

Lessons from Senegal's Database System for Case Management for Child Protection: A Pilot Project on Web-based and Mobile Technology

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Abstract This case study on the Database System for Case Management for Child Protection in Senegal focuses on rapid monitoring for immediate use in service delivery and (thus) complements other country studies in this *IDS Bulletin*. The case provides an exciting initiative with much potential for improving child protection services, as well as additional information generation with the potential for broader monitoring, advocacy and operations research. The challenges centre on the need for clearer definition and agreement of roles and responsibilities between actors at different levels, as well as coming to an agreed balance of the sharing of data on individual cases with data protection, for confidentiality. The key lesson has been the importance of a collaborative process of developing the system with diverse actors in child protection, coupled with an accompanying consultative process of developing an inter-sectoral national child protection strategy: in other words, a way of establishing *common standards* together.

1 Introduction

The aim of this study was to understand a chosen example of a real-time monitoring (RTM) intervention in depth, to assess its achievements and discuss the potential of possible modifications. The method has involved a process of mutual learning between IDS, UNICEF and partners at multiple levels; before, during and after a mission to Senegal which took place from 7–16 December 2011. The 'Database System for Case Management for Child Protection in Senegal' was one of several examples selected for in-depth analysis to (in aggregate) provide a baseline assessment, and to extend our knowledge of strategies and mechanisms that appear to have a good chance of success in achieving key objectives of RTM for the Most Vulnerable (RTMMV) children. The Senegal case study was chosen as it focuses on rapid and ongoing monitoring for immediate service delivery and (thus) complements many other country studies, often focusing on periodic (if frequent) monitoring systems used for tracking trends and/or policy development, rather than monitoring activities on a daily basis.

This article is structured into three main sections, with sub-sections. We start in this introductory part, with a conceptual framework for the study, as well as the methodology and limitations. The main section presents detailed research findings, including an overall description of the initiative, the quality of the monitoring data generated, considerations of equity and exclusions, the usefulness of the monitoring system to potential users and its value added (including relevance for policy and advocacy), costs and sustainability. We then close the article with summative reflections and lessons learned in conclusion.

1.1 Framework: child protection, case management and real-time monitoring

Several generations of children growing up, over recent decades in parts of sub-Saharan Africa, have experienced progressively deepening challenges with multiple crises, sometimes combining and often posing severe threats to their long-term welfare. Children's needs and vulnerabilities are unique and complex and

derive from challenges in multiple dimensions or domains (such as from health-related, psychosocial, educational, physical or economic hardships), as well as due to their dependence on adults and relative lack of autonomy or legal status. Hence, children's needs and vulnerabilities are not only multidimensional, but often also inter-connected. In other words, crises in one area such as poverty, often leads to problems in others, such as education, experience of violence, crime or ill-health.

However, children's needs and vulnerabilities are not only unique – or 'specific' – in the sense of being different from those of adults (e.g. due to dependence and lack of legal majority), but also diverse and shifting as children mature and grow older. This time-specific, or 'time-sensitive', aspect of children's vulnerabilities means that crises for individual children need to be prevented, managed (in relation to the potentially multiple sources of risk and of support) and followed up through ongoing support and referral (Edström 2007). So, children's vulnerabilities and their needs for protection are both:

- i multidimensional – thus requiring cross-sectoral support; and
- ii evolving and shifting – thus being 'time-sensitive' in terms of support.

Individual children have different needs and priorities at different ages and stages, as recognised in UNICEF's promotion of child-centred approaches, which are also *child-developmental*. Senegal's draft National Strategy for Child Protection (République du Sénégal 2011) reflects well this multidimensional and dynamic understanding of children's vulnerabilities.² Responding to these shifting needs over time requires an individual (but real-life contextualised) focus as well as an ability to rapidly assess and respond to these in real time – that is, before it is 'too late' for any given child.

Child protection calls for specifically protecting 'the most vulnerable', and not merely 'most of the vulnerable' children. Many sectoral services (such as maternal and child health, social protection, education for all, etc.) can meet most needs of most children who are vulnerable, by simply doing their work in an inclusive (especially in terms of 'vertical' socioeconomic equity between the poor and better off) and

child-sensitive fashion. However, the children who are the *most vulnerable* are often precisely those who fall through the nets of even relatively good sectoral programmes. A key challenge for *equity* and for eliminating exclusion problems in social protection, education and health, as well as for strengthening child protection, is that of *identifying* such *individual* vulnerable children and managing their complex needs across a range of areas, or sectors, in an integrated fashion.³

Child-sensitive universal services and protection schemes must therefore also be complemented by child-specific management and monitoring in real time (rather than simply issue-specific, such as HIV- or violence-related). This requires 'case management' across services by qualified and officially mandated social workers and/or other appropriate civil society actors, supported by effective referral systems across services, sectors and over time (Roelen *et al.* 2012).

