter specific information about the security actor(s) to contact – including where to go and/or how to contact them]</td>
<td>[Enter names of organisations and contact information]</td>
</tr>
</tbody>
</table>

**OVER TIME, CASES NEED FOLLOW-UP ACTION, EITHER FROM CBCPC OR COMMUNITY MEMBERS WHO MONITOR THE SITUATION WITH SUPPORT TO THE FAMILY OR THROUGH THE PREFERRED SOCIAL SERVICE AGENCY. PROBLEMS FACED BY ONE FAMILY ARE RARELY UNIQUE. IS THERE A PATTERN OF ISSUES THAT NEEDS TO BE SOLVED THROUGH EXTERNAL SUPPORT?**

**AFTER IMMEDIATE RESPONSE, FOLLOW-UP AND OTHER SERVICES**

Over time and based on survivor’s choices can include any of the following:

<table>
<thead>
<tr>
<th>Health care</th>
<th>Psychosocial services</th>
<th>Protection, security, and justice actors</th>
<th>Basic needs, such as shelter, children’s services, safe shelter, or other</th>
<th>Government Ministry, CBO or NGO to support with income generation, watsan, or other</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Insert contact information for each link in this pathway]</td>
<td>[Ensure contact information is up to date]</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Activity 4: Guided Questions for Assessing Response Capacity**

How your child protection committee/volunteers are able to respond depends on how strong your pathway is and what response capacity is available in your community. Table 7 provides a question matrix guide for assessing what support services or choices are available to your child protection committee via the pathway just studied above.

In your groups, answer as many of the following questions as you can. Then, discuss the answers together.

**Table 8: Service Delivery - Response Mechanisms**

<table>
<thead>
<tr>
<th>GUIDING QUESTIONS</th>
<th>SUPPLEMENTARY QUESTIONS</th>
<th>METHOD(S) FOR DATA COLLECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What is being done to prevent child abuse, exploitation and/or neglect in the community? (surveillance, prevention)</td>
<td>• How are cases of abuse, violence, or exploitation reported? By whom and to whom? • What types of cases are reported and what types are not? Why? • Are there any mechanisms to refer children to appropriate services and assistance? • What are the formal or informal processes for dealing with cases of violence against, abuse and exploitation of children in the community? • Who is informed of cases of violence/abuse/exploitation and why? • Who makes the decision what will happen to the child and to the perpetrator?</td>
<td>• FGD with children • FGD with adults • Key informant interviews</td>
</tr>
</tbody>
</table>
Activity 5: Mapping Responses to Priority Child Protection Issues

Purpose of the Activity
• To clarify how, when and why to respond to a child protection concern

Steps
• Divide participants into groups and give each group one of the priority issues discussed.
• Ask participants to answer the questions below and record key points – they can also use previous experience with one of the priority issues and describe what happened according to the points below.

1. Who can a child who has been affected by this issue go to for help? Who is told about this issue? Make a list of all the people and places that may be told about the issue or that may respond.

2. What are the key steps in responding? Probe with the following questions:
   • Describe what would happen step by step
   • Who could the child go to for help?
   • What would the family do?
   • What would the community do?
   • Who would be involved?
   • What supports would actually be provided for the child and family?

Adapted from “An Ethnographic Study of Community-Based Child Protection Mechanisms and Their Linkage with the National Child Protection System of Sierra Leone”. The Columbia Group for Children in Adversity (July 2011).
3. Who would be the key decision makers about what would happen in this situation?
   • Who would be involved?
   • What role would be played by people/services outside the community?
   • Who makes the final decisions?

4. What would be the likely outcomes of the responses to the problem?
   • What would likely happen to the child?
   • What would likely happen to the family?
   • What would likely happen to the perpetrator?

5. How satisfied with this outcome would various stakeholders (Child, family, community, people outside the community) be with this outcome? Why?

6. Is there a legal responsibility related to this problem?
   • Who would it be reported to? (for example, Police? Family Services Unit? Social workers?)
   • Who would report this problem?
   • What would be the response of the agency/person it was reported to?
   • If not reported, why not?

7. On the same problem/issue, repeat for one other person or place, in order to trace out a second response pathway, repeating the questions above.

DOCUMENTING CHILD PROTECTION

Keep in mind the following reporting points in Fig 2:

- If your concerns involve immediate harm to a child, act without delay, as inaction may place the child in further danger.
- If you know any information about the maltreatment of a child, it is your responsibility to tell someone.
- In certain instances you may have to report concerns to others who may be better prepared to make the decisions. Your written report should be a part of this referral process. However, if urgent action is required in order to protect children then make contact immediately.
- The responsibility for investigating allegations of child abuse in many countries rests with the Police and local Social Services.

Designated child protection officers or your designated teams may seek the advice of the Social Services or Police in deciding whether a formal referral to the authorities is necessary. Teams could also request further training by these professional partners. If it is decided that a case can be managed internally through community procedures, then there must be a clear rationale for that decision which should be documented. The decision not to report in such circumstances should be unanimously approved by the relevant committee.
• The process leading to decision making should be well documented and all facts or written allegations and responses kept on file.
• When a case is dropped or closed, the reasons for doing so should be communicated to the person who reported the matter.

It would be useful to include more specific information regarding the consequences of specific types of child protection violations so everyone is clear from the outset what the effects of any type of abuse will be.

Organizations will need to decide the kind of responses or disciplinary action to be taken for different levels of offence. For example, if someone verbally humiliates a child (and depending on whether this is the first time they have committed this offence or not), what type of action should be taken? Could a verbal warning, followed by a monitoring of this person for a specific period, be sufficient?

Case Studies

Based on your own community’s patterns of concerns, you can make informed choices regarding how you may want to prevent this pattern from continuing (see box). For example, if following a few months of filling in your documentation and charts, you notice there have been 4 cases of rape and 3 child pregnancies in a certain part of your community. Targets seem to be girls between 12-14 years old. What will you do with this important information?

You notice a pattern of child disappearances. They cover boys and girls, around 5 years old. What will you do?

RISK ANALYSIS: KEY POINTS & CHECKLIST

<table>
<thead>
<tr>
<th>DO YOU ......?</th>
<th>Y/N?</th>
<th>REVIEW COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mapping the current network – how do people respond to child protection needs? (surveillance, coordination, response)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>know why these are priorities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>what are the differences between boys’ and girls’ priority issues?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>what are the reasons for these main issues?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>have ideas on what issues affect children, but are not considered priorities?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>know about traditional practices that are considered harmful?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>know how to identify these problems?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>know how and where to find the most vulnerable children in your community?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>know which types of vulnerabilities are caused by stigma and discrimination?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
understand why thresholds for risk is an important concept for child protection work? 
understand the various ways we measure risk? 
know how these measurements can be applied to your own work? 
recognize how and why stakeholders need to be involved in a referral pathway?

CONCLUSIONS AND FOLLOW-UP

Request participant volunteers summarize what they got out of today’s lessons. What were the most useful activities and topics? What were the least useful? How could the materials be made more relevant to their needs?

Write up your data collected during activities in a data analysis matrix. Experiment with the format to try and find the format best for you. Look also at the tables 4 and 5 to compare how that data was organized.
MODULE 5. STAKEHOLDER MAPPING

Recap – Module 4

Ask volunteers to review what we covered in our last meeting. Discuss the pros and cons of assessing and responding to child protection risks. What problems arose since our last meeting and how did you solve them? What benefits, if any, came from actively seeking people’s input? How will you maintain these advances in your child protection work?

Preparing for Module 5

For this module, it may be useful to invite some of the stakeholders to take part in the analyses. Assume later in the afternoon you will be ready for an analysis of stakeholder roles and responsibilities that can either be accomplished together today or as follow-up work. Facilitators should be aware of possible stakeholders to assist in brainstorming.

Protecting children cuts across the responsibilities of many government sectors, as well as non-government groups. It also ranges outward from the family, friends, neighbors, teachers, health workers, social workers throughout the community. Awareness and commitment from a range of people will need to be involved in planning and implementation. The strengthening of these child protection systems requires the coordination of a broad network that includes:

- A legal framework to enforce accountability (see Module 2)
- The government’s commitment to child protection rights (also described in Module 2)
- Knowledge, attitudes and behaviors, social norms and traditions that support child protection (Module 1)
- Support in the media and civil society that ensures child and family involvement
- Personal contact, relationships, respect and trust that flows in multiple directions
- Monitoring and oversight to ensure best practices (Module 4).
- Life skills for children that ensure they have the knowledge and ability to meaningfully participate in their own protection (Module 1)
- Child protection awareness for families, communities, teachers, social workers, police etc.
- Basic child services such as education, health and other social services as a child’s right.

In short, no single organization can do it alone and the more people involved, the better and broader your reach. BUT with more people involved, making decisions and reaching consensus becomes increasingly more difficult!

BUILDING A CHILD PROTECTION NETWORK

The goal is to connect with key people who not only share your commitment to creating the network but who also can fill in the gaps, add value to the structure, and round out your approach in a holistic manner. We repeat, no one organization can do it alone! But one person, with a strong bond to the community, respect and trust and a firm knowledge of child protection and the local system can make significant inroads.

- Be sure you understand why a child protection network is required and what issues need to be addressed in its construction.
- Identify key stakeholders for participation in the network development process through a stakeholder mapping and role analysis.
- Ensure the views and wishes of children and young people are given consideration (module 1).
Activity 1: Stakeholder Identification

In order for you to successfully develop child protection procedures that will be effective for the community, it is important to involve all stakeholders in this process from the beginning.

**DEFINITION: STAKEHOLDER ANALYSIS**

A stakeholder analysis is a technique used to identify and assess the importance of key people, groups of people, or institutions that may significantly influence the success of your activities.

It is important to know who has an interest and can contribute to the discussion around an issue. Equally, it may be just as important to know who **DOES NOT** support your plans or project (i.e. who is opposed or resistant to it) and to think about if, and how, their interests need to be managed. It is often those who do not support your proposals that need most management.

**An analysis of stakeholders** is generally undertaken to:

- Identify those people, groups or organizations that have an interest in child protection work either positively or negatively.
- Identify the form of their interest and how their service can strengthen your child protection work.
- Identify those who are powerful actors in ensuring that operationalization of the network or pathway is successful and not a failure.
- Identify whether and how you need to do something about these contacts and include it in the design.

**Step 1: Brainstorming**

Brainstorming is a great way for identifying stakeholders: the persons, or institutions you think should be involved in managing the issue.

- Select a note taker and capture every name, organization or type of stakeholder you can think of. Alternatively you could give everybody a pad of sticky notes and ask them to write each stakeholder on a post it, after 10 - 15 minutes put up the sticky notes on the wall or on flipchart paper.
- If you are struggling you could try using categories to identify potential stakeholders. For example, it can be helpful to organize stakeholders by the following categories:
  - Children
  - Family
  - Community
  - State: Government agencies (social worker,

**WHERE THERE ARE NO PARTNERS**

In some contexts where a child protection committee is dormant or non-existent, it may seem there are no potential partners on the ground. Keep in mind that low capacity is not a reason to overlook community-based organizations, but rather it may be the very reason to work with them. However, it may be vital to have sufficient resources and time to build up capacity links. Further, it is important to look ahead and consider how the partner may be supported in the longer term. Could they be linked with a stronger CBO or government department? Could they become a registered NGO?

Often, where there are no visible partners, there are informal linkages and groups of women or youth who would like to form more visible collaboration but just need some outside technical and organizational support and capacity-building assistance.

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Often, where there are no visible partners, there are informal linkages and groups of women or youth who would like to form more visible collaboration but just need some outside technical and organizational support and capacity-building assistance.

**Figure 3: Linking Stakeholders in a Referral Pathway**

<table>
<thead>
<tr>
<th>Children &amp; Youth Forums/Clubs</th>
<th>Health Cadres</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Teachers or PTA</td>
<td>Women’s Group</td>
</tr>
<tr>
<td>Social Workers</td>
<td>Elders</td>
</tr>
<tr>
<td>Int’l NGO</td>
<td>Village Chief</td>
</tr>
<tr>
<td>Local CBO</td>
<td>Police</td>
</tr>
</tbody>
</table>
| Local Partner?               | Coordinating Hub / CWC?
• Police, health worker, commissioner
• Civil Society: Non-government organizations
• Influencers (media, religious teachers, local leaders)
• Providers (health cadres, teachers, businesses that hire children?)

Step 2: Stakeholder Assessment

• Now that you have your list of possible stakeholders, the next step is to think about people you know who are connected to these key individuals. This will help identify easier ways to access the individuals or institutions by tapping into existing relationships between people. At this step, you can note any members of the groups’ relationships with, and information about, the people listed.

• You should now have a long list of people and organizations that are affected by and can strengthen your work. Some of these may be important and their support may be required to strengthen your network. Some may be interested in what you are doing, while others may be less so and require additional effort to ensure that even if they do not participate as part of the network overall they are aware of its goal and objectives.

Use this chart (Fig. 5) to identify and list all potential stakeholders in terms of:

- Their interests (overt and hidden) in relation to the problems being addressed by your project and its objectives. Note that each stakeholder may have several interests.
- Briefly assess the likely impact of their involvement. Do they need to be closely involved or simply kept informed?
- Indicate the relative priority that the project should give to each stakeholder in meeting their interests.
- Map out your stakeholders by classifying them by their importance for your work and by their interest in your work. Use a template like that in Fig. 5. This will help you decide who is needed to help the most. Here are some examples:
  - Health, social, and other service providers that may be accessed as part of a response mechanism.
  - NGOs and other organizations, relevant bodies and professional networks, including any local arrangements for dealing with child safeguarding issues, HIV, Ebola, women’s centers/refuges or safe housing, livelihoods support, watsan, education and children’s life skills support.
  - Establish contact with any academic institutions or schools working on or concerned with children’s rights.
  - Identify and establish contact with locally-based CBOs, NGOs, INGOs and other organizations working on child protection/rights or aid programs that affect children that can focus on prevention and awareness raising.
  - Government agencies that manage social workers, contacts within the formal referral system that are sympathetic to linking with a more community-based network.
  - Members of local Child Welfare Committees or Community-based Child Protection Committees, Village Chiefs, Women’s Organizations, Religious leaders, Teachers’ organizations and others who people contact initially.
  - Children’s Forums or Clubs, Youth Forums or Clubs

Finally, review the names on your list and decide if and how they could be useful or needed in strengthening your child protection network. A table like the one below can be used to help guide your analysis:
ASSESSING THE ROLE OF YOUR CHILD PROTECTION COMMITTEE

Participants can now map out the strengths and weaknesses, opportunities and challenges of working in their own community-based child protection committee. Depending on participants, child protection teams can engage in self-analysis as a means of further helping to make decisions on how to best strengthen your network. Other stakeholders are able to fill in the gaps in skills your committee lacks.

Activity 2: SWOC Analysis: Strengths, Weaknesses, Opportunities, Challenges

Purpose of the Activity
- SWOC is a brainstorming activity done in small groups to help us identify key issues and their underlying causes.
- All participants take part in self-analysis to identify the issues and influences of the work they have done to date.

Steps: SWOC Analysis
- In small groups of 4-6, decide on and then list the information requested according to the four categories. Provide as many answers as possible.
- Following the creation of SWOC tables, each group reports back on their results.
- Provide 20-30 minutes for group work.
- It is important for you to recognize that there are no WRONG answers!

<table>
<thead>
<tr>
<th>Name of Organization or Community</th>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Internal</strong></td>
<td>1. skills (details!)</td>
<td>1. lack of skills (details!)</td>
</tr>
<tr>
<td></td>
<td>2. good community relations</td>
<td>2. no systematic plan for prevention</td>
</tr>
<tr>
<td></td>
<td>3. . . .</td>
<td>(note the lack of resources, skills, disadvantages that need improvement)</td>
</tr>
<tr>
<td></td>
<td><strong>Opportunities</strong></td>
<td><strong>Challenges</strong></td>
</tr>
<tr>
<td></td>
<td>1. good relations with local leaders</td>
<td>1. no budget</td>
</tr>
<tr>
<td></td>
<td>2. . . .</td>
<td>2. . . .</td>
</tr>
<tr>
<td></td>
<td>3. . . .</td>
<td>3. . . .</td>
</tr>
<tr>
<td></td>
<td>(note the chances to create changes, possible strengths to be used)</td>
<td>(obstacles, potential problems to be monitored)</td>
</tr>
</tbody>
</table>
Activity 3: Child Protection Volunteers Checklist

Depending on whether its codified in the Child Protection Acts of your country, what is your child protection committee expected to do? Add any tasks not already on this list. Take off those that are not required.

Below is a checklist of the various activities expected from community-based child protection mechanisms. Which of these roles are you able to perform now? Which are you as yet unable to perform? What do you need in order to perform this role better?

<table>
<thead>
<tr>
<th>CHILD PROTECTION COMMITTEE TASKS</th>
<th>YES</th>
<th>NO</th>
<th>CAPACITY NEEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify vulnerable children and children at-risk of harm or being harmed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support parents and families</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify and support foster families</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide emergency items and services like clothes, food or school fees for the most vulnerable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enforce codes of conduct in schools and health centers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community awareness raising on child protection issues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Integration of minorities and children with disabilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Include and engage children and families in community events (e.g. religious or traditional ceremonies to empower children and enhance their sense of belonging)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hold political and religious leaders accountable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support social reintegration of individual cases</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mediation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Listen to the voices of children and learn from their perspectives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintain confidentiality and respect with those you need to interview</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Document, use and safeguard information on situations that are addressed by CBCPC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify a funding source and manage a budget</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Further questions that may help you to strengthen your role are:
- What is the goal/aim of your child protection committee (CPC) or group? Has the goal/aim changed over time? How?
- What are the main principles or beliefs guiding the interventions of CPCs?
- Do CPCs have Terms of Reference?
- Do CPCs sign child protection policies, and are they explained and adapted for your local culture?
- What are the key activities undertaken as part of CPC? How are these prioritized?
- Which are the main protection concerns/risks being addressed by CPCs? Which are easiest/hardest to address?
- How were child protection concerns identified and responded to before CPCs? What has changed as a result of establishing CPCs?
- To what degree does CPC focus on surveillance, response, prevention and/or coordination?
• Are CPCs identifying, reaching and responding to the most marginalized children?
• To what extent are you enhancing non-discrimination and gender equality?
• To what extent do CPCs strengthen positive traditional beliefs and practices on child protection and care, and work to transform negative traditional beliefs or practices? Give examples!
• What training is available to CPC and other groups in your community? Do government or NGO/CBOs in the area help with capacity building? What trainings have you had so far?
• How effective has it been? How has the previous training been applied in practice?
• What systems of information management do you have in place and how are these used to enhance the work of those involved in responding to children’s protection needs in your community? For example to estimate the level of resources that are needed by the Committee to respond to emergency cases (i.e. local transport to hospital, police station etc.; provisions of food, medicine;) as well as what is contributed by others.
• How can you pay for activities and the costs involved in the various tasks listed above?

