

# Toolkit for Engaging Adolescents in Child Protection and Cash and Voucher Assistance Monitoring and Evaluation



**Field testing version**

## **TOOL 2**

Activity for Mapping Cash and Voucher Assistance Risks and Protective Factors with Adolescents

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This activity has been adapted from: “Tool 1: Risk and resource mapping (children)” page 26 – 31 of Plan International (2018) Child-Centered Multi-Risk Assessments: A Field Guide and Toolkit, United Kingdom: Plan International and “Risk Mapping tool” from Save the Children (2008) A kit of Tools for Participatory Research And Evaluation With Children, Young People And Adults. The Consent Form template is based upon “Tool 3. Informed Consent Form” of Action Against Hunger (2020) Assessment of Mental Health and Psychosocial Needs and Resources in The Aftermath of Natural and Man-Made Disasters: Manual.

# Introduction

This tool describes an activity for mapping cash and voucher assistance associated risks and protective factors with adolescents. It must be used along with the other tools in the “Toolkit for Engaging Adolescents in Child Protection and Cash and Voucher Assistance Monitoring and Evaluation”. In particular reference must be made to “How to use the toolkit for Engaging Adolescents in Child Protection and Cash and Voucher Assistance Monitoring and Evaluation” which describes the conditions for using the tool and necessary staff competencies for running participatory activities with adolescents.

Risk mapping activities enable children and adolescents to explain and show adults their experiences of the community. They allow the identification of relationships between the challenges (risks) and protective factors. This activity may lead to discussions of very sensitive subjects, such as risky behaviour exhibited by diverse children and adolescents or experiences of violence. The conversation should therefore be facilitated by an experienced child protection professional with the necessary support structures available to children and adolescents who need referral and assistance.

## OBJECTIVES

Carrying out this activity can help those working for child protection agencies to understand children and adolescents’ perceptions of:

- Risks relating to access to, and control and use of CVA in their community.
- Community and individual level factors that may exacerbate risks for children and adolescents.
- Community and individual level practices, supports and sources of protection.
- Mitigation strategies that adolescents and/or their caregivers use to safely access and use their CVA.
- Individuals with whom and places where adolescents feel safe to access help and support.

Participating in the activity will help adolescents to learn from their peers. Things they may learn include:

- People and places to avoid as they may pose a risk.
- Techniques for staying safe.
- Where they can spend and use their CVA to maximise benefits.
- People and places they can go to for help and support.

## PREPARING FOR THE COMMUNITY MAPPING ACTIVITY

Carry out a **risk assessment**. The benefits of taking part in the activity must outweigh risks related to any conflict, natural disaster,

socio-cultural norms, and public health concerns. Mitigation measures must be in place for any potential risks identified.

**Referral pathways** must be in place. If a child/adolescent discloses an incident of harm they must be able to seek psychosocial help, health response, and legal support. Contingency budget must be in place to respond accordingly.

**Location.** Identify a large, safe, and private area where the children and adolescents' activities can take place. If you are planning to carry out Step 9, the walk, then the location should be close to the centre of the community you are discussing with the children and adolescents.

**Invitations:** Send invitations to children and adolescents and their parents. Tell them you would like to invite them to a discussion, stating clearly the purpose of the meeting, the meeting place and start time.

**Consent procedures:** Every single child/adolescent and their caregiver(s) will have to provide consent to take part in the group discussion(s) and activities. You should develop a consent form that will be adapted to:

- Your context
- Your agency
- The scheduling of your activities

An example template informed consent form is available at Annex 1.

The way in which you will have to seek consent for the child participants will vary depending on the age of the child:

- 12–14-year-old children/adolescents – child's written informed assent and adult caregiver's written informed consent.
- 15–17-year-old children/adolescents informed consent or assent – in accordance with local laws – and adult caregiver's written informed consent.

## **MATERIALS NEEDED**

- Large sheets of paper (flipchart/butcher paper).
- Several packs of different coloured markers/pens.
- Refreshments for the children/adolescents.
- Chairs or floor mats for the children/adolescents – which ever is most appropriate in the setting.
- A clean indoor space for laying paper out on the floor and drawing.
- Coloured post-it notes.
- Digital camera.
- Attendance sheet.

# Running the community mapping activity

## FACILITATOR

For each group there should be at least two facilitators. It is even better if you are able to have three facilitators.

At any one moment in time one facilitator should be running the activities with the children/adolescents – asking questions – trying to encourage as wide a range of children/adolescents as possible to talk. Another facilitator should be writing notes – trying to capture everything that is said by the children/adolescents. If it is possible to have 3 facilitators, you can have one person asking questions, one person annotating the flipchart drawing, and a third writing detailed notes on a computer or in a confidential notebook.

The facilitators should be experienced child protection staff. Ideally you should ask the group of children/adolescents beforehand if they would prefer to have a woman or a man facilitator. Be aware that girls may not feel comfortable talking to men about risks they face, especially when there are sexual risks. And older boys may be ashamed to talk to men about fears they have due to socio-cultural norms that dictate that boys and men should not express fear.

Alternatively, you can pair child protection staff with older adolescents or youth. Older adolescents or youth facilitating group discussions would ideally have similar characteristics as the group (from the same socio-economic, linguistic, religious, ethnic, racial background, of the same gender) but be a little older in age and not be from the same community. If they are from the same community there may be fear of a breach of confidentiality.

Whoever is running the session must be thoroughly trained in meaningful child participation methods. They should have been mentored through their first experiences of child participation activities prior to running sessions with children/adolescents.

Aside from those facilitating the group, if you are able to have one male and one female staff member on site during each discussion this can be helpful. This allows children/adolescents to approach a staff member of the gender of their choosing if they want to talk about or share something personal in a one-on-one discussion.

## NOTE TAKER

Carefully document children/adolescents' views. Noting also whether it is a girl or boy who said a certain thing. Where possible, try to write down direct quotes from the children/adolescents, this helps at the report writing stage.

Note when children/adolescents talk of the different experiences of risk and protective factors based on the gender, age, disability, background, or status of a child.

All notes should be recorded anonymously – no children/adolescents' identifying information should be written down with notes from the group discussion.

Take a photograph of the maps and diagrams generated. These can be analysed later.

## PARTICIPANTS

This tool is aimed at children/adolescents who are in early adolescence. That is, all children/adolescents from 10–14-years-old.

Subdivide the participants into groups of 5–10 children/adolescents each.

Work in gender/age groups of children/adolescents (e.g. 10–12-year-old girls, separate from 10–12-year-old boys, 13–14-year-old girls, separate from 13–14-year-old boys).

In settings where it is possible to access children/adolescents who face specific risks and vulnerabilities – such as children/adolescents with disabilities, or those who self-identify as LGBTIQ+, then discussions with them should also be held separately.

Include children/adolescents from diverse backgrounds – representing the full range of social, religious, political, economic, linguistic and ethnic groups present in the location.

Establish separate groups for facilitating adapted activities for children/adolescents with disabilities. Ask the children/adolescents themselves how they wish to adapt the activities. For children/adolescents with visual impairments, they may wish to verbally describe the community, do the walk, and talk through their experiences of risk and safety. For children/adolescents with hearing impairments, you may need someone with sign language skills, if the children/adolescents are able to use sign. For children/adolescents

with physical disabilities who do not have the fine motor skills to draw, they may wish to nominate a child who can draw for them whilst they verbally explain their map.

Groups of children/adolescents have to be kept separate so that (a) they feel more comfortable to share their experiences; (b) data can be disaggregated – with issues facing certain at-risk groups more clearly identified and (c) comparison can be made across groups during the analysis of the responses.

Each group should ideally work in a different space with separate facilitators. This can be done by holding sessions at different times.

