NOTES of the Semi-structure interviews

Syria Damascus

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings Framework within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- If yes, what strategies have you found to be the most effective in achieving your objectives?
    - Language and definition- webinars but limited knolede- it is same same thing but called differently- we are already doing but we do not see them in a framework.
    - By defoult kids are priority – mother disable single mother women in breast feeding age- standard operating procedure but not separate with another framework. Too many initiatives – not time to segregate one form the othere- both is sinking hitted by 2 side we go to one side the ongloing and back to back- no luxury to seat down and think – only life saving and sustaining – cholera and hearquake – on average 15-16 emergengy military security contingency plan continui 6-5 outbreak measles leamania cholera, etc displacement – same staff to address all these emergencies.
    - Severity scale approach – number of indicator to list the conutry/district - Element of
    - Good health phisical and mental health – yes it is relevant- we include in all our work – wemen – Direct service , Modile static, health supply capacity buiding - outreach to the community.
    - Vaccination desaese surveillance – assitance packages – a mix of health and MHPSS – GBV is cross cutting (PRS prevention of arassement – Nutrition and child care- Malnutrition is a big Public Health - wasting and stunting – reproductive care

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings framework in your actions and plans?

Nutrition -
MHPSS
SGBV
Protection
Malnutrition is a gap in underserved area – separate allocation una fund SHF –(health, protection (GBCV) was and food sicurity. Looking for multisectoral assistance in these area (conmprehensive assistance) - Protection sector pathway as a base and we healthe we integrate – so we have health and protection integrated approach.

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- Yes- MHPSS working group

Under the health sector - (subsector RCCI – MHPSS- SRH – Trauma and disability and IM

- If yes, please list them and specify if they are national or international

All partners involved – with MOH

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on nurturing care for children in humanitarian settings conducted in your country or context over the past year? If applicable, please provide:
- Not specific – but the element yes

- Yes for the health component of nurturing care framework -
- Humanitarian versus development – early recovery not much in Damascus -
- 15.000 to 20.000 health care worker trained every year
  - The organizer
  - Participants involved

  Huge training activities – 4-5 training a day
  How do we bring DSS security onboad – kids are killed on a dayli base -
  Safe play groud integrated + community centers it Is not enough
  Funding is an issue – key donors there is a potential request to prioritize – Difficult to agree to new initiative but we struggle to keep what we were doing

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

He already answered by
Accountability _ accountability to popo. Is very weak – operationalize it is very difficult
Dieignated box for their preference- pre and post test evaluation
Vacccination there are elements of monitoring follow up visit – WHO and UNICEF
Hotline -
Apps were service provider inform but there is a feature to capture feedback

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

NO only
Different component of the Nurturing has been funded by classical donor
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators – yes a number more than 4 Ws

No all-partners report on 4Ws
Excel sheet (ask it) is in addition

- If no indicators, ask about existing child health

At subnational level we have joint visit

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

TPM (?)

- No – only health but it also include at least the work of the subgroup (SHR, MHPSS etc.)

Nut and health
PRS – integrated wash
RCC cross cutting

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

Multiple emergencies
Funding – scaling down mean nobody can provide doing it - luck of resource
Hostile political environment
Few joint prioritization/ and planning

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- 2 ex:
- Concept of integrated community center were filmily can go and get a range of support services and legal. health MHPSS
- Integrated medical teams – roll out immediate in rural and remote areas – doctor, nurses after a conflict ended or were no health professional had been seen for year – they training this staff on specific health issue and they build referral pathways dedicate time to mother if she is in

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?
More integration among sector – If we want to survive, we need to joint prioritization/ and planning
Integrations integration integration
One on many other frameworks out of necessity but to health at country level we need to understand how we operationalize – we can learn how to steamline and do think better and prioritization -

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:
- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Agree- it is happening – it is there – on varius area of public health for children – but increasinf need and challenges is difficult
Kissinger: No war w/o Egipt not peace w/o Syrian

LEBANON

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.
N/A no specific – but multiple activities ongoing and are opportunity to include the NCF
- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?
It is possible to Nut and protection – PSS in (health sub working group GBV - MHPSS task force)
Food security sector – Not well established activate in 2024.

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- Yes No official focal point

Intersected working group – Maybe UNICEF

- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- No
- GHC the webinar

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

IS done by Health partners – but this 2024 not done intervention PSCC (WHO UNICEF and MHO + health sectors parners) -

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

NO

Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators: No
- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes
- No

If yes, please specify any monitoring tools used

Shared log frame not specific but

Intervention

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Common understanding tand the buy-in of he conceptfrom all the partties of the NCF what do we intend to deliver – it is not duplicating- on the contrary

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- No really

Working in progress – CHW going door to door they try to integrate activities for health and nutrition screening

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Make it via (wellbeing component)Health it is easy to deliver it it is a mindset. Can be delivered – less the developmental one
-

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

·

· Agree

PACIFIC

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

No humanitarian setting

- They promote mental health to parents but not in humanitarian setting – for natural disaster. Children and care giver School In a box

Children are quite part of the society the principle are there the ethos is there

In the pacific there is scholl and preschool have program for disaster tzunami in the curricula -

Fiji conducted a exercise on how to evacuate children from school and their needs- The national disaster management organization every body was involved huge drill – police all the cluster red croos

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

Cluster works as ministry technical support – a lot of integration no cluster works alone – because the gov is organize like this

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- Yes UNICEF conver 14 WHO conver 21

Do not know – if UNICEF or SC has one

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:

  Not aware

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?
Principle of concpt plenty of community engagement – both UNICEF and WHO are working on it – Understanding the referral spathway – how parents report abuse – churches work with the community And commity base organization – do psychosocial but

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
Do not know
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?
- Local clusters collect indicators she has 21 local cludter in the island

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?
-
- No

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Aware of vulnerability but the implementation is weak not always possible – During emergencies it is difficult to talk about social complex issue – solution is to include in simulation exercise
- Need psychological first aid – very practical training – bascitool for response
- People feel into the cracks if you do not help

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- No
-

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- RCC incorporation provide a card with data of all data

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:
- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Neither agree nor disagree

COLOMBIA

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- If yes, what strategies have you found to be the most effective in achieving your objectives?

