SOUTH SUDAN SITUATION

REGIONAL FRAMEWORK FOR THE PROTECTION OF REFUGEE CHILDREN

FEBRUARY 2018 - DECEMBER 2019

CREDITS

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2,435,120

REFUGEE POPULATION

31 DECEMBER 2017

63%

REFUGEE CHILDREN

49%

GIRLS

51%

BOYS

SUDAN

453,258
65%

ETHIOPIA

418,892
65%

CENTRAL AFRICAN REPUBLIC

2,057
50%

SOUTH SUDAN

Abyei

Juba

DEMOCRATIC REPUBLIC OF THE CONGO

87,019
64%

KENYA

111,040
65%

1,057,809
63%

% Registered South Sudanese refugee population and % children (31 October 2017)

UGANDA

KEY FIGURES

1,123,6690

REGISTERED SOUTH SUDANESE

REFUGEE CHILDREN

71,003

CHILDREN WITH SPECIFIC NEEDS,

INCLUDING UASC

65,637

UNACCOMPANIED AND

SEPARATED CHILDREN

Introduction

The crisis in South Sudan enters its fifth year in 2018. As of 2017, the crisis had uprooted more than four million people, of whom 2.1 million were forced to leave everything behind and flee for their lives to seek safety in neighboring countries. In South Sudan 1.9 million have been internally displaced[1].

The South Sudanese refugee situation continues to be characterized as a children's crisis, with 63 per cent of refugees under the age of 18. Over 65,000 children have made the journey across the border unaccompanied or separated from their parents or usual caregivers.

The humanitarian situation in South Sudan has significantly deteriorated, with the disintegration of the states, food insecurity, widespread inter-communal violence, and a situation increasingly complex due to the proliferation of armed groups. All this leads to displacement, grave violations of the rights of children, and cross-border movement.

Access in South Sudan has been increasingly hampered due to clashes, and critical funding shortfalls have considerably stretched operations in all six countries of asylum i.e. CAR, DRC, Ethiopia, Kenya, Sudan and Uganda, hampering protection and response activities for refugees.

Many programmes have had to be scaled back to ensure the provision of critical life-saving support to the most recent arrivals, with an overwhelming number of refugee children. This protracted crisis is undermining the future of an entire generation of South Sudanese children.

Since 2014, child protection actors engaged in the South Sudan refugee response have gathered around an inter-agency Regional Framework for the Protection of South Sudanese and Sudanese refugee children. This framework outlines a common vision and agreed priorities for the protection of refugee children in Ethiopia, Kenya, South Sudan, Sudan and Uganda.

The initial framework was later on updated for the period from 2015 to 2017 to continue to support a coordinated and predictable response for refugee children through the provision of technical support on major child protection issues and challenges identified at country level. These include the capacity of the social workforce, community-based mechanisms, and particular child protection concerns.

In 2017, the Regional Child Protection Network (RCPN)[2] initiated a process to review and update the regional framework at country level: this was completed during a regional inter-agency workshop. During this process, common regional child protection priorities were agreed upon. This process was informed by lessons learnt and outcomes from the implementation of the previous framework, as well as current priorities, which were identified by the country teams.

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1. South Sudan Situation, Regional Overview of population of concern as of October 2017

2. The RCPN includes UNICEF, Save the Children, Plan International, World Vision International, ICRC, Lutheran World Federation, and UNHCR

Regional Overview

By the end of October 2017, 2.1 million South Sudanese refugees were hosted in the region, including more than 2,000 in Central African Republic (CAR), 87, 000 in the Democratic Republic of the Congo (DRC), 418,000 in Ethiopia, 111,000 in Kenya, 453,000 in Sudan and more than a million in Uganda.

546,000 new South Sudanese refugees crossed the border in 2017, of which 63 per cent are children and over 85 per cent are women and children.

Population movement has accelerated as the conflict has drawn on, with many seeking asylum after the outbreak of conflict in July 2016. This has created a challenging situation for host countries and humanitarian partners, who are addressing the needs of refugees who fled following the initial outbreak of conflict in 2013, as well as responding to the constant and steady flow of new arrivals into the six countries of asylum.

All countries of asylum have maintained an open border policy for persons fleeing persecution and armed conflict: prima facie refugee status is granted for new arrivals.

