Early Childhood Development and Child Protection Brief for Emergencies

Approaches:

- **Human Rights-based**, applying the Convention on the Rights of the Child (CRC)
- **Participatory**, involving children, parents, communities, governments, and local as well as international counterparts, to positively and sustainably influence EC policies at the national and sub-national levels
- **Life cycle-based**, looking at diverse and unique needs of young children from prenatal to eight years including infants, toddlers and preschool children
- **Integrated**, although the main coordination will be lead by the Child Protection Cluster (if established), inter-cluster coordination is recommended to promote integrated responses
- **Gender sensitive**, providing equitable opportunities to both boys and girls for the fulfillment of their right to survival and development regardless of their age, physical ability, geographic location, HIV/AIDS status and cultural, socio-economical, religious, ethnical, racial backgrounds

When to use this brief:

- This brief suggests **Child Protection related emergency preparedness, response and early recovery ECD interventions** that shall be lead, contextualized and adapted by the child protection sector/cluster

Who should use this brief:

- Primary users of this brief are **UNICEF's Emergency Programme Specialists**, who are accountable for designing, implementing and evaluating ECD Programme interventions in emergency contexts.

Where to use this brief:

- This brief addresses health-care needs of all young children at **home/familial environments, in community based settings, and at the national/sub-national levels**. Particular attention during the establishment and monitoring of child friendly spaces

Relevant CRC articles

- Articles 3, 6, 7, 8, 9, 10, 11, 12, 18, 19, 20, 21, 22, 23, 32, 34, 35, 36, 37, 38, 39 in addition to the other articles regarding the fulfillment of all child rights

Useful resources

- UNICEF’s Core Commitments for Children (CCCs)
- ECD Resource Pack (second edition)
- IASC Guidelines on Mental Health and Psycho-Social Support in Emergencies
- ECD Kit Activity Guide for Caregivers
- CRC GC7
- Facts for Life 2010

Responsibilities of the Child Protection Sector common to all ECD age groups across all stages of an emergency

- Raise community awareness on the rights of the child, the legal repercussions of violating these rights and available judicial help when violations occur
- Ensure technical sectors provide opportunities for children to participate in age appropriate ways while designing, implementing and evaluating their emergency programs
- Provide a continuum of care and availability of basic child protection services, especially for children and families most at risk
- Ensure EC protection emergency preparedness, response and early recovery activities are integrated within national emergency plans and policies
- Ensure technical sectors build awareness of the necessary referral systems and consider child headed households, children under foster care and children of adolescent mothers while designing their programmatic response
- Discourage institutional care as an alternative care arrangement. When not possible, ensure defined quality guidelines for institutional care are developed and endorsed by national authorities and adopted by those managing institutional care centres. Any attempts at re-unification should always consider the best interests of the child
### PREVENTION & PREPAREDNESS

#### Age-appropriate activities -

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<th>Ages</th>
<th>Entry-points</th>
<th>Responsibilities</th>
<th>Suggested activities</th>
<th>Expected outcomes</th>
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</table>
| Pre-natal – 2 yrs. | - Community Parenting programmes in Information campaigns used by other sectors - Home and family visits - Community visits | Ensure pregnant women and new mothers, including those who are victims of sexual violence, are supported by their families and communities during and after their pregnancy | Train community health workers and counsellors to impart essential information to families and communities on how to: | • Pregnant women are whole heartedly supported by their families and communities and complete a successful term of pregnancy |• Maternal depression is alleviated  
• The young child is not neglected and is provided with an optimal caring environment  
• Mothers subject to sexual violence and their children live with dignity and are accepted by their families and communities |
|              |                                                                              |                                                                                                             | - Adapt roles and responsibilities to support pregnant women and mothers of newborns  
- Understand dangers of abandoning the child and instead accept the child, especially if born of sexual violence  
- Adopt inclusive care practices through kangaroo care, skin and eye contact, language, cuddling and nurturing etc.  
- Identify symptoms of maternal depression (e.g. tearfulness, anxiety, irritability during the pregnancy, prolonged periods of fatigue, loss of interest, feeling of worthlessness, emotional disinterest in mother to be sensitive and responsive to the needs of the newborn, little or no mother-child interaction etc)  
- Reduce stigma and biases against women subject to sexual violence and their children born of the same  
- Access health support and referral systems in the community to address concerns regarding maternal depression, child rearing techniques etc. | • Pregnant women are whole heartedly supported by their families and communities and complete a successful term of pregnancy  
• Maternal depression is alleviated  
• The young child is not neglected and is provided with an optimal caring environment  
• Mothers subject to sexual violence and their children live with dignity and are accepted by their families and communities |

