



**Child Protection**  
Global Protection Cluster

# Review of Child Protection Positioning and Localisation

2018 HNOs and HRPs



Funded by  
European Union  
Civil Protection  
and Humanitarian Aid

# Survey Methodology

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



# Children in Need of Protection

- Globally, around **92,000,000** people are in need of Protection in humanitarian settings.
- Almost **50,000,000** of these are children (53% of total people in need of Protection).
- These children account for **32%** of the total 153,132,851 people in need of humanitarian support, globally.

# Disaggregation in HNOs

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

## BREAKDOWN BY SECTOR/SEX/AGE

NUMBERS IN MILLIONS	Male	Female	Children (0 - 4)	Children (5 - 17)	Adults (18 - 59)	Elderly (>59)	People in need of assistance
 Protection	6.5	6.8	1.5	4.0	7.2	0.6	13.3 M 

Example from Syria (p.23)

# Disaggregation - HRP

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

REPARTITION DES PERSONNES DANS LE BESOIN ET CIBLEES, PAR STATUT, SEXE ET AGE

	PAR STATUT						PAR SEXE & AGE	
	Refugiés	PDI's	Retournés	Communautes d'accueil	Rapatriés	Autre	% femmes	% enfants, adultes, pers. âgées*
PERS. DANS LE BESOIN	61,1K	188,3K	57,4K	219,8K	73,0K	500,0K	57%	51   44   5%
PERS. CIBLEES	61,1K	188,3K	39,4K	219,8K	73,0K	117,4K	57%	29   66   5%
BESOINS BUDGETAIRES	\$9,9M		\$15,7M					

\* Enfants (<18 ans), adultes (18-59 ans), pers. âgées (>59 ans)

Burundi HRP 2018 (p.22)

BREAKDOWN OF PEOPLE IN NEED AND TARGETED BY STATUS, SEX AND AGE

	BY STATUS					BY SEX & AGE	
	Refugees	IDPs	Host communities	Otherwise affected	Sector total	% female	% children, adult, elderly*
PEOPLE IN NEED	0.3M	1.9M	1.4M	2.8M	6.4M	56%	61   37   2
PEOPLE TARGETED	0.3M	1.2M	0.5M	2.0M	4.0M	56%	61   37   2
FINANCIAL REQUIREMENTS	\$28.7M		\$100M		\$128.7M		

\* Children (<18 years old), adult (18-59 years), elderly (>59 years)

South Sudan HRP 2018 (p.22)

# Disaggregation - HRP

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

## Child protection

In light of continuing grave violations of children's rights, 2.7 million children will be targeted for coverage under the Monitoring and Reporting Mechanism for both evidence-driven advocacy and referrals for services such as medical and rehabilitation for injured children. 682,268 children will be targeted for psychosocial support activities. 1.7 million children will be targeted for life-saving mine risk education messaging. 12,932 children and community members will be targeted for critical child protection services, which includes family tracing and reunification services for unaccompanied and separated children, victim assistance as well as case management.

Yemen HRP 2018 (p.37)

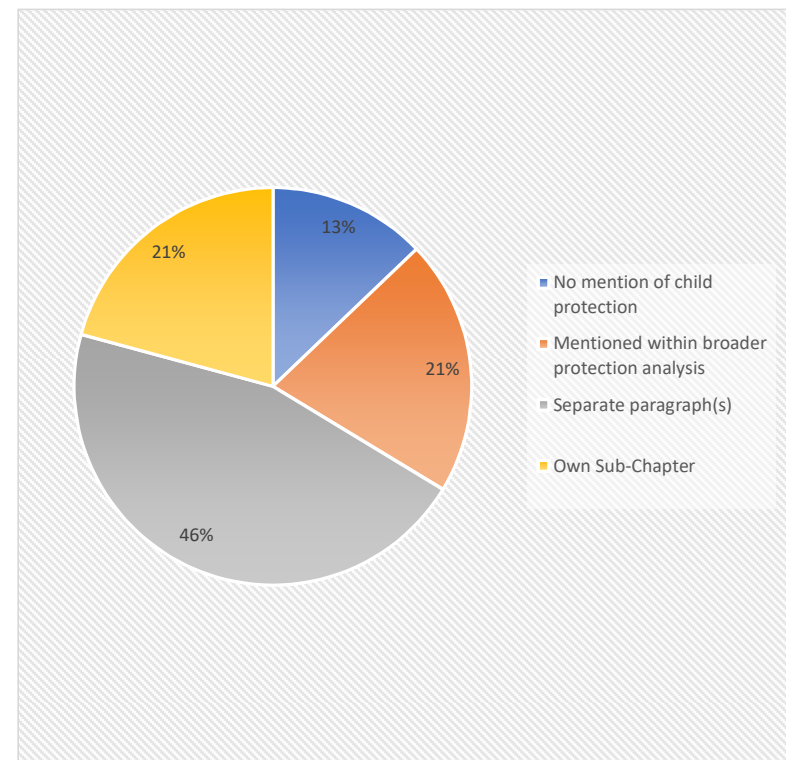
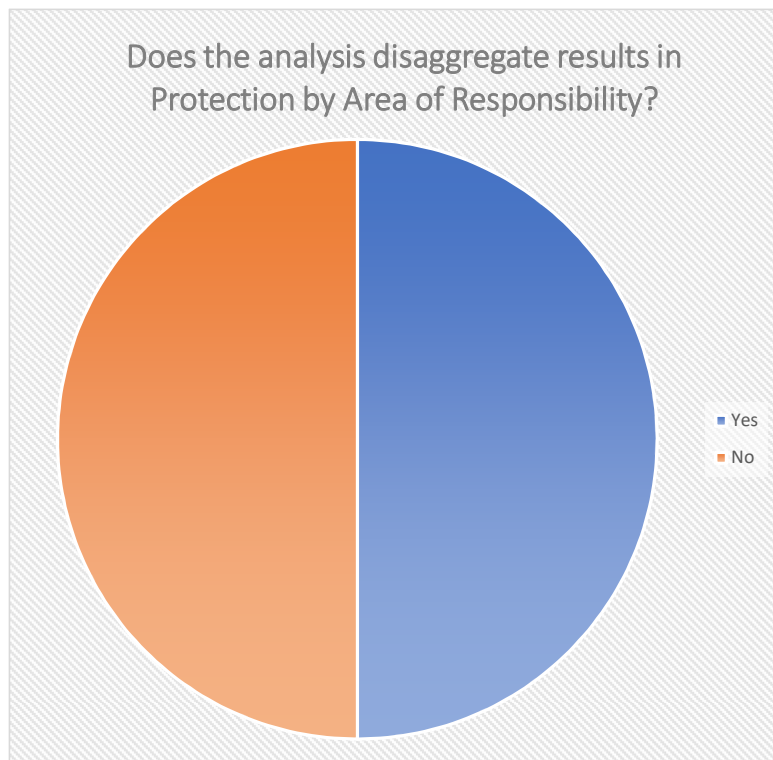
\* Les nombres de cette section correspondent à des sous-ensembles du secteur Protection

