Review of Child Protection Positioning and Localisation

2018 HNOs and HRPs
Survey Methodology

• Desk review, conducted by Global CP AoR team
• 24 out of 25 HNOs for 2018 reviewed (Iraq HNO is not finalized, incl. JRP for Bangladesh)
• 23 out of 24 HRPs for 2018 were reviewed (Syria not finalized, incl. JRP for Bangladesh)
• Standardised set of indicators used
• Shared with coordinators for validation.
Children in Need of Protection

• Globally, around 92,000,000 people are in need of Protection in humanitarian settings.

• Almost 50,000,000 of these are children (53% of total people in need of Protection).

• These children account for 32% of the total 153,132,851 people in need of humanitarian support, globally.
Disaggregation in HNOs

- **18 HNOs** (75%) disaggregate protection targets by adult/child
- Only **2 HNOs** (8%) disaggregates further within the child category
- **79%** of Protection targets in HNOs are disaggregated by sex (n=19)

Example from Syria (p.23)
Disaggregation - HRP

- **12** HRP (52%) disaggregate protection targets by adult/child
- **No** HRP disaggregates further within the child category
- **91%** of Protection targets are disaggregated by sex (n=21)
Disaggregation - HRP

- **70%** of HRPs specify the proportion of the Protection Cluster PIN that is targeted with child protection interventions (n=16).

*Yemen HRP 2018 (p.37)*

In light of continuing grave violations of children's rights, 2.7 million children will be targeted for coverage under the Monitoring and Reporting Mechanism for both evidence-driven advocacy and referrals for services such as medical and rehabilitation for injured children. 882,268 children will be targeted for psychosocial support activities. 1.7 million children will be targeted for life-saving mine risk education messaging. 12,932 children and community members will be targeted for critical child protection services, which includes family tracing and reunification services for unaccompanied and separated children, victim assistance as well as case management.

*Yemen HRP 2018 (p.37)*

*Cameroon HRP 2018 (p.23)*

<table>
<thead>
<tr>
<th>Statut</th>
<th>Personnes déplacées</th>
<th>Personnes de retour</th>
<th>Personnes ressemblant à des réfugiées</th>
<th>Personnes ressemblant à des réfugiées</th>
<th>Personnes ressemblant à des réfugiées</th>
<th>Personnes ressemblant à des réfugiées</th>
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<tr>
<td>Personnes dans le besoin</td>
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<td>152K</td>
<td>40K</td>
<td>315K</td>
<td>50%</td>
<td>100%</td>
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<tr>
<td>Personnes ciblées</td>
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<td>118K</td>
<td>28K</td>
<td>104K</td>
<td>50%</td>
<td>100%</td>
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*Les nombres de cette section correspondent à des tableaux énumérers du secteur Protection.*

*Cameroon HRP 2018 (p.23)*
Positioning of CP in the HNOs

Does the analysis disaggregate results in Protection by Area of Responsibility?

- Yes: 21%
- No: 46%
- No mention of child protection: 13%
- Mentioned within broader protection analysis: 21%
- Separate paragraph(s):
- Own Sub-Chapter: 46%
Comparison of CP Positioning in HNOs

2017

- No mention of child protection: 11%
- Mentioned within broader Protection analysis: 32%
- Separate paragraph(s): 36%
- Own sub-chapter: 21%

2018

- No mention of child protection: 13%
- Mentioned within broader protection analysis: 21%
- Separate paragraph(s): 46%
- Own Sub-Chapter: 21%
Comparison of CP in 2018 HNOs vs HRPs
Comparison of CP Positioning in HRPs

HRPs 2017
- Largely insufficient: 21%
- Some mention but insufficient: 16%
- Separate paragraph: 21%
- Own chapter: 42%

HRPs 2018
- No mention: 22%
- Mentioned within protection chapter: 35%
- Separate paragraph(s): 39%
- Own chapter: 4%

2018
Examples of Separate CP Chapters in HNOs

Cameroon:

PARTIE II:
APERÇU DES BESOINS
PAR SECTEUR

INFORMATION PAR SECTEUR

Abris et NFI
Eau, hygiène et assainissement (EHA)
Education
Nutrition
Protection
  Protection de l’enfance
  Violences basées sur le genre (VBG)
Relèvement précoce
Santé

Nigeria:

PART II:
NEEDS OVERVIEW
BY SECTOR

- Health
- Protection
  - Child protection
  - Gender-based violence
- Early recovery and livelihoods
- Food security
- Nutrition
- Water, sanitation and hygiene
- Education
Examples of Separate CP Chapters in HRPs

Cameroon

**PROTECTION: CHILD PROTECTION**

**Summary of needs**

The physical safety and psycho-social well-being of 2.5 million girls and boys in north-west Cameroon remain greatly compromised due to the proximity to conflict and protection threats and brutal violence. Family separation, displacement, severe psycho-social stressors, sexual violence and other grave child rights violations are among the major concerns requiring immediate interventions.

