

Key Humanitarian Indicators: Methodology and Definitions

Indicator: Number of children provided with child protection services

Purpose of Methodology Note

This methodology note aligns key humanitarian indicators across corporate planning and reporting processes at all agencies and organizations engaged in the implementation, monitoring and reporting of the Refugee Response Plan (RRP). Results should be interpreted, recorded and reported in the same way across the different planning and reporting platforms to ensure:

- Standard and comparable definitions of key humanitarian indicators at country, regional and global levels.
- External reporting of country, regional and global results is harmonized.

This methodology note provides guidance on the tracking and aggregation of data reported by all operations for the indicator on the number of children aged 0-17 provided with child protection services and interventions through RRP-supported programmes.

NB: The unit of measurement of the RRP indicator is a *number*.

What the Indicator Tracks

This indicator tracks the number of all girls and boys aged 0-17 who were provided with child protection services through RRP-supported programming during the reporting period. This indicator is intended to provide the agencies and organizations implementing the RRP with insight into the strength and reach of programmatic interventions for children. **This includes accompanied children, as well as unaccompanied and separated children.**

The [Child Protection Minimum Standards \(CPMS\)](#) issued by [The Alliance for Child Protection in Humanitarian Action](#) include a requirement for all those working in humanitarian settings to 'protect children from violence, abuse, exploitation and neglect and provide benchmarks. Children's survival, well-being and healthy development are seriously at risk in humanitarian settings.

While child protection actors play a critical and central role, **all sectors need to be involved in preventing and responding comprehensively to the risks and vulnerabilities that affect girls and boys in crises** (e.g., Education, Early Childhood Development, Health, Nutrition, WASH, Justice).

Actions need to be embedded in rights, informed by evidence, measurable in their results and well-coordinated. It is also essential to strengthen the formal and informal systems that will continue to protect children after the emergency response is over.'

The **CPMS** have been developed to support child protection work in humanitarian settings by:

- 'Establishing common principles between those working in child protection.
- Strengthening coordination between humanitarian actors.
- Improving the quality of child protection programming and its impact on children.
- Improving the accountability of child protection programming.

- Defining the professional field of child protection in humanitarian action.
- Providing a synthesis of good practice and learning to date.
- Strengthening advocacy and communication on child protection risks, needs and responses.’

In line with the [CPMS](#) *child protection is the prevention of and response to abuse, neglect, exploitation and violence against children*. ‘The objectives of humanitarian action are to save lives, alleviate suffering and maintain human dignity during and after disasters, and strengthen preparedness for any future crises. Humanitarian crises can be caused by humans, such as conflict or civil unrest; they can result from disasters, such as floods and earthquakes; or they can be a combination of both. Humanitarian crises often have long-lasting, devastating effects on children’s lives. The child protection risks children face include family separation, recruitment into armed forces or groups, physical or sexual abuse, psychosocial distress or mental disorders, economic exploitation, injury and even death. They depend on factors such as the:

- Nature and scale of the emergency
- Number of children affected
- Sociocultural norms
- Pre-existing child protection risks
- Community-level preparedness
- Stability and capacity of the State before and during the crisis.

Child protection actors and interventions seek to prevent and respond to all forms of abuse, neglect, exploitation and violence. Effective child protection builds on existing capacities and strengthens preparedness before a crisis occurs. During humanitarian crises, timely interventions support the physical and emotional health, dignity and well-being of children, families and communities. Child protection in humanitarian action includes specific activities conducted by local, national and international child protection actors. It also includes efforts of non-child protection actors who seek to prevent and address abuse, neglect, exploitation and violence against children in humanitarian settings, whether through mainstreamed or integrated programming. Child Protection in Humanitarian Action promotes the well-being and healthy development of children and saves lives.’

For guidance on child protection principles, approaches, and monitoring and evaluating quality practices in implementation, please refer to the [CPMS](#), which includes links to many useful resources to guide the development, implementation and monitoring of child protection services and interventions (such as on [unaccompanied and separated children](#) or on [case management](#)).

NB: Child protection services, interventions and mechanisms will vary across operations and so will service delivery approaches, which may include, for instance, outreach and mobile services, static services, the provision of information and advice, and/or referrals.

Some commonly reported child protection activities:

- # of children supported with specialized child protection services (*e.g., family reunification and/or alternative care arrangements for unaccompanied and separated children*)
- # of children provided with community-based child protection services (*see Key Definitions*)
- # of children provided with recreational child protection services (*e.g., children who are at risk may be eligible for a range of sport and other recreational activities to improve their wellbeing and help them learn, grow, and be part of their community*)
- # of children at risk identified and referred to specialized child protection services
- # of children who have received individual case management

- # of children assisted in Blue Dots
- # of children assisted in other safe spaces, protection and support hubs (for countries without Blue Dots)
- # of children accessing mental health and psychosocial support
- # of children benefitting from communication campaigns or advocacy activities on child protection.

NB: Mental health and psychosocial support (MHPSS) is an activity commonly reported under this indicator and an integral activity of child protection services (see [CPHA Standard 10: Mental health and psychosocial distress](#)). Children provided with MHPSS services by staff and associates working in child protection should be counted and reported under this indicator (as this indicator covers all child protection activities under the response).