#### TIME NEEDED

1.5–3.5 hours, depending on if you carry out the optional activities or not, and the capacity and diversity of the group.



Choose a time when it is safe for children/adolescents to be out of their homes. Consider how long it will take for children/adolescents to get to and from the site, not only the time you expect the children/adolescents to be in the discussion with you.

**Safeguarding** concerns and life-threatening injuries or medical conditions observed or presented during the data collection process should be addressed as soon as possible.

- Actions taken should be based on the individual child or adolescent's needs.
- In the case of safeguarding incidents,
  - Measures should be taken to prevent further safeguarding concerns or incidents from arising, and,
  - Reporting must take place in line with internal agency protocols and national legal frameworks.

Safeguarding concerns and life-threatening injuries or conditions should NOT wait for the data analysis stage to be acted upon.

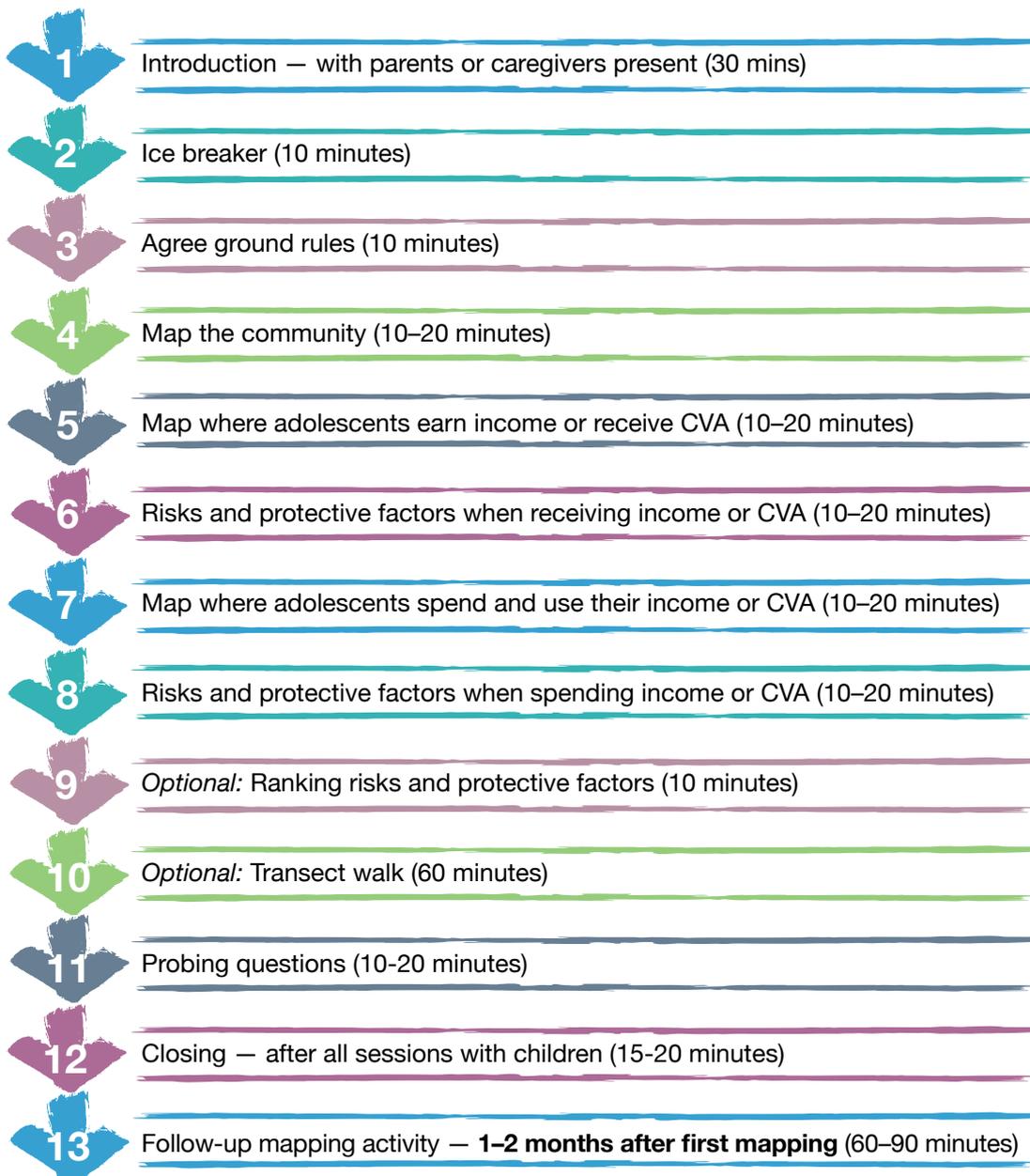


Photo: Mats Lignell / Save the Children

# Community mapping activity facilitation guide

## STEPS IN RUNNING THE COMMUNITY MAPPING ACTIVITY

- The steps should take place one after the other in the order set out below.
- Steps 9 and 10 are optional. All the other steps, especially the full introduction, are essential.
- You should allow 30 minutes for step 1.
- You should allow 15–20 minutes to carry out steps 1 to 8 and step 10. Step 9, the walk, will take a full hour at least, depending on the size of the space you want to walk through, and the number of children/adolescents in your group.
- Step 12 can take place during a repeat visit 1–2 months later.



# 1

## STEP 1. INTRODUCTIONS (30 MINUTES)

The introductions should take place with parents and/or caregivers present, before the session starts. This may be a few days before the activities, or it may be on the same day, immediately before.

When running the consent process a few days before the activities, have parents sign the consent forms, and remind them of the date and time of the activities just before they leave.

If the parents and/or caregivers and the children/adolescents give consent on the day of the activities, the parents/caregivers should sign the consent forms, and leave. Before they go, advise the parents and/or caregivers what time the children/adolescents should finish the activity.

During the session you will have to manage the time carefully so that you finish at the time specified to the parents/caregivers.

When introductions happen before the day of activities, you will have to recap the introduction session with children/adolescents on the day: explaining the subject, the process, and seeking to confirm consent again.

Always start by:

- a. Introducing yourselves (the facilitators);
- b. Describing key concepts in child-friendly manner. You should use words that children/adolescents of the target age and in your context can understand;
- c. Explaining the objectives of the mapping activity;
- d. Explaining confidentiality;
- e. Explaining the children/adolescents' rights;
- f. Indicating who the children/adolescents can speak to if the discussion leads to need to report a child protection incident; a safeguarding suspicion or incident; or someone would like to seek support; and,
- g. Running through an age-appropriate process for seeking consent.

## SUGGESTED INTRODUCTION SCRIPT



### a) Introducing yourselves

“Hello. I am [insert name] and I will be facilitating this focus group discussion with you today. My colleague [insert name] will be taking notes. My colleague [insert name] will be interpreting the discussion for us. My colleague [insert name] will be providing logistical and administrative support. We represent [insert name of your agency]. [Insert name of your agency] is an organization working in [insert location] to provide services to communities affected by [conflict/crisis/disaster/drought/poverty/etc.]”

- “Today we are here on behalf of [insert name of your agency] to do research to improve our programmes. We want you to help us to understand how cash and voucher assistance can be as safe as possible for children/adolescents.”

#### *Rights of respondent:*

- “If you do not understand a question, please ask me to explain it. You can skip any and/or all questions or choose to end the discussion at any time.”

#### *Best interests and mandatory reporting:*

- “If you tell me that you know a child who has been harmed and continues to be at risk, I will have to tell [relevant service provider and/or protection authority] so we can get help for the child and so we can find ways to prevent that child or other children/adolescents from being harmed again.”

#### *Referral:*

- “We can help you or a child access support if you tell us about an incident of harm. Ideally, we would prefer that you come to tell us privately so that the confidentiality of the incident is maintained.”