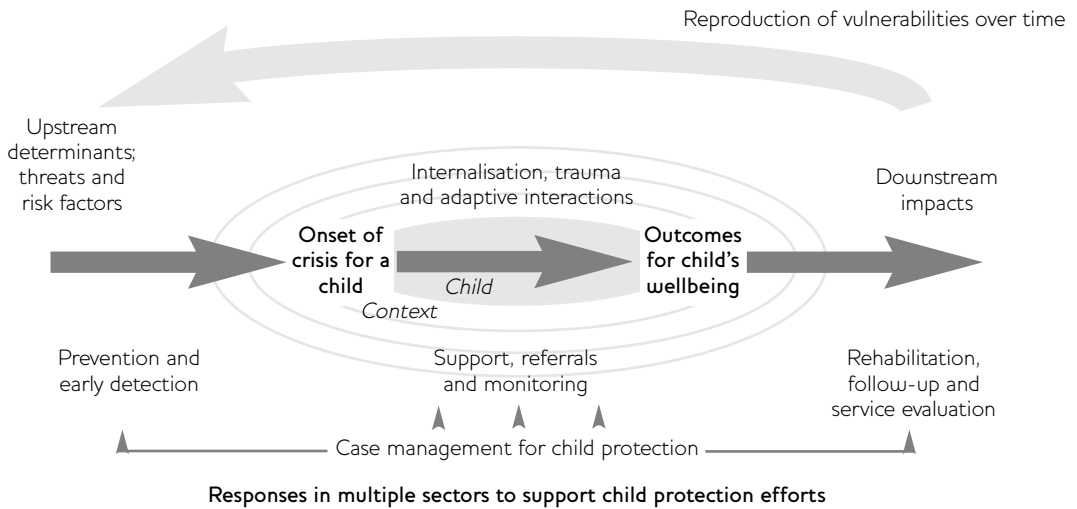
Early detection or identification of specific cases often occurs in different sectors (in hospitals, in schools or by the police on the streets) or through different community level organisations or processes. Hence, case management and referrals need to interface between formal and informal systems. Referrals and solutions are often made at community level, but many children still 'fall under the radar' (including by leaving their community and migrating into urban areas) and effective protection requires professional risk assessment, objectivity and confidential management of cases.

Even if many actors and institutions may be involved in these processes, ideally individual cases of children in need of protection should be overseen, followed and managed by one identified, qualified and mandated professional (even if supervising others, e.g. volunteers, to make home visits, etc.). Due to its time-sensitive nature, as with addressing crises such as impacts of HIV or child hunger, child protection can broadly be thought of in terms of 'stages',⁴ such as:

- i Prevention and detection;
- ii Management, monitoring and support; and
- iii Follow-up and evaluation.

Figure 1 interrelates the above, time-sensitive and multidimensional vulnerability of children to the idea of case management in child protection.

Figure 1 A case management response to child protection over time



Source Author's own. Note: A similar version also appears in Roelen *et al.* (2012).

1.2 Methodology and limitations

The Senegal study team involved an IDS Research Fellow working in close collaboration with an external research consultant and UNICEF professional staff from Headquarters in New York. The team aimed to evaluate the initiative under four broad headings: (1) the quality of the information generated; (2) its inclusivity in terms of reflecting the situation of all members of the targeted vulnerable population; (3) the extent to which it meets the stated information needs of a range of potential users; and (4) the extent to which it is actually used for advocacy, operational activities or policy. A strategic combination of methods were employed, namely: literature review of documentation provided by UNICEF Senegal, tailored semi-structured interviews, with purposively selected key informants, as well as facilitated group discussion on particular questions and broader debates in two workshops.

Certain caveats and limitations remain in the methodology, nevertheless. First, the positionalities of the team as 'outsiders' to the programme is a potential limitation, although mitigated by the team composition allowing for triangulating perspectives and the interactive and dialectical approach to the inquiry, which provided ample space for local inputs, including an end-of-visit consultation and validation workshop, which was designed to directly and

transparently open the team's preliminary findings and interpretations to validation and revision. Another important limitation was the fact that the team had *no direct access to the database* itself (given the confidential nature of its contents), although this was partially mitigated by virtual demonstration by the private company Manobi, which had designed the system in Senegal. A related limitation was that of the difficulty in accessing child 'beneficiaries' for both practical and research ethical reasons. Instead the team met with adults affected by one case. Finally, the timing of the visit – at a phase when the initiative is transitioning between a pilot phase (phase one) and institutionalisation with local authorities and a broader range of partners – implied further challenges in terms of the system's full functionality, discussed in detail below. On the other hand, the latter also proved to be an opportunity for maximising any utility of findings for stakeholders in Senegal.

2 Findings from the field

2.1 Description of the initiative in Senegal

UNICEF's country office in Senegal initiated a programme that aims to support child victims of abuse and exploitation, or living in high-risk situations, to reintegrate them with their families and communities in three prefectures (two in/near Dakar; one in the South), and to provide them with a protective environment in which to grow and develop. Within this larger

programme, a pilot project was launched to develop a case management system supported by a tailor-made database system. As this pilot was in the process of transition, with some nine partners engaged at the time of the study, the initiative was limited in terms of scale; both geographically and in terms of absolute numbers. With some 300 cases said to be entered in the database (duplication of cases and other concerns are discussed further below) and with little reliable information available on the overall scale of children in need of protection in Senegal, little can be said about its overall coverage. However, it is important to stress that this initiative is intended to help with responding to actual cases identified and to be scaled up, which is also hoped to improve national capacities to monitor scale and trends.