Uganda is pursuing a non-camp settlement policy. In line with the Comprehensive Refugee Response Framework (CRRF), Kenya and Ethiopia are embarking on similarly inclusive approaches for recent arrivals, while DRC and CAR have already moved towards a system allowing refugees to access public services and local market opportunities.

Uganda received an unprecedented influx in 2016 and 2017, with a daily average of two thousand refugees. This led to the opening of nine settlements since July 2016: Bidibidi is the largest, sheltering over 285 thousand South Sudanese refugees.

Sudan hosts the second-largest number of South Sudanese refugees in the region, and has experienced a dramatic spike in the number of new arrivals since the start of 2017; over 186,000 people fled to Sudan as of 31 October 2017. This is the highest annual rate of new arrivals in Sudan since December 2013 - the start of the South Sudan conflict.

Ethiopia, already hosting a large refugee population, the majority from South Sudan, faced a new peak of arrivals in 2017 following the renewal of violence in Upper Nile, Jonglei, and Unity State. This led to the establishment of a new camp in April 2017 in Benishangul Gumuz, outside of the Gambella region, where most of the South Sudanese refugees are hosted within the country putting strain on host community resources.

In Kenya, most refugees from South Sudan are hosted in Kakuma camp. In 2015, the Kalobeyi settlement opened promoting a new approach vis a vis refugees focusing on their integration into county-level development initiatives.

A new and larger influx to the DRC followed the outbreak of violence in Juba in July 2016. Fighting in South Sudan near to the border with DRC persists and is hampering the emergency response. Thirty five per cent of the refugees are hosted in the two refugee camps of Meri and Biringi: the rest are dispersed along the border areas living within host communities. This refugee population continues to represent a major protection concern with risk of attacks and recruitment by armed groups from South Sudan.

Very few humanitarian actors are present in the refugee-hosting areas of the DRC, due to logistical and security constraints. In addition, these areas lack almost all basic and essential services, and the host community population lives in extremely poor conditions.

SOUTH SUDANESE REFUGEE SITUATION

The 7 major risk facing refugee children

PSYCOLOGICAL DISTRESS

Many refugee children are exposed to violence and traumatic events before and during the flight. In countries of asylum, the erosion of community and family networks, poor living conditions, and lack of recreational and educational opportunities are also significant stressors for children. Lack of educational opportunity, especially at secondary level, is a challenge and results in boredom, distress, and a lack of prospects many adolescents.

FAMILY SEPARATION

The main risks for separated and unaccompanied children are psychosocial distress and trauma, child recruitment, abuse and exploitation, child labor, drug use, and criminality.

CHILD ASSOCIATED WITH ARMED FORCES AND GROUPS

A significant concern is the recruitment and use of adolescents by armed forces and groups. Boys are particularly at risk of recruitment.

PHYSICAL VIOLENCE

The deterioration of community structures and family safety nets result in an increase in domestic violence, including physical and emotional violence against children.

JUVENILE DELINQUENCY AND RISKY BEHAVIOR

Many of the key threats to children from violence, abuse and exploitation are at their height during adolescence. Adolescents are more likely than young children to be recruited into fighting forces, be sexually abused and exploited, and be forced to generate a livelihood, engage in exploitative labor, head households, and miss out on education. Many are subject to difficult social and economic conditions, and find themselves in conflict with criminal justice systems. Threats to their protection are exacerbated by gender discrimination and exclusion.

CHILD LABOUR AND EXPLOITATION

To cope with economic hardship in a protracted situation, exacerbated by encampment policies in some countries which limit access to work and self-reliance initiatives, some families see no alternative than to send their children to work and contribute to household income.

SEXUAL AND GENDER BASED VIOLENCE

There are major concerns around SGBV, especially regarding the high number of girls who have been subjected to these forms of violence before and during the flight. Within the community there is reluctance to report SGBV incidents which compromises access to services. Sexual violence against boys has also been reported, though such incidents are even less likely to be brought to the attention of service providers.

Security challenges in CAR have also prevented the delivery of humanitarian assistance. Although assistance is delivered at camp level, efforts have been made to integrate refugees into the existing public services (schools and hospitals) and to provide access to the local market.

Support for community self-reliance is the main line of intervention to benefit the whole population i.e. local communities, internally displaced persons (IDPs) and refugees. The peak of the influx in CAR took place in October 2016 but the numbers decreased throughout 2017.

The Regional Child Protection Framework has been revised based on priorities identified by country operations. It complements the 2018 Regional Refugee Response Plan (RRP), which identified six overarching objectives which will improve the overall protection environment for refugee children.