Key Definitions

- **‘Child’:** In line with [Article 1 of the Convention of the Rights of Child](#) a child means every human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier.
- **‘Child protection in humanitarian action’:** The prevention of and response to abuse, neglect, exploitation and violence against children in humanitarian action. ([Minimum Standards for Child Protection in Humanitarian Action, 2019](#))
- **‘Community-led child protection’:** Approaches that are led by a collective, community-driven process rather than by an NGO, UN agency or other outside actor. ([Minimum Standards for Child Protection in Humanitarian Action, 2019](#))
- **‘Unaccompanied children’:** (also called unaccompanied minors) are children, as defined in article 1 of the Convention, who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so. ([CRC General Comment No. 6, p. 6](#))
- **‘Separated children’:** are children, as defined in article 1 of the Convention, who have been separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members. ([CRC General Comment No. 6, p. 6](#))
- **‘Humanitarian context’:** any circumstances where humanitarian needs are sufficiently large and complex to require significant external assistance and resources, and where a multi-sectoral response is needed, with the engagement of a wide range of international humanitarian actors. Humanitarian context relates to interventions covered by a response plan, e.g., Regional Response Plan (RRP). ([CCC | SCOPE | Humanitarian UNICEF](#))
- **‘Referral’:** the process of directing a child or family to another service provider because the assistance required is beyond the expertise or scope of work of the current service provider. Community members, professionals in contact with children (teachers, police, etc.) and other humanitarian actors can direct a child or their family to social services or child protection workers in cases of suspected or actual abuse, neglect, exploitation or violence against children. Caseworkers in a case management system also make referral to request formally services from another agency (e.g., cash and voucher

assistance, health care, etc.) through an established procedure and/or form. ([Minimum Standards for Child Protection in Humanitarian Action, 2019](#))

- **‘Risk’:** In humanitarian action, risk is the likelihood of harm occurring from a hazard and the potential losses to lives, livelihoods, assets, and services. It is the probability of external and internal threats occurring in combination with the existence of individual vulnerabilities. Risk is mitigated by protection against physical hazards, reduction of structural and non-structural risks, resources, and skills for disaster- preparedness, and resilience and coping skills. For child protection, risk refers to the likelihood that violations of and threats to children’s rights will manifest and cause harm to children. Defining risk takes into account the type of violations and threats, as well as children’s vulnerability and resilience. ([Minimum Standards for Child Protection in Humanitarian Action, 2019](#))
- **‘Blue Dot’:** The [Children and Family Protection Support Hubs \(Blue Dots\)](#) provide a minimum set of key child protection and social service delivery and referrals for children and families. Blue Dot Hubs will be implemented by UNICEF, UNHCR and other relevant partners. The Blue Dots also serve the critical function of sharing reliable, updated and accurate information with new arrivals, including on services, documentation and family reunification. The information is provided through multiple channels, in accessible and child-friendly formats, different languages, and in online/digital form. The Blue Dots are locations where professional, trained social workers, psychologists, counsellors, and legal aid providers are available to support identification of urgent social service and protection needs and ensure that those needs are addressed. Such services can also provide support to others with specific needs, such as victims of gender-based violence and persons with disabilities. The Blue Dots build on the government’s national protection system and are linked to the national and local referral pathways and services.

Method of Calculation

Number: Count the total number of girls and boys aged 0-17 in humanitarian situations who were provided with child protection services through RRP-supported programming during the reporting period.

NB: Child protection services, interventions and mechanisms will vary across operations.

Each operation to outline the services, interventions and mechanisms in their context and set up a calculation mechanism of the total number of children targeted through child protection services.

NB: Operations need to mitigate the risk of double counting. Double counting can occur in different forms, for instance, when the same person is counted for the same service by two or more different implementing partners, or when several different implementing partners count the same service site. Strong planning and information management systems are the best approaches to mitigate double counting, and monitoring registration allows for each person to be identified and accounted for. However, as systems strengthening may take time and where registration is not taking place, other mitigation strategies should be discussed and agreed upon with implementing partners. There is no blueprint for mitigating double counting, but there are different strategies that partners can apply. The choice of strategy depends on a variety of factors including the form of double counting, the information management capacities of the partners, whether mobile or static services are provided, etc. (For more on double counting, see [MEASURE Evaluation, 2010](#))

Data sources:

The data source at the country level includes administrative data (administrative records of public agencies) including, but not limited to, child protection, child welfare and social services. Data sources further include agencies' humanitarian performance monitoring, data from implementing partners (including field level activity monitoring and data collection tools), child protection and case management information management systems, etc.

Data disaggregation:

- **By sex:** female/male
- **By age**¹
- **By disability status**²
- **By citizenship**³.

NB: At country level further disaggregation is recommended, for example, by geographic location, and type of intervention/service.

¹ Ideally, the indicator should be disaggregated by individual age (i.e., age of the child on the day the data is collected). However, as this is not always feasible, the following age group categories are recommended: under 5 years, 5-9 years, 10-14 years, 15-17 years.

² UN agencies are promoting the use of the Module on Child Functioning, developed by UNICEF and the Washington Group on Disability Statistics (WG). While survey-based impact and outcome indicators are already including this disaggregation during data collection, this tool is not yet used in wider non-survey-based outcome and output indicators. Given the complexity of the Module on Child Functioning questions and analytics, a binary approach is currently used, e.g., in the joint UNHCR and UNICEF Blue Dot KoBoCollect monitoring tool, which is asking about a 'Person with a lot of difficulty walking, seeing, hearing, or remembering' (yes/no).

³ Within the context of the RRP, it is recommended to use at a minimum the following two categories: Ukrainian/other.