#### *Option for clarification:*

- “Do you have any questions or concerns you want to discuss with me before we begin?”

### b) Describing some key concepts

You need to describe some key concepts in ways that children/adolescents of the target age and in your context can understand. Adapt the language to the setting. Consider using examples from the context, but when describing forms of child protection risk ensure any examples used are anonymous/confidential. Explain additional terms as necessary. E.g. Lesbian, gay, bisexual, transsexual, or intersex children/adolescents; children/adolescents from ethnic minorities, income, salary, etc. Some sample text for explaining

children/adolescents, child protection, risks, and cash and voucher assistance is given below.



“**Children** are defined as any person under the age of 18. The child may:

- Be a girl, boy, or have a diverse sexual orientation, gender identity and expression and/or sex characteristics;
- Be living with a chronic illness or disability;
- Belong to a minority or indigenous group;
- Be an asylum seeker, refugee, migrant, displaced, stateless, or a national of the country;
- Be an infant, child, or adolescent any age from 0 to 17;
- Be living with biological family, in foster care, in residential care, or be unaccompanied or separated;
- Come from any socio, economic, political, or religious background, and
- Demonstrate other personal level characteristics or a combination of the above.

**Child protection** is the prevention of and response to abuse, neglect, exploitation, and violence against children/adolescents.<sup>2</sup>

**Child protection risks** are any form of harm to children/adolescents — intentional or unintentional.

**Child protection risks** include forms of abuse, neglect, exploitation, or violence.

- They can involve sexual, physical, or emotional maltreatment.
- The harm can be visible or go unseen.
- Family, friends, teachers, nurses, religious leaders, community members, humanitarian workers, other children/adolescents, other known individuals, or strangers can cause this maltreatment or harm.
- Child protection concerns include:
  - Dangers and injuries;
  - Physical and emotional maltreatment;
  - Sexual and gender-based violence;
  - Mental health issues and psychosocial distress;
  - Association of children/adolescents with armed forces or groups;
  - Child labour (including adolescents), and
  - Children/adolescents who are unaccompanied or separated.“

**Cash and voucher assistance** is help that is given to individuals, households, or communities by organisations or governments in the form of physical or electronic currency or credit.

2. Glossary: Minimum Standards for Child Protection in Humanitarian Action, 2019 Edition, The Alliance for Child Protection in Humanitarian Action, 2019, [https://alliancecpha.org/en/CPMS\\_Glossary](https://alliancecpha.org/en/CPMS_Glossary)

- Cash can be either physical currency or e-cash.
- E-cash is a digital payment made to mobile devices, through electronic vouchers, or cards (e.g., prepaid, ATM, smart, credit or debit cards).
- A voucher is a piece of paper, a token or an electronic voucher (e-voucher) that can be exchanged for a set quantity or value of goods or services. These are presented as either
  - A cash value (e.g. \$15);
  - A set amount of material goods (e.g. 5kg rice);
  - A specific service(s) (e.g. milling of 5kg of maize, 1 month schooling, access to doctor); or,
  - A combination of the above.



*[Confirm if the children/adolescents and their parents/caregivers have any questions or clarifications before continuing.]*

- “Do you have any questions or concerns you want to discuss with me before we move on?”

### **c) Explaining the objectives of the mapping activity**

*Reasons for group discussion and mapping activity:*

- “Our job is to talk to children/adolescents and understand what they think are the risks and benefits for all children/adolescents that may come from giving cash and voucher assistance to **individuals, families, and children/adolescents** in this context. The questions focus on the safety and protection of children/adolescents (all those who are under 18 years old) related to the cash and voucher assistance. What you tell us today will hopefully make it possible for *[name of agency or agencies]* to improve the way they do programme activities to help children/adolescents in your community. And it will help *[name of agency or agencies]* to make the programmes safer for children/adolescents.”

*Intended outcomes of the discussion:*

- “The information you give us will not lead to more assistance for a greater number of people. Your answers will not affect or change the level or frequency of cash and voucher assistance you or anyone else gets in the future. We will be using this information to make sure the **WAY** we give cash and voucher assistance is as safe as possible.”

### **d) Explaining confidentiality**

“We want you all to feel comfortable to talk to us about what makes you scared and/or what makes you feel safe in your community. Later, when we talk to others about what we learnt here today we will not tell them who told us this information. We will not include any mention of any of your names in information we share with others. Your views and stories will be entirely anonymous and your identity will be protected.



We ask that all children/adolescents here today also keep what other children/adolescents have talked about to themselves. They do not repeat to others outside this room what other children/adolescents talk about. And they do not tell others outside this room who was here with them today.”

*Explaining the limits to confidentiality*

“Although most of what you share with us today, we will keep confidential, there may be some problems you might tell us about that we would have to talk about with other people. For example:

- If I find out that one of you or a child/adolescent you know is in danger, we will need to talk to other people who can help.
- If you tell me one of you or someone you know has made plans to seriously hurt yourself/themselves, I would have to talk to your parents or another caregiver or trusted adult.

We would not be able to keep these problems just us between us here, because we want to be sure that you are all safe and protected. Do you understand that it’s okay to talk about anything with us, but these are other things we must talk about with other people?”

*[Wait for a positive response from all children/adolescents and their parents/caregivers before continuing. Allow the children/adolescents time to ask questions and clarify at this point.]*

- “Do you have any questions or concerns you want to discuss with me before we move on?”

**e) Explain the children/adolescents’ rights:**

- You have the right to refuse having things written down or recorded. It is okay to tell us things you would rather we do not write down. Please let us know when that is the case.
- You have the right not to answer any questions that we ask you. You have the right to ask us to stop or slow down if you are feeling upset or scared.
- You have the right to ask to have a discussion later one-on-one with a member of *[name of agency]* staff. This can also be in the presence of an adult you trust. This is your decision.
- You have the right to ask me any questions you want to or to let me know if you do not understand something I say.
- You have the right to refuse to take part in this discussion here today.

*[Confirm if the children/adolescents or their parents/caregivers have any questions or clarifications before obtaining their informed consent/assent to proceed.]*

- “Do you have any questions or concerns you want to discuss with me before we move on?”



**f) Reporting an incident or seeking support**

“You can stay afterwards to talk to one of us one-on-one or you can contact the following person:

*Name; Telephone number ; E-mail address*

If you:

- Have any concerns that you want to share after this discussion;
- Want to ask for help because of harm you or another child you know are facing; or,
- If there are any issues with the way we carry out this discussion.”

**g) Seek consent:**

“Do you have any questions about what I have just explained? About the process? What we are doing here together today? And how I will use the thoughts you share with me?”

“May I have your permission to continue with this discussion and activity?”

- If the child and their caregiver say YES, ask the child and caregiver to sign the informed consent/assent form and continue with the group discussion.
- If the child and/or their caregiver say NO, thank the child and their caregiver(s) for their time and allow them to leave.

Only continue in the discussion and activities once you have agreement from all those taking part and their parents/caregivers as necessary.

## 2

### STEP 2. ICE BREAKER (10 MINUTES)

The facilitator should explain:

- “This is a quick game to create a new way for participants to refer to each other. So as to maintain the children/adolescents’ confidentiality we will not be using the children/adolescents’ names during the session. Instead we will be identifying people by their favourite activity.”
- The facilitator should ask the participants to stand in a circle and think of their favourite activity. It can be football, dancing, running, cooking, etc.
- The facilitator mimes his/her own favourite activity then everyone else copies it. The facilitator then throws the ball to another participant who mimes their own favourite activity. The facilitator should emphasise that each person should suggest a different activity. In turn each participant repeats this process until everyone has had a go. The facilitator then gives each participant a sticker with a symbol for the activity they like doing — asking the group to remind them what that was.
- For the rest of the session, all participants will be known by the name of their favourite activity, not their names.
- You can also ask the children/adolescents to mime the name of an animal or object — e.g. cat, dog, bird, sun, flower, rain — that can be their alias for the discussion.