These objectives also fit into the broader CRRF goals, which encourage longer-term assistance for refugees and host communities, as well as pathways to self-reliance and solutions.

RRRP 2018 REGIONAL STRATEGIC PRIORITIES:

1. Uphold the quality of asylum for South Sudanese refugees in the region, the majority of whom are women and children, by meeting their lifesaving needs and upholding their dignity according to applicable minimum standards;
2. Anchor the response within national and regional multi-year protection frameworks, policies, laws, and standards which comprehensively address legal and physical protection needs of South Sudanese refugees with a particular emphasis on children, women and youth.
3. Enhance biometric registration, documentation and data management in collaboration with host Governments to support implementation of durable solutions strategies.
4. Proactively explore and, where applicable, pursue innovative approaches stemming from participatory assessments with refugees, Governments, humanitarian and development actors, private sector, and civil society, with a view to systematically expand Cash-Based Interventions (CBIs) and other initiatives aimed at alleviating the dependency of refugees on aid.
5. Maintain the civilian and humanitarian character of camps.
6. Promote social cohesion between refugees and host communities through implementation of targeted resilience programmes

Child Protection Situation

As the crisis protracts in South Sudan, children continue to be forced to flee their homes by conflict and human rights violations. Many are now internally displaced in South Sudan or living as refugees in neighboring countries.
Many children have faced distress, health risks, and malnutrition inside South Sudan. Children have experienced or witnessed extreme violence such as the violent death of a parent or close relative, separation from family, disruption of school routines and community life, destitution, or an uncertain future.

Schools and hospitals have been occupied, one in five women has been affected by sexual and gender-based violence (SGBV), exacerbated by impunity and a highly militarized society, and child marriage has been reported. More than 16,000 unaccompanied and separated children (UASCs) have been displaced inside South Sudan since December 2013. Of these, five thousand have been reunified and only 30 per cent of children have access to education in South Sudan.

Some children fleeing South Sudan have faced **recruitment**, with over 19 thousand associated with armed forces since Dec 2013, as well as abduction, killing, and sexual violence.

From January to March 2017, 252 incidents of **grave child rights violation** affecting an estimated 4,385 South Sudanese children were documented through the Monitoring and Reporting Mechanism (MRM).

Humanitarian access has been significantly hampered following the eruption of the conflict in Equatoria in 2017, an area in southern South Sudan.

Children also suffer deprivations during their flight to safety. In countries of asylum, refugee children continue to face significant protection challenges, such as **psychological distress** due to the violence they underwent or witnessed, and are at risk of sexual violence, and risk of re-recruitment.

Family separation is prevalent - for example 21 per cent of new child arrivals in Ethiopia - and exposes children without appropriate care arrangement to protection risks, as well as psychological distress such that children lose hope of finding their families.

Separation has often occurred as a result of the conflict, but can also occur where families' coping mechanisms are diminished, and parents or caregivers find themselves unable to support children in their care.

Finding appropriate alternative care arrangements for children and ensuring access to essential services remains difficult. The sheer number of unaccompanied and separated children, combined with insecurity and access challenges in South Sudan, make family tracing extremely challenging.

Out-of-school girls are at higher risk of **early and forced marriage, unwanted pregnancies, and sexual exploitation. Adolescents and youths are increasingly exposed to risky behavior** such using drugs or alcohol, involvement in delinquency such as small gangs. This can be due to lack of prospects and opportunity, but can also be a coping mechanism to deal with stressful or traumatic events. Children of all ages are strongly affected by the stress levels and situation of their adult caregivers.

Regionally, 54 per cent of the 1.3 million South Sudanese refugee children and adolescents were **not in school** in 2017, exacerbating protection risks. Schools are often overcrowded and very few children can access secondary education. Due to lack of space and trained teachers, enrolment and retention rates for primary school are less than 70 per cent in some locations, and less than 20 per cent for secondary education. The prolonged situation is increasing the risks that children will not return to formal education, escalating their vulnerability to protection risks.

Chronic underfunding has hampered access to even basic services for refugee children, despite considerable efforts across the region to provide specialized child protection services, life-saving assistance, and access to quality education. Given the sheer number of affected children, child protection partners are stretched to meet the minimum standards, to ensure individual care and follow up for all children at risks.
This prolonged situation is exacerbated by the fact that communities hosting refugees are themselves in a precarious socio-economic situation and suffering from limited access to basic social services and livelihood opportunities.

