



Child Protection
Sub-Working Group

CP Sub-Working Group

8 April 2021

Agenda

- Short overview on FRRM sector analysis
- Confirmation on final changes to the Q1 reporting/ Q&A on Q1 reporting
- Thematic discussion 1 on CPC reporting and development of a standard framework on community engagement and alignment of CPCs
- AOB (including agreeing on thematic topics for 2021)



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FRRM Analysis CP Sector

- 1** Overall resolution rate was found to be 62%. Rates of resolution were found to differ drastically by sector, and by AGD groups. While some AGD groups received very poor rates of resolution, the converse is also true; youth and young adults, for instance, received much higher resolution rates for issues relating to education and food
- 2** The average resolution time was found to be 26 days. Evidence suggests women and girls experience longer resolution time compared to male callers. The most extreme difference can be found for Shelter, Sites, and NFIs, where the average resolution rate of women and girls is 41 days longer than that of men and boys.
- 3** Both resolution rate and resolution time improved dramatically in November 2019. Before November 2019, the resolution rate was 39% or lower, increasing to 76% in November. Likewise, the minimum average resolution time per month was 53 days before November, dropping to 22 days. These improvements coincident with an upgrade to the FRRM system, as well as significant training of focal points.

Categories



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CATEGORY 1

General feedback:
with no response
required.

*“The PoC call to thank
the helpline for the
great job and
assistance they are
providing to them.”*



CATEGORY 2

Information request:
Answered directly
using standard FAQs.

*“PoC would like to
know more about the
resettlement process
and how to get one
started.”*



CATEGORY 3

**Request for support
or complaint:**
Information and
referral provided.

*“PoC’s house is about
to collapse. She is
kindly requesting
construction
materials.”*



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CP summary

- Child Protection related calls received under categories 1,2,3
- 421 CP related referrals made to sector members aggregated by settlement
 - Closed cases **278**
 - unopened **64**
 - currently being actioned **79**
 - Overall satisfaction is low with regards to feedback and resolution time/ feedback

AGD lens



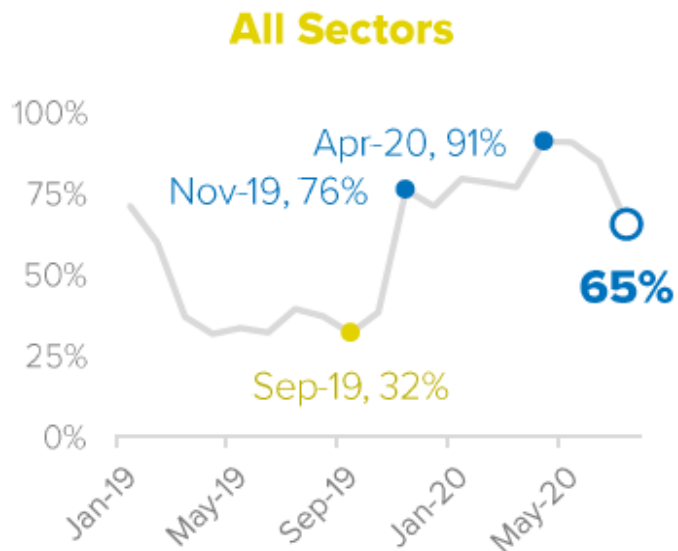
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- Women and children make up over 80% of the population but only make up 40% of all callers (women only make up 52%)
 - Less access for women and adolescents
 - Somali women have worse access to solutions

Child Protection Sector



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Child Protection (51%): Overall, it appears that the groups with the poorest resolution rates are callers of South Sudanese nationality (21%) and callers of the 0-17 age group (42%).

Sectors where no major differences between groups were apparent: community-based protection; and legal and physical protection.

Sectors where too few calls were made to be able to detect differences: SGBV, psychosocial support, RSD, logistics and transportation, energy and the environment, and PSEA.

