DFAT Child Protection Guidance Note Child Protection in Emergencies

January 2017

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## Purpose

The purpose of this Guidance Note is to provide **DFAT staff and partner organisations** in receipt of DFAT funding practical information and recommended child protection procedures into humanitarian programming to keep children safe and protected from harm, abuse and exploitation.

## Background

Discussions with humanitarian partners identified significant child protection gaps associated with the delivery of activities in an emergency context, resulting in negative impacts for children. In an emergency the family and community support structures are weakened and children are exposed to abuse and exploitation, particularly when separated from family and community. It is therefore crucial that an organisation implementing humanitarian programming in the emergency context ensure children and young people in contact with those services are kept safe and protected. Organisations have a duty of care to consider child protection risks and incorporate child protection standards as part of designing and implementing an effective humanitarian program. Children and young people come into regular and direct contact with a range of service providers either as direct beneficiaries of the service or when accompanying parents, legal guardians, families and friends to the service. Organisations therefore need to ensure staff and volunteers working with or in contact with children, taking into account the best interests of children and provide a child safe environment.

Child Protection in Emergencies is broadly defined as actions to prevent or address the abuse of rights of girls and boys, directly or indirectly, which affect children’s emotional and physical wellbeing, through the action or inaction of third parties during a conflict and/or emergencies (including natural disasters).

Programs that provide immediate and ongoing humanitarian assistance are also important identification and referral points for families, children and young people who require specialised assistance to prevent and/or respond to child protection concerns.

Organisations often work in partnership with government departments or within existing informal and formal institutions such as hospitals and church groups. Understanding government and other authorities’ existing child protection systems and ensuring staff and volunteers are briefed on these is an important part of providing a child safe environment, as well as working with government to promote child protection policies and procedures in all partnership agreements.

This guidance note should be read in conjunction with:

* DFAT’s Child Protection Policy (<http://dfat.gov.au/about-us/publications/Pages/child-protection-policy.aspx>; and
* DFAT’s Establishing Child Protection Risk Context Guidance Note (<http://dfat.gov.au/about-us/publications/Documents/child-protection-risk-assessment-guidance.pdf>)
* The Minimum Standards for Child Protection in Humanitarian Action (CPMS) - <http://cpwg.net/minimum-standards/>
* The DFAT Child Protection Guidance Notes on:
  + - Monitoring and Evaluation
    - Health Activities
    - Education
    - Women’s Economic Empowerment
    - Extractive Industries
    - Social Media
    - Recruitment and Screening
    - Infrastructure; and
    - Violence Against Women

## Risk in Humanitarian Activities

The following table outlines some common child protection risks within humanitarian programs and provides some ways to mainstream child protection into humanitarian programming. Included are practical measures to mitigate the risks in program design and as part of service provision. Also included are activities that can influence change in attitudes and beliefs by working with communities as well as local and national government, particularly during the preparedness stage.

RISK

**Program design and immediate interventions does not adequately address the impact on children and adolescents leading to undesired outcome**

**Child protection issues faced during emergencies include:**

– Violence against children

– Unaccompanied or separated from families

– Recruitment of children by armed forces or groups

– Sexual abuse

– Gender based violence

– Child trafficking

– Hazardous and worst forms of child labour

– Lack of access to essential services

– Domestic violence

– Lack of education services

– Child prostitution

– Discrimination and lack of participation

## Mitigation Strategies

* Undertake a child protection risk assessment of all programs and services (remembering to also include the physical and psychological safety of children), to identify and mitigate against any harm to children, including unborn children and young women as a result of the program activities.
* Consult children, young girls, young boys, women and men on program design, implementation and evaluation to ensure their views on the possible impacts are heard as well as including their views on their own safety and protection needs
* Incorporate requirement for data and analyses on Gender-Based Violence (GBV) into funding proposals and program designs in order to develop sustainable interventions that safeguard children from harm
* Prohibit the use of hazardous and worst forms of child labour in all activities
* Treat children and young people as a separate stakeholder group (not only embedded within their families or community)