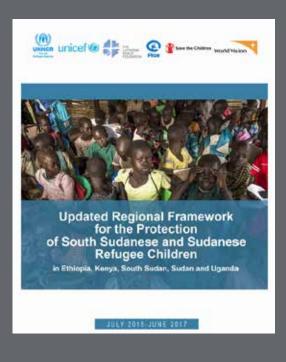# Current Child Protection Response & Remaining Gaps

Child protection actors in countries of asylum have made significant efforts in strengthening identification and referral of children who face protection risks, providing specialized services such as Psychosocial Support (PSS) and alternative care, family tracing and reunification, as well as facilitating access to birth registration.

Most operations have been successful in establishing mechanisms which allow the early identification and referral of UASCs and other children at risk, through the establishment of a child protection desk at the registration or reception points, as well as training of registration staff to identify UASCs and other at-risk children, using child-friendly procedures. Nevertheless this remains a challenge due to the high number of refugee arrivals in 2017, particularly in Ethiopia, Sudan, and Uganda. Furthermore, limited resources have impeded the deployment of child protection personnel at the border to conduct on-the-spot assessment of protection risks among newly-arrived children.

Awareness-raising among refugee communities on birth registration has proven to have significantly contributed to the numbers of refugee children obtaining birth certificates.

In Ethiopia, the recently-established National Civil Registration and Vital Statistics (CRVS) system has been made accessible for refugees countrywide, as a result of commitment by the Government of Ethiopia.
Across the region, case management has been substantially strengthened, including through the establishment of best interest processes. However children at heightened risk are not always prioritized, which hinders timely referral to appropriate care and services of children victims of protection violations.

REGIONAL STRATEGIC CHILD PROTECTION PRIORITIES 2015-2017:

Updated Regional Framework for the Protection of South Sudanese and Sudanese Refugee Children in Ethiopia, Kenya, South Sudan, Sudan and Uganda

JULY 2015-JUNE 2017

1. Refugee girls and boys are registered at birth
2. Adolescent and youth are provided with opportunities to develop their full potential, their critical thinking and their emotional wellbeing
3. Girls and boys are protection in their home and in the communities thanks to engagement of the communities in child protection
4. Girls and boys with specific needs are identified and receive preventive, appropriate, timely, responsive interventions using an effective case management system
5. Girls and schools with specific needs are identified, referred and supported using functional referral mechanisms at the school
6. .Refugee boys and girls have non-discriminatory access to national child protection and social services

While initial monitoring of individual child protection cases is conducted, follow-up of these cases is often significantly hampered by the large and constantly increasing caseload, lack of prioritization of the high caseload, and an insufficient number of case workers.

Technical skills of case workers are still weak: the protection response is still very focused on UASCs, while other protection needs are yet to be addressed more systematically.

In Kakuma, Kenya, a short initial screening process has been introduced to quickly capture a child's situation upon arrival, or for cases identified in the community, allowing for the identification of priority cases which require a full child protection assessment, and also cases which could be followed and monitored through the community. This system aims to alleviate the caseloads of case workers, allowing them to focus on children in need of intensive case management.

The placement of UASCs in foster or kinship care has been an important area of focus, and is recognized as an area of success in spite of remaining challenges, such as difficulty in providing alternative care to teenagers, and limited opportunities for sustainable livelihoods and self-reliance for caregivers.

As the number of children to be placed in foster care is growing, along with the refugee flow, there is continuous need to expand and strengthen monitoring mechanisms in order to ensure early identification and mitigation of protection risks.

In some operations, effort has been made to link the refugee child protection response with the national child protection system, e.g. through the engagement of local government authorities in the best interest procedures. To ensure the sustainability of the response, and in view of the protracted situation, more needs to be done to advocate for increasing access to national social welfare and child protection services, and to strengthen the capacity of government child protection.

In Sudan, partnership with Ministry of Social Welfare has been prioritized in child protection response as a result Social Workers from the Ministry are mobilized for the protection and care of children facing protection risks in most of refugee hosting states.

In Sudan, the National Commission for Child Welfare (NCCW), in coordination with members of the family tracing and reunification (FTR) network, coordinates and facilitates FTR processes. South Sudanese Refugees, particularly UASCs and their families, started benefitting from the well-established family tracing system of the NCCW in early 2017.

