

CAPACITY NEEDS AND GAPS ANALYSIS CAAFAG PROGRAMMING

Introduction

The CAAFAG Task Force of the Alliance for Child Protection in Humanitarian Action, co led by Plan International and UNICEF, is implementing an interagency project with the aim to strengthen the capacities of field practitioners to design and implement programs related to the prevention of child recruitment, the release and the reintegration of children associated with armed forces and armed groups (CAAFAG) across multiple contexts. Through this project, Plan International will develop a capacity building toolkit with an interagency approach, involving global and field actors.

A capacity needs and gaps assessment was implemented to gather information on skills and technical knowledge needed to deliver quality CAAFAG programmes, as well as preferred learning approaches and gaps in existing learning materials.

The assessment was conducted through an online anonymous survey during the month of November 2020, for field practitioners in charge of designing and implementing CAAFAG programs and through key informant interviews. This assessment focused on the technical capacity at the individual level and not the organizational capacity such as management structures and financial systems.

This report highlights the findings from the online survey as well as from 14 key informants and will inform the content of the capacity building toolkit.

Respondents profile

196 individuals from 29 countries responded to the online survey on capacity needs and gaps for field practitioners implementing programmes with CAAFAG.

14 field practitioners from 12 countries were interviewed among other things, on the topic they would prioritize for capacity building and the preferred delivery method.

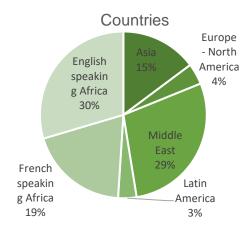
Gender

Online survey: 56% of respondents are male and 39% are female. 5% preferred not to answer.

Key informant interviews: 57% (8 out of 14) of key informants are male and 43% (6) are female.

Countries

Online survey: A majority of respondents were from Africa (30% from English speaking Africa and 19% from French speaking Africa). The Middle East was well represented with 28% of respondents, particularly from Iraq (47 respondents out of 56).



English speaking Africa: Kenya, Nigeria, Somalia, South Sudan and Sudan

French speaking Africa: Cameroon, CAR, DRC and Mali

Latin America: Colombia and Guatemala

Middle East: Iraq, Jordan, Palestine, Turkey, Yemen and Syria.

Europe - North America: Canada, Cyprus, Norway, Spain, Switzerland, UK and US

Asia: Afghanistan, Bhutan, Myanmar, India, Indonesia and the Philippines

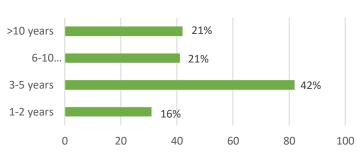
Key informant interviews: 5 key informants are from English speaking Africa, 2 from French speaking Africa, 4 from Asia, 1 from the Middle East, 1 from Latin America and 1 researcher with field practitioner experience from multiple countries.

Years of experience and roles

Online survey: The majority of respondents (84%) have at **least 3 years** of experience in Child Protection and have **implementation roles** (64%) (project manager, officer, case workers, etc.).

42% of respondents have **3-5 years** of experience and 42% have **6 years** or more of experience. Only 16% have 1-2 years of experience.

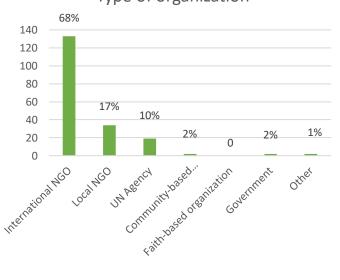
Years of experience in Child Protection



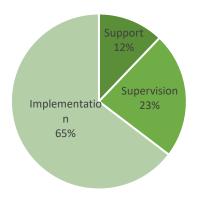
68% of respondents work for an **International NGO** and 17% for a local organisation.

Key informant interviews: 50% (7 out of 14) of key informants have **3-5 years** of experience and 43% (6) have **6 years** or more of experience. Only 7% (1) have 1-2 years of experience. The majority of key informants have implementation role (64% - 9) and work for an international organization (85% - 12).