## 3

### STEP 3. AGREE THE GROUND RULES, ‘DO’S AND DON’TS’ (10 MINUTES)

You will be asking the children/adolescents to brainstorm what the ‘do’s and don’ts’ are for having this discussion. These will be the rules so that everyone feels comfortable and safe during the discussion. They should be recorded on flipchart paper that you stick on the wall so all the children/adolescents can see.



This can be done in one of two ways:

#### Method 1

- Give each of the participants a marker pen and two post-it notes.

- Ask them to think of two ways of behaving that are necessary to make sure all the children/adolescents feel safe and comfortable to talk and share their thoughts.
- They stick their post-its onto the flipchart paper on the wall.
- The facilitator groups them and feeds back the key messages to the group.

### Method 2

- The facilitator is at the front of the room with a marker pen and blank piece of flipchart paper.
- The group stays in plenary.
- The facilitator asks the children/adolescents to brainstorm ways of behaving that will make everyone feel safe and comfortable to talk and share their thoughts.
- The facilitator writes down or uses drawings to symbolise each of the ways of working suggested by the children/adolescents.
- Example symbols could be:
  - A clock for time keeping
  - A mobile phone to make sure phones are on silent



### Tips on facilitation

If the children/adolescents are not sharing ideas, the facilitator could suggest one or two “rules” to start them off.

Where ideas are similar the facilitator can group them together or indicate a similar idea has already been mentioned.

If there are some suggestions that don’t fit with what the facilitator hopes for the group (e.g. shout to get attention of the facilitator if you are not able to be heard) then you can kindly acknowledge the suggestion but explain why this may not be good in this situation.

If there are some ways of working that are not mentioned that are important to facilitators, the facilitator can add these to post-it notes at the end and ask the children/adolescents what their thoughts are on the additional behaviours.

For both methods, at the end have the children/adolescents come up to the front and sign up to their own ‘rules’. The ‘sign up’ process can

be done with writing or a drawing or symbol depending on the level of literacy of the children/adolescents.

Example ways of working a facilitator may need to highlight if the children/adolescents do not list them:

- Listen to and respect other people's views. There are no right and wrong answers. Everyone has different experiences.
- Actively participate. We might ask you actively about your views or ideas. If you do not wish to answer, that is perfectly fine; you can tell us, "I do not wish to speak now."
- What is said in this room stays here. We want everyone to feel comfortable in the group, even when sensitive issues come up. This means that we all agree not to share what other have shared in this group to those who are not in the room with us now.
- Turn mobile phones off.
- Respect the agreed times for starting and ending the sessions.

The 'rules' can be revisited throughout the workshop to remind participants of what behaviours were agreed, if needed. However, be careful not to tell children/adolescents off for breaking rules. Just state that it is easy to forget what was agreed and gently remind them of the ways of working.

#### 4 STEP 4. MAP THE COMMUNITY (10-20 MINUTES)

Work with the children/adolescents to draw a simple map of their community. It does not have to be too detailed or technical.

Allow the children/adolescents to use only one colour to draw the map, for example black or dark grey.

Ask them to think about and draw the main geographical features, community buildings, and roads, the children/adolescents' neighbourhoods, and places where children/adolescents go (e.g. rivers, market, schools, clinics, places of worship, other places children/adolescents gather).

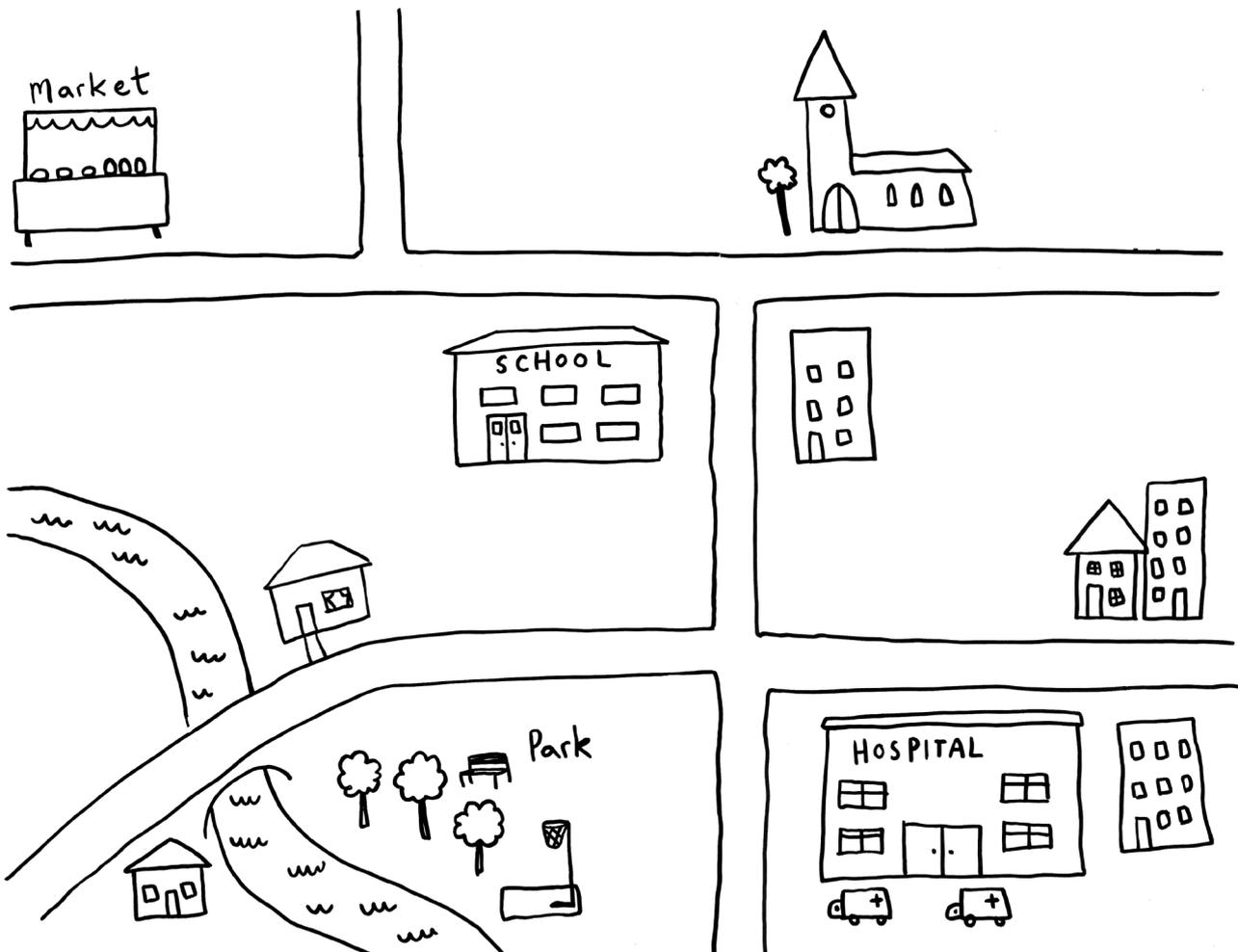
Ideally, they should all do this together on one large map. You should break the children/adolescents into separate groups if the children/



adolescents who have arrived to take part in a session are diverse. Then you will need to separate girls and boys, younger and older adolescents, children/adolescents from different ethnic or social groups, etc.).

Within their groups the children/adolescents should be guided to agree upon and produce something together.

Example community map, step 4.