**Coordinate with Health**

- Make sure all new born children are officially registered and provided with birth registration documents
- Impart vital information to families of newborns about:  
  - The importance of birth registration  
  - Where and how to access birth registration facilities  
- Devise alternate strategies for birth registration during emergencies  
- Families understand the importance of birth registration and all newborn children are registered  
- Alternative mechanisms to continue birth registration in emergencies are established

- Make sure parents are aware of inclusive care practices and ways to protect their child from physical injury, psycho-social
- Devise and organize parenting programmes to train parents on how to:  
  - Identify stress symptoms amongst young children (e.g. Child becomes irritable and restless, unresponsive and withdraws from
- The child develops in a secure environment and is protected against physical and psycho-social harm  
- Families take preventive
<table>
<thead>
<tr>
<th>3-5 yrs.</th>
<th><strong>Coordinate with Health</strong></th>
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<tbody>
<tr>
<td><strong>- Community Parenting programmes</strong></td>
<td><strong>-</strong> Ensure all parents have registered their children’s birth and understand their role in the child’s upbringing</td>
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<tr>
<td><strong>- Information campaigns used by other sectors</strong></td>
<td><strong>-</strong> Develop and implement mechanisms to impart vital information to parents on:</td>
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<tr>
<td><strong>- Home and family visits</strong></td>
<td><strong>- The importance of birth registration for children (if not already done)</strong></td>
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<tr>
<td><strong>- Community visits</strong></td>
<td><strong>- How and where to access birth registration mechanisms (if not already done)</strong></td>
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<tr>
<td><strong>-</strong> Ensure all parents have registered their children’s birth and understand their role in the child’s upbringing</td>
<td><strong>- Inclusive care practices for all children, including those with disabilities and HIV/AIDS</strong></td>
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<td><strong>-</strong> Develop and implement mechanisms to impart vital information to parents on:</td>
<td><strong>- Disadvantages of abandoning children and leaving them under institutional care</strong></td>
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<td><strong>-</strong> Ensure all parents have registered their children’s birth and understand their role in the child’s upbringing</td>
<td><strong>- Parents register births of children who were previously unregistered</strong></td>
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<td><strong>-</strong> Develop and implement mechanisms to impart vital information to parents on:</td>
<td><strong>- Parents understand their role as duty bearers for the fulfilment of the child’s rights to overall development and are aware of the developmental damages that institutional care causes for children</strong></td>
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<td><strong>-</strong> Ensure all parents have registered their children’s birth and understand their role in the child’s upbringing</td>
<td><strong>- The child is not neglected or abandoned and develops in a caring and enabling environment</strong></td>
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<th><strong>-</strong> Ensure all parents have registered their children’s birth and understand their role in the child’s upbringing</th>
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<tr>
<td><strong>-</strong> Build capacities of parents, caregivers in CBCCs and pre-school school personnel to adopt inclusive care practices for all children and ensure they are aware of the ways to protect young children from physical injury, psycho-social harm, separation and sexual abuse</td>
<td><strong>-</strong> Train and develop skills on how to:</td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- Identify stress symptoms amongst young children (e.g. Child regresses to past behaviors like bed wetting, becomes aggressive and fearful)</strong></td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- Identify children with disabilities and HIV/AIDS, adopt inclusive care practices and access necessary health referral systems</strong></td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- Protect young children from injuries (e.g. allowing them to walk and play in safe and supervised open spaces, keeping children away from sharp toys and objects etc.)</strong></td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- Prevent family separation (e.g. teaching children songs with essential identifying information such as the name of the child, parent’s names, address etc.)</strong></td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- The child develops in a secure environment and is protected against physical and psycho-social harm, separation and sexual abuse</strong></td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- Parents and caregivers are aware of their role as duty bearers in caring for the child and provide their young children with an optimal, caring environment to survive and thrive in</strong></td>
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<td><strong>-</strong> Train and develop skills on how to:</td>
<td><strong>- The child is disciplined with love and care instead of harsh physical punishments</strong></td>
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<tr>
<td>6-8 yrs.</td>
<td>Community parenting programmes</td>
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|  | Information campaigns used by other sectors |  |  |  |
|  | Home and family visits |  |  |  |
|  | Community visits |  |  |  |

