



Photos: 1. Mural of a safe space (CEBAF Sucumbios, Ecuador), 2. RFL Post (La Hormiga, Colombia).

Child Protection Rapid Assessment: **COLOMBIA AND ECUADOR** Population Movement Crisis

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KEY POINTS FROM THE MISSION

- 1.** Colombia Red Cross and Ecuador Red Cross are taking actions to protect children in very complex environments.
- 2.** While action is being taken by National Societies, governments and humanitarian agencies, children's basic needs are still not being met, their voices are not being heard, and safeguards to protect them from violence and access help are lacking.
- 3.** Practical, low-cost actions can be taken to improve the child protection response for Colombia Red Cross and Ecuador Red Cross. Building partnerships with local NGOs and humanitarian agencies will be an advantage.

PURPOSE OF THE FIELD MISSION

To identify the protection needs of the child population in the intervention zones of the International Federation of the Red Cross within the framework of the appeals of the People's Movement in Colombia and Ecuador, with emphasis on the border regions, which will contribute to reinforcing the protection strategy of the operation.

The expected results are:

- Assessment of child protection needs of migratory flows in Colombia and Ecuador in the framework of emergency operations in Ecuador and Colombia.
- Observations, recommendations and a proposed strategy to strengthen child protection within the framework of emergency operations in Ecuador and Colombia.

BACKGROUND

Field reports indicate that there has been an increase in women and children on the move, with a marked increase in pregnant women, mothers with babies and small children, as well as unaccompanied or separated minors, while pendular migration continues in border areas, but now under new conditions of restricted border crossings and frequent passage of children and adolescents for schooling.

Those dynamics require constant adaptation to the environment and circumstances at the country level. For many National Societies, responding to this situation involves working in places with limited capacities (e.g. in border areas and along migration routes) compared to branches located in large cities with greater capacities and services.

Among the various needs on the ground, those relating to **protection, gender and inclusion** stand out, where the conditions of insecurity, the lack of community ties in the host countries, the fear of repercussions for being irregular migrants and the lack of official government protection, are negatively affecting the conditions of the migrant population. In addition, **children and adolescents (particularly unaccompanied girls, women and young people)** are at risk of sexual and gender-based violence, unsafe child labour, labour exploitation, loss of educational opportunities, failure to meet their age-specific nutritional needs and psychological problems arising from the experience of migrants.

IFRC Regional Appeal:

Output 5.2: Programmes and operations prevent and respond to sexual and gender-based violence and other forms of violence, especially against children

Target: # of child-friendly spaces operated at assistance points or mobile assistance units that integrate child protection standards

Activities:

- Support sectorial teams on the inclusion of measures to address vulnerabilities specific to child protection (Child Protection guidelines and on issues of SGBV)
- Provision of safe-spaces for children in assistance points for migrants
- Materials for safe-spaces for children

Output 6.1: Assistance and protection services are provided and promoted to migrants and their families through collaboration with local and national authorities, as well as in collaboration with other relevant organizations.

Target: # of national referral systems established
of cases referred to other stakeholders

Actividades:

- Referral systems, including materials, for appropriate mechanisms (asylum system, SGBV and child protection networks and human trafficking support centres)

METHODOLOGY

This rapid assessment was mostly qualitative and used a mixed approach of focus group discussions, key informant interviews, participant observation in settlements such as bus terminals, shelters, water points and health posts and reviews of relevant documents (internal and external to the Red Cross Movement) and literature available of both countries.

For the first visits to Colombia and Ecuador in June, it was possible to conduct one focus group discussion with children on the move; for this reason, in July, a follow-up visit took place to Cucuta where three focus group discussions with boys and girls were held at the Montebello post of the Colombian Red Cross.

This document have also included insights from the participants of three trainings (one with the Ecuadorian Red Cross and two with the Colombian Red Cross) where 63 persons were trained (24 men and 39 women).

In addition to the key informant interviews, the focus group discussions with boys and girls and the trainings with the National Societies, an extensive desk review has been conducted including national laws, technical documents from humanitarian organizations and situational reports from the operational portal for refugee situations and the coordination platform for refugees and migrants from Venezuelans, among other country based sources.

KEY THEMES

The following are the key themes identified through the assessment. They are not listed in any particular order.

The findings are broken into the following categories: capacity, protection concerns, vulnerable children, gender and diversity, and partnerships.

A) Capacity

Finding 01: Government capacity

A clear message from humanitarian agencies and migrants in both Colombia and Ecuador was that local governments lack the capacity to support child migrants. While each country has in place some laws or protocols to protect child migrants these are not being implemented because of deficits in technical capacity, human resources, financial resources, and/or politics that are not favourable to migrants, this has affected for example the effective implementation of interagency referrals¹.

UNICEF (together with Save the Children in Colombia) is working with each government to help build capacity on child protection but it remains a slow process. The ability to speed up the process is also weighed down by the lack of funding among most humanitarian agencies including UNICEF to address the migration crisis.

The lack of government capacity is further hindered by complex local governance systems (for example see finding 6). These require migrants to gather approvals from multiple government agencies, to fill multiple forms and also to pay fees for some basic processes like registration and birth certificates.

Finding 02: National Society capacity

The Colombian Red Cross, (from now on CRC) has had detailed experience working on child protection issues for at least one decade. This includes its PANICA project for children of the streets and other vulnerable children, violence prevention initiatives oriented to children and adolescents, working with ICRC to rehabilitate and support children affected by armed conflict, psychosocial support to children, and RFL services. CRC has also worked, at the Puerto Asis municipal unit, with partner agencies such as Mercy Corps with a specialized manual including humanitarian education and protection matters through a program named “ With peace, We learn more” (Con paz, aprendemos más). This National Society has also had a project “Ten Steps to Creating Safe Environments” where its leadership led a process to develop internal protection systems and train personnel on protection issues related to physical, sexual and psychological violence. The CRC has a protection focal position in its migration team, a protection leader for other themes related with missing people, anti-personnel mines and other themes and a gender officer that leads currently the strengthening of capacities on gender and diversity.

¹ At the National Border Center (CENAF) in Cucuta, was found an interagency referral mechanism named “*Pathway for the restoration of rights of migrant boys, girls and adolescents unaccompanied, separated or refugees*”. This pathway gives the total responsibility to the Colombian Family Welfare Institute (ICBF) to guide the verification of the child and the activation of the procedure for restoration of rights. However, it was stated by key partners, this referral mechanism does not work cohesively and the zonal centers of ICBF do not have the capacity for this restoration of rights.

With the exception of RFL for children and the provision of psychosocial support for boys and girls, for the Ecuadorian Red Cross (from now on ERC) working on child protection is a new area. In its 2017 earthquake response it began a partnership with UNICEF to deliver play materials and it began a safe space. In the migration crisis, it has scaled up its ludic safe spaces (see finding 4) although common tools, standards, and consistent training are still to be developed for the ludic safe spaces. ERC leadership would like to see its capacity strengthened on child protection and protection more broadly; this includes ensuring its personnel is able to meet minimum standards for referrals of child protection concerns and effective programming like on safe spaces. The ERC has appointed a focal point within the Youth area on July 2019, and although this person still is not an expert in protection is seeking proactively for support to incorporate protection, gender and inclusion into trainings and projects. This area has also the responsibility of gender and diversity mainstreaming.

Both National Societies have established programmatic approaches to respond to the Population Movement. CRC has the *“Response Plan: National Strategy of Attention to the migrant population: response to the Venezuelan mixed flux”* and recognizes the differential needs of children, the protection risks and State’s protection as an action line within their four levels of response. ERC has the *“Contingency Plan for migrant population and displaced persons”* and recognizes boys, girls and adolescents as priority groups of attention; although there is no mention of protection as an action line, the ERC into their operational strategy has PSS, ludic friendly spaces, RFL and a communicational strategy focused on the promotion of no discrimination and xenophobia.

Finding 03: Internal National Society child protection safeguards

CRC and ERC do not yet have in place National Society child protection safeguards such as a child protection policy, screening protocols for personnel who interact with children (such as a PSEA policy or a code of conduct with these orientations), and standardized briefings.

The lack of safeguarding places both National Societies puts them at risk. Specifically the risk of consequences if any personnel were to become violent against a child, sexually exploit or abuse a child, or fail to meet the best interest of the child in decision-making and actions. This has a profoundly harmful impact on children who are hurt and it can lead to legal, financial, image, and ethical consequences for the National Societies.

Having in place child safeguarding systems is essential for all humanitarian organizations and something that is essential for all National Societies to have.

Protection concerns

Finding 04: Mental Health and Psychosocial Support including Safe Spaces

The emotional wellbeing of children who have fled Venezuela, sometimes alone, is of great concern.² In both countries, from the NS staff, has been reported an increase of acute stress, suicidal ideas, behavioral problems (aggressiveness, isolation, fears and phobias), symptoms of child depression and anxiety and overall a psychosocial impact that affect all their values, coping mechanisms and interpersonal abilities.

² Save the Children fact sheet: <https://www.savethechildren.org/us/what-we-do/emergency-response/venezuela-crisis-facts>.

As a response for this, in Colombia for example, the Bogota and Cundinamarca Branch has developed with PAHO a toolbox with technical guidance for PSS³, and a psychologist (alongside with a doctor, nurse, and an auxiliary nurse) is placed at the different healthcare units; and in Ecuador the PSS teams in the field are constantly trained and briefed on PFA and PSS activities for children.