Make sure you add these questions and answers to your data matrix!

MAPPING ROLES AND RESPONSIBILITIES IN A CHILD PROTECTION NETWORK

We have a) conducted a stakeholder mapping and analysis, b) conducted an analysis of the strengths and weaknesses of our own child protection work, and c) thoroughly analyzed our child protection risks, priorities, and responses. Now we can now look more closely at the four categories of child protection referral work (surveillance, response, prevention, coordination) and decide how exactly we should be clarifying our own and our partners’ roles and responsibilities. These need to be based on our particular strengths and emphasize what we each can add to a strong network.

Based on the fundamental development principle of “do no harm”, it is especially important to remember that your child protection work must try to be appropriate and constructive in the longer term. Throughout, the priority should be on “understanding how external support can best be implemented to not cause harm to pre-existing community structures and mechanisms.”21 Thus, roles and responsibility setting is the decision of your committee, your community, and the network connections you recognize.

You must ensure that all those listed in and invited to join your network take ownership of this process and their responsibilities.

• All stakeholders need to have a sense of ownership toward the child protection policies and procedures you define so we can be sure they take responsibility for implementing them.
• The more people feel they ‘own’ ideas, policies and procedures, the more sustainable these child protection policies and procedures are likely to be.

21 Ibid p 2; Roelen 2012:7; Ruiz-Casa 2011; War Child 2010.
• Without broad ownership across the structure, child protection becomes too dependent on particular individuals. This runs the risk of child protection being weakened or disappearing when these people leave or change positions.

Thus, now that you have identified your network participants, your next step is to sit with them and determine each person or organization’s roles and responsibilities toward your child protection system.

It may further help to divide roles and responsibilities according to the categories recognized in child protection work overall. Ask participants to clarify what tasks need to be divided under each category. Then, who would be best positioned to take the lead in these tasks? Who should support them?

• In groups, fill in a similar table based on the needs and support opportunities for your community. Table 11 provides an example of such a clarification of possible roles.

**Table 11: Roles & Responsibilities according to Child Protection Tasks**

<table>
<thead>
<tr>
<th>AREA OF CHILD PROTECTION SUPPORT</th>
<th>DEFINING MAIN ROLES &amp; RESPONSIBILITIES</th>
<th>EXAMPLES OF ROLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surveillance</td>
<td>Collecting information about the situation of children in the community through receiving reports, monitoring and identifying particular vulnerable children. Other stakeholders also have this role. For example, religious institutions (e.g. mosques or churches) may make home visits to check on the situation of children in their homes. Teachers and school monitors should be able to recognize and report concerns.</td>
<td>• School monitors prevent corporal punishment or sexual abuse. • Record keeper to compile monthly reports and maintain data.</td>
</tr>
<tr>
<td>Prevention</td>
<td>Preventing abuse, exploitation, neglect and violence from occurring. Committees and other community members can also build awareness and skills among community members about the risks that children are exposed to and how to reduce these risks.</td>
<td>• Training mothers about baby minding, nutrition, positive parenting.</td>
</tr>
<tr>
<td>Response</td>
<td>Responding to problems of abuse, exploitation, neglect and violence. Committees and other community members, such as religious leaders, teachers, neighborhood groups, can provide support to families and refer children for services.</td>
<td>• Designated first responders to investigate reports of abuse. • Women elders/Peace Hut selected for investigating rape or sexual abuse. • Kids Club provides their perspective on child risks</td>
</tr>
<tr>
<td>Coordination</td>
<td>Working together in a coordinated manner to make the best use of time and resources and to ensure that children are receiving adequate help. This is an important function of a child protection or child welfare committee. Members can work together with others in the community to ensure that resources and services are used efficiently, to ensure that children are getting the help that they need.</td>
<td>• Maintain contact information and share information with police and other support agents. • Social/health workers provide support in creating Information, Education, Communication (IEC) materials.</td>
</tr>
</tbody>
</table>

**Activity 4: Clarifying roles and responsibilities**

**Purpose of the Activity**

• The following exercise will help participants decide if a situation is abuse and what steps need to be taken. Please create scenarios to suit your context.

• To become aware of and understand what is recognized as abuse and what is not; what is acted upon in the community and what is not and why it is not; identify referral pathways and openly discuss community decision-making processes based on specific roles and responsibilities.

• Clarify specific roles and responsibilities as a means of strengthening coordination and building your network.
Materials

Select which scenarios you want to use and print them to give to groups. Flipchart paper, markers, tape.

PART A: Steps

1. Depending on the capacity of your participants, distribute or explain the following scenarios. Divide participants into small groups, give them 1 or 2 scenarios, and ask them to decide exactly what needs to be done in each case.

Tip for Facilitator

The scenarios can be addressed one by one to promote discussion or divide cases one per group depending on your time and the needs of your participants. You can create your own scenarios based on the priorities of your participants.

| a) You notice that a young woman, who was married to an older man in your neighborhood, has a new baby. The woman seems alone, isolated, and depressed. She seems afraid to talk to anyone. You suspect she’s being abused and this is having a bad effect on how she takes care of her baby. What can you do? |
| b) There have been a number of cases of skin infections and diarrhea among young children in your community. You suspect it is because of the river where you all collect your water, bathe and defecate. There are no alternative water sources in the dry season. |
| c) You see a young child wandering the streets alone looking lost and frightened. |
| d) A young woman with three young children who was widowed a year ago has begun to show signs of illness. You suspect it is AIDS related. People are afraid and talking about ousting her and her young children from the village. What will you do? |
| e) A neighbor’s husband is often drunk and beats his wife. The kids are terrified and often run away and sleep in the bush. They beg for food. What will you do? |
| f) A religious scholar takes in young boys for training in his home in a rural village. Many boys from your village have gone there. You see some of the boys begging on the street during your visit to a city. When you ask them, the boys tell you that the religious teacher leaves them in the city to sleep on the streets for 6 days every month and the money is for their upkeep and studies. What will you do? |
| g) You witness a neighbor beating his 10 year old daughter for staying out late last night. What will you do? |
| h) About 14 young girls have been discussing going to bush school, starting next month. Your daughter is included. What will you do? |
| i) You hear about the only school teacher in your village demanding sexual favors from girls in order to get a passing grade. What will you do? |
| j) [add your own based on local priorities] |

2. Ask participants to discuss their scenario and answer the following questions in their group. Prepare to present your responses to the plenary:
   - Identify if the scenario describes a child protection problem. What exactly is the problem?
   - Can this problem affect the child, the family or the community? How?
   - How will you decide what action to take? Explain or defend your reasons to take or NOT take action.
   - Who would you report to and why would this be your path for reporting?
   - How would you approach those involved?
   - If you do decide outside help is needed, who would you contact and why? How would you contact them? Define the way of seeking help (draw on flipchart or on a wall/in sand!!!).
   - How would you intervene and what community-based support would you seek? Would it link to Surveillance, Coordination, Response or Prevention? Explain how.
• How will you define thresholds for measuring abuse and exploitation? The meanings and understandings of different agencies and staff may vary. Thus, define how and when you need to monitor a child’s situation and when you must refer to outside assistance?
• Here is a list of formal and informal supporters. Ask participants to describe when and how they would contact each? Which are easily contacted and which are not?

1. Neighbors
2. Village chief
3. Traditional healer
4. Religious leader
5. Police
6. International NGO
7. Local school
8. Social worker
9. Health worker
10. Child Welfare Committee
11. Clinic
12. Hospital
13. Community based organization
14. Local government

PART B: Defining roles and responsibilities
• Participants will create a stakeholder role and responsibility map as an extension of the stakeholder map created earlier.
• Fill in the table below by first deciding who will be the central hub in the network:
  • Is the CBCPC functioning and capable?
  • If not, what local CBOs may be able to take on the responsibility of receiving and referring cases to the right service?
  • Who has the capacity, respect and power to make decisions, take the lead?
  • Who do people feel comfortable to turn to when there are problems?
  • Who should receive initial reports of child abuse/neglect in a community?
  • Who can be called to negotiate the severity of the problem and decide if it can be managed communally or through referral?
  • What kinds of services exist, are available, and need to be made familiar?
  • Who can help mitigate possible issues and prevent the escalation of vulnerability?
  • Who has possible ideas and funds to support awareness-raising activities?
• Rank your human capacity and available networks or services:
  • Child welfare committee
  • Village elders
  • Religious leaders
  • Doctors
  • Local council/government
  • Health cadres
  • Clinics
  • Hospitals
  • Social workers
  • Teachers
  • Parent teacher association
  • Women’s groups
  • Youth groups
  • Children’s groups
  • Police
  • Micro-credit/loan programs
  • Community based organizations
  • Non-government organizations
• Fill in the table with the people/organization you identified in your stakeholder analysis/mapping on the left.
• Describe their role and responsibility in the column on the right. It will simplify your task by specifying which aspect of role each stakeholder will be responsible for in terms of Surveillance, Prevention, Response, and/or Coordination. Some stakeholders will work in a limited number of areas based on their expertise and strengths.

Tip for facilitator

It could be very helpful to engage in this activity with the specific stakeholders! The table below provides examples only. This needs to be prepared by participants.

Table 12: Mapping Roles and Responsibilities - Example
<table>
<thead>
<tr>
<th>PEOPLE AND THEIR ORGANIZATION/ AFFILIATION</th>
<th>ROLES AND RESPONSIBILITIES</th>
</tr>
</thead>
</table>
| Example: Mr. Xxxxxx, head of GBCPC, Community chief | • Surveillance:  
• Prevention: Providing awareness-raising information to teams; confronting parents or guardians and discussing actions that may be leading to risk.  
• Response:  
  • Leading negotiations on what needs to be decided in/by community and what requires referral.  
  • Coordination: Will lead contact with all stakeholders |
| Ms. Xxxx, Head of Women’s Peace Hut | • Surveillance: monitor and identify vulnerable children;  
• Prevention: awareness-raising; teaching; discussing actions that may be leading to risk with parents/guardians.  
  • Lead Peace Hut discussions on potential risks  
• Response  
  • Lead interviewer/investigator with child victims especially girls  
  • Involved in negotiations, decision-making, and in-community solution-finding.  
  • Coordination: Accompany police or social worker in investigating any GBV |
| Mr. Xxxx, Police officer | • Surveillance: Has access to crime records and can identify and monitor offenders.  
• Prevention: Will speak to community on child protection risks  
• Response: First contact for referral where a law has been broken  
  • Will come immediately upon alarm  
  • Will contact police woman, social workers, health workers depending on nature of the crime  
  • Will begin investigation process in case of court action  
  • Coordination: interrogate in presence of designated women |
| Ms. Xxxxx, Police woman/Family Unit | • Response: Second police contact when victim is a child. Continue fact-finding with victim.  
• Coordination: Will coordinate with family; collaborate on initial findings from Ms. Xxx. |
| Mr. Xxxxx, Volunteer social worker, DSWGCP | |

**COMMUNITY CHILD PROTECTION COMMITTEES SPARK A MOVEMENT FOR CHILD PROTECTION**

ChildFund Gambia’s PROTECT project, funded by USAID to support implementation of Gambia National Plan against Trafficking in People provide valuable lessons on key elements that impact child protection system strengthening initiatives. An evaluation that involved structured data collection using both quantitative and qualitative methods including, document and statistics analysis; key informant interviews; focus group discussions; child participatory activities and direct observation found an increase in collaboration across agencies including in data collection and exchange but also identified structural impediments that limited how effectively child protection cases could actually be addressed. It highlighted the positive impact of Community Child Protection Committees across the West Coast Region of the country on preventing and intercepting children at risk or victims of trafficking due to strong coordination, underscoring how such results can have a multiplier effect in mobilizing other communities to form their own local committees. Moreover, the project also revealed the effective role that children can play to identify and support their peers, particularly where they have clear roles and are backed by other structures of child protection that have technical capacity and authority to manage serious cases.
CHECKLIST FOR STAKEHOLDERS

As the work you do and the projects you run become more important, you will affect more and more people. Some of these people will be strong and essential supporters of your work. Others may have the power to undermine your projects and your position. It is important to know how others can affect your work.

<table>
<thead>
<tr>
<th>DO YOU ......</th>
<th>YES</th>
<th>NO</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully understand what activities need to be covered and who is best able to do them?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fully understand who needs to be involved to ensure the success of your protocol design?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fully understand where the potential weak links will be?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand why and how these stakeholders will either collaborate or potentially undermine your work?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Stakeholder Analysis is the process by which you identify your key stakeholders and work out what their role needs to be – AND how able they are to perform that role. Stakeholder Analysis is the first stage of this, where you identify and start to understand your most important stakeholders.

<table>
<thead>
<tr>
<th>DO YOU ......</th>
<th>YES</th>
<th>NO</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fully understand what roles each stakeholder will perform and how they can complement each other?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fully understand where the potential weak links will be?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have ideas on how to build capacity for those weak links?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand why and how to convince these stakeholders to collaborate in this work?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The first stage of this is to brainstorm who your stakeholders are. The next step is to prioritize them by importance and interest, and to plot this on an Importance/Interest grid. The final stage is to get an understanding of what motivates your stakeholders and how you need to win them around to best assist in the work you are trying to accomplish.

<table>
<thead>
<tr>
<th>DO YOU ......</th>
<th>YES</th>
<th>NO</th>
<th>NOTES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have contacts for each stakeholder?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have a sense of how large or small a role they will be willing or able to perform?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognize at what stage in the cycle each stakeholder will be required? Is it for identification? Planning? Implementation? Or monitoring and evaluation?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognize at what stage of development and implementation network each stakeholder will be required? Is it for information? Consultation? Partnership? Or to take a leading role in the action?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CONCLUSIONS AND FOLLOW-UP

This was a very busy, complex module that covered issues ranging from listing all potential collaborators and supporters in expanding and strengthening our child protection system to personally evaluating them and clarifying roles and responsibilities. These included identifying agency professionals, community members, as well as possible local organizations. We also engaged in an analysis of our own committee’s strengths and weaknesses and tried to identify not just capacity-building needs but also possible sources for filling in those gaps.

- How can you use your analysis to plan for your own capacity-building needs? Who can you contact to provide training or guidance or even brainstorming for planning? Make lists and follow up by asking them if they can provide that need. Set a date and do it!
• If you did not have stakeholders take part in today’s activities: Divide up your roles and responsibilities tables among committee members and bring them to your stakeholders for verification and further discussion.

• Examine the core activities that will be undertaken by committee members and other stakeholders and identify the resources that will be needed to realize these practically. Make projections on what resources will be needed and how each group will go about securing and committing those resources for the functioning of the committee. For example, in the above table the head of the women’s peace hut is to accompany the police and SW on investigation of GBV cases – if these are at a distance where transport and overnight stay are needed, what are the estimated resource needs and which stakeholder will share or cover the cost?

• Further analyze the mediation aspect of traditional community responses. Interview elders to ask them about the efficacy of this work. Conduct research on the strengths and weaknesses of the effort. When has it worked well; when has it not worked well?

• Make contact with various community groups (women’s groups, children’s forums, etc.) and make sure you involve them in any decision-making, research, activities or projects. Recruit them. Maintain transparency. Interact as equals. Make note of the changes in the quality of your relationship with them based on this openness and equality.

• Involving children, listening to children’s voices, constructing equality are more than just words on paper.
MODULE 6. COMMUNITY ENGAGEMENT

Recap for Module 5

Request participants review what they learned from the last meeting. How did they try to implement some of these lessons in their day to day experiences? Are they working toward improved dialogues with children? What have they been doing to further clarify rights, roles, and obligations of stakeholders, community members and your own family toward children?

Preparing for Module 6

Facilitators will need to prepare printed out action plans; have plenty of flipchart paper, markers, tape, small paper (index cards or printing paper cut in half).

It should be very clear by now that the stronger your support network, the stronger your child protection work will be. Today’s activities will focus on engagement and coordination. Since creating or strengthening a child protection system involves collecting information from and about health, social and child welfare services, policing, and legal facilities accessible to the region, in addition to CBOs and other service providers working in the area, we have already focused on identifying and assessing our potential stakeholders. In this module we are going to focus on:

• Community engagement and mobilizing our neighbors for awareness-raising, surveillance and prevention work
• How to engage and coordinate with our stakeholders
• Reporting procedures for enhanced surveillance, coordination, and research.

In rural and urban communities, engagement will be a significant first step in introducing communities to the support systems available to them. The process of mapping entities and services for children and families in the area may even be the first opportunity residents have to learn about ways to manage child protection concerns and incidences of child neglect, abuse, exploitation and violence outside of their own traditional approaches. Other aspects of community engagement can include:

• Ability of parents/caregivers to protect children in their care from violence or exploitation
• Capacity and attitude of civil society, popular culture, etc., to ensure extended family, friends, and neighbors notice and respond to vulnerable children
• Capacity of volunteer community-based child protection groups or child/youth clubs
• Capacity of religious leaders or groups to engage in child protection
• Community funds for child protection functions

Engaging stakeholders in coordination, planning and in adapting a networking protocol (Module 7) helps to assure that they will value the information and that the information is responsive to their needs. Stakeholder involvement will also help to expedite processes of approval and response, aid in the designing and collecting of relevant information and documents, and assure that the new or strengthened methods of managing and preventing child protection incidents are adapted to ensure effective support for children in need of them.

It should also be built upon awareness of the main tasks of child protection as:

Surveillance. Collecting information about the situation of children in the community through receiving reports, monitoring and identifying particular vulnerable children. Other stakeholders also have this role. For example, religious institutions (e.g. mosques or churches) may make home visits to check on the situation of children in their homes. Teachers and school monitors should be able to recognize and report concerns.
Coordination: Working together in a coordinated manner to make the best use of time and resources and to ensure that children are receiving adequate help. This is an important function of a child protection committee. Members can work together with others in the community to ensure that resources and services are coordinated to ensure that children are getting the help that they need.

Response: Responding to problems of abuse, exploitation, neglect and violence. Committees and other community members, such as religious leaders, teachers, neighborhood groups, can provide support to families and refer children for services.

Prevention: Through awareness of child protection issues, communities are mobilized to take action to mitigate and prevent abuses, based on available resources. Awareness and conscientization are developed through a sustained community dialogue that supports community members to transform their attitudes, challenge harmful social norms, strengthen positive actions for children, take action based on common solutions and use community resources.

FORMING COMMUNITY ACTION GROUPS

Protecting children cannot be achieved individually. It requires a broad network of partners, each with their expertise in different areas. Child protection deals with issues that are sensitive, sometimes stigmatizing and therefore hidden (such as domestic violence and sexual abuse), and with violations that are often socially accepted (such as corporal punishment and child labor) or even authorized by the state. It requires not only specialist competencies, but also multidisciplinary work with social welfare, education, health and justice sectors, and links with finance, employment, and planning. Thus, a child protection protocol is only as good as the people who follow it. A piece of paper alone will not protect children.