Resolution time

OVERALL TRENDS

Female callers appear to have moderately longer average resolution times when compared to male callers, averaging 29 days to the 25 days waited by their male counterparts. Average resolution time is also strongly related to nationality, with minority nationalities waiting an average of 7 days, to the 38 days waited on average by callers of Burundian nationality. The 18-24 age group had the shortest average resolution time, at 14 days, while the 60+ age group had the longest, reaching 32 days. Figure 6 shows the average resolution times by gender, as well as by age and nationality.

Only three sectors had average response times less than the overall average of 26 days – general queries, food assistance, and education. The sectors having the longest average resolution times include WASH (86 days), Child Protection (71 days), SGBV (69 days), and Shelter, Sites, and NFIs (also 69 days).



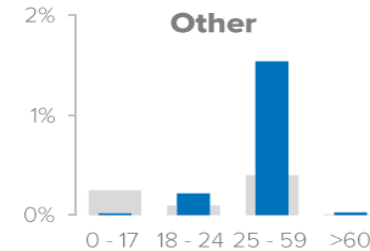
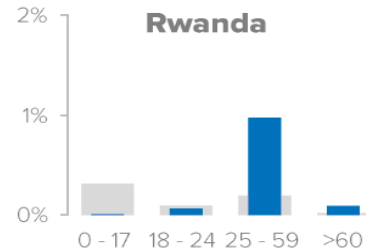
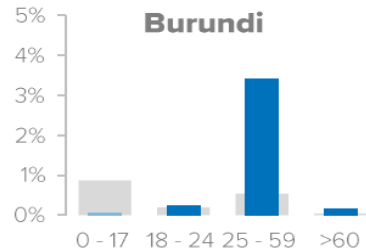
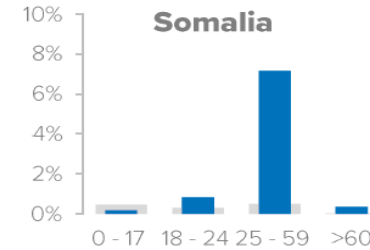
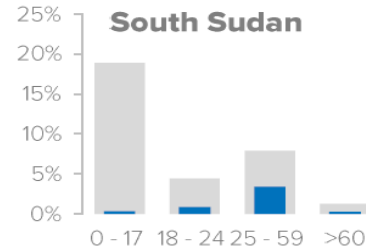
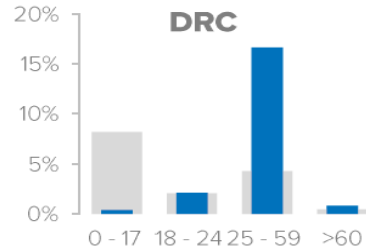
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Female callers by nationality and age



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FEMALE CALLERS

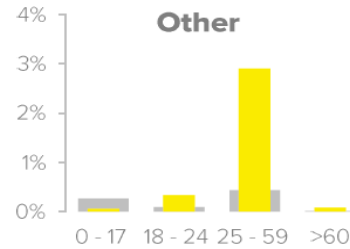
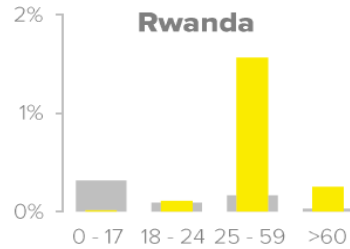
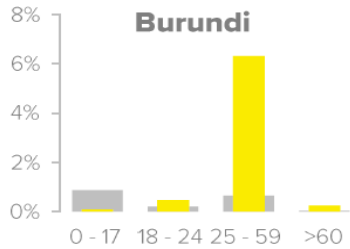
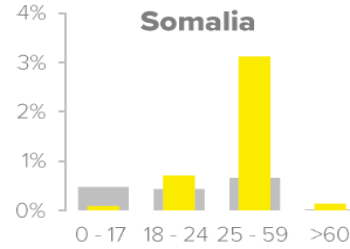
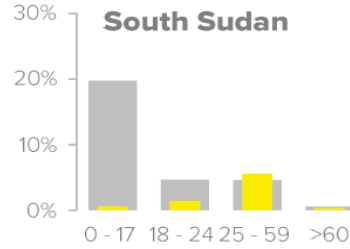
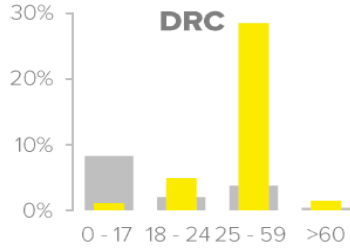