	PAR STATUT					PAR SEXE & AGE	
	Refugiés	Personnes déplacées internes	Retournés	Pers. accueillant des PDI ou des réfugiés	Autres personnes dans le besoin	% femmes	% enfants, adultes, pers. âgées*
PERS. DANS LE BESOIN	194K	158k	40K	315K	-	50%	100%
PERS. CIBLÉES	182K	118k	29K	104K	-	50%	100%
BESOINS BUDGÉTAIRES							

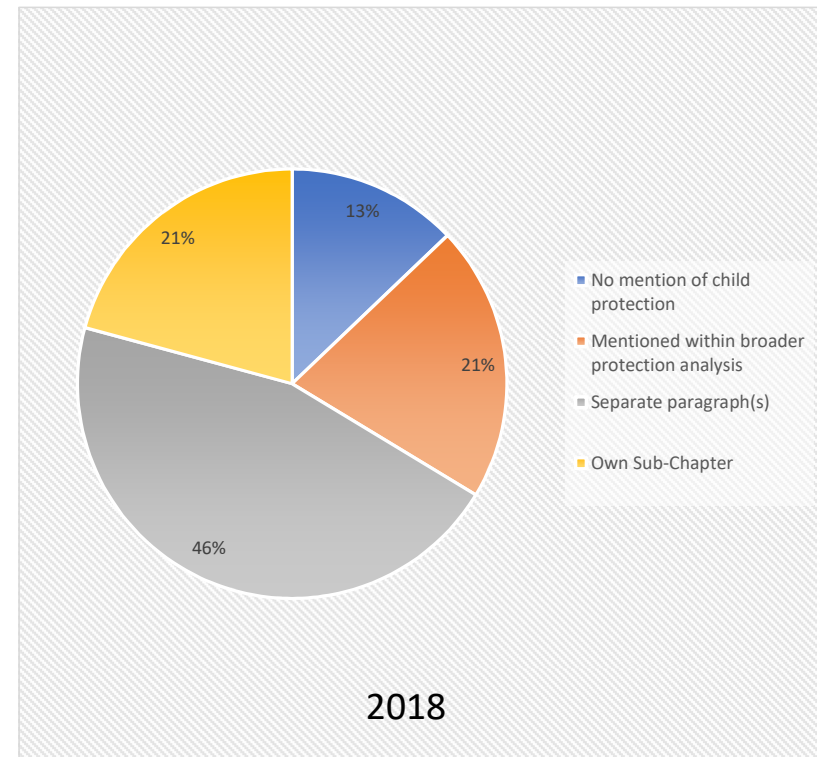
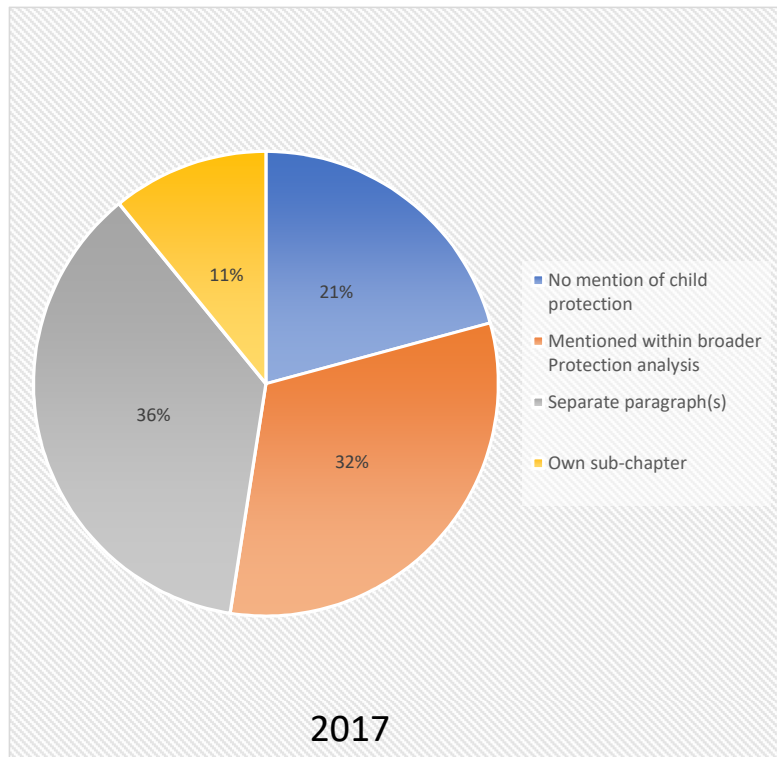
\* Enfants (<18 ans), adultes (18-59 ans), pers. âgées (>59 ans)

Cameroon HRP 2018 (p.23)

# Positioning of CP in the HNOs

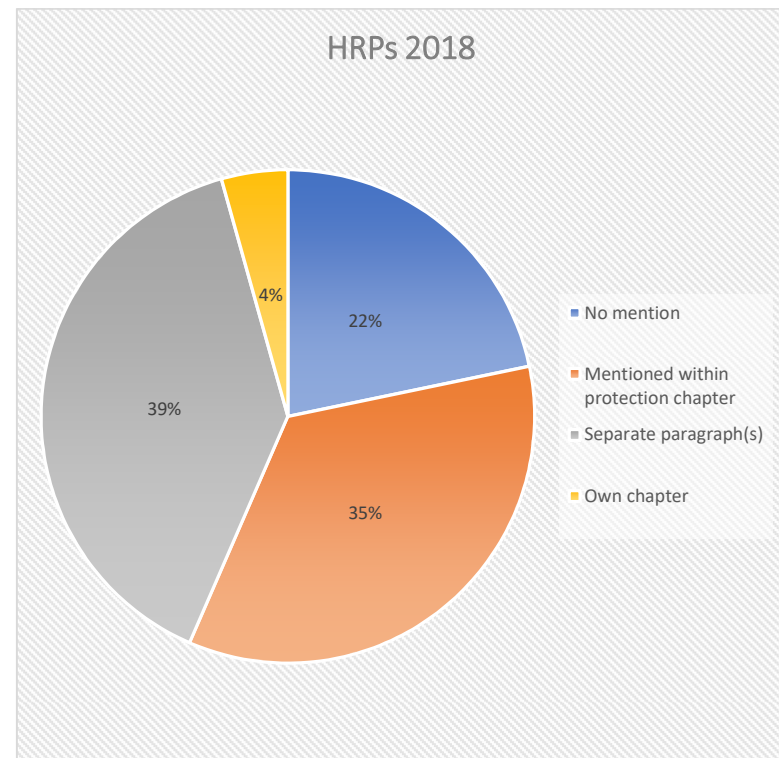
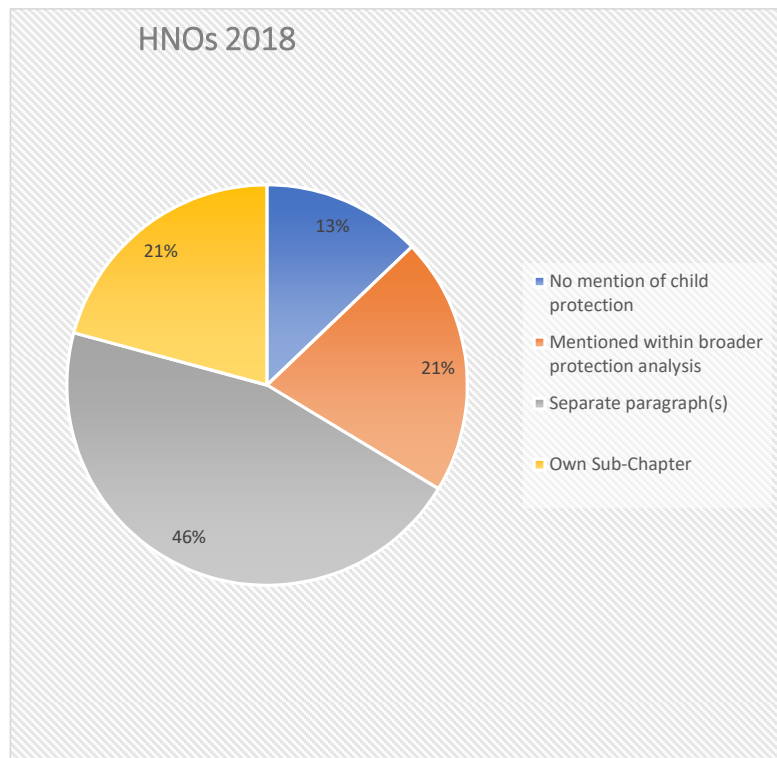


