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A group of children are playing jump rope in a dirt courtyard in front of a long, single-story building with several green doors. One child in the foreground is wearing a pink shirt and a blue headscarf with yellow polka dots. Another child in the foreground is wearing a patterned dress. The children are holding long, thin ropes and are in various stages of jumping. The building in the background has a sign that says "OFFICE" above one of the doors. The sky is clear and blue.

MOBILE CHILD PROTECTION PROGRAMMING GUIDE

PURPOSE OF THIS GUIDANCE

Like many humanitarian organizations, Plan International has increasingly been employing mobile approaches to reach remote, hard-to-reach, and conflict-affected populations with essential services. Several mobile programmes have focused on the Child Protection in Emergencies sector, in collaboration with other forms of assistance such as health and nutrition. As a result, Plan International has recognized the need to provide guidance to Country Teams on how to adapt existing CPiE approaches and operational models to fit the needs and requirements for set up, implementation, monitoring and evaluation of mobile child protection programmes.

This guidance document is intended to:



Provide an overview of what is mobile programming and what it could look like in the Child Protection in Emergencies sector;



Help Plan International staff and partners understand if a mobile child protection programme is appropriate for their context and programming objectives;



Provide guidelines and key considerations when designing, planning, implementing, and monitoring and evaluating mobile child protection programmes.

This guidance builds on learning and findings to date from mobile child protection programming across twelve countries and includes inputs from Plan International staff, partners, and external actors engaged in humanitarian responses, working at national, regional, and global levels. These were gathered through interviews, a survey, and a review of the literature.

This guidance is intended for child protection technical specialists, child protection programme managers, mobile field team members, and other DRM technical advisors considering employing a mobile approach to deliver (integrated) child protection services. It may also be useful for managers, operations staff, donors, and other stakeholders seeking to better understand the nuances of mobile approaches and how to better support the additional and unique operational and resource needs required for effective, ethical, and responsible implementation of mobile child protection programmes.

This document does not replace existing technical guidance on child protection and other programming sectors and areas. Instead, this document aims to provide guidance on key considerations and decision-making steps to develop mobile child protection programmes and adapt child protection interventions. This guidance should be read alongside other existing technical guidelines for different child protection programming areas, as well as guidance on programme cycle management, such as guidelines for needs assessments, monitoring and evaluation, and child-friendly feedback mechanisms among others.

For comments and feedback on this guidance, please contact Anita Queirazza, Anita.Queirazza@plan-international.org

ACKNOWLEDGEMENTS

The Mobile Child Protection Programming Guidance was developed by Yang Fu (Plan Germany), Silvia Onate (Plan Global Hub) and Anita Queirazza (Plan Global Hub), with input from Stephanie Delaney and Layal Sarrouh, external consultants.

Special thanks are due Plan International's staff who shared their insights and experiences throughout the drafting and revision process. In particular, the authors wish to acknowledge the valuable contributions of:

- Paula Blanco Alvarado (Plan Germany)
- Lotte Claessens (Plan Sweden)
- Ibrahim Diallo (Plan Central African Republic)
- Alexandra Shaphren (Plan Global Hub)

The Mobile Child Protection Programming Guidance draws from the experiences of: Plan Central African Republic, Plan Colombia, Plan Germany, Plan Indonesia, Plan Ireland, Plan Lebanon, Plan Nepal, Plan Peru, Plan Sweden, Plan Tanzania, Plan Vietnam, the Cyclone Idai Response (Plan Malawi and Plan Zimbabwe), and the Lake Chad Basin Crisis Response (Plan Cameroon, Plan Niger, Plan Nigeria). Plan International would also like to thank the actors external to Plan who shared their experiences from Iraq, Bangladesh, and Colombia. Additional thanks to Plan International's Lake Chad Programme Unit for facilitating this initiative.

The Mobile Child Protection Programming Guidance was developed with support from the German Federal Foreign Office to the multi-country project implemented in the Lake Chad Region.



ACRONYMS

CEFM	Child, early and forced marriage
CFS	Child-friendly space(s)
CPiE	Child Protection in Emergencies
DRM	Disaster Response Management
KII	Key Informant Interview
GBV	Gender-based violence
MoU	Memorandum of Understanding
NFI	Non-food item(s)
PFA	Psychological first aid
PSS	Psychosocial support
SGBV	Sexual and gender-based violence
SOP	Standard Operating Procedure
ToR	Terms of Reference
WWNK	What We Need to Know

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PART 1: UNDERSTANDING MOBILE CHILD PROTECTION PROGRAMMES

Mobile child protection programmes can be effective and compelling ways to access crisis-affected communities and offer humanitarian assistance. In order for mobile programmes to be successful, however, it is important to understand what mobile programming means and in which contexts it is most suitable.

With the growing complexity and changing nature of humanitarian response, humanitarian organizations are constantly seeking creative and more effective ways to deliver services to populations in need, particularly when traditional programming models cannot be implemented. Mobile programming, also referred to as “mobile service delivery” or a “mobile approach”, has emerged as a popular approach to respond in situations where children and adolescents may be difficult to access. The new edition of the Minimum Standards for Child Protection in Humanitarian Action has included a section on mobile programming as a key cross-cutting issue that should be considered in all child protection interventions in humanitarian action.

What is mobile programming?

There is no agreed inter-agency definition for mobile programming. Mobile programming generally refers to a service delivery model whereby service providers physically move or relocate in order to provide their services to a specific population group.

- Service providers use vehicles (buses, cars, bicycles) or travel on-foot to reach the target population.
- Mobile approaches contrast with 'static' approaches, where service providers establish a fixed physical presence in proximity to the target population.

Mobile child protection programming is used to expand the reach of Plan International's child protection services to children and adolescents. These children and adolescents would otherwise be underserved due to the nature of the emergency, their location, or their status. Mobile child protection programming may be needed in order to:



Mobile child protection programmes are highly context and situation specific and can take many different shapes and forms. Within Plan International, they have many different names, including mobile units, one-stop shop, mobile teams, or mobile outreach.

There is no one-size-fits-all model, but rather many different designs of mobile child protection programmes which reflect the situation, context, needs, capacities, and resources available.

Note that child protection programmes can use a mix of mobile and static approaches. Determining which activities should be mobile or static should be based on a [needs assessment and analysis](#).

Are there different kinds of mobile programmes?

Based on Plan International's experience, mobile child protection programming can be generally categorized into three types, though more types may certainly exist.

- **Emergency short term** – for example immediately (3 to 6 months) after a disaster or in a conflict-affected area, where the aim would be to provide life-saving aid and key information messages. Part of the work of mobile programmes in this context may be: to gather more information and engage with the community to be able to assess and plan for further support and assistance; to deliver information on services and provide NFIs to meet basic needs as the population either moves on or awaits further services; or to make referrals.

Emergency short-term - Example from Nepal



In the aftermath of the 2015 Nepal earthquake, Plan Nepal used mobile teams to address the challenge of reaching children and families in the most remote villages, such as mountain villages, which were isolated from humanitarian services due to landslides or distance. The teams, which travelled on foot, provided information sharing and awareness raising, psychological first aid, life skills sessions for children and adolescents, and identified vulnerable or at-risk girls and boys such as separated children and children at risk of trafficking to refer to them appropriate protection services.

- **Ongoing regular contact** – where it is anticipated that regular (weekly, monthly) contact will be maintained over a longer period with the same population. This typology of mobile programming gives the possibility for sustained contact, with in-depth engagement of the community and follow up. One example of this type of mobile programming could be with very remote, poorly served populations. In such cases ongoing community engagement is essential as contact may be regular but not necessarily frequent. Community engagement in such programmes is also essential to ensure continuity of services.

Ongoing regular contact - Example from Nigeria



In Northeast Nigeria, Plan International used “mobile units” to reach children and families in hard-to-reach communities. These units were composed of a case management officer, a community engagement officer, a nurse, and a driver. On a rotating schedule, mobile units would visit a different community each day using a vehicle. The same community would be visited weekly for the duration of the multi-year project. During each visit, Plan staff would offer safe space activities, nutrition screenings, and case management activities.

- **Variable, irregular contact** – such as where the populations are highly mobile, the locations for intervention may change, and / or where it is expected that there may be times when operations have to be suspended due to security or safety reasons. Where there are highly mobile populations, the process of engaging and consulting communities may need to be undertaken during every single site visit of the mobile programme. Owing to a lack of consistency, limited possibilities for follow-up, and sporadic community engagement, each visit may need to be considered as almost 'standing alone'.

Variable irregular contact – Example from Colombia



In Bogota, Plan International mobile services were part of multi-sectoral services provided in partnership with the local government, the Colombian Red Cross and International Organisation for Migration (IOM) among other partners. Mobile services provided holistic frontline emergency response to migrants and

refugees from Venezuela and other vulnerable people who were not able to access critical services. Plan International coordinated the mobile response partnering with over 11 organisations to provide primary health care including child, infant and maternal health, children's dental care, referral for child protection and education, NFI distribution, child friendly spaces included structured activities and free play, psychosocial support for caregivers, awareness raising sessions on child protection, gender-based violence, sexual and reproductive rights, and legal assistance. Each mobile outreach was a day of active services and 3 days of community mobilisation in advance of the services.

What services are provided through mobile child protection programmes?

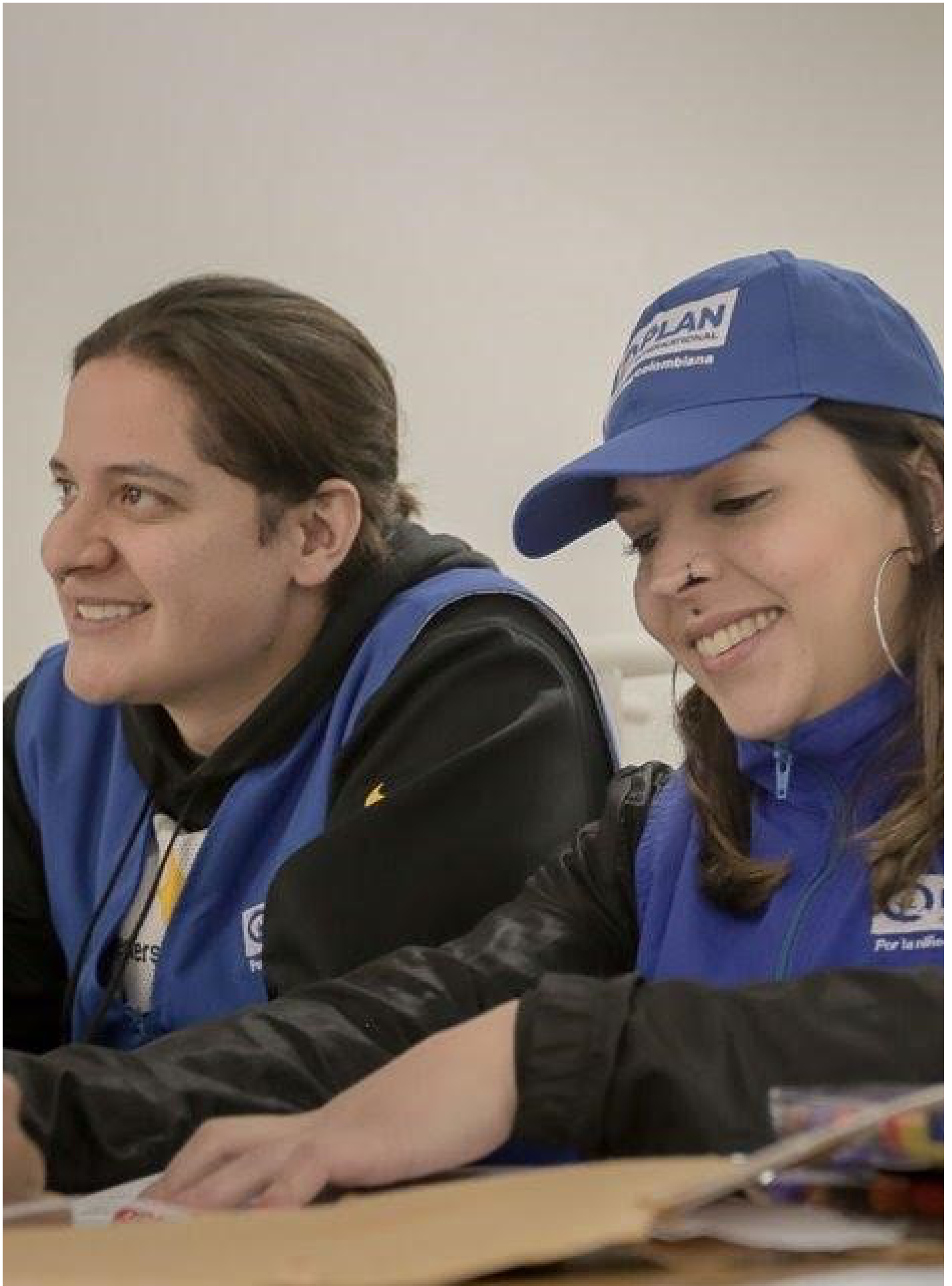


Mobile programmes can be limited to child protection interventions or include multiple sectors (i.e. Education, Health, Nutrition, Food Security, Livelihoods etc.) through an integrated approach.

Mobile programming should not be confused with remote programming

There are different definitions for 'remote programming' but the term generally refers to a form of programme management where key decision-making is made by international managers in a location distant from the site of implementation. Local partners and national staff remain on site to ensure implementation. Remote programming is often by organizations in highly insecure environments to minimize risks against international staff.

In Plan International, remote programming also refers to services or assistance which are not directly delivered by Plan International or implementing partners, but rather through technology (such as toll-free lines, SMS, WhatsApp, etc.). Activities such as the child helplines or toll-free lines are considered forms of remote programming.

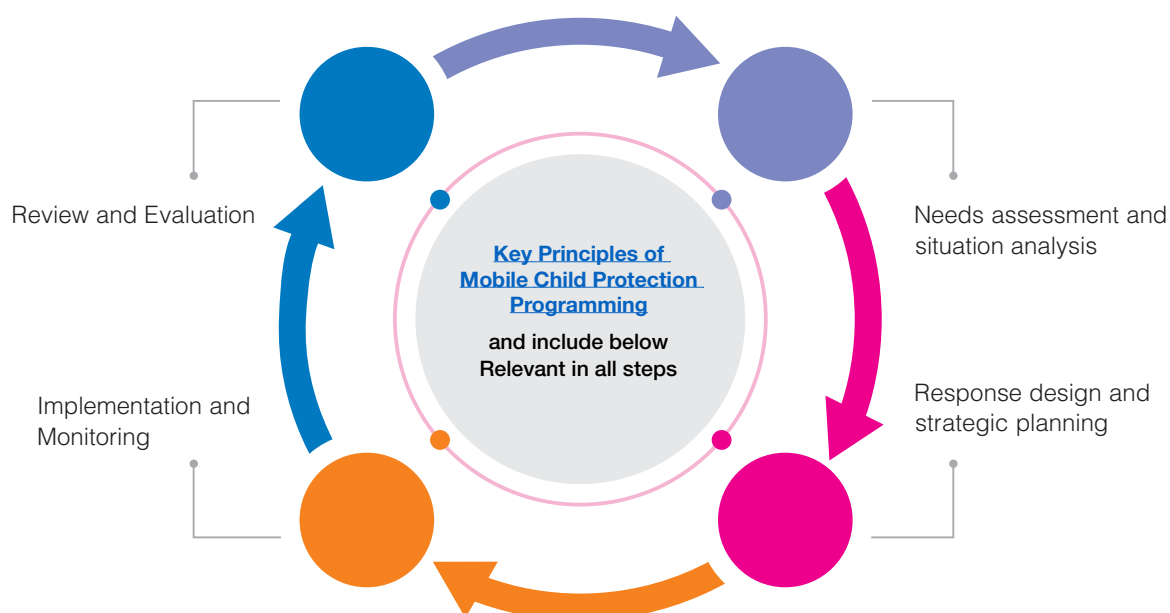


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PART 2: KEY CONSIDERATIONS FOR MOBILE CHILD PROTECTION PROGRAMMING THROUGHOUT THE PROGRAMME CYCLE

Mobile child protection programmes can be effective and compelling ways to reach crisis-affected children and adolescents and offer humanitarian assistance. The following sections of the Mobile Child Protection Programming Guide provides key considerations which can be applied at various points in the humanitarian programming cycle.