Male callers by age



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MALE CALLERS





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Access to FRRM

- POCs aged 0-17 are underrepresented across all genders and nationalities
- No group 0-17 had caller proportions reaching their age proportions
- South Sudanese female youth were highly underrepresented compared to # registered



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Reasons and conclusions

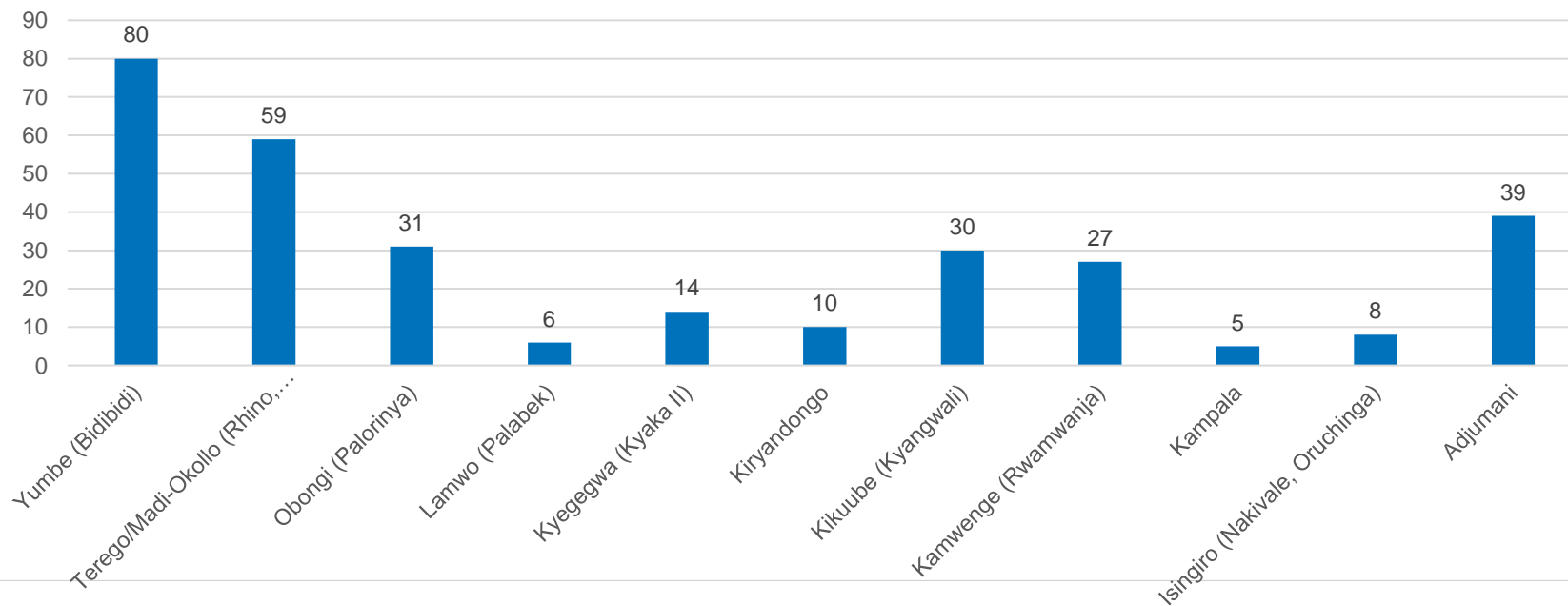
- Need to ensure children/ adolescents have access to feedback and complaints mechanisms (FRRM and beyond)
- Ensure that the sector reviews delays on responses and identifies causes and ways to ensure speedy responses
- Review by location delays in responses including the apparent gender disparity
- Ensuring that SSD and other populations have similar access and strengthen information sharing with marginalized groups