Children have been uprooted from their homes due to poverty, threats, or violence. They have then had to travel long distances with only some of their family (for instance, many fathers depart Venezuela first to seek work and opportunities) or alone. Their education, friendships and day-to-stability and predictability are directly impacted. Also the key informants reported an increasing of stress from the parents having a direct effect on their children, with manifestations of verbal abuse and psychological maltreatment.

In order to improve protection and mental health and psychosocial well-being of children, the CRC manages 2 dedicated safe spaces for children and is developing a Protocol for children and adolescents in Friendly Spaces (ERC is also in process of developing their own). In Putumayo there was a request from the CRC and local agencies for a dedicated psychosocial officer to help children in the communities. Also, UNICEF runs 29 child friendly spaces in Colombia some focused on early childhood and others on adolescents. From both CRC and UNICEF, the perception is these spaces need a stronger approach on humanitarian education and an integrated programmatic approach with other humanitarian sectors such as humanitarian education.

The ERC implements 14 safe spaces for children in 11 provinces across the country. When needed it also deploys mobile safe spaces, mostly with an approach on health including PSS. Through these safe spaces it has reached more than 25,432 children; Psychosocial support has also been provided for 19,767 persons and 1,500 ludic kits have been delivered for children.⁴

The safe spaces in both countries use a mix of activities that target children while parents are occupied with other activities (in most of their safe spaces ERC requires the presence of the parent). For instance, volunteers at the safe spaces conduct play activities, showcase protection videos (most of them focused on prevent sexual violence and where to get help), provide information on safe migration, deliver first aid, support Restoring Family Links, and are able to make some level of referrals to local agencies based on children's needs. Neither National Society has specific standards, structured activities, or a protocol on training on safe spaces for children.

In Ecuador, the ICRC supported the rehabilitation of the Transit Centre in Tulcán that will provide a new permanent infrastructure to support child protection, protection for women and for other migrants in situations of vulnerability.⁵

Finding 05: Sexual and Gender-Based Violence

The IFRC Regional Appeal notes “children and adolescents (particularly girls, women and unaccompanied youth) are at risk of sexual and gender-based violence (SGBV). There is a lack of an institutional

³ Although the National Societies have been strongly encouraged to use IFRC materials from the IFRC Global Reference Centre on Psychosocial Support (<https://pscentre.org/>), it has been a difficulty that most of the materials, at least the ones oriented to the migrant populations and the newest materials, are not translated yet into Spanish.

⁴ <http://www.cruzroja.org.ec/index.php/boletines-2019/enero/1465-migracion>

⁵ IFRC appeal

mechanism on protection especially for survivors of SGBV or other forms of violence. In some countries, where the system exists it is not ensuring proper protection of children. UN agencies, governments and the Red Cross have identified severe challenges with identified cases and their subsequent management.⁶

An assessment by CRC, ERC and Canadian Red Cross in 2019 found Venezuelan migrant women and Colombian women alike described SGBV as a prevalent threat.⁷ This has been reinforced by other studies such as in Colombia where a prevalence of sexual violence, high risks in the workplaces, especially in informal work, and sex work as a common coping mechanism have been found.⁸

The Women’s Refugee Commission has found a pervasive (dangerous and unfounded) hyper-sexualized archetype (and also stereotyped by the surrounding communities) of Venezuelan women and girls in the region is a key context-specific risk factor that exacerbates their vulnerability, particularly those who are undocumented. While concrete data is rarely available, there are persistent reports of very high rates of survival sex, sexual exploitation, sexual assault, and sex trafficking of Venezuelan women and girls in the region. Survival sex is often the only option available to Venezuelan women and children, in order to ensure their own survival and that of family members who are dependent on them. “*We know it’s happening*” is a common refrain from representatives of UN agencies and national actors, they mentioned this is a debt to address to protect these migrant children in Colombia or in Ecuador. There are also reports of similar abuses of unaccompanied and separated Venezuelan boys.⁹ At key ports of entry, along key transit routes, and in key cities, the SGBV referral and response procedures vary in their protocols, capacity, and effectiveness—all require strengthening.¹⁰

In Colombia and Ecuador, protection systems are in place relating to supporting survivors of SGBV, such as referral pathways and access to health services¹¹, but there remain barriers and a lack of resources for key services, particularly outside of capital cities.¹² Humanitarian agencies such as the National Societies are not always aware of and do not yet have adequate training and capacity to make effective referrals.

Another risk is girls being partnered with men as part of unions that are essentially marriages but are organized less formally. These already occur in Colombia amongst some Indigenous populations near the border areas with Ecuador. In Ecuador local agencies note that these unions are occurring among migrant girls, and likely boys, but no statistics are available.

⁶ IFRC appeal

⁷ Canadian Red Cross (2019). Women and Agents of Change. Project Proposal.

⁸ IRC: <https://www.rescue.org/press-release/new-irc-survey-shows-extreme-coping-strategies-venezuelans-colombia-are-undertaking>

⁹ Women’s Refugee Commission. (2019). The Time to Act is Now: Addressing Risks of Exploitation for Venezuelan Women and Children Seeking Refuge. <https://www.womensrefugeecommission.org/resources-refugee-protection/1716-the-time-to-act-is-now>.

¹⁰ In Ecuador was reported an absence of a protocol to attend children survivors of sexual violence, specifically venezuelan migrants. Although the country has the Organic Law for Prevention and Elimination of Gender based Violence, its critical pathway is not applicable for the current migrant situation. In Colombia, at the Valle del Guamuez (Putumayo), a local interagency referral mechanism for sexual violence survivors was found but it does not have a clear pathway and for the local organizations is not effective.

¹¹ In Colombia, UN Women launched the national campaign “Valientes” (Brave Ones) as a strategy to provide pathways of attention for survivors of GBV. Unfortunately, this strategy only covers the cities of Riohacha, Barranquilla, Santa Marta, Cartagena, Arauca y Cúcuta. In Ecuador, UNFPA also has presence at the border points and key cities providing information of where to access PSS, protection and legal counseling.

¹² Ibid.

In 2016, CRC led a phased project on the “Reduction, Response and Mitigation of Gender-Based Violence” in the municipality of Tumaco, Nariño providing psychosocial support to 380 survivors of SGBV. This was achieved through providing relevant and accompanied referrals, awareness-raising on state-supported services for both survivors and at the community-level, and organizing workshops for the capacity-building of public officials on SGBV response services.

As part of its 2017 earthquake response, the ERC has used “community brigades” as a tool to address gender issues and SGBV. A joint assessment on SGBV-response gaps in Ecuador in 2017 carried out by the IFRC and the ERC identified the need to train ERC staff and volunteers in gender equality and SGBV to identify cases in a timely manner and to make relevant referrals.

Finding 06: Essential documents including birth certificates

In July 2019, the World Conference on Statelessness organized by the Institute on Statelessness and Inclusion highlighted the following situations of concern: 1. Children born in Venezuela whose birth has not been registered, who are currently in a third country, and may be at risk of statelessness; 2. Children born to a Venezuelan father or mother in a State that does not grant them birthright nationality and who do not automatically acquire the nationality of the other parent. These children are then born stateless; 3. Children born to a Venezuelan father and mother in a State that does not grant them birthright nationality and who face difficulties documenting and confirming their Venezuelan nationality; and who are thus at risk of statelessness; 4. Children born in transit to Venezuelan parents whose birth has not been registered, who may be stateless or at risk of statelessness; 5. Children born to Venezuelan parents in host countries whose birth has not been registered and who face difficulties accessing birth registration procedures, and thus may be at risk of statelessness.

Before August 2019, the only way to get the nationality of Venezuelan children born in the country is if one of the parents is Colombian or if it is proved the permanence in the territory. Although the National Civil Registry has the Circular 168 of 2017 to guide the process of access to birth certificates and the Ministry of Foreign Affairs has developed a pathway to prevent statelessness, both processes do not correlate with the reality of the Venezuelan migrants since: they have been requested for documents of identification that are not being currently provided in Venezuela, lack of measures of support for irregular migrants, the process demands a high amount of payment or requires several processes with different institutions that can take longer than 3 months¹³. Trying to solve this situation, on August 5th of 2019, the Ministry of Foreign Affairs announced a new Resolution to provide the nationality for those children who were born in Colombia after August 19, 2015, who have Venezuelan parents and have a Colombian birth certificate that includes at the bottom an entry that says: “NOT valid for demonstrate nationality”, and for those children who will be born from August 20, 2019¹⁴.

In Ecuador, on March 29th, the Constitutional Court suspended the measure of requesting criminal records and updated passports to the migrants crossing the borders of Rumichaca and San Miguel. However, on July 25th, the Ministry of Foreign Affairs announced a new Decree to request a humanitarian visa for those who want to enter to the Ecuadorian territory (this process can be done through a website paying fifty

¹³<https://www.eltiempo.com/mundo/venezuela/ruta-para-que-hijos-de-venezolanas-puedan-obtener-la-nacionalidad-colombiana-294836>

¹⁴<https://www.cancilleria.gov.co/newsroom/news/estado-colombiano-concede-nacionalidad-ninos-nacidos-colombia-hijos-migrantes>

American dollars) -starting on August 26th -and the request of a temporary visa of residence for those who are currently staying in Ecuador. The last process will commence on October 26th and will be jointed with a national census of Venezuelan migrants in country. This is an important situation to consider since most of the migrants do not have the economical possibility to pay for the humanitarian visa and the process of regularization will pose a difficult situation for those whose documentation is not yet clear.