Note that this guidance does not replace existing programme cycle management guidance. Instead, it provides some additional considerations when designing, planning, implementation, and monitoring and evaluating mobile programmes.



STEP	KEY SECTIONS	THIS SECTION PROVIDES GUIDANCE ON
Needs assessment and situation analysis	Section 2.2 – Needs Assessment and Analysis Section 2.3 – Determining if a Mobile CP Programme is Appropriate	... what information you need from a needs assessment and situational analysis ... how to determine if a mobile CP programme is appropriate in your context.
Response design and strategic planning	Section 2.4 - Selection and Engaging Communities Section 2.5 - Adapting Interventions for Mobile CP Programmes Section 2.6 – Staffing Mobile CP programmes	... what you need to consider when design and planning a mobile CP programme.

Implementation and monitoring	Section 2.7 – Capacity-building Mobile CP Programmes Section 2.8 – Operational Support Section 2.9 – Security Section 2.10 – Coordination Section 2.11 – Monitoring and Evaluating Mobile CP Programmes Section 2.12 – Exit Strategy	... what you need to consider when implementing and monitoring a mobile CP programme and key adaptations that should be made.
Evaluation and learning	Section 2.11 – Monitoring and Evaluating Mobile CP Programmes	... what you need to consider when evaluating and identifying learnings from a mobile CP programme.

Based on Plan International's experience⁴, mobile child protection programmes are more likely to be successful when Country Teams:

- 
- Base decisions to go for mobile child protection programming on a needs assessment and situational analysis, as well as the capacity of the Country Office;
 - Apply key child protection principles in all phases of the programme cycle;
 - Engage communities and promote child protection throughout the programme cycle;
 - Adapt child protection interventions while maintaining adherence to minimum standards;
 - Recruit and capacity-build staff based on the specific competencies needed for a mobile programme;
 - Ensure support functions such as logistics and procurement and safety and security are adequately capacitated to support mobile programming;
 - Coordinate effectively with other humanitarian actors;
 - Monitor and evaluate programmes and establish child and adolescent-friendly complaints which are adapted to a mobile approach; and
 - Consider exit strategies from the onset of the programme.

Additional guidance on programme cycle management:

Alliance for Child Protection in Humanitarian Action (2019) [Minimum Standards for Child Protection in Humanitarian Action. See Standard 4: Programme Cycle Management](#)

Plan International, Project Cycle Procedure and Guidance ([Planet link](#))

SECTION 2.1 - KEY PRINCIPLES OF MOBILE CHILD PROTECTION PROGRAMMING

The same key principles apply to mobile child protection programmes as they would to any other child protection programme. The following section does not provide a comprehensive summary of humanitarian or child protection sector-specific principles. Instead, it highlights some key child protection principles which require particular consideration in a mobile programme.

Best interests of the child

Children have the right to have their best interests assessed and taken into account as a primary consideration in the actions or decisions that concern them. All actions should consider a child's physical and emotional safety (their well-being) as well as their right to positive development. Children should be active participants in defining their best interests.

- The best interests principle should guide the design, implementation, monitoring, and adjustment of all mobile programmes.
- Mobile CP programmes must ensure that children are provided with information, encourage children to express their concerns, and give due weight to children's and parents/caregivers' views in decision-making.

Survivor-centred approach

A survivor-centred approach creates a supportive environment in which survivors' rights and wishes are respected, their safety is ensured, and they are treated with dignity and respect. A survivor-centred approach means that the survivor's rights, needs and wishes are prioritized. A survivor-centred approach is based on principles of safety, confidentiality, respect and non-discrimination.

- Mobile CP programmes should consider to what extent they can ensure a positive and helping relationship between themselves as a service provider and a child or adolescent survivor, particularly if teams cannot be in frequent contact with the survivor.
- If a mobile CP programme cannot ensure immediate (24 hour) follow-up, teams must reflect on their programme's ability to adhere to a survivor-centred approach and provide survivors with access safe, appropriate and life-saving services. If the programme is unable to ensure a survivor-centred approach, then cases of child and adolescent survivors should be referred to GBV service providers who are present in the location.

Non-discrimination and inclusion

Children shall not be discriminated against on the basis of gender, sexual orientation, age, disabilities, nationality, immigration status, or any other reason. Discrimination increases children's risks of all forms of abuse, neglect, exploitation, and violence.

- Be aware that mobile programmes can increase discrimination, worsen cycles of exclusion and create new layers of exclusion. It is important to have a thorough situation analysis and consult children, adolescents, and community members, including those who come from marginalized groups.
- Mobile programme teams must identify and monitor existing and new patterns of discrimination, power, and exclusion in any community they reach. Programmes should address forms of discrimination and exclusion in their design and implementation.
- If national legislation does not accommodate refugees, migrants, stateless populations, or other non-nationals in the formal systems, consider how a mobile programme support these excluded communities or – at the very least – mitigate any potential harm.
- Consider how a mobile programme can advocate for access of all children and adolescents to protection and other services.

Children's participation

Humanitarian workers must provide children with the time and space to meaningfully participate in all decisions that affect children. Humanitarian action must support and facilitate developmentally appropriate participation, share decision-making power with children, be sensitive to how their participation may change roles or the balance of power within a family or community, and ensure their participation is in their best interests and will not do harm.

- Mobile programmes should ensure that all children and adolescents can exercise their right to participation, but this may take different forms based on their gender, age, communication method, level of maturity,

- context, safety, security and the delivery of the mobile programme itself.
- Consider how a mobile programme will ensure accountability and follow-up with children and adolescents in any participatory process, particularly if visits to the community are ad-hoc.
- If visits to a community are short (only a few hours), consider how the programme will ensure sufficient time and resources are made available for quality participation and that children and adolescents are properly supported to prepare for participation.
- Mobile programmes are required to minimize children's and adolescents' risks of abuse, exploitation, or any other negative consequences as a result of their participation. Mobile programmes should consider how such risks can be prevented, monitored, and responded to even when mobile teams are not physically present in a community.

Strengthening child protection systems

Child protection humanitarian response should build on and strengthen the many levels and parts of child protection systems. Each child protection system is different. Responses should consider the full range of problems facing the child, their root causes and potential solutions. This involves identifying root causes, contextualizing responses, strengthening local ownership, using multisectoral approaches, implementing preventing and response measures, and collaborating with all relevant actors (Source: CPMS).

- Mobile programmes affect child protection systems and are affected by them. Even if a mobile programme only makes periodic/ad-hoc visits to a community, understand how the programme will affect the connections and relationships between parts of the CP system.
- Consider if or how a mobile programme can provide opportunities to strengthen CP systems by improving the quality and availability of services. Mobile programmes could be a way to introduce innovations into systems to improve protection outcomes for children and adolescents.
- Consider how the mobile programme can strengthen linkages between formal and informal parts of the system.

Confidentiality

Humanitarian programmes must guarantee confidentiality for any sensitive issues and personal data. When data collection on sensitive issues is necessary, information about a child or adolescent's experience of abuse must be collected, used, shared and stored in a confidential manner. Information sharing must happen in line with national laws and policies, information sharing and data protection protocols, on a need-to-know basis, and only after obtaining permission from the child, adolescent, and non-offending caregiver if appropriate.

- Mobile programmes must ensure confidentiality when speaking about sensitive issues. It is unethical and potentially dangerous to have conversations about sensitive issues if a private place has not been identified.
- Mobile programmes must ensure that they comply with inter-agency data protection and information sharing protocols on collecting and sharing personal information about individuals, including children.
- Data protection and information sharing protocols should be reviewed and updated to include procedures specific to mobile programming.
- Mobile teams must consider how to safely store sensitive data in a secure location that is only accessible to those who need to know. Sensitive data should never be stored or carried in a vehicle or on a person (e.g. in a backpack).

Be aware of how different staff members' roles are referred to in the community. If a team member is described as a "SGBV officer" then it may be inferred by the community that anyone who speaks to this staff member has issues related to SGBV.

Data protection and information security

It is imperative not to put communities at risk through the gathering and transportation of their personal details. Teams should be aware that they need to take great care when making notes or using notebooks in the field to ensure that if they are misplaced or lost, confidential information is not divulged. Decisions need to be made if notes and other paper records are made while on site, regarding their transport and storage. Plans on how these data are transported from the office to the site, and back, should be made and be clear to all team members involved. This includes identifying situations when records may need to be destroyed while the mobile teams are in transit, and how this can be done safely.



Some situations can involve high insecurity or threat risks, where not only are teams at risk, but so are the data collected on the communities they visit. In these situations, you may consider alternative ways to gather and track information, using codes instead of identifying details, or even obtaining oral consent instead of written.

For more information, please see Plan International Keeping Data Protection Safe:

<https://drive.google.com/drive/folders/1QOIWLEOLLFeAUgws2Bxr-XxqHB652LI?usp=sharing>

Enhance people's safety, dignity and rights and avoid exposing them to further harm

Humanitarian actors must take steps to reduce overall risks to and vulnerability of people, including potentially negative effects of humanitarian programmes. This is also related to ensuring communities are more prepared, resilient, and less-at-risk as a result of humanitarian action.

- Participatory risk assessments should guide mobile programme activities. Mobile programmes must ensure continuous risk assessment and risk monitoring throughout the life of the programme to ensure children nor communities are exposed to additional harms or risks
- Be aware that services provided for specific groups, such as SGBV survivors, may inadvertently expose them to harm. For example, if dignity kits are part of the package of services provided to women who have experienced sexual violence, it will very quickly be known to the communities who has experienced sexual violence unless dignity kits are provided to all women and adolescent girls.
- Mobile programmes must guarantee access to age and gender appropriate feedback and complaints mechanisms, as well as adherence to the organization's safeguarding policy and implementation standards.

Teams should plan a transition or exit strategy in the early stages of the programme to ensure longer term position effects and to reduce the risk of dependency.

Additional guidance on child protection key principles and humanitarian principles:

Alliance for Child Protection in Humanitarian Action (2019) [Minimum Standards for Child Protection in Humanitarian Action. See Principles.](#)

[The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Response, Sphere Associations, 2018.](#)

CHS Alliance, Group URD and the Sphere Project, [The Core Humanitarian Standard on Quality and Accountability, 2014.](#)



Child mobile recreational activities in Sigi and Donggala districts, Indonesia
Credit: Plan International

SECTION 2.2 - NEEDS ASSESSMENT AND ANALYSIS

The decision to undertake mobile CP programming should be based on the findings of the needs assessment and analysis of the situation and context. This section provides specific considerations for needs assessment in order to inform the decision to go for mobile CP programmes.

For comprehensive guidance on how to undertake a needs assessments, Country Teams should refer to the additional guidance listed at the end of this section.

Before embarking on a needs assessment, Country Teams will need to determine what they need to know about the situation and child protection needs. This will help determine what should be collected in a desk review as part of the situational analysis and what should be prioritized for a needs assessment. See [Annex 1: What We Need To Know](#) for more guidance.

A needs assessment allows us to understand the child protection situation in the emergency phase. It provides an understanding of:

- Which groups of children and adolescents are most affected by the crisis?
- What the needs, risks, vulnerabilities, capacities and priorities of children and adolescents?
- What are the existing family-, community- and society-level capacities to protect children and adolescents?
- What services and support should be provided to address the needs of children and adolescents?

When planning for and implementing a needs assessment, Country Teams should follow existing sectoral guidance and ensure findings can be relevant for mobile programmes. See [Annex 2: Dos and Don'ts of Needs Assessments](#) for more guidance.

Identifying children and adolescents from at-risk groups

It is important for all CP programmes, including mobile programmes to identify which groups of children and adolescents are most at-risk and likely to face exclusion and marginalization. These groups should be consulted about their needs. At-risk children and adolescents commonly include those who are:

- Younger adolescents (10-14 years)
- Older adolescents (15-17 or 15-19 years)
- Out-of-school
- Engaged in child labour and the worst forms of child labour (WFCL)
- Engaged, married, divorced, or abandoned
- Living with disabilities
- Caregivers or heads of households
- Displaced, on the move or without appropriate care
- Separated, unaccompanied, or orphaned
- Identify as LGBTIQ+
- Living with HIV/AIDS and other chronic illnesses
- (Formerly) associated with armed groups and forces
- Other protection concerns, such as experiences of violence, including SGBV, abuse, neglect, exploitation, statelessness, etc.

Adolescent girls are disproportionately affected by emergencies and crises due to their age and gender. It is important to identify specific groups of adolescent girls who require specific attention. These groups commonly include:

- Younger adolescent girls (10-14 years)
- Older adolescent girls (15-17 or 15-19 years)
- Girls who are engaged, married, divorced, widowed or abandoned
- Adolescent mothers, including pregnant and lactating girls
- Survivors of SGBV
- Domestic workers

- Girls engaged in transactional/survival sex

For more information on adolescent programming, please see Plan International's [Adolescent Programming Toolkit](#).

Additional guidance on child protection needs assessments and analysis:

Child Protection Working Group (2014) [Child Protection Rapid Assessment Toolkit](#).

Plan International (2020) '[Adolescent Programming Toolkit: Guidance and Tools for Adolescent Programming and Girls Empowerment in Crisis Settings](#).

Plan International [CPIE Programme Impact, Accountability and Learning Toolkit](#).

Plan International (2018) [Child-Centred Multi-Risk Assessments: A Field Guide and Toolkit](#).



© Plan International. Children at one of the supervised arts sessions of the mobile CFS in Bogotá, Colombia. © Plan International

SECTION 2.3 - DETERMINING IF A MOBILE CHILD PROTECTION PROGRAMME IS APPROPRIATE

Country Teams must decide on a case-by-case basis whether a mobile children protection programme should be used in their context and if they have the sufficient resources to implement such an approach.

Note that a mobile approach may not be ideal or appropriate in every situation. It is important to reflect on the following criteria.

Criteria 1: Is a mobile CP programme appropriate in the context?

