



## CPMS MAINSTREAMING CASE STUDIES SERIES

### Child Protection, Protection, Camp Management and WASH:

#### ***“Mainstreaming through capacity building: Collaboration to increase safety in Rakhine State, Myanmar”***

*In emergencies, girls and boys face increased risk to violence, abuse, neglect and exploitation. The way in which humanitarian aid is delivered can further increase these risks. Children may be exposed to harm during the chaos of a distribution or at water points or experience abuse in cramped evacuation centres. Sometimes harm is caused directly due to humanitarian workers’ actions or non-actions. Many threats to the safety and wellbeing of children can be mitigated or even eradicated through timely and sensitive provision of humanitarian aid across all sectors. All humanitarian actors have an important contribution to make to the protection and recovery of children.*

*To mainstream child protection means to ensure child protection considerations inform all aspects of humanitarian action. It also minimizes the risks of children being violated by programmes designed without proper consideration for children’s safety or wellbeing. **Mainstreaming child protection is an essential part of compliance with the ‘do no harm’ principle that applies to all humanitarian action.**<sup>1</sup>*

*Going beyond mainstreaming, integrated programming allows for actions between two or more sectors to work together towards a common programme objective, based on an assessment of needs. Where integrated child protection programming is not possible, child protection mainstreaming is essential. This case studies series looks at both examples of integrated programming and mainstreaming and the CPMS mainstreaming standards are applicable for both.*

In early June 2012, and again in October that year, inter-community violence erupted in parts of Rakhine State, Myanmar, displacing over 100,000 people. Rakhine State is one of the least developed parts of Myanmar, characterized by high population density, malnutrition, low income, poverty and weak infrastructure, as well as being vulnerable to recurrent floods and storms. Thus the impact of violence was significant, not only causing large numbers of people to be displaced but also adversely impacting affected populations in isolated and host communities as well. Humanitarian organizations responded with the provision of life-saving assistance, including establishing temporary IDP camps.<sup>2</sup>

This case study explores a number of WASH-related incidents occurring in Sittwe and Pauktaw townships, including some significant safety incidents involving children and highlighting the lack of a protective environment for children and communities. These incidents as well as the strong relationships between actors involved in the response prompted a significant and long-term collaboration between WASH, Camp Coordination and Camp Management (CCCM) and Child Protection actors, working within a coalition with

<sup>1</sup> Child Protection Working Group, *Minimum Standards for Child Protection in Humanitarian Action: Briefing note to ensure child protection mainstreaming*, “Standard 23: Water, Sanitation and Hygiene (WASH) and Child Protection”, 15 December 2014, [http://cpwg.net/minimum\\_standards-topics/mainstream](http://cpwg.net/minimum_standards-topics/mainstream).

<sup>2</sup> UN Office for the Coordination of Humanitarian Affairs, *Rakhine Response Plan (Myanmar): July 2012-December 2013*, 12 August 2012, <http://reliefweb.int/report/myanmar/rakhine-response-plan-myanmar-july-2012---december-2013>



broader protection and gender-based violence (GBV) actors. Within a year, this interagency inter-sectoral collaboration led to a wide-scale protection mainstreaming capacity-building project that trained over 1,000 WASH actors in Rakhine State.

For the purposes of analysing the collaborative activities undertaken in this case study, it is helpful to understand the humanitarian coordination structures in Rakhine State, Myanmar. The Protection Working Group is led by UNHCR; UNICEF leads the Child Protection Sub-sector Working Group<sup>3</sup>; and UNFPA and International Relief Committee (IRC) leads the GBV Working Group. The WASH cluster in Sittwe-Rakhine is led by UNICEF and UNHCR leads the Shelter/NFI/CCCM cluster in Sittwe-Rakhine.<sup>4</sup>

This case study is based on interviews with three key actors in Rakhine State: Lindsay Shearer, then Save the Children Child Protection Manager; Maria Makayonok, then Danish Refugee Council Protection Programme Manager; and Mélissa Adoum, then WASH Cluster Coordinator.<sup>5</sup>

### **WASH incidents highlight the importance of child protection (and broader protection) mainstreaming**

An increasing number of safety issues, including those that involved children, were causing concerns for child protection and WASH actors alike. The deaths of two children falling through a pit latrine in late 2014 was the most severe and tragic incident which highlighted the necessity for a wide-scale collaboration involving not only child protection but all protection actors to work closely with the WASH cluster to address these issues.