Still, for those with vocation of permanence in Ecuador, the costs and documentary requirements involved in obtaining visas are prohibitive for many Venezuelans.¹⁵ In terms, of birth certificates, venezuelan children born in Ecuador do obtain the nationality and their identification document; however, for children born in Colombia the regularization at the Ecuadorian territory can be a very long process.

Finding 07: Access to education

Boys and girls whose education has been disrupted are in danger of falling behind in school and never catching up again.¹⁶ In Colombia and in Ecuador their correspondents Ministries of Education has established orientations for the educational system to regularize the access, permanence and completion of the educational process. The latest statistics, for December 2018, of Venezuelan migrant children integrated into the educational system, are: in Colombia, 26.713 and in Ecuador, 13.824. In Ecuador, where monitoring was conducted together with the Ministry of Socio-economic Inclusion, it was observed that admission to or inclusion in the education system increases over time, going from 23% of children registered during the first three months they were in the country, to 65% after a year¹⁷.

However, the different organizations in the field stated several constraints to access the right to education for venezuelan children, such as: lack of space in schools, absence of a well-defined process of adaptation for them, lack of documents needed for the registration, and even situations of possible xenophobia (together with focalized manifestations of bullying on them). For this last issue, one of the initiatives from UNICEF is being implemented in Ecuador with a school national campaign named “Let’s be friends” (Seamos amigos) to promote values of solidarity and empathy in the classrooms to avoid violence and the labeling of people either coming from a different country and culture, or because they differentiate themselves by their skin color or way of dressing and think.

In Colombia, also there are high rates of school drop out because even if they become students, if they do not have any formal documentation or a regularized migration status, they cannot receive any certificate of completion. According to UNICEF Colombia, although a circular between the Ministry of Education and Migration Colombia exists, stating that regardless of migratory status children have the right to education, in reality there are several factors that affects this to be a reality:

1. Parents need to resolve migratory situations within 3 months – which is untenable and creates a lot of stress.
2. Lack of knowledge on part of education officials about the circular.
3. Economics – education has incidental costs which many migrants cannot afford – books, uniform.

¹⁵ Women’s Refugee Commission. (2019). The Time to Act is Now: Addressing Risks of Exploitation for Venezuelan Women and Children Seeking Refuge. <https://www.womensrefugeecommission.org/resources-refugee-protection/1716-the-time-to-act-is-now>.

¹⁶ Save the Children fact sheet: <https://www.savethechildren.org/us/what-we-do/emergency-response/venezuela-crisis-facts>.

¹⁷ <https://data2.unhcr.org/en/documents/download/70440>

4. Lack of space in classrooms and infrastructure
5. Also schools get penalized if classes decrease and it is considered school dropout. So schools are reluctant to accept large numbers of migrant children.

In Ecuador, with children more focused at the provinces of Quito, Guayaquil and Cuenca, the factors that create school dropout are: arriving after the beginning of the school year creates constraints to enter to the system, lack of awareness of the procedures for enrolment, different assignation of schools for brothers, lack of income to pay for additional expenses required by the schools and assignation to schools far away from their homes. According to UNICEF's report "*Analysis of gaps in access to child development and education services of the Venezuelan migrant population*", this phenomenon is particularly higher in the eighth year of basic general education and in the first year of high school.

The CRC is currently in the process of starting a project to contribute to the mitigation of protection risks for children; addressing in a educational center teachers, boys and girls and the institutionality in a selected community. This project is specially oriented to pendular children. The ERC also seeks to implement actions to facilitate the entry of children and adolescents into educational centres.¹⁸

Finding 08: Sexual, reproductive, maternal, newborn, child and adolescent health

In both countries there are reports by humanitarian agencies that girl migrants, 15-17 years old, were being observed as pregnant. According to the Administrative Registration of Migrants (July 2018), Colombia has 8.209 pregnant women (6.304 with no prenatal control and 8.045 with no social security) with no data available of pregnant girls. Nevertheless, UNICEF's last Situation Report of May 2019¹⁹, reports the attention in their six extra-mural health and nutrition teams (Arauca, Ipiales, Villa del Rosario, Uribia, Maicao and Cesar) of 4,089 people, of whom 62 per cent were girls, boys and adolescents. Other associated risks, regarding the sexual and reproductive health of these girls, have been evident at Save the Children's Emergency Health Unit clinic on the Colombia border, reporting a staggering 61 percent of pregnant women seen with high-risk pregnancies, among other reasons, due to sexually transmitted diseases such as syphilis and HPV²⁰

In Colombia, UNICEF and Save the Children have activities specific to engage adolescent girls and prevent early pregnancy and for the ones that are pregnant Save the Children provides pre and post natal care. In Ecuador, RET International provides health services for young pregnant women (from 14 to 25 years old) together with kits specific to maternal needs. These activities include promotion of Sexual and Reproductive Health. During the focus group discussions with families of migrants in Colombia, they stated they have not received any support from the local health facilities for pre or post natal care.

Venezuela has the highest rate of adolescent pregnancy in the region. Ecuador has the second highest. As such, humanitarian agencies report they are not surprised by the risk of pregnancy among adolescent girl migrants. The Government of Ecuador has a strategy to combat adolescent pregnancies and UNFPA has a campaign to raise awareness but the impact is deemed to be limited since services and deeper education are necessary.

¹⁸ IFRC Regional Appeal.

¹⁹ <https://reliefweb.int/report/colombia/unicef-migration-flows-latin-america-and-caribbean-situation-report-no-4-may-2019>

²⁰ <https://www.savethechildren.org/us/about-us/media-and-news/2019-press-releases/pregnant-venezuelan-women-seek-treatment>

Several humanitarian agencies distribute hygiene kits that include elements on sexual and reproductive health. UNFPA includes protection tools like a whistle, lock, flashlight, and underwear. Like UNFPA the ERC and CRC also deliver hygiene kits that include menstrual hygiene pads, soap, toothpaste, and toothbrush. However, these kits do not include protection elements.

In terms of other health needs for children, the most frequent conditions are acute respiratory infections, physical exhaustion, needs for vaccination and situations of malnutrition. In both countries, efforts have been made by their own Ministries of Health but the perception of the organizations in the field is the support is not sufficient (migrants have access to emergency services but for specialized health services have difficulties)²¹. The National Societies also have established health posts providing medical and psychological attention and implementing referrals to the local hospitals.

Finding 09: Child participation (linked also to Community Engagement and Accountability-CEA-)

Children have not been consulted or had meaningful opportunities to support decision-making that affects them in the migration operations in either Colombia or Ecuador.

Part of the challenge is the transitory nature of many children and their families; they may stay in one place for only hours or a few days before moving along to their next stop. Although, for example in Colombia, the Youth volunteers do engage with children in the design of interventions, this is rarely shared to HQ level, and not tracked or systematic, and for this reason the CRC as such does not have a common approach on children's engagement and participation (the same happens with ERC). In addition, there is not a clear requirement in the Operational appeal contributing to this matter.

There is currently no regional or country-level initiative to gather the voices and perspectives of migrant children to better understand their needs, barriers, capacities, wishes, and reflections on their migration experiences.

Despite the barriers, there are opportunities to engage directly with children. For this assessment, both CRC and ERC migration teams worked very hard to find ways to consult with children and were very supportive of ensuring more is done to gather, reflect and support child participation in the operations. One evident example was the "Feedback tree" implemented by the ERC at their Safe Space in Sucumbíos. Currently, IFRC is also conducting the first surveys of a multi-agency assessment on information and communication needs of migrant population in the region.

Finally, in June 2019, UNHCR conducted a Protection Monitoring of the Venezuelan Situation and through and assessment with 5,272 persons it was found that their main source of information was talking to fellow nationals along the route, followed by WhatsApp (2,035) and checking Facebook (1,982), Internet browsers and Instagram. These results are important for planning and conducting Communication with Communities (CwC) interventions, and referrals to the Regional Safe Spaces Network (RSSN), particularly in regard to alerting people about the risks, providing information on procedures and essential services

²¹ In Colombia, in May 2019, the Constitutional Court through the Sentence 178-2019, indicated that it is up to the Ministry of Health to register the Venezuelan newborns in Colombia in the health affiliation system and register it in a health service provider. Likewise, the Court stated that, regardless of whether the parents of the children do not have legal status in Colombia, they must be registered with a health service provider also. The resources and the protocol for this, is yet to be defined.

for SGBV survivors, children at risk and victims of trafficking, and countering misinformation and fraud²². However more efforts need to be taken in order to assess the communicational needs of child migrants.

Finding 10: Referrals

In Colombia child protection referrals are available. The main referral is to the ICBF, and one evident example of coordination between the Red Cross Movement (in this case ICRC) and this governmental institution is the “*Referral Pathway for Restoring Family Links and Family Reunification of children and adolescents unaccompanied or separated*”. However, there are barriers to reporting child protection concerns. For example, there is a perception among humanitarian agencies that ICBF capacity to respond is low (see finding #1 on government capacity). Also, migrants have to pay fees or register in order to access some services, which make it impractical for some to do so.