Case Management Analysis



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Number of case workers by location

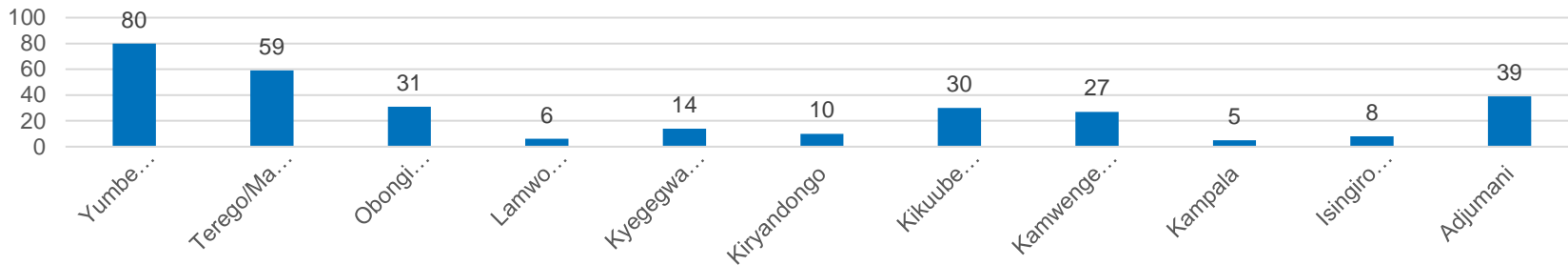


Case Management Analysis

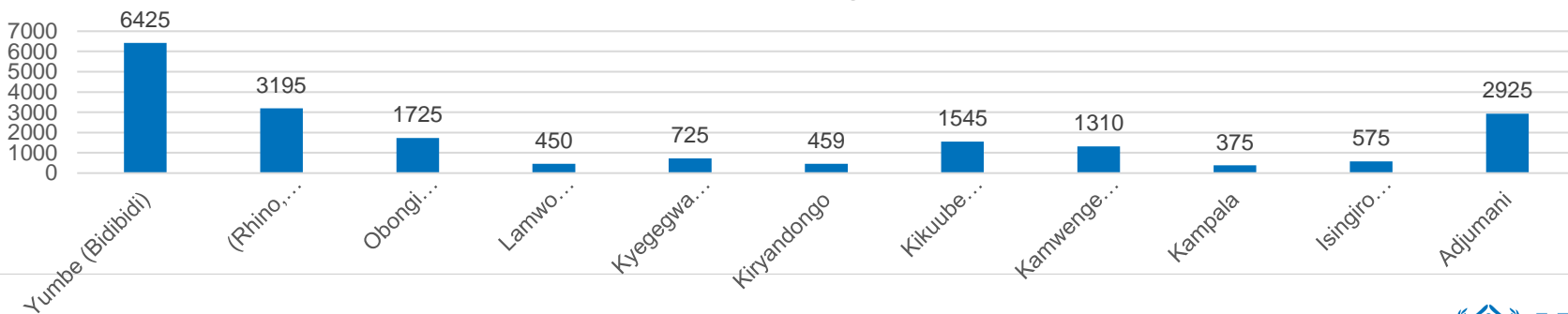


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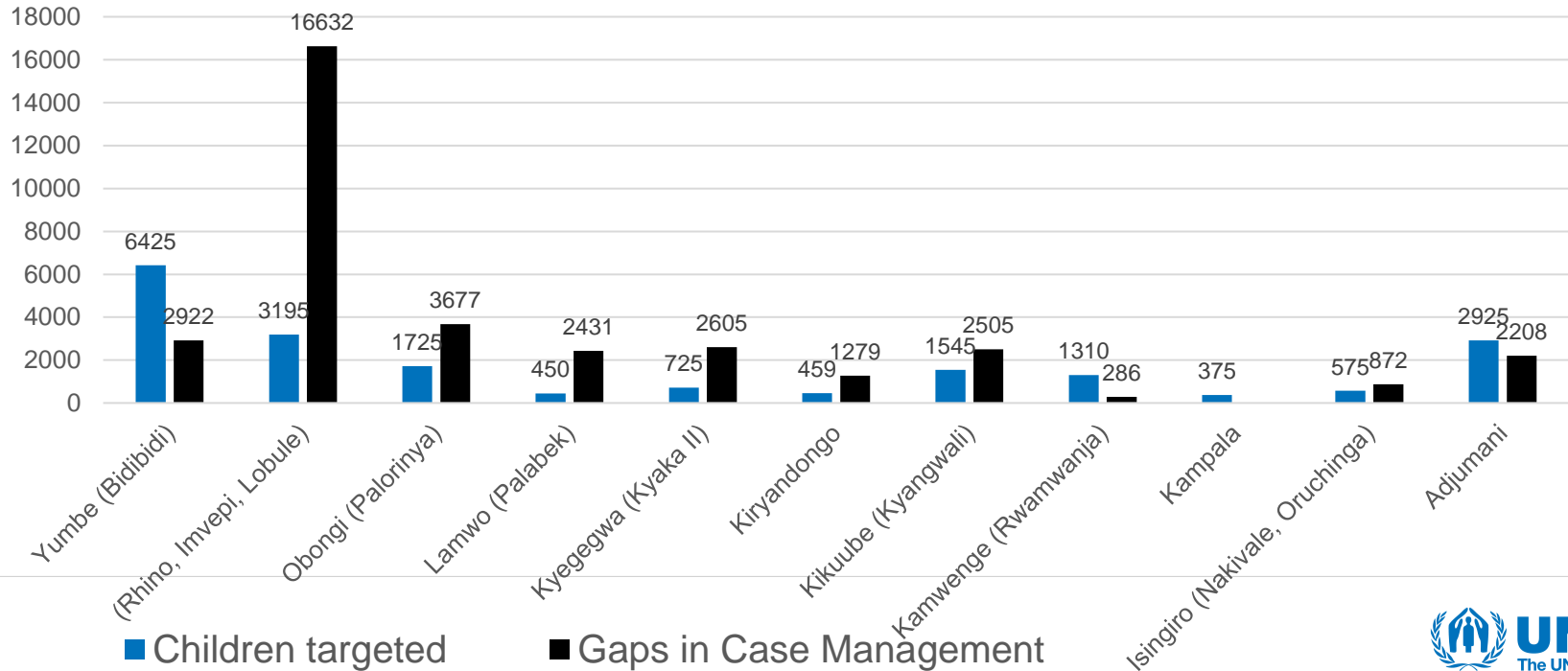


Children targeted



Case Management Analysis

Targets and Gaps



CP CM targets and gaps

Total number of children	848,164
Total number of children with reg SNCs	55,044
Average SNC for children	6%
Total # of CW required to address all needs	734
# of CW funded in 2021	315
Total # of gap in CW	482
# of children targeted with CM services	18,908
Gap/ children not reached	36,136
Average Gap in %	66%



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CP CM targets and gaps



- Case worker ratio: mostly 75 for 1 case worker per year (based on ratio of 25 at a given time)
- Some agencies not included
- Agencies with support activities are not included

Q&A on Q1 reporting

- Reporting now open until 19 April
- Revised slightly indicators for 2021
- Reporting will be maintained on monthly basis
- For Q1:
 - sector will use the # of BIAs per month to reflect on # of children receiving services
 - For January, add # number of cases currently managed by the case worker
 - Remaining month, count BIAs only
 - CP cases for whom a BID is conducted/ finalized
 - Volunteers and case managers separately reported
- Case Management ratio: 75 – to be discussed

What aspects of the CPC work are partners currently supporting?