# Comparison of CP Positioning in HNOs

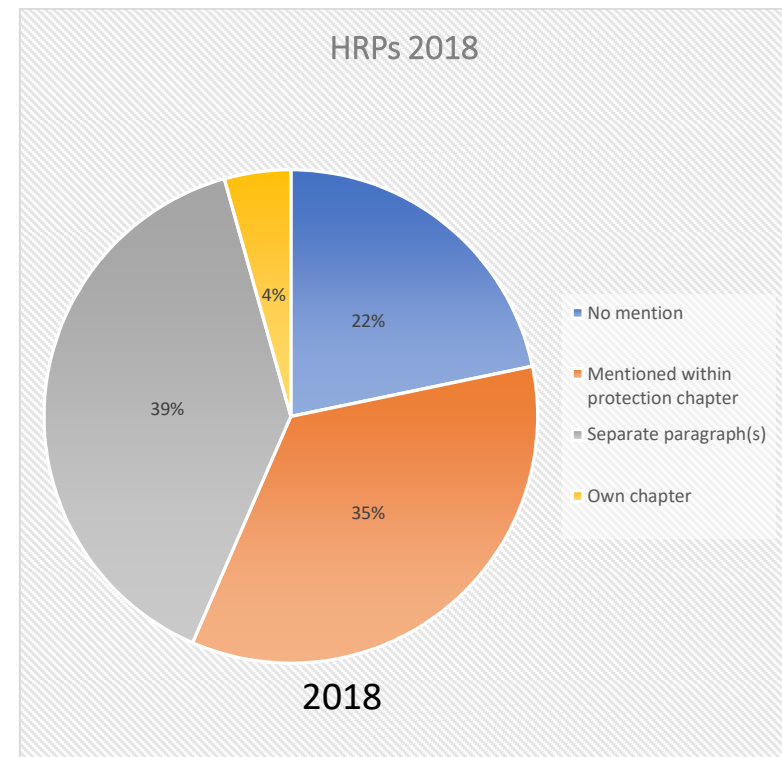
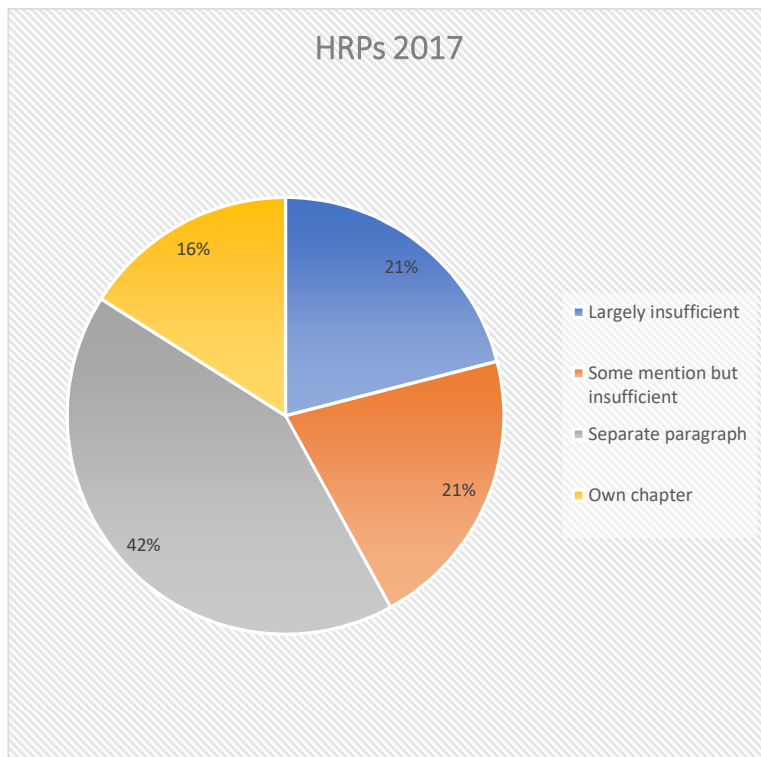




# Comparison of CP in 2018 HNOs vs HRPs



# Comparison of CP Positioning in HRPs



# Examples of Separate CP Chapters in HNOs

## Cameroon:



## Nigeria:



# Examples of Separate CP Chapters in HRPs

## Cameroon

PERS. DANS LE BESOIN\*

 707k

PERSONNES CIBLÉES\*

 433k

SOUS-SECTEUR

PROTECTION DE L'ENFANCE

Suite à la recrudescence des attaques dans la région de l'Extrême-Nord en 2017 et à l'augmentation des déplacements de populations, les enfants et adolescents sont particulièrement affectés. La détresse psychosociale et les séparations familiales restent des problématiques majeures alors que les réunifications familiales sont rendues difficiles par le contexte sécuritaire instable. La situation des enfants arrêtés et détenus pour suspicion d'association à Boko Haram ainsi que la résurgence des enfants retournés du Nigéria dans des conditions d'extrême vulnérabilité, requièrent une attention particulière et des stratégies innovantes pour la protection de leurs droits. Le non enregistrement des naissances et la perte des documents civils sont aggravés par la crise et la fragilisation du système d'état civil.