**Response plan**

Over 790,000 children, and in particular widows, single caregivers with several children and their parents, are in need of assistance. The Child Protection (CP) sub-sector intends to target these children and caregivers in need of protection services, particularly those most vulnerable to sexual violence and other protective needs.

**Nigeria:**

**PROTECTION: CHILD PROTECTION**

**Summary of needs**

The plight of children and families in northeast Nigeria remains greatly compromised due to the ongoing conflict and protection threats. Several thousand children and families are at risk of displacement, separation, and violence. The Child Protection (CP) sub-sector intends to target these children and caregivers in need of protection services, particularly those most vulnerable to sexual violence and other protective needs.

**Response plan**

Over 1.4 million children, and in particular widows, single caregivers with several children and their parents, are in need of assistance. The Child Protection (CP) sub-sector intends to target these children and caregivers in need of protection services, particularly those most vulnerable to sexual violence and other protective needs.
Integrated Responses in HNOs

- **71%** (n=17) Protection Chapters reference integration of CP with another sector.
- Within the 5 specific CP Chapters, **four (17%)** had some references to integrated analyses:

<table>
<thead>
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<th>GBV</th>
<th>FSL</th>
<th>Health</th>
<th>Mine Action</th>
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<td>Yemen</td>
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Integrated Responses in HRPs

- **48%** (n=11) Protection Chapters have evidence of integrated CP responses
- 7 of these included integrated programmes with other sectors/clusters

**Palestine HRP 2018 (p.26)**

Inter-cluster / sector linkages

To enhance protection outcomes and impact, the Protection Cluster will provide technical support and guidance to other clusters/sectors to mainstream protection in their interventions. It will contribute to inter-cluster operations that address policies and practices that cause protection violations and other key vulnerabilities, such as gender, food insecurity, displacement, and disabilities. Examples of inter-cluster/sector support that is envisioned for 2018 include: support to the Education Cluster on child protection mechanisms in schools, including ERW risk education; referrals to child protection/structured psychosocial support and the provision of child protection training for teachers, parents and counselors; collaboration and joint programming with the Education Cluster to systematically address child drop-out and child labour; support to the Shelter and NFI Cluster via the provision of legal counseling and representation and ensuring security of tenure for vulnerable groups; linkages with the Health and Nutrition Cluster to strengthen gender sensitivity and support to GBV survivors.

The Protection Cluster will support the HCT to strengthen the centrality of protection and the integration of human rights and accountability in all aspects of the HCT’s policies and operations.

**Haiti HRP 2018, p.28**

Response Strategy

1. The response strategy will be articulated around strengthened monitoring, identification, referral and reporting mechanisms. Implementation strategies will include community-based protection and monitoring approaches coordinated with governmental action in the fields of social protection, education, justice and health in order to enhance protective outcomes.

2. Transversal themes of this response strategy are: the reinforcement of local structures and embedded community mechanisms, community participation and engagement, gender and protection mainstreaming, support to livelihoods and durable solutions and the strengthening of humanitarian accountability processes and mechanisms.

3. Cross-sectoral links with the Education, Health, Nutrition, Food Security and Early Recovery sectors will be strengthened and built upon in order to ensure the needs of the most vulnerable are prioritized. Ensure localized and centralized monitoring and reporting mechanisms to reinforce protection risks analysis, response mechanism and advocacy actions in order to enhance protection outcomes for vulnerable women and children, children in institutional care, in detention, elderly, person with disabilities. Monitoring also encompass the population at the border to better understand the risk of exploitation and trafficking in Haiti to serve as a baseline for all counter-trafficking-related response and prevent, traffick, smuggling and exploitation.

4. Support to existing structures set up by local, national and international actors, including civil society, local governmental and technical authorities: such support aims at empowering local actors to identify, prevent and respond to protection risks.
Localisation in HNOs

• Only **two** (8%) HNO explicitly referenced localization in the Needs Overview

• **Five** (21%) make reference to localization related terms (e.g. Grand Bargain, Principles of Partnership etc)

(d) Local actors (national NGOs, CSOs and the Private Sector) still require capacity enhancement to support localization of humanitarian response and contribute to resilience enhancement.