RISK

**Child exploitation and abuse**

* Child suffers harm or exploitation and abuse

– due to inadequate humanitarian program design

– by program and partner staff, volunteers and consultants

## Mitigation Strategies

Ensuring that impacts on children are considered at the concept and design stage

* Undertake a child protection risk assessment of all humanitarian programs and activities at the design stage and then at intervals throughout the humanitarian program cycle, to identify and mitigate risk of harm to children
* Take into account the results of regular monitoring and evaluation processes to address emerging child protection risks
* When designing activities (e.g. WASH facilities) ensure they are culturally appropriate, accessible and in highly visible spaces that reduce the opportunity for abuse and exploitation to occur
* Consider the value of earmarking funding for child protection and child safeguards activities for children and adolescence boys and girls in humanitarian programs
* Incorporate gender and diversity principles in emergency programming, to ensure dignity, access, participation, and safety for boys and girls, including child protection safeguards

Review and Evaluation

* Ensure that all humanitarian programs have monitoring mechanisms focused on child protection to evaluate whether child protection standards are being implemented and to identify any new child protection risks that may emerge and address those emerging risks. See DFAT Guidance Note – Monitoring and Evaluation

Safe recruitment measures are undertaken

* Comply with, or build on, the compliance standards within DFAT’s Child Protection Policy. See also DFAT Guidance Note – Child Safe Recruitment and Screening
* Maintain a registry of all aid workers deployed to work with children
* Ensure the level of contact with children by staff and volunteers (security personnel, cleaners, drivers, carers) is considered, and appropriate recruitment screening measures are undertaken.

Ensuring adequate internal policies and procedures are implemented

* Supervise visitors to the program and have them sign the organisations Code of Conduct. In particular, brief ex-patriate staff and volunteers on local context and cultural requirements
* Develop and implement procedures to keep children and young people safe when providing assistance to communities.
* When taking photographs and footage ensure all participants provide age appropriate informed consent and are aware that they can withdraw that consent at any time.
* Appoint one or two staff members to be the child protection focal points for the program; they can be the champions for the child protection policy and standards and be a contact point for workers to ask questions or raise any concerns
* Provide clear guidelines on the following:
  + One-on-one consultation with children and young people – including ensuring two adults are present when undertaking consultations
  + obtaining informed consent from children and/or adults
  + confidentiality - the guidelines should provide information on how to explain confidentiality to children, what can be kept confidential but also if they tell a staff member they are being harmed the staff member cannot keep that confidential
  + local cultural considerations
  + safe and secure storage of confidential and sensitive records of children and young people
  + gender considerations - children being able to request to see male or female staff and having male and female staff available
  + use of children’s images to ensure the privacy and dignity of children and secure storage of images
* Develop specific procedures for home visits and outreach services that include child protection standards. For home visits it is recommended practice to:
  + always have two staff present
  + pre-arrange the appointments with those being visited (this removes the risk of staff being able to visit without a prior formal appointment)
  + not continue with the appointment if children are alone in the house, however, in the case of child-headed households, put additional measures in place such as asking an extended family member or community leader to be present
  + keep clear records of visits that are signed by children and their guardians
  + provide opportunity for feedback from patients, including children and young people
  + provide child friendly information about the organisation’s complaints mechanism and translated into local language if possible.
* Develop specific procedures for individuals associated with the organisations visiting disaster sites, vulnerable communities and refugee/IDP camps:
  + keep a visitor registry
  + individuals associated with the organisation traveling to a community (including staff and visitors) wear visible identification
  + a child friendly space for children to wait for parents/caregivers appropriately supervised by staff
  + obtaining feedback from children and community members about the service and responding to feedback

Training

* Provide information and training for all personnel and industry/business partners in child protection, child and women’s rights, rights of people with disabilities, safe and appropriate interactions with young girls and young boys and the organisation’s child protection policy, code of conduct and reporting mechanisms

RISK

**Implementation, Service Provision and Performance Management**

* Children do not access the service

– Lack of confidentiality

– Staff not comfortable talking about some issues

– Stigma

– Accessibility

* Children do not report unsafe behaviours or actions of staff member or volunteer
* Health workers do not respond appropriately to child protection concerns and children are left in unsafe situations
* M&E frameworks do not include consultation with children and do not monitor the effects of humanitarian interventions on children

## Mitigation Strategies

Programs and service provision take into account the impacts of humanitarian programs on children

* Obtain input from staff, volunteers and children and young people on how to make programs more child and youth friendly to ensure they are appropriate, available, and accessible
* Ensure personnel understand local laws and customs relating to the age at which children can access services independently, what age children/young people can consent to, for instance, medical treatment, and when they can legally make decisions on their health care and see a health worker on their own
* Provide guidance to staff on how to handle disclosures and ensure they are aware of appropriate referrals and reporting process