|  | Build capacities of parents, caregivers and lower primary school personnel to adopt inclusive care practices and are aware of ways to protect young children from physical injury, psycho-social harm, separation and sexual abuse | Train and develop skills on how to:  - Understand and fulfill the rights of the child and where and applicable legal instruments if these rights are violated  - How to access judicial support if there is a violation of child rights  - Identify stress symptoms amongst young children (e.g. child experiences self-guilt, plays out distressing events, socially withdraws etc.) | • The child’s rights are fully understood, respected and fulfilled and communities are aware of the legal repercussions if these are violated  • The child develops in a secure environment and is protected against physical and psycho-social harm, separation and sexual abuse |

| Ensure children in CBCCs and pre-schools have access to a safe and secure learning environment | Contribute towards ensuring CBCCs and pre-schools are prepared to deal with an emergency situation:  - Ensure physical spaces meet defined safety criteria  - Train personnel on immediate and essential activities to protect children during an emergency  - Devise and conduct emergency drills  - Install first aid kits, fire extinguishing mechanisms etc. | • CBCCs and pre-school are safe spaces where personnel have the technical skills and knowledge to supervise young children in stressful situations |

| Coordinate with Education | parent’s names, teaching the child his/her residential address and common place to meet if separated etc.)  - Prevent gender based violence and sexual abuse  - Access psycho-social support services for themselves and their children  - Discipline the child using child-centered techniques (e.g. avoiding physical punishments, reasoning with the child instead of harsh punishments etc.) |  |  |