Village chiefs and committee members cannot take on all the requirements of child protection strengthening. Coordination structures for cooperation and referrals at various levels will be much stronger through the formation of technical working groups, referral units and/or identification of focal persons with strengths in specific areas. This module helps you to think about how to coordinate your child protection system as well as how to strengthen collaboration. You have a great deal of experience in your own community to tap into — if you only encourage it.

Based on the various types of child protection priorities in your area, would it be helpful to have teams formed with specific expertise that can collaborate in decision-making? For example, should you have a quick response team of medics, organizers, and others that can be contacted as first responders in emergencies? Do you need a gender team or a team of all women to respond to gender-based violence and issues focused on girls? Should you form an awareness-raising team of educators and social workers who can take the lead in sharing child protection information or providing life skills training with community members? Based on your own risk analyses, what kinds of teams should you consider forming?

List some ideas with your participants.

In strengthening our Child Protection system, we propose to create the following Teams to assist in our child protection strengthening functions:

1.  
2.  
3.  

What would be the primary function of each team?

There are many formal and informal groups in every community — groups that provide leadership, services and social connections. All of these groups could be engaged to support various aspects of your child protection network.

Cooperation, like most things in life, requires a process.
• We start with an assessment of what the current conditions are as compared to where we want to be.
• Then we raise awareness by conducting assessments with the community to make sure others have their say in what kinds of outputs we hope to achieve.
• The next step is to build a network of people who can support us in our tasks.
• With this network of people, we clarify exactly what kind of action we hope to start.
• Once we have begun acting, we consolidate our activities to make sure that they include as many people as possible; to make sure they will be continuous; to make sure that they truly meet the aspirations of the community.

**Example Team Chart**

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>MEMBERSHIP</th>
<th>POSSIBLE FUNCTION?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security Action Group</td>
<td>Police officers, local defense units, neighborhood watch groups, prison officials, community liaison officers, etc.</td>
<td></td>
</tr>
<tr>
<td>Health Care Action Group</td>
<td>Doctors, nurses, clinical staff, home-based care givers, palliative care givers, health outreach workers, traditional healers, VCT counselors, etc.</td>
<td></td>
</tr>
<tr>
<td>Faith-Based Action Group</td>
<td>Leaders of all faiths: priests, bishops, imams, sheiks, reverends, nuns, pastors, preachers, etc.</td>
<td></td>
</tr>
<tr>
<td>Local Leader Action Group</td>
<td>Village or street leaders, clan elders or chiefs, cultural leaders, etc.</td>
<td></td>
</tr>
<tr>
<td>Business Action Group</td>
<td>Market seller associations, beauty and barber shops, trade unions, farmers associations, teachers unions, etc.</td>
<td></td>
</tr>
<tr>
<td>Peer Action Groups (Women’s Groups; Youth Groups, etc.)</td>
<td>Micro-credit groups, support groups, positive women’s/men’s groups, mother’s/ father’s groups, sporting groups, men’s associations, social groups (drinking joints/cafes), school clubs, youth groups, etc.</td>
<td></td>
</tr>
</tbody>
</table>

Through mobilizing these various groups, you can create a local network to focus, for example, on ending violence toward children:

• Raise public awareness that violence against children is everywhere. It happens out of sight as well as in the open because of social and cultural norms.
• Engage the public and mobilize action. Encourage people to join national or local movements to end violence, and organize action where none is taking place.
• Strengthen cultural attitudes and social norms that support non-violence.
• Spur innovative new ideas and new thinking to combat violence against children.

How do we do this? We use a theory of change approach. Start by presenting to your community information so that they become aware of laws that protect children. This creates an opportunity to actively question their previous behaviors. Ensure the campaign is for the long term as no change will take place overnight. Present examples of new ways of interacting with children through children’s theater, workshops, songs, etc., presented by children’s and youth groups. Make sure that people recognize the benefits of adapting to the new behavior.
### Table 13: Making Change Happen

<table>
<thead>
<tr>
<th>RAISE AWARENESS</th>
<th>KEEP IN FOCUS</th>
<th>PROVIDE ALTERNATIVE BEHAVIORS</th>
<th>STRENGTHEN POLICY</th>
<th>NEW BEHAVIOR IS SUSTAINED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes in knowledge about violence against children (laws, rights, responsibilities and how to respond)</td>
<td>Sustained community dialogue about child protection issues</td>
<td>New options and alternatives to harmful practices are made known/ available</td>
<td>Local and district governments have mandate and interest to prevent and respond to child protection issues</td>
<td>Public pressure to eliminate harmful practices, increase demand for services and social accountability</td>
</tr>
<tr>
<td>Family functioning strengthened</td>
<td>Capacity built of key local actors in the child protection system</td>
<td>Social pressures shifted towards positive behaviors</td>
<td>Increased trust of justice and other CP services</td>
<td>Preventive and responsive supports available and accessible</td>
</tr>
<tr>
<td>Create a campaign to “talk to your children”</td>
<td>Create a wide variety of posters, children’s theater, songs and discussions on the benefits of communicating openly with children</td>
<td>Always model the appropriate behavior; encourage various groups to promote and model the behavior; provide public opportunities for children’s inclusion</td>
<td>Provide evidence of strong support for the behavior; emphasize positive role of youth groups; demonstrate benefits of including children’s voices in community meetings</td>
<td>Families all emphasize more open inclusion and discussions with their children; changes in community dynamics noted; delinquency &amp; teen pregnancy reduced.</td>
</tr>
</tbody>
</table>

Once teams are formed, later steps will include:

- Designing a clear plan of action about how to implement the protocol and how it will help to keep children safe.
- Informing all partners, stakeholders, and community members about the policy, ensure they receive training about it and understand how it applies to them.

### Activity 1: Community Engagement - Conversations with Children

#### Purpose of the Activity

- To create a campaign that encourages parents and community members to include children.
- To actively listen to children (See Annex 9 for conversations with children).

#### Steps: Strengthen relationships with children

- Review from module 1 our information on relationships between parents and children. Do you ask your children for their input on the issues that affect them, or do you simply tell them what to do? How do you think interacting with your child can help him or her to become a better adult?
- We know that respect and good behavior will be learned through careful modeling, which means that treating our children and others with respect will teach them to respect. Listening to what our children have to say, especially on issues that directly affect them, is one good way to show respect.
- Research on child development has shown that encouraging your children to speak and listening to them is important for their development. It empowers them, teaches them respect, to build trust, to sharpen their skills in negotiation and communication, to accept others’ points of view, and community values. It puts forward their thoughts and feelings; helps develop positive self-esteem; enhances their competence and self-confidence; and to establish healthy relationships with adults and peers.
- Actively seek to engage your children in conversations about issues that are important to them.
• Take time each day to speak with your children. Listen to their ideas and concerns. Help them reach conclusions
• In your groups, design a personal plan of action on how you will improve your relationship with children.
• Share these in pleno.

Activity 2: Create an Action Plan with your Community

There is an inspirational adage that says, “People don’t plan to fail. Instead they fail to plan.” Because you certainly don’t want to fail, it makes sense
to take all of the steps necessary to ensure success, including developing an action plan.

What is an action plan?

In some ways, an action plan is a “heroic” act: it helps us turn our dreams into a reality. An action plan is a way to make sure your vision is made
concrete. It describes the way your group will use its strategies to meet its objectives. An action plan consists of a number of action steps or changes
to be brought about in your community.

Each action step or change to be sought should include the following information:

• **What** actions or changes will occur
• **Who** will carry out these changes
• **By when** they will take place, and for how long
• **What resources** (i.e., money, staff) are needed to carry out these changes
• **Communication** (who should know what?)

Why would you design an action plan?

• To lend credibility to your efforts. An action plan shows members of the community (including possible funders) that you are well ordered
  and dedicated to getting things done.
• To be sure you don’t overlook any of the details
• To understand what is and isn’t possible for your group to do
• For efficiency: to save time, energy, and resources in the long run
• For accountability: To increase the chances that people will do what needs to be done

Purpose of the Activity

• To ‘practice’ identifying ways to mobilize community action for child protection
• To design an action plan for community mobilizing – which will then be done again in your community

Steps: PART A: Identifying ways to take action

1. Give each participant three pieces of paper and a marker pen.
2. Ask them to think about things that the community can do to create its own support system for children.
3. Ask them to choose three of their ideas and write one on each piece of paper. Ask them to use no more than four words to describe each
   idea. Encourage them to be specific.
4. When they are finished writing, ask them to read out their ideas to the main group in order of priority (most urgent first) and stick them on
   a bare wall.
5. Ask other participants to read their ideas, cluster papers with similar ideas by sticking them next to each other on the wall. When
   everyone has read their ideas, you should have several clusters.
6. Ask the participants to spend a few minutes looking at the clusters of ideas on the wall. As they are thinking about other participants’ ideas, invite them to add more suggestions to the appropriate clusters.

7. Discuss the ideas the participants have suggested.
   - Are they realistic?
   - Are they feasible?
   - How could they be implemented?
   - Who would implement them?
   - Which cluster is the biggest? Does that reflect the priorities of the group?

There are many things the group can do to start taking control of the community’s needs. This work requires individuals to get involved and support each other.

1. Hand out the Action Plan sheets and carefully review each section to explain what information should be filled-in and where. Allow participants an opportunity to ask clarifying questions.

2. Ask the participants from the same area or who might be working together, to get in groups to fill-in the sheets. Ask them to carefully discuss the activities they are planning. They should pay particular attention to whether their plan is realistic and if there are sufficient resources to implement it.

3. Ask each group (who will work together) to present their plan. Discuss each presentation and ask the other participants to comment and offer critical feedback.

An Action Plan for Teams may look like this:

<table>
<thead>
<tr>
<th>AREAS OF ACTION</th>
<th>WHO IS RESPONSIBLE</th>
<th>WHAT WE WILL DO</th>
<th>WHEN IT WILL BE DONE</th>
<th>HOW WILL WE VERIFY OR MONITOR</th>
<th>HOW WILL WE COVER COSTS?</th>
<th>HOW WE KNOW IF IT IS SUCCESSFUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quick response team</td>
<td>Mr. Xxx, Mr Xxxx Police</td>
<td>Design protocol for emergency response in collaboration with police, etc.</td>
<td>By [date] Plan monthly meeting on date..</td>
<td>Written plan provided to head of CBCPC</td>
<td>Fund-raising for emergency account</td>
<td>Successfully managed emergency .. prevented emergency.....</td>
</tr>
<tr>
<td>Women &amp; Girls’ support team</td>
<td>Mrs. Xxxxx, Ms Xxx social worker, Ms. Xxx midwife</td>
<td>Receive gender safety training from ….;</td>
<td>Training on …. Monthly meeting on …</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Awareness raising team</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kids Club</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Fund-Raising**

The important issue of funds has yet to appear in this manual. Most of the activities mentioned to date require very little, if any, financial support. Who is responsible for covering the costs of your child protection committee and its activities? How will you pay for transport and basic living expenses if a committee member needs to accompany a child to hospital or court at a distance from your home? Here are some tips on fund-raising that may help.

- **Commit to your cause.** What makes your committee work for children's rights? What makes you passionate about committing to change in your community? Successful fundraising requires that you convince funders that you have a compelling case for support. Knowing and being able to clearly articulate why you do the work you do is crucial.
• Engage donors in your cause. Successful fundraising goes beyond just raising money. While seeking funds, you are educating people about your cause and involving them in your mission. How can you share information about the issues you work on that will also educate your donors?

• Ask. If you want an individual or an agency to donate money, ask for it! Only rarely do donors give without being asked for their support first. If they give, remember to thank them and to let them know what impact their gift will have.

Identify your Community Resources

Resources are available in every community, no matter how small or poor. Each community has a set of assets upon which to build its future. While you prepare to raise funds, first identify and list the range of financial and non-financial resources of community members and local institutions. Non-financial or in-kind resources can include donations like office supplies, food for an event and volunteer staff. In particular, recognize the talents of groups that have been traditionally marginalized and disempowered, and include these groups in your work so that all community members have the chance to contribute to your committee’s work.

Have I Given Money Myself?

As you get ready to ask others for money, start with the person you know best: you! You are already contributing time and expertise to your cause, but it is important that you give money yourself before asking others. That way, you can request money with greater confidence and credibility.

Solicit Money from Individuals

Before approaching individual donors, think about their interests and ability to give. Focus on those individuals most likely to be interested in your work. Follow-up and share more information about the impact of your work, even with those who may initially seem reluctant to respond to your requests.

Involve your donors by educating them about your cause and informing them about the progress of your work. Depending on your environment and your resources, make a phone call, send an email, send a written report, share pictures of the project, organize a visit or a reception to socialize and meet other donors. Remember to treat your donors with respect and honor by using their donations appropriately and by acknowledging their contribution.

Organizing Events

Events can be used to raise funds, but are often most successful at connecting donors and other individuals in the community to your work. While not every event raises funds immediately, they can strengthen your organization by:

• Reaching potential new donors;

• Raising the visibility of your organization in its community;

• Deepening relationships with your current donors.
Examples of Events

- Community dinner event/Tea Party
- Celebration/festival incorporating cultural activities and traditions
- Auction/raffle
- Dance performance/dance party/children’s performance on a theme important to them
- Music performance
- Sponsored walk, marathon or other sports activity
- Speaking engagement featuring celebrities or community leaders
- Gathering in someone’s home featuring a discussion of your group’s activities and the challenges that children face in your community
- Creating and marketing crafts made by local children or community members

Approaching Businesses

In some countries, businesses and corporations are increasing their support for community initiatives. By conducting thorough research in your own community, you may find local businesses and international corporations that make financial grants or offer in-kind gifts (non-cash items of value) to nonprofit organizations.

Fundraising through Grant Proposals

Private foundations, NGOs, multi-lateral institutions and government agencies are probably the main funding sources in your country. Most of these organizations require a formal grant proposal in order to consider a request. The first step before you contact these institutions is to learn about their specific criteria and grant proposal procedures. Understanding their unique funding processes will help you target your fundraising efforts.

Collaborate with other organizations

Through partnerships with other organizations, you may be able to develop joint projects that attract greater funds than you could secure on your own.

ENGAGING STAKEHOLDERS: COMMITMENT AND COORDINATION

Child protection and advocacy cannot be seen in isolation. They require a multi-sectoral and multi-disciplinary approach which involves a wide range of stakeholders including government, multilateral agencies, donors, communities, caregivers, families and, most important, the children they want to reach. The variety of stakeholders involved requires a high level of coordination to maximize efforts and achieve greater results. Effective coordination between stakeholders at the community level, and community-based child protection services, is essential in preventing and responding to violence against children.

Your stakeholders were selected specifically because they are already active in child protection or they have great potential. You need to formalize that relationship for maximum benefit to all involved. Ultimately, successful coordination should result in more targeted, responsible and responsive programming. Stakeholders must always remember why they are coordinating their work and who is benefiting. Coordination processes should not only serve the actors engaged in prevention and response interventions, they should also lead to positive outcomes for the whole population.

The templates and steps offered here will provide you with a variety of structural, stylistic and content options that can be adapted to suit your specific child protection issues, needs and contexts. It will help you to develop a protocol based on your current requirements and continually adapt them as needs, conditions, and contact points change.
How else will you maintain coordination and follow-up with your stakeholders? Will you hold regular meetings?

**Example: Scheduled network coordination meetings**, review, and up-dates to be held on a [weekly/monthly??] basis on/at [date and location].

**Sample Agenda**

1. Welcome, Opening Remarks and Introduction
2. Review of the Action Points from the previous meeting
3. Update on two recent rape cases
4. Update on CP Work and Action Plan
5. Update from [agencies]
6. Partner updates
7. AOB [any other business]
8. Closing and Adjournment

**Activity 3: Stakeholder Coordination Plan**

**Purpose of the Activity**
- Structure a coordination template to guide collaboration with stakeholders

**Steps**
- Identify activities that need to be accomplished to strengthen your child protection system
- Analyze the resources and capacities of your stakeholders, keeping in mind their time and availability limitations
- Based on their roles and responsibilities already listed (Module 5), detail the activities and needs of keeping in touch and capacity building your system as well as your community.
- In column 1, list what kinds of activities can be done to maintain coordination.
- In column 2, list what those activities are in more detail.
- In column 3, list who may be the focal point for each of these activities, i.e., who is responsible for maintaining contact and sharing information?
- Try creating the tables here but you will need to follow-up by reviewing them with your stakeholders!

**Example: Coordination Activities and Responsibilities**

<table>
<thead>
<tr>
<th>ISSUES TO BE ADDRESSED</th>
<th>COORDINATION ACTIVITIES</th>
<th>FOCAL POINT/MEMBERSHIP AND PREFERRED MEANS OF CONTACT</th>
</tr>
</thead>
</table>
| **Information sharing for coordination** | Collecting and sharing reports, information, including:  
  - Coordination documents: SOPs, Strategy/Action Plans, MoUs, communications, etc.  
  - Training schedules and materials on child protection shared  
  - Monthly meetings scheduled, agenda set, minutes taken  
  - Keeping files on cases, distributing to partners  
  - Boards with child protection case information | Committee secretary - ??  
Who else will be involved in these activities? What are their tasks? |
| **Appeals for child protection funding and support** | Based on patterns of cases and reasons, appeal for prevention support from government or NGOs. Ex: prepare proposal for a well and water pump to save time so children can focus more on school and not fetching water. | |

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Awareness-raising on child protection issues

- Informing community on child protection patterns and issues and promoting behaviors that improve health and well-being.
  - Raise awareness about risks to children’s protection and well-being
  - Mobilize communities to respond to and prevent those risks
  - Monitor child protection risks on an ongoing basis
  - Help to develop local solutions to problems Ex: prevent early marriage through income generation for families unable to pay school fees; solicit funding for school costs from government

Team Strengthening activities

- Capacity building trainings on…… in order to improve the skills of all members of the coordination group. This is a collaborative process in which the expertise of all members—from people of concern to international NGOs—is shared amongst coordination partners to develop a strong and effective coordination mechanism.

Coordinating with community

- Using participatory and community-based approaches to elicit and provide information; promote behaviors that improve health and well-being. To reduce the incidence of child abuse and violence; to ensure that those who have experienced it are enabled to seek the care they need.

Activity 4: Enhancing Cooperation through an MoU

Collaboration between ChildFund partners and the community, and the community with its child protection collaborators, must be a carefully negotiated process through which a ‘partnership’ is created. Support is not a one direction deal in which communities receive a gift of funding, of knowledge, of support. Instead, the Memorandum of Understanding, or MoU, should be used to build an agreement for mutual commitment. This is a means of encouraging community ownership of the project that ensures their active involvement as a binding contract with clear responsibilities and outcomes. Below is an example of an MoU to build latrines for a village.