Type of organization



Role related to CAAFAG programming



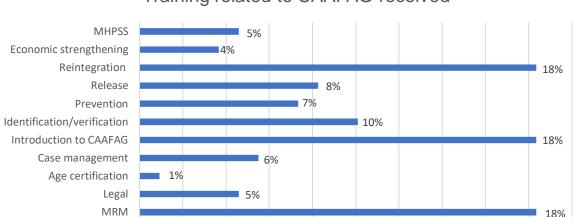
- Support (Technical advisor HQ regional support)
- Supervision (in-country coordinator advisor supervision of project manager)
- Implementation (CAAFAG project manager, officer, caseworker, ect.)

Respondents access to capacity building opportunities

Respondents were requested to mention if they received a training related to CAAFAG, its duration, who delivered it and to select the topics from a list of suggestions. Similar questions were requested regarding a webinar or a conference on CAAFAG. They also mentioned if they received other Child Protection related training to select from a list of suggestions.

Training related to CAAFAG

Most of the respondents (58%) reported that they **did not receive** any training related to CAAFAG. The majority of training selected by the 42% who reported receiving a training related to CAAFAG are on **reintegration** (18%), **MRM**¹ including the 6 grave violations (18%) and an **introduction** to CAAFAG (18%), mainly through the Child Protection Minimum Standard in Humanitarian Action.



Training related to CAAFAG received

Most of the training was provided by **UNICEF** (46%) or by internal Child Protection Specialists from the respondents' organisation (16%).

2%

4%

6%

8%

10%

12%

14%

On average, the duration of training was 3 days and 30% of them were 5 days or more. The majority of respondents (84%) reported that the trainings were very useful.

Who delivered the training related to CAAFAG?

18%

20%

16%



Webinar or conference related to CAAFAG

0%

Only 23% of respondents reported attendance to a

webinar or a conference on CAAFAG with similar topics listed above for training. The majority of respondents (77%) reported that the webinar or conference was very useful.

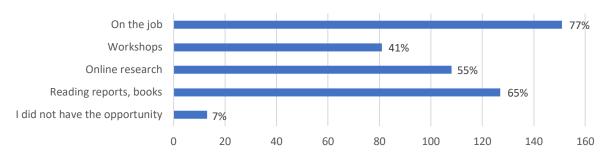
Other ways to build their capacities

A large majority of respondents (94%) have built their capacities on CAAFAG through other means than training or webinars, mainly **on the job** (77%), reading **reports and books** (65%)

¹ Monitoring and Reporting Mechanism

and through **online research** (55%). This highlights how field practitioners continuously strengthen their knowledge and skills on CAAFAG through multiple ways.

Other ways to build capacities on CAAFAG

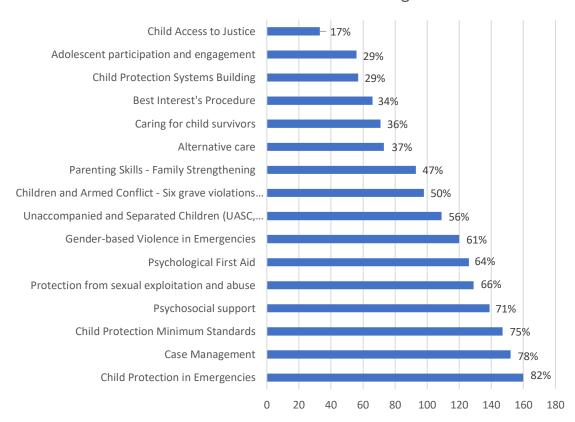


Other Child Protection training

The most popular training reported are **Child Protection in Emergency** (82%), **Case Management** (78%) and **Child Protection Minimum Standards** (75%) which are part of foundational Child Protection training for most field practitioners. It is also worth noting that 71% of respondents have been trained in **psychosocial support**.

Additionally, these results highlight how **access to justice** training (17%) is not as widespread as other training, whereas this area of work can be particularly useful for field practitioners implementing CAAFAG programmes. **Adolescent participation and engagement** training which is key in CAAFAG programming, is also less frequently reported (29%) which underlines the lack of prioritization given to CAAFAG engagement in programme design and implementation.

Other Child Protection training



Knowledge and skills

Self-rated knowledge on CAAFAG programming

The respondents were requested to self-rate their knowledge in a number of topics, using *Minimal knowledge*, *Some knowledge* and *Good knowledge* scores.