La stratégie d'intervention pour l'année 2018 s'articulera autour des points ci-après :

- Renforcer le système de soutien alternatif temporaire pour les enfants non-accompagnés/ séparés et faciliter la réunification familiale des enfants non-accompagnés ;
- Assurer un soutien psychosocial et psychologique à tous les enfants et adolescents affectés ;
- Faciliter l'obtention d'actes de naissance pour les enfants affectés par la crise en appuyant le système d'enregistrement des naissances ;
- Poursuivre le plaidoyer en vue de la signature et de la mise en œuvre du protocole d'accord entre le SNU et le gouvernement Camerounais pour

- Appuyer les structures gouvernementales de protection de l'enfant notamment les structures opérationnelles du ministère des affaires sociales de celui de la promotion de la femme et la famille et les services d'état civil ;
- Renforcer les mécanismes de coordination et d'harmonisation des interventions des acteurs de protection de l'enfance sous le leadership du gouvernement ;
- Contribuer aux mécanismes de surveillance et de communication de l'information du Nigéria à travers la collecte et rapportage des six violations graves<sup>1</sup> commises contre les enfants en situation de conflits armés par des forces ou des groupes armés dans la région de l'Extrême-Nord.

### Assistance monétaire

Le secteur initiara une réflexion avec le groupe de travail CASH sur l'opportunité des transferts monétaires pour répondre aux besoins fondamentaux des enfants et adolescents victimes des conflits tout en veillant à l'intérêt supérieur de l'enfant.

### Nexus humanitaire développement

Un accent particulier sera mis sur le renforcement des capacités techniques et opérationnelles des structures gouvernementales (travailleurs sociaux, centres sociaux, système d'enregistrement des naissances) en vue de la pérennisation des acquis et le transfert de compétences pour la prise en charge des enfants et le référencement effectif entre les différents services déconcentrés

## Nigeria:

PEOPLE IN NEED

 2.9M

PEOPLE TARGETED

 1.0M

REQUIREMENTS (US\$)

 39.7M

# OF PARTNERS IN HRP

 13

CHILD PROTECTION OBJECTIVE 1

**1** Conflict-affected children, adolescents and caregivers receive quality protection services, including psycho-social care, life skills and livelihood support to enhance their resilience to cope with the protracted crisis.

RELATES TO SO1 AND SO3

CHILD PROTECTION OBJECTIVE 2

**2** Children facing protection risks (violence, neglect, abuse

PROTECTION:

CHILD PROTECTION



### Summary of needs

The physical safety and psycho-social well-being of 2.5 million of girls and boys in north-east Nigeria remains greatly compromised due to the protracted exposure to extensive protection threats and brutal violence. Family separation, heightened abuses, severe psycho-social distress, sexual violence and other grave child rights violations are among the major concerns requiring immediate intervention.

The crisis has not only affected children. While attending to the needs of children and adolescents is imperative for the Child Protection sub-sector, caregiver support must also be taken into account to achieve long-lasting benefits in terms of child safety and positive development. Multiple displacement, loss of property and livelihoods, GBV and disruption of community support, have deeply undermined the well-being of caregivers and their capacity to cater to children under their care.

### Response plan

Over 700,000 caregivers, and in particular widows, single caregivers with several children and foster parents, are in need of assistance. The Child Protection (CP) sub-sector intends

and violations (children and caregivers) is fundamental to restoring health and dignity and prevent the development of more severe forms of psycho-social distress. The sub-sector will provide integrated case management services to at least 15,000 children and will harmonise and strengthen the use of the CP Information Management System (CPIMS), including through the roll-out of the advanced software 'CPIMS+', to ensure a timely and coordinated response, in addition to a safe and accurate data collection and storage.

Girls and boys in particular continue to be targeted by sexual and other forms of GBV, including child marriage, sexual exploitation, female genital mutilation and the worst forms of child labour. Children alone compose 44 per cent of the total GBV caseload of survivors seeking assistance, with 46 per cent being survivors of sexual violence. The CP sub-sector intends to support at least 7,000 children and women who survived conflict-related sexual violence with a timely and integrated package of services, promoting a survivor-centred approach. Tailored intervention and specialised psycho-social programmes will be required in situations where recreational activities and other general programmes are insufficient to address cases of particular concern.

# Integrated Responses in HNOs

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

	Education	GBV	FSL	Health	Mine Action
Cameroon					
Nigeria					
CAR					
Palestine					
Yemen					

# Integrated Responses in HRPs

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

## Inter-cluster / sector linkages

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

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

Palestine HRP 2018  
(p.26)

## Response Strategy

1. The response strategy will be articulated around strengthened monitoring, identification, referral and reporting mechanisms. Implementation strategies will include community-based protection and monitoring approaches coordinated with governmental action in the fields of social protection, education, justice and health in order to enhance protective outcomes.
2. Transversal themes of this response strategy are: the reinforcement of local structures and embedded community mechanisms, community participation and engagement, gender and protection mainstreaming, support to livelihoods and durable solutions and the strengthening of humanitarian accountability processes and mechanisms.
3. Cross-sectoral links with the Education, Health, Nutrition, Food Security and Early Recovery sectors will be strengthened and built upon in order to ensure the needs of the most vulnerable are prioritized. Ensure localized and centralized monitoring and reporting mechanisms to reinforce protection risks analysis, response mechanism and advocacy actions in order to enhance protection outcomes for vulnerable women and children, children in institutional care, in detention, elderly, person with disabilities. Monitoring also encompass the population at the border to better understand the risk of exploitation and trafficking in Haiti to serve as a baseline for all counter-trafficking-related response and prevent, trafficking, smuggling and exploitation.
4. Support to existing structures set up by local, national and international actors, including civil society, local governmental and technical authorities: such support aims at empowering local actors to identify, prevent and respond to protection risks.

Haiti HRP 2018, p.28

# Localisation in HNOs

- Only **two** (8%) HNO explicitly referenced localization in the Needs Overview
- **Five** (21%) make reference to localization related terms (e.g. Grand Bargain, Principles of Partnership etc)

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

Example from Yemen (p.50)

# Localisation in HRP

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

#### 4. Strengthen partnership with national authorities and ensure localization of the response

The Government of Haiti remains the primary responsible to the Haitian population with regard to the provision of lives saving and basic services and the respect of human rights. In 2017 and 2018, the aid community will continue to play an important role in supporting these efforts, particularly in responding to emergency situations when national capacity is surpassed. The HRP will keep supporting the Government-led effort to respond to the most pressing needs in a complementary way while also advocating for long-term assistance to national mechanisms and systems. As mentioned in the first point of the response strategy, the humanitarian response will be anchored into existing national disaster management and development plans.