|  | • CBCCs and pre-school are safe spaces where personnel have the technical skills and knowledge to supervise young children in stressful situations |  |  |
| **Coordinate with Education** | - Identify children with disabilities and HIV/AIDS, adopt inclusive care practices and access necessary health referral systems  
- Protect young children from injuries (e.g. allowing them to walk and play in safe and supervised open spaces, keeping children away from sharp toys and objects etc.)  
- Prevent family separation (e.g. teaching the child vital identifying information about his/her residential address, what to do in the event of a separation, common place to meet if separated etc.)  
- Prevent gender based violence and sexual abuse  
- Access psycho-social support services for themselves and their children  
- Discipline the child using child-centered techniques (e.g. avoiding physical punishments, reasoning with the child instead of harsh punishments etc.)  
- Parents and caregivers are aware of their role as duty bearers in caring for the child and provide their young children with an optimal, caring environment to survive and thrive in  
- The child is disciplined with love and care instead of harsh physical punishments |
| **Ensure children in lower primary schools have access to a safe and secure learning environment**  
**Coordinate with Education** | Contribute towards ensuring CBCCs and pre-schools are prepared to deal with an emergency situation:  
- Ensure physical spaces meet defined safety criteria  
- Train personnel on immediate and essential activities to protect children during an emergency  
- Devise and conduct emergency drills  
- Install first aid kits, fire extinguishing mechanisms etc.  
- Lower primary schools are safe spaces where personnel have the technical skills and knowledge to supervise young children in stressful situations |
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| **Pre-natal to 2 yrs.** | - During the establishment of CFS  
- During delivery of aid by other sectors  
- Community meetings  
- Protection related campaigns  
- Additional entry points used by other sectors | Ensure pregnant women and mothers of newborns are supported by their families      | Establishment support groups for pregnant women and mothers of newborns who exhibit maternal depression symptoms and provide them with essential information on how:  
|                                                   |                                                                               |                                                                                  | - Maternal depression and the emergency adversely impacts the young child’s well-being  
- To ameliorate the negative impacts of the emergency through easily adaptable care practices (e.g. kangaroo care, skin touch, eye contact, use of language etc. with the child)  
- To cope with the emergency and their inherent ability to best care for the young child despite the odds  
- To access referral systems and support services | • Pregnant women complete a stress-free pregnancy term  
• Mothers form strong attachment bonds with the young child  
• Primary caregivers are confident and re-assured of their abilities to care and enthusiastically provide the young child with an enabling environment to develop in  
• The young child is not neglected and develops amidst love and care |
|         | Ensure all new born children are registered  
**Coordinate with Health** |                                                                                  | Impart essential information to families and birth attendants, mid-wives, health practitioners etc. on alternative mechanisms for birth registration in the community | • Newborn children fulfil their right to acquire a name and national identity |                                                                                               |
|         | Ensure families understand the behavioural changes in their child caused by the emergency and protect their children against physical and psycho-social harm and sexual abuse |                                                                                  | Impart essential information to families on how to protect all children, including those with disabilities and HIV/AIDS :  
- Identify stress symptoms in the young child (e.g. cranky child, child clings to caregivers etc.)  
- Understand the child’s change in behavior as a normal response to stressful situations  
- Reduce the child’s exposure to stress and violence (e.g. by not fighting in front of the child, by not expressing anger and discontentment at the situation in front of the child etc.)  
- Build on the child’s capacities to cope with the emergency through positive care interactions and by creating a defined routine for the child  
- Not consider abandoning the child under institutional care, especially if born of sexual violence, but instead care for the child to the best of their abilities  
- Always leave their child under the supervision of a trusted adult, especially while the primary | • Parents protect the child’s psycho-social well-being and assist in developing the child’s resilience to cope with the emergency  
• The child develops in a safe, nurturing environment and is protected against physical harm and sexual abuse  
• Parents and caregivers are aware of their role as duty bearers in caring for the child and provide their young children with an optimal, caring environment to survive and thrive in |
| Establish CFS which provide children and their caregivers with a secure and nurturing environment | Contribute to the creation of child friendly spaces where:  
- Mothers of newborn children can breast-feed their children in a safe and secure environment  
- Caregivers and their children can play and positively interact with each other  
- Caregivers can address their concerns and share good child rearing practices etc.  
- Caregivers can access health, nutrition, education and WES services for young children specifically |
| Coordinate with Health, Nutrition, WES and Education |  • Children and their caregivers can access quality services in an enabling environment which allows them to cope and heal from the stressful events of the emergency |
| Ensure unidentified and separated children are provided with a caring environment | For children who have been separated or are unaccompanied,  
- Arrange for pre-screened foster care within the community  
- Keep siblings together  
- Use institutional care only as a last resort and follow up on care conditions in institutions regularly  
- Begin the process of family tracing and re-unification at the earliest possible |
|  • Unaccompanied and separated children are provided with an optimal caring environment to develop in  
• Attempts are made to re-unify separated and unaccompanied children with their primary caregivers |
| **3-5 yrs.** |  • All children fulfil their right to acquire a name and national identity |
| - During the establishment of CFS  
- During delivery of aid by other sectors  
- Community meetings  
- Protection related campaigns  
- Additional entry points used by other sectors | Ensure all children are registered  
Implement necessary measures to ensure all children under five in the community are registered (if not undertaken earlier) |
| Build capacities of parents, caregivers and pre- school personnel to adopt inclusive care practices for all young children and to protect them from physical injury, psycho-social harm, separation and sexual abuse | Impart essential information on how to protect all children, including those with disabilities and HIV/AIDS:  
- Identify stress symptoms in the young child (e.g. regression to past behaviors, aggression etc.)  
- Reduce the child’s exposure to violence and stressful events  
- Build on the child’s capacities to cope with the emergency through positive care interactions and by creating a defined routine with the child  
- Talk lovingly with the child and allow the child to make sense of the current reality  
- Help the child to find a sense of meaning and spirituality in stressful times (e.g. by re-assuring each other as a family, praying together etc.) |
| Coordinate with Education |  • The child develops in a secure environment and is protected against physical and psycho-social harm, separation and sexual abuse  
• Parents, caregivers and education personnel feel confident and re-assured of their abilities to care for young children despite tumultuous times  
• Parents and caregivers are aware of their role as duty bearers in caring for the child |
| 6-8 yrs. | During the establishment of CFS | Ensure all parents understand their role in the child’s upbringing and care for their young child despite stressful situations | Impart vital information to parents and families on – |
| | During delivery of aid by other sectors | | - Inclusive care practices for all children, including those with disabilities and HIV/AIDS |
| | Community meetings | | - Disadvantages of abandoning children and leaving them under institutional care |
| | Protection related | | • Parents understand their role as duty bearers for the fulfillment of the child’s rights and are aware of the developmental damages that institutional care causes for children |
| | | | • The child is not neglected or abandoned and develops in a caring and enabling environment |