The main topics for which respondents have reported having **Good knowledge** are:

- 1. How to ensure do no harm in the identification and reintegration process (45%)
- 2. How to identify CAAFAG psychosocial needs and how to support referral and care (44%)
- 3. How to engage families to prevent and reintegrate children (44%)
- 4. Understanding of the specific needs of CAAFAG girls and boys (44%)
- 5. Understanding push and pull factors (drivers) of child recruitment and use (44%)

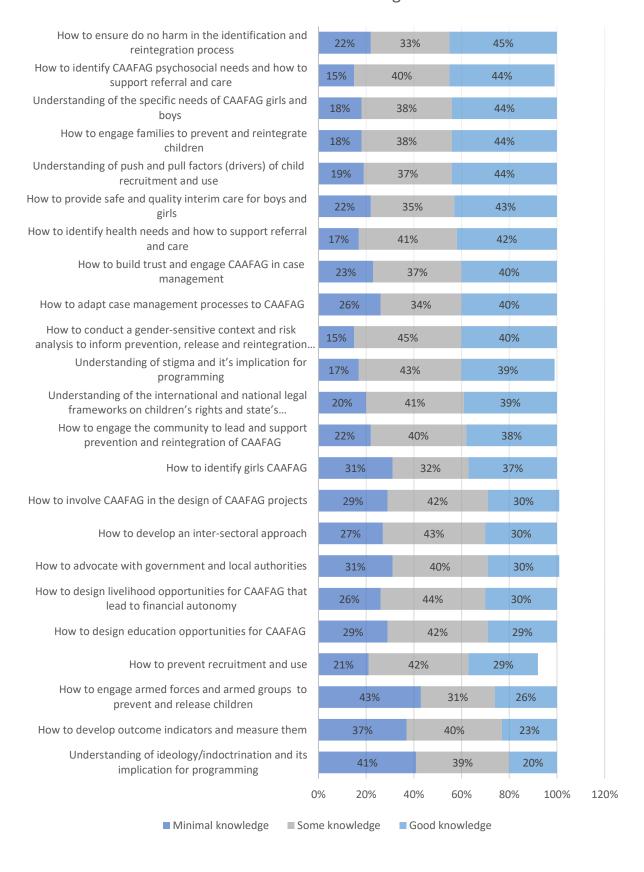
The main topics for which respondents have reported **Some knowledge** are:

- 1. How to conduct a gender-sensitive context and risk analysis to inform prevention, release and reintegration programmes (45%)
- 2. How to design livelihood opportunities for CAAFAG that lead to financial autonomy (44%)
- 3. How to develop an inter-sectoral approach (43%)
- 4. Understanding of stigma and it's implication for programming (43%)

The main topics for which respondents have reported **Minimum knowledge** are:

- 1. How to engage armed forces and armed groups to prevent and release children (43%)
- 2. Understanding of ideology/indoctrination and its implication for programming (41%)
- 3. How to identify girls CAAFAG (31%)
- 4. How to advocate with government and local authorities (31%)

Self-rated knowledge



Self-rated skills on CAAFAG programming

The respondents were requested to self-rate their skills to apply their knowledge for the same topics, using *No application*, *Some application* and *Applied effectively* score.

The main topics for which respondents have reported **Applied effectively** are not all the same as those reported under knowledge. How to adapt case management processes to CAAFAG has the highest rate in terms of skills but is in the 9th position in terms of knowledge.

- 1. How to adapt case management processes to CAAFAG (34%)
- 2. How to identify CAAFAG psychosocial needs and how to support referral and care (32%)
- 3. How to identify health needs and how to support referral and care (32%)
- 4. How to ensure do no harm in the identification and reintegration process (31%)