The central strategy in this project has been the development of a database system with the overall goal to support the case management, monitoring and reintegration process of separated children, children living in high-risk situations, as well as child victims of violence and/or exploitation. The two stated key objectives of the database system are:

- i to improve partner coordination and efficient management of the process of reintegrating and monitoring of vulnerable children in their families of origin; and
- ii to speed up and make more efficient the case management process throughout the different steps of care and protection of children [who are] victims of violence, exploitation or at high-risk. (UNICEF n.d.)

The initiative was developed to enable a range of social workers (including civil society actors with varying levels of training) to better meet the needs of highly vulnerable and at risk children through the use of a tailored database on the internet. This was to be supported by mobile phones and PDA handsets for gathering, entering and transmitting data about specific children at risk or highly vulnerable and, thus, in need of protection. An interagency child protection data management system was developed with Manobi as a tool for case management and referral, to facilitate the provision of child protection and family reintegration services. The intention is that organisations and services linked to the data system are able to share common referral

pathways – with clearly defined policies, procedures and levels of access to data – in order to enable appropriate information sharing, coordination and collaborative case management.

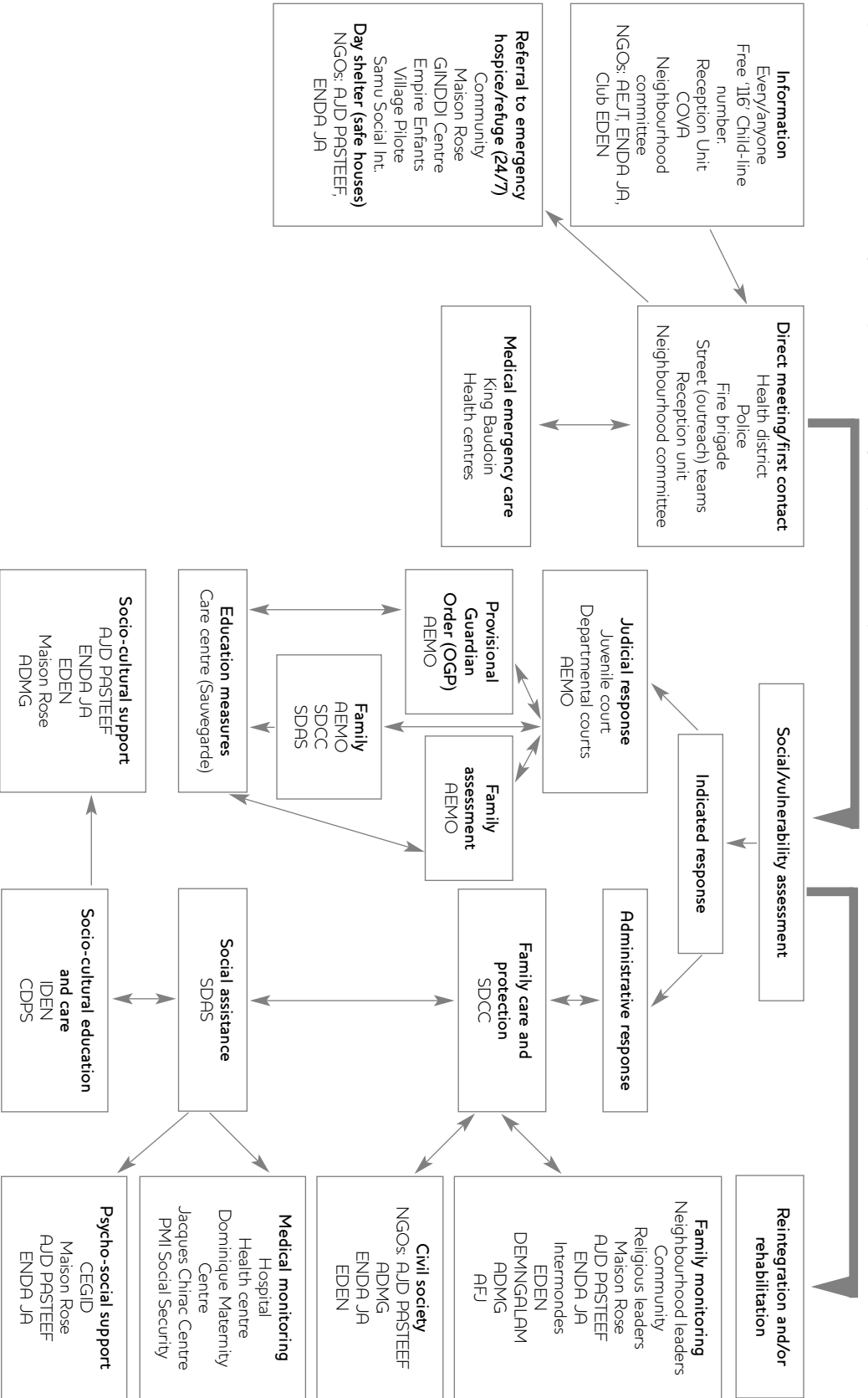
The platform was being used primarily by local level partners in contact with individual children (e.g. NGOs and some decentralised governmental services), although the intention is to achieve integration and users at more central and aggregate levels over time. The database system (with its related mobile devices) contains information on vulnerable children, the services offered by NGOs and service providers, and current guidelines for practice along the referral pathways. It is designed to facilitate several aspects of the partners' work, such as: the identification and monitoring of vulnerable children and those at risk; registering them with the civil registration systems; monitoring the reintegration process to sustain positive outcomes; and mapping, or locating, community resources and social actors who provide relevant services for child protection.