Example from Yemen (p.50)
Localisation in HRPs

- **10** (43%) of HRPs explicitly referenced localization
- **13** (57%) make reference to localization related terms (e.g. Grand Bargain, Principles of Partnership etc)
Leadership

“...Under the IASC Transformative Agenda, Cluster Lead Agencies were encouraged to consider developing a clearly defined, agreed and supported sharing of cluster leadership by NGOs wherever feasible...” (p.21)

“...national coordination arrangements should be reviewed annually...” (p.39)

IASC Cluster Coordination Reference Module, p.21)

Increasing the visibility of leadership capacity and arrangements in the HNO is important for justifying the leadership arrangements that subsequently oversee HRPs and the transition plans that CLAs should develop together with the Cluster.
Leadership in HNOs

Only one HNO (Bangladesh) references the agencies who are responsible for national child protection coordination leadership structure (in the Joint Response Plan that covers both the Needs Overview and the Response Plan, p.34).

Only one HNO (Palestine) explicitly references coordination leadership capacity as part of its assessment of the humanitarian situation (p.44-45).

Because of the long history of international assistance in oPt, the international community already has in place many key components for an effective emergency preparedness system and has a proven track record of providing support to recurrent emergencies linked both to the on-going conflict and, to a lesser degree, to extreme weather events, through mobilization of in-country and international resources. However, some aspects of overall disaster preparedness, such as inter-agency coordination structures, national-local coordination and coordination with national and local authorities for different types of scenarios and a unified systematic approach, remain only partly completed.
Leadership in HRPs

1 (4%) of HRPs indicate their current leadership arrangements/structure. 1 (4%) reference a transition strategy towards local co-leadership.
Influence and Participation

• As we shift towards greater involvement of local actors, particularly in assessment and measurement, the visibility of local actors in this work should also increase.

• Explicitly referencing their role in data collection and analysis brings credibility to the methodology and highlights areas where future responses may need to include additional capacity strengthening.

• There are also significant investments being made to shift to more continuous, real time monitoring systems (for situation and response). Where this is reflected in the HNO, we can start tracking how effectively these are going to scale, globally.
Influence and Participation in HNOs

- **Nine** HNOs (38%) reference the involvement of local partners in the data collection.
- Only **one** HNO (Palestine) references local actors in the analysis of data for the HNO (4%).

(Palestine HNO 2018, p.47)
Influence and Participation in HNOs

• **No** HNOs disaggregate reach data from the previous year by type of agency that delivered the service

• **No** routine situation/response monitoring (in addition to stand-alone assessments) was used, although some HNOs noted that this was a gap.

(Somalia HNO 2018, p.34)
Influence and Participation in HNOs

- Two (8%) reference the involvement of community members, children or women in data collection
- No HNOs reference the involvement of community members, children or women in the data analysis
- Most HNOs note that local actors were consulted, but do not explicitly reference their role, if any, in the collection or analysis. Where specific agencies were noted, it is usually an international actor (e.g.).
Influence and Participation in HRPs:

• **No** Protection Chapters include a commitment to the CP situation and response monitoring toolkit/approach
• **No** HRPs indicate the previous year CP results, disaggregated by type of agency; although many HRPs did reference the number of people reached the previous year (in total, or for the Protection Cluster).
Partnerships

• Whilst many HNO and HRPs reference partnerships and note their importance.

• The nature and types of partnerships are rarely discussed and as such, it is difficult to ascertain whether these partnerships are fit for purpose.

• Partnership approaches can have a direct influence on our efforts to achieve coverage and quality.

• The implications of dominant partnership models should therefore be discussed in the HNO and then used to inform the shape and nature of the role of partnerships in the HRP (both in general and specifically in relation to Child Protection).
Partnerships in HNOs

- **Three** HNOs (13%) mention the nature or type of protection partnerships and/or their implications for service delivery coverage and quality.

Local-level actors, and particularly municipalities, are trying to fill in gaps left by the central public administration, often through collaborative solutions with civil society, the private sector and community leaders. However, their limited decision-making autonomy, weak technical capacities and low financial resources, greatly limit their responsiveness and ability to address needs in fast-changing conditions. Only a few municipalities have a baseline describing the developmental context and needs of their territory and populations.

While technical capacity continues to grow, there remains a need for long-term capacity building, particularly in areas such as cash-based programming, resilience and early recovery, shelter rehabilitation, protection, including HLP technical capacity. Combined with the lack of partnership opportunities, the limited capacity in these areas constitutes an obstacle to substantively scaling up and diversifying services across Syria through quality programming. This is especially important in areas where large international NGOs have reduced reach, and local organisations have been newly established, and where local expertise is particularly important.

Despite the challenging operating environment, humanitarian partners continue to expand their reach across the country. Humanitarian partners are involved in the delivery of humanitarian assistance in all 18 regions of the country. International organizations continue to contract local NGOs and community based organizations to deliver assistance in areas where they have no access. In 2017, a broad range of actors including local communities stepped up to contribute to the famine response and provided the first line of response, with support from local and government authorities, the private sector, national and international humanitarian partners and charities.
Partnerships in the HNOs

Many HNOs provide coverage maps, also indicating the concentration of partners.