SI PROTECTION – VARIOUS EMETegency migrants: mother for mental health -
Tranasit: conflict is a problem - metal health and center for children in health and protection
Natural disaster in kinderganden - school – health promotion

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

Group for young children leadered by UNICEF – Vaccination and vaccination but now more integrated - (attencion primaria a la
Major emergency all health and emergency education and protection (sexual violence)
Also wash – malnutrionn they distributed water filters
Caso con protection (mealeas or transmissible disease or not communicabile) with protection
HIV – protection and helth for sexual ecploitation riskes

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- Yes

UNICEF leadership – and Moh and first lady) - integrated health – in urban area are more
Nutrition development/ protection, health care, - Grupo de attencion al la primera infancia en emergency

- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
-
- No

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

Cluster + mesa territoriale de salud – states, university community is involved. They do analysis with the commu=inity – quelitative for diseas or - Disaggregated analysis they also do analysis together with community organization . The community do not want vaccination because 10 vaccines together they spoke with the community to undertand they problem and provide solution in this case vaccinations-

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

No – money conentrate money in only one sector or specific thema – vaccination – primary health
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

No specific indicator – neither indicator are indicator

5 indicators: n. kid and adoloscent that receive assistance + MHPSS

- List of indicators
- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- No

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

Capacity – they need support 92 org. Not enough resource finalcial to training and strategy to better integrate the NCF

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- Case management – kids but also mother and father – not only patien, but also the family – if a kids with cancer – the family need to
- Or mental health of the mother or SRH needs
- On child with burns – help onlso the family psychosocial + + family planning

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

Evaluate the need with more detail

Tranversal need primary care as a focus in assessment

Provide support to capacity build

The Webinar – mid therm with MOH

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· · Disagree

Is the any other issue you want to bring to my attention?

Importance of kids in mental health – focus on this children -

MOZAMBIQUE

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- No – (some reference about Integrated mobile clinic – as part of the MOH)
  - If yes, what strategies have you found to be the most effective in achieving your objectives?

  N/A

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

No – It is only partially there- Motr collaboratoin with SRH MHPSSS, nutrition - no budget for coordination is an issue

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- NO
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

SYstem APS (CHW) some ngo support them for malaria resp, diseases, not even lactating – Some MUA - No feeback mechanism from the community

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

No in health – Funding is pretty verticle – and not include support costs. They have to include indirect cost otherwise we can not manage any program

Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

Not a good monitoring sysyem. No good for quality of care -

- List of indicators
- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?
- HRP indicators
Multisectorial but not integrated -
No indicator for childwood development only the standard ones – there is a lot of fragmentation too many vertical not integrated activities.

7. Challenges and Solutions
· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?
- If we want to push it we need budget for coordination to monitor not only a technical person
- It should be funded in an integrated way – No just for the specific activity. Looking at the need in an more holistic to the reality of the need –and it should be more sustainable. -

8. **Success Stories**
- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- No

9. **Future Directions**
· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?
No priority now, there are many other priorities unanswered. No IMO, no data analysis etc etc. MHPSS and other thermes can should be integrated but no resources.

10. Assessment of Integration Progress
· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:
- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses
· Neither agree nor disagree

BURKINA FASO

1. **Implementation of the Nurturing Care Framework**
· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.
He spaoke with a lot of colleague but aspects are taking care -
Maiinly nutrition + promotion of optimal age (up to 5) – al the countries
Group of support of age otpimal
Pregnant women and important message to mother and care of the kids
Nutrition feeding and sevrage -
Lacttatic woman
No Possible optima promotion with safe space for displace people in emergencies – near health center – it done in the villages – Agent communitaires – supervision of CW – avec protection humanitari ang ministry support

- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

- Coordination is in the field health protectioin and nut, but not formal not at level nationale – informale
- Mission intersectorial supervisio assessment nut- harlth
- Case study in 2022 – food security, WASH, sante, nutrion

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- No

Si –

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- No- but some PDU, safe space of CHW
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

- Not formal – optima practice we involve the community – on CHW and agent sante – community management group and they decide what to do and what is the priority
  – feedabck management commette are providing – NGO have feedback cadre-
- UNICEF pay the CHW
- When displacement no agent
- green number: centralize by OCHO but all ngo have green number

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
UNICEF support in health department -
ALIVE AND THRIVE
Funding are not that specific – but support activities that are included in the NCF

Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?
Health has – cpommunity indicators – UNICEF n. of CHW trained

N. Of Women partiipating in training
N. Of seace
n. Of children visitated (0-6) - (6-12) - (12-23)
   - List of indicators
   - If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?
- No

7. Challenges and Solutions
· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?
Challenges: capacity buiding of CHW, turn over
Funding is limited
Solutions: integrated training and have more trainin more CHW -
Internet doesn work otherwise digital trainig could be a solution
Prise en charge integrale de l'anfance: They use tablet and phone with program Terre des homme
now byt the ministre fond mondial and unicef and community version -

8. **Success Stories**
- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- Prise en charge integrale de l'anfance: the program on the tablet works very well and allow health worker to take care of children of all age.
-

9. **Future Directions**
· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?
- No NCF formal – need to support a formal framework at national level – Capacity building of all actors (HCC role), mobilize funding
- The document exist but is not integrated in the national priority not adapted to the BK system - not ooperationalized

10. Assessment of Integration Progress
· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:
- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses
· Agree: effort have been done

ETHIOPIA

1. **Implementation of the Nurturing Care Framework**
· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.
- effective in achieving your objectives?
No hear about the NCF – not directly

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?
No but – interesticn intesectorial cluster formalize – there is a coodyion (kamal) collaboration, lead nut+ malnutrition focus – Food and agicultutre child protectioj, health and WASH
Wonderfull action and work – OCHA funding pull fund mechanism

…. Still on Coordination
· Is there an early childhood development focal point or an ad hoc related working group in your country context?
- No

3. **Capacity Building**
- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- No

4. Community Engagement
· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?
Not, but key wekness on community engagement – not cholera very long outbreak Community intervention is key but poorely implement – RCCE -Risk communication is also weak. Missing opportunity UNICEF is lucking capacity in RCCE and not engaged with the health sector- for health is a luck of funding -
Project focused
We should build on existing program but we are not doing it – Existing "health extension worker" implemetted by Tedron - is now not working anymore

5. Funding for Integrating Nurturing Care Framework
· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
No – if USAAID is the OHA could be -

6. **Monitoring and Evaluation**
· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?
A whole set of monitoring tool but not really – implementation it difficult because of luck of fund – not ECHO has provided – also H3package include essential haleth care service for helth
No child development indicator, but tas it is ongoing there are opportunity to do it.
- List of indicators
- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?
- No only health

7. Challenges and Solutions
· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?
Awareness – it not known

Funding
No reduction in N. of partnets but there is less and less mobile health team for remote location. Some have closed

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- Happy to lear and we can do something – Good idea to have a

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?
How to ensure that it is NCF is iit integrated H3 package

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:
- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health
responses
· Strongly disagree

AFGHANISTAN

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.
ECCD early child care development was mainly with education, with SC but now thet are working to inter-sector Good nutrition
Element of NCF but noy directly
Acting implementation no – some elements are there
Acting – passive
It is integrated in other
- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