**Step 1: Know your Context:** Following collaborative community needs assessments, decide collaboratively what would best address the most pressing child protection issues. Be aware of exactly what the community is capable of providing. Ensure the community wants and needs what you are proposing and is prepared to learn how to use it, maintain it.

**Step 2: Designate who brings/does what:** This is the step that ensures cooperation and commitment by agreeing to a division of set responsibilities.

**Table 14: Infrastructure Plan**

<table>
<thead>
<tr>
<th>CF/PARTNER OBLIGATIONS</th>
<th>COMMUNITY OBLIGATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>CF will provide the plans, help select location, provide building guidance, …</td>
<td>Will provide labor</td>
</tr>
<tr>
<td>Cement, bamboo, hardware</td>
<td>Sand, water, wall materials</td>
</tr>
<tr>
<td>Provide guidance in use, maintenance, cleaning</td>
<td>Maintenance, create water committees, all cleaning</td>
</tr>
<tr>
<td>Will monitor community commitment and usage for 6 months</td>
<td>Will learn proper care and maintenance, and take over all responsibility</td>
</tr>
</tbody>
</table>
Table 15: Children's Life Skills Training Cooperation Plan

<table>
<thead>
<tr>
<th>CF/PARTNER OBLIGATIONS</th>
<th>COMMUNITY OBLIGATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>CF will provide the training manual, help select location, provide materials for the</td>
<td>Will provide all the ground preparation such as identify children’s needs, trainers,</td>
</tr>
<tr>
<td>first x trainings, ……</td>
<td>identify participants, secure funding for future trainings</td>
</tr>
<tr>
<td>Provide guidance in facilitation skills, monitoring &amp; evaluation, support in adapting</td>
<td>Train youths as facilitators, monitors, evaluators</td>
</tr>
<tr>
<td>to specific needs</td>
<td></td>
</tr>
<tr>
<td>Will monitor community commitment and usage for 6 months</td>
<td>Will commit to expanding coverage, and take over all responsibility for life skills</td>
</tr>
<tr>
<td></td>
<td>training</td>
</tr>
</tbody>
</table>

A Memorandum of Understanding (see format in Annex 5), while not a legally binding document, does indicate a voluntary agreement to assist in the implementation plans of a project that will need resources for implementation and therefore will need to be funded collaborative. The agreement is between the lead agency/applicant and a partnering entity. It generally defines the overall program goals and describes the collaborative nature and relationship between the identified project and MOU-referenced participant.

The initial paragraphs should contain the following information:

- Name of project
- Name of agencies involved in the MOU
- Identification of funding source
- Identification of grant period
- Project goals and key services to be provided
- Project outcomes to be addressed

The body of the MOU should include the following five areas:

1) Terms and conditions of the MOU should address the timeframe of agreement and, if applicable, timetable for renewing commitment.
2) Identification of roles and responsibilities of the lead agency.
3) Identification of roles and responsibilities of the partnering group.
4) Termination clause is very important as it defines how the agreement can be ended (i.e. by written 30 day notice).
5) Signatures of the agency representatives, including date signed, is located at the end of the MOU.

REPORTING ON CHILD PROTECTION ISSUES

Coordination between partners means you will need to keep records of not just your responses and follow up to child protection concerns, but also your surveillance, and prevention work. How you will go about achieving this will depend on the strengths of your system and how well you collaborate with other stakeholders. For now, we will focus on possible abuse reports to sharpen your abilities to take advantage of your stakeholders’ expertise.

All child protection systems need to establish criteria for decision-making. A report is a representation of that decision-making process. The procedure for handling reports of child protection concerns will cover how and why to make a report. It will also discuss what to do with reports. Participants will be encouraged to answer such guiding questions as:

- What types of concern need to be reported?
- Who is the target(s) for reports?
- Why do we need a record of these cases?

Concerns that arise in the community about abuse, neglect, exploitation and violence need to be recorded for different purposes and uses. For example, information is needed to ensure that a record exists of any CP incident reported to the CHILD PROTECTION COMMITTEE, to document the
risk assessment and initial and ongoing response (support, services, referral etc.) by the Committee and other service providers. The information can also be consolidated (not identifying individual cases) to share trends, findings regarding the child protection situation in the community with its members and other relevant stakeholders to give them a better understanding and manage their child protection priorities.

In general, a child protection report needs to be made when:

- Children are harmed or at risk of being harmed and need individual attention or a specific planned intervention to meet their needs and ensure they are protected.
- There is an expectation that support for a child’s well-being and protection is likely to be needed in an on-going and comprehensive way – with short, medium and long term actions.
- Where the focus of the protective intervention is on individuals, rather than on communities in general.

BUT as noted above, keep in mind that all reports can be compiled into your file system and used for analysis of issues that affect your community. There are strong reasons to write a report for everything that occurs. Coordination should eventually include not just local agencies, but also national offices so that support and funding can be sought to support your growing opportunities. In short, report-writing can become the basis for your advocacy work.

Create a Coordination pathway: All reports will be compiled with your designated secretary who will ensure each has a file number and is filed properly. Reports will need to be shared with contacts at partner organizations as designated in your partner agreements. Each report will be filed under a file type and number for confidentiality purposes and used for monitoring/surveillance purposes by child protection volunteer groups. Report analyses will need to be shared at scheduled meetings.

As your child protection system strengthens and grows, it will be important to share what kind of information is needed by each partner and to explain why a written report of incidences and a history for certain families is needed. You will need to review your documentation policy with partners to ensure all needs are being met. This is particularly important where stakeholders make up a referral system and will be responsible for supervision and ensuring follow-up of cases. The creation of a filing record, whether in a book, recorded on a board, or in a computer file, will help you make these decisions.

How to make a report

Once an issue is reported, make contact as soon as possible with other members of the child protection committee. Be prepared to collect certain information about the incident or condition of the child. This information will help you make a decision on what steps you will need to take. Annexes 4 and 6 have templates you can use until you access one recommended by partners or your national child protection agency. Information will need to be filled into a form presented below:

- **details** – the child’s or young person’s name, age and address
- **indicators of harm** – the reason for believing that the injury or behavior is the result of abuse or neglect
- **reason for reporting** – the reason why the call is being made now
- **vulnerability criteria or safety assessment** – assessment of immediate danger to the child or children. For example, information may be sought on the location of the alleged abuser or abusers, whether the abuse is chronic or acute, extreme or mild
- **description** – description of the injury or behavior observed
- **child’s location** – the current location of the child or young person
- **other services** – your knowledge of other services or incidents involved with the family
- **family information** – any other information about the family
- **cultural considerations** – any specific cultural or other details that will help to care for the child, for example, cultural origins, interpreter or disability needs.
A report should still be made, even if you don’t have all the information listed above. The identity of the informer should be protected unless required by police for evidence in court.

It is important to record centrally the results of all assessments, and to report on the numbers of children that meet the criteria or not. The report should show whether the child meets the protection criteria and will be supported by either the community’s own mechanisms or referral. Where a child is referred for further services either as part of the support plan or as part of the case closure, that information should also be reported.

These records are used for your committee’s internal monitoring, to demonstrate the work done by the committee and its teams, the kinds of requests for support that your committee receives, and the capacity of the committee to respond. A nominated member should maintain a monthly records board (below) that should be updated during regular meetings. Your child protection teams, partners and regional governments can use the data gathered for analysis of community needs, to direct prevention activities, to inform donors and to secure funds that could enhance prevention or response actions.

Confidentiality and secure storage of all information on children is very important. Individual child case files should be given an identification code that would allow their case to be discussed whilst still maintaining confidentiality, and to overcome the problem of different children who may have the same name. Information access protocols should be established to restrict information on a need-to-know basis.

**Compiling reports to identify patterns of risk**

Analyzing patterns of abuse, neglect or exploitation among our own children and experiences can help us to identify what kinds of risks we need to work more closely on preventing. To help in documenting or at least keeping track of reports, a simple table like this one below could be written up on a blackboard or large paper for public viewing. Keep records of your cases for your own assessments, as they are good tools for improving your work, monitoring what is being done, and identifying your own weaknesses for future capacity building work with partners. Since the board is public, make sure you guard confidentiality by linking to case file numbers rather than names.

<table>
<thead>
<tr>
<th>Known Cases (Children identified as abused, neglected, etc.)</th>
<th>Age</th>
<th>Sex</th>
<th>Type of Abuse: Neglect, SGBV, Child Labor, other</th>
<th>Referred to Child Welfare Committee (Managed or not managed – describe action taken)</th>
<th>Referred to Child Welfare Committee and referred out to social services (list the service)</th>
<th>Referred directly to outside service (List the service)</th>
<th>Follow-Up Action (Describe actions taken)</th>
</tr>
</thead>
<tbody>
<tr>
<td>File #42</td>
<td>5</td>
<td>B</td>
<td>Labor, neglect</td>
<td>No action taken</td>
<td></td>
<td></td>
<td>Analysis by (name) pending. Child still seen working long hours.</td>
</tr>
<tr>
<td>File #54</td>
<td>8</td>
<td>G</td>
<td>SGBV</td>
<td>CBCPC met with parents</td>
<td>Social Worker (Mrs. Geneva)</td>
<td>Police contacted. Sgt. Rashid</td>
<td>Uncle in custody. To be tried at (location) on (date). Victim examined by doctor, back in school.</td>
</tr>
</tbody>
</table>

How can recording your cases assist your team in its work?

Brainstorm together some ideas that can be learned from such a table. Come up with several ideas that can be implemented as a result of such records.
Documenting a Case: Try to practice documenting a child abuse concern using the example of the 9 year old neighbor’s boy based on the Promise case study above. Try filling out the referral form located in Annex 4 and 6 plus locally used forms based on the discussion of your group. Is there information required in your local forms that may not be there? Should you take steps to amend the reporting forms used in your area?

• How does filling out the form help you in your decision-making process?
• How does it help you in the referral process?
• Are there questions that should be on the form but are not?
• Which format do you find more helpful? You may change the form to suit your needs.

CONCLUSIONS AND FOLLOW-UP

Request several volunteers to summarize what we learned in today’s meeting. What did they find particularly useful? What was not useful? How will collaborating more strongly with their community make their child protection work more effective? How will it make it more difficult?

For your follow-up activities, ask participants to design their own action plans based on all the materials they have gotten from these workshops. What kinds of activities do they see as particularly relevant and worthy of follow-up?

Your activities today were all in practice for the activities you will later share and implement in your communities. Based on plans you created here today, pick one and start working on implementing it in your community. Keep notes on how it goes. What worked well? What didn’t work as well? Can you figure out why it may not have worked? What can you do to improve it next time? What have you learned about community engagement that you can share with this group at our next meeting?

BROKEN PROMISE - CASE STUDY FROM LIBERIA

Promise is a boy between 8 and 9 years old. Born to coal miner parents, there is no school in the area. His grandmother came to visit and offered to take Promise to her city and make sure he went to school since he showed an aptitude and desire toward learning. For an unknown reason, she dropped him off at his uncle’s house. Uncle’s wife objected to taking in the boy and refused to accept him, provide for him, only gave him food once a day at 7 pm, insulted him constantly, forced him to wash clothes at the river and even sent him to work in Monrovia for a while. Following around 2 years of this, Promise got fed up and decided to run away. Details unknown but he came back late one night and the wife refused to let him back into the house. He now sleeps in the kitchen (outside). He is learning to survive: To fend off hunger he shares meals with another boy – the boy gives Promise half of his breakfast and Promise gives him half of his dinner.

The Women’s Peace Hut group became aware of Promise’s situation because he had no shoes or clothes and was seen sleeping outside. A female elder bought him sandals and some clothes. She wants to help but does not know how. Promise wants to go home but she does not know how to accomplish this (Promise does know where his parents live and their name). Promise also wants to go to school but there is no school in his parents’ region.

Analysis: Exposes the different treatment of a non-birth child in a family; the slow ability of community to recognize a case of abuse, exploitation, and neglect, but also the willingness to be compassionate and help once aware. It also shows how even with a good CBCPC, no one knew how to help this boy, no information on who could have helped. Thus, as an example of the need for referral system strengthening, it shows a gap in CBCPC awareness and ability to act, as well as a far larger gap in national infrastructure, access to education for all, the tradition of placing child with others with no monitoring.

Field Support: When we came to do our fieldwork, ChildFund’s Child Protection Officer interviewed him, passed on this information to Save the Children’s Child Protection Manager, who is responsible for that geographic area. They will take over and help Promise either to go home or find alternative solution that involves schooling.

Remaining Questions: go home or to school? He cannot have both. WHAT are the legal aspects of the national child protection system that should protect Promise? What needs to kick in to make the system move to act? What services exist for such an issue? If referral means access to services, but they do not exist – does the boy remain in his black hole?
MODULE 7. DEVELOPMENT OF STANDARD OPERATING PROCEDURES

Recap – Module 6

Ask volunteers to review what we covered in our last meeting. Discuss the pros and cons of assessing and coordinating with the broader community; with our stakeholders. What problems arose since our last meeting and how did you solve them? What benefits, if any, came from actively seeking people’s input? How will you maintain these advances in your child protection work?

Preparing for Module 7

For creating an effective SOP, stakeholders and community members will need to be included. Make sure many are able to send a representative to at least verify their agreement to the points raised in the document. Since there is nothing in the SOP that we have not covered earlier, make sure you have with you the tables and structures already created for earlier modules. This will ensure the SOP creation goes smoothly.

All the activities we have done to date lead us toward formalizing and standardizing our child protection practices into a standard operating procedure, or SOP. By now it should be clear that the purpose of gathering to create an SOP is to guide our implementation of our child protection system. A child protection system is based on the recognition of responsibilities—the family’s responsibility to protect the child and obey the laws of the community; the community’s responsibility to protect its children and its families, and the state’s responsibility to protect and support families to fulfill their role. Working together for successful outcomes for children is essential. To facilitate this, it is important that all participants and agencies coordinate their activities and are clear about both their responsibilities and their expectations of others. Even though one designated child protection agency should have overall accountability, it may not provide all services.

Depending on the strength of existing referral pathways or child protection awareness in general, all stakeholders need to be involved in the process of development and maintenance of the child protection system to encourage their shaping of it. To develop the system, stakeholders will work together to:

- Determine the types of services to include (or learn about)
- Select the geographic areas and the facilities and service providers to include in the network
- Learn about the legal framework for child protection and the scope of protection the law provides and why some child protection problems must be referred
- Identify contacts based on experience and levels of trust and being introduced to new contacts
- Become better informed on the purpose and benefits of referral and explain the goals and objectives of such a referral mechanism to others
- Develop work plans for child protection strengthening based on the system awareness-building process
- Identify funding for referral system improvements and referral needs

Capacity and awareness-building activities should harmonize groups to work together through detailed trainings. Ensure a broad representation is included from youth to elders, police and other community level responders.

— Child Protection Officer, Save the Children, Liberia

Broad stakeholder participation in this creation of a Standard Operating Procedure, network strengthening process should raise awareness about the importance of referrals, motivate reflection, and generate interest in strengthening the entire child protection system.
REFERRAL TO SUPPORT SERVICES

Where the community-based child protection committee (CBCPC) cannot meet all the child’s needs, they must refer the child to other agencies as identified in the SOP. A referral is the means by which a person passes on information about a protection concern or incident related to a child, family or caregiver to the other agency ensuring that no harm is caused through the process. This is the CBCPC responsibility when problems are beyond the scope of the community to manage through informal support networks such as family, friends and neighbors. Referrals for support may be made to education, physical/mental health, legal, livelihood support, or skills training services.

The capacity of your CBCPC will improve with time, experience, and further training. To manage referrals effectively, CBCPCs will need to develop a resource directory outlining which specialized services are provided by which agencies beyond the basic services you have listed in your SOP (see Annex 8 for a sample referral directory). Resource mapping to identify agencies which could meet children’s needs and join the referral pathway has been done in Module 5 – but can and should be updated as contacts change and as you become aware of more services. It is important that when CBCPCs look at which agencies they can refer a child to, so that they check that the agency provides quality and safe services. This means that the CBCPC will need to build and maintain relationships with organizations that can provide services to the children in the target group.

To facilitate referrals, CBCPCs need to establish referral pathways with clear roles and responsibilities of each agency, stating to whom the referrals should be made. A referral pathway should include:

- Clear criteria of children defined as needing protection (thresholds of risks)
- Role of CBCPC and other links in your network
- Who can make a referral
- How referrals will be made (formats to: capture essential information, to receive feedback on services rendered; forms to facilitate follow up, etc. See box below.)
- What information about the child and family caregivers will need to provide to the agency
- How to provide required information and to whom (report, telephone, in person)
- What happens next – assessment meeting to decide if criteria are met

Partnership agreements or MoUs may be needed to formalize referral pathways.

In Namibia volunteer community home visitors work to support vulnerable families. As part of the home visit they identify vulnerable children and gather information about services needed, including protective services. Each home visitor carries a set of simple referral forms, which have been assigned a number. If a child in a household needs to be referred for a particular service a referral form bearing a number is prepared and given to the parent so that it can be presented at the service site. All service providers that are part of the local referral system can receive referrals from a community home visitor. Once the family has been given a referral form the volunteer home visitor will place a card with the same number in a ‘referral box’, of the relevant participating service provider. Once per month the home visitor collects the cards in the referral boxes that will indicate the children seen by those providers. S/he will know who has accessed services, what services have been provided, what follow up is needed by matching the number on the card with that on his/her referral list. In this way, the volunteer community home visitor can track if children have been taken for services by the family, provided services by the local referral network and can follow up, support and see how services are used by vulnerable families.

— Development Aid People to People, cited in Pathways to Protection (2012), Centre for Social Protection and Institute for Development Studies.
STEPS TO CREATING AN SOP

STEP 1: Determine the geographic area to be included in the referral network. Where do most of your community members live? What services are available? How far can they travel to seek services? If there are clinics, social services, police stations, each site may need a different directory to ensure that the services are geographically accessible.

STEP 2: In collaboration with the community and CBCPC or other CBOs, identify the laws, policies and procedures that will support your child protection work (Module 2).

STEP 3: Identify all institutions in the area that provide services that are relevant for the various child protection issues (Module 5). This list can include medical, psychological, social, educational, and legal organizations, as well as local police contacts. You may also want to consider including institutions that address foundation issues related to child abuse, such as support for water access, sex/life skills education, teen pregnancy prevention, alcohol abuse, as well as those that offer services for children who have experienced or have been exposed to violence. Each institution may be able to name other local institutions that can be included in the directory. Decide if an MOU is required to solidify this relationship.

