The CPMS can be used to:

- Plan and cost humanitarian interventions
- Establish common and measurable expectations
- Establish agreement on common principles between actors
- Monitor and evaluate the quality and effectiveness
- Guide and evaluate the allocation of funding
- Induct and train new staff or partners
- A self-learning tool and a reference text
- Brief decision-makers on child protection
- Enable those working in other sectors to protect children better.

In 2014, IOM became core member of the global Child Protection Working Group, which is an Area of Responsibility under the Global Protection Cluster. As a result, IOM has committed to uphold, use and promote the Child Protection Minimum Standards in Humanitarian Action (CPMS) throughout its operations, activities and projects at all levels within IOM and with partners.

TIPS ON CHILD PROTECTION:

- Take part in regular meetings of child protection coordination fora (sub-clusters/working groups/sectors).*
- Assess child-specific needs and risks during context and situation analyses, through DTM and other assessment tools.
- Identify child protection partners who can address child-related incidents and advise on referral pathways. These may include national authorities in charge of child protection, UNICEF, specialized INGOs, national NGO and others.
- Consult and liaise with child protection actors for the design and implementation of projects that could have child protection implications.
- Regularly consult www.cpwg.net for inter-agency and other useful tools.

* Currently, child protection sub-clusters/working groups exist in Afghanistan, Burkina Faso, Cameroon, Central African Republic, Chad, Colombia, Cote d’Ivoire, DRC, Eritrea, Ethiopia, Guinea, Haiti, Indonesia, Iraq, Jordan, Kenya, Lebanon, Liberia, Libya, Madagascar, Mali, Mauritania, Myanmar, Niger, Palestine, Pakistan, Philippines, Somalia, South Sudan, Sri Lanka, Sudan, Syria, Ukraine, Yemen and Zimbabwe. For updated information please check: http://cpwg.net/cpwg-coordination-groups/
In Haiti, IOM conducted a communications campaign against child servitude ("restavek" system) to protect vulnerable children following the 2010 earthquake.

Through a Project in South Central Somalia, IOM engages 60 diaspora experts in the health and education sector to increase access to basic services and create employment opportunities for the youth.

In Tunisia, during the Libyan crisis, IOM has facilitated emergency travel documents for unaccompanied and separated children in coordination with other child protection actors.

In the Philippines, during the Haiyan crisis, IOM has developed programmes to target school-aged children with the Climate Adaptation and Disaster Risk Reduction and Education Programme to build resilience to climate-induced hazards in vulnerable communities.

In Micronesia and the Marshall Islands, IOM promotes community stabilization and transition in displaced populations and supports the registration of unaccompanied and separated children and family tracing activities.

In Ukraine, IOM provides shelter and NFI to internally displaced children.

In CAR, IOM has provided evacuation services to children in conflict-affected areas.

IOM medical staff has administrated vaccines in Za’atari camp as part of the campaign led by Jordan’s Ministry of Health to immunize Syrian and Jordanian children against polio and raise awareness on the disease.

In Iraq, Niger, Syria and South Sudan, camp managers receive trainings on how to mainstream MHPSS considerations and psychological first aid.

In Burundi, IOM supports reintegration of IDP and returnee children and promotes community stability through equitable access to sustainable livelihoods and basic social services.

In Colombia, IOM supports the prevention and response to children’s affiliation with illegal armed groups through awareness-raising, institutional strengthening, public education and other social investment initiatives.

In Tunisia, during the Libyan crisis, IOM has facilitated emergency travel documents for unaccompanied and separated children, and supports the registration of unaccompanied and separated children and family tracing activities.

In Micronesia and the Marshall Islands, IOM targets school-aged children with the Climate Adaptation and Disaster Risk Reduction and Education Programme to build resilience to climate-induced hazards in vulnerable communities.

In Colombia, IOM supports the prevention and response to children’s affiliation with illegal armed groups through awareness-raising, institutional strengthening, public education and other social investment initiatives.

In Ukraine, IOM provides shelter and NFI to internally displaced children.

In CAR, IOM has provided evacuation services to children in conflict-affected areas.

IOM medical staff has administrated vaccines in Za’atari camp as part of the campaign led by Jordan’s Ministry of Health to immunize Syrian and Jordanian children against polio and raise awareness on the disease.

In Iraq, Niger, Syria and South Sudan, camp managers receive trainings on how to mainstream MHPSS considerations and psychological first aid.

In Burundi, IOM supports reintegration of IDP and returnee children and promotes community stability through equitable access to sustainable livelihoods and basic social services.

In Colombia, IOM supports the prevention and response to children’s affiliation with illegal armed groups through awareness-raising, institutional strengthening, public education and other social investment initiatives.

CONTACT
Redirect any query on child protection in emergencies to:
Laura Lungarotti
llungarotti@iom.int
Monica Noriega
mnoriega@iom.int