Consider the following when determining if a mobile CP programme is appropriate in your context:

(1) What are the barriers children and adolescents face in accessing CP services?	(2) Can a mobile CP programme address these barriers?
<p>Physical</p> <p>Physical barriers include distance, geographic features, climate events, and weak infrastructure. Children and adolescents may live too far away from the nearest CP service or be unable to reach them due to difficult terrain, damaged roads and bridges, or heavy rainfalls and flooding. This can be a problem in both rural and urban settings. For example, children and adolescents living in urban settings may not be able to access CP services in one part of the city due to poor public transportation systems.</p> <p>Governments may not have invested in these communities for political reasons. It may also be that these communities are of such low density and so far away from population centres that establishing permanent services is cost-prohibitive.</p>	<p>Mobile CP programmes can be used to reach children and adolescents living in remote or hard-to-reach locations.</p> <p>Rather than having children and adolescents travel long distances to access CP services, CP services can be brought closer to them through a mobile CP programme.</p> <p>A mobile CP programme could be designed to visit remote or hard-to-reach locations on a regular or ad-hoc basis. Communities can be made aware of a pre-determined site and schedule of the mobile CP programme. Children and adolescents who need more specialized services such as MHPSS can be identified and referred.</p>
<p>Security</p> <p>Barriers related to security include active and ongoing conflict and violence, which may also lead to the closure or reduction of CP services, as well as spaces like schools and health centres. It may significantly affect the ability of the population to move around their community, as well as hamper access by humanitarian actors. Aid workers may also be targeted by armed actors.</p> <p>In such situations, it may be deemed too risky and cost-prohibitive to establish a constant presence within the community.</p>	<p>Mobile CP programmes can be used to reach children and adolescents living in conflict-affected locations.</p> <p>The flexibility of mobile CP programmes can help reduce some of the safety and security risks of a 'static' approach. For example, schedules and site location can be adapted based on the changing security environment. This can enable children and adolescents to access CP services and supports when the security context allows. Mobile CP programmes can have the added advantage of deploying quickly if teams have been pre-established.</p> <p>It is essential that Country Teams conduct a thorough risk analysis for all mobile programmes to identify potential new security risks of a mobile CP programme.</p>

<p>Exclusion and Marginalization</p> <p>Children and adolescents may be living in communities where CP services exist, but they are unable to access them to their status. Discrimination, stigma, lack of identity documents, and government practices may all contribute to this. Children and adolescents who may be affected include adolescent girls, girls who are home-bound, children living with disabilities, children from minority ethnic groups, children in child labour, street-connected children, children in refugee, internally displaced and migrant settings, and stateless children.</p> <p>Note that children and adolescents may be facing several of these barriers in any context. For example, for children from minority ethnic groups or indigenous communities, social exclusion and discrimination may be compounded with physical barriers.</p>	<p>Mobile CP programmes can be used to reach marginalized children and adolescents</p> <p>Mobile CP programme can be designed to reach specific groups of marginalized children and adolescents. CP services can be provided closer to where children and adolescents live, work, and spend their time.</p> <p>Mobile CP programmes can also design interventions to be tailored and meet the specific needs of certain marginalized groups.</p>
<p>Gaps in Services</p> <p>Children and adolescents may be living in communities where there are gaps in CP services. In other words, while some CP services exist, there may be issues in the capacity of existing community-based and formal services providers. In other cases, some services may be entirely missing. As a result, existing CP services cannot meet the protection needs of children and adolescents.</p>	<p>Mobile CP programmes can be used to address specific gaps in services</p> <p>Mobile CP programmes can provide increased capacity to existing CP services by reaching a larger portion of the community and providing additional human resources.</p> <p>Mobile CP programmes can also be used to provide specific services which are currently lacking in the community. This should be done in partnership with existing CP actors to complement existing programmes.</p>
<p>Frequent Displacements / Movements</p> <p>Children and adolescents on the move, including IDPs, asylum seekers, refugees, stateless persons, or migrants, may be in transit and frequently moving from location to location. They may be looking to find a place of safety or have a final destination in mind. Children and adolescents may be travelling on their own, or with caregivers. In these situations, children and adolescents may not stay long in a single location. Existing CP services may also not be properly capacitated or equipped to provide a timely response to these groups of children and adolescents.</p> <p>In these situations, establishing a fixed presence or structure to reach children and adolescents with CP services may not be feasible due to frequent movements. Establishing fixed services at each new location may be cost prohibitive.</p>	<p>Mobile CP programmes can be used to reach children and adolescents who are highly mobile.</p> <p>Mobile CP programmes can more easily pack-up their equipment and meet children and adolescents on the move along the route. In some cases, mobile CP programmes may also be prepositioned in specific sites along an already-established route.</p> <p>Children and adolescents might only access a CP service once, making any follow-up activities highly difficult. A mobile program, however, does allow children and adolescents to access essential information and immediate services. This can mitigate against protection risks allow programming to address their protection needs.</p>

Infectious Disease Outbreaks

During infectious disease outbreaks, infection prevention control measures such as limiting large public gatherings or closing of community centres may also limit children and adolescent's access to essential CP services. In these situations, providing CP services through fixed spaces may no longer be possible due to government restrictions against indoor and large-group activities.

Mobile CP programmes can be used to reach children and adolescents during **infectious disease outbreaks**.

Mobile CP programmes can be used to provide CP services in line with infection prevention control measures. Mobile CP programmes can be organized with communities to ensure that activities are done outdoors, respect social distancing guidelines, and involve smaller groups of children and adults.

Clear communication with communities in advance of the visit is essential to ensuring these measures are respected. PPE materials must be made available to all staff, partners, and participating community members.

Reaching marginalized children and adolescents in refugee settings: Example from Tanzania

As part of the Burundi Refugee Response, Plan International Tanzania with the support of UNHCR and other donors provided mobile child protection services for children and adolescents in Nyarugusu, Mtendeli and Nduta refugee camps.



Mobile programming provided psychosocial support and recreational activities to excluded and at-risk children and adolescents who lived in: designated protection villages; areas of the camps far away from existing service points; and departure centres where children and families awaited voluntary repatriation, but could no longer access CP services available in the rest of the camp. Mobile team staff identified at-risk children and adolescents and would alert Plan International's case management team. The case management team would follow-up separately with children and adolescents to provide case management services.

Using mobile teams to conduct rapid needs assessments: Example from Colombia

In Colombia, Plan International was part of an inter-agency emergency response mechanism which deployed mobile teams to different regions of the country which were affected by natural disasters, conflict or migration. Each mobile team consisted of staff and community assistants who would travel to different regions of the country. They would provide basic services, including CP information and awareness raising, and also conduct rapid needs assessments. A mobile approach allowed teams to deploy in a quick and timely manner and provide CP support in the acute phase of emergencies.



In the COVID-19 response, these mobile units continued to be operational. Plan International also developed a protocol on how to adapt methodologies for needs assessments and regular CP activities during the infectious disease outbreak.

Reaching adolescent girls through mobile CP programmes: Example from Lebanon

In Lebanon, Plan International's mobile CP programming specifically targeted adolescent girls from Syrian refugee settlements who were not able to access existing services at community centres. Barriers to access included the long distance between the settlements and community centres, high cost of transportation, protection risks when leaving settlements, and the burden of girls' household responsibilities. Mobile child protection teams provided focused and specialized psychosocial support for children and adolescents, awareness raising activities, and parenting skills.



Criteria 2: Are sufficient resources available to implement a mobile CP programme?

Consider the following when determining if sufficient resources exist to implement a mobile CP programme:

Specific considerations related to mobile CP programmes.	Do you have the ability to meet these considerations, given your available resources?
<p>Logistics and Procurement.</p> <p>Mobile CP programmes require significant capacity in terms of logistics and procurement. Given frequent travel, changing schedules, and multiple locations, mobile CP programmes require the support of logistics and procurement departments more frequently and on more complicated issues</p>	<p>Country Teams need to reflect on the burden that designing and implementing mobile CP programmes will place on logistics and procurement teams, and whether the capacity of these teams can be increased for the programme.</p> <p>For example, mobile CP programmes may require purchasing or assigning multiple vehicles, which may be challenging due to import restrictions and require significant follow-up and support. Due to daily use, long trips, and travel in remote locations, logistics and procurement teams will need support teams to frequently procure fuel, arrange vehicle checks, and coordinate back-up vehicles in case of mechanical issues. The nature of mobile child protection work requires additional work from procurement teams to support with essential staff equipment such as gumboots, torches or first aid kits and pre-positioning and release of items to be delivered or used in mobile activities.</p>
<p>Safety and Security</p> <p>In some situations, mobile CP programmes may pose additional safety and security risks to Plan International staff, partners, and communities, including children and young people. For example, while 'static' programmes in a fixed site can benefit from security measures such as walls, fencing, and security guards, mobile CP programmes often use existing community facilities or open-air locations. Mobile CP programmes may also draw more visibility and attention if large teams of staff and vehicles enter and exit communities. This is particularly the case with irregular visits.</p>	<p>Country Teams need to reflect on their capacity to provide significant and continuous security support to a single programme.</p> <p>Mobile CP programmes need security assessments for multiple locations, sometimes on short notice. This can be quite burdensome for Security Advisors and focal points. Existing safety and security SOPs will need to be updated to consider this specific programming approach and security focal point to be assigned and available before, during and after mobile interventions</p> <p>It is important to have a conversation about your office's risk appetite and the extent to which the programme can feasibly mitigate the risks of such an approach.</p>
<p>CPiE technical expertise</p> <p>Mobile CP programmes require dedicated technical support to adapt interventions from a static to a mobile approach. This requires careful consideration, as mobile CP programmes must continue to meet the Minimum Standards of Child Protection in Humanitarian Action.</p>	<p>Country Teams need to ensure that existing CPiE Specialists have the necessary technical expertise and availability to support the design and implementation of mobile CP programmes. If not, additional resources will need to be mobilized for CPiE deployments or hiring of additional technical staff.</p>

<p>Staffing</p> <p>Recruiting staff to work on mobile CP programmes can be very challenging. Consider that staff are being asked to be nearly constantly travelling and may be working in highly volatile contexts. This may not be desirable or feasible for many people. It may be challenging to recruit staff who speak the necessary local languages. In some contexts, it may be particularly difficult to recruit women for these positions.</p> <p>Mobile CP programmes may even require higher staffing levels than 'static' programmes, which may affect the proportion of personnel related costs in donor budgets</p>	<p>Country Teams need to consider whether it will be possible in the context to recruit enough qualified persons to staff mobile CP programmes.</p> <p>Policies related to HR may need to be adapted for mobile CP programmes, particularly where staff need to work outside of normal business hours (such as weekends) to hold activities and are required to be frequently travelling.</p> <p>Note that all staff, even those who have previously worked for Plan International, will need capacity building and training on working in a mobile CP programme.</p>
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It is highly recommended that Country Teams engage and consult with logistics, procurement, and human resource departments when determining the feasibility of a mobile CP programme in their context. It is essential that all these roles fully understand the additional demands of a mobile CP programme, communicate their capacity needs, and are completely supportive of the programme approach.

Donor engagement



It is recommended that Country teams actively engage potential donors at the start of the design process so that donors understand the benefits and limitations of a mobile CP programme and the need for flexibility to be built into programme design and planning. In some cases, the needs of a community may change within the project period and be better suited for static service delivery. In other cases, a mobile programme may need to reach different communities than originally planned due to changing needs. It is important to discuss potential scenarios with donors to ensure mobile programmes remain relevant and appropriate.

Is mobile programming less costly than 'static' programming?

Country Teams should not assume that a mobile CP programme will require fewer financial, material, or human resources than a non-mobile or 'static' CP programme. In Plan International's experience, mobile programs can require the same amount of resources related to staffing, capacity-building, and community engagement in order to ensure a quality response. While rehabilitation or construction of a physical permanent or semi-permanent structure may not be needed, mobile programs can have high logistical and operational costs due to the frequency of travel and movement of teams.

SECTION 2.4 - COMMUNITY ENGAGEMENT

All types of mobile programs require a strong emphasis on involving and engaging the community. Community engagement ensures that existing capacity, knowledge and mechanisms are incorporated in the mobile program and that the resources of communities are reinforced and utilized. A strong community-engagement approach also promotes increased transparency and accountability with affected populations and mitigates against safety and security risks.

Mobile program teams should reflect together on the following questions throughout the program cycle:

- How can children, adolescents, young people, families, and communities be included in the work of the mobile teams?
- What actors, resources, and structures already exist in the community? These may include individuals who already care for children, mediate issues in the community, or structures that children go to for help. How can the mobile CP program build on and contribute to existing community resources?
- Can this help with engagement of the community, or is it going to cause divisions ('showing favouritism')?
- What are feasible and practical arrangements for being able to maintain contact with communities, particularly during times when the mobile teams cannot visit for security reasons?

Selecting communities

Identifying target communities for a mobile program should be based on the findings from the needs assessment and context analysis. Community selection may be dependent on access and security considerations, as well as the approach taken.

- Does the mobile program aim to work intensely with a smaller population group, or does it intend to provide fewer services to a greater number of people in a larger geographic area?
- Is there a specific population group, such as unaccompanied children or adolescent girls, that the mobile program aims to reach?

To determine how many communities/locations a mobile program should target, Country Teams should also consider their organization capacity and total available funding.

Consulting with the community, including children and adolescents, in all phases of the programme cycle

Once communities have been identified for the mobile program, communities should be consulted and engaged immediately in the design phase and early set-up stages of the project, throughout the implementation of the project, including providing feedback and involvement in monitoring.

A consultative process is different from informing communities of project's objectives and plans. It implies listening deeply to community members, their concerns and priorities, and take on feedback and input provided. Country Teams and mobile program staff should avoid "top-down" hierarchical approaches; instead, it is recommended that Plan staff be patient and flexible and use dialogue-oriented approaches that focus on shared understanding, responsibility, and collective problem-solving. From the start of the mobile program, community members should be involved in review/monitoring, problem-solving, joint planning, and shared decision making to encourage ownership of actions.

On-going community engagement can be challenging in situations where it is difficult to maintain regular contact with communities, either due to a lack of access or poor infrastructure. For this reason, even more than in static programming, community consultation should not be seen as a 'one-off' activity but rather a continual process. Clear, regular and consistent communication with communities may help mobile teams to adjust their interventions based on new and emerging needs and to respond to urgent actions and changing locations.

Tips to engage communities ahead of mobile CP programme site visits

- Use multiple information channels and IEC materials (posters, leaflets, child-friendly materials etc.) to raise awareness on what types of CP services are available, where and when services will be offered, and for whom they are intended.
- Identify local networks, including diaspora communities, and their preferred means of communication, such as social media platforms (i.e. WhatsApp groups) to share information about mobile CP services.
- When targeting migrants and refugees, ensure vulnerable groups from host communities are also targeted and included in service delivery. In Plan International's experience, limiting services to migrant and refugee populations can lead to higher levels of xenophobia and discrimination.
- When possible, engage communities in advance of visits to allow children, adolescents, and families to be able to plan their visits. On the day-of, a door-to-door approach or megaphones can also mobilize communities quickly.

Engaging communities prior to arrival of CP services - Example from Colombia



Plan International's mobile team in Colombia conducted community mobilization activities prior to each 'standalone' day of services provided in each of the remote locations. Community mobilizations started approximately 3 days prior to service delivery by handing out leaflets, sharing information through megaphones, and listening to community members. Groups sessions were held with leaders and key stakeholders at churches, shops and community centres to provide them with information about the mobile program and ensure high participation.