STEP 4: Collect contact names of representatives from each agency and invite them to the SOP creation workshop. Referrals work best when there are trust and familiarity between community residents and support services. Contact persons are best introduced personally so that people can see and hear firsthand what services they can provide and how it is provided. Mobile numbers or addresses need to be exchanged so people know who is there to help them when the time comes. If the community is literate, share templates and forms to assist in defining abuse and determining which issues could be managed internally and which must be referred. Advise the community on documentation processes.

STEP 5: Organize the information into a referral directory (Annex 8) or flow chart clearly listed within this SOP. You can organize information about referral contacts in different ways (for example, by location, type of service offered, etc.). Make sure this directory is widely available to ordinary community members on information posts and public spaces.

STEP 6: Distribute the directory among all stakeholders within the designated area. Ideally, distribute a copy of the directory to each police station, social work, health care, and legal aid provider, as well as schools so that all staff members who interact with children have access to this information. At the least, every head office should have a directory available to staff in a convenient, accessible place.

STEP 7: Gather feedback from providers about how well the referral system is working. Community social workers and managers should take the time to discuss the contact method and information sharing with CBCPCs soon after it is introduced to make sure that the format is workable and that the community members or providers have not had any difficulties with the process of making referrals. Once community members and providers have used the directory for a period of time, they may know what referral services are or are not in fact accessible.

STEP 8: Formalize relationships with referral community and institutions. After creating a directory, the next step is to create more formal partnerships with other agencies. This may include setting up formal referral and prevention collaboration projects. Ideally, organizations involved in a referral network should be in contact with one another on a regular basis to give feedback, stay up-to-date, and provide at least minimal follow-up to selected cases and other issues related to this work.

STEP 9: Update the information in the flow chart on a regular basis. It is essential for programs to update the contact information on a regular basis (for example, every six months) to avoid giving misinformation. It is also necessary to maintain personal communication between the community and their contacts to ensure trust and awareness remain intact.

STEP 10: As the pattern of child protection issues becomes clearer, ways of prevention need to be discussed and ideas sought from the community
members. This is where pathways can link further to other CBO and NGO partners who can collaborate in making the environment safe for children by taking on the primary reasons for child abuse, such as improving water access, livelihoods support, building early child care centers, preventing teen pregnancies through life skills training, etc.

A full sample SOP template is found in Annex 10.

STANDARD OPERATING PROCEDURE
SAMPLE ONLY
Child Protection Referral Pathway

I. AIMS AND OBJECTIVES

[Your aims and objectives set the structure for your developing SOP. This section is based on a summary of your main findings from Module 2.]

1. Aims and Objectives

This document has been developed by __________________________ [list names and organizations of the committee] to provide guidance on the process and procedures agreed upon for a Referral Pathway for Child Protection that is to be followed and shared with everyone who supports our responsibility to safeguard children.

The objective of this document is to assist the community of ___________________________, its residents, leaders, partners and supporting organizations to develop a child protection and referral pathway that is consistent with:

• The laws and Child Care Act, . . . . ; [complete this by naming the legal foundation of this SOP based on your research. Ensure participants are aware of these laws and their meanings.]

• The roles and responsibilities of our community and its members to uphold these laws and protect our children;

• The guiding principles of our community to create a protective environment for our children through leading a partnership between our children, our families, our community-based structures and local organizations, in cooperation with government agencies.

II. SCOPE OF THE AGREEMENT

[The scope statement defines the program, location, and members covered under the agreement, and represents a common understanding of its purpose among the stakeholders.]

2. Scope of the Agreement

The committee agrees that this SOP will cover __________________________ [define what this will cover if not] all child protection issues that occur within the village of __________________________ [define boundaries] and define our commitment to work together with [name agencies involved in sharing the referral SOP process].
III. ROLES AND RESPONSIBILITIES

(This section should be based on the stakeholder mapping already achieved in Module 5). List here the roles of different actors within the child protection referral process, including community deciders. The process of deciding what is managed in community and what requires referral will be dealt with further below. Include inter-agency referral contacts and coordination mechanisms here. A table, like this example, can help to describe the different responsibilities covered by various individuals or agencies (e.g. coordination duties, etc.).]

<table>
<thead>
<tr>
<th>PEOPLE AND THEIR ORGANIZATION/AFFILIATION</th>
<th>ROLES AND RESPONSIBILITIES</th>
</tr>
</thead>
</table>
| Example: Mr. Xxxxxxx, head of CBCPC, Community chief | - Surveillance: monitor and identify vulnerable children  
- Prevention: Providing awareness-raising information to teams; confronting parents or guardians and discussing actions that may be leading to risk.  
- Response:  
  - Leading negotiations on what needs to be decided in/by community and what requires referral.  
  - Coordination: Must be informed for all referrals made |
| Ms. Xxxx, Head of Women’s Peace Hut | - Surveillance: monitor and identify vulnerable children;  
- Prevention: awareness-raising; teaching; discussing actions that may be leading to risk with parents/guardians.  
  - Lead Peace Hut discussions on potential risks  
- Response  
  - Lead interviewer/investigator with child victims especially girls  
  - Involved in negotiations, decision-making, and in-community solution-finding.  
- Coordination: Accompany police or social worker in investigating any GBV |
| Mr. Xxxx, Police officer | - Surveillance: Has access to crime records and can identify and monitor offenders.  
- Prevention: Will speak to community on child protection risks  
- Response: First contact for referral where a law has been broken  
  - Will come immediately upon alarm  
  - Will contact police woman, social workers, health workers depending on nature of the crime  
  - Will begin investigation process in case of court action  
- Coordination: interrogate in presence of designated women |
| Ms. Xxxxx, Police woman/ Family Unit | - Second police contact when victim is a child  
- Will coordinate with family; collaborate on initial findings from Ms. Xxx; Continue fact-finding with victim. |
| Mr. Xxxxx, Volunteer social worker, DSWGCP | - |
| | - |
IV. OUTLINING STEPS AT EACH STAGE: REFERRAL PATHWAY FLOWCHART

1. Recognizing or learning about a child protection problem can begin with a report, gossip, overhearing an argument, seeing a beating, seeing a child at work during school hours, or not seeing a child going to school. Not all children will seek help. How long should it take for you to respond?

**TELLING SOMEONE AND SEEKING HELP (REPORTING)**
Survivor tells family, friend, community member; Abuse is witnessed and reported to parent, other community member. Survivor self-reports to any older person.

2. Suspected problems need to be brought to the attention of your Child Welfare Committee – or, if there is no CBCPC, who in your community has the ability and training to make such decisions? How long should it take to respond to the incident?

**PARENT or OTHER PERSON REPORTS TO CBCPC (REPORTING AND DELIBERATION)**
The CBCPC/Elders must convene to a) provide a safe, caring environment for the child based on the best interests of the child; b) learn the child’s immediate needs; c) assess risk and systematically weigh out clear options to address protection risks and needs of the child – with parent or guardian, if able.

CBCPC determines the situation of the child to inform and mobilize the appropriate support: If no immediate harm or risk, decide with child and family on the best way forward.

[Enter specific information about how a meeting is convened; Give a time limit for responding; How the rules for deliberation work.]

IF harm has occurred or risk to the child is deemed high, immediately contact child protection and law enforcement

[Enter specific information about the police contact - including where to go and/or how to contact them]

3. Based on the findings or the results of CBCPC deliberation and/or conference with families involved, either a solution through local measures and support is agreed upon or further steps are recognized to be needed for which referral is made to another agency. List names and contacts for each category of referral:

**IMMEDIATE RESPONSE**
The CBCPC or parent must provide a safe, caring environment and respect the confidentiality and wishes of the survivor/family; learn their immediate needs; give honest and clear information about services available. If agreed and requested by the child and or family or elders, obtain informed consent and make referrals; accompany the survivor to assist in accessing services.

<table>
<thead>
<tr>
<th>Locally Managed</th>
<th>Medical/health care entry point</th>
<th>Social Worker entry point</th>
<th>Legal support entry point</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow community tradition of deliberation to resolve a temporary or manageable problem</td>
<td>[Enter name of the health centre(s) in this role and contact information]</td>
<td>[Enter name of the Social Worker(s) in this role and contact information]</td>
<td>[Enter name of the police or legal service provider(s) in this role and contact information]</td>
</tr>
</tbody>
</table>
4. **Cases that are in conflict with the law will require police contact. Write the names and contacts of trusted and known police and legal service providers here:**

**IF THE SURVIVOR WANTS TO PURSUE POLICE/LEGAL ACTION – OR – IF THERE ARE IMMEDIATE SAFETY AND SECURITY RISKS**

Refer and accompany child survivor to social welfare or protective services such as police/security - or - to legal assistance/protection officers for information and assistance with referral to police.

<table>
<thead>
<tr>
<th>Police/Security</th>
<th>Legal Assistance Counsellors or Protection Officers</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Enter specific information about the security actor(s) to contact - including where to go and/or how to contact them]</td>
<td>[Enter names of organisations and contact information]</td>
</tr>
</tbody>
</table>

5. **Over time cases need follow-up action, either from CBCPC or community members who monitor the situation with support to the family or through the preferred social service agency. Problems faced by one family are rarely unique. Is there a pattern of issues that needs to be solved through external support?**

**AFTER IMMEDIATE RESPONSE, FOLLOW-UP AND OTHER SERVICES**

Over time and based on child's choices can include any of the following:

<table>
<thead>
<tr>
<th>Health care</th>
<th>Psychosocial services</th>
<th>Protection, security, and justice actors</th>
<th>Basic needs, such as shelter, children's services, safe shelter, or other</th>
<th>Government Ministry, CBO or NGO to support with income generation, watsan, or other</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Enter names of organisations and contact information]</td>
<td>[Enter names of organisations and contact information]</td>
<td>[Enter names of organisations and contact information]</td>
<td>[Enter names of organisations and contact information]</td>
<td>[Enter names of organisations and contact information]</td>
</tr>
</tbody>
</table>

V. **PROCEDURES FOR HANDLING REPORTS**

Below is a generic report form we can use to document our response decision-making and work toward keeping records of the child protection issues that arise in our community. With representatives of various social services, police, and health workers in your groups, share information on why documenting child abuse reports is a good thing to do. Decide on a contact list that provides a pathway for reporting. Who else needs to have records of all reported cases?

Herein we vow that all reports/concerns of child abuse will be documented in report form (agreed format below) and acted upon without delay as per the Referral Pathway Flowchart. All reports will include contact information and reasons for concern as well as vulnerability criteria.

**Coordination pathway:** All reports will be compiled with [name] and shared with [name of contacts at partner organizations]. Each report will be filed under a file type and number for confidentiality purposes, and used for monitoring/surveillance purposes by child protection volunteer groups. Report analyses will be shared at scheduled meetings.
Sample Child Protection Report Form

If you have knowledge that a child’s safety might be in danger, please complete this form to the best of your knowledge. Please note that child protection concerns must be reported directly to the designated child protection officer immediately (preferably within a day). This report is to be used as a tool to develop the most un-biased information-based report possible. For confidentiality reasons, the report should be written and signed solely by you.

CLASSIFICATION: [type of concern]

FILE NUMBER: [for confidentiality in recording]

1. About You
   Your name: [Name]
   Your job title: [Job Title]
   Workplace: [Workplace]
   Your relationship to the child: [Relationship]
   Contact details: [Contact Details]

2. About the Child
   Child’s name: [Child’s Name]
   Child’s gender: [Gender]
   Child’s address: [Address]
   Child’s guardians: [Guardians]
   Child’s age: [Age]

3. About your Concern
   Was the abuse observed or suspected? [Observed/Suspected]
   Time of the alleged incident: [Time]
   Is this concern based on first hand information or information divulged to you by someone else? (If so who?) [First Hand/Information]
   Location of the alleged incident: [Location]
   Name of alleged perpetrator: [Perpetrator]
   Did the child disclose abuse to you? [Yes/No]
   Position in the family, community or organization: [Position]
   Date of the alleged incident: [Date]
   Nature of the allegation: [Nature]

Your personal observations (visible injuries, child’s emotional state, etc.) [N.B. Make a clear distinction between what is fact and what is opinion or hearsay]
   To the best of your ability, note the Vulnerability Criteria:
   How serious is the risk to the child?
   Is this a chronic or acute condition?
   Exactly what the child or other source said to you [if relevant] and how you responded to him or her [Do not lead the child. Record actual details]
   Who are the adults that habitually provide care and protection for the child?
   How are they involved in the reporting of the incident and support of the child?

Any other information not previously covered:

Were there any other children/people involved in the alleged incident?

Action Taken:

Signed ____________________________________________ Date ______________________________

Strengthening Community-Based Child Protection Pathways: Module 7 Development of Standard Operating Procedures
Report Monitoring and Follow-Up Chart

All reported cases to be compiled on a board in CPC office (or palava hut, etc.) for monitoring and analysis of patterns, ensuring follow-up actions.

<table>
<thead>
<tr>
<th>Known Cases (Children identified as abused, neglected, etc.)</th>
<th>Age</th>
<th>Sex</th>
<th>Type of Abuse: Neglect, SGBV, Child Labor, other</th>
<th>Referred to Child Welfare Committee (Managed or not managed – describe action taken)</th>
<th>Referred to Child Welfare Committee and referred out to social services (list the service)</th>
<th>Referred directly to outside service (List the service)</th>
<th>Follow-Up Action (Describe actions taken)</th>
</tr>
</thead>
<tbody>
<tr>
<td>File # 42</td>
<td>5</td>
<td>B</td>
<td>Labor, neglect</td>
<td>No action taken</td>
<td></td>
<td></td>
<td>Analysis by (name) pending. Child still seen working long hours.</td>
</tr>
<tr>
<td>File #54</td>
<td>8</td>
<td>G</td>
<td>SGBV</td>
<td>CBCPC met with parents (Mrs. Geneva)</td>
<td>Social Worker (Sgt. Rashid)</td>
<td>Police contacted. To be tried at (location) on (date). Victim examined by doctor, back in school.</td>
<td></td>
</tr>
</tbody>
</table>

VI. COORDINATION AND COOPERATION

All members of this network have vowed to work toward the strengthening of child protection principles including coordination mechanisms through activities that will strengthen collaboration and cooperation. These activities will increase access to different perspectives, strengthen knowledge and access to new information, improve referral contacts, and increase access to different types of prevention support.

Scheduled network coordination meetings, review, and up-dates to be held on a [weekly/monthly??] basis on/at [date and location].

Sample Agenda

1. Welcome, Opening Remarks and Introduction
2. Review of the Action Points from the previous meeting
3. Update on two recent rape case
4. Update on CP Work and Action Plan
5. Update from [agencies]
6. Partner updates
7. AOB [any other business]
8. Closing and Adjournment

[Fill in the table below as agreed by network members]

Table 16: Coordination Activities and Responsibilities

<table>
<thead>
<tr>
<th>Coordination Activities</th>
<th>What it means</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information systems for coordination</td>
<td>Collecting and sharing reports, information, including: The ‘3 Ws’ – Who is doing What and Where Training schedules and materials on child protection shared Boards with child protection case information (above)</td>
<td>• Coordination documents: SOPS, Strategy/Action Plans, MoUs (below), Meeting minutes, etc. • Review case statistics in community meetings to recognize patterns and design prevention activities</td>
</tr>
</tbody>
</table>
Based on analysis of patterns of cases and reasons, appeal for prevention and response support from gov or NGOs.

- Ex: prepare proposal for a well and water pump to save time so children can focus more on school and not fetching water.
- EX: prepare a proposal for a travel fund for emergency and first responders in child protection cases

Informing community on child protection patterns and issues and promoting behaviors that improve health and well being.

- Raise awareness about risks to children’s protection and wellbeing
- Mobilize communities to respond to and prevent those risks
- Monitor child protection risks on an ongoing basis
- Help to develop local solutions to problems

Discuss patterns of problem issues as well as what behaviors lead to avoidance of problems.

- Ex: prevent early marriage through income generation for families unable to pay school fees; solicit funding for school costs from gov.

**Team Strengthening activities**

Capacity building trainings on……

## VII. TEAM FORMATION & ACTION PLAN

Based on our own risk analyses, the following community Teams have promised to assist in our child protection strengthening functions:

<table>
<thead>
<tr>
<th>Type of Team</th>
<th>Roles and Responsibilities</th>
<th>Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quick Response Team</td>
<td>Community disaster preparedness; intervene in emergency cases</td>
<td>Mr. Xxxx, Police X, Social worker X</td>
</tr>
<tr>
<td>Gender-based and Sexual Violence Support Team</td>
<td>Intervene on all rape or sexual abuse cases; Active in GBV prevention;</td>
<td>Mrs. Xxxx, Peace Hut…, Social Worker X…</td>
</tr>
<tr>
<td>Awareness raising team</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[Once teams are formed, later steps will include:

- Designing a clear plan of action about how to implement the protocol and how it will help to keep children safe.
- Informing all partners, stakeholders, and community members about the procedures, ensure they receive training about it and understand how it applies to them.

An Action Plan for Teams and Coordination may look like this:

<table>
<thead>
<tr>
<th>Areas of Action</th>
<th>Who is Responsible</th>
<th>What we will do</th>
<th>When it will be done</th>
<th>How will we verify or monitor</th>
<th>How we know if it is successful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quick response team</td>
<td>Mr. Xxx, Mr Xxx Police</td>
<td>Design protocol for emergency response in collaboration with police, etc…</td>
<td>By [date] Plan monthly meeting on date…</td>
<td>Written plan provided to head of CBCPC</td>
<td>Successfully managed emergency… prevented emergency…</td>
</tr>
<tr>
<td>Women &amp; Girls’ support team</td>
<td>Mrs. Xxxxx, Ms Xxx social worker, Ms. Xxx midwife</td>
<td>Receive gender safety training from…;</td>
<td>Training on… Monthly meeting on…</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Awareness raising team</td>
<td></td>
<td></td>
<td>Monthly meeting on …</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kids Club</td>
<td></td>
<td></td>
<td>Weekly meeting</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

22 See Wessels 2009 p. 15 for examples of positive deviance approach.
VIII. CONCLUSION

All members of the [region] child protection network, who agree to abide by these guidelines, have created this SOP through collaborative agreement on this date. Changes to contacts or processes must be presented during coordination meetings to ensure the SOP remains relevant.