Access to services

* Consider how children with disabilities can access services
* Ensure staff are trained to treat vulnerable children, particularly children with a disability or living with HIV/AIDS, without discrimination in all aspects of service provisions

Clear complaint mechanisms

* Ensure children and the community are aware of the organisation’s complaints mechanism. A child friendly version can be developed and distributed in local languages, for example, community radio announcements, posters, community meetings. Have one or two staff members listed as the child friendly contact person for children to raise any concerns
* Provide options for organisations to have a suggestion box for children and young people to write down any complaints or provide feedback/suggestions. Consider developing postcards with pictures or words that children can tick/circle
* Develop a child protection reporting and referral information sheet for all staff to assist them with referrals to local agencies or authorities able to provide support, counselling or advice such as family support services, safe houses, community groups, local community or faith based organisations, youth services, police (especially specialised police), community child protection committees and legal services

Impacts to children and young people are considered in M&E and risk assessments

* Include children and young people in consultations to inform M&E frameworks
* Where relevant assess children’s contribution to household income and chores as part of baseline and monitor changes or increases and negative impacts as part of M&E
* Include an indicator in the project M&E framework that monitors increases in family or community conflict that negatively impacts on children, young girls and young boys
* Undertake regular compliance assessments of the organisation’s child protection policy, undertake child protection audits, provision of child protection support to staff and regional offices, and regular review of the policy.

Well trained staff

* Organisations need to provide health workers with clear guidance and support to be able to handle these issues and respond in the best interests of the child or young person considering any risks to safety and following organisational child protection policies. If health workers are not skilled or comfortable to discuss these issues, a referral list of local services able to provide this advice should be developed and provided to children and young people
* Provide guidance and training to all workers on how to identify and respond to any signs of child abuse or if a child discloses abuse. Humanitarian workers can play a vital role in early detection and prevention of child abuse; however, they need guidance and support to feel confident in handling child protection concerns. This includes information on the signs of possible abuse (physical, sexual, emotional abuse and neglect) and exploitation, identifying risk behaviours of parents/carers such as violence or other issues that may place a child at risk of harm, how to speak to children who disclose abuse or sexual exploitation, how to speak to parents/carers, and what steps should be taken when abuse is suspected or disclosed
* Train Maternal and Child Health (M&CH) workers:
  + to recognise signs of child abuse or parent stress/not coping so early intervention steps can be implemented
  + on the stages of child development to provide valuable information to parents and caregivers on age appropriate behaviours and milestones
  + on nutrition and healthy development for children and young people to provide information to parents
  + in skills on alternatives to physical or humiliating punishment – positive discipline training for workers is highly recommended

RISK

**Partner capacity**

* Program run by partner organisations may cause harm to children

## Mitigation Strategies

Assess partner capacity

* Conduct a child protection/safeguarding due diligence on all partners to ensure adequate child protection policies, procedures and practices are in place prior to engaging
* Engage partners that have adequate child protection standards and processes
* Ensure partner organisations are complying with, or building on, the minimum standards within DFAT’s Child Protection Policy
* Undertake capacity building of downstream partners in child safeguarding and protection, sexual harassment, local labour laws and DFAT’s requirements under its Child Protection Policy

RISK

**Monitoring and Evaluation**

Child protection outcomes can be difficult to measure in the humanitarian context, as they can be intangible or hard to quantify. Incorporating practical outcomes and indicators into any program M&E framework and process will help measure program impact on children and provide opportunities to improve the protection of children, including assessing the adequacy of child safe practices.

* Child protection risk assessments are not undertaken as part of program implementation

## Mitigation Strategies

* Conduct a child protection risk assessment to identify the possible risks to children as a result of the intended program activities. Also as part of situational/baseline analysis identify the child protection issues encountered by children in communities where program implementation is taking place. This will inform the child protection outcomes
* Review and map child protection services, policies and systems at national, local and community levels to identify strengths and gaps and opportunities for contributing to and linking with these systems to enhance outcomes for children.
* Disaggregate the program beneficiaries by gender, age, disability and ethnic background and specific marginalised or vulnerable groups, such as children living with HIV/AIDS and child with disabilities.