Data on vulnerable children are collected and then entered on a web-based database, with a tailored software application jointly developed by UNICEF and Manobi, the Senegalese service operator. This web-based database allows for uploading child and family assessment forms, as well as more basic initial information on a case. The system was designed with functionalities for mobile phones (rapid SMS for alerting and reporting on cases) and smartphones (PDAs) for field-level data entry and access, which worked in phase one. Functionality with access and data-sharing on cases has encountered some limitations in terms of file-synchronisation and as a result of increased limitations on data-sharing in the current transition phase (explored further below).

2.2 Information management

The main users of the database system are NGOs involved in the provision of child protection services at community levels, as well as local government services concerned with child protection. At the time of the study UNICEF oversaw the initiative with Manobi, which was contracted to design, amend and host the system, as well as to provide technical support to partners in its use. The oversight and central management of the database was

Figure 2 Overview of case management system's referral pathways in Guédiawaye



Source: Authors' translation of a slide from a UNICEF presentation on the system.

foreseen to be taken on by an appropriate national institution, which was being debated and consulted on.

After first contact and entry of a case into the system, a fuller vulnerability assessment should be made in each case, following guidance available on the system. The web-based system is then divided into two referral pathways: one for intervention services including emergency care and protection, and a second one for other intervention services in preparation for family (or other) reintegration. Figure 2 illustrates a rough schematic overview of the system and its referral pathways over the broad stages from identification, through assessment and support to reintegration, or rehabilitation.

The design of the database system technically enables collaboration between agencies on individual children (or ‘cases’), although this collaboration is partly dependent on levels of information sharing agreed across the system. The start of the second phase of the initiative included the broadening of the scope of types of child protection cases and an upgrade of the web-based database, which was originally developed to support initiatives related to street children. This second phase was also meant to strengthen the database coordination by bringing in more institutional users. This latter objective brought reluctance among some users regarding the sharing of information, as ministries and some NGOs felt less confident about sharing their respective data due to the confidentiality of the information. Consequently, the reported reduction of data-sharing among users also resulted in reduced synchronisation of the database.

The implementing organisations thus track, collate and report data on their own caseloads and can use it for monitoring their own work. Manobi and UNICEF, as overall coordinators of running the database, have access to cases but do not perform the functions of data-cleaning or generating regular reports. These functions are envisaged to become agreed as the plans for handover to a national institution are agreed.

2.3 *Quality of information*

Every day, professionals in the area of child protection are faced with children affected with various kinds and degrees of vulnerability. The management of these cases poses several

challenges, in particular how to characterise and assess the vulnerability of children and their environment, to ensure the time efficiency and appropriate responses.

Whilst a broad, inclusive and multi-faceted definition of vulnerable children is provided by the family code and penal code, as well as by the recently adopted National Strategy for Child Protection, as discussed above, this may in itself be too broad to be readily useful to all the different users of the database for assessing precisely when a child is ‘vulnerable’ or ‘in danger’ or for providing a clear division of roles between social, educational and judicial services. There is recognition of a need for clarification of some of the concepts used in the national definition and/or some simpler complementary guidelines for identification and assessment in different kinds of individual cases. A document on standards and minimum service provision in child protection is being developed by national stakeholders with UNICEF (Comité Restreint 2011).

Nevertheless, whilst the assessment of individual children’s vulnerability is conducted by different social actors in the field, the web-based database has provided some guidance and common standards on how to do so. Indeed, the design of the web-based database, and the way the collected information needs to be entered, does provide an overall framework for the assessment of children’s vulnerability. When a user enters information on a specific case in the database, s/he has to indicate the suspected kind of neglect or type of abuse (physical violence, rape, street children, etc.) as well as the assessed degree of vulnerability (not vulnerable, vulnerable, and very vulnerable). Furthermore, the database allows each user to add a subjective assessment and comments related to the information entered in the database. There was no clear specific ‘validation process’ for assessing vulnerability, but it was done and agreed in practice between the different social workers collaborating around similar individual cases. Furthermore, as the system guides a referred case into indicated management pathways, a further step in the process will often validate the nature, veracity and/or severity of a reported issue (such as a medical doctor investigating a claim of rape, or a family visit to explore a reportedly vulnerable child’s family situation).

The phase one data entry by authorised users indicated that different users used the platform in different ways as a case management tool. Initial observations also indicated that due to their different type of work (promotion of child rights, protection of women and girls, shelter etc.), different types of NGOs use different case management processes and focus on different target groups (e.g. by age, gender or life situation – such as ‘street children’) and they did not have access to the records on cases of other organisations, unless these had been specifically referred. As a result, duplication of some information recorded in the database is very likely, such that the same child could be registered in different files under different names and managed by different organisations. Even if this does not necessarily have implications for the quality of child protection services provided by any given NGO, it could compromise their ability to coordinate efforts in the overall support to a child. Furthermore, these constraints to sharing also compromised the broader potential uses of the database for statistical purposes or policy analysis. This presented challenges in: generating accurate indicators for overall performance; making any reliable overall analysis of trends; and the coordination of case management between actors. In the absence of a clear control and coordination mechanism, the platform has had difficulties in providing quality data for higher level decision-making.