5

**STEP 5. MAP WHERE ADOLESCENTS EARN INCOME AND COLLECT CASH AND VOUCHER ASSISTANCE (10-20 MINUTES)**

Now ask the children/adolescents to add to the initial map. On the map they should draw the places where they earn money and/or where they collect any cash and voucher assistance they are currently given.



They should use a different colour from used in step one. This may be for example, blue.

They should include:

- People who regularly give them money such as relatives or family friends.
- Formal structures where they receive cash or vouchers — like banks, cash points, post office, NGOs, UN agencies.
- Salaried work — where they are paid a set amount every day.
- Less formal and irregular sources of income such as informal lenders, pawnbrokers or markets where they may sell items when they are short of money.

As they draw the map have them discuss:

- “Who earns or gets money?”
- How do these people earn or get money?

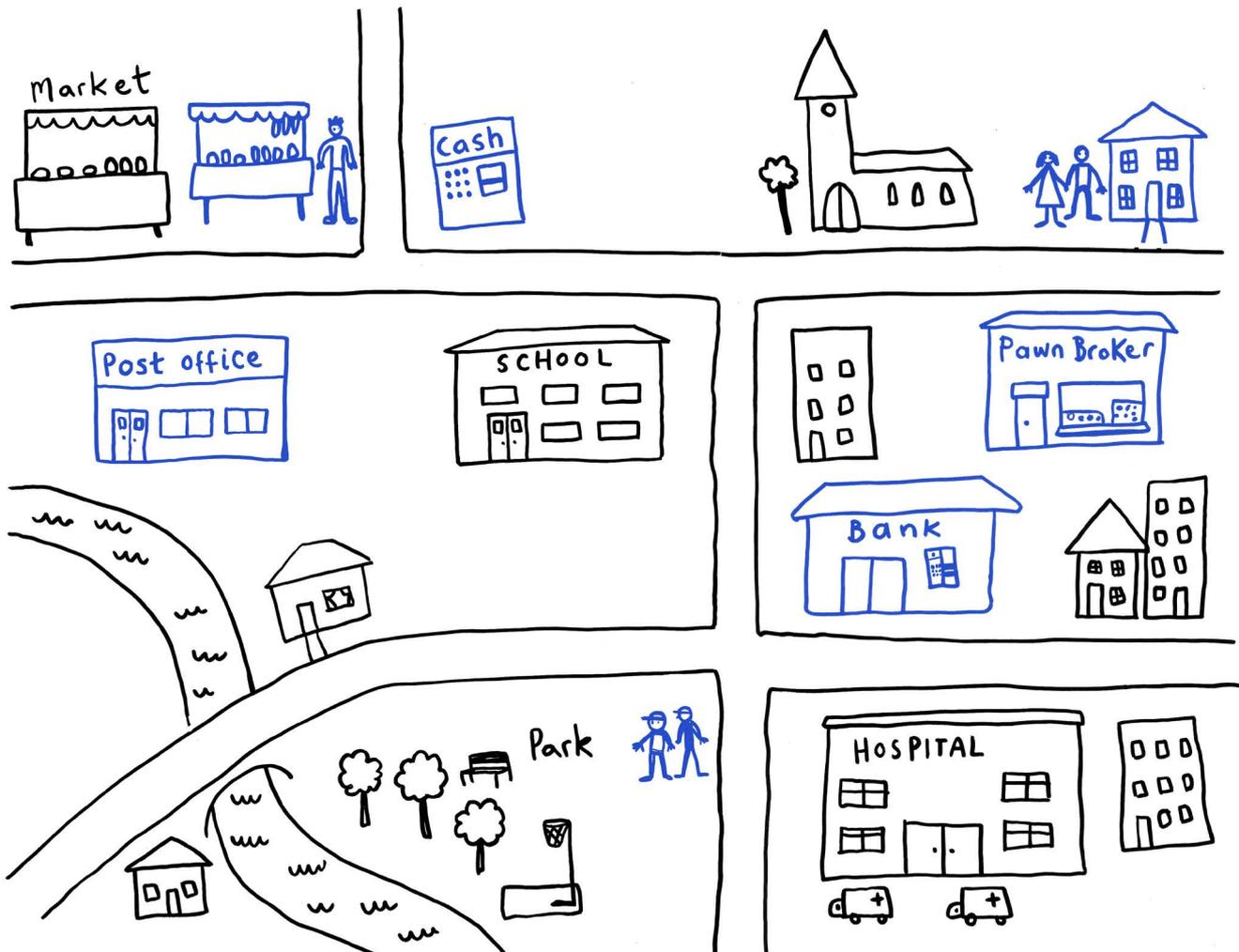


Ask them to discuss:

- “Is money most often given to adults or children/adolescents within a household?”
- Which children/adolescents receive income, cash and voucher assistance in these places?
- Are there children/adolescents who do not receive money?
- Are there children/adolescents who need money but have no income?
- Is it only children/adolescents who receive income, cash and voucher assistance in these places?”



Example community map, step 5.



6

**STEP 6. RISKS TO AND SAFETY OF ADOLESCENTS RECEIVING INCOME, CASH AND VOUCHER ASSISTANCE (10-20 MINUTES)**

Of the places they have drawn on the map, ask the children/ adolescents to identify:

- “Which of these places for receiving cash or vouchers feels safe?”



Tell them they can add places where they receive or spend money and feel safe, they may have missed in Step 5.

Instruct the adolescents to circle or place a symbol next to the places they feel safe in one of the distinct colours they did not use before, for example green. The symbol should be something the children/ adolescents will recognise as something positive, for example like a “+” sign or a happy face. You can let the children/adolescents choose themselves what is a symbol of something positive for them.



- Where do you feel safe? What is it that makes you feel safe in these places? Who is it that makes you feel safe?
- Do you do things to help yourself stay safe in these places? Do you do things to keep your friends or family safe?”



Instruct the children/adolescents to pay particular attention to child protection threats such as violence, abuse, and exploitation. Children/ adolescents will often focus on physical threats such as traffic accidents; snakes; drowning in rivers; etc. Try and bring this back to child protection (in some cases these threats will have a protection relation, e.g. poor children/adolescents have to live on the streets and may be at risk of traffic accidents).

Instruct the adolescents to circle or place a symbol next to the places they feel there is danger. They should you a different colour they did not use before, for example red. The symbol should be something the children/adolescents will recognise as something negative, for example like a “-” sign or a sad face. You can let the children/ adolescents choose themselves what is a symbol of something negative for them.



- “Do bad things happen in any of these places? If yes, in which places do bad things happen?”





Photo: Mats Lignell / Save the Children

- Which of these places feels more or most dangerous?
- What dangers/risks are present in these places?”
- Why do certain places feel more dangerous than others?
- Who or what is it that makes you feel like you are in danger in these places?
- Are certain children/adolescents more in danger in certain locations? For example girls? Boys? Older children/adolescents? Younger children/adolescents? Children/adolescents with disabilities? Children/adolescents who are gender-nonconforming? Children/adolescents from a specific marginal or minority group? Etc.?”
- Are certain children/adolescents more in danger in certain locations? For example if a girl goes to the bank or cash distributor is she more in danger than a boy? Are younger children more in danger than older children/adolescents? Are children/adolescents with disabilities more in danger than those without disabilities? Are children/adolescents who come from a certain place or speak a particular language more in danger? Ask questions about dangers for boys? Older children/adolescents? Younger children? Children/adolescents with disabilities? Children/adolescents who are gender-nonconforming? Children/adolescents from a specific marginal or minority group? Etc.?”



Encourage rich discussion about protection from family, friends, community, government services such as schools, hospitals, protection services, cultural places and other places where people gather. (If they already talked in a lot of detail about strategies for keeping safe above, you do not need to repeat this next set of probing questions).