Date:  
Location:  
Signed:

SOP: KEY POINTS & CHECKLIST

<table>
<thead>
<tr>
<th>Your SOP should be:</th>
<th>Yes</th>
<th>No</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written in a clear and easily understandable way;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Publicized, promoted and distributed to all relevant actors;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Approved and endorsed by the relevant agencies;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be mandatory for staff and volunteers;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be reviewed and up-dated as needed.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>The SOP includes procedures that give:</th>
<th>Yes</th>
<th>No</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>The names of all binding partners</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Step by step guidance on what to do if children need protecting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identified roles and responsibilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identified lines of communication</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact details for local children and family services and police, including out of hours contacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The roles and responsibilities of the designated Liaison Person, including:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• ensuring that the standard reporting procedure is followed,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• that they are knowledgeable about child protection and undertake any training considered necessary?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Do your reporting procedures</th>
<th>Yes</th>
<th>No</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include guidance for recognizing child protection and welfare concerns?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outline steps to be followed in relation to reporting child protection concerns?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Do your reporting procedures (continued)</th>
<th>Yes</th>
<th>No</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clarify thresholds for deciding when a case can be managed through community mechanisms and when outside referral is needed?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide contact information to professional staff to assist in decision-making when you are unsure if a formal report needs to be made?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State that relevant teams investigate all reports/disclosures?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outline what actions need to be taken by community members in response to various concerns?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CONCLUSIONS AND FOLLOW-UP

Let’s look again at Table 1 at the start of our system strengthening process together:

<table>
<thead>
<tr>
<th></th>
<th>Heart a report</th>
<th>Make a decision</th>
<th>Seek support</th>
<th>Follow up</th>
<th>Record and Analyze</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Who in your network will inform you? If most people in your community do not have mobile phones, how will you hear about a case? How will a reporter or a victim contact those who may be able to help them?</td>
<td>Based on a report, you must immediately decide if this is life threatening. How quickly must you act? What must you do? What steps can speed up the response process?</td>
<td>Who must you contact for support? If the case is life threatening, whom do you contact? If the case is not life threatening, how serious is it? Who must you contact to decide how to respond? When do you need to call a council meeting? How do you do that? Who must you contact to respond to various issues? How quickly can they come?</td>
<td>Why will every case need some kind of follow-up monitoring? In Jojo’s case, if his father promised to repent, how will you monitor him to be sure? How else may you intervene to ensure the problem has been resolved?</td>
<td>Why must every case reported verbally need to be filed as a written report? Who will receive these reports? When will you need to write a report? What benefits will come from regular reporting and analyzing the patterns of cases in your community?</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Have we covered and helped you to strengthen each of these steps in your child protection work?
- Are all covered in your SOP?

The focus of this manual has been on three aspects of child protection:

1. **Strengthening core child protection skills and capacities.**

Through your SOP you have identified your core skills and capacities, and systematized them. You set your own rules and obligations, selected who among your community has leadership potential and designated them along with support teams to achieve specific tasks in the name of your own children’s future safety and development. These core capacities can be easily expanded and improved as mechanisms and processes are strengthened throughout the developing child protection system.

2. **Focusing on the basics and keeping it simple.**

Child protection procedures can be highly complex and detailed, overly ‘western’ in perspective, and requiring more development support than is readily available in many partner contexts. Thus, the manual focuses on priorities identified by communities themselves so that efforts can be maintained with limited resources. As capacities grow, so too can future SOP processes!

3. **Ensure timeliness of the actions.**

When many people and organizations are working together to strengthen their surveillance, prevention, response and coordination support to the community, this often results in lengthy negotiation processes to agree on forms, protocols and SOPs for how all the parties will work together. Limiting the time it takes to come to these agreements is essential to ensure that children are supported as soon as possible following the report or awareness of any concerns. Basic agreements should be fast-tracked to facilitate an urgent response; they can later be revised and expanded upon.

Your SOP is now ready to put into action for the benefit of your own children and the future of your own community. **Remember**, this process is never finished. It will require constant revision and up-dating, refining and strengthening.
# ANNEX 1: LEGAL FRAMEWORKS CHECKLIST

<table>
<thead>
<tr>
<th>INTERNATIONAL TREATIES RATIFIED¹</th>
<th>RATIFIED</th>
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</thead>
<tbody>
<tr>
<td>Convention on the Rights of the Children</td>
<td></td>
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<tr>
<td>Optional Protocol on the Involvement of Children in Armed Conflict</td>
<td></td>
</tr>
<tr>
<td>Reservations to CRC and Protocols</td>
<td></td>
</tr>
<tr>
<td>Convention on the Elimination of Discrimination Against Women (CEDAW)</td>
<td>Specify</td>
</tr>
<tr>
<td>Optional Protocol to CEDAW</td>
<td></td>
</tr>
<tr>
<td>Reservations to CEDAW</td>
<td>Specify</td>
</tr>
<tr>
<td>International Covenant on Civil and Political Rights (ICCPR)</td>
<td></td>
</tr>
<tr>
<td>Optional Protocol to the CCPR</td>
<td></td>
</tr>
<tr>
<td>Second Optional Protocol to the CCPR, aiming at abolition of death penalty</td>
<td></td>
</tr>
<tr>
<td>International Convention on the Elimination of all Forms of Racial Discrimination</td>
<td></td>
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<tr>
<td>International Covenant on Economic, Social and Cultural Rights (ICESR)</td>
<td></td>
</tr>
<tr>
<td>Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)</td>
<td></td>
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<tr>
<td>Optional Protocol to the Torture Convention</td>
<td></td>
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<tr>
<td>Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families</td>
<td></td>
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<tr>
<td>Convention on the Rights of Persons with Disabilities (ICRPD)</td>
<td></td>
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<tr>
<td>Optional Protocol to the Convention on the Rights of Persons with Disabilities</td>
<td></td>
</tr>
<tr>
<td>International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families</td>
<td></td>
</tr>
<tr>
<td>Transnational Convention Against Organized Crime</td>
<td></td>
</tr>
<tr>
<td>Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children</td>
<td></td>
</tr>
<tr>
<td>Protocol Against the Smuggling of Migrants by Land, Sea and Air</td>
<td></td>
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<tr>
<td>Slavery Convention</td>
<td></td>
</tr>
<tr>
<td>Protocol amending the Slavery Convention</td>
<td></td>
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<tr>
<td>Convention for the Suppression of the Traffic in Persons and the Exploitation of the Prostitution of Others</td>
<td></td>
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<tr>
<td>Convention on Consent to Marriage, Minimum Age for Marriage and Registration of Marriages</td>
<td></td>
</tr>
<tr>
<td>International Convention for the Protection of All Persons from Enforced Disappearance</td>
<td></td>
</tr>
<tr>
<td>Convention Against Discrimination in Education</td>
<td></td>
</tr>
<tr>
<td>Hague Convention on Intercountry Adoption</td>
<td></td>
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<tr>
<td>Convention relating to the Status of Refugees</td>
<td></td>
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<tr>
<td>Protocol relating to the Status of Refugees</td>
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<tr>
<td>Convention on the Reduction of Statelessness</td>
<td></td>
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<tr>
<td>Convention relating to the Status of Stateless Persons</td>
<td></td>
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<tr>
<td>Convention on the Prevention and Punishment of the Crime of Genocide</td>
<td></td>
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<tr>
<td>Convention on the Non-Applicability of Statutory Limitations to War Crimes and Crimes against Humanity</td>
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</tr>
<tr>
<td>Geneva Convention relative to the Treatment of Prisoners of War</td>
<td></td>
</tr>
<tr>
<td>Geneva Convention relative to the Protection of Civilian Persons in Time of War</td>
<td></td>
</tr>
<tr>
<td>Protocol Additional to the Geneva Conventions, relating to the Protection of Victims of International Armed Conflicts (Protocol I)</td>
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<tr>
<td>Protocol Additional to the Geneva Conventions, relating to the Protection of Victims of Non-International Armed Conflicts (Protocol II)</td>
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### ILO Conventions

<table>
<thead>
<tr>
<th>Convention</th>
<th>Ratified</th>
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<tbody>
<tr>
<td>Worst Forms of Child Labour Convention (C182)</td>
<td></td>
</tr>
<tr>
<td>Forced Labour Convention (C29)</td>
<td></td>
</tr>
<tr>
<td>Migration for Employment Convention (C97)</td>
<td></td>
</tr>
<tr>
<td>Migrant Workers (Supplementary Provisions) Convention (C143)</td>
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</tr>
<tr>
<td>Abolition of Forced Labour Convention (C105)</td>
<td></td>
</tr>
<tr>
<td>Minimum Age Convention (C138)</td>
<td></td>
</tr>
<tr>
<td>Protection of Wages Convention (C95)</td>
<td></td>
</tr>
<tr>
<td>Indigenous and Tribal Peoples Convention (C169)</td>
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### International Standards: Administration of Justice Standards, Rules and Guidelines

<table>
<thead>
<tr>
<th>Standard</th>
<th>Ratified</th>
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</thead>
<tbody>
<tr>
<td>UN Standard Minimum Rules for the Administration of Juvenile Justice (Beijing Rules)</td>
<td></td>
</tr>
<tr>
<td>UN Guidelines for the Prevention of Juvenile Delinquency (Riyadh Guidelines)</td>
<td></td>
</tr>
<tr>
<td>UN Rules for the Protection of Juveniles Deprived of their Liberty</td>
<td></td>
</tr>
<tr>
<td>UN Standard Minimum Rules for Non-Custodial Measures (Tokyo Rules)</td>
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</tr>
<tr>
<td>UN Economic and Social Council resolution 2002-12: Basic Principles on the use of Restorative Justice Programmes in Criminal Matters</td>
<td></td>
</tr>
<tr>
<td>UN Committee on the Rights of the Child, General Comment No. 10 on Child Rights in Juvenile Justice</td>
<td></td>
</tr>
<tr>
<td>UN Guidelines for Action on Children in the Criminal Justice System</td>
<td></td>
</tr>
<tr>
<td>UN Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime</td>
<td></td>
</tr>
<tr>
<td>UN Common Approach to Justice for Children</td>
<td></td>
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<tr>
<td>Code of Conduct for Law Enforcement Officials</td>
<td></td>
</tr>
<tr>
<td>Basic Principles on the Role of Lawyers</td>
<td></td>
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<tr>
<td>Guidelines on the Role of Prosecutors</td>
<td></td>
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<tr>
<td>Basic Principles and Guidelines on the Right to a Remedy and Reparation</td>
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### ILO Recommendations

<table>
<thead>
<tr>
<th>Recommendation</th>
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<tbody>
<tr>
<td>ILO Worst Forms of Child Labor Convention Recommendation (R190)</td>
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<tr>
<td>ILO Forced Labor Recommendation – Indirect Compulsion (R35)</td>
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<tr>
<td>ILO Forced Labor Recommendation – Regulation (R36)</td>
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<tr>
<td>ILO Migration for Employment Recommendation (R86)</td>
<td></td>
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<tr>
<td>ILO Protection of Migrant Workers Recommendation (R100)</td>
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<tr>
<td>ILO Migrant Workers Recommendation (R151)</td>
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<tr>
<td>ILO Protection of Wages Recommendation (R85)</td>
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</tr>
<tr>
<td>ILO Special Youth Schemes Recommendation (R136)</td>
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<tr>
<td>ILO Minimum Age Recommendation (R146)</td>
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### Regional Treaties and Memoranda of Understanding

<table>
<thead>
<tr>
<th>Treaty</th>
<th>Signatory</th>
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<tbody>
<tr>
<td>ASEAN Mutual Legal Assistance Treaty – ASEAN countries</td>
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</tr>
<tr>
<td>Treaty of Amity and Cooperation in Southeast Asia – ASEAN countries</td>
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</tr>
<tr>
<td>Coordinated Mekong Ministerial Initiative against Trafficking (COMMIT) Memorandum of Understanding – GMS countries</td>
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</table>
### Bilateral Treaties and Memoranda of Understanding

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<tr>
<th>Treaty</th>
<th>Signatory 1</th>
<th>Signatory 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOU on Cooperation to Combat Trafficking in Persons</td>
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<td>_________________________</td>
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<tr>
<td>MOU on Cooperation in the Employment of Workers</td>
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<td>_________________________</td>
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<tr>
<td>Bilateral Treaty on Extradition and Mutual Legal Assistance</td>
<td>_________________________</td>
<td>_________________________</td>
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<tr>
<td>Mutual Legal Assistance Treaty</td>
<td>_________________________</td>
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### National Minimum Age

<table>
<thead>
<tr>
<th>Age Category</th>
<th>Girls</th>
<th>Boys</th>
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<tbody>
<tr>
<td>Age of majority</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If inconsistent across different national legislation, specify</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum age of criminal responsibility</td>
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<td></td>
</tr>
<tr>
<td>If there are 2 different minimum ages to be considered as part of a “discernment test,” specify</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum age for juvenile justice protections</td>
<td></td>
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<tr>
<td>Minimum age for marriage</td>
<td></td>
<td></td>
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<tr>
<td>Minimum age of consent to sexual relations</td>
<td></td>
<td></td>
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<tr>
<td>Minimum age of legal employment Light work Hazardous work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum age of voluntary recruitment for military service</td>
<td></td>
<td></td>
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<tr>
<td>Minimum age of compulsory recruitment into armed groups/military</td>
<td></td>
<td></td>
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<tr>
<td>Minimum age for direct participation in hostilities</td>
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</table>

### National General

<table>
<thead>
<tr>
<th>National General</th>
<th>Yes/No</th>
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</thead>
<tbody>
<tr>
<td>Country’s legal tradition</td>
<td></td>
</tr>
<tr>
<td>Interface between formal and informal legal system – process for resolution of conflicts between customary law and national legislation?</td>
<td></td>
</tr>
<tr>
<td>Written Constitution?</td>
<td></td>
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<tr>
<td>Supremacy clause?</td>
<td></td>
</tr>
<tr>
<td>Specific provisions on child protection?</td>
<td></td>
</tr>
<tr>
<td>Process for constitutional amendments related to CRC?</td>
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</table>
ANNEX 2: DECLARATION OF THE RIGHTS OF THE CHILD IN PLAIN LANGUAGE

From: http://www.un.org/cyberschoolbus/

| 1  | All children have the right to what follows, no matter what their race, color sex, language, religion, political or other opinion, or where they were born or who they were born to. |
| 2  | You have the special right to grow up and to develop physically and spiritually in a healthy and normal way, free and with dignity. |
| 3  | You have a right to a name and to be a member of a country. |
| 4  | You have a right to special care and protection and to good food, housing and medical services. |
| 5  | You have the right to special care if handicapped in any way. |
| 6  | You have the right to love and understanding, preferably from parents and family, but from the government where these cannot help. |
| 7  | You have the right to go to school for free, to play, and to have an equal chance to develop yourself and to learn to be responsible and useful. Your parents have special responsibilities for your education and guidance. |
| 8  | You have the right always to be among the first to get help. |
| 9  | You have the right to be protected against cruel acts or exploitation, e.g. you shall not be obliged to do work which hinders your development both physically and mentally. You should not work before a minimum age and never when that would hinder your health, and your moral and physical development. |
| 10 | You should be taught peace, understanding, tolerance and friendship among all people. |

ANNEX 3: SAMPLE MAPPING GUIDE

Question Guide for child protection Systems Mapping

Intro For COMMUNITY MEMBERS – not leaders

This is an opportunity for you (the community participants) to educate us (outside agencies) on the risks and child protection mechanisms that exist within your communities.

We [researchers] are the students today and you [community] are the teachers.

| 1  | What does child protection mean? Why do children need to be protected? Do boys and girls face the same risks? Which one needs more care? |
| 2  | There are different ways to protect children: Respond to problems or prevent problems. Does this community/village have a way of responding to children at risk? Explain |
| 3  | Does this community/village have a way of preventing problems from arising for children? Explain |
| 4  | Is there a Child Protection Committee or Child Welfare Committee here? What are its tasks? What are its strengths and weaknesses? Do you know who they are? Would you go to them to report a child abuse incident? Why or why not? |
| 5  | How do people here know when a child is likely to be abused or is beginning to experience violence and abuse? |
|   | a What are the responses in these situations? |
|   | b Is there a group of people who are called together to discuss or make decisions? Who? (Extended family? Village leaders? CBPC?) |
|   | c How do they function as a group? Are they able to solve problems? |
| 6  | How do you decide if a problem should be managed in the community or by contacting the formal systems? Who do you contact in the formal system? Police? Social worker? Nurse? Doctor? |
|   | a How do you contact them? |
|   | b Are they easy to reach? Are they helpful? Affordable? |
Discussion

Distribute or explain scenarios (PLEASE advise which would be best? The goal is to understand LOCAL referral pathways)

a. Hanna is 12 years old. She comes home late from school crying and sobbing. When you finally get her to talk, she tells you that she was raped. What will you do?

b. Your neighbor’s child is roughly 9 years old but has never been to school. He is often filthy. You overheard the neighbor screaming at him for not bringing home enough money. What do you do?

c. You notice your cousin’s baby does not seem to be taken care of properly. What is improper baby care? What do you do?

d. A neighbor’s 15 year old boy, Moses, is too wild. You see him hanging out with bad people, sniffing glue and behaving and speaking rudely to young girls. You are afraid for what may happen to your own children – your 10 year old boy admires him, and Moses seems to have eyes for your pretty daughter. What will you do?

e. You do not have enough money to pay your daughter’s school fees for the 6th grade. An auntie you have never met comes to the village offering to take her to Monrovia and pay her fees. What will you do?

f. You notice that a young woman, who was married to an older man in your neighborhood, has a new baby. The woman seems alone, isolated, and depressed. She seems afraid to talk to anyone. You suspect she’s being abused and this is having a bad effect on how she takes care of her baby. What can you do?

i. identify and notice concerns about a child or family,

ii. make decisions to take action,

iii. report cases to whom??? Define the pathway for seeking help (draw on flipchart or on a wall/in sand!!!).

iv. intervene, where appropriate, with community-based support how???

v. How can you pass from local support such as an elder or chief, into a more formal kind of support? (Maybe ask to inform which are informal/local responders and which are formal? Where does the formal start? How do you access it and how do they feel about accessing it? Is it comfortable, safe or shameful or….?)

1. Neighbors

2. Village chief

3. Traditional healer

4. Religious leader

5. Police

6. Social worker

7. Health worker

8. Child Welfare Committee member

9. Clinic

10. Hospital

11. Telephone for help? Is there one? Cell phone access?

Can cell phones work in this area?

Question Guide for child protection Systems Mapping

COMMUNITY LEADERS – CBCPC members or others

This is an opportunity for you (the community participants) to educate us (outside agencies) on the risks and child protection mechanisms that exist within their communities.

We [researchers] are the students today and you [community] are the teachers.