No HNO disaggregated partners according to whether they were national or international, which makes it difficult to assess the degree of complementarity of roles and whether different models of partnerships would be useful to achieve greater coverage or quality in future responses.

(Afghanistan HNO 2018, p.17)
Partnerships in HRPs

- **Six** Protection Chapters (26%) explicitly refer to the complementary roles and approaches of national and international actors.

- No Protection Chapters note the proportion of response that will be delivered by local actors.
Partnerships in HRPs

- 11 (48%) “Operational Capacity” sections reference the importance of partnerships with local actors

- 5 (22%) “Operational Capacity” sections explicitly reference at least one strategy or approach to partnership with local actors
Partnerships in the HRP

- **8 (35%) Protection Chapters** reference the importance of partnerships with local actors.

- **5 (22%) Protection Chapters** explicitly reference at least one strategy or approach to partnership with local actors.

Nigeria HRP 2018, p.26

Yemen HRP 2018 (p.38)
Funding

• Funding levels also have a direct impact on coverage and quality. It is therefore important to understand how general funding trends may impact a child protection response.

• It is also important to be able to track whether the limited resources are proportionately invested, given the vulnerability of girls and boys.

• The Grand Bargain commits more direct funding to local partners and so it becomes important to track whether this is happening (and if not, what may need to be done in future responses to facilitate it).
Funding in HNOs

- **42%** (n=10) of HNOs refer to previous funding trends
- **None** of these, however, disaggregated the funding trends by type of partner.
Funding in the HRP

- **No** lists of partners differentiate the local and international actors.
- 1 (4%) of HRPs indicate the proportion of the overall funding ask directly linked to child protection outcomes.
- **No** HRPs indicate the proportion of the child protection resources for local actors.
Institutional Capacity for Local Partners

• Most HNOs identify a larger number of people in need, than can be addressed in the subsequent HRP, which subsequently note the need to continue to scale up services.

• In most contexts, whilst there is a recognized need for contributions from the international community, local actors are identified as the partners who would benefit from capacity strengthening – although the type of capacity strengthening (and effective methodologies) are not routinely discussed.

• There is limited analysis of the institutional/organizational capacity of local partners and there is subsequently little reference to this in HRPs.
Institutional Capacity (General) in HNOs

- **38%** mention the institutional capacity of local actors in the *Overview of Needs* (n=9)

While there are now a significant number of national NGOs present, many are new to Cox’s Bazar and to large scale refugee relief operations, and UN agencies and international NGOs have tended to use a small set of national implementing partners who have become over-stretched. Two-way capacity building is required. National NGOs have the knowledge and understanding of Bangladeshi communities and wider Bangladesh systems and approaches, while the international community can provide expertise and training in technical aspects of refugee operations as well as support in administration and management for smaller national NGOs. There is an urgent need for trust building and diversification of partnerships to expand implementation capacity.

Bangladesh JRP 2018, p.20

The limited capacity of local partners on the ground, particularly in Borno State, restricts the delivery of specialised services.

Nigeria HNO 2018, p.20
Institutional Capacity (General) in HRPs

• 10 (43%) “Operational Capacity” sections reference the importance of institutional strengthening of local actors

• 5 (22%) “Operational Capacity” sections explicitly reference at least one strategy or approach to institutional strengthening of local actors
Institutional Capacity (in CP) in HNOs

- **No** HNO mention the institutional capacity of local actors in the Protection Chapter

- Some chapters do refer to capacity more broadly.

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**Institutional Capacity (in CP) in HNOs**

**No** HNO mention the institutional capacity of local actors in the Protection Chapter

Some chapters do refer to capacity more broadly.
Institutional Capacity (in CP) in HRPs

- 4 (17%) Protection Chapters reference the importance of institutional strengthening of local actors

- 1 (4%) Protection Cluster section explicitly reference at least one strategy or approach to institutional strengthening of local actors.

Localisation strategy: national actors are instrumental to ensure effectiveness, efficiency, relevance and sustainability of humanitarian results, as they are in place before, during and after crises, and are usually the first to respond when crisis hits. Institutional capacity-building approaches, particularly those which draw on coaching, mentoring and accompaniment will be promoted and international partners will be encouraged to invest in institutional capacity-building of local partners as an integral part of any broader programme partnership.

The Protection Cluster will adopt a multi-year approach which seeks to build on rather than replicate past successes, and which ensures that internally displaced persons are kept at the centre of decisions which affect their lives. Emergency protective services will be complemented by efforts to build the capacity of Government officials to address needs directly, at each of the Federal, Regional and Local levels. Ratification of the Kampala Convention for the Protection and Assistance of Internally Displaced persons is a key component of the protective response. The cumulative effect of drought and conflict has exacerbated the vulnerability of affected population.