According to Save the Children, in Colombia there is a referral mechanism with ICBF to provide social services for unaccompanied children, but since most of them are adolescents it has been difficult to engage them throughout the entire process and after they receive information and basic services there is not a protection system in place to provide them more opportunities or complete the access to education or the provision of occupational activities.

In Ecuador, access to basic essential services, including child protection services, is free for all migrants. However, like Colombia a host of barriers means that referral services are not being fully accessed. Part of the concern is xenophobia among service providers, bureaucratic red-tape that slows down support or means many steps and many government agencies have to be included to provide children with protection services.

A key problem in both countries is that migrants do not necessarily understand the role of the government and/or do not trust them, especially fearing (even if just a perception and not based on reality or laws) that if they take their children for support their children will be taken away from them.

This has been echoed by the SGBV prevention and response assessment conducted by the Red Cross which found SGBV survivors under-report their concerns due to lack of awareness about service availability, fear of deportation given communication between healthcare providers and the police, or shame and stigma. Moreover, migrants related that despite the legal obligation to provide free care, many hospitals refuse service. This is because, for irregular migrants the access to free care is uniquely for emergencies; for migrants with a valid passport or visa and with a vocation of permanence, they can apply to be affiliated to the Colombian health system SISBÉN. In addition, a lack of awareness about health needs following an incidence of SGBV among survivors also leads to delayed reporting.²³

The International Rescue Committee found that none of the groups of women and girls surveyed knew what services were available to them and where they could receive these.²⁴

²² <https://data2.unhcr.org/en/documents/download/70440>

²³ Canadian Red Cross (2019) Women as Agents of Change: Project Proposal.

²⁴ International Rescue Committee: <https://www.rescue.org/press-release/new-irc-survey-shows-extreme-coping-strategies-venezuelans-colombia-are-undertaking>

Finding 11: Xenophobia

In Colombia, UNHCR has developed a national campaign named “Somos Panas Colombia”²⁵ (We are Friends Colombia) with a toolkit for colombians and Venezuelans on how to handle xenophobia and where to access information. The CRC has also developed a series of key messages with the slogan “Diversity has no borders”, IEC materials for the RFL sites and the Health Posts at country level, and Youtube videos with self-care recommendations with the slogan “From the same side”.

In Ecuador, UN system has developed a national campaign named “Hugs that unite”²⁶ (Abrazos que unen) to promote solidarity and hospitality. The ERC has also developed a national campaign through a theatre act named “The backpack that weighs the most” (La mochila que más pesa), sensitizing host communities about the right to migrate, the risks faced by migrants and how to improve the inclusion and respect for the others. These messages have been also shared in buses and through radio messages.

Despite all the efforts from different agencies in both countries to promote inclusion, still key informants stated situations of xenophobia from local authorities that prevent children to access key services and the necessity to work harder with host communities, promoting more activities to exchange among migrants and locals. According to the latest protection monitoring report from Ecuador (MIES-UNHCR May 2019²⁷), of 4584 venezuelan migrants interviewed, 62.71% felt discriminated and their nationality (97,3%) is the main reason.

Finding 12: Child labour and illegal recruitment

In Colombia, according to the Defensoría del Pueblo (Ombudsman’s Office)²⁸, the 60% of the early warnings related to protection issues are about specific risks of recruitment of migrant children and adolescents (mostly boys from 7 years old and older) and their engagement for selling illicit drugs, cleaning and processing coca leaves (working called as “raspachines”), being participants of extortion to local sellers, and other situations. According to the agency, Venezuelan immigrants, because of their vulnerability, are at risk of falling into these groups (illegal armed groups and criminal gangs, not yet clearly identified by the organizations in the field) outside the law; it has been also identified that in the areas where there is a greater presence of the migrant communities, these cases can occur with highest prevalence²⁹. In Colombia, UNICEF is currently running a project combining education about Anti-Personnel Mines and prevention of illegal recruitment (both prevalent risks for migrant adolescents).

Other situations of child labour reported by the different agencies working in Colombia are: mining, children working alongside their parents, begging in the streets or selling items (this can include forced begging by their parents or as a result of trafficking) and forced labor in domestic work. There are also informal reports of commercial sexual exploitation, sometimes as a result of human trafficking; unfortunately, there are no updated figures available or researches to show how many child migrants

²⁵ <https://somospanascolombia.com/kit-contra-la-xenofobia/>

²⁶ <http://abrazosqueunen.un.org.ec/>

²⁷ <https://data2.unhcr.org/en/documents/download/70091>

²⁸ <http://www.defensoria.gov.co/es/nube/noticias/7941/Bolet%C3%ADn-Ni%C3%B1ez-y-Adolescencia-Migrante-y-Refugiada-%E2%80%9Csus-derechos-no-tienen-fronteras%E2%80%9D-ni%C3%B1ez-derechos-infancia.htm>

²⁹ <https://www.lafm.com.co/colombia/alerta-por-reclutamiento-forzado-de-ninos-colombianos-y-venezolanos>

become victims of sexual and labor exploitation, the latest figure comes from ICBF with 350 Venezuelan children victims of child labour for June 2018³⁰.

In Ecuador, reported by different organizations such as HIAS, ADRA and UNICEF the main manifestations of child labour are children working alongside their parents, begging in the streets or selling items (this can include forced begging by their parents or as a result of trafficking).

Vulnerable populations

Finding 13: Unaccompanied and separated children (UASC)

The protection of UASC was consistently raised as a priority in both countries.

The number of UASC in both Colombia and Ecuador is not exactly known. The governments do keep track although it is understood these numbers are far lower than reality. For example, in Colombia the government counted 50 UASC in 2018, however, the actual numbers, including through informal tracking by humanitarian agencies, are believed to be much higher. For example, the Washington Post has found:

Throughout this crisis, here's what the headlines have not captured: an entire generation of children facing severe trauma. One of the particular tragedies of the Venezuelan exodus is that the number of family separations — parents separated from their children — is five times higher than in most other refugee situations.³¹

Due to the lack of data the number of boys and girls who are migrating alone is unclear. A recent observation is that more young women are traveling alone with their young children, many children are unaccompanied or separated from their parents, and most of the unaccompanied boys are adolescents.

The needs for UASC are high. Specifically, they lack safe spaces and in countries where shelter for UASC do exist, the resources are insufficient for all the needs, thus, being unable to guarantee protection.³² Furthermore, UASC can travel through areas populated by armed groups and illegal groups, which puts them at risk of kidnapping and exploitation. Their total invisibility to support services and government agencies leaves them incredibly vulnerable to those who seek to exploit and abuse them, such as traffickers or recruiters for armed groups and organized criminal groups.³³

In Ecuador, exists the *Procedure of attention for children, adolescents and their families in population movement contexts in Ecuador* that mandates the responsibility of the Economic and Social Inclusion Ministry to guarantee the implementation of safe spaces for children to stay. Additionally, three Ecuadorean government ministries (human mobility, economic and social inclusion, and interior) have signed the *Protocol of Child Protection in Population Movement Contexts* for attending to the needs of child migrants in Ecuador. This protocol attempts to address the difficult situations that UASC face,

³⁰ <https://www.reuters.com/article/us-colombia-child-labour-venezuela/hundreds-of-venezuelan-children-victims-of-child-labor-in-colombia-government-idUSKBN1J901A>

³¹ https://www.washingtonpost.com/opinions/2019/02/04/colombia-welcomes-fleeing-venezuelans-children-bear-heaviest-burden/?utm_term=.c3218398223c.

³² IFRC Regional Appeal.

³³ <https://reliefweb.int/report/colombia/children-fleeing-unrest-and-hunger-venezuela-facing-protection-and-health-risks-they>

identifying those who are at risk and providing them with protection. There have been initial difficulties in implementation, largely due to insufficient resourcing and also because it does not have guidance of case management and a specific referral mechanism. Humanitarian agencies report that children disappear—that they give up on waiting at the border and continue with their journey—before they can complete the process of interviews, referrals, verifications, and decision-making related to child protection; one of the reasons are because for unaccompanied children this process can take at least fifty days, so many adolescents (who are mostly the unaccompanied ones) report themselves older, avoid it and continue their transit.

The numbers of children who are lost to the system could be reduced if appropriate shelter and support services were available and if there were sufficient staffing to speed up the process. Although the national governmental protocol exists, the ERC demands their own internal protocol to manage cases of unaccompanied and separated children, due to the absence of this guidance they do not gather data related with these children.

Both National Societies have long-standing experience in delivering RFL including for UASC. Each has a partnership with ICRC to build capacity and to deliver the services. In Colombia, the ICRC has several RFL posts at borders and in Ecuador too. These are implemented through National Society volunteers.

Finding 14: Child migrants on the streets

There are no statistics available on the number of child migrants living on the streets, although on-site observations and feedback from humanitarian agencies stress that in both countries many migrant children have no options but to live, work or sleep on the streets. It was noted in both countries that there is a lack of services to these children and their families. Save the Children has found *“Once in Colombia, most Venezuelan families live in desperate conditions. Many sleep in the street or abandoned buildings or informal camps. The conditions are unsanitary and can lead to disease.”*³⁴

In Colombia because children cannot always access education or pre-school services their parents believe they have no choice but to take their children with them to sell good or seek money on the streets. In response, the ICRC is distributing food vouchers and helps some families with temporary accommodations for a few nights. In Ecuador similar issues were raised as was the problem of low capacity among government and humanitarian agencies to provide shelter for all families and children so some are sleeping on streets. In addition, as families and children begin to stay longer in Ecuador and Colombia (e.g. due to closing of and restrictions at borders in neighbouring countries like Peru) more will end up in urban centres where children on the streets are already most visible.