Haiti HRP 2018, p.15

#### Mobilisation des ressources

La mise à disposition de financements adaptés avait été soulignée comme indispensable à la bonne mise en œuvre du PRH 2017-2019. En 2017, un important plaidoyer a été mené par la communauté humanitaire, notamment à travers l'élaboration de l'Appel Eclair pour l'urgence dans la région du Kasai, puis la déclaration de crise niveau I.3. Cependant, malgré tous les efforts déployés, les ressources mobilisées ont globalement été insuffisantes, 49 pour cent du montant nécessaire reçu (au 30 novembre<sup>2</sup>). De plus, le délai du processus d'allocation des financements par les bailleurs de fonds reste très long et inadapté au contexte d'urgence de la RDC. Il est essentiel de continuer le plaidoyer pour un meilleur alignement des priorités des bailleurs de fonds avec les réflexions stratégiques de la communauté humanitaire en RDC, en lien avec les engagements déjà pris dans le cadre de l'accord «Grand Bargain» du Sommet Mondial de l'Humanitaire. Ce plaidoyer devra mettre l'accent sur les engagements collectifs pris notamment la multisectorialité (plus de deux secteurs) la pluri annualité (sur trois ans), l'amélioration des mécanismes de coordination (clusters au niveau national et provincial), et de veille, et le renforcement des capacités d'évaluation et réponse rapide aux alertes.

DRC HRP 2018(p.17)

#### Localization of aid

Humanitarian action in Somalia continues to be aligned with the policy commitments and outcomes of the 2016 World Humanitarian Summit and the Grand Bargain. These include strengthening the role of local actors in the response and ending needs. International partners have taken strides in 2017 to better support Somali-led approaches to address root causes of the humanitarian crises and remain committed to work with local actors, including local and national NGOs, Somali authorities and private sector community-based organizations, to realize this.

In 2017, one concrete achievement in support of localization agenda has been the prioritization of local partners, where and when possible, by the SHE The Fund, which remains the

Somalia HRP 2018 (p.16)



# Leadership

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

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

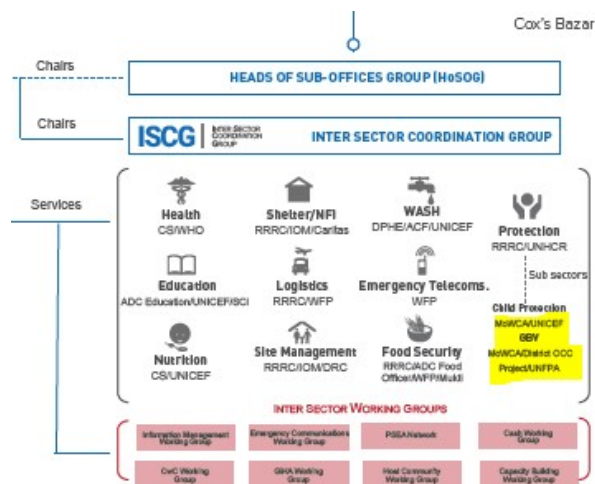
IASC Cluster Coordination Reference Module, p.21)

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

# Leadership in HNOs

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

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

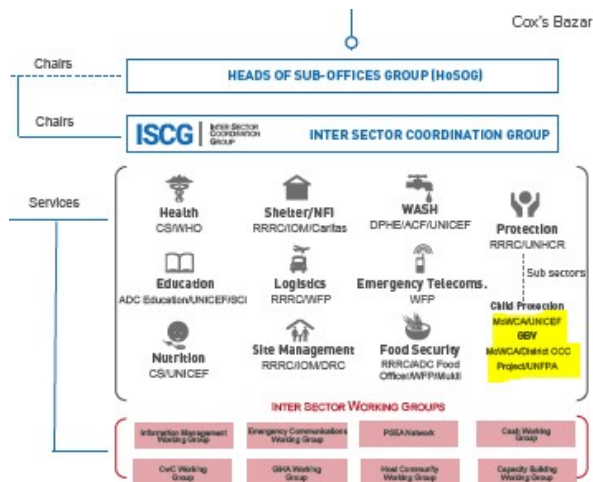


Because of the long history of international assistance in oPt, the international community already has in place many key components for an effective emergency preparedness system and has a proven track record of providing support to recurrent emergencies linked both to the on-going conflict and, to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

# Leadership in HRP

1 (4%) of HRP indicate their current leadership arrangements/structure.

1 (4%) reference a transition strategy towards local co-leadership.



## Exit Strategy

Efforts dedicated to embedded and localized responses and support to existing structures will gradually build sustainability. They will allow a gradual transfer of responsibility to local authorities and actors through support to local development plan anchored to the national strategy for disaster management. Close link will be ensured with the DPC and other governmental technical services as well as with the early recovery cluster to develop the exit plan. The response strategy will place a specific focus in enhancing the protection capacity of governmental and social protection institutions as well as humanitarian organizations.

Haiti HRP 2018, p.29

# Influence and Participation

- As we shift towards greater involvement of local actors, particularly in assessment and measurement, the visibility of local actors in this work should also increase.
- Explicitly referencing their role in data collection and analysis brings credibility to the methodology and highlights areas where future responses may need to include additional capacity strengthening.
- There are also significant investments being made to shift to more continuous, real time monitoring systems (for situation and response). Where this is reflected in the HNO, we can start tracking how effectively these are going to scale, globally.

# Influence and Participation in HNOs

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

## The Vulnerability Profile Project (VPP) 'plus':

In 2015, OCHA coordinated a multi-cluster/ multi-partner nation-wide vulnerability assessment that captured information on a wide range of humanitarian indicators related to physical protection, access to land and livelihoods, water and sanitation, education and health. The methodology is based on perceived vulnerability as expressed by Key Informants at the community level. The aim of the assessment is to make vulnerability information accessible to the humanitarian and development actors, general public and decision makers to understand humanitarian needs, vulnerabilities and risks at a deeper level. The VPP+ was conducted in partnership with the Palestinian Central Bureau of Statistics (PCBS) and clusters.

(Palestine HNO 2018, p.47)

## INFORMATION GAPS AND ASSESSMENT PLANNING

### MIRA Assessment (2015 - 2017)

Between January 2015 and September 2017, 87 MIRA missions and assessments have been performed in most departments, such as Antioquia, Arauca, Caquetá, Cauca, Chocó, Córdoba, Guaviare, La Guajira, Meta, Nariño, Norte de Santander, Putumayo, Valle del Cauca and Vaupés, with the presence of Local Coordination Teams.

Of the total MIRA assessments performed, 63 correspond to chronic situations and 24 to sudden emergencies, of which 57 respond to emergencies related to the armed conflict and 20 are related to disasters of natural origin. Likewise, three missions with double affectation and three focused on the assessment of the affectation in the border with Venezuela were identified.