- Health n/ basic service – immunization
- Health interventions -
- Post natal care new born
- Facility for basic heal
- Integration with nutrition – primary care framework Acute malnutrition pregant and lactating an < 5y
- IYCF
- Crhinc 45% malnutrion – prevalence
- Coverage of health services -
- Wash – for preparedness of chilera and emergencies floods
- Food security + Health + WASH + nut (4 cluster intersectoral collacoration)

- MHPSS child protection there is a space for intervention – not only for children -

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- No
- If yes, please list them and specify if they are national or international

While not MHPSS but not age specific - Health protection with from org and cluster – LEadin ICF + WHO

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- No
- Training for CHW have pregnancy to – safe pregancy nutrition – basic care for kids,

a. 30.000 CHW they have training guide anf training 2 time a year matherna t
b. This is in additFamily health action groups – engange women

- Health post – valunteers have some criteria – receive a 3 weeks training 1 month + 3 week 5-6 months trainign + refreshment + medical supply for th
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

CHW community engagement and diffuse good practice

There should be a feedback mechanism for accountability -

c. Health counselors (represent surrounding villages and village newr the facility) they are volunteers – can be utilized to increase awareness – They are the community representatives community

1. Suport implementation of health services
2. Monitor how the service are implement
3. Advocate for more resources – if neded for the community

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

No

Families health housing FHH – 600 (maternal brought by UNFPA) idea to maternal and SRH are not good people in remote location- they exttablishe this facilities – with 1 midwife + MRH and new born care 1000 to 300 each- they shold provide PSS vaccination – This 3.5 per 10.000 population –

trainign MW in the community – but there are community MW – they grant money to national ngos -

HP is funded by basic service 2300 facilities – no

Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

Intersectorial activities are easier fun

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators
- If no indicators, ask about existing child health

Assess to drinking water
Food security
Cross sector indicators
A number of
Vaccination- tracking coverage for antigen disagragated by age location <1 <2 , 2-3
16 % 24 –35 month are fully vaccinated
Disease EWD of <5
GAM<5
IPC 3+

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes
- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- More proper induction about the concept of NCF- very little awareness
- How to integrate other sectors beside health and nutrition -
- Conflicts needs and priorities – and difficult to make it priority

Mental health of the parent is very problematic
The contex of Afghanistan the women condition is problematic-
Community understanding -

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Need a clear presentation of the NCF and training to the cluster team + partners – Ask other cluster are aware (SC) but not other ngos – Better understanding of the NCF
- Training capacity building + Technical assistance support for HC partnes
- GHC support should be useful because in the counties there is limited capacities
- Make a plan on key activities on how to incorporate in the HRP
- Inter- cluster collaboration- is needed but it is not there

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses
- Neither agree nor disagree

Passive -

UKRAINE

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

NCF – not look from a strategic prespective- some health activities
Vertical programs with some level of integration
Cathegorization of the health cluster
PHC – service that involve components of NCF – Adequate nutrition family - planning UNFPA – Few SRH in the local level but it mainly at hospital level infant and joung child feeding – cash voucher – immunization
Essential new born care and Kangaroo – Child illnesses
PRegnant Women are evacuated first at the transit site and some extra attention in provided
Family doctor are the 1st entry point in health – They facilitating transportation for staff and patient -
Integrate management of children
Luck of or not getting expose to
Protection cluster – those that have been move receive care live in collective center
There are initiative to create game places
Cash working group with focal point in each cluster
Erly leaning. - not too much – the have underground scholl (we do not know what are the standards now)– online caouse for small -
Child care space reponsive care – and engaging the young one -

- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

- On specific thematic not on NCF
- Health and protection cluster about disability –
- With education there are avenues but hard - because is mailnly in school
- We need to involve communities leaders -
- Wash not much
- Too much sylos -
- Need -

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- Yes – RCCE technical working group - WHO is leading : UNICEF is co-chair)-Nutrition is not claster SRH
Nut technical working group
Assessment and analysis working group
Trauma – working group
MHPSS
HIV/TB testing is also seating in the SRH child transmission promotion
- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- No aware of it
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

Need to know the message – if rabies is an issues – the msg aim to children and adult – to create an engaging msg -

HC relay on partners there are feedback mechanism but not all partnets are using them accountability – project supervision with community meeting but not specific for NCF you want to care for care giver or children – the assess via phone

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

No – only life safing (but long t human capitol intervention)

Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators

Activties info (3w or 5W)

- If no indicators, ask about existing child health

In emergencies is difficult to measure the impact

Recovery and reform

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes: health + nutriion

Infant anche child nutrionion

Birth certificator – are kind of protect

- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Definition of NCF what It is also trainign to other cluster and not only life safing - need a foocal point at the minitries document allign – so in this case donor can fund something structures-
- Fight for space- btw development and emergency and people become territorial

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a

humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.

- 1000 days window – one shop access. - all is taken care but -

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Advocacy Humanitarian leadershiop (Ministry resident coodincator) make a conference link with humanitarian and long term – stimulate the discussion

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Agree

HAITI

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

Need of the kids we try to cover

We work with with protection,access Wash, vaccination, nutrition disease prevention

MHPSS lead by OPS collaboration

- If yes, what strategies have you found to be the most effective in achieving your objectives?

Integrated interverventions

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

Coordination wash food security, protection, nutrition

Displaced people intervetions include kids

To make those invisible – visible

Measles risk – where kids were pritritized -

CCCM camp management – work with healh to ensure kids are vaccinated

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

Diplacement group (health)

MHPSS (health)

Food security (FAO)

Point focal nutrition

I point focal sante community

- Yes
- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- Mental health: 2 training 1st psychospcial aid for kids and adults
- Food secutiry coaching for CHW to care firt epidemic prevention
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?
Agete sante polivalente- weekly sensitiation: malnutrition hygiene , nutrition – DSO+ appuies par OMS + many ngos works with community
Greenline – telephone – for programme access+ mental health – HIV/TB

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
No -
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?
HPC2 (humanitarian programming cicleindicators: vaccination coverage
Desagrege data with kids

N. Pop displaced touche
  - List of indicators
  - If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes-
- No

If yes, please specify any monitoring tools used
Mainly information sharing but not join indicators

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Defit global for kids – access is a challenge – even if funds are available no access,
- Funding is a challenges
- Kids are vulnerable – kids need to be taken care with the mothers like if it is integrated -
- Weak Coordination among partners -
- OCHA has done a coordinated action but not enough

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- No

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Catastrophic action need of protection
- There is no n. how many kids have access
- Donne fiable – are needed so we can better calculate the need
- Who is the leader -
- Teorique

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Disagree: not much progress -

CAR

1. Implementation of the Nurturing Care Framework for Children Living in Humanitarian Settings

- Could you describe some specific actions or initiatives you have taken to implement the “Nurturing Care Framework” in your health programs? Please provide details on the types of activities conducted, target populations, and partnerships involved.