- “What do you do to keep yourself safe from any of these dangers?”
- What do you do to keep your friends or family safe from these dangers?”
- Who else helps to keep you safe from these dangers?”
- What do they do to help keep you safe from these dangers?”



Probe with questions and take notes about the differences between boys and girls; children of different ages; children/adolescents with disabilities; etc.

Example community map, step 6.

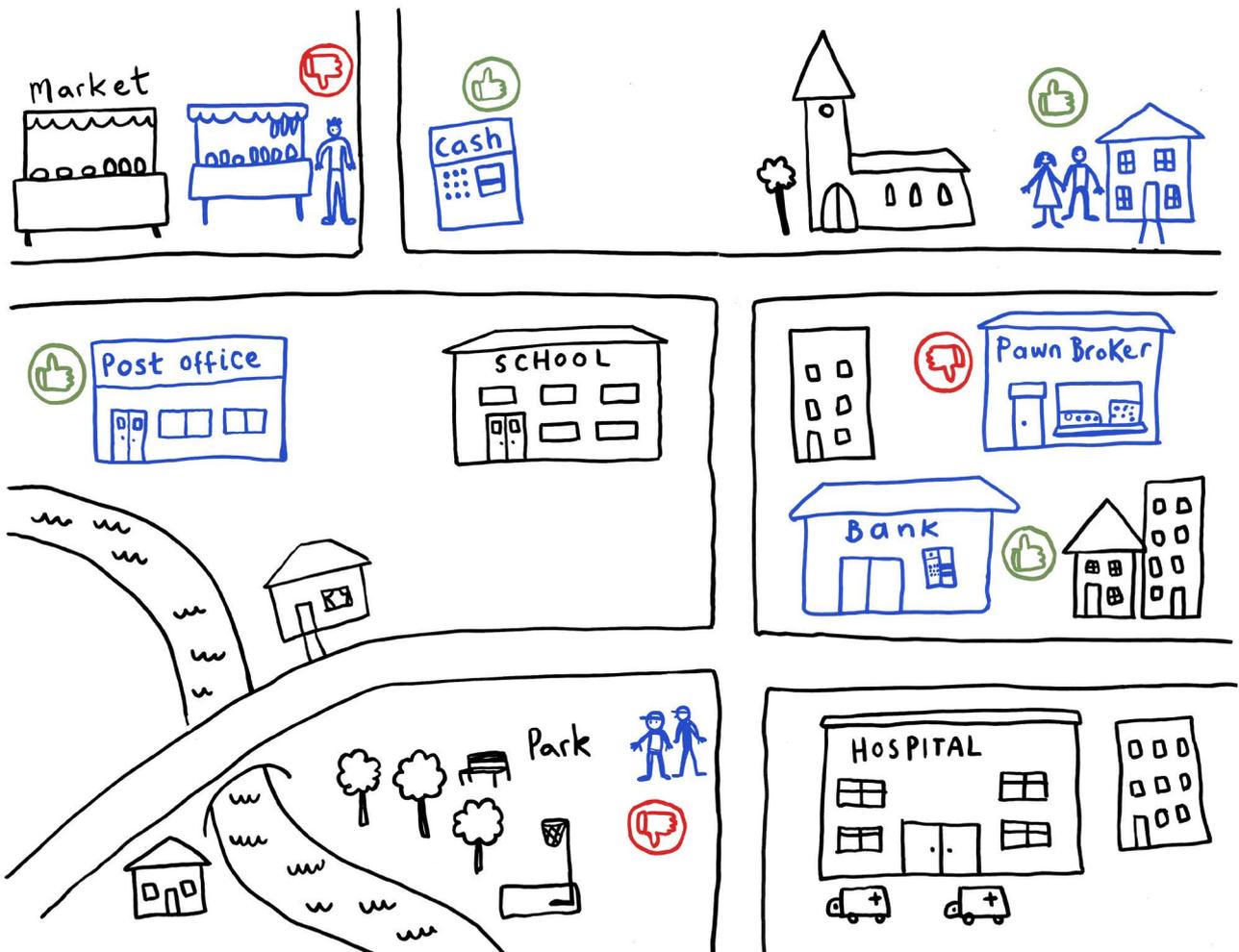




Photo: Mats Lignell / Save the Children

## 7

### **STEP 7. MAP PLACES WHERE ADOLESCENTS SPEND AND USE THEIR INCOME, CASH AND VOUCHER ASSISTANCE (10-20 MINUTES)**

Now ask the children/adolescents to add to the initial map again. This time, on the map they should draw the places where they spend money.

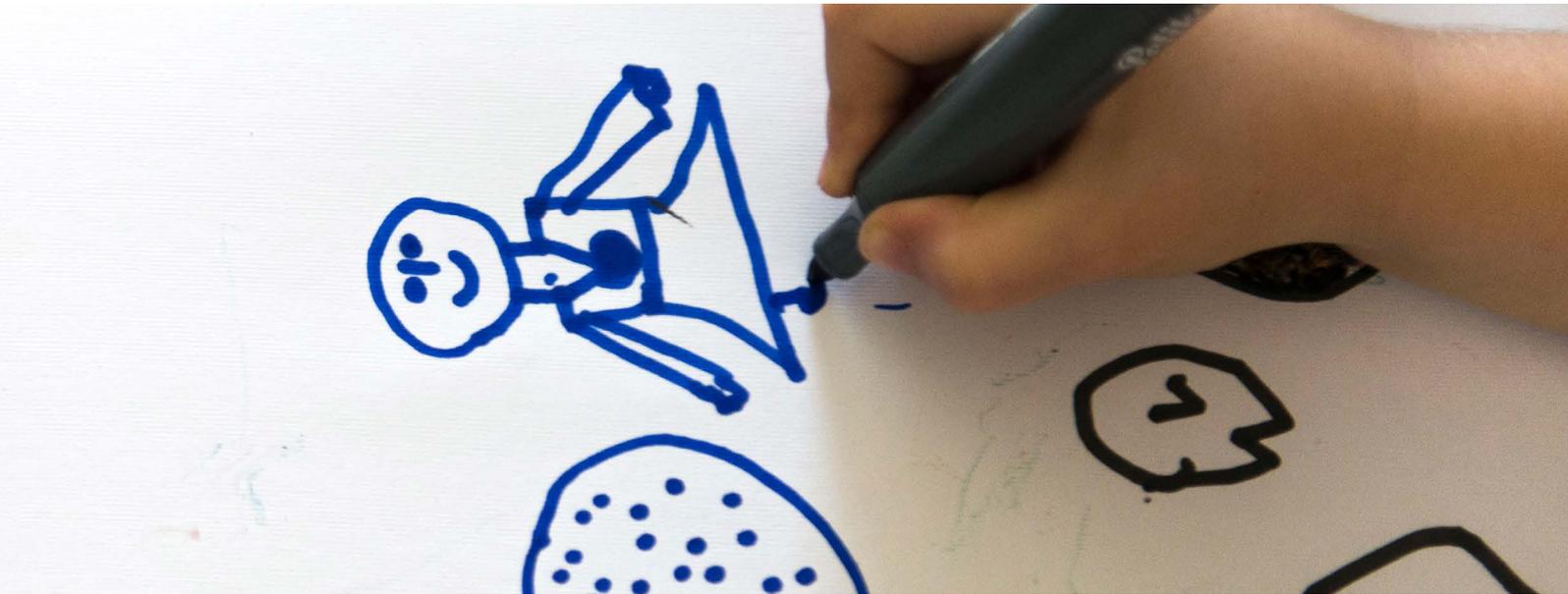
They should use a different colour from used in step one. This can be the same colour used in Step 5, for example, blue.