UNHCR and partners conduct individual assessment of UASCs at the earliest possible stage of refugee influx in order to identify protection needs and develop appropriate responses. This includes family reunification, which is generally considered in the best interests of separated children.

The role of the NCCW, Commissioner for Refugees (COR), UNHCR and non-governmental organizations does not end with the reunification: the family/parents are supported to enable them to provide care and protection for the child. In Sudan, the documentation requirements prior to register the birth of a child born in Sudan have been waived in order to facilitate access to birth registration for refugees and asylum-seekers.
Across operations, several initiatives have been carried out to cover the needs of adolescents and youths in the areas of peace-building and peaceful co-existence, preventing violence through art performance, sport and community dialogue.

Some operations have developed a youth strategy but often the particular needs of adolescent girls are not sufficiently considered. Programmes are still limited in their outreach/coverage due to lack of funding and there is a need for training and specialization of staff on psychosocial counselling, as mental health is one of the major issues among adolescent and youth.

In Kakuma, partners have focused on increasing the number of youths and adolescents who are actively participating in their own protection through targeted programmes. These include building capacity for adolescents and youth to respond and report on protection issues through channels including iMonitor, KASI, and WhatsApp communication trees.

Community-based structures have been established in most operations as part of the child protection response: child protection committees, youth groups, and community development groups, among others. These structures contribute to identification and referral of children exposed to risks, and organized sensitization sessions on child protection issues prevailing in the context. However, limited resources has undermined the effective functioning of these structures as well as the mobility of Child protection committee members (spontaneous return to South Sudan or relocation to other settlements).

Efforts need to be made, however, to link these formal structures (established with the support of international organizations) both to each other and to informal community structures with which humanitarian organizations should engage in the protection of children, as these structures can also be gate keepers for harmful traditions such as child marriage.

In DRC and CAR, given the volatile security situation and logistical constraints on access to the refugee population, increasing efforts have been made to enhance the integration of refugees including children into local services, such as schools, and ensure provision of assistance to host communities.

The high level of family separation and the volatile situation in South Sudan have put strains on existing family tracing and reunification mechanisms for UASCs. In spite of this challenge, a significant number of children have been reunified within countries. Child protection actors have been constantly exploring ways to address this issue across the region.

In Gambella, Ethiopia, a child verification and reunification tracker was developed to facilitate rapid reunification. Child protection actors share the tracker with UNHCR twice a week for consolidation, and UNHCR share the consolidated version back to partners. When cases match, self-reunified cases can be formalized. The child protection agencies were able to reunify 328 children between camps in 2017.

Family tracing and reunification mechanisms are suffering from lengthy procedures and unclear roles and responsibilities of child protection actors increasing the length of separation from caregivers. In 2017, the focus has been on strengthening in-country capacity and mechanisms to provide FTR and restoring family links (RFL), increasing engagement with community structures and strengthening the broader case management system in-country to support tracing and reunifications efforts.

To this end, a FTR roving expert was deployed to assess the FTR needs of the children in Uganda, Kenya, and Ethiopia - as well as the FTR mechanisms already in place - identifying gaps and ways to strengthen them. The next steps are highlighted in each country plan under the regional child protection priority "Address family separation"

Community-based child protection

child protection actors will continue to seek the active involvement of communities, both in terms of prevention and remedies to child protection risks. This will build on existing community-based structures and ensure stronger linkages, which will facilitate identification and referral of children at risks.

Links with National Child Protection Systems

stronger linkages with national child protection systems will promote a more coordinated approach to overall child protection, and gradually increase national government capacity for child protection in emergencies, so that national government can better respond to the needs of host communities and refugee children. Agencies and child protection actors will work more closely with national and district government authorities using the CRRF approach as a platform for inclusion of refugee children in the national agenda. Investment in the national child protection system will facilitate stronger social welfare systems, particularly in the areas of legislation, services, case management and the skill level of the social welfare workforce.

Partnership & Coordination

partnerships will continue to be leveraged with host governments, civil society leaders, refugees, and host communities to actively contribute to the child protection response. This requires proactive and productive coordination with all actors in the humanitarian response at local, national, and regional levels.

Expand the child protection network

Expand the child protection network of key interlocutors, to build stronger relationships between agencies and the host governments, other key-decision makers, academics, researchers, and other international/regional institutions. Work with a wide array of partners to ensure that national policies and legislation are inclusive of refugee children and their families.