| Establish CFS which provide children and their caregivers with a secure and nurturing environment | Coordinate with Health, Nutrition, WES and Education | With other sectors, create child friendly spaces where: |
| | | - Caregivers and children can play and positively interact with each other |
| | | - Young children can play with other peers and be involved in recreational activities |
| | | - Young children and caregivers are supported through psycho-social care |
| | | - Young children can access essential health, nutrition, education and WES services |
| | | - Children and their caregivers can access quality services in an enabling environment which allows them to cope and heal from the stressful events of the emergency |

| Ensure unidentified and separated children are provided with a caring environment | For children who have been separated or are unaccompanied, |
| | | - Arrange for pre-screened foster care within the community |
| | | - Keep siblings together |
| | | - Use institutional care only as a last resort and follow up on care conditions in institutions regularly |
| | | - Begin the process of family tracing and re-unification at the earliest possible |
| | | • Unaccompanied and separated children are provided with an optimal caring environment to develop in |
| | | • Attempts are made to re-unify separated and unaccompanied children with their primary caregivers |

| - Not consider abandoning the child out of frustration |
| - Seek support to leave their child under the supervision of a trusted adult, especially while the primary caregiver is away collecting humanitarian aid |
| - Safeguard the child against any form of GBV and sexual abuse |
| - Identify safe spaces for children (e.g. keeping children away from minefields, sites where children maybe approached by armed fighting forces or groups, defecation sites, garbage and carcass grounds etc.) |