R: The “Nurturing Care Framework” is not yet formally implemented in RCA. However, some interventions are implemented without referring to the "Framework": (i) Good health (Family planning, HIV screening, prevention of mother-to-child transmission, Integrated management of childhood illnesses, Mother and child vaccination), (ii) Adequate nutrition (Maternal nutrition, Support for early initiation and continued exclusive breastfeeding for six months, Management of moderate and severe malnutrition), (iii) Safety and security (Birth registration, Provision of safe water and sanitation), (iv) Opportunities for early learning (Quality preschool education and daycare), (v) Responsive care (Kangaroo method for low birth weight babies).

- If yes, what strategies have you found most effective in achieving your objectives?

R: No formal strategy.

2. Intersectoral Coordination

- Can you describe existing efforts in partnerships between clusters/sectors to integrate the “Nurturing Care Framework” in your actions and plans?

R: The “Nurturing Care Framework” is not yet on the agenda of the various humanitarian clusters concerned (Health, Nutrition, Education, Food Security, Protection) and the Mental Health and Psychosocial Support working group.

- Is there a focal point for early childhood development or an ad hoc working group in your national context?

R: Not to my knowledge (the WHO child health focal point acts as the focal point). But there may be an early childhood development focal point at the Ministry of Education.

- If yes, please list them and specify whether they are national or international:

National/International/Both

3. Capacity Building

- Have there been any capacity building or training sessions focused on the "Nurturing Care Framework" conducted in your country in the past year? If so, please provide the organizer and participants involved.

R: No, there have been no specific training sessions on the Framework. There hasn't even been any dissemination, whether in the humanitarian context (Health, Nutrition, and Education Clusters) or in the respective sectoral ministries.

4. Community Engagement

- How do you engage local communities to promote the "Nurturing Care Framework" and obtain their engagement and feedback? Can you provide an example?

R: The country has two documents related to community engagement: "National Policy on Community Engagement for Health and Well-being" and "National Strategic Plan for Community Engagement for Health and Well-being 2023-2026". These documents include interventions related to the health and well-being of the child, including the first 1000 days. There is not yet a formal system for collecting community feedback. The Health Cluster is setting up collective accountability systems for the affected populations (AAP) within the communities.

5. Funding for the Integration of the Nurturing Care Framework

- Are there donors providing funding to support the integration of the "Nurturing Care Framework" in existing health responses in your country or context? Please provide details on funding sources, types of support received, and significant partnerships that facilitated these initiatives.

R: In RCA, there are currently no donors interested in funding the integration of the "Nurturing Care Framework"

6. Monitoring and Evaluation

- How do you monitor and evaluate the impact of the "Nurturing Care Framework" on the health and development of children? What indicators do you use?

R: In RCA, to my knowledge, no monitoring and evaluation indicators for the "Nurturing Care Framework" have been developed.

- Have you developed common monitoring indicators to complement sector-specific indicators, ensuring a more comprehensive evaluation of the "Nurturing Care Framework"?

R: No, the WHO and the Cluster have not conducted any activities on Nurturing Care and Early Childhood Development (ECD).

7. Challenges and Solutions

- What are the main challenges you face in integrating the "Nurturing Care Framework" into your health programs? Can you provide specific examples and explain how you address these challenges?

R: - The first challenge is the lack of information on the "Nurturing Care Framework" in RCA among all humanitarian sectors and the relevant sectoral ministries. The Framework needs to be disseminated within the humanitarian community during the Cluster Health, Nutrition, and Education meetings, with the involved agencies (WHO, UNICEF & OCHA), donors, and sectoral ministries, and capacity building for the key actors on Nurturing Care and ECD.

- Develop a roadmap with all stakeholders for the implementation of the "Nurturing Care Framework".
- Develop a strategy with integration aspects into plans and programs.
- Develop a training module on parental education on ECD.
- Advocate to local authorities on the importance of ECD.
- Conduct a mapping of actors and interventions in the field of early childhood.
- Establish mechanisms for multisectoral and multi-actor coordination at national and regional levels for ECD interventions.
- Establish a common multisectoral framework of key indicators for monitoring and evaluation.

8. Success Stories

- Can you share a specific success story where the integration of the "Nurturing Care Framework" significantly improved outcomes for children and their families in a humanitarian context? Please describe the situation, actions taken, and observed positive impacts.

R: The "Nurturing Care Framework" has not yet been formally implemented in RCA.

9. Future Directions

- Looking ahead, what are your priorities for further integrating and strengthening the "Nurturing Care Framework" in your health cluster activities? What support would you need to translate these priorities into actions?

- Disseminate the "Nurturing Care Framework" within the humanitarian community during the Cluster Health, Nutrition, and Education meetings, with the involved agencies (WHO, UNICEF & OCHA), donors, and sectoral ministries.
- Technical support is needed for capacity building for key actors on Nurturing Care and ECD at all levels (if possible, establish a "pool of trainers of trainers").
- Establish an intersectoral coordination structure at both national and regional levels.
- Advocate for the inclusion of "Nurturing Care Framework" interventions in the 2025 Humanitarian Response Plan (HRP), in collaboration with other involved sectors.
- Support is needed for resource mobilization for the implementation of the "Nurturing Care Framework" in RCA.

10. Evaluation of Integration Progress

- Since the "Nurturing Care Framework" was developed in 2018 and specific guidelines for children living in humanitarian contexts were introduced in 2020, to what extent do you agree with the following statement:

- In your country or context, progress has been made in integrating the "Nurturing Care Framework" into existing health responses.

R: - Disagree.

Are there any other questions you would like to bring to my attention?

1. Could you share examples of presentations for disseminating the "Nurturing Care Framework"?
2. Could you share successful experiences from other countries in implementing the "Nurturing Care Framework"? Would it be possible to organize study visits to learn from their practices?
3. Would a resolution of the World Health Assembly be relevant to the implementation of this "Nurturing Care Framework"?

NIGER

1. Implementation of the Nurturing Care Framework for Children Living in Humanitarian Settings

- Could you describe some specific actions or initiatives you have taken to implement the "Nurturing Care Framework" in your health programs? Please provide details on the types of activities conducted, target populations, and partnerships involved.
- Done some activities with partners: 40 partners – "Action pour le Bien-Être" (APP, local NGO): mobile clinics in hard-to-reach areas providing basic maternal and child healthcare – emergency packet includes preventive, curative, and promotional activities. Focus on vulnerable groups like children aged 0-5, pregnant women, and breastfeeding mothers – includes vaccination and malnutrition detection. Other NGOs are also involved in maternal and child health in other zones.
- If yes, what strategies have you found most effective in achieving your objectives?