Advocacy

Increase the visibility of the South Sudanese child refugee situation, while incorporating adolescents' and children's views. Provide governments with evidence-based data, and work with governments to encourage and support the inclusion of refugee children into their national system.

Multi-sectorial approach

All sectors can proactively contribute to reducing protection risks for children and ensure that their programmes will not lead to unintentional harm to children. Cross-sectoral collaboration and coordination will help to ensure continuum of care to address children's needs and prevent escalation of risks. It will aim at creating a comprehensive system that is responsive to the needs of families and children.

Learning and capacity building

Sharing lessons learnt and good/promising practices between country operations.
Building capacity of child protection actors to better prevent risks and respond to child protection needs.

Regional Approach and support

Promote regional approaches to child protection response, as outlined in this framework. The Regional Child Protection Network will support the implementation of the framework and thereby promote cohesive child protection responses through regional coordination, technical support, cross-border information-sharing, capacity-building, and advocacy.

Regional Child Protection Priorities 2018-2019

Three regional child protection priorities were identified during the regional inter-agency workshop held in Nairobi end of 2017 in order to enhance the current child protection response and move towards a more systematic and coherent response. The regional priorities complement existing country-level priorities for 2018:

1. Support the psychosocial wellbeing and resilience of adolescents and youths
2. Ensure that at-risk children have access to care and protection services
3. Address family separation and promote family-based alternative care

UNHCR and child protection partners have developed country-specific interventions to address the needs under the three identified regional child protection priority areas. Countries have also adopted specific targets and common indicators to monitor progress across the region.

Priority 1

Support the psychosocial wellbeing and resilience of adolescents and youths

Equipping adolescents and youths with skills, knowledge, information, and structures which will help them to cope with the impact of the crisis. Also support psychosocial well-being and resilience, and promote positive coping strategies to enable them to become agents of change.

Indicator: # of children with specific needs receiving individual case management

DRC	ETHIOPIA	KENYA	SUDAN	UGANDA
Develop inter-agency CP case management SOPs with reference to national policies and referral pathways of service providers. Train case workers on the SOPs and monitor its implementation. Train non CP stakeholders on safe identification and referral of children with protection risks	Strengthen capacity of para social workers/ refugee social workers through mentoring and supportive supervision. Promote professional development, staff wellbeing and learning opportunities i.e. increase staff retention. Make a particular investment in female workforce to ensure gender balance amongst social workers	Design and initiate child protection awareness programmes focusing targeting refugee and host community children. Establish a child-friendly complaints mechanism to proactively reach out to children of different ages, sexes, abilities and ethnicities	Develop inter-agency CP case management SOPs in line with the national child protection system and train child protection actors on it including government case workers. Conduct capacity needs assessment of service providers and develop supervisory and coaching skills training for caseworkers/social workers	Strengthening case management through review, update and dissemination of child- sensitive referral pathways, SOPs and other tools; and through internal case management meetings / case conferencing.