➤ **Capacity building:**

- Through training, coaching, mentorship
- On technical areas including CP in general, alternative care, case management, community-based mediation
- On linkages with host community

➤ **Case Management:**

- Identification of cases, referral of concerns and cases, provision of basic support to children including UASC

➤ **Provision of key tools:** working tools and visibility items

➤ **Prevention and community mobilisation:**

- Supporting CPCs to conduct awareness raising and sensitisation on CP and VAC for communities
- Supporting CPCs to conduct parenting interventions and build capacity of parents on prevention and response
- Dialogue meetings

What are the challenges with regard to work with community structures (CPCs and para-socials)?

➤ **Strategic approaches:**

- No harmonised operational guidelines and standards
- No code of conduct
- Lack of clear roles/responsibilities and/or ToR
- Differential names and structures by which we call them despite doing the same work and same responsibility
- Linkage to formal government structures is weak
- No sustainability mechanisms for their work in place

➤ **Motivation & Support:**

- Expectations around financial incentives and no harmonisation/standardisation thereof
- No harmonised support, including material support
- If a more profitable opportunity is available, community volunteers leave their role
- Some partners provide financial incentives which impacts on the volunteer spirit of these roles

➤ **Capacity building:**

- Inconsistencies in who receives training and on what
- Different training packages used
- Limited capacities on CP

➤ **Coordination:**

- Different agencies working with the same CPCs
- Lack of a coordination structure for volunteers at the village level
- Wide geographical areas to cover

➤ **Language barriers**

➤ **High expectations from structures**

➤ **Fear amongst volunteers to report CP concerns due to possible repercussions**

How are partners engaging with para-social workers?

- **Case Management:**
 - Identification and reporting of CP concerns/cases
 - Regular home visits to children
- **Capacity building:**
 - Through the MGLSD para-social worker curriculum
 - On provision of PFA/PSS to children and parents
 - On conducting parenting support groups
 - Capacity building with support to the District Community Based Services Department
- **Coordination**
 - Supporting CDOs to conduct joint meetings with CPCs and para-socials
 - Para-socials support CPCs to conduct monthly meetings and mentorship of CPCs
 - Monthly meetings
 - Supporting alignment efforts to national structures with CPCs
- **Community mobilization**
 - Support to conduct awareness-raising on CP concerns
 - Conduct parenting sessions
 - They are our “eyes” in the communities

What steps could be taken to align CPCs with the government structure of para-social workers?

- **Document the para-social worker** strategy and assess whether this is relevant and good practice in the refugee context
- **Fundraise for alignment** and have a framework for realising this (if seen to be a good practice)
- Create **clarity amongst partners** on what para-socials are and how to support alignment
- *Joint recruitment of CPCs with the district officials; establish clear linkage with formal CP system*
- **Consultations:**
 - Sector-wide consultations including MoLG and MGLSD
 - Consultative process
- **Harmonisation and alignment of the structures**
 - Partners mentioned that the structures already undertake a similar work in host and refugee hosting districts
 - Align the name in line with the child policy
 - Clarify who constitutes a para-social? And who is a CPC? And how are they formed? How do they link with other structures?
 - Review membership compositions of both structures
 - Harmonise/ clarify coordination structures for informal volunteer structures (field, sub-national, national levels)
 - Harmonisation of roles, alignment of ToRs
 - Harmonise reporting lines
 - Engage the government structures in alignment process
- **Alignment of training** – use the MGLSD para-social worker training curriculum to standardize knowledge
- Harmonisation and **alignment of incentives** and kits to reduce expectations

Reporting CPCs



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- Reporting has been at agency level
- Suggestion on Reporting
 - One consolidated figure at settlement level on # of CPCs and members
- Further need to coordinate CPC activities at field level by area
 - Example: field coordinators and agencies map CPC numbers and needs and divide between agencies
 - Action required: map # of CPCs and members per location and per agency
- Agencies to establish programs that include support, visibility, reporting lines, TORs, CoC and capacity development activities for CPCs