Initially, this involved an immediate rapid interagency assessment to identify physical risks for children in the Sittwe and Pauktaw camps and provide recommendations for immediate implementation. This exercise involved agencies from the Child Protection sub-sector working group: Danish Refugee Council, Save the Children International, International Rescue Committee, Plan International, and Relief International.<sup>6</sup>



Lindsay explains, “As child protection actors we knew unsafe latrines weren’t the only danger for children in the camps. We wanted to also look at how we could improve the camp as a whole. And we wanted to know from the community what were dangerous areas for children.”

While WASH actors took responsibility for conducting structural assessments of latrines in the two camps, child protection (and broader protection) actors sought to understand the views and

<sup>3</sup> Members of the CP sub-sector in Rakhine State include: Save the Children International, Danish Refugee Council, IRC, Plan International, Relief International and Lutheran World Federation.

<sup>4</sup> Myanmar Information Management Unit, *Overview of Coordination Teams in Myanmar*, March 2016, <http://reliefweb.int/report/myanmar/overview-coordination-teams-myanmar-march-2016>

<sup>5</sup> Conducted on 17 May, 9 June and 13 June 2016 respectively. **Mélissa Adoum supplied all photographs in this case study.**

<sup>6</sup> Save the Children International, *Interagency Assessment – Physical Safety in camps for Children*, October 2014. Report shared by Lindsay Shearer.



perceptions of dangers from five selected communities through focus group discussions with children and adults. Overall, the main dangers identified for children were water sources (e.g. creeks and ponds), latrines, main roads, construction sites, open drainage/ditches and isolated or unlit areas. GBV colleagues identified similar safety risks for women and girls, particularly bathing areas for women and girls in public areas and latrines without lighting at night.

For a number of reasons, including safety incidents, child protection, protection and GBV actors determined to initiate a wide-scale interagency protection mainstreaming process with the WASH Cluster and WASH actors in the field. As CCCM actors had already participated in a protection mainstreaming training led by the Danish Refugee Council (DRC), it was agreed that they would be valuable contributors to this process. This process was led by the Protection Working Group, working with the Child Protection Sub-sector working group and the GBV working group and involved a range of activities aimed at enhancing the capacity of actors involved in the WASH sector to support child protection, protection and GBV needs and improve safety and access for those most vulnerable.

### **Working with the WASH Cluster**

#### ***The development of a checklist<sup>7</sup>***

The WASH cluster was well aware of the challenges it faced and was eager to address them. To prevent further safety incidents from arising, Child Protection, Protection, CCCM and WASH actors collaborated to identify relevant indicators to prevent and address protection issues, including child protection. To do so, they consulted all the relevant mainstreaming materials, including the Minimum Standards for Child Protection in humanitarian Action (CPMS)<sup>8</sup>, and reviewed them with WASH colleagues to determine which were the most appropriate and useful for their context.<sup>9</sup> The end result was a short list of indicators that the WASH cluster would use to monitor and evaluate WASH activities. For example, ensuring water collection materials were of a size and shape that children could carry safely; and ensuring that vulnerable children have access to safe water collection points.<sup>10</sup> Melissa notes that while the final checklist may not have been extensively utilised in the field, its development was a very useful way of highlighting the importance and value of mainstreaming child protection, protection and GBV issues and building capacity amongst WASH agency leads to do so. It also created momentum for further activities in this area.

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<sup>7</sup> The Distribution and Child Protection Case Study in this series also discusses the development and use of a checklist.

<sup>8</sup> Child Protection Working Group, *Minimum Standards for Child Protection in Humanitarian Action (2012)*, Standard 23: *Water, Sanitation and Hygiene (WASH) and Child Protection*, <http://cpwg.net/minimum-standards/>

<sup>9</sup> Other materials consulted were: Global Protection Cluster, *WASH Programs: Tips for Protection Mainstreaming*, May 2014, <http://www.globalprotectioncluster.org/en/areas-of-responsibility/protection-mainstreaming.html>; World Vision, *Minimum Inter-agency Standards for Protection Mainstreaming* (2013), <http://www.globalprotectioncluster.org/en/areas-of-responsibility/protection-mainstreaming/external-resources.html>; IASC/GPC, *Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action* (2015), <http://www.globalprotectioncluster.org/en/tools-and-guidance/essential-protection-guidance-and-tools/gender-based-violence-essential-guidance-and-tools.html>.