Tips for consulting with adolescent girls in mobile CP programming

Adolescent girls face specific barriers in participating in programme interventions. It is important to consult with them to understand the barriers adolescent girls may face and how mobile CP programmes can respond to their needs. Mobile CP programme teams should consider when consulting with adolescent girls:



- Do not rush consultation session; set aside sufficient time during site visits for meaningful consultations and consider involving community volunteers in mobilizing adolescent girls ahead of the visit.
- Be clear and use adolescent-friendly language to explain the objectives of any consultation or data collection activity and obtain consent from adolescent girls
- Involve female staff, female community members, and trusted peers in consultation sessions with adolescent girls
- Ensure that consultation activities are located in safe and confidential setting that adolescent girls can easily access, and that consultations are held during times that are convenient for girls
- Ensure that caregivers are sensitized on the purpose of activities and provide their (informed) consent
- Engage boys and men as partners and allies in promoting gender equality and girls' participation in programme activities
- Engage gatekeepers such as local and religious leaders to develop strategies to engage adolescent girls and to reduce risk of stigma or backlash

Ensure that adolescent girls can safely and confidentially access feedback mechanisms to report risks and safeguarding concerns

Identify what processes and resources are needed in order to facilitate community engagement

In consultation with communities, Country Teams should identify processes and resources needed to ensure that children, adolescents, families and communities are engaged in a mobile CP programme. Involving communities is critical to ensuring that any program is appropriate and relevant for those it seeks to assist.

- For example, a lack of understanding of how a community functions may lead to mobile CP programmes being delivered at inconvenient times for the community.
- This in turn may result in children and adolescents being withdrawn from formal schooling on the day a mobile CP programme visits in order to participate in recreational or PSS activities.

Processes should be determined by the community and need their needs and availability. Communities and Plan International can then work together to identify what resources may be needed to support processes. Resources may include specifically designated community focal points to facilitate engagement, a community space where communities can be engaged, or time set-aside during visits of the mobile CP programme to the community.

A functioning age and gender sensitive feedback mechanism, designed in consultation with the community, should be established at the start of the programme.

Ensure child and adolescent participation across all project cycle activities

Children and adolescents should be consulted on the design and implementation of activities, encouraged to express their views and involved in decision-making in a way that is safe, voluntary and appropriate to their developmental abilities.

Suggestions on how mobile teams could promote children and adolescents' participation in the design and implementation based on existing program practices are as follows:

- Conduct specific information sessions for children and adolescents about the mobile approach at the start of the project.
- Give children and adolescents an opportunity to advise on the activities conducted in the safe spaces, as well as to feedback on issues and the activities in general.
- Ensure children and adolescents choose the time/starting hours of their activities, and the language in which the activities would be conducted.
- Reinforce existing children and adolescent groups to create space for children and adolescents to express themselves freely and feel empowered.
- Strengthen and/or facilitate the establishment of peer-to-peer support groups which create an opportunity for children and adolescents to provide mutual support to each other and share experiences.
- Use participatory tools when consulting with children and adolescents (i.e. community mapping, body mapping, power ball)
- Ensure mobile team staff and community volunteers receive training to support safe and meaningful participation of children and adolescents in the mobile programme.

Child and adolescent participation in mobile CFS activities - Example from Plan Central African Republic



Children and adolescents participate in selecting CFS animators from their communities, selecting CFS venues and times for activities, deciding topics for discussions, and the type of play that takes place at the CFS. Some animators reported having changed the language of the CFS activities according to the children's request. Consultation with children is done through verbal discussions, though there are some efforts to use more participatory tools. Children and adolescents participate in the monthly monitoring visit by the M&E Officer. One session is only for children and adolescents, while another session is open to all community stakeholders.

Adolescent girl-responsive programming through mobile CP programmes [6](#)

Mobile CP programming can be used to tackle specific barriers for adolescent girls and increase their access to service and overall well-being. Mobile programmes can reduce barriers of time and distance to bring protection services closer to adolescent girls.

Based on evidence from Plan International, programmes should also consider the following approaches when designing and implementing activities for adolescent girls:


- Ensure a gender-balanced selection of staff and volunteers
- Involve trusted peers and female community members in outreach to and mobilization of adolescent girls, including at-risk girls
- Conduct risk and safety assessments and involve adolescent girls in identifying risks and mitigation actions
- Promote adolescent girls' access to peer activities, social networks, mentorship, and role models and create opportunities for girls to monitor and address their own protection needs, including through local peer committees or patrols, as appropriate
- Ensure services and interventions are catered to the needs of adolescent girls (e.g. support groups for adolescent mothers; offering childcare services so adolescent girl mothers and working adolescent girls can access services; training case management teams on managing cases of CEFM, etc.)
- Set-up girl-only safe spaces or dedicated times within existing spaces where adolescent girls can meet, participate in activities and receive services
- Consider multi-sectoral programming or partnering with other actors in the fields of education, health, nutrition, food security, etc. to address the needs of adolescent girls and their households
- Engage with caregivers and other gate keepers like local and religious leaders to increase support for adolescent girls to access services and change harmful social norms affecting girls
- Engage with boys and men as partners and allies in promoting gender equality and support adolescent girls to access services
- Engage and support existing structures who provide services and support to adolescent girls, such as youth organization or local women's organizations
- Ensure that interventions do not add to girls' workloads or overburden them

Recognize and build on community capacities, resources and mechanisms

A mobile protection approach should build upon existing structures, knowledge, skills, and networks (e.g., peer support, volunteers, traditional protective norms and practices, existing groups and structures), as well as a sense of community responsibility to protect children. Staff working on mobile programmes need to be able to reinforce the support and care of children by community members and by local service providers.

It is recommended that mobile programme staff meet with community organizations and community leaders to assess what the community already does to protect children and communities, and how communities and mobile programmes can work together to support children and adolescent's protection.

Building on community capacities and mechanisms - Example from Plan Central African Republic



The mobile unit team held consultations with communities to understand how communities provide peer support. Community members told Plan International of existing practices of collecting money or material goods to support vulnerable community members. Building on this existing tradition, Plan International facilitated the creation peer-to-peer support groups for vulnerable women and girls, including survivors of SGBV, widows, elderly women without caretakers, those living with disabilities, and pregnant and lactating women.

No monetary or in-kind assistance was provided. Each support group developed their own ground rules, frequency of meeting, ways to support each other, and the voluntary contribution amount. The peer support groups were well-received by communities. Beyond financial support, young women reported that they found these groups a useful source of psychosocial support, providing a safe setting to share life experiences and advice.

Set clear community expectations with regards to deliverables of a mobile CP programme

Continued engagement and communication with communities may mitigate challenges when it comes to expectations for material assistance and remuneration for participating in activities. Mobile CP programme staff should clarify at the outset of the project the type of activities, materials and infrastructure the programme is able to support. In this way, community members do not develop unrealistic expectations as a result of Plan International's presence.

Site selection

Once communities have been selected, specific sites within each community will need to be identified for the mobile teams to visit. Identifications of sites must be carefully planned, while also being flexible or able to be altered quickly when circumstances change. The selection of sites to provide services should be done in collaboration with the community and local government or authorities and be based on an understanding of existing structures. This includes working in existing facilities, such as a school or home of the community leader. In some contexts, this might include setting up of tents.

Selected sites should be safe and accessible to children, adolescents, and other targeted populations. Crowded areas such as markets or next to busy roads should be avoided. It is essential to conduct a risk analysis and mitigation plan for each site.

If mobile CP programmes also include home visits and non-centralized activities, there should be a location identified where staff and partners can convene. Communication protocols must also be in place to maintain contact. This might be as simple as nominating a tree, or particular landmark, or having regular phone check-ins scheduled.

The mobile CP programme will also need to decide how many sites to visit in each community and whether to rotate between sites. In contexts where it is only possible to visit one site per day, one team may be able to serve four mobile sites per week. This will vary according to the distance of the sites from the office and the distance between mobile sites. If deploying from an office on a daily basis, it is recommended to deploy four days a week, using the fifth day in the office for planning and supervision.

Scheduling and timing visits to the community

Timings of visits should be, as far as possible, communicated and agreed with communities, taking into account the other responsibilities of community members. Visits should not be cancelled at short notice, except for security or other urgent reasons, as this will erode the trust of the communities. Similarly, teams should aim to arrive on-time. If there is a need to change arrangements at short notice, this should be communicated to the community without delay.

The frequency and length of visits should be determined based on security situation, weather, population movement, and human and financial resources. In some situations, a mobile team may visit every week, every 3-6 months, or in some cases only once during an entire project cycle. The length of time spent in each community depends on when community members are available to access services, as well as how long staff can be away from their base and whether they can stay overnight in communities.

Time needs to be allocated for the set up and pack down of activities / services, including collecting materials and loading vehicles. This should be integrated into the activities of the mobile teams, not seen as an added extra, so that it is properly accounted for in planning. Additionally, there should be a team briefing each day before the team leaves (or in the vehicle on the way), setting out who is doing what and where, departure times, and any other essential information. Team Leaders should know the plans of each team member.

Scheduling site visits - Example from Plan Nigeria



Each morning, a mobile team of staff are transported on pick-up trucks to a site in hard-to-reach community. They spend the whole day at that site, before being transported back to the office. The mobile team visit 3-4 different sites each week. A security plan is put in place before every site visit.

Working with community focal points

In addition to the mobile CP programme staff, community focal points or volunteers are an essential part of implementing mobile service delivery. Community focal points can support activities while the mobile team is not on-site. Focal points should be community members who are respected in the community and from whom children, adolescents and families already seek support and help. They can be provided with mobile phones and phone credit to maintain communication with mobile teams.

Community focal points can provide outreach to alert the community to the availability of services and group activities that are part of the mobile response. For example, if the mobile team has established temporary safe spaces, community focal points can support the implementation of group recreational and psychosocial support activities for children and adolescents, including when the mobile team is not on-site.

Community focal points can also support other activities, such as the identification and referral of child protection cases. This is particularly relevant if mobile teams will not visit a site more than once per week. With proper capacity-building, community focal points can provide information to children, adolescents and their caregivers on when the mobile team will next be on-site and – with their informed consent – facilitate referrals to a Plan International caseworker. Focal points can also facilitate immediate access to caseworkers through mobile phones. All community focal point should be trained on how to respond to disclosures of SGBV in safe, non-judgmental and empathetic manner, and to make safe and confidential referrals to mobile team's case workers.

It is important to have clear capacity building plans in place and invest in ongoing training and capacity building of community focal points and volunteers.

The roles and responsibilities of community focal points and volunteers are further described in Section 2.6: [Staffing Mobile CP Programmes](#).

Mobile teams of youth volunteers - Example from Plan Nepal



Nepal's mobile teams included youth members were identified locally. These youth knew the community, understood the situation and challenges, and were able to provide regular support. Most of the youth members chose to offer their time and support as part of their own coping with the situation; supporting others helped them overcome their own experiences after the earthquake. While they worked on a voluntary basis, they received a small incentive to cover the costs for transportation and meals. Involving youth in the mobile teams led to more effective reach of marginalised children, strengthening existing community supports and information sources, and increased community access humanitarian services.

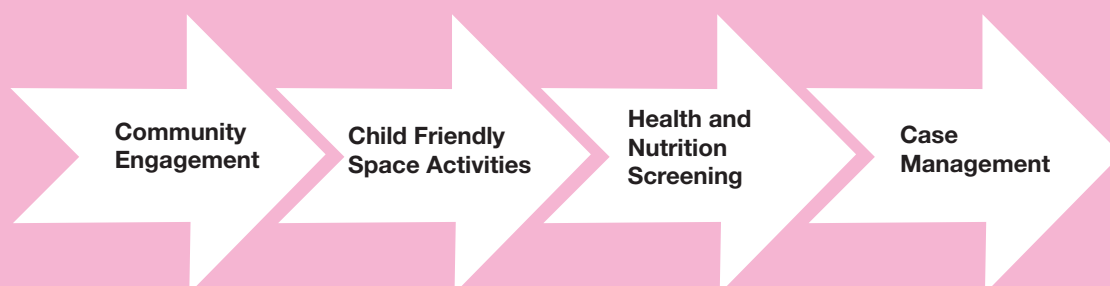
Using a phased approach to introduce mobile CP programme interventions and build community trust

It is recommended to use a phased approach when implementing mobile programmes in a new community. The phased approach consists of introducing the various mobile programming interventions in a staggered way. This allows Plan International to slowly build trust with community members, clarify expectations of the programme, and encourage acceptance of and support to mobile program interventions.

- This should begin with activities that focus on earning community acceptance, trust and confidence and developing a shared vision.
- Mobile teams should meet and visit community leaders and other stakeholders establish an atmosphere of collaboration, which will then facilitate Plan International's entry into new communities.
- During introductory visits, the mobile team provides information about Plan and the purpose of their presence in the area including the type of interventions they will support and their planned duration. This is also an opportunity to understand and analyse existing community capacity, resources and structures.

As the relationship with the community progresses and community acceptance has been earned, additional mobile protection interventions can be added. For example, a mobile CP programme with health and nutrition components can use the following approach:

- Begin with community engagement and activities such as information sharing and referrals to other 'static' services in the community
- CFS activities can be added to engage groups of children and adolescents, as well as parents and caregivers
- Health and nutrition screening activities can then be introduced, either provided alongside CFS activities or through additional site visits
- Once communities are aware of Plan International's mobile programme and trust Plan International staff and volunteers, case management activities can be introduced, ensuring that children and adolescents feel confident to report incidents of violence, abuse, neglect and exploitation. This does not mean that the mobile team does not respond to CP incidents from the start of the programme; rather, case workers and community volunteers can begin to raise awareness about case management services and the type of support provided.



Note that using a phased approach may not be possible when responding in the acute phase and should not delay the provision of life-saving CP services, such as information sharing, referrals to other services providers, etc.

Additional guidance on community engagement:

Alliance for Child Protection in Humanitarian Action (2019). [Minimum Standards for Child Protection in Humanitarian Action. See Standard 17: Community-level Approaches.](#)

Alliance for Child Protection in Humanitarian Action (2020). [Reflective Field Guide: Community-level Approaches to Child Protection in Humanitarian Action.](#)

Plan International (2020). '[Adolescent Programming Toolkit: Guidance and Tools for Adolescent Programming and Girls Empowerment in Crisis Settings.](#)

Plan International. [CPiE Programme Impact. Accountability and Learning Toolkit.](#)



In our mobile child protection programming in Nigeria, Plan International extends its coverage to hard-to-reach communities / Credit: Plan International



Plan International's Mobile Units visit hard to reach locations in Niger with gender and age-appropriate multi-sector services, information and referrals to address children's immediate protection, nutrition, health and education needs – with a particular focus on vulnerable young women and girls.

The mobile team disseminate nutritional advice and provide general health screening through a certified doctor and nutrition officer. Cases of malnutrition are referred to government and NGO partners for clinical health services.

Community volunteers make follow-up checks on malnourished children to ensure they have accessed the treatment needed while the nutrition officer provides breastfeeding counselling to pregnant and lactating women and offers advice on infant and young child feeding. / Credit: Plan International

SECTION 2.5: ADAPTING INTERVENTIONS FOR MOBILE CHILD PROTECTION PROGRAMMES

A range of child protection interventions, covering prevention, mitigation and response, can be implemented through a mobile child protection programme.

CP interventions target children and adolescents to help them to recognize protection risks, build coping skills and adopt behaviours that can help them to stay safe from violence, abuse, neglect and exploitation, as well as help them to know how to access protection services and support. Through CP response services at-risk adolescents and survivors of violence are provided with individual CP case management services which includes direct support provision and referrals to other services to meet the holistic needs of survivors.

CP interventions also target parents/caregivers and community members to strengthen their knowledge and skills to provide the necessary care and protection to children and adolescents.

Determining which child protection interventions should be implemented through a mobile program should be based on findings from needs assessments and service mapping. Other factors such as the frequency and duration of site visits as well as ongoing monitoring and feedback will also play a role.