The Colombia Red Cross has experience delivering a project, PANICA, for children on streets (see finding #2 on National Society capacity). If this was adopted with a greater focus on psychosocial first aid, referrals for basic essential services and concerns about SGBV, distribution of dignity kits (with protection materials for girls and boys), RFL, and child rights information it could have benefits³⁵. Also using a mobile approach like ERC is doing for safe spaces, or utilizing an existing mobile health unit, could help reduce cost and maximize existing resources of the National Society.

³⁴ <https://www.savethechildren.org/us/what-we-do/emergency-response/venezuela-crisis-facts>.

³⁵ Currently the Bogota and Cundinamarca Branch has implemented “Mobile Play Centers –Ludotecas Móviles–”, this could be an experience the CRC’s HQ can extract and implement at a national level.

In Ecuador there is no action currently being taken to support migrant street children. However, UNHCR and the government, through a new unit on mobile populations, have started a dialogue to look at reaching children with information.

Finding 15: Children affected by armed conflict

In Colombia some of the border locations, such as Puerto Asis, have active paramilitary groups and illegal bands involved in narco-traffic. Humanitarian agencies in the field report that some cases of these groups are recruiting or using migrant children (see finding #13 for more information on UASC and armed conflict and gangs).

The exact nature of how migrant children are and numbers are not clear because much of this activity is being done in areas that are hard to access. It does appear that smuggling of drugs and support to armed conflicts are involved.

When children have been identified as at risk, it is difficult to track them because they do not stay in one place, or even the country, for very long.

Gender and age

Finding 16: Gender equality

The gender inequality rankings for the countries involved in this operation are very low. In particular, Colombia's Gender Inequality Index Rank is only 87, Ecuador's is 88, and Venezuela has the 105 position³⁶. In terms of the gender gap, for Colombia and Ecuador is surprisingly the same: 0.73, which shows a gender gap of approximately 27 percent (women are 27 percent less likely than men to have equal opportunities), different – but not far from- Venezuela scoring 0.71, which shows a gender gap of approximately 29 percent (women are 29 percent less likely than men to have equal opportunities)³⁷.

Most of the humanitarian agencies suggested that girls and boys generally face similar problems, but that there are substantial differences on the basis of their gender. Also that in general, they believe SGBV is a higher risk for girls based on their observations on reporting, other reports, and existing rates of SGBV in the countries and region. According to UNHCR, the risks connected with survival sex and sexual exploitation are extremely high for the Venezuelan population of children and the contributing factors include: I) the precarious economic situation of families or single women prior departure, II) the inability to cover the costs of the trip, III) the limited availability of formal employment, IV) the temporary nature of residence permits issued to Venezuelans and V) the stigma associated with Venezuelan women girls and people with diverse sexual orientation and gender identity³⁸. Likewise, boys and adolescents face particular protection risks associated with their gender (see finding # 12).

³⁶ <http://hdr.undp.org/en/composite/GII>

³⁷

<https://www.statista.com/statistics/802906/colombia-gender-gap-index/>
<https://www.statista.com/statistics/802907/ecuador-gender-gap-index/>
<https://www.statista.com/statistics/802934/venezuela-gender-gap-index/>

³⁸ <https://data2.unhcr.org/en/documents/download/70440>

An approach for LGBTIQ populations is inexistent, and the key informants reported the rates of migrant adolescents that identified themselves as part of this population was very low. However, there are some informal reports of survival sex of young boys in Guayaquil; also in Quito these young boys have been identified and since they are facing homophobia and are living in the streets, UNHCR has been providing shelter with the “Equity Foundation” (Fundación Equidad).

Some key informants felt boys represent higher levels of unaccompanied and separated children. While others believed that girls were being under-represented because they were more likely being trafficked, including for sexual purposes, and because of the under-ground nature of this trafficking it was hard to account for the real numbers of girls who are alone.

There are specific SRH issues affecting girl migrants (see finding 08).

Finding 17: Sex and age disaggregated data (SADD)

Both National Societies collect SADD data for some projects like safe spaces for children. However, neither has a clear approach for a gender and diversity analysis after collecting SADD for the operation overall. This is essential to understand who is being reached (or not), to help refine project approaches with gender lens, and to ensure that projects meet their objectives and are meeting the needs of those who require support. The lack of comprehensive SADD-including the analysis- means it is hard to know the specific details of how many children overall are being reached, the amount of girls and boys specifically in transit or with permanence vocations, their diverse conditions and what trends are being seen in terms of who is reached or not. In addition, a gender analysis of the practical and strategic needs of migrant children was not evident.

Also, it was not evident that National Societies are collecting and analysing data related with protection risks.

Partnerships

Finding 18: Partnerships

In each country the National Societies are coordinating with various agencies although they do not have partnerships in place specific to child protection.

Both countries have protection clusters including child protection. In Colombia the Red Cross has been participating since 2016. In Ecuador the Red Cross has participated once only. During the key informant interview, UNFPA invited the ERC to join the SGBV working group.

In Colombia, in terms of coordination with civil society organizations, was mentioned by UNICEF institutions such as “Paz y Democracia” and “Renacer” (for survivors of SGBV), by Save the Children “Opción Legal” (for legal counseling), and in the field ICRC has a good relation of coordination with “Funvencol” (Venezuelans in Colombia Foundation). In Ecuador, “Tirabita Foundation”, “ Alas de Colibri Foundation” and other private organizations as ADRA and HIAS were identified as key implementers of child protection actions, but more needs to be done with community based organizations.

CRC and ERC personnel did not know about the IFRC and UNICEF global letter of agreement whereby the two agencies have committed to try to work closer together on children’s rights issues including child protection, child education and child participation.

It is also worth noting that IFRC and UNICEF, host of the Area of Responsibility for Child Protection in Emergencies, (along with the Partnership to End Violence against Children and the African Union) have a partnership in Eastern and Southern Africa to improve government capacity on child protection coordination in emergencies. This project may expand to the Americas as soon as this year. The project supports governments, National Societies, and country-level UNICEF offices to work together to develop plans of action for emergencies.

In both countries, the new partnership between IFRC and World Vision International was also not yet known. This partnership has been around developing new evidence-based global tools for Safe Spaces for Children. The tools are free; the Spanish versions are now being translated in partnership with the Area of Responsibility on Child Protection in Emergencies³⁹.

In Ecuador, UNFPA and the National Society are discussing to form a partnership. Some areas for this can include capacity building of the National Society, particularly on issues like identification of potential SGBV situations and making effective referrals to local agencies wherever the ERC is working with migrants.

RECOMMENDATIONS

The recommendations are based on the findings, in particular **key problems** that the National Societies have an **added-value** to address, have or can build a **capacity** to address, are **practical**, can be done in a **timely** manner, and can reasonably be **funded**.

During the trainings with both National Societies, additional recommendations have been made by the staff and volunteers of CRC and ERC, please refer to these suggestions in the training reports to complement the following:

Legend:

Recommendations	Countries	Funding	Priority
“PILOT” = means this would be a new intervention for the National Society to consider testing. The PILOT projects require new funds.	C= Colombia X	No cost = no new funding required.	High: Activities we should do as soon as possible.
	E= Ecuador X “-“ = not applicable	Low cost = the cost is so low that funding can likely be found in existing budgets. New cost = these are for PILOT projects/activities; funding from existing sources needs to be	Medium: Activities that can be implemented after the high priority ones are done.

³⁹ For more information please see: <http://pscentre.org/archives/publication/child-friendly-spaces>

identified or new funding generated.

RECOMMENDATION	C	E	Funding	Priority	Current status
1 Build internal child safeguarding systems					
1a Ensure all migration personnel complete the IFRC online course on its child protection policy (30 minutes, available in Spanish)	X	X	No cost	High	All the staff and volunteers who attend the three-day training (17 men, 28 women) were requested to complete the online course. During each training, this was stated as an important demand and it will be an activity to be followed-up for the leaders and focal points of each NS.
1b Develop a National Society child protection/safeguarding policy. This can be initiated now but needs to be done broader than migration, include National Society Development and Human Resources, and will likely take 2-3 years.	X	X	Low cost	Medium	The National Societies are keen to initiate the development of child protection safeguards but have different capacities in terms of their focal points. The main concern is the budget for this and the now starting capacity building on child protection, also the responsibilities regarding the establishment of a CP internal system.
2 Train personnel on protection and assistance for child migrants					
2a Conduct country-level trainings for migration personnel in CRC and ERC each on the IFRC 3-day training for Protection and Assistance for Migrant Children and include within that portions of IFRC Psychosocial First Aid for Children and with help from UNFPA or a local women's agency SGBV referral and reporting	X	X	Low cost	High	This activity is completed. The training for the Ecuador Red Cross was held on August 1-3 and for the Colombian Red Cross on August 6-8 (with an additional high level session of one day on August 9 th). Due to the short time for planning the trainings, it was very difficult for the NSs to coordinate and engage external facilitators. In Ecuador, the IFRC Consultant was the only facilitator and in Colombia