2. Intersectoral Coordination

- Can you describe existing efforts in partnerships between clusters/sectors to integrate the "Nurturing Care Framework" in your actions and plans?
- Coordination in humanitarian contexts includes bi-weekly intersectoral meetings to exchange challenges and projects. This holistic approach, involving 2-3 sectors (health, WASH, nutrition, and food security), aims for more efficient mutual efforts on the same populations.
- Is there a focal point for early childhood development or an ad hoc working group in your national context?
- Health and nutrition work together regionally. The mental health study focuses on health staff in crisis areas in collaboration with universities.
- If yes, please list them and specify whether they are national or international: National/International/Both

- MHPSS group, regional intersectoral group, gender, localization, accountability. Each sector has a focal point working group.

3. Capacity Building

- Have there been any capacity-building or training sessions focused on the “Nurturing Care Framework” conducted in your country in the past year? If so, please provide the organizer and participants involved.
- Training on gender and accountability for NGO staff, focusing on humanitarian aspects. More funding is needed to support local NGOs in localization efforts.

4. Community Engagement

- How do you engage local communities to promote the “Nurturing Care Framework” and obtain their engagement and feedback? Can you provide an example?
- Accountability and community engagement: flagship humanitarian program in four countries (Niger, South Sudan, Colombia, and an Asian country) focusing on coordination at the commune level. Community diagnostics and feedback mechanisms are being piloted.

5. Funding for the Integration of the Nurturing Care Framework

- Are there donors providing funding to support the integration of the “Nurturing Care Framework” in existing health responses in your country or context? Please provide details on funding sources, types of support received, and significant partnerships that facilitated these initiatives.
- Regional fund for West Africa (FAROM) exists, but there is no specific funding for the Nurturing Care Framework. The World Bank is showing interest after some partners left on July 26.

6. Monitoring and Evaluation

- How do you monitor and evaluate the impact of the “Nurturing Care Framework” on the health and development of children? What indicators do you use?
- There are no specific monitoring and evaluation indicators for the “Nurturing Care Framework” in RCA.
- Common indicators for comprehensive evaluation are needed, but this requires long-term commitment and resources.

7. Challenges and Solutions

- What are the main challenges you face in integrating the “Nurturing Care Framework” into your health programs? Can you provide specific examples and explain how you address these challenges?
- Major challenges include resource mobilization, decreasing funding, growing needs, capacity building of human resources (quality and quantity), and security issues. The health system is very fragile with structural problems.
- Solutions: Advocacy needs to continue to build trust in humanitarian efforts. Emphasize the human right to safe life in long-standing forgotten crises, and address climate change-related challenges.

8. Success Stories

- Can you share a specific success story where the integration of the “Nurturing Care Framework” significantly improved outcomes for children and their families in a humanitarian context? Please describe the situation, actions taken, and observed positive impacts.
- Family aid programs, including nutritional support and food distribution, successfully convinced a mother to enter a nutritional center, leading to positive outcomes.

9. Future Directions

- Looking ahead, what are your priorities for further integrating and strengthening the “Nurturing Care Framework” in your health cluster activities? What support would you need to translate these priorities into actions?
- Priorities include dissemination and vulgarization of the Nurturing Care Framework to health cluster partners, technical support for capacity building, establishing intersectoral coordination structures, and resource mobilization.

10. Evaluation of Integration Progress

- Since the “Nurturing Care Framework” was developed in 2018 and specific guidelines for children living in humanitarian contexts were introduced in 2020, to what extent do you agree with the following statement:
- In your country, progress has been made in integrating the “Nurturing Care Framework” into existing health responses.
- Agree.

Are there any other questions you would like to bring to my attention?

1. Could you share examples of presentations for disseminating the “Nurturing Care Framework”?
2. Could you share successful experiences from other countries in implementing the “Nurturing Care Framework”? Would it be possible to organize study visits to learn from their practices?
3. Would a resolution of the World Health Assembly be relevant to the implementation of this “Nurturing Care Framework”?

YEMEN

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.
Funded by WB – Role of the HC was to catalizer for the integration of assessment
Global UNICEF + WHO young kids 5 component Health
Triangle base approach –MHPSS (health – protection and education)
Nut + edu and Protection for global program
Inclusion nutrition and child health is ficus on the
Each partner do health
Bring together the partners to in integrated approach - provide united response to integrate the NCF
Not the whole part but different components (vaccination – mif=dwife CV,

- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

- Interagency partnership WHO_UNICEF unFPA and WHO globally and at countruy level with MOH – the did a workshop lead by UNGPA on mother health
- Collection of technical guideline unified for all the agencies– on immunization, and othr adopted and done for the country WHO – some guideline are standardized for WHO UNICEF, UNFPA -
- Private sector partnership and civil sociaty -consortium discussion but little information -

…. Still on Coordination

Donor· Is there an early childhood development focal point or an ad hoc related working group in your country context?
No for NFW
Is not yet but there are discussion on infant stage but early childhood development
Moving from Humanitarian to nexus (lead by WHO)
There is a zero plan in July

- Yes
- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:

- UNICEF + UNFPA is ECD (early childwood developemnt) is in the 15 days workshop early toward child development component – WB is healping
- UNICEF have a strong component of Community engagement education and advocay – Esclusive breast feeding
  - The organizer
  - Participants involved

  UNHCR – WHO - PSS : for integration in the health care

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

Partners have mechanism to work with the community
CHWs form UNICEF – Focal points from the community
Other partner run /support HF – and work with CHW
UNFPA midwife support program: community MW support service to new born and mother with the MOH - UNICEF primary HC and the community engagent and SBC – community outreach program
Community feedback mechanism are integrated in the project interventions – all complains are addressed according drop boxes in project intervention 3rd party monitoring - via HOT lines
Abuse of power of sexual exploitation also is addresses via the

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

ECD activities: yes – components of the NCF – immunization, immunization (GAVI) BHA/ECHO on PHC - Swedish – norvegian
Soundy equipment and material

Emirate
Majority is funded by
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators

Capture the progress of the NCF- antenatal and post natal
Service delivery indicator
Immuniation
Malnutrition

- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes Health nutrition WASH and protection

JOINT JAgencies Fframework 2.0 with other partnets

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Context – level of implementation and service delivere in north and south
- Vaccination is very very challenging in the North
- Limited implementation capacity because of the context specially in the north
- Limited Funding- fraction of what is needed – conflicting priority
- For example MHPSS is almost not funded
- WASH is neglected and resour

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- Not really

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Various componet of the NCF need to be brought together
- Tool for intrgration
- Dissemination among partners
- They have shared with the partners

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Agree

A lot of effort but the truce is there but it is a cronic crisis – all bank are closed- disruption of the HCS
200 Million reduction of funding by WB
Early child education is very limited close schools 38 districts are closed -
House teaching – is also

MYANMAR

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- If yes, what strategies have you found to be the most effective in achieving your objectives?