Pathway 1

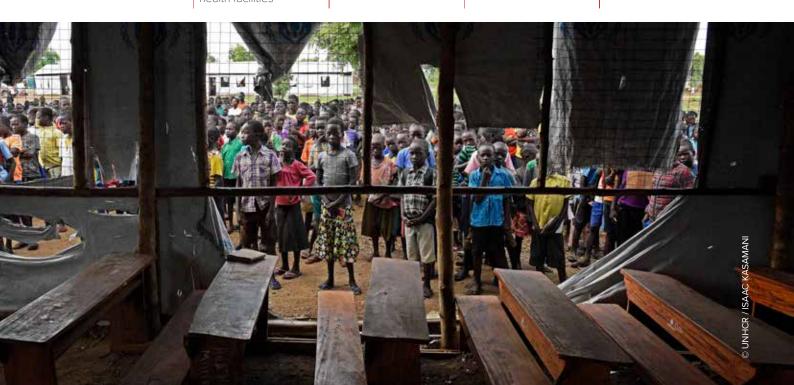|					
Pathway 2	Strengthen the CBCPNs inclusive of Youth) building on existing child welfare structures in the community taking into account their cultural practices, social and religious norms. Key Child Protection Network members will serve as resource persons to establish new CBCPNs (including CPC and recruitment of foster families) and build capacity of the newly identified networks members.	Strengthening early detection of children with protection needs at the border point and prioritization of children at risks beyond UASC. Increase community involvement in providing remedies and monitoring children at protection risks (low risk). Provide training sessions to non CP actors on safe identification and referral of children at protection risks	Strengthen the identification, assessment, referral and follow-up of children at risk using the vulnerability score/risk matrix. Harmonization of inter-agency data on child protection and support of ProGres and CPIMS+/CPIMS	Establish/strengthen the CBCPNs (inclusive of Youth) building on existing child welfare mechanisms in the community. Conduct consultations in the communities including informal clan leaders to identify and address gaps, building on promising practices in the various setting. Include them at all levels of planning.	Strengthening monitoring and follow-up of identified children-at-risk; including those in alternative care arrangements, through community-based mechanisms to monitor UASCs.
Pathway 3	Mainstream child protection into sectors (e.g. SGBV, education, livelihoods, WASH, health and nutrition, etc.). Train communities on child protection concerns and disseminate key child protection messages, including on birth registration and documentation in the community. Develop a contextualized information package	Promote and facilitate the recently launched National Civil Registration and Vital Statistics (CRVS) system now made accessible for refugee children through: i) community sensitization on the importance and process of registering children; ii) community outreach on retroactive issuance of birth certificates for children born out health facilities, ii) advocate for access to birth certificates for children born outside of health facilities	Improve capacity of child protection staff (national and refugee), local authorities to effectively respond to children with specific needs through training on BIP. Train CP community structures on safe identification and referral and child participation. Train national authorities in child friendly interview techniques	Mainstream child protection across sectors (e.g. SGBV, education, livelihoods, WASH, health and nutrition, etc.) through RWG and Protection TAG. Develop contextualized Child Protection awareness raising package to disseminate key child protection messages within the communities, e.g. birth registration and documentation.	Building capacity of case workers from agencies, local authorities.

Priority 2

Ensure that at-risk children have access to care and protection services

Procedures should be streamlined, and cases prioritized, in order to maximize limited human and financial resources. Also plan for capacity-building and mentoring of child protection actors and frontline workers in case management.

Indicator: # adolescents participated in targeted programmes

	DRC	ETHIOPIA	KENYA	SUDAN	UGANDA
Pathway 1	Explore partnerships with organizations providing specialized mental health care and psychosocial support to youth and adolescents. Establish CBMHPSS programmes- e.g. peer support and role models. Integrate PSS into other technical areas example Education, Livelihoods, Health.	Promote an integrated PSS programme to improve overall well-being of adolescents and youth (linkages with Health, Nutrition, Education, Livelihoods etc.) Develop joint plan to build capacity of CP actors ensuring a common approach to PSS. Build capacity of staff and stakeholders on MHPSS	Build the capacity of children and youth-related community-based structures (including those with disabilities) to effectively engage in child protection and decision making processes, for example, through the mentoring and training of Peace Connectors; supporting youth activities at the Youth Centres; facilitating the annual Youth Congress; and promoting girls-mentorship programs.	Establish Youth Centres to open Youth dialogue and recommend particular interventions.	Develop new targeted programmes and reinforce existing ones that promote participation of adolescent and youth and guarantees their empowerment, and resilience.
Pathway 2	Promote Youth Led initiatives; establishment of youth centres (occupational activities, sports, learning programmes etc.). Support communities into developing integrated programs for host and refugee community youths Work closely with Education sectors to offer out of school programmes such as ALP (Accelerated Learning Programme); Scholarships; distance learning, etc.)	Conduct stock taking exercise of adolescent programs and interventions with adolescent and youth to identify good practices and gaps to inform programming and diversify youth interventions. Build youth capacity to be active agents of change and to promote peaceful coexistence with host communities	Support adolescents and youth to access vocational training, employment opportunities including use of sports, creative arts and talent shows. Increase number of youth community/ business centres and raise awareness through unique platforms, including social media. Facilitate mentorship from young leaders in business, entertainment, sports and arts/talents	Promote integrated programs for host and refugee community youths; integrate PSS into other sectors, such as Education, Livelihoods, and Healthcare.	Establish/strengthen community-based PSS including in CFSs, and engage community (i.e. care givers, faith and opinion leaders, etc.) by building their capacities in providing PSS.