The original design and practice in phase one had involved a higher level of data-sharing between organisations on individual cases (which indeed is central to the system’s purpose), whilst by the transition phase – or at the time of the study – information sharing on cases had closed down, reportedly arising from confidentiality concerns with new organisations coming into the system. Confidentiality and appropriate data-sharing are clearly both needed in a system of this kind and both have relatively straightforward technical software solutions, with such functionalities in fact already programmed into the system. This balancing act – along with the elaboration of practical protocols and guidelines – needs to be backed up by a functioning broader, institutionally ‘anchored’ and multi-sectoral child protection system, which is still being strengthened on an ongoing basis. The pilot phase of the database has showed some possible ways to do this practically at

the local level, but it has also demonstrated broader challenges for institutionalising it and making it operational across a broader set of actors and sectors in a broader developing context.

2.4 Monitoring indicators, information access and dissemination

Whilst the entire database has been a tool for monitoring the management of individual children’s cases over time and between actors and sectors, additional monitoring indicators were developed within the project, with several potential functions, such as: monitoring the performance and work of partner NGOs (including self-monitoring); the identification of bottlenecks and constraints in existing intended referral pathways; and more aggregate analyses of trends and caseloads. By definition, and being limited to actual cases responsively identified (as well as having a limited geographical coverage), it is difficult to imagine the system as representative in terms of tracking broader trends – at least at this level of scale and operation. Furthermore, the additional challenges to data quality, identified above, have limited the reliability of numbers counted in the system.

Nevertheless, for basic tracking and monitoring of the work, the indicators are clearly potentially useful and they have also been refined for phase two. However, at the time of the study these were not operational for most users, which was linked to the restricted information sharing and unclear roles in overall management of the information. There was a plan to put in place an ‘observatory’ for reviewing total numbers and trends on a quarterly basis, but the composition or institutional location of this body was not yet agreed.

Whilst this system and its indicators were not intended primarily as a tool to measure and monitor the overall situation of vulnerable children in the country, there would seem to be some potentials for interrelating measures and trends in caseloads, etc. with broader indicators from repeated surveys on health, education or social and economic conditions for children (see also sub-sections below).

Effective access to information on a child’s case contained in the database was possible in the initial phase whereas in the transition phase the

access and use of records was restricted to the immediate organisations concerned. In addition, there was a deficit in the dissemination of information. Each of the organisations involved only used the information it had generated and posted in the database. Information collected from resource people interviewed in this study revealed the crucial need of better interaction between the different actors, as a way to fill the gap between them for better handling the cases on their rosters.

Consequently, there was a clear need for better collaboration between the organisations concerned, including on defining the terms of their collaboration in child protection and the conditions for sharing data and other information on individual cases. It was suggested as important that the different partners – including civil society organisations – involved in the project, define a mechanism to disseminate and share information generated in the database, under the leadership of the Senegalese government and in collaboration with UNICEF.

2.5 Equity for the most vulnerable and inclusivity of the system

In the conceptual framing of this study, we noted that (i) whilst many development and welfare policies and programmes aim to help the majority of children, many others fall between the cracks and are excluded from benefits and services; and (ii) that child protection aims to accommodate for such children by responding directly to their individual needs, or cases. Yet, as in any system, some children are still excluded. What may be some of the characteristics which obstruct equitable access for some children or exclude them in the process of child protection? In this study we asked several practitioners and policymakers: ‘In what ways does the current case management system still exclude some vulnerable children?’, as well as how this may be improved.

In conceptualising equity and access here, the broader IDS–UNICEF RTMMV study had delineated ‘vertical equity’ versus ‘horizontal equity’ (Greeley *et al.*, this *IDS Bulletin*). The former – vertical equity – refers to reaching or including those disadvantaged by economic deprivation whereas the latter – horizontal equity – refers to those disadvantaged by class, gender and other sources of marginalisation and social exclusion. Whilst child protection is not primarily

about poverty reduction – but rather the protection of the excluded, abused, neglected or otherwise marginalised – the two aspects do interrelate in complex ways (see discussion on the framing of vulnerability, above), since social marginalisation can deepen poverty and vice versa (making poor and socially excluded children some of the most vulnerable). By focusing on its primary function to protect the marginalised and socially excluded to realise horizontal equity, child protection can thus also contribute to poverty reduction and improvement for some of the poorest children (vertical equity), by reaching children in this nexus and by improving functional linking across services – including to social protection, or social assistance. Thus, effective case management for child protection can broaden and integrate the response to the most vulnerable children in both horizontal and vertical ways. Yet, whilst child protection can improve referrals to social protection or assistance, such services also need to become better at accommodating the particular features of such excluded and marginal cases.

At present, however, social assistance responses at community level remain fairly traditional, responsive and non-systematised. In addition, whilst the database system for case management in Senegal contained some information on children’s family situations this was not directly linked to any social protection system or register. Individual cases could get referred for social assistance, but given the child protection focus and responsiveness to individual cases (rather than identification of cases through broader comparative sampling), the system was not set up to monitor child poverty across the board. The focus is thus primarily on horizontal equity and reaching those socially excluded. This reaches ‘some’ of the poorest children *de facto*, but further contributions to child poverty reduction will rely on the extent of effective linking to a broader social protection system, or range of options.

