# Module 1.5 - Handout - Role and Tasks of a Coordination Group for UASC

## The group or groups responsible for coordination of work with UASC provide a forum for organisations to undertake tasks and activities including the following:

* **Analysis of strengths and weaknesses** in social welfare/child protection systems
* **Identify local practices** in the prevention of family separation and provision of care to UASC;
* **Map operational capacities** of actors and services to prevent family separation and assist UASC, agree on geographical areas of operation, identify gaps and mobilise resources;
* Develop **Standard Operating Procedures** (SOPs) to outline the working procedures in all areas of prevention, IDTR and follow up, protocols on the exchange and management of personal data and information related to UASC, provision of alternative care and durable solutions to UASC, including the role of each organisation and the way in which they will work together[[1]](#footnote-1);
* Ensure **respective modes of action** are understood and respected;
* Ensure **respective registration criteria[[2]](#footnote-2) and caseload priorities** are understood including any potential impact on joint programmes where these are different;
* Agree on **priority actions** and a strategy for urgent response;
* **Plan collaborative actions** such as joint assessments, situation analysis or advocacy actions or joint training;
* **Adapt interagency tools**, for example the agreed standard registration forms for UASC, only as necessary i.e. with regard to culture and language – (*see 4.1.1* ) and **messages** for prevention of separation and information campaigns;
* Design a process for **case management** and **referral,** building on any existing systems;
* Adapt, develop or establish **information management systems (IMS), agree policy and procedures for safe storage of information and information sharing** and ensure protocols for managing and sharing information are available and implemented;
* **Establish systems** for coordination with other protection areas of responsibility and other sectors in the wider humanitarian response;
* Agree on advocacy messages in relation to **media coverage** of the emergency**;**
* **Ensure** that policy is respectful of **humanitarian principles** (NIHA)
* **Develop a strategy for capacity building and training** where necessary including ongoing and where possible, collaborative training and mentoring on all aspects of case management for UASC.
* Agree on/define **policy and programme approaches,** including ‘Minimum Standards[[3]](#footnote-3)’ to ensure that the type and quality of support a child receives is consistent across all organisations and actors;
* Discuss possible engagement with **military actors** for child protection advocacy.
* **Monitor** the effectiveness of the response.

The tasks and activities to be undertaken by the UASC coordination group at national/local level will equally apply to a **regional or sub-regional coordination group for UASC.** Where procedures are already in place in a country programme, for example SOPs, these will need to be extended to take account of the regional context and players.

**The regional or sub-regional coordination group (where there is a need for one)** will need to address the following *additional* tasks:

* **Research** to understand the scope and patterns related to the movement of UASC.
* **Advocacy** for countries of origin to take greater responsibility including the implementation of programmes for the prevention of family separation at the point of origin and while travelling to the country of destination and measures to prevent the inappropriate movement of UASC across the national border (i.e. for cross border trafficking/informal adoption). However, this should not prevent children from exercising their right to seek asylum in another country when fleeing war or persecution.
* **Advocacy** with receiving countries toprovide appropriate support and assistance and to abide by international humanitarian and human rights law in relation to refugee, asylum seeking and migrant children and to ensure the provision (where necessary) of safe houses and alternative interim accommodation for children who may be at risk e.g. children formerly associated with armed forces or armed groups or trafficked children.
* **Advocacy with border officials and medical organisations** to follow agreed procedures and guidelines regarding the evacuation of children for urgent medical treatment or other purposes (children may arrive at border crossing points with serious injuries if fleeing from armed conflict and other situations of violence)**.**
* **Implementation of a common information management system**, for example the IA CP IMS, to facilitate sharing of information between country programmes as appropriate and ideally to centralise information. Where there is more than one IMS being used, protocols should be developed with regard to information sharing between systems.
* **Standardising** policies, tools, systems and common approach to family tracing and reunification in all affected countries.

1. See appendix 4 Example SOP [↑](#footnote-ref-1)
2. Organisations may differ in the criteria they use for documentation (see chapter 7) and the decision will be based on context-specific vulnerability criteria [↑](#footnote-ref-2)
3. See CPWG (2012) *Minimum Standards for Child Protection in Humanitarian Action,* CPWG

   [↑](#footnote-ref-3)