



Advocacy Checklist on Targeting and Costing for Child Protection in the Humanitarian Planning Cycle (Working Document)

Through the development of the Humanitarian Needs Overviews and Response plans, all humanitarian sectors - including Child Protection as an Area of Responsibility of the Protection Cluster - carry out comprehensive analysis to estimate the number of children and caregivers in need of protection services, including the resources required to reach target populations.

However, the 2020 [Still Unprotected report](#) states that “average [child protection] funding per beneficiary falls short of what is needed to achieve the Minimum Standards for Child Protection in Humanitarian Action.” Additionally, Child Protection typically makes up only 2% of the overall humanitarian appeal and is frequently less than 50% funded (at 1.4% funded of the overall humanitarian funding received). Thus, the recommendations in the **Still Unprotected report** call for humanitarian actors to strengthen analysis of both child protection needs, estimates of people in need of child protection services as well as to improve targeting of interventions **based on needs**.

This working document provides a short checklist for those engaged in the Humanitarian Programme Cycle (HPC) to help ensure the identification of needs, targeting and costing within needs overviews and response planning is in line with the Child Protection Minimum Standards (CPMS) and more accurately reflect the protection needs for children and the resources required to meet these needs. Through the lens of the centrality of protection and inter-sectoral analysis, targeting and costing for child protection should be factored to meet the CPMS.

Targeting

In line with humanitarian principles and the Sustainable Development Goal (SDG) commitment to leave no one behind, humanitarian response targets must be defined based on humanitarian needs. It is fundamental that the estimates of the number of children in need are not intentionally underestimated or the targeting reduced based on either the capacity to deliver or anticipated funding. When targeting is reduced due to prescribed funding envelopes or current capacity, for example, then the true scope of children’s actual needs is not understood and the response is unlikely to be in line with principles such as transparency, with a limited ability to present actual needs and advocate on gaps.¹

- ✓ While criteria such as capacity, existing resources, time constraints, and other factors are frequent considerations for targeting, final child protection targets must ultimately be based on need and prioritise the most vulnerable. The target population calculation should be based on child protection severity and Children in Need (CiN)/Persons in Need (PiN) methodology as it helps to identify priority areas and population groups.
- ✓ The consideration of the presence of child protection actors and availability of government resources should inform the need to expand partnerships for increased geographical reach and to improve quality through building capacity of CP actors, particularly local actors.
- ✓ The implications for identified CiN who are not targeted in the planned response must be considered, with clear indications on whether other mechanisms outside the HRP can address those needs.
- ✓ Responses outside of the Humanitarian Response are identified and deducted in the final target calculation. It is worth noting that, in many contexts, systems for child protection outside the HRP are usually chronically underresourced.

¹ For example the 2021 HRP, the Global Protection Cluster and Areas of Responsibility have proposed including 65% of the Protection PiN as targeted and 15% of the overall HRP financial request as protection appeal as guidance.



- ✓ When calculating the target population, it is important to be cognizant of common targets among the Areas of Responsibilities and to ensure activity targeting is complementary.
- ✓ Coherence of targets across Humanitarian Response Plans and Refugee Response plans should be checked, if relevant.
- ✓ The underlying assumptions and methods used to set the targets should be clearly documented.

Costing

Child protection interventions typically demand a higher ratio of human resources due to the fact that the services rely on specialized human resource capacities. For example, the costs per child in a particular intervention, such as case management or reintegration programming for former CAAFAG, will require one-to-one tailored multiple actions taken for a single child/family, and repeated follow-up in order to adequately respond to imminent threats and mitigate future risks.