and provide their young children with an optimal, caring environment to survive and thrive in.
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<tr>
<th>Campaigns Additional entry points used by other sectors</th>
<th>Build capacities of parents, caregivers and lower primary school personnel to adopt inclusive care practices for all young children and to protect young children from physical injury, psycho-social harm, separation and sexual abuse <strong>Coordinate with Education</strong></th>
<th>Train and develop skills on how to protect all children, including those with disabilities and HIV/AIDS:  - Identify stress symptoms amongst young children (e.g. child experiences self-guilt, plays out distressing events, socially withdraws etc.)  - Reduce the child’s exposure to violence  - Talk to the child and answer the child’s questions about the emergency in appropriate ways  - Build on the child’s capacities to cope with the emergency through positive care interactions and by creating a defined routine with the child  - Safeguard the child against any form of GBV and sexual abuse  - Identify safe spaces for children (e.g. keeping children away from minefields, sites where children maybe approached by armed fighting forces or groups, defecation sites, garbage and carcass grounds etc.)</th>
<th>• The child develops in a secure environment and is protected against physical and psycho-social harm, separation and sexual abuse  • Parents, caregivers and education personnel feel confident and re-assured of their abilities to care for young children despite tumultuous times</th>
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<tr>
<td>Establish CFS which provide children and their caregivers with a secure and nurturing environment <strong>Coordinate with Health, Nutrition, WES and Education</strong></td>
<td>With other sectors, create child friendly spaces where:  - Young children can play with each other and be involved in recreational activities  - Young children and caregivers are supported through psycho-social care  - Young children can access essential health, nutrition, education and WES services</td>
<td>• Children and their caregivers can access quality services in an enabling environment which allows them to cope and heal from the stressful events of the emergency</td>
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<tr>
<td>Ensure unidentified and separated children are provided with a caring environment</td>
<td>For children who have been separated or are unaccompanied,  - Arrange for pre-screened foster care within the community  - Keep siblings together  - Use institutional care only as a last resort and follow up on care conditions in institutions regularly  - Begin the process of family tracing and re-unification at the earliest possible</td>
<td>• Unaccompanied and separated children are provided with an optimal caring environment to develop in  • Attempts are made to re-unify separated and unaccompanied children with their primary caregivers</td>
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**EARLY RECOVERY**