In broad terms, equity concerns came out in relation to detection and access (constrained by both capacity questions in terms of hotline services and design – or ‘orientation’ – biases in the programme, case management information options and approaches adopted), as well as in terms of equitable or inequitable aspects to management on support of cases. For example,

the child protection telephone hotline, ‘the green line (116)’, was established in the framework of this project and represents an important step towards broad and free and open access to protection and support for any child.

Nevertheless, there were recognised limits observed in the handling of the free green line, such as limited personnel and a single phone-line constraining direct access. Informants suggested creating an internet page, which could fill this gap to some extent and provide complementary information and guidance to children in a vulnerable or critical condition. In addition, such an internet page, or website, could be designed to raise the visibility of children in need of protection and contribute to abating their marginalisation and vulnerability.

More generally, discussions in group settings underlined the necessity to include in the case management database a broader range of practical preventive information and avenues for targeting support to respond to some predominant information on children’s condition. In particular, it was felt that there was a need to strengthen the assistance and care provision system *within their respective families* (such as guidance, psycho-social support and attending to a range of family-level challenges in terms of economic assistance or access to educational and medical services). Considering the ever-increasing demand for social services, an assistance system could support families as a way to reduce children’s vulnerability at the grass roots level, which could be linked and integrated with the case management database. This relates to issues of vertical equity and the need for the system to better link to broader poverty reduction and monitoring efforts.

In terms of horizontal equity, there was a felt concern that certain categories of vulnerable children were more excluded than others, due to the history of the programme having started as being aimed at street children primarily. This had subsequently shifted to include other groups and categories, but a remaining gap was said to lie in the care and protection of *disabled children*. Since disabled children were not taken into account explicitly in the project, there was a perceived strong need to make adjustments that would take into account their specific situations. Senegal already has something of a referral structure for this, in what is known as the

‘inclusion system’, set up by the national Ministry of Education. In the process of integrating the different services, however, the different sectors involved in the supply services for – and the care of – children may need to work with stronger synergy in support of child protection in general and the protection of disabled children in particular.

Yet another dimension of concerns raised over equity in this case management system related to differences in local contexts. One focus group during the validation workshop compared the risk and vulnerability levels of children within the *urban space* of Dakar to that of children in rural areas and – engaging with the relative aspects of vulnerability in its multiple forms – underlined a need to adapt any initiative to the specific context, as the system gets scaled up and applied in new and more rural contexts.

2.6 *The system’s utility for meeting information needs of potential users*

Many positive aspects of usefulness in this system were observed and described in the study. For example, the harmonisation in the standards applied by agencies in the fieldwork, and for monitoring, had improved their ability to provide and access relevant information. The system has also allowed for speedier monitoring of the management of cases, through faster information management and immediate access to certain key information. There was also a better coordination between partners, including better and speedier identification of bottlenecks in referrals. The system has allowed for better management and monitoring of staff in their outreach/support work and it has made for more effective and cost-effective management of child protection cases. A more effective and secure documentation and recordkeeping by agencies, in turn, has proved highly useful with easier production of annual reports. There was also recognition of a largely unrealised potential for using the database in operations research, which could also broaden the range of potential users.

On the other hand, two key challenges were limiting the system’s use and usefulness. First, the sharing constraints implied by the confidentiality concerns over case-information and, second, the need to build capacities of partners and any future overall management of the system. It was broadly agreed that it is

important to identify exactly what information should be shared by and with whom. In terms of capacity constraints, three levels were identified as in need of being addressed in a coordinated way, namely, what the database case management system can achieve as a tool, what can be achieved in terms of different users' abilities (including training, mandates and existing capabilities, etc.), as well as 'what can be done' within the parameters of the law and good practice. In addition, the system's utility has been somewhat limited by constraints in capacities for response in some areas (such as limitations in shelter places or the free hotline capacity), but the system has also facilitated the identification of options and should generate some information needed to better plan and provide for building response capacity.

2.7 Value added, costs and sustainability

Clearly, the primary value added of the system is one of improving individual case management for child protection in all aspects from early detection, through coordinated referrals and support, to follow-up for reintegration or rehabilitation. Secondary benefits and additional potential uses of the system may prove to be equally important in the longer term – and as the system gets institutionalised, improved and scaled up – but it is important to also acknowledge the project's demonstration effects, which have already proven helpful. It has also highlighted specific issues like bottlenecks in referral pathways and it was said to have influenced the development of the national strategy. For example, a bottleneck in the access to medical diagnosis in cases of suspected child abuse was highlighted by the system and subsequently raised and addressed at higher levels. A key finding from the mission was that the consultative inter-sectoral processes triggered may ultimately be as important as the database itself.