She doesn't know -
No team – Webinar was time difference

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

Strong OCHA ICCG collaboration wASH, protection (big issues)
Training – evaluation framework with protection

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

Protection had a child focal point – ICCG (

14 June one day of workshop on SGBV

Localization

- Yes
- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- June 14 – UNICEF doing the training and HC is leading
- Child friendly space in mobile clinic
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

CSO – and partners working in network – Train the partner canscading – in PPT 4 time year training – go to the community + volunteer no travel a

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives. Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

Not know

Funding

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators
- If no indicators, ask about existing child health

No indicators in their framework -

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes
- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Issue to adapt to Myanmar context- limited action -

- How to adapt the framework to a

8. **Success Stories**
   - Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
   - Theingi – ask

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Agree

·

Protection – main stream -

SOMALIA

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- If yes, what strategies have you found to be the most effective in achieving your objectives?

Access problem, Quality of care is a major issue
Facility do not offer immunization
No working maternity words
Prioritize immunization – continues measles, diphtheria wooping cough, neonatal tetanus- Benadir Mo director 34 cases
Nutrition – for a drought period with + malnutrition
Running polio epidemic
They have very poor child safe space- some UNICEF leaflet – not really adapted to the context – No good knowledge on how to engage with kids
Breast feeding and Kangoroo care, Higher child and neonatal mortality
CHILD FRIEDLY SPACE are poorly organized
Lack of committed/engagement by ngos. INT ngos have better monitoring but issue in service deliver
More operational hospital have room/shelter for talk with mother and children provide social support – but very very poor that include the care giver – Father with 2 children with diphteria

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

…. Still on Coordination
With Nutrition – during the drough we had to work hand in hand WASH
Cholera outbreak with WASH

Child protection: is very syloes – not much collaboration – Mapping health and nutrition facility to include child protection services
Competition among ngo – intention in coordination are good, but to work and coordinate for a complete package – no reaching minimum standards.
ICCG – new Humanitarian Coordinator – area base coordination (ABC)
Maneuvering not steering

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

She not sure – not aware
We have a lot working group

- Yes
- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- Not or not
- Integrate Child Community Management ICCM approach – a lot element are there
  - The organizer
  - Participants involved

  Future ½h at the HC meeting to familiarize with the NCF – to open mind to the team about caring for the kids, translate It in a simple examples
  Food security framework – developed by WHO – bring together health and nutrition- hill health bring hill nutrition - was very useful for programming

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?

Yuge struggle to involve the
HC and HCT are very involved– there is a technical community working group, but limited content – Risk communication mainly recognize community need and use – adapting to local habit is very important and we do not do enough- UNICEF is not very stong to produce adapted messages
BBC media action

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives. Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

No

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

Only basic health indicators
All partner should use the many forms DHIS (should have some staff out) very poor reporting
Few couple indicator for service delivery – for immunization - meal

- List of indicators
- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?
- Yes
- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

Lack of quality of care
Conflicting Of priority
Pregnancy and vaccination are focus area
NCF is not a living terminology

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- Stabilization for severely malnurishe shall offer more attention for the care giver

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- offer more attention for the care giver
- Immunization
- Prenatal with tetanus – malnurish mother -

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:
- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Disagree mainly in the terminology

Is the any other issue you want to bring to my attention?

SYRIA CROSS BORDER TURKEY

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

No dedicated program but many activiiies- prepost natal care immunization
Education child protection sub cluster
MHPSS operational framework – 128 caregiver training family parents also on ECD
Also training of teacher and health worker on EDC

48 girls and boys training to be strong – how to cope with certain situation
MHPSS technical working group – via the regular he
Substance abuse – narco drugs with adolescents
Suicide with young high rate for the war economy
Child education +
Community engagement
Nutritional stabilization centers
Fragmented response not 100%

- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?
Protection, edu, WASH, leismaniasis (stigma) scabis in camp management CCCM
Intercluster collaboration: Malnutrition nut cluster – joint integrated program – food, health, nut, Wash
Disaster management:
…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- No: the cluster lead this activity – WHO -UFPA and UNICEF collaboarate on ECD
- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- Yes: NGO in health and nutrition and protection
- 2022 program to cross cutting activity
- Care giver and school techers
- Health hygiene promotion
- Mental health complecation
- Shell in shelter – for exploded and unexploded ordinance mine action technical working group
- Trauma and disability working group
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?
CHW work on health in the communities
Immunization: social engagemtn for care giver
Community commitees and volunteeers
UNICEF and RCCE task for force COVID – and now cholere – they guide the partnet onhow to message and engage the community
MHPSS community engagement
GBV community engagement- Focal point for communities and facilities
Also about scabies
Help line system for health for challenges

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
No or do not know
Funding the pieces of the health program
Donors needs to be sensitize on the NCF – there is space to do more also advocating for funds
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?

- List of indicators
- If no indicators, ask about existing child health

No specific MNE framework
We need to do more
EWARN
Immunization
HRP log frame -

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes
- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?
No specific model of implementation: how to operationalize
No donor awaredness -
HR Capacity building -
Funding
Access to health care
Service integration is not
Awareredness of parents of the importance of ECD
Out of school kids
Political will – shadow governent – no sustainable approach
No specific data set for NCF
Multicluster collaboration exist but not directed to NCF
Community enagagement
No MNE structure

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- Earthquake intervention: syrian traumatized - children with disabilities/ and rehabilitation program for children– assisted divices – MHPSS interventions

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Awaredness among Stakeholder -
- They have ECD enbedded in the regular program
- Workign with donor to prioritize ECD
- Coordination partnership building how the can integrate in the cluster response
- Data management can be used to taggle the specific group
- Community engagemtn
- How to capitalize on the existing program
-

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Agree: not very harmonized approach

Is the any other issue you want to bring to my attention?
Session with the partners – to create awaredness also with other sectors

NIGERIA

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

Such framework has not been implemented as such
But vertical activities has been implemented but
Food and security – nutrition sector to ensure stabilization center security is working – the govement is involved in secuty
Sefety discussion with nutrition. And health the sick and care giever they have to feel safe
Work INGO UNDSS: high level security treat at the health facility – information share for likeliwood that an incident would happen
Facility are closed when securty issues
Attack on health care program: Is an initiative under health
Health an nutrition are very integrated- payrooms artistic payground – play with toys – childwood early stimulations – is incorporated in the HC and stabilization center
MHPSS services are available while in the hospital- mother in need are assessed – those in need of psycotherapy there are partners that provide psychotherapy – Stabilitze the mother mental health is important
They need to move form humanitarian to transition – they are afraid that it won't be anymore available medication for MHPSS (psychotropic medication)

- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

No implementing it as such

Activities with nutrition, food secutity WASH
Raining season we need better Planning for scarcity of food – nut+ working with health – Survey before and common outocomes
Mother with protection need – mother has more needs – need wash, shelter, etc- the work multisectorail because it is more effective because of multiple needs of the population
Agree minimum expenditure basket - food package nut, is appropriated to the needs of mother and kids.
Vaucher to cash out the iterms – for NFI
Man support group – counselling higiene
HEalth security behaviour couselling for men

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?
Education working group wotj with child development
Child Protection cluster is not active and there is a lot of collaboration (child friendly space)
- No: child development programs imbedded in education -

- If yes, please list them and specify if they are national or international

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:

- No

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?
Accountability to the affected population framework (AAP) AIMA - tools used on a regular base- at coordination level -
At operational level mobile WHO team – volunteer are in charge of kids screening for malnutrition
House to house to speak about availability of services -
WHO and partners + Action base commmeettees - chaired and managed by the community they get feedback solution from the community – feeback meeting

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
No -
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?
Humanitarian landscaping is changing – resources are scarse – need additional resourse

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?
- List of indicators
- If no indicators, ask about existing child health
Discussion is ongoing to have intersectorial indicators – need more work to move forward -

% of SAM with wather diarreah (put together WASH, health nut + food security)

N. Of SAM with measleas
O. District Health Information System (DHIS) monitor routine activities but is health and need to be integrated – this is a MOH tools for indicator – need training on accoutability – health indicators are ok, but

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?

- Yes
- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Security + governement policy – ongoing clashes affect the access to services
- Establishing a framework – of NCF to implement and monitor
- Funding is an issue -
- High inflation – household cost of living is very high
- Water points are management is by NGOs if less funding no
- 86% increase in malnutrition
- The WASH need are also higher
- Funding can help
- Armonize these pieces of interventions
- Work with authorities (12 years crisis) gov to take over ownership while increasing the resilaice of rhe population – resources are less and less

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.

- Safe the children: in Jere LGA, Molai BORNO state - community village - WHO is there at the WASH + NFI is there, nut, child protection food security is there - there is less malnutrition they want to document this experience – they think it is because of the nature of the intervention – child friendly space – kids are entry point -

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?

- Better know the Framework. There are more opportunity of integration starttin with nutrition
- Owneship of the document – then nut sector
- From nutrition to more sectors – Technical working group on NCF need to be created - integrate together by sectors
- Funding needed to make work the technical working group

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses
· Disagree

SOUTH SUDAN

1. **Implementation of the Nurturing Care Framework**
· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care Framework within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.
Good opportunity to be part of this study
He heard it from SC – all clusters work together
School health, nut edu – vaccination, school attendance increase – school meals – holistic way -
They want to do as a pilot – proactively they can do it – Children and mother care we are implementing component, but also use the methodology – need to pilot -
What is not feasible
Example: health and nutrition are integrated facilities + they want to add child developemt
Child survival and safe motherhood + social science Exclusive breast feeding – health education for lactating woman – kangaroo care -
GBV we need to have a child nurturing lenses (to including
- If yes, what strategies have you found to be the most effective in achieving your objectives?

2. **Inter-sectoral Coordination**
· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care framework in your actions and plans?
    - Life saving cluster - Health Nut FSL_ WASH + GBV and child protection – multisectoral approach –)same population and same area – Partner multisectoral or – convergence of cluster activities-

Explain principle of NCF when we do multisectoral program -
Montly base meeting -
They prepared a package – with MNE framework– SS humanitarian Funding advisoring bord they
BHA and ECHO are funding these sector and NCF can be mainstreamed

…. Still on Coordination
· Is there an early childhood development focal point or an ad hoc related working group in your country context?
No – ICSC Inter cluster sector collaboration (there is GSC)
They do not have education and ECD in humanitarian setting funding and project
- Yes
- No
- If yes, please list them and specify if they are national or international

3. **Capacity Building**
- Was there any capacity-building or training sessions focused on Nurturing Care Framework conducted in your country or context over the past year? If applicable, please provide:
- Required but not done – we need to understand the NCF – need orientation and trainin to role out the concept – need to push higher to advocay to HCT Donors -
    - The organizer
    - Participants involved

4. Community Engagement
· How do you engage with the local communities to promote the Nurturing Care Fremework and seek community engagement and feedback? Can you provide an example?

Done with CHW and CNV = CNut volunteer are in contact with mother and care givers – Community is important where we want to change -
Community feedback mechanism is there but not specific to NCF

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care Framework into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.

Only component for BHA and ECHO
Country pool fund (CERF) by OCHA (as child survival)
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care Framework on child health and development outcomes? What indicators do you use?

- List of indicators
- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care Framework?

- No: MNE framework have been developed – but having intersectorial outcome/ output indicator are difficult for both find and implement–

Mainly impact indicator

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care Framework into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Funding:
- Avocating to all stakeholder
- Access and security
- Different secotors have different capacity (EX education is less funded) they need full sector
- Sector coordination is an issue- but it is not easy
- Conflicting priorities
- Territoriality of cluster
- UNICEF and WHO (but why is not)
- WHO soft component UNICEF (has its partners they have better reach) more program and operational
- Diverge not converge

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care Framework significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- No specific – 4 cluster come together and commitment to work together - Multisectoral pachege and MNE framework – is a success story

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care Framework within your health cluster's activities? What support would you need to translate these priorities into actions?

Working togerther with other cluster
Advocacy and capacity building
Identify opportunity for pilot implementation
Collaboration with authorits and donors
NCF – key people do not read it – we need advocacy note for donors - Concept note/ 1 pager + PPT needed
Identify Champions in few countries and take further evalute

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

· Disagree: not knowing the concept – only 6 months ago – from SC – only

WOS SYRIAN

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- If yes, what strategies have you found to be the most effective in achieving your objectives?

Initiative we need to kknow more about.
No systematic way to support the partners – for the NC
IRC initiative: ahlan symson - – from yemen health cluster team
How to document that
Ahlan Semsim - initiative - syrian refugees in Amman – lebanon – report by OCHA
No coordination on child or general protection but health is not informed
The framework should be an unify initiative
Safe space in the camp – need to be share

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings in your actions and plans?