<sup>10</sup> The full list of indicators can be found below in Annex A. Shared by Lindsay Shearer.



### ***Broader response to child safety issues***

Following the deaths of the two children in the pit latrine accident in 2014, and under some pressure from donors to prevent further incidents, discussions were held between WASH actors, the Camp Management Committees and the Protection Working Group to see what could be done to ensure an overall more protective environment in the camps.

Following the results of the interagency inter-sectoral camp safety assessment described above, a number of outcomes and actions were undertaken: WASH designs were changed and regular monitoring was instituted, including daily checks on the quality of construction. Child protection actors began determining safe spaces for children to play, monitoring unsafe areas, and engaging more with children to determine ways to communicate unsafe areas, talking about camp dangers and providing information and advice on what to do if a child was hurt. Crucially, CCCM established incident reporting and recording mechanisms and collated this data to monitor safety issues. The actions taken began to work. As Lindsay notes, “We used this data to check if things were improving...And actually, they were.”



### **Capacity-Building for WASH actors**

Over the period 2013-2015, a number of capacity-building initiatives with WASH, CCCM and Protection actors were undertaken. At the interagency level, staff were introduced to basic protection concepts and using complaints and referral mechanisms to identify and support beneficiaries, including children, with protection issues and needs. And at the field level, staff were introduced to the newly developed WASH indicators and what this would mean for their programmes.

Building on this ongoing work with the WASH sector, the Protection Working Group, collaborating with the Child Protection Sub-Sector Working Group and the GBV Working Group as well as WASH and CCCM actors, developed a Protection Mainstreaming Training-of-Trainers (ToT) programme, aiming at capacitating a cadre of trainers to work at the field level with WASH actors to strengthen the protective aspects of their work and ensure that WASH activities did not create any threats for the affected population, including children.

The participants of the ToT (future protection mainstreaming trainers), were all national staff with expertise in either CCCM, gender-based violence (GBV), child protection or protection. They were then divided into teams of 4, mixing the 4 different areas of expertise. This collaboration improved their working understanding of each other’s specific areas of work. WASH actors supported the ToT by teaching participants more about the WASH sector.



After completing the ToT, the new training teams were required to run approximately 10 trainings in their relevant camp or area within a camp. The trainings were attended by national field based WASH actors from all agencies and organisations.

WASH participants were trained on how to strengthen projects to support those most vulnerable, how to avoid doing harm, how to consult with communities on more sensitive matters. Regarding child protection aspects of the training, participants were taught ways to identify examples of child abuse of all forms, including exploitation. They were also taught how to report and refer child protection incidents and issues. For example, what to do if you come across a child playing unsupervised, how and to whom do you report incidents and the role of child protection and CCCM actors. For Mélissa, one of the greatest benefits of the training was that WASH staff learned “what is a protection problem and what are the associated referral pathways. And that relieved them from a sense of confusion and uncertainty they’d been feeling before.” Within a year, teams who had gone through the ToTs had trained over a thousand WASH field staff.

## **Lessons Learned**

### ***Bottom-up AND Top-down approaches***

There were many reasons why the process of implementing mainstreaming activities took a long time in Rakhine. One lesson Lindsay learned was that leading an interagency inter-sectoral process from the field shouldn’t neglect those in the capital but should gain the understanding and support of humanitarian actors at all levels. In their desire to move quickly and efficiently, less attention was paid to ensure buy-in from those in senior management. This lack of buy-in created delays. “We need that support from above to be saying ‘we all need to be doing child protection mainstreaming so let’s see how we can embed it in our programmes’”, Lindsay notes.