The sectors most prioritized by the recurrence of affectation in MIRA assessments have been food security and nutrition, water, sanitation and hygiene, health and protection. Likewise, in-depth need assessments were conducted by some sectors in some non-prioritized departments, given the situation of the context, e.g., protection, education in emergencies, among others).

Approximately 50 United Nations humanitarian partners, international and national NGOs belonging to the Country Humanitarian Team, as well as members of local governments, have participated in the conduct of MIRA assessments.

Colombia HNO 2018

# Influence and Participation in HNOs

- **No** HNOs disaggregate reach data from the previous year by type of agency that delivered the service
- **No** routine situation/response monitoring (in addition to stand-alone assessments) was used, although some HNOs noted that this was a gap.

well as insecurity and a lack of access to affected populations, inhibits comprehensive data gathering with sufficient detail on protection violations and needs across Somalia. Innovative approaches to protection monitoring and data analysis, at individual and community level, remain a priority, ensuring protection needs and concerns are identified and enabling targeted protection service delivery to and evidence-based advocacy on behalf of those who are most affected and vulnerable.

(Somalia HNO 2018, p.34)

# Influence and Participation in HNOs

**Community feedback:** To reflect the voices of affected people in the HNO, Internews analyzed 2,365 pieces of community feedback it collected between January and September 2017, and conducted 59 focus group discussions (FGD) and five key informant interviews (KII) in September 2017 across three PoC sites (Bentiu, Malakal and UN House) and three refugee camps/settlements (Ajoung Thok, Pamir and Yida) where Internews humanitarian information service operates. Each focus group discussion involved the participation of 9-10 individuals for a total of approximately 550 individuals participating in the survey across the country. Focus groups consisted of women's groups, men's groups, youth groups, mixed groups and community leaders. The community feedback was collected from Humanitarian Information Service radio stations/Boda boda talk talk and through call-ins, listening groups and correspondents reaching out to residents. REACH provided additional focus group reports to inform the analysts.

(South Sudan HNO 2018)

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

## Influence and Participation in HRP:

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



# Partnerships

- Whilst many HNO and HRP reference partnerships and note their importance.
- The nature and types of partnerships are rarely discussed and as such, it is difficult to ascertain whether these partnerships are fit for purpose.
- Partnership approaches can have a direct influence on our efforts to achieve coverage and quality.
- The implications of dominant partnership models should therefore be discussed in the HNO and then used to inform the shape and nature of the role of partnerships in the HRP (both in general and specifically in relation to Child Protection).

# Partnerships in HNOs

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

- Local-level actors, and particularly municipalities, are trying to fill in gaps left by the central public administration, often through collaborative solutions with civil society, the private sector and community leaders. However, their limited decision-making autonomy, weak technical capacities and low financial resources, greatly limit their responsiveness and ability to address needs in fast-changing conditions. Only a few municipalities have a baseline describing the developmental context and needs of their territory and populations.<sup>57</sup>

Libya HNO 2018 p.25

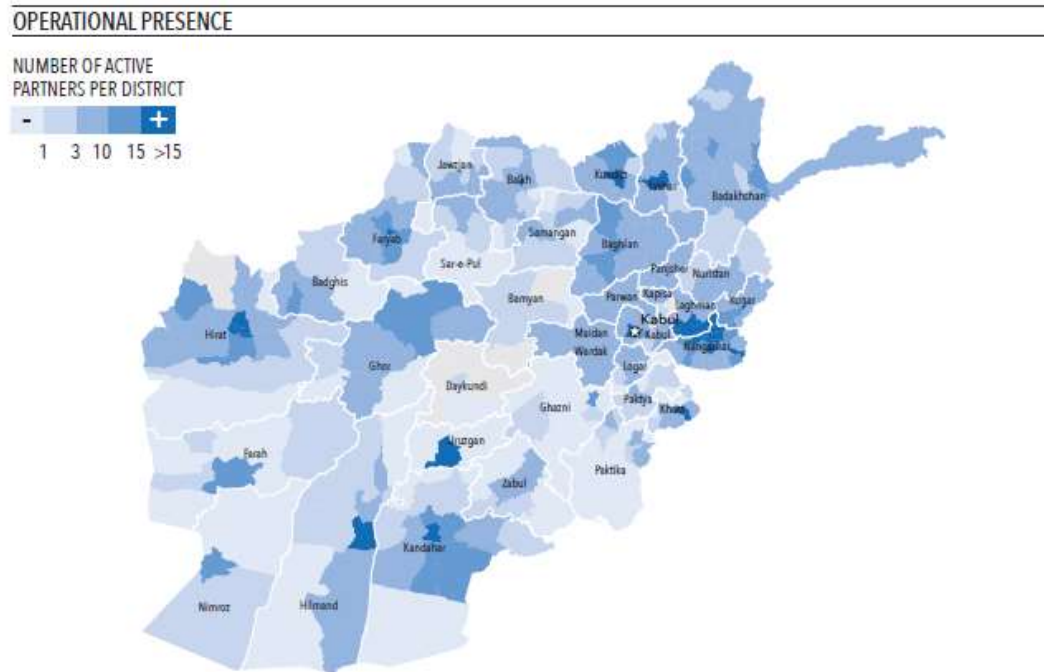
While technical capacity continues to grow, there remains a need for long-term capacity building, particularly in areas such as cash-based programming, resilience and early recovery, shelter rehabilitation, protection, including HLP technical capacity. Combined with the lack of partnership opportunities,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

Syria HNO 2018 p.35

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

Somalia HNO 2018 p.15

# Partnerships in the HNOs



(Afghanistan HNO 2018, p.17)

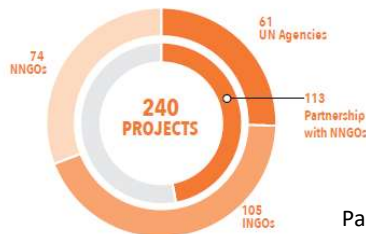
Many HNOs provide coverage maps, also indicating the concentration of partners.

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

# Partnerships in HRPs

- **Six** Protection Chapters (26%) explicitly refer to the complementary roles and approaches of national and international actors.
- No Protection Chapters note the proportion of response that will be delivered by local actors

NATIONAL NGO PARTICIPATION INCREASED IN 2018 HRP



Palestine HRP 2018 (p.18)

## Capacity to implement

In 2017, the Protection Cluster, including the Child Protection and GBV Sub-Clusters, comprised some 26 UN, international and national NGOs, actively reporting in the 3W, as well as other national and local NGOs contributing through their civil society networks and technical and local expertise. Protection Cluster requirements for 2018 anticipate increases in both international and national partners delivering protection and assistance in line with the Protection Cluster Strategy, revised in September 2017. With increased targets in 2018, a scale up is required and planned, particularly in the field hubs of Ibb, Hudaydah and Sa'ada, in addition to a modest increase in the number of international NGOs and more sustained funding for national NGOs to program for year-long activities. Meanwhile, a robust capacity-building strategy, involving coaching and placement of specialists in local partners, is planned for 2018. UN agencies have and will continue critical activities according to their mandates in, among others, human rights, IDP protection, monitoring and reporting mechanisms, together in partnership with international and national NGOs. At the same time, direct protection assistance and services through international and national partners have been prioritized based on available funding. Community-based responses across the Protection Cluster (including its Child Protection and GBV sub-clusters) require significant strengthening in order to reach the vast scope of acute needs and result in sustainable protection outcomes.