Area of improvement – in yemen collaboration with food WASH etc food operation – but
Coollaboration nut food security and protection but they need to include education -
They try to push for initiative – during cholera Syria, nut treatment of SAM wirh medical complication – they want to integrate nutrition on the PHC and there is progress – minimum service for nutrition – at list screening for malnurished children and mother
GBV: on risk mitigation action indicator, but the could not adopt in
SRH UNFPA: SRH desk review for Syria – Information and data are an issue
Protection risk analysis and main streaming protection into health

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- No
    - In Good opportunity for Food security 4-5 sector together for a framework together
    - HRP process intersectorial logframe – with action indicators – this could be a good tool -
    - Planning is not linked to the implementation – Fragmentation of action
    - Local authorities – how

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on Nurturing Care for Children in Humanitarian Settings conducted in your country or context over the past year? If applicable, please provide:
- No, but a training of essential service package – nut, or child health -
  - The organizer
  - Participants involved

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings and seek community engagement and feedback? Can you provide an example?
Localization: wide network of CHW and volunteers RCC referral screening child health – the issue is
How to assess the CHW initiative and how to improve their engagement
Fate base organization, are not formal cluster members
HC: have good relation with local health authorities
Connect the dots
Feeback from the community can improve

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
Do you think that we need more funding, or could we better prioritize knowing that children < 3years and their care givers are a priority?
Not aware
Withing the whifer health package
ECHO, French foreign germans BHA

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings on child health and development outcomes? What indicators do you use?
No – beside the health
Impact indicators do not exist -

- If no indicators, ask about existing child health

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care for Children in Humanitarian Settings?
- Yes
- No

If yes, please specify any monitoring tools used

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- No part of the need assessment
- No tool to assess the needs of this special group-
- Now the need assessment will include a nutrition question
- Indicators and treshort – we have treasort for vacciation and indicators under the child development
- Health and not community base indicators – CAD study is not done

- System
- Need assessment need to include it
- Severity analysis
- Implementation
- Early recovery and resilience framework – what is humanitarian and what can go into early recovery
- Humanitarian treasort
- Need to be more innovative under humanitarian and recovery

8. **Success Stories**
- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- IRC initiative (To share)

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings within your health cluster's activities? What support would you need to translate these priorities into actions?
- Intersectoral framework + nurturing care need to be merged
- Indicators package
- Whole of syrian and all Habs every – to present some slides what are the practical – July Andrea – NCF – Share - report

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, How do you agree with the following sentence:

- In your country or context, progress has been made in integrating the Nurturing Care for children in Humanitarian Settings Framework into existing health responses

·

· Agree- something is going on

Is the any other issue you want to bring to my attention?

MALI

1. **Implementation of the Nurturing Care Framework**

· Could you describe some specific actions or initiatives you have taken to implement the Nurturing Care for Children in Humanitarian Settings Framework within your health programs? Please provide details about the types of activities conducted, the target populations, and any partnerships involved.

- If yes, what strategies have you found to be the most effective in achieving your objectives?
  - No matching the word. We are taking care about the kids. Global overhall that we provide tIDP including the Kids mothers- Kids are involved We provide care- including nut. Vaccination, 2 type of team fix team in the camp + mobile team to try to catch up the far people. General care.
  - No targeting Kid <3 years
  - Funding is for IDP + host and gen. Pop.
  - SC partner they targeting but not only
  - MSF target young people
  - Sensibilization on children IDEA MDM
  - Nut malnutrition is care for WASH+ NUT //+ health they take care of kids

- Example - Comm. Worker to sensitize mother and community to early detect malnutrition and how to prevent malnutrition – advise how to cook- how to use what they have in term of food.

2. **Inter-sectoral Coordination**

· Can you please describe existing efforts toward partnerships between clusters/sectors to incorporate the Nurturing Care for Children in Humanitarian Settings Framework in your actions and plans?

- EX: process to elaborate HRP – we work and plan together- Nut mailnly nut and health cluster – the planning HRP we work together to IPC (acute malnutrition classification) level of malnutrition
- Protection is transversal – noting moving w/o sexual harassment and protectio. Donor ask to include – sensibilitzation for actor for protection sexual abuse- children wome/man sexual abuse- maily targeting kids and women
- No much with WASH

…. Still on Coordination

· Is there an early childhood development focal point or an ad hoc related working group in your country context?

- No – we have sexual reproductive health sub group
- If yes, please list them and specify if they are national or international:
  1. _lead by UNFPA + int norway church association and national (National/International/Both)

3. **Capacity Building**

- Was there any capacity-building or training sessions focused on nurturing care for children in humanitarian settings conducted in your country or context over the past year? If applicable, please provide:
- NO

4. Community Engagement

· How do you engage with the local communities to promote the Nurturing Care for Children in Humanitarian Settings Framework and seek community engagement and they feedback? Can you provide an example?
Sensitization with CHW see question 1 about food nutrion- how to cook
We have a mechanism of accountability we can have a feedback but not specific on nutrion aspect .

5. Funding for Integrating Nurturing Care Framework

· Is there any donor providing funding to support the integration of the Nurturing Care for Children in Humanitarian Settings Framework into existing health responses in your country or context? Please provide details on the funding sources, types of support received, and any significant partnerships that have facilitated these initiatives.
No general fud CFA CERF - BHA for nutrition

6. **Monitoring and Evaluation**

· How do you monitor and evaluate the impact of the Nurturing Care for Children in Humanitarian Settings Framework on child health and development outcomes? What indicators do you use?
No specific - only general - vaccination coverage – Acute and severe malnoutrition N. Of CHW deployed to do sensitization

· Have you developed any joint monitoring indicators to supplement existing sector-specific indicators for a more comprehensive evaluation of the Nurturing Care Plan for children in humanitarian settings?

- No

IPC assessment published – when we have a new program we plan accourdingluy to the level of IPC

7. Challenges and Solutions

· What are the primary challenges you face in integrating the Nurturing Care for Children in Humanitarian Settings framework into your health programs? Could you provide specific examples and explain how you are addressing these challenges?

- Little awareness of the NCF
- No step on nutrition – there are barrear between 2 section

8. **Success Stories**

- Can you share a specific success story where the integration of the Nurturing Care for Children in Humanitarian Settings framework significantly improved outcomes for children and their families in a humanitarian setting? Please describe the situation, the actions taken, and the positive impacts observed.
- WE help the IPC – zero dose of the behind any antigen – mobile team help to catch kids – CHW 200 go around to sensitize

9. **Future Directions**

· Looking ahead, what are your priorities for further integrating and strengthening the Nurturing Care for Children in Humanitarian Settings framework within your health cluster's activities? What support would you need to translate these priorities into actions?
This discussion have help to better integrate in the

10. Assessment of Integration Progress

· Since the Nurturing Care Framework was developed in 2018 and the specific guidelines for children living in humanitarian settings were introduced in 2020, how much progress do you think has been made in integrating the Nurturing Care Framework into existing health responses in your country or context? If you were to express this progress as a percentage, where 0% represents no progress and 100% represents full integration, what percentage would you assign?
20%