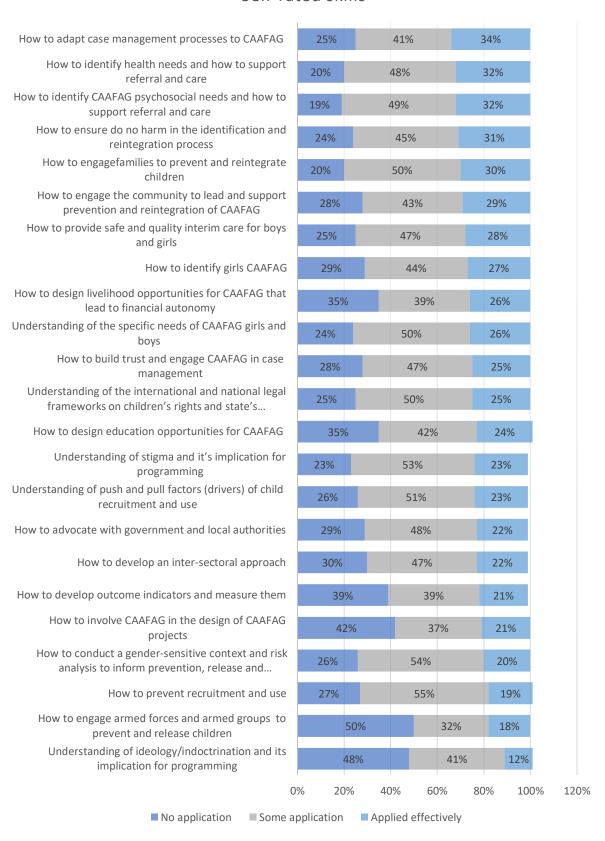
The main topics for which respondents have reported **Some application** are similar to those reported under some knowledge with the exception of *Understanding of the push and pull factors* which is highly rated under good knowledge.

- 1. How to prevent recruitment and use (55%)
- 2. How to conduct a gender-sensitive context and risk analysis to inform prevention, release and reintegration programmes (54%)
- 3. Understanding of stigma and it's implication for programming (53%)
- 4. Understanding of push and pull factors (drivers) of child recruitment and use (51%)

The main topics for which respondents have reported **No application** are similar to those reported under minimal knowledge with the exception of how to involve CAAFAG in the design of projects.

- 1. How to engage armed forces and armed groups to prevent and release children (50%)
- Understanding of ideology/indoctrination and its implication for programming (48%)
- 3. How to involve CAAFAG in the design of CAAFAG projects (42%)
- 4. How to measure CAAFAG programme outcomes (39%)

Self-rated skills

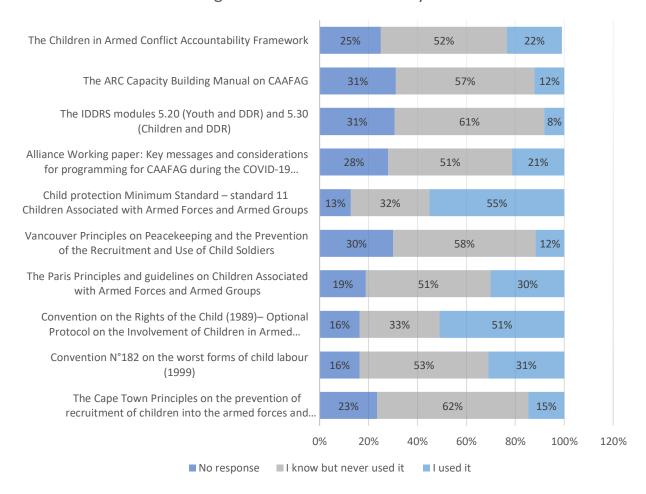


The respondents were requested to select from a list of CAAFAG key resources which ones they knew but never used and which ones they used. No response is interpreted as they don't know the resource.

The training resources from <u>ARC</u>² and **IDDRS**³ seemed to be the least known resource to the respondents. 31% respectively haven't responded. The **key principles** (Paris Principles, Vancouver and Cape Town Principles) seem to be known by half of the respondents but not used. Only 31% have used the **Convention 182** on the worst forms of child labour, 30% the **Paris Principles** and 12% the **Vancouver Principles**.

It is interesting to note that 51% have reported knowing and 21% using the recent Alliance Working Paper on **CAAFAG during COVID-19** released in June 2020.

Knowledge and use of CAAFAG key resources



Development of the capacity building toolkit

The respondents were requested to select from a list of training topics, tools and capacity building resources that would help them design, implement and evaluate a quality CAAFAG project.