They should include:

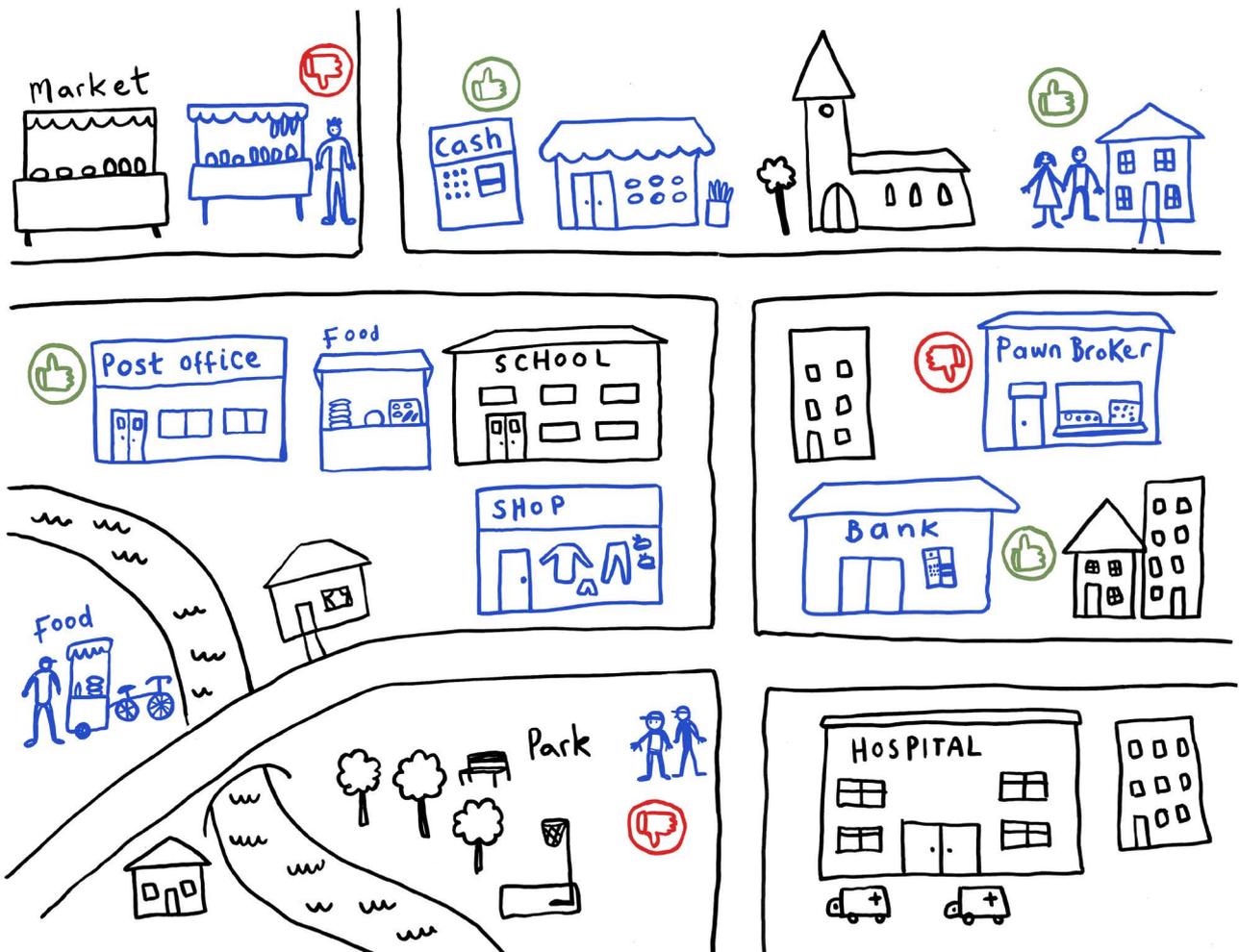
- Shops, markets, or people where children/adolescents go to buy food, clothes, household items, firewood, medication, school materials, and/or hygiene products (including menstrual hygiene products), etc.
- Consider also any services that children/adolescents use they have to pay for — transport, education, health services, etc.

It is ok if some of these places were already marked on in an earlier stage in a different colour.





Example community map, step 7.



8

**STEP 8. RISKS AND SAFETY RELATING TO SPENDING AND USING INCOME, CASH AND VOUCHER ASSISTANCE (10-20 MINUTES)**

Of the places they have drawn on the map, ask the children/ adolescents to identify:

- “Which of these places for spending or using your cash or vouchers feels safe?”
- “What is it that makes you feel safe in these places? Who is it that makes you feel safe?”
- “Do you do things to help yourself stay safe in these places? Do you do things to keep your friends or family safe?”



Instruct adolescents to circle or place a symbol (the “+” or a happy face, or other symbol they chose) next to the places they feel safe in the colour they used before in Step 6 to represent safety.



Now start asking adolescents to think about places they feel they are in danger when spending their money or CVA.

- “Do bad things happen in any of these places? If yes, in which places do bad things happen?”
- “Which of these places feels more or most dangerous?”
- “What dangers /risks are present in these places?”
- “Why do certain places feel more dangerous than others?”
- “Who or what is it that makes you feel like you are in danger in these places?”
- “Are certain children/adolescents more in danger in certain locations? For example if a girl goes to the shop is she more in danger than a boy? Are smaller children/adolescents more in danger than older children/adolescents? Are children/adolescents with disabilities more in danger than those without disabilities? Are children/adolescents who come from a certain place or speak a particular language more in danger? Ask questions about dangers for boys? Older children/adolescents? Younger children? Children/adolescents with disabilities? Children/adolescents who are or identify as non-binary? Children/adolescents from a specific marginal or minority group? Etc.?”
- “Do boys feel safer in this community? Do girls feel safer



in this community? Do other factors make certain children/ adolescents more at risk (being LGBTI; being younger or older; living on the street; being in a foster home or adopted; being from a certain ethnic/religious/minority group, living with a disability; etc.?)”

Instruct adolescents to circle or place a symbol (“–” or a sad face, or other symbol they chose) next to the places they feel they are in danger in the colour they used before in Step 6 to represent safety.



Ask the adolescents:

- “What can [*name of your agency*] do to prevent these dangers from arising?”
- “What can [*name of your agency*] do to make you feel even safer?”



## 9 STEP 9. RANK TOP 4 RISK AND TOP 4 PROTECTION FACTORS [OPTIONAL] (10 MINUTES)

Ask the children/adolescents to rank the sites/places they have marked on their maps.

They should discuss and agree on the top 4 places of danger. 1 being the most dangerous, 4 being less dangerous.



They should discuss and agree on the top 4 places that are protective. 1 being safest and most protective and 4 being protective but not as protective.

They should have a discussion about how their decisions are being made among them. Tell them it is not a problem if they cannot reach a joint decision about the ranking. It is the discussion about why some places are more or less safe that is important.

If they do agree, clearly list the 4 risk and protective factors on the map.

Ask: “How do these rankings and the level of safety change if the child is a girl, boy, of diverse SOGIESC; lives with a disability; is aged 0–5, 6–9, 10–13 or 14–18, etc.?”



## 10 STEP 10. WALK [OPTIONAL] (60 MINUTES)

The walk should only take place if it is safe to do so. Consider how safety may be different for older and younger children/adolescents, for girls versus boys, or for children/adolescents with disabilities. If the walk would exclude certain categories of children/adolescents stay indoors and do steps 1–9.

Suggest that the children/adolescents look at the map they have created and together decide a route through the community. This should show the facilitators the important places where adolescents work, earn and get money, and where they use and spend their money.

Explain that all the children/adolescents in the group are going to go for a walk together in the community. That you will visit the key places identified by the children/adolescents.

Over the next hour, take the children/adolescents on a walk around the community. Visit places where: 1) cash and voucher assistance is received, 2) money is earned, 3) money is given to children/adolescents, 4) where money is taken from children/adolescents and 5) children/adolescents spend money.