						three internal facilitators accompanied the training. For more information see training reports previously shared with IFRC.
2b	Encourage migration personnel to complete the IFRC co-led massive open online course (MOOC) on Caring for Children Moving Alone (available for free, available in Spanish)	X	X	No cost	Medium	The brochure for the upcoming registration has been shared with the participants of the trainings. The protection focal points have also been encouraged to do the MOOC to have more tools of protection of child migrants.
3 Improve access to basic essential services for child migrants						
3a	Add gender-specific elements into dignity kits to better protect and provide dignity to women and girls. Specifically, whistles, locks, flashlights, underwear, SGBV and SRH referral booklets	X	X	Low cost	High	This is a specific aspect that the NSs have move more quickly. The ERC is still defining their strategy but the CRC has established already budget and the supplies into the dignity kits. Colombian RC defined two ways of action: differential elements of protection for the hygiene kits for lactating and pregnant woman and separated dignity kits for girls.
3b	Develop an RFL protocol for working with UASC	X		Low cost	High	CRC requested support from the IFRC Consultant to update their RFL Protocol. The recommendations were provided and are now being revised by the protection focal point of the NS.
3c	PILOT a project to enhance access to PSS and Health for child migrants accessing to schools in Colombia. CRC has already developed a proposal.	X	-	New cost	Medium	Project approved by IFRC. In process of selecting the staff and volunteers.
3d	PILOT a project to help children working or living on the streets to access basic essential services using the existing CRC PANICA project model with a greater focus on migrant child needs and a mobile approach. Focused on humanitarian	X	X	New cost	High	A Concept Note will be delivered by the consultant in order to identify opportunities for implementation. Important to mention the activity guidance of PANICA was already shared with the

	needs: humanitarian education, PSS, RFL, VP.					coordinators and volunteers who are running the safe spaces of CRC.
	*The consultant can draft a Concept Note, if this is something IFRC and the NSs consider.					
4	Provide children and adults with information on the rights of child migrants to protection and assistance⁴⁰					
4a	PILOT Develop a comic book on safe migration for children	X	X	New cost (to be funded by Swiss Government)	High	Still in process. IFRC's Child Protection Advisor have included Ecuador and Colombia into the NSs to be benefited for the comic book.
4b	With help from UNICEF (and the national institute responsible for child protection), develop a poster on regulations for birth registration, children's rights and protection considerations, including myths associated with migration. Distribute the poster to health posts, safe spaces, RFL posts, etc.	X	X	Low cost	High	During the trainings, a specific session around the improvement of IEC materials with a child protection approach was hold and the focal points are starting initiatives to develop these materials.
4c	Implement information points completely focused on protection.	X	X	Low cost	High	In order to deliver accurate information on referral mechanisms, the teams will start a structured mapping of protection institutions at the branch level. Also, the National Societies will start a discussion with key partners to have an integrated approach on information around protection.
5	Improve psychosocial support to child migrants					
5a	Translate into Spanish the IFRC and World Vision toolkit on safe spaces for children	-	-	No cost (UNICEF funding globally)	High	Still in process. However, IFRC's Migration Officer in Colombia has established communication with World Vision and they

⁴⁰ Globally IFRC should develop an information brochure on how adults can protect children in migration. This can be done similar to the one used by UNICEF in Colombia and Ecuador. Depending on how much content needs to be revised a partnership could be developed with UNICEF and even ICRC.

						have shared the toolkit of activities in Spanish. This has been shared with all the participants from the trainings.
5b	Hire in Putumayo a psychosocial officer to provide support to the migration operation	X		New cost	Medium	The National Society has taken into consideration this recommendation, but not only for the Putumayo branch but for all the Child Friendly Spaces that are planned and the ones that are now running. At the moment, the CRC has planned the following CFS: Vichada, Putumayo, Maicao, Ipiales and Arauca.
5c	Conduct a lessons learned review of the safe spaces, including mobile ones, being implemented by ERC	X	X	Low cost (can be built into the Operation's M&E budget)	Medium	To be discussed with both National Societies. Possibly for CRC will take longer since they are restructuring their approach to CFS.
6	Enhance child participation					
6a	Build into the Operation Evaluation specific questions on child protection and ensure that girls and boys of diverse ages and backgrounds are interviewed	X	X	Low cost (can be part of Operation's evaluation budget)	High	One of the main conclusions of both trainings with the National Societies is to develop a needs assessment to structure boys, girls and adolescents profiles. During the trainings, was also shared UNICEF's "Monitoring Tool of Children's participation and engagement" tool to be included into the population movement' strategies.
6b	Lead a regional project to gather the voices and perspectives of child migrants of diverse ages, genders, and disabilities to understand their journeys, what they feel about the humanitarian services they have receives, and what they believe needs to be done to strengthen their protection. Consider partnering with UNICEF or another relevant agency for this safe spaces.	X	X	New cost	High	At the moment, IFRC is conducting a multi-agency assessment on information and communication needs of the migrant population in the region. In addition, IFRC has partnered with UNICEF with a project on how to improve the engagement of children through the development of a management system with a

To consider the PILOT of a feedback mechanism completely oriented to children.						direct focus on boys, girls and adolescents.
7 Support building the capacity of government on child protection in emergencies						
7a	Include Colombia and Ecuador National Societies If UNICEF and IFRC expand their existing partnership into the Americas to build government capacity on child protection coordination in emergencies.	X	X	No cost (UNICEF would cover National Society participation)	Medium	In addition, the protection leaders of the National Societies have met UNICEF's protection focal points in their countries; this consultancy encouraged them to keep the contact active and to promote the exchange of information and best practices.

Appendix 1:

Itinerary June 16-22, 2019

Location	Date	Activity	Objective	
COLOMBIA	Bogota	Monday 17/06/2019	Meeting with assesment team. Security Briefing from Colombian Red Cross	Agenda validation, discussion on mission objectives. Responsible. Nadia Khoury
			Meeting with UNICEF, UNHCR, Save the Children, ICRC. From Colombian Red Cross: migration strategy management team and protection and peace building management. <i>Female: 6</i> <i>Male: 3</i>	Exchange about key child protection needs identified by partners. Responsible. Nadia Khoury
			Visit to Shelther lead by the Bogotá, Cundinamarca Branch. <i>Female: 1</i>	Interview with branch staff and volunteers involved in activities to assist children and migrants
			Colombian Cross meeting <i>Female: 1</i>	Interview with protection in migration, focal point Responsible Astrid Olaya
Trip to Putumayo (Puerto Asís)				
Putumayo	Tuesday 18/06/2019	Visit to the Puerto Asis municipal branch <i>Female: 1</i>	Interview with staff and volunteers of the branch related to assistance to children and migrants. Responsible Nadia Khoury	

ECUADOR	Lago Agrio-Sucumbios	Wednesday 19/06/2019	Meeting with partners and actors in the field: ICRC, Colombian Red Cross staff and volunteers, FunVenCol, and the Pastoral Social. <i>Female:3</i> <i>Male: 5</i>	Exchange about key child protection needs identified by partners. Responsible Nadia Khoury
			Focus Group Discussion with 3 families of Venezuelans with vocation to stay in Colombia. <i>Female: 3</i> <i>Male: 3</i> <i>Boys: 2</i> <i>Girls: 1</i>	Identify main needs and perception of target population. Responsible Municipal Unit.
			Trip to La hormiga	
			Visit to RFL Post at the Terminal. Interview with Colombian Red Cross volunteer. <i>Female: 1</i>	Interview with RFL Volunteer to assess main needs of target population. Responsible: ICRC
			Interviews with venezuelans in transit. <i>Female: 2</i> Focus Group Discussion child migrants in transit. <i>Men: 1</i> <i>Boys: 3</i> <i>Girls: 1</i>	Identify main needs and perception of target population. Responsible: ICRC.
		CRC's Health post interview. <i>Female: 3</i> <i>Male: 1</i>	Identify main patterns and health vulnerabilities of children. Responsible Nadia Khoury	
		Meeting with partners and actors in the field: Colombian Red Cross, ICRC, FunVenCol, local church, UNHCR, ICBF. <i>Female: 7</i> <i>Male: 5</i>	Exchange about key child protection needs identified by partners. Responsible Nadia Khoury Field Coordination: CRC staff in La Hormiga.	
		Crossing of the San Miguel Border. Entrance to Sucumbios		
		Meeting with IFRC and Ecuadorian Red Cross Team at the Binational Center of Border Attention. CEBAF. <i>Female: 2</i> <i>Male: 2</i>	Interview to the volunteers involved in the Safe Space of the Ecuadorian Red Cross. Responsible Roger Calabuig Field Coordination Anaité Vargas	

Quito		Meeting with partners and actors in the field: Ecuadorian Red Cross, UNICEF, ADRA, Tirabita Foundation, RET, HAIAS. <i>Female: 5</i> <i>Male: 6</i>	Interview on key child protection needs identified by partners. Responsible Roger Calabuig Field Coordination Anaité Vargas
	Trip To Quito		
	Thursday 20/06/2019	Meeting with Juan Garland. Secretary General of the Ecuadorian Red Cross	Interview to leadership of the National Society to explore main priorities regarding child protections for migrants. Responsible Roger Calabuig
		Meeting with IFRC, ICRC and Ecuadorian Red Cross Team. <i>Female: 6</i> <i>Male: 4</i>	Interview to the migration strategy management team. Responsible Roger Calabuig Field Coordination Anaité Vargas
		Interview meeting with UNICEF	Interview on key child protection needs identified by partners. Responsible Anaité Vargas
	Friday 21/06/2019	Interview meeting with UNFPA	Interview on key child protection needs identified by partners. Responsible Anaité Vargas
		Protection Briefing. <i>Female: 37</i> <i>Male: 29</i>	Provide an overview of Protection for staff and volunteers of the Ecuadorian Red Cross. Responsible Roger Calabuig & Anaité Vargas
		Interview meeting with UNHCR	Interview on key child protection needs identified by partners. Responsible Anaité Vargas
	General Return		