Service mapping

Mobile program staff will also need to identify the available services in a community. This should include information such as the different services available, capacity and functionality of services, associated costs, and any restrictions in terms of who can access service. Staff should identify whether referrals can be made over the phone, hours of operation, and key contact information. Staff will need to determine whether it is safe to access these services and whether documentation systems are confidential. This should also include assessing mandatory reporting procedures and how this may affect the delivery of services.

For example, if the program wants to support child survivors of SGBV, child protection staff should consider whether appropriate facilities and health workers are available to refer children. Similarly, if the program wants to integrate nutrition awareness raising, consider if there are nutrition actors supporting MAM/SAM cases and provided food distribution.

If services are non-existent, teams will need to decide whether to include other sectors in the mobile program, in addition to child protection. Integrated protection mobile programs with multi-sectoral teams have several advantages (see section below on integrated programming). If teams decide not to provide multi-sectoral services and assistance through the mobile program, teams should discuss how to address multi-sectoral needs when those needs arise.

It is critical to reflect on adaptations that need to be made to standard CP interventions when delivered through a mobile approach as it will have implications for the development of materials, tools, procedures, and capacity building required.

It is also important to determine what activities will be implemented directly by the mobile team and what support will be needed so community focal points and other service providers can implement such activities.

The list below gives an overview of different CP interventions that can be included in a mobile protection program and adaptations needed to ensure adherence to Minimum Standards for Child Protection in mobile service delivery project.

Group Activities for Child Well-being

Description

- Group activities can include: non-formal education; structured and free play; arts and crafts; sports and skill-building activities (life skills, health education, literacy and numeracy); and information sessions.

- Group activities may take place in a fixed space (commonly referred to as a 'safe space') in a mobile tent or in structures such as schools or even rooms within private homes. It is important to ensure that whatever spaces are identified are actually safe, do not increase risk or inadvertently break confidentiality. For example, if it has been negotiated that the village leaders' home can be used, then there must be no risk of the conversation being overheard. In identifying safe spaces, confidentiality will be broken if the reason for using the safe space is known, and then a person is seen entering the space.
- Group activities can be for children or adolescents only. Adolescents girls can be given dedicated times within safe space activities. It is recommended to support dedicated activities for adolescent girls in order to empower adolescent girls, facilitate access to GBV response services and other services, and allow them space for social relations with their peers, dialogue on sensitive issues and opportunities to have their voices heard or provide feedback on services.
- Group activities may act as entry point for providing case management services. This allows child survivors of SGBV to access case management services confidentially, while they appear to be participating in non-stigmatized services, so that they do not need to disclose their survivor status to other community members.

Factors to reflect upon prior to delivering mobile child protection interventions

- Group activities can be organized when the mobile team is present, and additional sessions may be run on other days by community focal points. In that case, mobile team staff may need to return to the site at least once or twice per week for the first 2-3 months to ensure training and mentoring of community focal points to run the group activities. Doing so can help community focal points build capacity and allow for the continuity of such activities even when the mobile team is not present.
- It is necessary to establish procedures to ensure group activities material and games can be left safely in the community in order for members to continue activities with children on the days that mobile teams do not visit.
- The number of participants for group activities needs to be managed so that interventions remain meaningful and safe. Group activities can draw crowds of children and high numbers of children may attend them which could result in accidents and safeguarding concerns due to overcrowding. It may be appropriate to run shifts so that children and adolescents attend on different days/times.
- The content of existing programming guidance or curricula (i.e. life skills curricula) needs to be adapted to the mobile set-up particularly if consistency and frequency of sessions is required. The overall life skills program should be shortened by prioritising sessions that are most relevant to the context. In addition, face-to-face delivery life skills sessions could be combined with remote ways to disseminate the curriculum (e.g. radio, WhatsApp).
- It is important to assess needs for material support including dignity kit items (e.g., soap, underwear, sanitary pads/cloths), baby kits, clothing, protective items (e.g., locks, torches/flashlights etc.). Consider what protection risks might exist with distributing items, particularly if distributing to particularly vulnerable segments of the population. Will distribution put them at risk for theft or attacks?

Group activities for child well-being: Example from Plan Central African Republic

CFS activities at each site are supported by four animators, who are recruited from the local community.



One animator supervises the overall CFS activities and supports the other three animators, who are each in charge of one group of children. Children are divided into three groups according to their age: children under 6, children age 7 to 12, and adolescents over 12 years old. The maximum child to animator ratio is 30:1. If the number of children in any group exceeds 30, another session is organised afterwards and children are asked to come back later. Plan International's mobile team provides training and ongoing capacity-building for CFS animators. They also monitor and assess the CFS to be accessible and inclusive for girls and adolescent girls from community.

Sensitization and Awareness Raising

Description

- Sensitization and awareness raising sessions help children and adolescents to recognize protection risks, learn how to prevent and respond to them, and where and how to safely report violence, abuse, neglect or exploitation as well as gender-based violence.
- The provision of critical information through sensitization sessions could also help to link vulnerable families to available humanitarian services.

- Sensitization and awareness raising sessions cover a range of topics related to child protection and SGBV, including types and effect of violence, available support services, child development, psychosocial distress, gender equality, and sexual and reproductive health. Topics for sensitization sessions could also be proposed by children and adolescents based on emerging needs. Mobile teams could address a specific topic during each visit and the session should last approximately 1-2 hours.
- Share Information, Education and Communication (IEC) materials with community leaders and focal points to facilitate referrals and key messages.
- Sensitization and awareness raising sessions can be facilitated by the mobile teams and community focal points together. Prior to the sessions, community focal points can support the activity by mobilizing children and adolescents to attend and participate in sessions.

Factors to reflect upon prior to delivering mobile child protection interventions

- It is recommended to use different modalities for the implementation of sensitization and awareness raising sessions. Face-to-face sensitization sessions could be coupled with remote sessions. For examples, messages could be adapted to be delivered through radio or they could be recorded and disseminated through megaphones.
- For sensitization and awareness raising sessions addressing structural and deep-rooted social and community practices, such as child marriage and domestic violence, it is important to consider cultural resistance to change harmful practices and report such incidences. Given the limitations inherent to the mobile approach (e.g. limited time available for the activities, limited access to populations, irregular presence in the community), increased efforts should be placed on working collaboratively with community volunteers, peer support groups and other community structures to change harmful behaviours and practices.

Sensitization and awareness raising through mobile programmes - Example from Plan International's Lake Chad Response



Mobile teams from Niger, Chad, and Nigeria conduct one sensitization session per visit, lasting approximately 1-2 hours. Sensitisation sessions may be organized for the wider community, or organized for specific target groups such as children, adolescents, at-risk adolescent girls, and caregivers. In Cameroon, community volunteers also conduct door-to-door sensitization sessions.

Sensitization session often include a range of topics related to CP and SGBV, including the rights of rights and women, gender equality, types of violence and its effects on children's development, positive parenting practices, sexual and reproductive health, hygiene, and other topics. In some cases, the communities would also request topics. For example, in Niger one community identified the forced labour of children as a concern, and asked Plan to address this in a sensitisation session.

Case Management

Description

- Case management provides one-on-one social-work type support where direct psychosocial support can be provided. It includes an assessment of an individual child or adolescent and case planning where a child and their caregivers work together with a caseworker to identify other services and referrals necessary. Case management can also facilitate specialized support such as family tracing and reunification, alternative care, and reintegration.

Factors to reflect upon prior to delivering mobile child protection interventions

- Case management is particularly difficult in remote areas where there are few or no services (health, legal assistance, security) and when the presence of case workers cannot be guaranteed, either due to security or frequency of visits. In such cases, standard operating procedures for case management need to be adapted to the mobile set-up.
- Child protection staff should consider whether it is safe and ethical to start case management services and how they will ensure continuity of care. Given the frequency and duration of site visits by mobile programs, what are realistic timelines for case follow-up? For example, what will be the purpose of registering an unaccompanied or separated child, if there it will not be possible to follow up or complete family tracing? In such cases, another intervention may be more appropriate, such as identifying and referring children to available services and working instead on minimizing harm to children through community-level supports.

- Service mapping in the area should lead to the development of site-specific referral pathways. The referral pathways should include traditional support services (i.e. health, legal, alternative care, psychosocial support, police) and non-traditional service providers (i.e. community groups, women's organizations, traditional leaders). As the mobile team will not be on-site at all times, it is necessary to determine how referrals will happen, including whether coordination with other service providers will happen in-person only or also through phone-based referrals. Child protection staff should reflect on feasible and appropriate timelines for referrals. It is also important to identify safe transportation for survivors to the service provider, establish agreements about payment of fees for services and transportation, and designate a community focal point who can be called upon to provide immediate assistance.
- Determine whether any of the service providers will need training, and when and how such training can take place prior to making referrals.
- Determine how immediate health services will be provided to survivors of sexual violence. In cases of sexual violence, the mobile team should be prepared to facilitate access to appropriate health treatment, such as post-exposure prophylaxis to reduce likelihood of HIV infection and access to emergency contraception within the appropriate 72 hours. If there are health service providers in the mobile site that provide such interventions, survivors can be referred to them. If no such providers exist, consider including a health care professional in the mobile team who is trained in clinical management of rape, or coordinate joint deployments with a mobile health team.
- Determine if it is possible to identify a safe, accessible and confidential area, such a private room or space in which to hold case management sessions.
- Documentation, record keeping processes and case management forms need to be simplified or adapted to reflect that staff will have limited time both in communities and in the office. For example, a long-detailed assessment form for case management, if it is likely that the team may only engage with a family once or twice, may be adapted to a shorter form which collects the most important information, and then allows for the time available to be spent developing case/safety plans.
- To ensure data protection, limited notes should be kept for all cases, relevant information should be registered using case codes with limited identifiable information (i.e. biodata such as names, address, etc.) to reduce risks to children/survivors and the community focal points. See Plan International (forthcoming), Keeping Protection Data Safe.
- Identify clear and confidential communication channels with community focal points for continued documentation of cases. Review the information sharing protocol with community focal points to uphold confidentiality of information



If case management services in a mobile CP programme cannot meet minimum standards or be offered in line with key child protection principles, case management should not be provided. Plan International's primary concern is to do no harm.

Parental Information and Awareness Raising

Description

- Parental information and awareness raising includes information provision and one-off sensitization activities targeting parents and caregivers, including adolescent caregivers and foster families.
 - In some cases, parenting programmes using curricula-based sessions can be used to provide more structured support.
 - These activities can provide general awareness raising session on child protection risks, available services and how to access them. It can also include information and capacity-building on self-care, positive parent-child communication, stress management, and positive parenting practices.
 - Its purpose is to provide support and information to parents and caregivers in time of crisis and help strengthen their social support systems. It can also be used to promote gender equality in families and communities.
 - These interventions can be accompanied by other interventions to strengthen protection family environments for children and adolescents, such as livelihood or shelter support through cash and voucher assistance, intergenerational and community dialogues, NFIs, etc.
- **Factors to reflect upon prior to delivering mobile child protection interventions**
 - Like group activities for children and adolescent well-being, parental information and awareness raising can be done using different modalities such as face-to-face sessions, remote sessions, through radio, or recorded and disseminated through megaphones.

- Parenting information and awareness raising should complement issues being raised with adolescents, particularly when it comes to changing harmful behaviours and practices. Parents and caregivers are key decision-makers on a variety of issues. For example, messages shared with adolescents on addressed CEFM should be accompanied by messages to parents and caregivers. This contributes to building a safe and protective environment for children and adolescents.
- Consider the possibility to organise parenting programmes if the mobile teams have the possibility to visit frequently selected communities. Given that parenting program involves a more structured programme, the overall curricula may need to be adapted to a mobile programme.
- Mobile CP programmes can consider identifying female and male champions for positive parenting within the community to continue holding information and awareness raising sessions with other caregivers from the community when mobile teams are not present.



Parenting education through sensitization sessions - Example from Plan International's Lake Chad Response

Parenting education is organised through sensitisation sessions, which are aimed at helping parents to reflect on their own attitudes and behaviours to better care for and educate their children. Foster parents and the parents of reintegrated children are also invited to attend the parenting sessions.

Working with other sectors

Collaboration with other sectors, such as health, nutrition and WASH can be extremely valuable in a mobile CP programme. It is likely that populations targeted for mobile programming will have multiple unmet needs. Where possible, multi-sectoral mobile teams are recommended.

One key benefit of multi-sector teams is that if a child is seeking assistance with a sensitive protection concern, reporting to the mobile team allows for greater privacy and dignity as community members are less likely to be aware of the specific issue they are reporting or the type of intervention/service they are requesting.

Nutrition Education and Screening

This includes nutrition services for pregnant mothers, adolescent girls, and children under 5, namely:

- Sensitization and education on nutrition, screening of children, and referral where necessary to specialist health centers, run by the government or another NGO.
- Nutrition education and counselling for caregivers (including support to child-mothers on how to address nutrition needs of their babies).
- Breastfeeding and infant feeding counselling is given to pregnant and lactating women.

Health

In the absence of health service providers, consider including a health care professional in the mobile team who is trained in administering post-rape medical treatment.

Hygiene Promotion

The mobile teams can address hygiene issues through sensitization sessions. Hygiene kits can also be distributed.



© Plan International. Venezuelan boy who received services during one of the mobile programme days in the neighbourhood of Santa Fe in Bogota, Colombia

Linking child protection and nutrition in mobile programming - Example from Plan International's Lake Chad Response



Nutrition is a key component of mobile CP programming in Nigeria, Niger, and Cameroon. This includes both sensitisation and education on nutrition, screening of children, and referral where necessary to specialist health centres, run by the government or another NGO. Mobile teams include staff who are either specialists in nutrition or who have been given special training in identifying children who have been malnourished.

Where a referral is necessary, the mobile teams will assist the family to access services, either directly or through working with other organisations that are present. This also includes transport if required. The mobile teams inform the health structure that the child has been identified and then follow up on attendance, a good piece of practice in terms of multidisciplinary work. Teams hold sensitisation activities on the importance of nutrition. In Nigeria, and Cameroon, the mobile teams provide dietary counselling regarding the use of quality, locally available, diverse foods, supported by cooking demonstrations.

Referrals between static and mobile programming

Referrals should be made where possible to other Plan International programs including sexual and reproductive health rights, youth economic empowerment, food security and livelihoods, and education. In many cases, it is likely that these are 'static' services which remain in one location.

Mobile and static services can provide cross-referrals and support each other in reaching the most vulnerable and hard-to-reach populations with timely and quality services. In some cases, mobile programs can alert humanitarian actors, including governments, of communities with urgent and unmet needs and such actors may be able to deploy assistance. In other cases, static services may identify communities with particular challenges in accessing services and direct mobile services towards those communities. Information sharing and coordination between static and mobile services improve affected populations access to services and assistance.

Multi-sectoral referrals through mobile programming - Example from Plan Nepal



Nepal's mobile teams referred families in need of basic services directly to the Government, community and NGO services, or to the HIS. As the Mobile Teams were from the communities and visited all targeted communities on a weekly basis, they played a crucial role in helping Plan International and partners to target the most vulnerable families for Plan International's emergency interventions in shelter, water and sanitation, education and livelihoods.

Multi-sectoral referrals through mobile programming - Example from Plan Colombia



In Colombia, mobile services were initiated after 'static' services in Bogota's city center determined that additional scale-up of services were needed. During the delivery of mobile services for girls, boys and families, whenever additional support needs are identified, mobile teams provided information on the services available in 'static' location and conducted referrals. This included information on how to access education, vaccines, and specific support following incidents of violence, abuse and exploitation. Government officials were also involved in the planning and implementation of mobile protection services and provided technical orientation in protection cases.