² Actions for the Rights of the Children

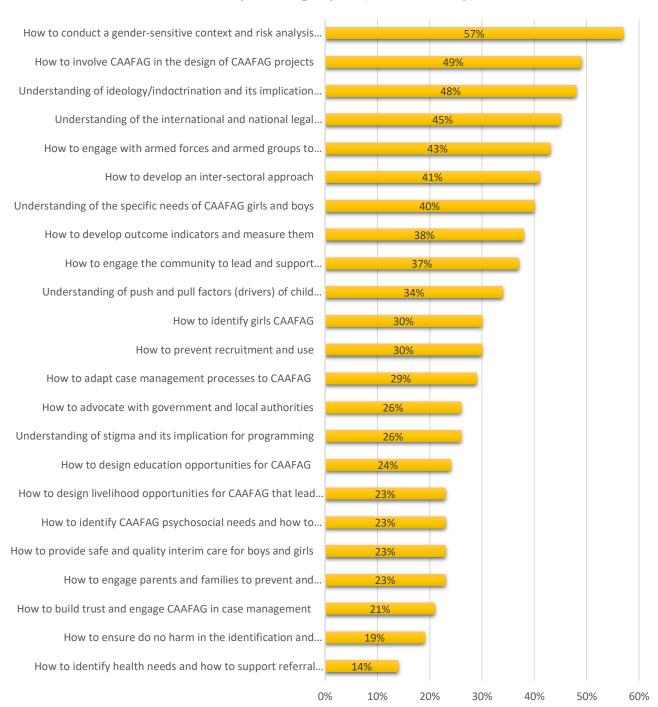
³ Integrated Disarmament, Demobilization and Reintegration Standards

Training topics prioritized

Online survey: the respondents were requested to select 6 topics they would like to receive training on from a list of 23 topics. The 6 most selected topics are aligned with the lowest self-rated skills and knowledge, although not exactly in the same order.

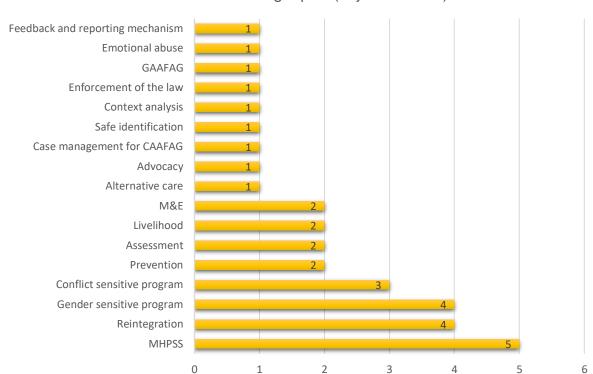
- 1. How to conduct a gender analysis (57%)
- 2. How to involve CAAFAG in the design of project (49%)
- Understanding of ideology/indoctrination and its implications for programming (48%)
- 4. Understanding of the international and national legal framework (45%)
- 5. How to engage armed forces and armed groups to prevent and release children (43%)
- 6. How to develop an inter sectoral approach (41%)

Priority training topics (online survey)



Key informant interviews: key informant were requested to mention training topics they like to prioritize for their team. (note: they did not select topics from a list) Training in MHPSS (5 out of 14), reintegration (4), gender sensitive programming (4) are the top 3 training topics listed.

The training topics selected by key informants are in line with the topics selected through the online survey (context and gender analysis) and the capacity building tools (MHPSS and reintegration programs).

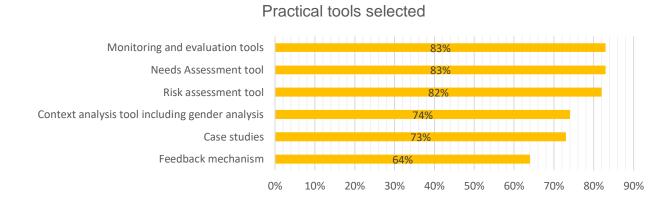


Prioritized training topics (key informants)

The practical tools selected

The respondents were requested to select the tools that they lack to implement quality CAAFAG programming. All the tools listed have been selected by at least 64% of the respondents.

Overall, there seems to be a preference for the **needs assessment** (83%), the **monitoring** and evaluation (83%) and the risk assessment tools (82%).