Get children/adolescents to also show you other places they like going and where they feel safe.

Write notes as children/adolescents are talking during the walk.

Return to the location where you ran the mapping activity at the end

### Extra optional activities

1. Consider providing training for children/adolescents on how to interview other children/adolescents during the walk. This would gather wider perspectives from other adolescents. The children/adolescents would need to agree how they would document their findings. They could be captured in notebooks or fed back in a discussion with the facilitator later.
2. Provide the children/adolescents with cameras. Ask the children/adolescents to take photographs of places and people relating to receiving and spending cash and voucher assistance. Be careful, the appropriateness of photography varies depending on the setting. Advise children/adolescents to be cautious of taking photos of people or places they feel pose a risk.

of about 40-45 minutes of walking. You have to allow 15–20 minutes to update the map.

When you have returned to the map, ask the children/adolescents:

- “Now we have gone to the community are there any risks or safe places you now want to add to our map?”



Allow the children/adolescents time to revise their map.



## 11

### STEP 11. PROBING QUESTIONS FOR DISCUSSION AFTER THE DRAWING WALK ACTIVITY (10-20 MINUTES)

When the children/adolescents have finished drawing you can ask probing questions on subjects they have not covered during the previous discussions. Example questions are listed below.

You do not have to ask all these questions — this is a menu of options.

You can identify other questions directly relevant to the research.

You should not repeat questions you have already asked on subjects the children/adolescents have already discussed during steps 1–10.

If the groups wish, when answering these questions, they can create a symbol for their answers and add these to the maps. E.g. a symbol or drawing for places where girls go, or where younger children/adolescents are at risk.



Example questions include:

- “Do certain groups of adolescents face more danger because of who they are? For example, are girls or boys in more danger? Are younger children or older children/adolescents in more danger? Are adolescents with disabilities in more danger? Are adolescents from a particular education, political, religious, linguistic, ethnic, etc., background facing greater danger?”
- “What makes having and spending CVA in the community more dangerous?”
- [You can mention and list groups in the location that are commonly at risk — e.g. refugees, a specific ethnic or



*religious group, children with disabilities, etc.].*

- “What makes certain groups of adolescents safer when collecting and spending their CVA? Are certain groups of adolescents safer because of who they are? For example, are girls or boys safer? Are younger children or older children/ adolescents safer? Are adolescents without disabilities safer? Are adolescents from a particular education, political, religious, linguistic, or ethnic, background safer?”
- “What makes having and spending CVA in the community safer?”
- [*You can mention and list groups in the location that have more power – e.g. older adolescents, adolescents from a specific political or economic class; adolescents who belong to certain ethnic or religious groups, etc.].*]
- “Are certain forms of CVA more dangerous than others?”
- [*You can list the different modalities and delivery mechanisms used in the location].*]
- “What could we as an organisation do to help you feel safer?”
- “What can we do as an organisation to make those places that you currently feel are dangerous feel safer for you?”
- “Is the level of danger and safety different in the morning, afternoon, and night, weekend and weekdays, and different seasons/times of the year.”
- “Have sites of safety changed over time?”
- “Have sites of danger changed since a specific event – e.g. the conflict started / disaster happened / etc.?”
- “Would dangers be higher if children/adolescents or if adults received the CVA?”

## 12

### STEP 12. CLOSING (15–20 MINS)

Run a fun participatory activity at the end of all your sessions. Choose something that is culturally appropriate for the group of children/adolescents you are working with. Try to find something that will make them laugh or will get them refreshed again after you have been sitting and working on these sometimes sensitive topics.

Example activities could be:

- **Windstorm:** Have all the children stand up and pretend to be trees in a windstorm, with wind blowing arms as branches. Start by describing a strong windstorm, the wind is blowing fast, and the arms have to move violently. Tell the children/adolescents to gradually slow down. Finish as the wind calms and blows softer and the trees are almost still with leaves only rustling a little bit. Their fingers can be the leaves.
- **Slow dance:** Tell the children/adolescents to think of how they normally dance. Now they will do that same dance, but in slow motion. Get them to dance in slow motion for 30 seconds, and then they can rest. Repeat as long as the group is still enjoying it.
- **Beach time:** Tell the children/adolescents they have to pretend to be at the beach. Tell them first that they are walking through deep sand, with their feet sinking into the sand. Then now they are walking in the sea. Next they are jumping over waves. Now they are walking back on the beach to head home. Next they are shaking the sand off their shoes or feet.”
- At the end of any meeting with children/adolescent you should respectfully thank them for their time.
- Remind children/adolescents how the information and thoughts they have shared will be used.
- Tell them if you will be meeting with them again, and when that will be.
- Provide them with contact information for referral or reporting of child protection dangers in the future. If are not sure to be working in the area you can refer them to local authorities or community-level structures.

## 13

### STEP 13. FOLLOW UP MEETING (60–90 MINUTES)

Hold a follow up meeting with the same group of children 1–2 months after the mapping session takes place.

Bring the map drawn in the first session with you.

In simple language the children/adolescents will understand, summarise and feedback to the children the findings of the mapping activities.

- This should include information from any discussions with other groups of children/adolescents that were run during the mapping phase.
- This feedback should be anonymous.
- Present the different experiences of different groups of adolescents – e.g. difference in experiences of girls versus boys; older versus younger adolescents; children with and without disabilities; children from different social, religious, political, economic, linguistic and ethnic backgrounds, etc.

Confirm the findings of your research. Check that the children/adolescents agree with the conclusions you had drawn.



In particular explore differences between different groups of children/adolescents.

- “Do you agree with what we think are different experiences for different groups of children/adolescents?”
- “What do you think are the different experiences of different groups of children/adolescents? Why do you think these differences are happening?”



Together with the children/adolescents, review the maps that were drawn on the first visit.



Ask the children/adolescents:

- “Are there any changes you would like to make to the findings?”
- “Are there any changes you would like to make to the maps we did last time?”
- “Are there any changes to the dangers?”
- “Are there any changes in what protects you?” “Do you have any new ideas or solutions to address the dangers?”
- Ask them: “What has caused these changes?”



# Post discussion analysis

As a facilitation team you should carry out a debrief discussion to do some preliminary analysis of the main themes discussed soon after each of your sessions with children.

Note the main themes of this research as headings on flipcharts, whiteboards, or blackboards. The themes are:

- Risky locations
- Characteristics and kinds of people that place certain children/adolescents at risk
- Groups of children/adolescents that are most at-risk. Explore aspects of diversity and intersectionality.
- Protective/safe locations
- Characteristics and kinds of people that provide safety/resilience for certain children/adolescents
- Modalities or delivery mechanisms that are safest
- Modalities or delivery mechanisms that are most risky
- Successful mitigation strategies adopted by children
- Potential mitigation strategies that agencies may adopt

Discuss as a group of facilitators each of these themes. What stood out? What did you learn or hear for the first time? What surprised you?

Extract notes from the discussion that relate to each of these topics.

Set the maps/diagrams from different groups next to each other.

Note the main differences and similarities as you are carrying out the analysis. Seek to identify variation specifically between responses of older and younger adolescents; girls versus boys; children with disabilities; those from marginal or minority groups; etc.

This preliminary analysis will help you when carrying out the full data analysis. Guidance on carrying out the full data analysis is given in *Tool 4: Guidance on how to analyse the data*, available at [resourcecentre.savethechildren.net/node/18714/pdf/tool\\_4.\\_data\\_analysis\\_tool.\\_8\\_april\\_2021\\_2.pdf](https://resourcecentre.savethechildren.net/node/18714/pdf/tool_4._data_analysis_tool._8_april_2021_2.pdf)