A. Community Based Child Protection mechanisms

What support or structures exist that help you with child protection concerns in this area? (Probe for information on Child Protection training, preparation, materials provided, guidance, referral forms – make sure you identify WHO provides the training, materials or guidance!!!)
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Is there a Child Protection Committee or Child Welfare Committee here? What are its tasks? What are its strengths and weaknesses?</td>
</tr>
<tr>
<td>2</td>
<td>IF no CBCPC, how do you help in the protection of children here?</td>
</tr>
<tr>
<td>3</td>
<td>How are children protected in your community? (via traditional mechanisms, religious mechanisms, informal &gt; formal)</td>
</tr>
<tr>
<td>4</td>
<td>When a child needs help, who asks for it? Can the child ask him or herself, family member referral, community member referral? What ‘pathway’ can be used (i.e., who speaks with whom and for what purpose?) Who do you go to for help with child related problems? Who makes the decision to seek outside help?</td>
</tr>
<tr>
<td>5</td>
<td>Can you give examples of a child who received help using each of these methods (traditional, religious, informal, formal) and how it was done?</td>
</tr>
<tr>
<td>6</td>
<td>What are positive experiences in seeking help? (How was it positive?)</td>
</tr>
<tr>
<td>7</td>
<td>What are negative experiences? (How was it negative?)</td>
</tr>
<tr>
<td>8</td>
<td>Give an example of a child who was not helped. What were the effects – on the child, parents/guardians, community?</td>
</tr>
</tbody>
</table>

### B. Mapping Cooperation, coordination and collaboration mechanisms

1. What *formal* child protection mechanisms exist in this district?
   a. How do they function?
   b. Which CBOs/NGOs/agencies work with community based protection mechanisms? How often do you contact them? For what reasons?
   c. How do they work with them?
   d. Who are all involved in protecting children in need? Probe all actors (CBCPC, NGO, Priests, Imams, Community leaders, Police, Courts, Social Service Agencies, medical workers, Teachers, any other institutions) > **Draw out a pathway on flip chart**
   e. Where does this system work well? Explain.
   f. Where does it fail? Explain

### C. Reporting and referral pathways

1. How do people here know when a child is likely to be abused or is beginning to experience violence and abuse?
   a. What are the responses in these situations?
   b. Is there a group of people who are called together to discuss or make decisions?
   c. How do they function?
2. How are abuses and acts of violence against children reported?
3. What else is done to help children who are abused/ experience acts of violence?

**Probe for children:**

- formerly associated with armed groups
- in conflict with the law
- abused or neglected at home
- abused by authority (e.g. school teacher)
- affected by sexual violence
- abandoned by parents/guardians
- orphaned by diseased parent (ebola? Or HIV?)
- living on the streets
- beaten
- teen pregnancy
- early marriage
- rape
- trafficking
- child labor
- no schooling
- add more? Possibly ranking what are the problems children face and where are their needs greatest?
4. What kinds of services are available via referral? (Probe: is help considered useful or important? How is it/can it be used to strengthen child protection structures?)
   - Community/village level
   - Social workers
   - Clinic
   - Police
   - Sub-county
   - District
   - Are they useful?
   - What are the gaps/where or why are they useful or not useful?
   - How to you contact them? Are there telephones or cell phone access in this area? How common is cell phone use?

D. Interventions and Stakeholder Participation

5. What community-based child abuse prevention activities do NGOs or gov agencies implement in this district?
   a. How do they function?
   b. Are they for leaders alone or the whole community?
   c. What do you/communities like about them?
   d. What don’t you/communities like about them?

6. What Coordination, training and sensitization activities enabled the communities to understand the need to and willingness to form community child protection structures?
   a. What worked?
   b. What didn’t work as well?
   c. How would you change what was done before?
   d. Are the materials still available?

7. What is the level of stakeholder/community participation in implementation of the various interventions?
   a. Children themselves
   b. Young people
   c. Communities
   d. Local leaders
   e. Government officials
   f. Civil society actors

E. Referral Strengthening Direction

8. What are the child protection coordination mechanisms in this district? How do they function? (How do you coordinate with other agencies or people that are contacted in cases of child abuse or danger?).
   a. Traditional methods? (describe.
   b. Religious methods? (describe.
   c. Informal (who what where?
   d. Formal (who what where and how do you contact them?.

9. What have been some of the benefits resulting from the child protection work in this area? To:
   a. Individual children - male and female (possible Case Studies.
   b. Communities
   c. Sub-county
   d. District

10. What would you like to see implemented into the current interventions to strengthen their/your ability to function? Are they effective in meeting local needs as they are, or do you have ideas for changes? What are they? How can we strengthen the pathway from a child at risk to a safe environment for children to grow?

11. What else would you like to add to your responses? Would you like to ask us any questions?
ANNEX 4: REFERRAL REPORT TEMPLATE

MINISTRY OF HEALTH AND SOCIAL WELFARE CHILD REFERRAL FORM

Did Child/Caregiver agree for referral?  YES: ☐  NO: ☐

Child’s Code: ____________________________  ____________________________  ____________________________

Child’s Name:  ____________________________  ____________________________  ____________________________

(Last Name) (Middle Name) (First Name)

Age: ____________________________  Sex: M: ☐  F: ☐  Date of referral: ____________________________

Child’s Physical Description: __________________________________________________________________________________________

________________________________________________________________________________________________________________

Reason for referral: _________________________________________________________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

Referral source: ___________________________________________________________________________________________________

Address of Referral: __________________________________________________ Location of Referral: ____________________________

Contact #: __________________________________________________ Type of Referral: ______________________________

Follow up Plan: ___________________________________________________________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

________________________________________________________________________________________________________________

Full Name of Social Worker:  __________________________________________ Position: _________________________________

Caregiver’s Name: __________________________________________________

________________________________________________________________________________________________________________

Caregiver Thumb Print/signature  Social worker’s signature
Child Abuse Report Form

If you have knowledge that a child’s safety might be in danger, please complete this form to the best of your knowledge. Please note that child protection concerns must be reported directly to the designated child protection officer immediately (preferably within a day). This report is to be used as a tool to develop the most un-biased information-based report possible. For confidentiality reasons, the report should be written and signed solely by you.

CLASSIFICATION: [type of concern] __________________________________________________

FILE NUMBER: [for confidentiality in recording] _________________________________________

1. About You
   Your name: _________________________________________________
   Your job title: ________________________________________________
   Workplace: __________________________________________________
   Your relationship to the child: ________________________________
   Contact details: _______________________________________________

2. About the Child
   Child’s name: ________________________________________________
   Child’s gender: _______________________________________________
   Child’s age: __________________________________________________
   Child’s address: ______________________________________________
   Child’s guardians: _____________________________________________

3. About your Concern
   Was the abuse observed or suspected? ______________________________________________________________________________
   __________________________________________________________________________________________________________
   Is this concern based on first hand information or information divulged to you by someone else? (If so who?) _______________________
   Did the child disclose abuse to you? YES: ☐ NO: ☐
   Date of the alleged incident: _______________________________________
   Time of the alleged incident: _______________________________________
   Location of the alleged incident: ________________________________
   Name of alleged perpetrator: _______________________________________
   Job title: ______________________________________________________
   Nature of the allegation: _______________________________________

   Your personal observations (visible injuries, child’s emotional state, etc.) [N.B. Make a clear distinction between what is fact and what is opinion or hearsay] ______________________________________________________________________________________________________
   ______________________________________________________________________________________________________
   To the best of your ability, note the Vulnerability Criteria: _______________________________________________________________________
   __________________________________________________________________________________________
How serious is the risk to the child?  

Is this a chronic or acute condition?  

Exactly what the child or other source said to you [if relevant] and how you responded to him or her [Do not lead the child. Record actual details]  

Any other information not previously covered:  

Were there any other children/people involved in the alleged incident?  

Action Taken:  

Signed  

Date
ANNEX 5: SAMPLE MEMORANDUM OF UNDERSTANDING

MEMORANDUM OF UNDERSTANDING BETWEEN

[Name of Organization]  
AND  
[Name of Community group or Organization]  
for  
[Name of Project]

This Memorandum of Understanding (MOU) indicates a voluntary agreement to assist in the implementation of the plans described in the "Name of Project", a collaboration between CBO Xxxxxx and the CBCPC acting on behalf of the residents of Xxxx, in Xxxxx County.

Overall Project Goals, Services and Outcomes: [very brief program overview]

Agency Provisions: In addition to continuing the on-going program planning and review process of "Name of Project" the non-profit organization will provide the following services in specific support of this project:

a.  
b.  
c.  
d.

Community Provisions: In addition to participating in the on-going planning and review process of the above mentioned project, the community of ____ will provide the following services in specific support of this project:

a.  
b.  
c.  
d.

Termination: This MOU may be terminated by either party, for any reason, by giving 30 days written notice.

______________________________________________________      ______________________________________________________
CBO Agency Signature   CBCPC Signature

______________________________________________________      ______________________________________________________
Title    Title

______________________________________________________      ______________________________________________________
Date    Date
ANNEX 6: GENERIC SAMPLE ASSESSMENT FORM

ASSESSMENT REPORT ON THE SITUATION OF THE CHILD

Name of the child: __________________________________________________
Reference worker: ___________________________________________________
File registration number and date: _______________________________________
Reason for referral /assessment:
________________________________________________________________________
________________________________________________________________________
Assessment period: from ___________ to __________
List of people having taken part in the assessment and their function/role:
________________________________________________________________________
________________________________________________________________________

SITUATION OF THE CHILD

Child’s development: observation of psychological, emotional, intellectual and social attitude also comprising difficulties (speech, communication, inattention, aggression, lack of understanding and concentration, etc.)
________________________________________________________________________
Child’s health and physical development: size, weight, deficiencies, handicap through accident or from birth, illnesses
________________________________________________________________________
Integration into family and interactions with siblings, parents: observation of relationships (particular behavior with one or the other person, fear, shyness...)
________________________________________________________________________
Integration into society: educational activities, recreational activities, observation from neighbors, etc.
________________________________________________________________________
Views / Wishes of Child regarding the situation:
________________________________________________________________________

CARE GIVERS/ CHILD SITUATION

Relationship between adults in the household and their behavior with the child/ Parenting Capacity: taking into account the ability of the parents / care givers to protect the child and to meet their needs, and the way in which the family functions)
________________________________________________________________________
Living Conditions & Economic / Employment Situation: (This should include housing, number of bedrooms, sanitation, electricity, water, size, furniture, food, sources of income, family income /resources)
________________________________________________________________________

4 Source: Global Child Protection Working Group 2014:96-7
Support from Extended Family / Community

______________________________________________________________________________

Views / Opinions of Parents / Caregivers

______________________________________________________________________________

OTHERS PROFESSIONALS OPINIONS

Opinions of other professionals (This should be used to record information collected from all the professionals who have been in contact with the child or other family member who is not registered elsewhere. Could be information on reports of domestic violence to the police, reports of drunkenness on the street, etc.).

CONCLUSIONS OF CHILD PROTECTION WORKER

Opinions and observations of the CPW (includes the observations on the child, attitudes and support for parents / guardians during the evaluation)

Identification of vulnerability criteria/main risks and protection factors

Main risk factors (at the level of the child, the family and the wider community)

Risk level from 1 to 3:

1. ________________________________ ☐ Low ☐ Medium ☐ High
2. ________________________________ ☐ Low ☐ Medium ☐ High
3. ________________________________ ☐ Low ☐ Medium ☐ High

Protection factors (at the level of the child, the family and the wider community)

1. ________________________________
2. ________________________________
3. ________________________________

Immediate action needed? ☐ Yes ☐ No

If yes, what kind of action __________________________________________________________________________________________

________________________________________________________________________________________________________________

Short, Middle or long-term action needed? ☐ Yes ☐ No

If yes develop an action plan: _________________________________________________________________________________________

________________________________________________________________________________________________________________

CHILD PROTECTION WORKER

_________________________________________  _________________________________________  _______________________________________
Name     Profession     Signature
**ANNEX 7: RISK ASSESSMENT GUIDE**

<table>
<thead>
<tr>
<th>TYPE OF HARM</th>
<th>LEVEL 1</th>
<th>LEVEL 2</th>
<th>LEVEL 3</th>
<th>LEVEL 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Violence</strong> (physical abuse)</td>
<td>CHILD SIGNIFICANTLY HARMED; URGENT RESPONSE AND FREQUENT FOLLOW UP REQUIRED (RECOMMENDED response within 24 hours and bi-weekly follow up)</td>
<td>CHILD HARMED; RESPONSE AND FOLLOW UP REQUIRED (Recommended response within 3 days and weekly follow up)</td>
<td>CHILD AT RISK OF HARM; MONITORING REQUIRED (Recommended response within 7 days and fortnightly to monthly follow up)</td>
<td>CHILD NO LONGER AT RISK; NO FURTHER ACTION REQUIRED; CASE CLOSURE (Consider external monitoring with new referral to cpu if needed)</td>
</tr>
<tr>
<td><strong>Abuse</strong> (sexual and emotional abuse)</td>
<td>Serious injury to infant or toddler in DV Child attempted suicide incident</td>
<td>Excessive corporal punishment Threats to injure Dangerous and reckless behavior Child is self harming</td>
<td>Threats to injure Non injurious, occasional corporal punishment</td>
<td>No violence present (factors causing the harm have been addressed or removed) Person causing harm no longer has contact with the child</td>
</tr>
<tr>
<td><strong>Neglect</strong></td>
<td>Any sexual contact between a child and an adult (where person causing harm has access to the child) Child is being persistently belittled, isolated, or humiliated by a significant carer</td>
<td>Child is promised to be married The child has been sexually violated in the past and not received any support Significant carers approach to the child is harmful (occasional belittling, isolation or humiliation)</td>
<td>Child is treated differently than other siblings and parent is negative towards the child</td>
<td>The child and family have received support and there are no sexual harm factors present Factors causing the emotional harm have been addressed (parent received support) Person causing harm no longer has contact with the child</td>
</tr>
<tr>
<td><strong>Exploitation</strong></td>
<td>Serious injury or illness due to neglect (malnutrition with no apparent causal factors)</td>
<td>Lack of supervision Inadequate basic care Failure to protect Child left to look after itself, undertaking tasks beyond development capacity</td>
<td>Care-givers are emotionally distant</td>
<td>Child’s basic needs are being met</td>
</tr>
<tr>
<td><strong>Psycho-social distress</strong> (Parent not coping, or not protective and/or no services involved)</td>
<td>Child involved in dangerous work, long hours</td>
<td>Underage child working long hours Parents threaten child with work</td>
<td>Child no longer working</td>
<td>The child’s psycho-social well-being is restored; the child is engaged in a range of activities and is not displaying behaviors of concern</td>
</tr>
</tbody>
</table>

---

5 Adapted from Global Child Protection Working Group. Jan 2014:98-100
| **Unaccompanied and Separated Children (UASC)** | **Unaccompanied child under 5**  
Separated child under 5 with unknown family  
UASC with level 2 harm factors | **Unaccompanied child under 12**  
Separated child under 12 with unknown family  
Child headed household  
UASC (female) with unknown family | **UASC who have had BIA and BID completed, who have carers, and their needs are being met** | **The child is being adequately cared for and the situation has been monitored for several weeks with no issues arising** |
|---|---|---|---|---|
| **Child previously associated with armed forces and armed groups** | **Child at risk of being recruited into armed forces and armed groups again**  
Pregnant teenage girls  
Child parent | **Unaccompanied child with difficulties reintegrating the community**  
Previously associated with armed groups and armed forced and no support of services provided | **Previously associated with armed groups and armed forced but accessing support and in a safe family environment** | **The child is being adequately cared for and no harm or vulnerability factors are present** |
| **Adolescent pregnancy/child parent** | **Unaccompanied adolescent pregnancy/child parent**  
Adolescent pregnancy/child parent with level 2 harm factors | **Adolescent pregnancy/child parent with psychosocial distress and difficulties with community and family reactions or low levels of support** | **Adolescent pregnancy/child parent with family support** | **Adolescent pregnancy/child parent with significant family support and networks** |
| **Child disabled or chronically ill** | **Child under 5 with level 2 harm factors** | **Child and family are not accessing the support that they need** | **Child disabled or chronically ill with challenging behaviors** | **Child disabled or chronically ill but has significant family support and the child and family are accessing all the supports that they need** |
| **Domestic violence present in the home** | **Child under 5 with level 2 harm factors**  
Child under 5  
Child is witnessing domestic violence and there are level 2 harm factors  
Significant injuries to the parent suffering the violence | **Child and family are not accessing the support that they need**  
Child is displaying emotional distress and difficulties learning and socializing | **There has been sporadic disputes and violence, but the child is over 15 and has support networks** | **No violence present (factors causing the harm have been addressed or removed)  
Person causing harm no longer has contact with the child** |
### ANNEX 8: RESOURCE DIRECTORY FOR CHILD PROTECTION

<table>
<thead>
<tr>
<th>NAME OF AGENCY</th>
<th>CONTACT DETAILS</th>
<th>WORKING LOCATION</th>
<th>TARGET GROUPS</th>
<th>NATURE OF SERVICES</th>
<th>BUSINESS HOURS</th>
<th>RESOURCES REQUIRED/ COST</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Psycho-social services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NGO for Children</td>
<td>Mrs Sulaiman Director Mobile: 123456789</td>
<td>Abc District and all towns and villages within District</td>
<td>Homeless children, street children, trafficked children</td>
<td>Tracing of family and rehabilitation of children into extended family</td>
<td>Monday-Friday 8.00-16.30</td>
<td>Free services</td>
</tr>
<tr>
<td>Church</td>
<td>Pastor So-and-So</td>
<td>This L.G.A.</td>
<td>Children and families</td>
<td>Counseling, spiritual guidance. Can also refer to the shelter</td>
<td>Anytime</td>
<td>Free transport costs may be given if far from the center</td>
</tr>
</tbody>
</table>

| **Legal services** |
| Children’s Justice Center | Mr. Ola, lawyer Mobile: 1233654 | Xyzz Town | Abused children | Legal support for abused children | M-F 8-17:00 | Court fees payable |

| **Health services** |
| ABC Medical Centre | Dr Amina Bakur Paediatrician Tel. 6677889900 | Town center | Any child under 15 years | Medical checks and referrals to hospitals | Monday-Saturday 8.00-16.30 | Free checks Medical costs payable |

| **Shelters** |
| NAPTIP | Ms. Elizabeth Mgr. Tel: 27253554 | County | Trafficked children | Legal, Prosecuting, Counseling, Rehabilitation | 24 hours/7 days | Free services |

| All Saints Church |

| **Education Services** |
| NGO |

| **Income Generation** |
| CBO |

| **Security, Police** |
| Women and Children Protection Unit | Sgt Anu Tel: 060694594 | Whole district | Any child victim | Prosecute child abuse | 24/7 | Free |

| **Parenting Support** |
| CBO |
## ANNEX 9: COMMUNICATING WITH CHILDREN

<table>
<thead>
<tr>
<th>PRE-SCHOOL: 3 TO 6 YEARS</th>
<th>SCHOOL-AGE: 6 TO 12 YEARS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Help children understand changes around them in very simple words.</td>
<td>• School-age children ask more questions, can relate past experiences in detail and seek more information and justification for the way things are. Respond to these needs.</td>
</tr>
<tr>
<td>• Children often express their experiences repeatedly. Caregivers should listen patiently.</td>
<td>• Encourage school-age children to talk about their feelings and the possible reasons for their emotions.</td>
</tr>
<tr>
<td>• Ask preschoolers questions about past events; probe for details and provide new words to enhance description of experiences (e.g., “Tell me who you played with today? What did you do together?”)</td>
<td>• Use conversation to keep up with children’s activities, likes, dislikes and peer relationships. Peers are important at this stage and by talking with children regularly, adults can keep informed about children’s relationships with their friends.</td>
</tr>
<tr>
<td>• Encourage preschoolers to talk about their feelings, both positive and negative, and discuss the possible causes for the emotions.</td>
<td>• Use conversation to help children set goals and solve problems. Discuss strategies and solutions and have the child talk about possible outcomes.</td>
</tr>
<tr>
<td>• Create opportunities for preschoolers to engage in fantasy and pretend play, either alone or with friends (e.g., pretend baby bathing, pretend housekeeping, pretend astronaut play)</td>
<td>• When disciplining the child, provide a calm explanation for your preferences. By giving a reason, you help the child understand the implications of his or her behavior for others (e.g., if your child teases another child because he or she is injured, remind the child that teasing can hurt another’s feelings.)</td>
</tr>
<tr>
<td>• Provide opportunities for preschoolers to experience the connection between the spoken word and the written word (e.g., label familiar parts of the physical environment; have children tell you stories and write them down; allow children to ‘write’ their own stories or thank you notes; have children collect items from the environment which include words that they can read, such as toothpaste tubes or food boxes)</td>
<td>• Use conversation to help school-age children learn conflict management skills. Because peer relationships are becoming more important at this age, conflicts between children will likely arise. Help children learn how to manage conflicts effectively while preserving the peer relationship. Act out pretend peer interactions with children and show how conflicts can be resolved, depending on how children handle the situation.</td>
</tr>
<tr>
<td>• When preschoolers are talking to themselves, let them be. Self-talk helps preschoolers focus on what they are doing.</td>
<td></td>
</tr>
<tr>
<td>• Care-givers should not be alarmed by what children say or do: reactions are usually normal and short lived.</td>
<td></td>
</tr>
</tbody>
</table>

### Adolescent communication

Keep in mind that an adolescent might seem perfectly fine because they are capable of fully understanding the impact of theirs and other people’s actions and do not want to make things worse for their parents and younger siblings. Adolescence is a time when children typically act more negative and have more conflicts with their parents. Adolescents spend more time alone and with their friends and less time with their families. Adolescence is a difficult enough time for children with changes brought on by puberty and all the pressures and insecurities of growing up. This means parents and care-givers need to be particularly attentive to the adolescent and their needs.