### Age-appropriate activities -

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| Pre-natal to 2 yrs. | - Community visits  
|               | - Home and family visits  
|               | - Information campaigns  
|               | - Entry points used by other sectors  
|               | - While continuing CFS                           | Ensure all children can systematically access essential services which are key to their survival and development | - Collaborate with other sectors to ensure all boys and girls, including those with disabilities/HIV/AIDS or those who were earlier unreached have easy access (i.e. no discrimination, availability of services in safe and secure areas etc.) to essential health, nutrition, water and sanitation, and education services  
|               |                                                   | Coordinate with Health, Nutrition, WES and Education                                    | - Inform parents and communities of reliable health, nutrition, water and sanitation, and education systems available in the community | - Families are aware of where and how to access essential services in the community which prevents further separation  
|               |                                                   |                                                                                      | - Families are provided with an enabling environment which contributes to fulfilling their right to overall development | - All children are provided with an enabling environment which contributes to fulfilling their right to overall development |
|               |                                                   | Ensure that families continuously protect their children against psycho-social and physical harm, sexual abuse and separation | - Scale up and systematize parenting programmes on how to:  
|               |                                                   |                                                                                      | - Better allow the child to cope with the after-effects of the emergency by caring for the young child (through kangaroo care, eye contact, talking to the child and other positive interactions) and creating a structured and predictable daily routine for the child  
|               |                                                   |                                                                                      | - Access psycho-social support for caregivers  
|               |                                                   |                                                                                      | - Develop inherent maternal capacities to care for the child as a means to alleviate maternal depression  
|               |                                                   |                                                                                      | - Access birth registration facilities  
|               |                                                   |                                                                                      | - Protect young children from injuries  
|               |                                                   |                                                                                      | - Prevent separations in the family and not abandon the child  
|               |                                                   |                                                                                      | - Protect the child from any form of GBV/sexual abuse | - Families are aware of the importance of the early years for life-long development and can access social protection services to strengthen the protective role of families  
|               |                                                   |                                                                                      | - The child develops in a secure environment free from harm, violence and abuse  
|               |                                                   |                                                                                      | - The child’s resilience and coping mechanisms are further built upon to cope with the after-effects of the emergency | - Families are aware of the importance of the early years for life-long development and can access social protection services to strengthen the protective role of families  
| 3-5 yrs.      | - Community visits  
|               | - Home and family visits  
|               | - Information campaigns  
|               | - Entry points used by other sectors  
|               | - While continuing                              | Ensure all children can systematically access essential services which are key to their survival and development | - Collaborate with other sectors to ensure all boys and girls, including those with disabilities/HIV/AIDS or those who were earlier unreached have easy access (i.e. no discrimination, availability of services in safe and secure areas, no user fees etc.) to essential health, nutrition, water and sanitation, and education services  
|               |                                                   | Coordinate with Health, Nutrition, WES and Education                                    | - Inform parents and communities of reliable health, nutrition, water and sanitation, and education systems available in the community | - Families are aware of where and how to access essential services which prevents further separation  
|               |                                                   |                                                                                      | - Families are provided with an enabling environment which contributes to fulfilling their right to overall development | - All children are provided with an enabling environment which contributes to fulfilling their right to overall development |
| CFS | Ensure that families, caregivers in CBCCs and pre-school personnel continuously protect children against psycho-social and physical harm, sexual abuse and separation | Scale up and systematize caregiver/teacher training and parenting programmes on how to:  
- Care and create a structured and predictable daily routine for the child  
- Access psycho-social support for children and caregivers  
- Access birth registration facilities  
- Protect young children from injuries and from unsafe spaces  
- Involve young children in preventing separations  
- Understand the developmental damages caused by institutional care and hence not abandon the child  
- Protect the child from any form of GBV/sexual abuse | • Families are aware of the importance of the early years for life-long development and can access social protection services to strengthen the protective role of families  
• The child develops in a secure environment free from harm, violence and abuse  
• The child’s resilience and coping mechanisms are further built upon to cope with the after-effects of the emergency |
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<td>Systematically identify and protect all child labourers</td>
<td>Ensure all children who were forced to involve themselves in hazardous work because of the emergency are supported by their families and communities and are provided with access to essential services and learning opportunities</td>
<td>• All child labourers are re-integrated with their families, based on the best interests of the child, and are supported and provided with an optimal environment to develop in</td>
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| 6-8 yrs. | - Community visits  
- Home and family visits  
- Information campaigns  
- Entry points used by other sectors | Ensure all children can systematically access essential services which are key to their survival and development **Coordinate with Health, Nutrition, WES and Education** | • Collaborate with other sectors to ensure all boys and girls, including those with disabilities/ HIV/AIDS or those who were earlier unreached have easy access (i.e. no discrimination, availability of services in safe and secure areas, no user fees etc.) to essential health, nutrition, water and sanitation, and education services  
• Inform parents and communities of reliable health, nutrition, water and sanitation, and education systems available in the community  
• Families are aware of where and how to access essential services which prevents further separation  
• All children are provided with an enabling environment which contributes to fulfilling their right to overall development |
| - While continuing CFS | Ensure that families, caregivers and lower primary school personnel continuously protect children against psycho-social and physical harm, sexual abuse and separation | Actively involve parents, teachers and young children to allow young children to build their capacities and that of their peers independently through activities which:
- Involve children in collaborative rather than competitive activities
- Encourage the child to take responsibility within the household and the classroom
- Inform young children about unsafe spaces or hazardous items in the community
- Raise awareness of what to do in the event of a separation
- Caution and protect children against any form of GBV/Sexual abuse | • Families are aware of the importance of the early years for life-long development and can access social protection services to strengthen the protective role of families
• The child develops in a secure environment free from harm, violence and abuse
• The child’s resilience and coping mechanisms are further built upon to cope with the after-effects of the emergency |
| Systematically identify and protect all child labourers | Ensure all children who were forced to involve themselves in hazardous work because of the emergency are supported by their families and communities and are provided with access to essential services and learning opportunities | • All child labourers are re-integrated with their families, based on the best interests of the child, and are supported and provided with an optimal environment to develop in |