Itinerary July 25, 2019

Location	Date	Activity	Objective
Cúcuta	Thursday 25/07/2019	Visit to the Norte de Santander Branch	Presentation of the aim of the consultancy and the visit to the branch leadership.
		Visit to the National Border Center (CENAF) in Cucuta.	Key informant interviews with psychologist at the CRC's health post and RFL post. Visit to NRC Child Friendly Space. Responsible. Astrid Olaya
		Visit to the Attention to Migrants Post of Montebello. <i>Women: 3</i> <i>Men: 3</i> <i>Boys:4</i> <i>Girls: 1</i>	Key informant interviews with RFL, PSS and health personnel of the post. Focus groups discussions with boys and girls at the post. Responsible. Astrid Olaya

Appendix 2: Child Protection Laws in Colombia and Ecuador (Including for Migrant Children)

The laws to protect children from violence in Colombia⁴¹ are:

- Law 599 of 2000. Colombian Criminal Code. Child Pornography (Art. 2018), Child Sexual Exploitation (Art. 2019), Use or facilitation of the media to offer sexual activities with minors (Art. 2019 A).
- Law 679 of 2001. Act of prevention and combat of exploitation, pornography and sex tourism with children.
- Law 704 of 2001. Approval of ILO's 182 Convention on the prohibition of the worst forms of child labor and immediate action for its elimination.
- Law 1098 of 2006. Children's and Adolescents Code.
- Law 1146 of 2007. Prevention and Care of Abuse and Sexual Violence against children.
- Decree 4690 of 2007. Creation of the Intersectoral Commission to Prevent Recruitment and Utilization of Girls, Boys and Adolescents by Armed Groups (CIPRUNA).
- Law 1336 of 2009. National Action Plan for the Prevention and Eradication of Commercial sexual exploitation of children and adolescents.
- Law 1295 of 2009. Integral health attention to children classified as 1,2,3 of SISBEN.
- Child Labour: Resolution 3597 of 2013 & Resolution 1796 of 2018. Activities considered as the worst forms of child labour.

The laws oriented for the attention to migrants in Colombia are:

- Decree 2840, 2013. Procedure to recognize the condition of a refugee.
- CONPES 3950, 2018. Colombian Migratory Policy.
- Decree 1542, 2018. Measures for the creation of the administrative registration (RAMV) of Venezuelan migrants in Colombia.
- Visa expeditions and dispositions for the regularization of migrants: Decree 4000 of 2004, Decree 3970 of 2008, Decree 2622 of 2011.
- Health laws, specifically for migrants: Decree 1768 of 2015, Decree 1495 of 2016, Decree 2228 of 2017, Resolution 3015 of 2017⁴².
- Access to education for migrant children: Ministry of Education Circular 16 of 2018⁴³.

The laws to protect children from violence in Ecuador are:

- Law 100 of 2003. Children's and Adolescents Code.
- Decree 792, 1997. Elimination of child labour and protection for children and adolescents.
- National Plan of Progressive Eradication of Child Labour (2005).
- National Plan Against the kidnapping, Illegal Trafficking of Emigrants, Sexual Exploitation, Labor and other modes of exploitation and prostitution of women, children, and adolescents, including child pornography and Corruption of Minors (2006).
- National Plan to eliminate Sexual Crimes in the Educational System (2006).
- MIES (Ministry of Economical and Social Inclusion): Technical Norm to prevent and eliminate child labour, 2017. Technical Norm to Progressively Eradicate Children begging in the streets.

⁴¹ https://www.unicef.org/protection/files/Colombia_CP_system_case_study.pdf

⁴² For more information: Health Response Plan. Page 29.

<https://www.minsalud.gov.co/sites/rid/Lists/BibliotecaDigital/RIDE/DE/COM/plan-respuesta-salud-migrantes.pdf>

⁴³ https://www.mineducacion.gov.co/1759/articles-368675_recurso_1.pdf

The laws oriented for the attention to migrants in Ecuador are:

- Organic Law of Human Movement, 2017.
- Access to education for children. Ministry of Education. Agreement 042 of 2017⁴⁴.
- Sentence 209-15-FP-CC, June 24 of 2015 recognizes the governmental obligation to reinforce protection services to children on the move.

⁴⁴ <https://educacion.gob.ec/wp-content/uploads/downloads/2017/06/ACUERDO-Nro.MINEDUC-MINEDUC-ME-2017-00042-A-Normativa-regularizar-garantizar-ingreso-sistema-nacional-para-personas-con-rezago-escolar.pdf>

Appendix 3: Key informants interviewed & Main places visited.

Colombia

Informants of the Red Cross Red Crescent Movement:

Colombia Red Cross National Society:

- Doris Hernández. Peace Building and Institutional Doctrine Team Leader.
- Astrid Olaya. Protection and Migration Coordinator
- Diego Ruiz. Program Officer of the National Strategy on Migration.
- Erika Cardona. Humanitarian Issues Coordinator. Cundinamarca and Bogota Branch.
- Silvia Arroyave. President. Puerto Asis Municipal Unit.
- Cesar Yela Quitumbo. RFL Volunteer. Puerto Asis Municipal Unit.
- Alexandra Rodríguez. Pharmacist. Health Post La Hormiga.
- Alisson Guerrero. Nurse. Health Post La Hormiga.
- Alejandra García. Psychologist. Health Post La Hormiga.
- Deyby Tapia. Local Coordinator. Health Post La Hormiga.
- Yolanda González. RFL Volunteer Colombian Red Cross. La Hormiga.
- Karol Lizbeth Moreno- Migrant Attention Post Coordinator. Montebello, Cucuta.
- Leidy Johana Sierra-Nurse. Migrant Attention Post Coordinator. Montebello, Cucuta.
- Mario Oswaldo Castellanos. PSS Focal Point. Norte de Santander Branch.
- Nathael Fransua Monsalve. RFL Volunteer. Migrant Attention Post Coordinator. Montebello, Cucuta.

IFRC:

- Nadia Khoury. Operations Manager, Population Movement Colombia.
- Edwin Armenta. Migration Officer.

ICRC

- Rocío Fischer. Migration Coordinator.
- José Lozano. Field Officer Putumayo.
- Andras Derzsi-Horvath. Field Team Lead.
- Diego Julián Orozco. Protection Officer.

Informants of external agencies:

- Liliana Rojas. Information Management Coordinator. UNICEF.
- Fred Spielberg. Emergencies Coordinator. UNICEF.
- Johana Reina. Protection Coordinator. UNHCR.
- Diana Hernández. Support lawyer. Personería-UNHCR La Hormiga.
- Michele Casalboni. Child Protection Advisor. Save the Children.
- Diana Patricia Zanguña. Social Promoter. Pastoral Social Mocoa.
- Uriel Useda. Priest. Local Church in La Hormiga.
- Julio Cesar Sifontes. President. Funvencol (Venezuelans in Colombia Foundation).
- Henry Gudez. Municipal Coordinator in Puerto Asis. Funvencol (Venezuelans in Colombia Foundation).
- Yosely Carvajalino. Municipal Coordinator in La Hormiga. Funvencol (Venezuelans in Colombia Foundation).

- Yorber Romero. Municipal Coordinator in La Hormiga. Funvencol (Venezuelans in Colombia Foundation).
- Deisy del Carmen Malave. Colaborator in Puerto Asis. Funvencol (Venezuelans in Colombia Foundation).
- Karly Noriega. Colaborator in La Hormiga. Funvencol (Venezuelans in Colombia Foundation).
- Amaly Olivares. Colaborator in La Hormiga. Funvencol (Venezuelans in Colombia Foundation).

Informants of governmental institutions:

- Cindy Carreño. Zone Coordinator. ICBF (Colombian Family Welfare Institute).
- Cielo Calderón. Administrative Officer. ICBF (Colombian Family Welfare Institute).

Visits to:

- Colombian Red Cross Head Quarters. Bogotá.
- Shelter for migrants by the Cundinamarca Branch. Bogotá.
- Red Cross Municipal Unit of Puerto Asis. Puerto Asis-Putumayo.
- RFL Post. La Hormiga-Putumayo.
- Colombian Red Cross Health Post. La Hormiga-Putumayo.
- ICBF. La Hormiga-Putumayo.
- Water Point of the Colombian Red Cross. San Miguel Border.

Ecuador

Meetings within the Red Cross Red Crescent Movement:

Ecuador Red Cross National Society:

- Anaité Vargas. Coordinator National Plan of Population Movement. Values and Principles Manager.
- Juan Garland. Secretary General.
- Ney Valero. Province President of Sucumbíos.
- Roger Zambrano. Disaster Management National Coordinator.
- Richard Miranda. Coordinator Safe Space. CEBAF.
- Jorge Jaramillo. Psychosocial Support Advisor.
- Vanessa Jara Mora. Sexual and Reproductive Health Technician. Youth Program.
- Diego Castellanos. Communications Manager.
- Rocío Altamirano. Technical Support for Volunteers. Volunteering Program.
- Carmen Suarez. Health Advisor.
- Mónica Gallo. Community Health Advisor, Coordinator ECHO Project.