For a cross-sectoral and multi-site initiative (potentially national in scale, for the future) a safe and reliable institutional home – or 'anchorage' – of the database was clearly needed for scaling up, for quality control and for sustainability. This also demands some focus on financial sustainability. Whilst it was not yet agreed how these functions should best be secured, there was more agreement that the process for arriving at a consensual solution is the key to successfully defining these answers. The development of the

database system itself was rather costly at approx. US\$170,000, which also included the basic equipment for the actors (PDAs and mobiles) and the training of all actors. It was especially costly if we include the cost for the recent upgrade of the system, which included further coaching of actors and training (an additional approx. US\$100,000). Ultimately, the initiative is meant to be transferred to the government of Senegal, under the condition that a coordinating national body and national resources are identified in order to sustain the system. It was encouraging to note a significant level of political interest in the initiative, suggesting that the Senegalese government had started to take some ownership of the project, whilst there was nevertheless a felt need for political leaders to take a clearer leadership role in the project.

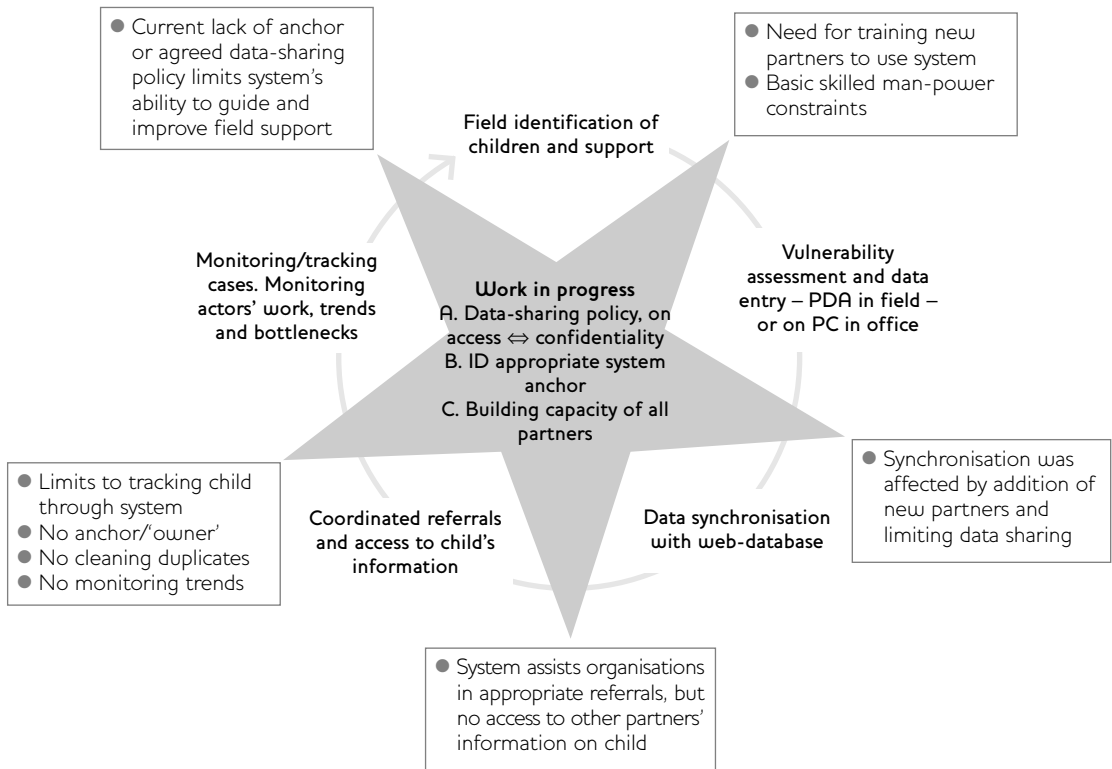
3 Conclusion

This project provides an exciting concept and initiative, with much potential for improving child protection services for individual children, as well as additional information generation for broader monitoring, advocacy and operations research. Benefits include both intended benefits and others resulting from the process of development and piloting. Some drawbacks identified point to a strong need for clearer definition and agreement of roles and responsibilities between actors and sectors at different levels, which limit data-sharing and the ability to clean data and access aggregate information. Other challenges involve cost considerations and ensuring appropriate support to users in terms of capacity building. Figure 3 illustrates how these constraints can be seen to compromise the functionality of the system, and also highlights the identified areas for progress needed.

Once data-sharing functionalities are improved with appropriate checks and balances to protect sensitive and confidential information, responsibilities for central management and development of reports for higher level monitoring of trends and performance holds good promises. However, the central challenge and priority appeared to be to find an appropriate anchoring of the system within the institutional architecture engaged with the national strategy for child protection.

Whilst child protection is not primarily about poverty reduction – but rather the protection of

Figure 3 Current constraints in data-sharing, central management and partner capacity



Source Author's own.

the excluded, abused, neglected or otherwise marginalised – the two do interrelate in complex ways. By focusing on its primary function to protect the marginalised and excluded (improve horizontal equity), child protection can also contribute to poverty reduction for the poorest children (vertical equity). By improving functional linking across services – including social protection, or social assistance – case management should broaden the response to the most vulnerable children.

A few key lessons can be drawn from this initiative and process, which are important to consider for sharing this experience with other countries and for guiding other UNICEF Country Offices in supporting such initiatives, if through adaptation rather than replication. These lessons include:

- *Focus on equity and access for children* – concentrate the focus on horizontal equity by strengthening system sensitivity to a wider range of children at risk and link the system

to broader social protection to enhance vertical equity and poverty reduction.