Additional guidance:

Alliance for Child Protection in Humanitarian Action (2019) [Minimum Standards for Child Protection in Humanitarian Action](#).

International Rescue Committee (2018). [Guidelines for Mobile and Remote Gender-Based Violence Service Delivery](#).

Plan International (2021). Adolescents Life Skills and Parenting Package.

Plan International (2020). [Coping with COVID-19: Supporting Adolescents, Parents and Caregivers to Stay Healthy and Protected During the COVID-19 Pandemic](#).



Children and adolescents playing at Plan International Child Friendly Space (CFS) at Shuwari Lambu Maiduguri
Credit: Plan International

SECTION 2.6: STAFFING MOBILE CHILD PROTECTION PROGRAMMES

Properly staffing mobile programs involves thinking through the human resources, roles, and skills and competencies needed to make a mobile program successful. The number of staff required should take into consideration the geographic reach of the program, the number of communities targeted, interventions planned, the safety of mobile program staff, and the involvement of community volunteers and facilitators.

All decisions and actions related to staffing, recruiting, and performance evaluation should be closely coordinated with Human Resources, particularly if Human Resources is not familiar with mobile programming. In some cases, job descriptions will need to be adapted or even newly developed.

Key staff positions in mobile programs

The following key considerations for staffing mobile programs are based on Plan's previous experience:

Project Managers – The overall role and responsibilities of a Program Manager or Program Coordinator do not substantially change in a mobile program. Program Managers are responsible for the overall implementation of the project, budgets and workplans, and working with Country Office teams to report to donors. In a mobile program, it is essential that Project Managers are actively engaging in the delivery of the mobile program. This includes:

- Travelling regularly with staff to visit communities targeted by the mobile program
- Witnessing the direct delivery of mobile services and activities when possible
- Holding regular coordination and exchange meetings with mobile staff who are responsible for different communities or different intervention types

It is important that Program Managers are aware of the realities of the mobile program, including challenges. This allows Program Managers to advocate on behalf of their teams for technical and logistic support from Country Offices, as well as Regional Hubs and National Organizations. This also allows them to provide hand-on support to Team Leads and other staff members. Without a deep understanding of the delivery of the program, Program Managers will be unable to sufficiently address challenges and find appropriate solutions.

Program Managers are also responsible for linking with Child Protection and other sectors' specialists to ensure they can assess capacity gaps of staff involved in mobile programming and strengthen their competencies through appropriate trainings and other capacity building initiatives.

Appointing a Team Lead – in all cases a 'Team Lead' should be identified for each group of staff travelling to a community. A Team Lead should be responsible for decision-making regarding safety and operational issues of behalf of this group. This function is particularly important as staff travelling to remote or hard-to-reach sites will need to make on-the-spot decisions and may not be able to contact a Program Manager in time. Without appointing a Team Lead, mobile responses risk being disorderly and unable to adapt to evolving situations while in transit or in a community.

While the Team Lead position could rotate amongst different staff members, it is crucially important that Team Leads have the ability to make timely decisions, assess risk, problem solve, negotiate with communities, and ensure safety and security of communities and staff/volunteers.

Other mobile team staff - The composition of other members of the mobile team will depend on the services provided as part of the mobile program. These may include community engagement officers, case workers, CFS animators, nurses, nutrition officers, drivers or other transport operators, and other staff. For safety reasons, at least two staff members (including one who is appointed Team Lead) should always travel together to each site.

Promoting the employment of female staff in mobile programming – Examples from Cameroon and CAR



In certain contexts, Plan International may will need significant efforts to make promote the employment of female staff in the mobile teams. Female staff are particularly essential when working with girls and adolescent girls on sensitive protection topics such as SGBV. In Plan Cameroon, most of the members of the mobile teams are women, as it is considered that survivors may find it easier to talk to a female member of staff. Plan Niger has also seen a multi-fold increase in the number of women hired as staff as a result of their mobile programming.

Plan CAR used recruitment processes as opportunity to empower and build capacities of women. Women from surrounding communities were invited to participate in a training on protection issues. The training served as a hiring exercise and women who demonstrated key skills and competencies during training activities were afterwards invited to join Plan CAR.

Community Focal Points or Volunteers – It is likely that volunteers from communities will be engaged in any mobile project to ensure community acceptance and build community engagement. Volunteers may be able to undertake community engagement activities, support the implementation of group recreational activities and the provision of case management services, and conduct follow-up in between the visits of the mobile program.

Volunteers should reflect the community and be acceptable to the community. It is actually very probable that volunteers know the context and the communities better than anyone else: they are amongst your most valuable resources and yet they are also oftentimes the most exposed and most vulnerable humanitarian actors. This should not be exploitative. Asking someone to volunteer to work two days per week is a job, not a volunteering opportunity!

It is important that volunteers are credited and empowered at all times. Careful consideration should be given to the payment of expenses, stipends, or other benefits in kind for community volunteers. These need to be a fair reflection of effort and an inducement for participation but should not put volunteers at risk.

- For example, in impoverished communities, payment of monies to one person may single that person out for retribution. In such cases it may be more appropriate to provide funds to the whole community or agree a particular benefit will be provided for the community.
- Ask yourself how else you can offer your volunteers other professionally rewarding opportunities, for instance by inviting them and considering their learning needs and aspirations into capacity building activities and lesson sharing experiences.

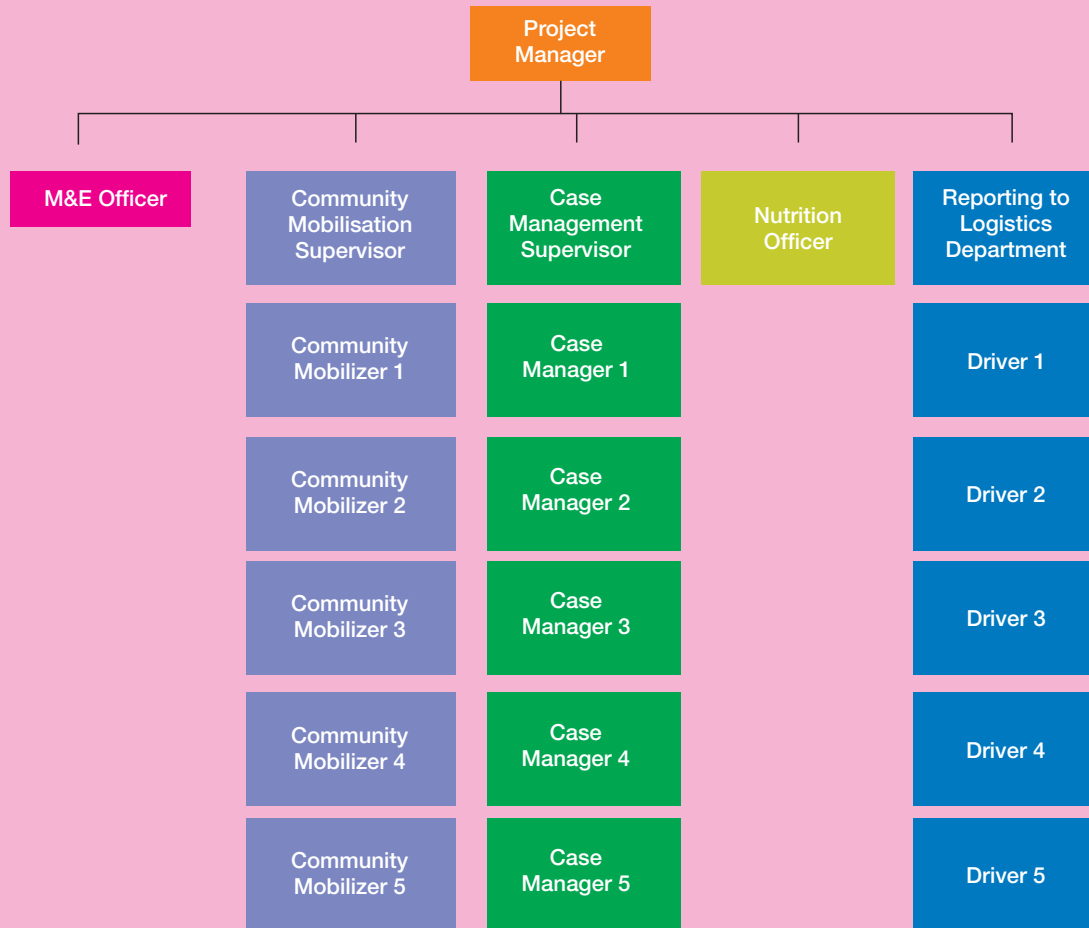
Mobile team staffing structures – Examples from Central African Republic



In this example from Plan Central African Republic, a Program Manager/Coordinator oversees several mobile units, each of whom are responsible for a different geographic zone.

- There are five teams covering 33 villages in five routes (axe), and one team is responsible for each route.
- Each mobile unit is equipped with one vehicle and has a dedicated Team Lead, driver, case management worker, and community mobiliser. Case workers are recruited at the capital city level, and community mobilisers are recruited from the communities covered by the mobile project.
- Due to the sensitive nature of the case management, teams do not switch staff nor do their change their routes.
- Each mobile unit is supported by other staff and shared staff who sit at the sub-office or country-office level, including a Case Management Supervisor, a Community Mobilisation Supervisor, a Nutrition Officer, and a Monitoring and Evaluation Officer.

In every community, the mobile unit works alongside community volunteers selected from the communities: Focal Points and Animators. Focal points are responsible for liaising between mobile team and their communities; mobilizing adults and organizing sensitization sessions; identifying cases that requires immediate protection and referring them to case managers; malnutrition screening. Animators are in charge of CFS activity facilitation.



Mobile team staffing structure- Example from Nigeria

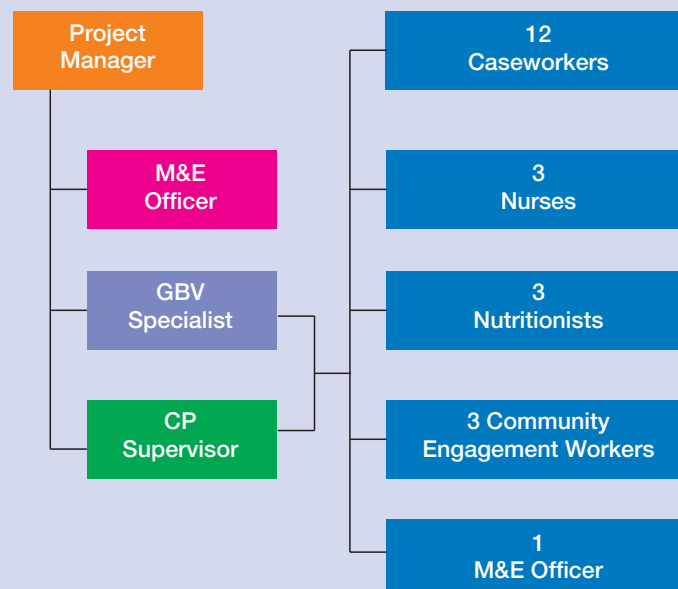
In Nigeria, staff are split into:

- The project is managed by a Plan Nigeria team composed of a Project Manager, a Child Protection and Case Management Supervisor, a GBV Specialist, and a Monitoring & Evaluation (M&E) Officer.
- Plan Nigeria collaborates with a partner organisation, Child Protection and Peer Learning Initiative (CPPLi), which implements the activities of the project in the field.
- In total there are 12 caseworkers, 3 nurses, 3 nutritionists, 3 community engagement workers, and 1 M&E Officer employed by CPPLi to work in the project.
- Some of the caseworkers focus on health and nutrition, others on CPiE and GBV.
- The caseworkers and the community engagement workers visit the communities every week, while the nurses and the nutritionists only visit when they have specific activities to conduct. Community volunteers help to facilitate activities.

Depending on the size of the community, there are four-to-seven community volunteers.

PLAN NIGERIA

PARTNER: CPPLI



Competencies of mobile teams

A careful balance should be made between the skills of different staff members. While technical competencies are important, these can be developed with support of technical specialists/advisors.

Soft skills, such as interpersonal skills, communication skills, listening skills, time management, and empathy, among others, are critical for successful mobile programming. Those working on the teams need to be able to work as a team, be flexible, be dependable, be able to work in unstable situations, be prepared to work in uncomfortable environments and be able to engage positively and negotiate with communities (see table for more details on competencies.)

Existing competency frameworks within Plan International and the child protection sector should serve as the main reference point for identifying key competencies, measuring performance, and planning capacity-building initiatives for mobile programming staff.

Based on Plan's experience in delivering mobile programs, the following key competencies are particularly important for the 'soft skills' of staff, partners, and volunteers working on mobile programs. Note that while technical competencies in specific interventions areas remain key, these will depend on the specific services delivered within each mobile program and have not been listed below. For a list of competencies and behavioural indicators needed for delivering mobile CP programmes, please see [Annex 3 Competencies for Mobile CP Programme Teams...](#)



Soft skills are critical to the success of mobile programs. Mobile programs should identify strategies to recruit staff, partners, and volunteers who can demonstrate the soft skills needed to implement mobile programs. While technical skills are important, these can be strengthened with the support of technical specialists. Poor ability of staff to manage stress, make timely decisions based on sound judgement, and build trust with communities can affect the ability of mobile programs to deliver services and build trust with communities.

Additional resources on competency frameworks.

Alliance for Child Protection in Humanitarian Action (forthcoming). Competency Framework.

Gender-based Violence Area of Responsibility (2014). [Core Competencies for GBV Program Managers and Coordinators in Humanitarian Settings.](#)

Plan International (2020). [Competencies for Technical Professionals.](#)

Ensuring staff care and well-being

Project managers and the human resources team must recognize that working on mobile programs can be very exhausting, and therefore they need to pay specific attention to the welfare and wellbeing of staff implementing mobile programming. Extended time spent travelling on the road and constantly working in situations of flux can be draining. For this reason, it is important that teams have a sense of structure.

Teams cannot travel to the field every day, as they will need some time to coordinate and plan, and also for routine office work and supervision. Time at the office needs to be built into the timetabling of the teams. Ideally teams should have one day in the office every week. This should be used for reflection and team review of the previous week and planning for the coming week. Other important activities such as supervision and capacity building / coaching can be carried out during this day.

In some cases, normal procedures for staff leave or overtime hours may not be sufficient to meet the well-being and self-care needs of mobile program staff. It is highly recommended to discuss with Human Resources how procedures and policies may need to be adapted to ensure that mobile program staff have adequate time for rest and recuperation. For example, if some mobile teams deploy to sites over weekends or are not able to return to base offices for an extended period, they will need flexibility to take additional time off in lieu.



*Children playing on the street of rural Mubi community in Adamawa state in Nigeria.
Credit: Plan International*

SECTION 2.7: CAPACITY-BUILDING MOBILE CHILD PROTECTION PROGRAMMES

All staff, partners, and volunteers involved in mobile programming will require capacity-building through training, coaching, and mentoring, as well as on-the-job learning.