IFRC:

- Roger Calabuig. Country Coordinator.
- ICRC:
 - Laurent Burkhalier. Protection Coordinator.
 - Virginie Myalonnier. Migration and RFL Delegate in Ecuador.

Meetings with external agencies:

- Esperanza Ríos Castro. Technical Advisor for Adolescents. RET International Sucumbíos.

- Claire Hannpe. Focal Point. Norwegian Refugee Council Sucumbíos.
- Rafael Luque. Focal Point. UNICEF Sucumbíos.
- Fernando Calderón. Zone Coordinator. ADRA (Adventist Development and Relief Agency).
- Nolmi Torres. Focal Point. Tirabita Foundation.
- Marjorie Escobar. Advisor. HIAS Sucumbíos.
- José Luis Guerra. Protection Officer. UNICEF.
- Lola Valladares Tayupanta. Gender, Culture and Human Rights Officer. UNFPA.
- Juan Pablo Terminiello. Protection Senior Officer. UNHCR.
- Sofía Baccichetto. Protection Officer. UNHCR.

Visits to:

- CEBAF (Binational Center of Border Attention), including the Safe Space of the Ecuadorian Red Cross and the Friendly Space implemented by HIAS. Sucumbíos.
- Ecuadorian Red Cross Head Quarters.
- UNICEF Ecuador Office.
- UNFPA Ecuador Office.
- UNHCR Ecuador Office.

Appendix 4: Tools for interviews and focus groups discussions.

A) QUESTIONS FOR CHILDREN

Estimated time:

1-1.5 hours for a group of 10-20 children.

Background:

All child participants and their guardians will have signed a consent form in advance or at the time of the focus group discussion.

If it is culturally appropriate/necessary, focus groups can be divided by gender. For example all girls and all boys. In this case, the facilitators should ideally be of the same gender. Where mixed groups of girls and boys are possible then it is ideal to have facilitators of each gender.

Using the questions:

Questions can be translated into small group activities to keep the focus group discussions engaging and interactive. For example:

- Children who answer “yes” can stand on one side of the room and children who answer “no” on another while children who are “unsure” can stand in the middle.
- Children might draw out basic rights at the front of the room or in small groups (e.g. 2a).
- Answers could be collected and then children could vote on the ones they think are most relevant (e.g. for questions 2 c-d, 4a, or 5a)
- Other local activities can be added wherever helpful.

Basic rules for children’s consent

No one under the age of 18 may be interviewed, photographed or filmed without the prior written consent of his or her parent, legal guardian or social worker. This also applies to anonymous interviews, because a child might still be identified from details of his or her story.

When working with an unaccompanied child, consent must be given by the local authority that looks after him or her, and (if relevant) his or her foster carer. A foster carer’s permission alone is not sufficient. Consent can be sought via the child’s social worker or the local authority press team and must be given in writing before the interview takes place.

Children will be informed that their names and identities will not be used in any published material. They do not have to share any information they do not want to and can stop participation in the focus group at any time. There will be psychosocial support personnel available if any child would like to talk to them during or after the session.

Questions:

1. Background / context

- a) Warm-up energizer
- b) How old are you?
- c) What are your favourite activities?

2. Child rights

- a) What rights do you think every child should have? Why? Are they the same rights as when you were living in your home country?
- b) Has anyone ever talked to you about your rights in this camp? If so, what did they talk about?
- c) What rights would you like to learn more about? Why?
- d) What things and support do children need the most here? Why?

3. Needs in migrant communities

- a) Do all children in this place go to school? If not, who does not and why? Is it the same for girls and boys? What can be done to help all children go to school?
- b) If you were separated from your family, what would you do? Who would you talk to or where would you go? What can be done to make this easier for children?
- c) Do you have chances to help make decisions about projects that are for children? If yes, how? What decisions would you like to be more involved in?
- d) Do children have documents like birth certificates?

4. Learning more and getting help

- a) If you needed help, like someone was trying to hurt you or someone you know, who would you talk to? Why that person? Are helping services easy to access here?

5. Any other advice

- a) Do you have any other questions?
- b) Do you have any other advice to make sure children know their rights are safe?

Energizer to end.

B) QUESTIONS FOR KEY INFORMANTS

Estimated time:

30-60 minutes.

Background:

Key informants can include personnel from local government (e.g. ministry responsible for child protection, education, urban planning, health), local NGOs, International NGOs (e.g. PLAN, Save the Children, World Vision), UN agencies (e.g. UNICEF, UNHCR, IOM), and community leaders (e.g. village/city leaders, religious leaders, women's networks).

Clearly explain that we are conducting an assessment with the aim to improve Red Cross services for children. We are seeking trends and no specific comments will be attributed to key informants, e.g. we will not state anything in our assessment like "key informant from (___agency) said '...'"

The following questions are general guides and can be modified as needed. Not all questions might be necessary for all key informants based on context, time available, key informant speciality, etc.

Questions:

1. What protection risks have been documented?

- a) Are they the same for girls and boys? Why?
- b) Are there specific populations at higher risk? Why?
- c) In what situations, times or specific locations are children most unsafe?
- d) Who is committing protection violations, e.g. SGBV?
- e) How well are referral pathways functioning? How can they be improved?

2) What do you view as the most important priorities to protect children? Why?

3) What existing protection systems are in place?

- a) What plans exist from child protection clusters, or similar inter-agency initiatives?
- b) What government systems are in place to protect children? Are they functioning?
- c) Are there any disaster laws to protect children in disasters?

4) What are the main barriers to reach children?

- a) Are they the same for girls and boys?
- b) What can be done to reduce the barriers?
- c) What quick wins can be achieved?

5) What added value do you see the Red Cross as having to protect children? Why?

(6) Questions specifically for Red Cross)

- a) Do we have a child safeguarding policy? What is working or not?
- b) What activities are we implementing to protect children?
- c) What can we be doing better to protect children?
- d) Do we have sex and age disaggregated data on the girls and boys we are reaching?
- e) What are our project timelines?
- f) What partnerships can we pursue to enhance our child protection efforts?
- g) Is there any work on child protection that is successful that we can build on and further scale up?

C) CONSENT FORM

BACKGROUND

The Red Cross is conducting an assessment to improve its work with child migrants moving from Venezuela.

As part of the consultation the Red Cross is seeking guidance from the government, local humanitarian agencies, the United Nations, and from children themselves.

INFORMATION ABOUT THE CONSULTATION

The consultation will involve a group of children who will be asked by Red Cross personnel to give their advice on questions about what child rights are important to them, what actions can be taken to achieve their rights, what they would like to see as priorities, and how to access local helping services.

The consultation will take approximately one to one and a half hours (1 – 1.5 hours).

Children do not have to answer any questions or participate in any activities that they do not want to. They are free to leave at any time. The consultation is designed to be interactive and safe.

This information will not be shared with other agencies and is only for ensuring the proper consent of the child participant.

The Red Cross is committed to ensuring that children have a voice in the design and delivery of our humanitarian services.

PARTICIPANT INFORMATION

Personal information (of child participant)

Last Name: _____ First Name: _____

Gender: male ___ female ___ other _____

Age: _____

Information about adult (parent/caregiver/local community leader) giving permission for child to participate

Last Name: _____ First Name: _____

Relationship to applicant (e.g. parent/caregiver/community leader): _____

Signatures

I, (parent/caregiver/community leader name) _____, hereby give my child (participant's name) _____, permission to attend a consultation hosted by the Red Cross, June _____ (day), 2019.

Appendix 5: WEB-ARTICLE

Providing safe spaces for child migrants in Ecuador

“It is emotional work. When children arrive they are so exhausted and need time to rest, play and not be seen as migrants,” says William Guerra. He is a volunteer with the Ecuador Red Cross supporting a safe space for children in the town of Lago Agrio, in the Province of Sucumbíos, which is a border point with Colombia.

Many of the migrant children and families who arrive at the border come to Colombia from Venezuela as their country experiences severe political and economic distress. The numbers of children who cross this border point can fluctuate each day. Recently there have been as many as thirty and forty children each day, many with a parent or grandparent, but some also migrating alone.

In response to the needs faced by migrant children, the Ecuador Red Cross implements 14 safe spaces in 11 provinces across the country. It also has additional mobile safe spaces it deploys when the number of migrants increase. The mobile spaces support children as they walk for long distances in hard to access locations.

Marisol Pallo, another volunteer in Lago Agrio explains that each safe space provides an assortment of humanitarian services to children and families that seek to improve psychosocial wellbeing and protection. “We see that children here have many needs so we help with first aid, restoring family links, discussing child rights, play, and just let children be surrounded by normal things. We also provide shoes to replace the broken and worn down ones.” Marisol notes, “We need to work hard because we know this is not normal and childhood should not be this way.”

Priscila Naranjo, a local college student who volunteers at the safe space, tell us, “We see so many bad stories about migrants in the news but the reality is so different. Here you see the humanitarian needs and that these are just children like all other children.”

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<https://media.ifrc.org/ifrc/2019/07/22/providing-safe-spaces-child-migrants-ecuador/>