- ✓ The predominant cost drivers, including particular features of the operating environment, target population, gaps and appropriate response modalities need to be clearly defined and agreed on.
- ✓ Given the nature of child protection service delivery, child protection programme staff costs are calculated as direct programme costs and not as support costs. For example, child protection case workers and psychosocial support workers would be considered as 100% direct programme cost.
- ✓ Costing can be done through: unit-based costing (activity, service or outcome), project-based costing, or hybrid costing. See the [IASC HRP Costing Methodologies](#) and [UNICEF Quick Guide to Costing](#) for more details. See also [Mozambique Targeting Analysis](#) for an example on targeting. When looking at costs-per-child, it is imperative to look at costs-per-child per intervention as opposed to costs per child per unit or project.
- ✓ Life-saving child protection interventions, in particular, case management can be costly (sometimes more than USD1,000 per child per year) as staff time is a major cost driver and the number of personnel must increase in proportion to the number of children served to align with the CPMS. See [Iraq Case Management Costing model](#) for examples.
- ✓ Where lower capacity or fewer existing resources have been identified, consideration should be made to include start-up costs needed to target the majority of those persons in need of child protection services.
- ✓ Costs for strengthening protection systems and capacity strengthening of government and local civil society organizations/actors should be included in costing methodologies to ensure sustainable investment in national response capability, including strengthening of community systems for child protection.
- ✓ Response plans should reflect targeted activities and costing for child protection interventions that reach the child, family, community and society in line with Standard 14 of the CPMS (socio-ecological approach).

For more information, contact Michael Copland, Global CP AoR Coordinator.

For country coordination groups seeking support, contact the [Child Protection AoR Help Desk](#) via the contacts below:

- CHE-CPAOR ArabicHelpDesk: CPAOR_ArabicHelpDesk@unicef.org
- CHE-CPAOR SpanishHelpDesk: CPAOR_SpanishHelpDesk@unicef.org
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Additional 2021 HPC resources, including country examples on costing and targeting, can also be found in [this dropbox folder](#).



Annex 1: Sample [Child Protection Minimum Standards](#) to reflect in activity planning and costing²

Standard 2 Human Resources

- All child protection staff and associates should have access to opportunities that strengthen their experience, skills and behaviours according to the [CPHA Competency Framework](#).
- All staff and associates should receive training on (a) child safeguarding and PSEA, (b) do no harm, (c) psychological first aid, and (d) risk assessment.
- Prioritise inter-agency trainings where staff and associates can learn from each other's experiences and develop a shared approach to child protection.

Standard 7 Dangers and Injuries

Victim assistance (which includes survivor, family and community assistance) must be provided through a coordinated, tailored case management approach. This can be for survivors of explosive ordnance (EOs). Services may include:

- Emergency and ongoing medical care and rehabilitation
- Mental health and psychosocial support
- Legal support and documentation
- Economic inclusion (including employment and social assistance)
- Social inclusion (including equal access to education, cultural activities and sports)
- Support for caregivers with injuries or impairments, including access to childcare
- Buildings and community spaces that are safe and accessible for people with disabilities

Standard 10 Mental Health and Psychosocial Support (MHPSS)

Child protection workers must consider and plan for services across the four layers of the MHPSS [pyramid of services](#), with emphasis on layers one through three. Layer four can be included where appropriate.

Pillar 3: Applying a Socio-ecological Approach to Child Protection Programming

Interventions across the multiple levels, specifically the individual, familial, community, societal (including social norms change where appropriate) levels, should be reflected in response plans.

Standard 15 Group Level Activities

- The child to adult ratio will vary depending on activities and numbers of children with disabilities. The recommended ratios are two adult facilitators per:
 - 20 children aged 5–9 years
 - 25 children aged 10–12 years
 - 30 children aged 13–18 years

Standard 18 Case Management

- 1 caseworker for every 25 children
- 1 supervisor for every 5-6 caseworkers

Pillar 4: Working Across Sectors

- Promote the centrality of protection and holistic programming to meet the interconnected needs of children by training and collaborating with other sectors for needs identification and analysis, child protection risk mitigation, and response planning.

² This list is not exhaustive. Visit https://alliancecpa.org/en/CPMS_home for more information on the Minimum Standards for Child Protection in Humanitarian Action.