### Encourage adolescent communication

- Be actively sensitive and responsive to the adolescent experience. Remember, each adolescent is going through major social and physical changes; practice putting yourself in the adolescent’s place when you find yourself disagreeing or growing impatient.
- Use conversation as an opportunity to keep up with adolescent activities and relationships. Stay interested in the adolescent and gently ask questions and seek explanations for adolescent behavior.
- Although adolescents strive for independence and separation from the family, you can best maintain the relationship by providing a balance between expecting personal responsibility from the adolescent and offering consistent support.
- Be flexible. Seek to understand the adolescent perspective first before trying to be understood yourself. Maintaining the adult-child

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7 Adapted from Gable, Sara. Communicating Effectively with Children. [http://extension.missouri.edu/explore/hesguide/humanrel/gh6123.htm](http://extension.missouri.edu/explore/hesguide/humanrel/gh6123.htm)
relationship is perhaps the most helpful thing that one can do for supporting the adolescent through these years.

- Recognize that the adolescent is developing ideas that may be different from your own. Unless these ideas place the adolescent in danger of harm to self or others, accept the adolescent’s beliefs as an example of their developing individuality.

The role of the school

- Schools are a very important stabilizer in children’s lives after a natural disaster. School activities are the source of their normalcy in daily life. It is essential the learning process remains undisturbed.
- Hold discussions in class where children share their experiences and feelings with peers and a trusted adult to help them overcome their own loss and grief.
- Convince children that their reactions are normal. Teachers should understand these reactions, so they can explain what the child is feeling and give support to reduce the distress.
- Use routine activities in the classroom in order to help children express and share their experiences as a group – to recognize the fact that they are all in this together. In groups, children can heal together through drawing, poetry, writing, dancing, singing, and theatre. Have children create their own posters, songs, dances, performances that they can show to others in the community.
- Create extra-curricular activities such as singing, sports, and art activities.
- Identify the children with difficulties or problems. Help the students and their parents get relevant support and health services. Hold meetings with parents to plan activities with children.
- Give parents information about normal behavior problems
- Provide information on appropriate methods of behavior management
- Support, guide parents to provide children with appropriate care and education, and give practical assistance in restoring basic household functions.

ANNEX 10: STANDARD OPERATING PROCEDURE TEMPLATE

STANDARD OPERATING PROCEDURE

CHILD PROTECTION REFERRAL PATHWAY

FOR [NAME OF COMMUNITY OR AREA]

1. Aims and Objectives

This document has been developed by______________ [list names and organizations of the committee] to provide guidance on the process and procedures agreed upon for a Referral Pathway for Child Protection that is to be followed and shared with everyone who supports our responsibility to safeguard children.

The objective of this document is to assist the community of ________________, its residents, leaders, partners and supporting organizations to develop a child protection and referral pathway that is consistent with:

- The laws and Child Care Act. . . . . . . [adapted from section X]
- The roles and responsibilities of our community and its members to uphold these laws and protect our children;
- The guiding principles of our community to create a protective environment for our children through leading a partnership between our children, our families, our community based structures and local organizations, in cooperation with government agencies.
2. Scope of the Agreement

The committee agrees that this SOP will cover all child protection issues that occur within the village of _______ and define our commitment to work together with [name agencies involved in sharing the referral SOP process].

3. Roles and Responsibilities

[This section should be used to explain the roles of different actors within the child protection referral process, including community deciders. The process of deciding what is managed in community and what requires referral will be dealt with further below. Include inter-agency referral contacts and coordination mechanisms here. A table, like this example, can help to describe the different responsibilities covered by various individuals or agencies (e.g. coordination duties, etc.).]

<table>
<thead>
<tr>
<th>PEOPLE AND THEIR ORGANIZATION/AFFILIATION</th>
<th>ROLE AND RESPONSIBILITY</th>
</tr>
</thead>
</table>
| Example: Mr. Xxxxxx, head of CBCPC       | • Surveillance: monitor and identify vulnerable children  
• Prevention: awareness-raising; teaching; discussing actions that may be leading to risk with parents/guardians.  
• Response  
  • Leading negotiations on what needs to be decided in/by community and what requires referral.  
  • Main contact for referral partners  
  • Coordination |
| Ms. Xxxx, Head of Women’s Peace Hut     | • Surveillance: monitor and identify vulnerable children;  
• Prevention: awareness-raising; teaching; discussing actions that may be leading to risk with parents/guardians.  
• Lead Peace Hut discussions on potential risks  
• Response  
  • Lead interviewer/investigator with child victims  
  • Involved in negotiations, decision-making, and in-community solution-finding.  
  • Coordination |
| Mr. Xxxx, Police officer                | • First contact for referral where a law has been broken  
• Will come immediately upon alarm  
• Will contact police woman, social workers, health workers depending on nature of the crime  
• Will begin investigation process in case of court action |
| Ms. Xxxxx, Police woman/Family Unit     | • Second police contact when victim is a child  
• Will coordinate with family; collaborate on initial findings from Ms. Xxx; Continue fact-finding with victim. |
| Mr. Xxxxx, Volunteer social worker, DSWGCP | • Mr. Xxxxx, Volunteer social worker, DSWGCP |

4. Referral Pathway Defined

(To effectively address child protection issues at the community level, there are a series of steps that each stakeholder should be aware of and follow to ensure that children are appropriately supported. In other words, a long-lasting intervention that protects the child, provides psychosocial support and services where needed, and empowers and builds on a child’s resilience to support full reintegration and recovery and prevents future problems. The flowchart below is not a process that must happen each and every time a child is identified as at risk. For example, a child who is identified as...
having been recently taken out of school and sent to work, and has not yet experienced any form of exploitation may not need each step to take place.

HELP-SEEKING AND REFERRAL PATHWAY FLOWCHART FOR [add community name]

1. Recognizing or learning about a child protection problem can begin with a report, gossip, overhearing an argument, seeing a beating, seeing a child at work during school hours, or not seeing a child going to school. Not all children will seek help.

TELLING SOMEONE AND SEEKING HELP (REPORTING)

Survivor tells family, friend, community member; Abuse is witnessed and reported to parent, other community member. Survivor self-reports to any older person.

2. Suspected problems need to be brought to the attention of your Child Welfare Committee – or, if there is no CBCPC, who in your community has the ability and training to make such decisions?

PARENT or OTHER PERSON REPORTS TO CBCPC (REPORTING AND DELIBERATION)

The CBCPC/Elders must convene to a) provide a safe, caring environment for the child based on the best interests of the child; b) learn the child’s immediate needs; c) weigh out honest and clear options available – with parent or guardian, if able.

CBCPC determines if a law was broken: IF no law was broken decide with child and family on the best way forward. IF a law was broken immediately contact Police.

[Enter specific information about how a meeting is convened; How the rules for deliberation work.]

[Enter specific information about the police contact - including where to go and/or how to contact them]

3. Based on the findings or results of CBCPC deliberation and/or conference with families involved, either a solution is agreed upon or further steps need to be taken through referral. List names and contacts for each category of referral:

IMMEDIATE RESPONSE

The CBCPC or parent must provide a safe, caring environment and respect the confidentiality and wishes of the survivor/family; learn their immediate needs; give honest and clear information about services available. If agreed and requested by survivor or family or elders, obtain informed consent and make referrals; accompany the survivor to assist in accessing services.

Locally Managed Medical/health care entry point Social Worker entry point Legal support entry point

Follow community tradition of deliberation to resolve a temporary or manageable problem [Enter name of the health centre(s) in this role and contact information] [Enter name of the Social Worker(s) in this role and contact information] [Enter name of the police or legal service provider(s) in this role and contact information]

4. Cases that are in conflict with the law will require police contact. Write the names and contacts of trusted and known police and legal service providers here:

IF THE SURVIVOR WANTS TO PURSUE POLICE/LEGAL ACTION – OR – IF THERE ARE IMMEDIATE SAFETY AND SECURITY RISKS

Refer and accompany survivor to police/security – or – to legal assistance/protection officers for information and assistance with referral to police.

Police/Security Legal Assistance Counsellors or Protection Officers

[Enter specific information about the security actor(s) to contact – including where to go and/or how to contact them] [Enter names of organisations and contact information]
5. Over time, cases need follow-up action, either from CBCPC or community members who monitor the situation with support to the family or through the preferred social service agency. Problems faced by one family are rarely unique. Is there a pattern of issues that needs to be solved through external support?

AFTER IMMEDIATE RESPONSE, FOLLOW-UP AND OTHER SERVICES

Over time and based on survivor’s choices can include any of the following:

<table>
<thead>
<tr>
<th>Health care</th>
<th>Psychosocial services</th>
<th>Protection, security, and justice actors</th>
<th>Basic needs, such as shelter, children’s services, safe shelter, or other</th>
<th>Government Ministry, CBO or NGO to support with income generation, watson, or other</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Insert contact information for each link in this pathway]</td>
<td>[Ensure contact information is up to date]</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Reporting Procedure

Herein we vow that all reports/concerns of child abuse will be documented in report form (agreed format below) and acted upon without delay as per the Referral Pathway Flowchart. All reports will include contact information and reasons for concern as well as vulnerability criteria.

Coordination pathway: All reports will be compiled with [name] and shared with [name of contacts at partner organizations]. Each report will be filed under a file type and number for confidentiality purposes, and used for monitoring/surveillance purposes by child protection volunteer groups. Report analyses will be shared at scheduled meetings.

**Child Abuse Report Form**

If you have knowledge that a child’s safety might be in danger, please complete this form to the best of your knowledge. Please note that child protection concerns must be reported directly to the designated child protection officer immediately (preferably within a day). This report is to be used as a tool to develop the most un-biased information-based report possible. For confidentiality reasons, the report should be written and signed solely by you.

**CLASSIFICATION:** [type of concern] __________________________________________________

**FILE NUMBER:** [for confidentiality in recording] _______________________________________

**1. About You**

Your name: _________________________________________
Your job title: ________________________________________
Workplace: __________________________________________
Your relationship to the child: __________________________
Contact details: ______________________________________

**2. About the Child**

Child’s name: _______________________________________
Child’s gender: _____________________________________
Child’s age: _________________________________________
Child’s address: _____________________________________
Child’s guardians: ___________________________________

**3. About your Concern**

Was the abuse observed or suspected? _______________________________________________________

Is this concern based on first hand information or information divulged to you by someone else? (If so who?) ______________________________
Did the child disclose abuse to you? YES: ☐ NO: ☐

Date of the alleged incident: _______________________________________
Time of the alleged incident: _______________________________________
Location of the alleged incident: ____________________________________
Name of alleged perpetrator: _______________________________________
Job title: ______________________________________________________
Nature of the allegation: _________________________________________________________________________________________

Your personal observations (visible injuries, child’s emotional state, etc.) [N.B. Make a clear distinction between what is fact and what is opinion or hearsay] ______________________________________________________________________________________________________
________________________________________________________________________________________________________________

To the best of your ability, note the Vulnerability Criteria: ____________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

How serious is the risk to the child? ___________________________________________
Is this a chronic or acute condition? __________________________________________

Exactly what the child or other source said to you [if relevant] and how you responded to him or her [Do not lead the child. Record actual details] ____________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

Any other information not previously covered: _____________________________________________________________________________
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

Were there any other children/people involved in the alleged incident? __________________________________________________________
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

Action Taken: ______________________________________________________________________________________________________
__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

________________________________________________________  ________________________________________
Signed         Date
6. Coordination and Cooperation

All members of this network have vowed to work toward the strengthening of child protection principles including coordination mechanisms through activities that will strengthen collaboration and cooperation. These activities will increase access to different perspectives, strengthen knowledge and access to new information, improve referral contacts, and increase access to different types of prevention support.

Scheduled network coordination meetings, review, and up-dates to be held on a [weekly/monthly??] basis on/at [date and location].

SAMPLE AGENDA

1. Welcome, Opening Remarks and Introduction
2. Review of the Action Points from the previous meeting
3. Update on two recent rape case
4. Update on CP Work and Action Plan
5. Update from [agencies]
6. Partner updates
7. AOB [any other business]
8. Closing and Adjournment

[Fill in the table below as agreed by network members]

<table>
<thead>
<tr>
<th>COORDINATION ACTIVITIES</th>
<th>WHAT IT MEANS</th>
<th>EXAMPLES</th>
</tr>
</thead>
</table>
| Information systems for coordination | Collecting and sharing reports, information, including:  
• The ‘3 Ws’ – Who is doing What and Where  
• Training schedules and materials on child protection shared  
• Boards with child protection case information (above) | • Coordination documents: SOPS, Strategy/Action Plans, MoUs (below), Meeting minutes, etc.  
• Review case statistics in community meetings to recognize patterns and design prevention activities |
| Appeals for child protection funding and support | Based on patterns of cases and reasons, appeal for prevention support from gov or NGOs. | • Ex: prepare proposal for a well and water pump to save time so children can focus more on school and not fetching water. |
| Awareness-raising on child protection issues | Informing community on child protection patterns and issues and promoting behaviors that improve health and well being.  
• Raise awareness about risks to children’s protection and wellbeing  
• Mobilize communities to respond to and prevent those risks  
• Monitor child protection risks on an ongoing basis  
• Help to develop local solutions to problems | • Discuss patterns of problem issues as well as what behaviors lead to avoidance of problems. Ex: prevent early marriage through income generation for families unable to pay school fees; solicit funding for school costs from gov.§ |
| Team Strengthening activities | Capacity building trainings on……. | |

7. Team Formation & Action Plan

Based on our own risk analyses, the following community Teams have promised to assist in our child protection strengthening functions:

<table>
<thead>
<tr>
<th>TYPE OF TEAM</th>
<th>ROLES AND RESPONSIBILITIES</th>
<th>MEMBERSHIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quick Response Team</td>
<td>Community disaster preparedness; Intervene in emergency cases</td>
<td>Mr. Xxxx, Police X, Social worker X</td>
</tr>
</tbody>
</table>

§ See Wessels 2009 p. 15 for examples of positive deviance approach.
Women’s Support Team | Intervene on all rape or sexual abuse cases; Active in GBV prevention; | Mrs. Xxxx, Peace Hut…, Social Worker X…

Awareness raising team

[Once teams are formed, later steps will include:

- Designing a clear plan of action about how to implement the protocol and how it will help to keep children safe.
- Informing all partners, stakeholders, and community members about the procedures, ensure they receive training about it and understand how it applies to them.

An Action Plan for Teams and Coordination may look like this:]

<table>
<thead>
<tr>
<th>AREAS OF ACTION</th>
<th>WHO IS RESPONSIBLE</th>
<th>WHAT WE WILL DO</th>
<th>WHEN IT WILL BE DONE</th>
<th>HOW WILL WE VERIFY OR MONITOR</th>
<th>HOW WE KNOW IF IT IS SUCCESSFUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quick response team</td>
<td>Mr. Xxx, Mr Xxx Police</td>
<td>Design protocol for emergency response in collaboration with police, etc…</td>
<td>By [date] Plan monthly meeting on date…</td>
<td>Written plan provided to head of CBCPC</td>
<td>Successfully managed emergency…, prevented emergency…</td>
</tr>
<tr>
<td>Women &amp; Girls’ support team</td>
<td>Mrs. Xxxxx, Ms Xx social worker, Ms. Xx midwife</td>
<td>Receive gender safety training from…;</td>
<td>Training on …. Monthly meeting on …</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Awareness raising team</td>
<td></td>
<td></td>
<td>Monthly meeting on …</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kids Club</td>
<td></td>
<td></td>
<td>Weekly meeting</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Conclusion

All members of the [region] child protection network, in abidance with these guidelines, have created this SOP through collaborative agreement on this date.

Changes to contacts or processes must be presented during coordination meetings to ensure the SOP remains relevant.

________________________________________________________
Signed                        Location                        Date
ANNEX 11: BIBLIOGRAPHY


-----, Columbia University, University of Indonesia (nd) Child Protection Information Management Mapping: Towards a data surveillance system in Indonesia.


is developed over time. This creates a shift in the power dynamics between ChildFund and Local Partners. Changes in ChildFund’s approach also demand new skills – especially new leadership abilities – in both National Offices and Local Partners. Creative imagination, agility, the ability to undertake and act on analysis, and a focus on evidence generation, collaboration and advocacy all demand a move from a culture which focuses on compliance to one which values both compliance and successful development and execution of strategy. And relationships which enable mutual accountability, shared learning and the ability to co-create interventions based on a deep understanding of the community and desired change.