### ***The value of involving other relevant actors***

The involvement of CCCM actors in capacity-building initiatives was one factor identified as critical to the success of the approach. Aside from the general benefit of involving an additional sector, CCCM’s participation also helped to concretise child protection concepts in a camp setting that might otherwise seem abstract for other sectors. Using the functions of the complaints and incident mechanism was one way to illustrate the linkages between the roles of all three sectors: WASH actors could report incidents involving children to either child protection actors or CCCM actors and CCCM would collate the data.

### ***The importance of understanding other sectors***

Lindsay, Maria and Melissa all highlight the importance of child protection actors taking time before embarking on a mainstreaming project to gain a reasonable understanding of the sector they wish to work with. Maria says, “If you’re mainstreaming something into the other sector



you need to know what they do and what challenges they have and how much you can expect of them.”

### ***The skill of consulting with communities***

Capacity building and collaboration between Protection and WASH focussed amongst others on strengthening the skills and comfort levels of WASH field staff to consult with communities on a number of more sensitive sectoral issues, for example talking with women and girls about menstrual habits. This was highlighted as crucial by protection and WASH actors alike. Melissa points out that child protection, protection and GBV actors have skills in raising and discussing difficult issues in communities that WASH actors typically don't have. Understanding this reality can help guide the capacity building that may be necessary for child protection actors seeking to engage in mainstreaming activities with other sectors.

### ***On-the-job child protection coaching***

In the Rakhine context, the WASH sector was well aware of the challenges and shortcomings it faced – through their hygiene promoters, the WASH sector met daily with individuals and families. However they were unable to articulate the child protection issues and to identify solutions. For this, they sought the assistance of child protection actors. For Melissa, the best outcomes were achieved when child protection, protection, GBV and WASH actors collaborated in the field in the course of their every day work, learning about each other's work and challenges. For WASH actors, the best support they received was advice based on field realities and which helped them understand how to concretely respond to their own problems.

**“WASH people are generally very receptive and open to improving their projects but they need to be told exactly how. So we need concrete examples, not just good principled strategies.” (Melissa)**

### ***The benefit of broader protection mainstreaming***

Approaching this project as a collaboration involving WASH as well as Protection, GBV, Child Protection and CCCM actors provided a number of benefits: “Our teams had the opportunity to see how other sectors worked and how they could work together to address the protection needs of beneficiaries”, Lindsay explained. By speaking with one voice, they were able to powerfully respond and advocate on issues in the field. They were also able to see greater opportunities for ongoing collaboration in their everyday work. It also reduced the requests placed on other sectors – through collaboration between protection, GBV and child protection actors in the field, assessments, advice and recommendations were often jointly provided.

### ***The importance of promoting and supporting child protection mainstreaming***

This case study crucially highlights the necessity of all sectors promoting the importance of considering child protection issues and the importance of collaborating with child protection actors within their operations. The responsibility for encouraging and supporting child





protection mainstreaming efforts must be shared by all humanitarian actors – it cannot be done by child protection actors alone. Indeed, the most persuasive arguments are often made by those in other sectors who have seen the critical value of collaborating with child protection actors to ensure the safety of children in their responses.

**Annex A: WASH Indicators developed by the Protection Working Group, Child Protection Sub-sector Working Group and GBV Working Group for Rakhine State, Myanmar**

WATER AND SANITATION

KEY ACTIONS FOR PROTECTION MAINSTREAMING WATER AND SANITATION

WATER

- Women, elderly, people with disabilities and other vulnerable groups are represented on any water/sanitation committees.
- There is an effective mechanism in place for individuals or groups to raise concerns about the water and sanitation facilities.
- Consider women, and children’s physical capabilities (including all disabled community members) when designing water collection points. Persons with special needs such as mentally and physically disabled, and elderly should be consulted on the design and safe location of water collection points so these can be easily accessible by all.
- Water points should be accessible, safe and easy to operate by children as well as adults, with particular attention to the disabled and elderly and persons with chronic diseases.
- Provide jerry cans or other water collection containers of a size and shape that children can carry safely.
- Ensure vulnerable children such as disabled children, children without parental care or living on their own and street children, have access to safe water collection points.
- Ensure vulnerable women and girls can safely access water points on their own.
- Ensure that elderly and disabled women and men and adolescent girls have safe access to water points and have acceptable ways to carry/transport water jugs to and from water points (specially designed jerry cans, etc)
- Ensure that water pumps and wells are designed to accommodate the needs of vulnerable groups (location at an appropriate height from the group and without large steps to access the source.) Some water pumps need to be designed and adapted for use by people with chronic diseases, elderly, and people with disabilities, and pregnant women.
- Identify residential schools, orphanages, detention facilities, women and girls centers, and other groups caring for vulnerable populations, and ensure they receive adequate supplies of potable water.
- Ensure there is sufficient quantity of water to meet minimum needs according to total number of persons in camps and/or villages. A WASH committee can be established to ensure there is a system in place which allows all community members to have unhindered access to the water points (discrimination or frictions with other members are usually frequent at water points). Additional water points may be established for different