- *Balance information sharing with the protection of confidential data* – this crucial principle has technical solutions in multi-user database design, but also requires a carefully facilitated process of consultation, which is both programmatic and political.
- *Anchor the system with appropriate and legitimate central management* – as with data-sharing and protection, this is a political as well as technical process, but it may need a clear anchor within the state, for reasons of both legitimacy and sustainability.
- *Mobilise sustainable resourcing and capacity building 'close to home'* – resourcing and capacity strengthening needs to mobilise local resources in a sustainable way, within a national response, whilst external partners can provide specific assistance.
- *Facilitate a collaborative and adaptive process as the key to prospects of success* – the key roles of UNICEF and other external actors are those of facilitating and supporting such efforts.

Maybe the single most important lesson from this initiative has been the collaborative and consultative process of developing the system with such a diverse range of actors in child protection at local levels. This was said to be central to its functionality and usefulness. Also constructive in this was the existence of an accompanying process of developing an inter-sectoral national child protection strategy.

In Senegal, this process appeared to have brought disparate actors together and a more shared commitment and energy to a national strategy and approach to child protection was said to be emerging. Within this context, two concrete drivers of progress here have included (i) the development of the integrated service delivery system in the selected districts, essentially setting some standards and (ii) the revision of the case management process with its operational standards. These two elements, which are parts of the national strategy, have proved crucial to the development and improvement of the system. Beyond that, the key standards to agree are not merely technical, nor just for the users, but those for balancing data-sharing and data protection, as well as those for a secure, legitimate and accountable central management of the database, or ‘anchoring’ of the system. In other words, agreeing together the *common* standards.

Notes

- 1 The team was led by Jerker Edström, of IDS, with the expert support of Amadou Moreau, a consultant to IDS, and Xavier Sire, of UNICEF’s Division of Policy and Strategy at Headquarters. We would like to thank the staff of the UNICEF Country Office in Senegal for the excellent support, for engaging in the study and for facilitating logistical and diplomatic arrangements, including the Country Representative, Giovanna Barberis, and our key contact, Child Protection Specialist Daniela Luciani, for close engagement in the work. In addition, we thank other colleagues from the office, who engaged directly with the work and, maybe most importantly, we would like to express our heartfelt thanks to the more than 40 people we met, without whose wisdom and insights made this rapid study possible.
- 2 Authors’ translation from footnote 7 of the National Strategy: ‘The definition of a

4 Postscript

Communications from the UNICEF Country Office in Dakar, Senegal, have indicated that certain developments following the visit may be useful to reflect on. There has indeed been follow-up work on developing a data-sharing policy, soon after the visit. For example, in certain cases initially registered by NGOs and referred to the justice sector, for example, the NGO should now be able to track the path of the case, although certain information (such as legally sensitive or medical information) would not be shared and would only be accessible by certain actors. The continued debate and development of such a policy must be seen as very positive and supports our conclusion that it is the process which matters fundamentally in this kind of initiative.

With respect to the findings and discussion around the institutional anchorage of the initiative within the state, it is important to point out that, since the visit, a restructuring of ministerial responsibilities in child protection has resulted in the Ministry of the Family now having a clear leading role in the National Strategy for Child Protection. This may indeed simplify the institutional architecture and improve the feasibility of anchoring the initiative, but further speculation on this is beyond the scope of this article.

vulnerable child in this Strategy is a *relative* definition since the definition focuses attention on those, amongst all children exposed to risks, who are least advantaged on a basis of probability. This is also a *universal* definition since abuse or labour/exploitation can [make] all children vulnerable, even those who have never experienced “the street”. The definition also has a *dynamic* sense, since the same child can enter and emerge from vulnerable life situations several times during childhood, thus underlining the necessity of preventive and not only curative actions [*sic.*]. The definition considers the factor of resilience which many children develop under stress and difficult life conditions. Finally, the definition is *multidimensional* and it considers the child in a holistic fashion and [that] her/his needs/rights can become affected from risks pertaining to different domains, whilst being of equal importance’ (République du Sénégal 2011: 16).

- 3 The Senegal Strategy defines ‘Child Protection’ as follows: ‘To make every effort to – within any context – prevent the maltreatment, neglect, exploitation and violence which children are exposed to, to respond and to eliminate these. It [child protection] often concerns a specialised sector of the police or social services, but which of necessity works explicitly with other sectors, with which it is sometimes integrated’ (République du Sénégal 2011). Translation by the authors.
- 4 Stakeholders in Senegal’s case management initiative (Comité Restreint 2011) identify different steps depending on the nature of child vulnerability and risk, such as for victims of abuse, children in conflict with the law or children separated from their family. In the

latter case, which was the main category of children addressed in the original pilot phase of the project, a series of eight steps in this pathway from detection to rehabilitation, were recognised:

- 1 Identification of the child;
- 2 Taking the child into emergency care;
- 3 Listening to the child;
- 4 Assessment of the child’s personal situation;
- 5 Assessment of the family’s situation and the child’s context;
- 6 Social and professional reintegration of the child;
- 7 Monitoring the child after reintegration with the family/or community;
- 8 Alternative care [placement] of children outside of the family.

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