Yemen HRP 2018 (p.38)

# Partnerships in HRPs

- 11 (48%) “Operational Capacity” sections reference the importance of partnerships with local actors
- 5 (22%) “Operational Capacity” sections explicitly reference at least one strategy or approach to partnership with local actors

single largest source of funding for national and local partners, has allocated 37 per cent of its funds to local and national NGOs by November 2017 and the SHF Advisory Board has recommended that this approach continues in 2018. This is above the global target of 25 per cent, to be achieved by 2020, on humanitarian funding to be allocated to local and national responders as directly as possible, as per the Grand Bargain commitment.<sup>16</sup> The pool of SHF partners has expanded to more than 100, of which more than two-thirds are national or local partners. Overall, some 231 humanitarian partners are providing life-saving assistance across the country, of whom 159 are national NGOs. Challenges, however, remain. National actors continue to have limited access to funding and investment in their capacity, which affects the sustainability of their operations. To address such challenges and advance the aid localization agenda in Somalia, international actors, Somali Government, private sector, and local NGOs and youth initiatives have continued to address these challenges. During two localization workshops convened in 2017, strengthening partnerships in support of the localization of aid agenda was discussed, resulting in concrete commitments by stakeholders that should ultimately lead to further improvement in the delivery of assistance in Somalia.

Somalia HRP 2018 (p.17)

## Promote the localization of the humanitarian response in north-east Nigeria:

Building on the positive experiences of 2017, which saw a rise in partnerships between international and local/national responders (including through financing mechanisms such as the Nigeria Humanitarian Fund), partners will continue to increase investments in the institutional capacities of local and national responders.

Specifically, this will include support to national coordination mechanisms, and the identification and removal of barriers that prevent local and national responders from partnering with international organisations and donors. It will also include the targeted participation and inclusion of women. Given Nigeria's status as a lower middle-income country, with a skilled and educated workforce, there are significant opportunities for harnessing the potential of existing capacities, and ensuring that all phases of humanitarian response take place with the full participation of Nigerians.

Nigeria HRP 2018 (p.18)

# Partnerships in the HRP

- **8** (35%) Protection Chapters reference the importance of partnerships with local actors
- **5** (22%) Protection Chapters explicitly reference at least one strategy or approach to partnership with local actors

- As local as possible, as international as necessary: all programmes will aim to find the balance between local and international and to give effect to the commitments made in the World Humanitarian Summit and through the Grand Bargain. These commitments aim to galvanise new and strengthened partnerships and collaboration between international and national actors, including government institutions, place an emphasis on enhancing local capacities and expanding access to funding channels and mechanisms for local actors.

Nigeria HRP 2018, p.26

## Capacity to implement

In 2017, the Protection Cluster, including the Child Protection and GBV Sub-Clusters, comprised some 26 UN, international and national NGOs, actively reporting in the 3W, as well as other national and local NGOs contributing through their civil society networks and technical and local expertise. Protection Cluster requirements for 2018 anticipate increases in both international and national partners delivering protection and assistance in line with the Protection Cluster Strategy, revised in September 2017. With increased targets in 2018, a scale up is required and planned, particularly in the field hubs of Ibb, Hudaydah and Sa'ada, in addition to a modest increase in the number of international NGOs and more sustained funding for national NGOs to program for year-long activities. Meanwhile, a robust capacity-building strategy, involving coaching and placement of specialists in local partners, is planned for 2018. UN agencies have and will continue critical activities according to their mandates in, among others, human rights, IDP protection, monitoring and reporting mechanisms, together in partnership with international and national NGOs. At the same time, direct protection assistance and services through international and national partners have been prioritized based on available funding. Community-based responses across the Protection Cluster (including its Child Protection and GBV sub-clusters) require significant strengthening in order to reach the vast scope of acute needs and result in sustainable protection outcomes.

Yemen HRP 2018 (p.38)

# Funding

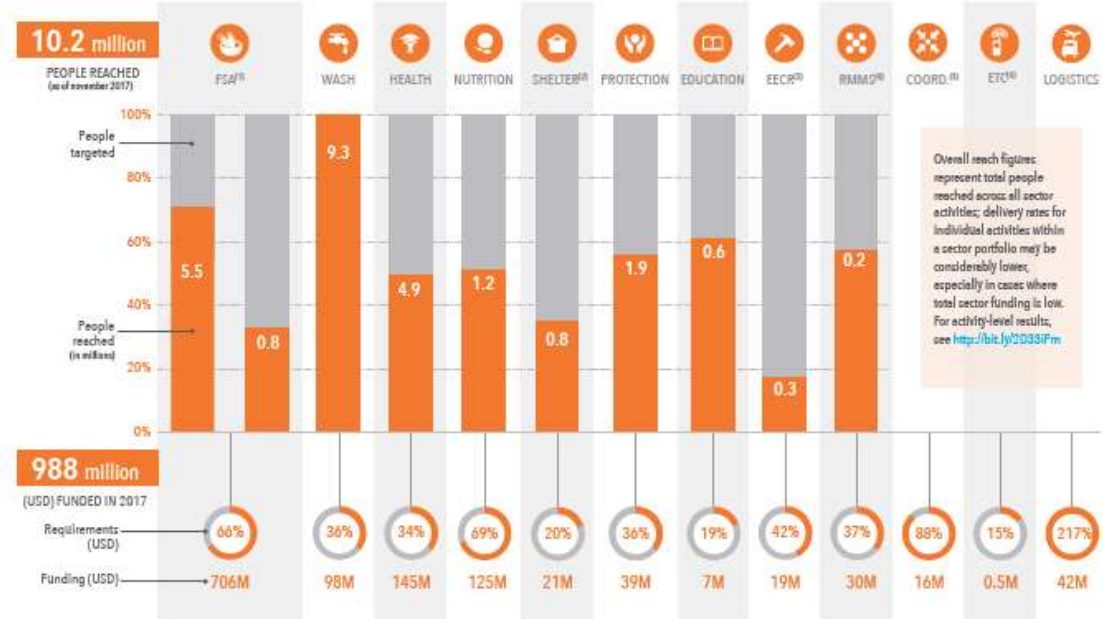
- Funding levels also have a direct impact on coverage and quality. It is therefore important to understand how general funding trends may impact a child protection response.
- It is also important to be able to track whether the limited resources are proportionately invested, given the vulnerability of girls and boys.
- The Grand Bargain commits more direct funding to local partners and so it becomes important to track whether this is happening (and if not, what may need to be done in future responses to facilitate it).