ethnic/social groupings within a community if they feel unable to access the water and sanitation facilities in another area.

- If water is being trucked, pumped or rationed, it is important to ensure that water distribution time and duration are planned jointly with the community, according to women and men's convenience and cultural habits and limited to daylight hours. This is to be consulted with the group that is responsible for water collection or the WASH committee.

#### LATRINES AND SHOWERS

- Build separate latrines and shower facilities for men and women/girls. Women's and girl's latrines should be less than 50 meters from their housing area, provide locks and be well lit, for protection. To ensure privacy, provide secondary enclosures around facilities and privacy screens within bathing/shower facilities (stalls).
- Increase the capacity for women's latrines, recognising that they will serve both women and children. Make openings smaller to decrease the risk of children falling in.
- Promote latrine use among children and adults. Ensure latrines are safe for children.
- Promote messaging on the need to respect latrine segregation signage and community engagement to prevent loitering, harassment and other intimidating behaviors by men and boys around the latrines and bathing spaces.
- Provide child friendly information to encourage use of latrines.
- Encourage caregivers to properly dispose of children's excreta (e.g. provide potties, encourage caregivers to empty a child's potty into a latrine and clean up exposed waste in living areas).
- Latrines and showers are designed in a way that elderly persons, persons with chronic diseases, and persons with disabilities can have access to them without any impediment. They should be located at an appropriate height from the ground and without large steps to access the latrines and showers. Latrines and showers should have ramps and hand rails. In situations where it is not possible to make all latrines and showers acceptable to all groups, special latrines and showers should be constructed or provided for elderly, disabled and persons with disabilities (i.e. potties, latrines with handrails, facilities inside their shelters)

#### HYGIENE PROMOTION

- Promote simple personal hygiene messages for children using child-friendly information (e.g. cartoons)
- Work with the Education and Child Protection Clusters to initiate child-to-child peer training programs in schools, in order to conduct hygiene promotion and spread health education and safety messages.
- Ensure systems are in place to make sure that garbage is properly disposed of, especially in children's play areas.
- Provide health information about the importance of keeping all animals outside of the living areas, to decrease exposure to illness.





- Work with PWG and GBV SS to design and promote culturally appropriate discussion sessions, messaging around menstrual health management and disposal of sanitary napkins for women and girls.
- Work with PWG and CCCM cluster members/leads to develop discussion sessions with men and boys re: MHM
- Women, men, elderly, persons with disabilities and persons with chronic diseases who are involved in sanitation provision receive training or proper capacity building on hygiene promotion.
- Community members in general receive hygiene promotion sessions with particular emphasis on elderly, persons with disabilities and persons with chronic diseases.

#### FOR ALL ACTIVITIES

- Speak to women, girls and children about their concerns, needs, and preferences in the design, location, and delivery of activities and infrastructure.
- Ensure that information gathering is done in culturally acceptable and sensitive ways that facilitate open discussion (example – women HPs speak with women’s groups)
- Use role plays and scenarios to illicit more discussion, particularly when speaking about/trying to gather information on sensitive topics
- Community groups should be created and the representation and needs of all members of the community should be taken into account (i.e. diverse and gender-balanced). This will help the communities to have ownership of water and sanitation facilities and will ultimately lead to better community maintenance and contribution.
- Water and sanitation facilities should be available within or in close proximity to learning environments, meeting points and health facilities so they can be accessible by everyone, in particular, the most vulnerable groups.