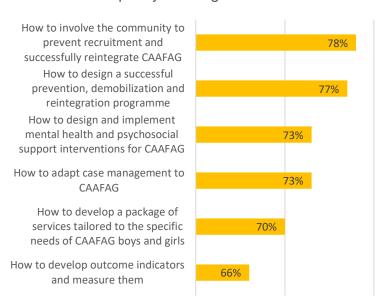


Capacity building resource selected

All the capacity building resources suggested have been selected by at least 66% of the respondents. There seem to be a preference for how to involve the community to prevent recruitment and successfully reintegrate CAAFAG (78%), how to design a successful prevention, demobilization and reintegration programme (77%) and how to design and implement mental health psychosocial support interventions for CAAFAG (73%).

It is interesting to note that the first 3 capacity building resources selected are aligned with some of the highest rates in knowledge and skills. Thus, **adapting** case management to CAAFAG is selected by 73% of the respondents.

Capacity building resource



Although 40% of them self-rated good knowledge and 34% applied effectively (the highest score), it seems that respondents still require support to adapt effectively case management to the needs of CAAFAG. Similarly, 44% of respondents self-rated psychosocial support with good knowledge and 32% applied effectively, however 73% prioritized this capacity building resource.

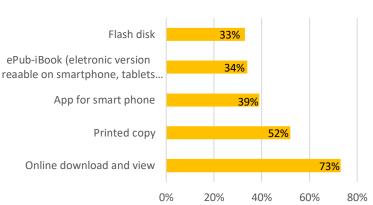
On the contrary, developing **outcome indicators** was self-rated among the lowest knowledge and skills topic and it is selected by "only" 66% of the respondents in this category.

Preferred modes of access

Respondents were requested to select 2 preferred modes of access to the capacity building resources.

The preferred mode of access seems to be **online download** and view (73%) followed by **printed copies** (52%).





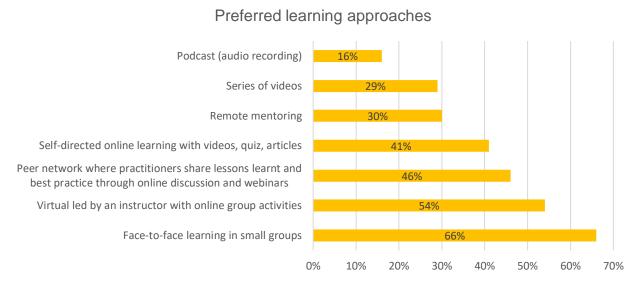
Preferred learning approaches

Online survey: respondents were requested to select 2 preferred learning

approaches to build their capacities. The preferred learning approach seems to be the **face-to-face learning** in small groups (66%) followed by **virtual training** led by an instructor (54%). It is interesting to note that 46% selected **peer networks**.

Key informant interviews: all key informants have requested a face-to-face training as the preferred learning approach, followed by remote training for 3 of them (out of 14), 1 key informant suggested audio and video tools and 1 peer networks.

The results of the online survey and the key informant interviews on preferred learning approaches are aligned.



Conclusion

Unsurprisingly, there seems to be a correlation between the number of training and learning opportunities on CAAFAG and the level of knowledge and the skills of field practitioners, although not at the level you would expect. Despite a wide access to case management learning opportunities (78% of respondents) for instance, only 34% report adapting case management to CAAFAG needs effectively. As a result this is one of the prioritized capacity building resources. The same trend can be identified for community engagement and mental health and psychosocial support interventions.

A possible analysis, is that the more knowledge and skills respondents have about a subject, the more resources they feel are needed to apply them effectively. It is harder to request support on topics that respondents haven't been trained on. (They don't know what they don't know)

On the other hand, there is a correlation between limited access to training, limited knowledge and skills and the prioritization as a training topic for the capacity building toolkit. For instance, respondents have reported less training opportunities on how to engage adolescents, some level of knowledge (29% reported good knowledge) and lower levels of application with only 21% reporting applied effectively, and prioritized this training topic.

The capacity building toolkit should consider these results in the development of content, mode of access and learning approach. This includes a focus on training topics with lower self-rated knowledge and skills and a focus on tools and resources for the topics where they have more knowledge and skills. In terms of learning approaches, the face-to-face training should be prioritized with suggestions on how to deliver the training remotely if needed. Social learning should also be considered to foster peer learning. The CAAFAG Task Force would be better placed to set up online platforms to promote social learning as this is part of its workplan. Online download and printed copy should be prioritized to give access to the tools and resources developed.