Project Stage	Capacity-building Requirements
Start-up phase	<p>Before project implementation begins, CP and other sectors' technical advisors should perform a capacity gap analysis that is an assessment of the competencies within the mobile team staff and, where possible community volunteers, to develop a capacity building plan. This should include the 'soft skills' needed for mobile CP programming, as well as relevant technical knowledge. The plan should adopt a blended learning approach which includes trainings and briefings, as well as coaching, mentoring, peer exchanges, and on the-job guidance. The findings of the capacity gaps analysis will inform the selection of competencies which will be strengthened through capacity building efforts throughout mobile CP program implementation.</p> <p>The Program Manager will be primarily responsible for the implementation of the capacity building plan and for seeking technical support from CP and other sectors' technical advisors to ensure quality CP capacity building activities are offered to mobile team staff and volunteers.</p> <p>All mobile team staff (including drivers) and volunteers will require briefings and training on:</p> <ul style="list-style-type: none"> • Mobile programs goals, activities, and objectives and targeted communities • Child and youth safeguarding training (with support of Child and Youth Safeguarding Focal Point) • Security and first aid training • Key principles of mobile CP programming • Soft skills (see competency table) • Referral pathways and available services in the target sites • How to handle disclosures of incidents of CP or SGBV • Community-level CP approaches <p>Staff responsible for specific technical interventions will also require trainings on technical competencies, even if they have worked in this area before. It is important to have discussions about how to apply existing guidance and minimum standards to a mobile approach during this step.</p> <p>An internal kick-off workshops with staff (and volunteers if possible) at this stage allows for all stakeholders to understand the rationale of the mobile program. Other staff supporting the program, including staff from human resources, administration, logistics, and procurement, should also be invited so they understand what support is needed during implementation.</p> <p>Do not forget that all new staff and volunteers who join the project mid-way should still receive this information and training before beginning their work.</p>

During Project Implementation	<p>Capacity-building should be integrated into project implementation.</p> <ul style="list-style-type: none"> • Embed capacitybuilding into performance objectives, particularly for Team Leads and officers • Identify set times for trainings and briefings, as well as lessons learnt workshops, and build these into schedules and timetables Work closely with CP and other technical specialists to communicate new and emerging technical support needs, and organize trainings or briefing even if not originally planned in the project • Ensure a clear coaching and supervision plan is developed in collaboration with CP and other technical specialists to provide on-the-job guidance to mobile team staff • If additional budget is needed to support capacitybuilding, Program Managers should work with Country teams as well as NO colleagues to identify savings and additional resources
At Project Closure	<p>During evaluations or staff debrief and program review, it is recommended that mobile programs reflect upon the capacitybuilding needs of their teams and whether these were met or not. Teams should identify and document successful strategies and approaches to capacitybuilding, as well as shortcomings and gaps, in order to inform the develop of future mobile programs.</p> <p>These findings should be communicated back to Country Office senior management and shared with the Global CPIE Team.</p>

SECTION 2.8: OPERATIONAL SUPPORT

Support from operations is essential for the success of mobile CP programs and should be planned from the design stage. This can include:

- In addition to support from staff from operations teams, identify a focal point from the operations department to provide dedicated support to mobile CP programmes
- Adapt existing organizational to facilitate mobile programming, such as shortening or simplifying processes that will better support mobile teams
- Develop special processes may need to be developed to ensure timely provision of petty/emergency cash or fast-track recruitment of key staff.

The following sections highlights some key considerations for mobile CP programmes in operational support areas like transportation, communications, and procurement.

Identifying and using appropriate transport

Although the mode of transport will be determined by the context, in all cases, staff should be provided with access to reliable and safe transport to implement mobile operations. This could include different types of Plan's vehicles (bikes, motorbikes, cars, buses etc.) or other safe arrangements as per Plan's supply chain policies and procedures. For example, when staff are expected to use local transport, then there will be a clear way for reimbursement and claiming expenses.

When deciding the type of transport to support mobile operations consider:

- Vehicles for staff to come back from community sites
- Vehicles or other transport options available in case of emergency or evacuation. For example, in one mobile program a stand-by vehicle was always available and ready in case of emergency.
- Transport to support staff mobility within the area of operations. If the vehicle is shared with other programs a timetable should be used to avoid impact on mobile operations.
- Materials and equipment that needs to be carried to implement mobile activities.
- Reviewing and revising policies and procedures, for example regarding data storage, cash expenditures, and administration processes to reflect mobile programming approaches so that these can be implemented without delay.

Communications

Communication assets and a plan need to be established to support communication between teams, with communities they are working with and to remain in contact with the office while transiting and visiting communities. Mobile program teams will also need to consider how to remain in contact with Security Focal Points as well as technical specialists such as CPiE specialists. Mobile program teams should also reflect on how remote supervision of mobile program activities will be facilitated and what communication methods are required.

Depending on the context, communication devices might be different. In context which lack reliable networks, special equipment (e.g. satellite radio) or security procedures such as regular call-ins are required.

Procuring materials

Based on the interventions and needs to be addressed through the mobile approach, materials and supplies required can be identified. For example, recreational materials for group activities for child wellbeing; stationary, kits (i.e. clothes, hygiene materials, cooking utensils, sleeping mat and others.) and furniture for case management and psychosocial support. See Tool: Checklist of materials (forthcoming). Besides materials required for activities, other supplies may include:

- Equipment for mobile teams, e.g. backpacks, boots, raincoats, hats etc.
- Worksite: mats, tents, tables, chairs, tarpaulins
- Communications equipment
- Health and safety: first aid, fire extinguishers, drinking water, emergency provisions
- Petty emergency cash

If materials can be used by communities, it is useful to have some additional or extra materials which can be taken to the sites so that stocks can be replenished. This may include recreational, informal education or IEC materials that can be used for activities by the community.

As early as possible or once you know materials to be procured, identify vendors and start establishing networks and links if not existing yet. Mobile program teams must work closely with Supply Chain colleagues. Ideally, Memoranda of Understanding (MoUs) and Standard Operating Procedures could be developed in advanced so that these are in place. Wherever possible, try to use locally sourced materials and also use this as a way to engage the wider community. For example, if snacks are to be provided for community meetings, consider these to be cooked by local women and men or recreational materials for group activities for child wellbeing and parenting sessions to be made traditionally by community members using local available resources.

Another factor influencing the type of material to procure is the availability of storage. If possible and security allows, as many materials as possible should be left at sites so there is less time needed for set up. Storage can happen on site, on route or at an office base. Identify any possible locations for storage of materials / resources, and potentially beginning to stock such items (subject to budgets and funding) as a contingency.

If materials are left on site, then a decision needs to be made, with the community, regarding security and access to the materials while the mobile team is not present. Community centres, health points or schools might be able to provide a space to store heavy materials.

When community storage facilities do not exist - Example from Myanmar



In Rakhine, Plan International was unable to identify existing community storage options to store CFS materials for mobile CFS activities. As a result, mobile teams transported CFS materials with them each time they visited communities. Materials had to be adapted to be easily transportable. CFS volunteers from the community support the intervention by pre-identifying sites to run mobile CFS activities.

SECTION 2.9: SECURITY

Security as one of the essential factors throughout planning and implementation of mobile programs.

Conducting risk assessment

Before beginning mobile programming, a security risk assessment on-site should be conducted as well as a review of any secondary information available. This should be done in addition to a safeguarding risk assessment.

This will determine if security situation is relatively stable or highly unpredictable and affect the frequency, timing, location and design of planned mobile interventions. A risk assessment should include the following areas:

- Physical and mental threats to both team members and the affected population, also when trying to access mobile services or when participating.
- Discrimination or perceptions of discrimination if a service is provided to specific groups / individuals at the exclusion of other groups/individuals
- Political tensions
- Risk of doing harm to girls, and boys (and their caregivers) if service providers do not have a permanent presence in the community to monitor the situation of families.
- Inter o intra community tensions due to delivery locations or types of services. For example, if one community is served and a neighbouring community not served.
- Community views of service providers and humanitarian organizations like Plan International
- Community engagement that can mitigate risks (e.g., having a community focal point to call prior to leaving and nearing arrival, notification of key community leaders as appropriate, agency or government approvals, etc.
- Road conditions, infrastructure and availability of vehicles
- Other sensitive issues to be addressed

A security assessment is not a one-off activity. Security monitoring must continue throughout the implementation of mobile activities. A security focal point and the mobile program team may use different mechanisms to collect and analyse information and make decisions about security. There is a documented process of review and decision-making regarding actions to mitigate the identified risks. This could also involve consultations with communities. For example, in one mobile program, the communities send a motor taxi to the office to tell the team if it is safe to travel to the area.

Appointing a Security Focal Point

The office must appoint a Security Focal point to support the mobile team and ensure each staff has necessary security briefings, equipment, and permissions from relevant authorities if needed. The Security Focal point in collaboration with the Team Leader will also be responsible for establishing Contingency plans and security protocols including evacuation plans should be presented and reviewed prior to each trip.

During program implementation, a Security Advisor should be in regular communication with the appointed Security Focal Point for the mobile program. The person at the office base should be identified as a point of contact in case of any emergencies and contactable while the team is out. When working in consortium or with an implementing partner, these protocols will be developed jointly and signed by each partner.

Note that community members can play a critical role in sharing information about security risks. In some cases, they can even warn Plan International and partners about emerging security risks and help develop mitigation plans so that activities can be continued in a safe way.

Providing appropriate equipment

During site visits, it is important to communicate fast and effectively with other members of the mobile team and with the office. Communication equipment may include mobile phones, satellite phones, or others when limited signal. Clean drinking water should be provided for staff, together with emergency supplies in case of vehicle breakdown or other delays. Other equipment may include radio, PPE, items for water purification, fire extinguishers, food supplies, raincoats and boots, and sleeping accommodations if staying overnight. Equipment might vary depending on the context and location. At least one person on the team should have first aid training, and a first aid kit, which is regularly checked and restocked, should be provided.

Conducting security orientations and trainings

Staff working in changing environments and delivering mobile interventions need to attend security trainings or orientations in line with CO and Plan International policies and procedures. Check and ensure new staff attend mandatory training and specific for the delivery of mobile interventions depending on location and context. Orientations are sometimes also extended to partners we work with. The frequency of the orientations and trainings will also depend on the frequency, type and location of interventions. For example, it is expected to have daily security briefs in volatile contexts.

SECTION 2.10: COORDINATION

Consider coordination mechanisms between different government and non-government agencies, and linkages with communities to understand roles, responsibility and how mobile interventions fit within this.

Internal coordination

To undertake mobile activities is advised that a joint group of operations (security, logistics, finance, human resources) and technical and implementing teams are coordinated to ensure quality and timely implementation. Regular and ad-hoc meetings, TORs with specific roles, responsibilities and decision making and others can be used.

Plan International has a [CPiE Network](#) across Plan International at CO, RO, NO and GH level, some of them with technical experience implementing mobile programs. CPiE Specialists are encouraged to share, connect and work together

Coordination with other CP actors

CP coordination mechanisms vary based on the type of humanitarian setting: Cluster Approach or Refugee Response Coordination Model¹².

CPiE Specialists or similar staff at country-level implementing mobile interventions should actively take part in country CP coordination mechanisms by:

- Regularly attending meetings
- Completing the response mapping (3/4/5Ws),
- Contributing on specific tasks (e.g. conducting rapid needs assessments),
- Contributing to the development of inter-agency resources or advocacy initiatives linked to mobile interventions (e.g. reports, needs assessments, donor briefings etc.)
- Contribute to inter-agency information management systems, such as CPIMS.

Local partners

Mobile CP programming can be delivered by Plan International or through partners. In part, this can be determined by the capacity of partners but should also be based on considerations of access, safety and security, technical capacity and available resources.

At the initial assessment of identified local partners – before detailed programme planning - it is important to consider the technical and operational capacity of local partners and potential for collaboration and capacity building during start-up and implementation.

In considering partners, Country Teams should also think outside of 'traditional' partners. For example, in one mobile program, Plan International partnered with a local bank who had the facility to provide mobile ATM/banking services. The programme included banking services for the targeted population which complementing activities that Plan International intended to implement through cash programming.

If mobile CP programmes are implemented jointly between different organizations, MoUs should be developed clearly identifying the roles and responsibilities of each participating organization, including what resources are being contributed. Different models of partnership can be created and agreed TOR will help follow deliverables.

Coordination with other sectors

Where appropriate and possible, CPiE Specialists supporting mobile interventions should consider opportunities to influence program and policy in the local, sub-national or national level through other clusters or inter-agency coordination groups. For example, sharing evidence-based information on needs and gaps of specific sector (e.g. nutrition, livelihoods etc.). When working in consortiums or partnerships with other organisations that focus on other sectors, coordination and operational and technical decision-making can be achieved through regular meetings, focal points, internal referral pathways, communication procedure and others.



Coordination with other humanitarian actors - Example from Plan Colombia

In Colombia, Plan International set up a coordination mechanism with IOM, Red Cross and other partners implementing mobile services for planning and implementation based on regular meetings, shared decision making and SOPs to guide the mobile work. In order to identify emergency health and protection cases including child protection, a focal point system and referral pathway was created and shared and agreed to by all participating organizations in the mobile services.

Mobile CP programming also provides an important opportunity to link mobile services with 'static' or other existing services in a community. For example, mobile CP programmes can be informed of the health needs of a specific population within a community and either refer individuals to existing health services within the community or liaise with health sector actors to share information and coordinate joint mobile visits.

Mobile CP programmes which work in remote or hard-to-reach locations or with excluded and marginalized groups can play a particularly useful role in sharing information with other sectoral actors. It is important the mobile CP programmes are aware of existing services within a community or in the surrounding area and make contact with these services to establish referral pathways.

SECTION 2.11: MONITORING AND EVALUATING MOBILE CHILD PROTECTION PROGRAMMES

Monitoring and evaluation of mobile programs must adhere to existing guidelines and good practices when it comes collecting and storing data, confidentiality, and ensuring children's safe and ethical participation. It is important that monitoring systems and plans developed for mobile programs are adapted to the nature of a mobile approach. This chapter highlights key considerations must be taken when monitoring and evaluating mobile programs.

Key considerations for monitoring mobile programs

- **Consider who will be responsible for monitoring in a mobile program team.** M&E Officers who are not part of the mobile team may be invited to engage in monitoring activities. As they sit apart from the implementation teams, such M&E officers may reduce bias in data collection. In certain programs, however, this may not be possible in terms of acceptability of the community. If members of mobile teams are expected to collect data during their site visits, consider how this will affect their ability to undertake their normal responsibilities.
- **Choose data collection activities that can be completed within the time constraint.** In some mobile programs, teams may have limited interaction time with certain beneficiary groups due to the remote site or due to the specific vulnerability of certain groups. It is important to ensure that planned data collection activities consider the amount of time mobile staff have. Rushing data collection activities may result in poor quality data and in leaving participants feeling frustrated.
- **Community participation in monitoring:** Consider how community volunteers and other actors can safely and ethically be involved in monitoring and data collection. Mobile teams should pay attention to issues of bias, confidentiality, and inclusion if community members undertake data collection activities, and put in place necessary measures to minimize such issues.
- **Include quantitative and qualitative data:** While collecting quantitative data may be easier in mobile programs, it is important to make room for qualitative data collection whenever possible. This can be done by including qualitative data collection during activities, such as CFS or as part of feedback mechanisms.
- **Adapt indicators and targets appropriately:** Mobile program staff should review indicators to make sure they are suitable and feasible in mobile programs. For example, indicators that ask for changes in knowledge three months after an awareness raising session may no longer be appropriate if populations are highly mobile. Similarly, mobile program staff should ensure targets are feasible given the targeted population. If working in very remote and low-density communities, the number of targeted children may need to be reduced compared to a 'static' program implemented in a denser community.

Data collection and analysis - Example from Plan Colombia



In order to analyse information captured from children and families attending mobile services, the mobile programme used a database managed by the partner, Colombian Red Cross, with a form jointly developed and reviewed by Plan International. Mobile teams used tablets, some donated by Samsung and others procured by Plan International, to collect and process the individual data in a confidential manner to reduce human error compared to paper forms. This allowed the team to gather systematic and reliable data that helped analysis and decision making.