Pathway 3

Promote self-reliance opportunities for youths by facilitating the linkages between youth (human resources) and potential opportunity providers. Seek partnerships in an effort to support of secondary education of adolescents and youth.	Identify entry points to include refugee youth into the national system to access employment opportunities, education and vocational skills. Conduct assessment to feed evidence based advocacy and mobilize resources for adolescent and youth (donor priority). Identification and strategic strengthening of host community structures from which refugees benefit in the long term (e.g. Community Care Coalitions CCC)	Increase number of youth and adolescents actively participating in their own protection through: • life-skills training on behavioural change, sexual abuse, HIV and peace education; • Supporting youth-led protection initiatives including, focus groups discussions on harmful cultural practices; • Youth Awareness raising on early marriage, FGM, survival sex, recruitment into armed groups and substance abuse; • Build capacity of adolescents and youth to report and respond to protection issues through appropriate channels including iMonitor, Kasi, WhatsApp communication tree, and Field Post Counselling	The long-term plan will focus on Youth-empowerment programmes driven towards self-management; this should include full cycle economic programme interventions, such as promoting self-reliance opportunities for youths by facilitating the linkages between youth (human resources) and potential opportunity providers (employment, in Sudan context-farming and livestock, etc.)	Advocate for increased access to quality secondary education through provision of scholarships and establishment and/or support of district vocational training programs.

Priority 3

Address family separation and promote family based care

to respond to the unprecedented scale and the increasing number of children becoming separated from their primary caregivers, child protection actors will continue to work on strengthening in-country mechanisms to support tracing and reunification, in particular through reinforced collaboration with ICRC, Red Cross movements, but also through investment in community-based mechanisms.

Indicator: # of children for which tracing has reached an outcome (positive or negative)
        # of UASC in appropriate interim or long term alternative care
        # of registered unaccompanied children in alternative care who receive regular monitoring visits

	DRC	ETHIOPIA	KENYA	SUDAN	UGANDA
Pathway 1	Strengthen early identification and referral of children with tracing needs upon arrival or at the transit point through: • CP presence at the reception site (if possible) • Child friendly procedures at reception/transit site • Training of registration staff, government and local partners on interviewing children to enable proper assessment of the needs	Improve early screening of UASC and identification of tracing needs through capacity building of registration staff in identification of UASC and child friendly interviewing and presence of child protection staff during registration at entry points Ensure child friendly procedures throughout the process including regular updates/feedback to children on existing FTR/RFL services	Set up a FTR task force and develop an inter-agency SOP on identification and referral of UASC for tracing Develop tools such as an inter-agency kobo toolbox to facilitate the identification and referral of children in need of tracing, including a referral form from the transit centre.	Set up info desk at reception sites to sensitize care givers on the risks of family separation and provide them with information on the FTR available services. Enhance the registration - early detection and assessment of children in need of FTR and ensure early referrals to FTR service providers (S/N SCCW)	Build Capacity/skills of case workers, community structures on FTR using the existing training packages developed by the Ministry of Gender. Involving the URCS/ICRC in relevant CP trainings including trainings on interviewing children to ensure child friendly procedures
Pathway 2	Increase awareness on FTR services through: • Establishing information desks at reception sites • Working with communities, leaders, to disseminate information on FTR services available, • Ensuring individual follow-up of UASC with partners with regular feedback to children on the status of their request	Strengthen coordination with key actors involved in FTR and review FTR mechanisms to clarify agencies roles and responsibilities, criteria to receive tracing requests, access to RFL services etc.) Simplify inter camps family reunification procedures and harmonise data to expedite the process	Mainstream family tracing prioritization as a discussion item in every inter-agency committee agenda (SGBV, Education, youth, CP working groups).	Assign one member as a FTR focal person within each community-based child protection network to facilitate sensitization on FTR services as well as to enhance the coordination between CP agencies/Social Worker and communities on FTR issues.	Streamline the referral system by identifying RFL/FTR focal points at field and central level within Child Protection Agency; and update and disseminate through trainings FTR Tools including SOPs and standardize messages.
Pathway 3	Strengthen field level coordination to clarify roles and responsibilities of child protection actors and agree on prioritization of FTR cases	Improve access to RFL services through increased awareness raising and dissemination of RFL services among humanitarian actors and community ; Engage communities to support family reunification	Support capacity building to CP actors involved in FTR and develop operation specific training tools (led by ICRC/RC)	Establish FTR task force to improve information sharing and coordination amongst the CP/humanitarian actors, to clarify roles and responsibilities	Support foster family with livelihood programmes Contextualise National/international frameworks for alternative care in refugee settlements;

Working together