

Child Protection (CP) Jordan January – March **2021**



348.252 refugee children. representing 46.2% of the total refugee population



29.620 children at risk. representing 8.5% of all refugee



2,506 unaccompanied or separated children, representing 0.72% of All refugee children



578 birth certificates issued

PREVENTION and RESPONSE AL



Children who received specialized CP case management and multi-sectoral services

- 330 Girls
- **302 Boys**



Children and parents who participated in structured, sustained CP activities

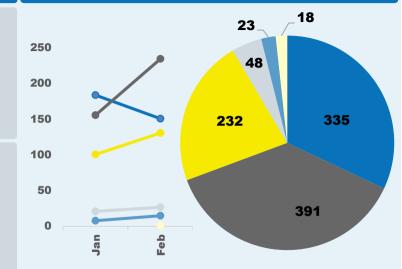
- 315 Girls
- **247 Boys**
- 478 Women



Recipients of Capacity Building Activities on CP prevention & response measures in line with international standards

- 221 Female
- 82 Male

CHILDREN PRIMARY CONCERNS CPIMS



- Violence, abuse and neglect
- Child labour
- Emotional distress
- **Child spouse or parent**
- unaccompanied or separated children
- **Others**

COMMUNICATIONS UNHCR. Amman & South

249 (167 SYR, 82 Non-SYR) calls received. Breakdown of calls by theme:

- 4% are CP
- 9% are SGBV/LGBTI
- 87% are non-CP/SGBV 29% are related to Cash/Basic needs, 29% are related to registration, 10% are related to Legal and 19% are related to other units

50 (29 SYR, 21 Non-SYR) Emails received from PoCs requesting follow up, assistance and other interventions were processed during the reporting period

322 (259 SYR, 63 Non-SYR) children referred to CP unit for services and follow up: 53 referrals from partners, 217 from UNHCR other units and 52 self referral

250 (200 SYR, 50 Non-SYR) children referred from CP unit for services and follow up: 74 referrals made to partners, and 176 to UNHCR other units

CHILD ENGAGEMENT ACTIVITY

17 Children attending My Little Home (Selfpreservation-skills simulation) 8 SYR, 9 Non-SYR

^{*} Given that the AI data is still under preparation for Q1 2021, the numbers reported herewith are those of UNHCR and UNHCR IPs covering January and February only. The AI information will be reflected in the Mid-Year Dashboard.















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KEY UNHCR ACTIVITIES



Enhancing leadership of child protection coordination mechanism

- Provide donor and humanitarian partner briefings and advocacy to raise child protection concerns and needs.
- Represent UNHCR and the CP sector in key governmental and non-governmental child protection fora.
- Mapping of child protection partners, activities, capacity building opportunities and gaps within the sector;
- Dissemination of information on child protection related activities, analysis and procedures.
- Establish and maintain child protection referral pathways to improve the quality of child protection response.



Strengthening national child protection systems to reinforce best interest procedures

- Work towards enhancing the integration of best interests procedures in national CP systems through targeted advocacy and capacity building to ensure alignment with UNCRC and enhanced protection space.
- Strengthen the role of relevant ministries within the CP response and coordination structure (e.g. MOSD, FPD and JPD key actors in the CP SWG, BID panel, etc.):
- Facilitate capacity building and advocacy meetings and conferences on CP response.
- Support governmental institutions with introducing new technologies that ensure a survivor-centered approach and the best interest of the child when providing services.
- coordinate with key governmental and non-governmental organizations, to harmonize national guidelines, SOPs and referral pathways and ensure alignment with the principle of Best Interests of the child;
- Ensure the best interests principles are integrated in all activities and services affecting children, including national legislation, humanitarian assistance and social service sector.



Prevention and response to child protection risks

- Provide comprehensive, multi-facetted child protection case management services, including psychosocial support, cash assistance, legal assistance/representation, and durable solutions.
- Conduct countrywide awareness campaigns through key governmental and non-governmental partners.
- Strengthen community-based CP mechanisms to foster prevention of CP risks.
- Liaise and coordinate with relevant actors to strengthen community-based CP programs (e.g., community-based alternative care program, peer support groups, para-case workers as a standard within Project Partnership Agreements, etc.).



Analysis and research

- Draft comprehensive yearly analysis of CP concerns in collaboration with all CPIMS TF members to ensure information on CP risks are recognized by key stakeholders, including governmental counterparts, partners and donors.













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