



CPMS Video Series - Facilitator's Notes

Standard 7 – Dangers and Injuries

Background: This document was created to promote the use of the Standard 7 video. It is intended to prompt discussion among people who have watched it and want to learn more about the topic, as well as to reflect collectively on how the standard is or could be implemented in their context. It could be used as part of a coordination meeting, briefing session, orientation or training workshop.

Discussion Points:

Message 1: A humanitarian crisis will worsen pre-existing physical dangers and create new ones.

- 1.1 What were pre-existing hazards for children? How has the physical environment changed for boys and girls of different ages, abilities and care arrangements?
- 1.2 What measures are in place at the a) organizational and b) community levels to address these hazards and prevent new injuries?

Things to stress

- **Hazards** are potentially damaging events that may cause loss of life, injury or other health impacts, property and environmental damage, loss of livelihoods and services, and social and economic disruption.
- **Danger** is the possibility of suffering or injury.
- **Risk** refers to the likelihood that a hazard will happen, its magnitude and its consequences. It combines the probability of the hazard with individual vulnerabilities.
- **Vulnerability** is the physical, social, economic and environmental factors that increase the susceptibility of a community or individual to hazards that put them at risk as a result of loss, damage, suffering and death.
- Hazards that cause injury can be directly related to the nature of the emergency (e.g. drowning during floods, crush injuries from collapsing buildings during earthquakes or aerial bombings).
- The impact of injuries can go beyond the physical, and worsen the socio-economic and emotional wellbeing of children and their families.
- Emergencies create conditions which place children at an increased risk of pre-existing and unique hazards; these may be:
 - in the aftermath of an emergency (such as children playing amongst debris, broken glass or pools of water, or roads busy with increased traffic etc.);
 - in the long-term where displacement continues and conditions deteriorate compromising safety (inadequate shelter vulnerable to fire or high winds etc.);
 - or as people move about or return to their properties, Explosive Remnants of War (ERW) may have become a significant and deadly hazard.

- Disaster Risk Reduction and Emergency Preparedness can help identify and address potential hazards and physical dangers to reduce children's exposure to injury causing events.
- It is important to know the biggest threats to children's physical safety before the emergency.
- Some dangers and injuries are terrible violations of children's rights, particularly in conflict; however, the large majority of children will be injured by dangers found *in their everyday lives* as they cope with the impact of an emergency.
- Whether injured or disabled in or before the emergency, such children will be at even greater risk of further injuries and protection concerns.
- Where children face other protection issues – such as separation, child labour, being associated with fighting forces and armed groups - they may face increased exposure to physical threats in their environment and lack adult supervision to protect themselves from injury.

Message 2: Collect data on the extent and causes of both dangers and injuries, collaborating with health, education, camp management, mine action and other sectors to ensure robust analysis.

2.1 What relevant data sources already exist?

2.2 How can we improve data collection and collaborate with other sectors on a robust analysis of the current risks and responses? Concretely, what would that robust analysis entail?

Things to stress

- It is crucial to have information on which physical dangers and risks exist in a particular context, how they occur and have affected children, and which groups of children are most affected by a particular risk.
- Dangers and injuries affect children differently. Disaggregate data by age (0-1; 1-4; 5-14; 14-18) and gender.
- Data from different sources will need to be collated and compared to identify the patterns and extent of dangers that were pre-existing and have arisen since. Data is vital to ensure appropriate programming interventions, advocacy and raising awareness about the severity of the issue.
- Dangers and injuries should always be included in Child Protection Rapid Assessments and monitoring processes. They should also be mainstreamed into other data collection processes where possible (case management systems, health information systems, displacement tracking matrix etc.)

Message 3: Addressing dangers and injuries needs broad commitment from a number of actors

3.1 What resources are available in the community for prevention and response? How do we involve children of different ages? In our interactions with community members, are we stressing their strengths and our desire for effective partnerships?

3.2 Who are our allies in health, camp management, education, mine action (if relevant), etc.? How do we maximize our joint efforts?

3.3 Are humanitarian actors responsible for creating new dangers and injuries? What safety measures are being taken to reduce these?

Things to stress

- Children, parents and communities are best placed to identify risks in children's environments; they are also well placed to address them and can often be integral to low cost and sustainable solutions.

- Child Protection programmes present a lot of opportunity to prevent and respond to dangers and injuries through their existing community based/psychosocial efforts (PSS).
- Hazards that have the greatest potential for death and suffering should be prioritized; severity - as well as extent - should be considered.
- Although child protection might identify issues through their programming and assessment, it is essential to have the support of others during prevention and response. E.g. Health actors form an essential part of identification, referral and prevention services; camp management will be responsible for overall safety in IDP and refugee sites; water and sanitation will be responsible for safe latrines/sanitation facilities, or safety around large bodies of water; education actors are responsible for ensuring the physical safety of schools and should also address safety on the way to schools; and GBV and economic strengthening actors may be involved where risk taking behaviour is driven by economic need. Where possible integrate a response to physical dangers into broad humanitarian programming and activities including awareness raising. Consider how your humanitarian programmes might impact children's physical environment and safety.
- Proven strategies for reducing deaths and injuries exist in non-emergency contexts. Humanitarian actors should draw from these and adapt them to existing contexts. Call upon local actors who have experience in injury prevention.
- Ensure interventions to improve safety undergo an assessment of the risks they in turn present to children (e.g. new paths, fuel efficient stoves, supervised walks to school, swimming lessons, safety messaging, and decision making is based on sound, collaborative judgment of the risks etc.)
- Ensure a holistic response to children who face dangers and/or have been injured; it should address the invisible impacts that affect psychosocial well-being, providing PSS alongside healthcare plus any adaptations to education, livelihoods, shelter, etc,

Overall:

- Do we need to expand our teams to ensure adequate staffing for all phases of programming? If yes, how do we do that?
- How do we ensure our response is sustainable and feeds into longer term CP programming?
- Have we considered if and how the 10 CPiE principles are being upheld through our work?
- Are we linking with efforts to implement other relevant standards: child-friendly spaces, case management, MHPSS, community-based child protection, health, camp management, etc.
- What training opportunities do we have and do we need to create?
- Have we mapped our human, financial and community resources?

Key Resources (created after the publication of the CPMS):

- Dangers and Injuries scoping report & summary. CPWG (2016)
- Training materials: relevant modules in CPWG's Face-to-Face CPiE package (2014) and Action for the Rights of the Child (revised 2013)