# Funding in HNOs

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

## DIRECT REACH\* VS TARGET AND FUNDING PER CLUSTER

\* Women, children and men directly assisted with some form of humanitarian support in all 22 governorates of Yemen from January to November 2017.

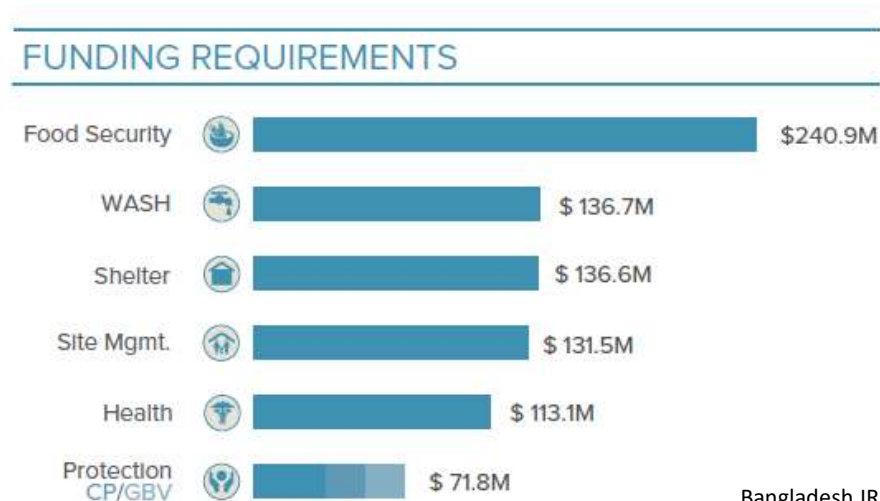


<sup>1)</sup> Food Security and Agriculture; <sup>2)</sup> Shelter/Non-food Items/Camp Coordination and Camp Management; <sup>3)</sup> Emergency Employment and Community Rehabilitation; <sup>4)</sup> Refugees and Migrants Multi-sector; <sup>5)</sup> Coordination; <sup>6)</sup> Emergency Telecommunications.  
Source: Clusters (Nov 2017); FFS (Jan 2018).



# Funding in the HRP

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



Bangladesh JRP 2018 (p.38)

# Institutional Capacity for Local Partners

- Most HNOs identify a larger number of people in need, than can be addressed in the subsequent HRP, which subsequently note the need to continue to scale up services.
- In most contexts, whilst there is a recognized need for contributions from the international community, local actors are identified as the partners who would benefit from capacity strengthening – although the type of capacity strengthening (and effective methodologies) are not routinely discussed.
- There is limited analysis of the institutional/organizational capacity of local partners and there is subsequently little reference to this in HRPs.

# Institutional Capacity (General) in HNOs

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

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

Bangladesh JRP 2018, p.20

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

Nigeria HNO 2018, p.20

# Institutional Capacity (General) in HRPs

- 10 (43%) “Operational Capacity” sections reference the importance of institutional strengthening of local actors
- 5 (22%) “Operational Capacity” sections explicitly reference at least one strategy or approach to institutional strengthening of local actors

in 2017, mainly through dedicated and brave national staff and implementing partners in country, as well as through remote support. Local implementing partners played a key role in coordinating the direct delivery of humanitarian assistance at grassroots levels and in hard-to-reach areas. However, the number of Libyan NGOs with adequate capacity remains limited and their absorption capacity is stretched. The fragmentation of national and local institutions, as well as the administrative restrictions faced by international NGOs operating inside Libya further constrain the operational capacity. This is further compounded by the limited security and other humanitarian space restrictions such as the bureaucratic and varying procedures imposed on the movement of humanitarian organisations which are restricting access and are likely to increase. Optimising operational capacity in a complex and insecure operating environment like Libya will require renewed efforts towards strengthened inter-sectoral and sectoral coordination at strategic and operational levels. There will also be a need to continue to raise awareness of humanitarian action and humanitarian principles with the authorities and other groups to preserve and increase humanitarian space.

Libya HRP 2018 (p.17)

# Institutional Capacity (in CP) in HNOs

- **No** HNO mention the institutional capacity of local actors in the Protection Chapter
- Some chapters do refer to capacity more broadly.



La recrudescence des activités des groupes armés résultant notamment de la dispersion des éléments de certains groupes a entraîné des violences dans plusieurs préfectures qui étaient

Jusqu'à stables, notamment les préfectures de la Basse-Kotto, de la Haute-Kotto, du Mbomou et du Haut-Mbomou.

Cette détérioration est observée dans un contexte où les autorités locales (administratives, judiciaires, sécuritaires) sont soit absentes soit avec des capacités très limitées pour répondre aux besoins de protection de la population dans plusieurs localités affectées. Ainsi les incidents sécuritaires et la pauvreté chronique rendent les populations affectées par les déplacements et les communautés d'accueil encore plus vulnérables, tout en limitant leur accès aux services essentiels.

CAR HRP 2018 (p.31)

Les crises prolongées dans les régions de l'Extrême-Nord, de l'Est et de l'Adamaoua continuent d'avoir un impact majeur sur les enfants et adolescents en les exposant aux atteintes graves de leurs droits, de leur sécurité ainsi que de leur bien-être physique et psychosocial. A l'Extrême-Nord, la récurrence des attaques terroristes et l'insécurité ont conduit à l'accroissement des besoins humanitaires suite à l'augmentation du nombre d'enfants déplacés internes, retournés, réfugiés hors camp et dans le camp de Minawao. La pauvreté structurelle, le faible taux de scolarisation, l'absence de documentation d'état civil, la violence, les séparations familiales sont des facteurs favorisant l'utilisation d'enfants par les groupes armés notamment pour des attentats suicides. Les enfants suspectés d'association aux groupes armés sont toujours à risque de détention en attendant la signature du Protocole d'accord entre le SNU et le Gouvernement Camerounais pour la remise de ces enfants aux services sociaux. A l'Est, les enfants réfugiés centrafricains sont au nombre de 84 300. En 2017, le département du Mayo-Rey a accueilli plus de 7 100 nouveaux réfugiés, dont près de 4 300 enfants pour la plupart déscolarisés et sans actes de naissance. Une majeure partie des réfugiés centrafricains est installée dans les communautés hôtes où les services sociaux et communautaires ont des capacités limitées pour répondre aux besoins spécifiques des enfants réfugiés exposés au mariage d'enfant, et à l'exploitation économique et sexuelle.

Cameroon HNO 2018 (p.23)

# Institutional Capacity (in CP) in HRPs

- 4 (17%) Protection Chapters reference the importance of institutional strengthening of local actors
- 1 (4%) Protection Cluster section explicitly reference at least one strategy or approach to institutional strengthening of local actors.

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

Nigeria HRP 2018 (p. 30)

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

Ethiopia HRDP 2018 (p.39)