Key considerations for evaluating mobile programs

Evaluating the outcomes and impact of a mobile program can be challenging, particularly when the populations are on the move or contact with affected populations is not regular or consistent. Even when populations are stable, it may be difficult for evaluation teams to access certain communities. Staff working on mobile programs should consider the following when considering an evaluation

- **Determine if an evaluation is appropriate:** In certain situations, an evaluation may not be feasible or a good use of resources. Consider that mobile approaches are inherently designed to access remote and hard-to-reach communities. Short programs or fluid programs which change frequently to meet the changing needs of a community may not be well-suited for an evaluation; it may not be possible to observe any outcome-level change in such programs. In such situations, an evaluation may not yield meaningful results.
- **Consider whether an evaluation team will have sufficient access to communities:** In some cases, an external evaluation team may not be able to safely reach targeted communities due to security, weather conditions, or acceptance by the community. Note that if an evaluation team only has access to certain types of communities (easier to reach, closer access to transportation networks) or populations (host communities), this will inevitably skew the results of your evaluation. Note that in some contexts, it may only be suitable for national or local evaluation teams to engage in data collections or it may be challenging to recruit qualified evaluation teams who are experienced in child protection.
- **Are there other forms of learning or accountability that are more useful?** Instead of spending resources on an evaluation, consider other activities such as an after-action review or learning and reflection workshop (Link to Plan AAR tool). These activities can gather together mobile program staff, volunteers, and community representatives to discuss successes, challenges, and lessons learned of the program. Inputs from the community and children may need to be captured in a different way, such as during mobile program activities themselves. Remember to close the accountability loop and share information and recommendations back with the community.
- **Documenting mobile approaches.** Recall that detailed documentation of mobile approaches can also contribute to learning and knowledge exchange, as well as the development of future guidance and resources for other colleagues. This can include documentation the process of deciding on using a mobile approach, the criteria employed, and the modifications made to the program design and implementation – all of which can yield valuable learning that can help improve the quality of mobile programs. Some mobile child protection programming examples have already been documented. If you are interested in getting support for documentation of a case study from your context, please contact Global Hub CPiE team
- **Budget appropriately.** If you choose to undertake an evaluation, remember to budget appropriately for mobile programs. This may require a higher allocation to travel and vehicle rental, having a larger team to be able to spread out to different communities, and hiring translators who can speak local languages. These considerations also have an impact on the number of days an evaluation team will need to conduct an evaluation. If you choose to invest in other learning and accountability initiatives, remember that these have a budget allocation as well. It is recommended to identify additional staff or consultants to support to facilitate a workshop or assist in documentation and report writing.

Key considerations for complaints and feedback mechanisms

Mobile programming must ensure that communities can provide feedback, raise concerns, make complaints. Given that mobile programs may have less frequent contact and physical presence within a community, it is especially important to consider how age and gender sensitive complaints and feedback mechanisms can be established

- **Ensure ongoing collection of feedback that feeds into program implementation.** This allowed programs to be responsive and adaptive to changing needs and community feedback. This also allows mobile teams to identify emerging or new risks and put in place mitigation measures as soon as possible. In programs where mobile programs rotate on a weekly basis and one working day is dedicated to office work and coordination, mobile teams are provided with weekly opportunities to review complaints and feedback.
- **Embed collection of feedback and complaints into the program.** Child-friendly accountability and feedback needs to be built into program, alongside activities and services, rather than being seen as separate or stand alone. For example, one of the activities of the Team Leader could be to regularly consult with the community leaders or to facilitate a discussion with beneficiaries, including children, of a particular service to check if they have any concerns or feedback. Depending on the context, someone neutral and external, for example technical staff could visit periodically for consultation with communities.

- **Be realistic about what mechanisms will work in the specific context.** It is not realistic to expect communities to use complaint boxes if literacy is low or to use mobile phones if reception is poor. Such mechanisms give a false sense of accountability and do not meaningfully solicit feedback.
- **Adapt feedback and complaints mechanisms to the nature of the program mobile.** Considering the frequency of visits to any community and the limited amount of time spent by staff in each site, mobile programs should consider embedding opportunities to solicit feedback at the end of activities through debrief exercises, developing a simple set of questions, or setting up a feedback box at the 'exit'. If your mobile program is only able to provide irregular or one-off visits to a community, consider how the mobile program can follow-up on collected feedback and complaints. Consultations with communities can help identify potential strategies, such as working with local partners or other community-based actors. Approaches to gathering feedback and complaints can be broad and creative.
- Awareness raising on feedback mechanisms and Plan's accountability. Whatever mechanisms are agreed-to, these need to be agreed and communicated to the community members so that people understand both how to raise concerns or give feedback, and also what response they can expect.

Establish feedback mechanisms - Example from Plan CAR



Establishing feedback mechanisms with communities was one of the first things the mobile project established. Each community decided which mechanism to put in place in consultation with the M&E Officer. Given the high illiteracy rate and lack of mobile network, the most popular feedback mechanism was to designate someone reliable and neutral to be the focal point to receive feedback and communication and channel this to the mobile team.

Additional resources on monitoring, evaluation, and feedback mechanisms:

Plan International [CPIE Programme Impact, Accountability and Learning Toolkit](#).

Plan International (2018). [Child-Friendly Feedback Mechanisms: Guide and Toolkit](#).

SECTION 2.12: EXIT STRATEGY

From the very beginning of design and planning, mobile child protection programmes must consider how mobile interventions will transition at the end of the program. Depending on the context, mobile interventions are used for a variety of purposes such as providing basic services to remote communities due to access constraints (poor infrastructure or weather); accessing remote locations near a base office due to inability to set up base in those locations; responding to needs of highly mobile displaced children and families; to respond to urgent needs with few or no actors and limited resources to set up stable and static response and; for rapid response missions to insecure locations where access is granted occasionally. Some of these purposes such as remoteness due to infrastructure can extend beyond the emergency context into the early recovery period or even into longer-term development.

An exit strategy or transition plan should be developed in line with the broader Country Strategy or response sustainability strategy. Each transition plan will look different. Make sure that the affected communities, partners and authorities are consulted on and aware from the beginning that a transition period or handover will eventually take place, with information provided as soon as possible about when and how the transition will take place.


The following should be considered when drafting a transition plan are critical to determine which transition options of mobile interventions are appropriate.

- Context analysis including security situation
- Ongoing humanitarian needs
- Critical services available
- Frequency of mobile interventions
- Funding availability
- Internal and external capacity and support

This process is also critical to ensure success for both short-term results and long-term impact. In the plan consider transition options such as:

- Reducing the size or/and frequency of mobile interventions
- Turning mobile interventions into static interventions run by Plan International, local partner or community-supported initiatives.
- Integrating aspects of the CPiE mobile program interventions into Child Protection Development program.
- Ending mobile interventions at a given point in time and distributing resources such as recreational, furniture, stationary or kits locally.
- Collaborating with local partners and governments by integrating certain CP activities into existing or new services.
- Other sustainable and context specific relevant options.

Engaging staff and communities to phase out programming - Example from Plan CAR



Plan International communicated the cycle of the project (18 months) to the communities from the project design phase and informed them that the phase-out or transition will take place when there will no longer be funding available, or when the community's access to static services improve (if this is before funding finishes). At the Plan CAR Country Office, there have been internal discussions at the management level on how and when the mobile project should phase out, and a general consensus exists regarding building community capacities, especially those with community volunteers, to ensure minimum continuity and sustainability.



*Children playing in Niger
Credit: Plan International*

ANNEXES

Annex 1. What We Need To Know (WWNK)

The following table provides guidance on what information Country Teams need to gather during a situational analysis, desk review, and needs assessment which can help determine if a mobile child protection programme is relevant.

Level	What We Need to Know (WWNK)
Children and Adolescents	<ul style="list-style-type: none"> • Basic demographic and population data: sex, age, disability, education, marital status, accompaniment, family status, work data, and other relevant data • Determine whether children and adolescents are planning to move to different location, are on route, or move on a seasonal basis (pastoral communities, seasonal labour) • Identification of different groups of marginalized and excluded children and adolescents • Children and adolescents' access to basic needs including children and adolescents from excluded and marginalized groups • Barriers to children and adolescents, including marginalized groups, accessing basic needs • Understanding where children and adolescents turn to for help and support • Needs and access to information and services related to child protection, including sexual and gender-based violence • Barriers related to children and adolescents, including excluded and marginalized groups, accessing existing information and child protection services • Mobility within a community, decision-making, and participating of children and adolescents, including marginalized groups
Family	<ul style="list-style-type: none"> • Identify vulnerable families. This may include female-headed households, young parents, elderly heads of households, or parents/caregivers living with disabilities. • Families' level of access to basic needs and supports • Families' barriers to accessing basic needs and supports
Community	<ul style="list-style-type: none"> • Determine population movements • Understand the calendar of key events, including climate-related events or natural disasters, and how these affect the ability of children and adolescents to access CP services • Identify the geographic features of the community and how it affects the ability of children and adolescents to access CP services • Availability and condition of existing infrastructure in and surrounding the community <ul style="list-style-type: none"> • Transportation infrastructure like roads, bridges • Community structures, such as schools, health clinics, or community centers which could be used to implement activities or store materials • Presence and reach of community level CP services, networks, and groups, including formal and informal actors • Possibility of partnering with existing community-based structures, such as youth organizations, women's organizations and faith-based groups • Social norms, gender norms, and cultural practices that lead to the marginalization and exclusion of certain groups of children and adolescents

	<ul style="list-style-type: none"> • Social norms, gender norms, cultural practices that promote or hinder children and adolescents' access to CP services and information • Level of participation of children and adolescents, including marginalized groups, in community structures and barriers to participation
Service Providers and Enabling Environment	<ul style="list-style-type: none"> • Availability, capacity, and quality of humanitarian services • Availability and accessibility of information, communication and technical services, and banking serv • Presence and capacity of other CP actors and the existing CP services offered • Possibility of coordinating and partnering with existing service providers • Risks to conflict, natural disasters, etc. that cause crisis, conflict, displacement etc. • Perceptions of national and international actors • Perceptions of government and nonstate actors, including armed groups if present • Security situation and how it affects the ability of children and adolescents to access CP services and ability of Plan to provide CP services

Barriers should be specified and may include: physical barriers such as distance, geography, climate, and infrastructure; security; social and administrative, including discriminatory beliefs or policies; gaps in services; children and adolescents being on the move; or infectious disease outbreaks.

Annex 2. Dos and Don'ts for Needs Assessments

In order for needs assessments to provide sufficient information and allow Country Teams to make a decision about using a mobile approach, Country Teams should consider the following dos and don'ts.

Dos	<ul style="list-style-type: none">• Do conduct a desk review before undertaking primary data collection. Reading previous CP assessments and assessments from other sectors can also provide useful information about the barriers populations face in accessing services and can offer an overview of risk factors (i.e, school dropout, lack of family livelihoods etc) that may increase the likelihood of CP concerns .• Do engage communities ahead of the needs assessment to explain the objective, identify participants and meeting location, and introduce Plan International. Remember that a needs assessment may be the first time Plan International is engaging with that community.• Do include children and adolescents in the needs assessment and use age-appropriate and participatory methodologies. Note this is not advisable in the acute phase on an emergency.• Do use targeting sampling to ensure that excluded and marginalized groups, such as children living with disabilities, adolescent girls, stateless children, etc. are also included in the assessment. You may need to adapt data collection activities to reach these groups of children and adolescents and ensure do no harm.• Do consider the risks that a needs assessment and data collection activities may pose for children, adolescents, and young people. Ensure that you have proper risk mitigation strategies in place.• Do include remote, hard-to-reach, and mobile populations or communities in your sampling frame. This may also include communities which are subject to frequent attacks. By including such communities, your assessment can better understand the needs of children and adolescents in these communities.
Don'ts	<ul style="list-style-type: none">• Don't raise false expectations with communities that assistance will follow the assessment. This includes not raising false expectations on the approach that assistance may take. Be clear about the objectives of the assessment.• Don't only include the easiest-to-reach communities as part of your assessment. This is unlikely to yield sufficient information about the barriers children and adolescents face in accessing CP services.• Don't decrease the number of Key Informant Interviews. Even for very small communities, a minimum of three KIIs is still recommended.

Annex 3: Competencies for Mobile CP Programme Teams

The following table provides a list of key competencies required in mobile CP teams. For each competency, behavioural indicators are listed. Behavioural indicators provide examples of how staff can demonstrate they possess that specific competency.

Competency	Behavioural Indicators
Leadership	<ul style="list-style-type: none"> Delegates decisionmaking power to staff in their respective roles to foster effective and timely program management Recognizes the contributions of other team members and volunteers through formal and informal reward processes
Observation	<ul style="list-style-type: none"> Identifies all the physical structures and spaces in the community and how different people interact with them documenting the daily activities (i.e. spaces that protect children and those who pose risks) Analyses social interactions in public spaces (i.e. how do boys and girls of different ages interact with each other and with men and women?) Identifies cultural norms and practices, gender and power dynamics existing in a community
Problem solving	<ul style="list-style-type: none"> Deals with problems as they occur Examines difficult issues from different perspectives Gather relevant information before making decisions, check assumptions against facts
Managing pressure	<ul style="list-style-type: none"> Handles crises appropriately, taking correct action and providing direction and support to team members Plans, prioritizes, and performs tasks under pressure with competence, integrity, responsibility, and fairness
Adapting to changing situations	<ul style="list-style-type: none"> Copes with changing situations by remaining constructive and positive Stays focused on objectives as the situation evolves Present or propose alternative ways of doing things to others Shows initiative
Working respectfully with others	<ul style="list-style-type: none"> Creates an open, transparent, respectful and positive work environment where people feel safe to constructively share their opinions
Communication	<ul style="list-style-type: none"> Express oneself verbally in a clear and coherent manner; listen actively to others, reflecting back what is said; tailor tone, style and format to match the audience, particularly cross -culturally; overcome barriers due to language. Build trust: create and maintain an environment in which others can talk and act without fear of repercussion. <p>Communication with children:</p> <ul style="list-style-type: none"> Treats all children with respect regardless of race, colour, gender, sexual orientation, language, religion, disability or other status Informs children about their right to confidentiality, participation and establishes safe, ethical and confidential communication channels Communicates with children and families with sensitivity, respect, clarify, transparency and inclusion and with respect to cultural, political, religious, and social norms and traditions

Safety and security	<ul style="list-style-type: none"> Minimizes risk by observing safety measures, using critical judgement, and including community members in programming
Collaboration and partnerships	<ul style="list-style-type: none"> Uses active listening to encourage team collaboration and positively influences others to deliverable sustainable results Includes affected populations, stakeholders and partners in planning, implementing, evaluating, and documenting program
Coaching and supervision	<ul style="list-style-type: none"> Seeks and gives constructive feedback from and to all team members, volunteers and affected populations to improve CP Programming Embedding coaching and capacity building of partners, and volunteers into daily work
Self-care	<ul style="list-style-type: none"> Promotes staff wellbeing by supporting a healthy work environment, sufficient rest and recuperation and access to MHPSS Listens to and express feelings and emotions in an appropriate way Recognizes signs of own and team members' stress and seeks or offers support to strengthen physical and mental well-being and resilience. Promotes and models personal well-being and self-care among the team, including prioritizing workloads

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