This project was a collaborative effort among child protection practitioners, academics, and advocates across the globe. The project team is indebted to the members of the Inter-Agency Review Committee, as well as the country consultants who have inspired the development of a practical resource that can immediately benefit community volunteers. Thanks to Michelle Van Akin for her project leadership and immeasurable support to ensure the development of this resource.

Most importantly, we would like to thank the community volunteers themselves, who work tirelessly to protect children in their communities from violence, exploitation, abuse, and neglect. It is their stories and services that have driven this project.

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The contents are the responsibility of the Alliance, and do not necessarily reflect the views of USAID or of the United States Government.


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**Author:** Colleen Fitzgerald, LMSW.
They are our neighbors, a friend, a listener, an interpreter, a guide. They notice when we are facing problems, and are the first ones to respond. They open doors for us. And as we go to new places, they are right there with us, by our side. They are appreciated in our community, working all day long for children like us. They understand and advise us, they encourage and support us. Sometimes they take risks for us. They are our translators and interpreters when no one understands. They help us solve problems. They listen to us, in confidence and trust. They are beside us, so we can be brave. They help us stay safe. They are far more than neighbors to us. They look after us, empower, and protect us. They value us ... and we value them.

Today, more than ever, volunteers are on the frontlines of protecting children in their communities. Volunteers work tirelessly in complex humanitarian contexts and often face emotional and physical risks, with little recognition for their efforts.

The Toolkit for Community Child Protection Volunteers and supplementary training manual aim to promote evidence-informed best practices when engaging community volunteers in child protection responses. This toolkit is based on the Community Engagement in Case Management study, which was commissioned by the Alliance and completed in 2020. The study included a review of the evidence on the effectiveness of community volunteers, as well as a comparison of its findings with data from current practice. Methods included interviews with child protection practitioners and an examination of documents such as training materials, standard operating procedures, and guidelines. Volunteers’ perspectives were collected via narratives from a variety of contexts and through qualitative research in four humanitarian settings in Myanmar and Malawi. The toolkit and supplementary training manual were piloted in three humanitarian settings: Borno State, Nigeria; Dzaleka refugee camp, Malawi; and Cabo Delgado Province, Mozambique.

The evidence showed us that when we care for community volunteers, we serve vulnerable children better. Our vision is that this toolkit will inspire child protection organizations across the globe to recognize the essential roles of volunteers and develop case management responses that will engage volunteers ethically. These changes will not happen overnight, but even small measures can lead to a significant impact.
Countries engaged in the global research (including field narratives and key informant interviews) and field testing

Photo © PLAN International: Anthony Huus
# Background

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## Ethical Practice Guidance for Community Volunteers Engaged in Case Management

### Step 1. Assess and Analyze Community Volunteer Engagement in Case Management in the Context

- Assessments of the context for community engagement in Case Management
- Analysis of Community Volunteer engagement in Case Management

### Step 2. Decide How to Engage or Adapt Community Volunteers’ Roles in Case Management

- Determining Roles and Expectations
- Budget Considerations for Community Volunteers’ Support to Case Management

### Step 3. Implement Case Management Projects That Ethically Engage Community Volunteers

- Identifying and Selecting Community Volunteers
- Community Volunteers as Part of the CP Case Management team
- Remote Case Management Teamwork
- Peer Support
- Supervision
- Remote Supervision
- Power Dynamics
- The Safety of Community Volunteers
- The Wellbeing of Community Volunteers
Step 4. Strengthen and Develop Community Volunteers’ Capacity to Support Case Management

Step 5. Engage in Monitoring, Evaluation, Accountability, and Learning (MEAL) with Community Volunteers to Ensure Accountability and Safeguarding

Step 6. Advocate for Ethical Engagement of Community Volunteers in Case Management

References

Tools

1. Interview Guide on Community Volunteer Engagement
2. Workshop Guide on Community Volunteer Engagement
3. Analysis Guide on Community Volunteer Engagement
4. Community Volunteer Role Description
5. Budget Checklist for Community Volunteers
6. CP Community Volunteer Selection
7. Community Volunteer Code of Conduct
8. Peer Support Group Tool
9. Individual Supervision Meeting Record
10. Group Supervision Meeting Record
11. Community Volunteer Safety and Wellbeing Checklist
12. Feedback Boxes Tool
13. Volunteer Questionnaire Tool
14. Best Practices Poster
15. Community Volunteer Policy Brief
**Case management:** an approach for addressing the needs of an individual child who is at risk of harm or has been harmed. The child and their family are supported by a caseworker in a systematic and timely manner through direct support and referrals. Case management provides individualized, coordinated, holistic, multisectoral support for complex and often interconnected child protection concerns.¹

**Caseworker:** the key worker involved in a case who maintains responsibility for the child’s care — from identification to case closure.

**Child protection:** the prevention of and response to abuse, neglect, exploitation, and violence against children.

**Community-led child protection:** approaches that are led by a collective, community-driven process rather than by an NGO, United Nations (UN) agency, or another outside actor.²

**Confidentiality:** the obligation that information about an individual disclosed in a relationship of trust will not be disclosed or made available to unauthorized persons in a manner inconsistent with the terms of the original disclosure or without prior permission.

**Incentive:** a payment or concession to encourage and/or facilitate certain behavior or actions.

**Minimum expenditure basket (MEB):** what a household requires in order to meet its essential needs on a regular or seasonal basis, and its cost. The MEB is a monetary threshold for the cost of these goods, utilities, services, and resources — and is conceptually equivalent to a poverty line.³

**Natural helpers:** community members acting in an informal way to help their neighbors, with no relationship with any organization.

**Referral:** the process of formally requesting services for a child or their family from an agency through an established procedure and/or form. Caseworkers retain the overall responsibility for the case even after referrals.

**Remuneration:** money paid for work or a service.⁴

**Salary:** a fixed regular payment made by an employer to an employee.

**Supervision:** a supportive relationship. It is carried out via regular meetings that focus on accountability, well-being, and skill development. Through regular contacts, the supervisor provides coaching and encourages the supervisee to critically reflect on their practices. The ultimate aim of supervision is to improve services for the clients.⁵

**Volunteers:** individuals from the affected community who are selected by an organization to support children and families. Community volunteers have a formal agreement with a local community-based organization, a local or national nongovernmental organization (NGO), an international NGO, the government, or a UN agency.
• CP: Child Protection
• CPMS: Minimum Standards for Child Protection in Humanitarian Action (Child Protection Minimum Standards)
• CPCM: Child Protection Case Management
• IDP: Internally Displaced Person
• IFRC: International Federation of Red Cross and Red Crescent Societies
• M&E: Monitoring and Evaluation
• MEAL: Monitoring, Evaluation, Accountability, and Learning
• NGO: Nongovernmental Organization
• PSEA: Prevention of Sexual Exploitation and Abuse
• SOP: Standard Operating Procedure
• UN: United Nations
• USAID: United States Agency for International Development
• UNHCR: United Nations High Commissioner for Refugees
• UNICEF: United Nations International Children’s Emergency Fund

A Toolkit for Community Child Protection Volunteers, Part 1: Volunteers’ Roles Supporting Case Management, and the supplementary Training Manual, are for child protection (CP) case management actors who work with community volunteers to support children and families in their communities. The toolkit provides guidance for:

- CP case management teams, including volunteers, caseworkers, supervisors, and managers
- CP staff responsible for designing, coordinating, and monitoring case management activities
- CP advisors focused on providing technical support and developing standards for case management

Prerequisites

As a foundation, it is essential that CP organizations using this guidance and toolkit have relationships with the affected communities, and promote the communities’ natural mechanisms for keeping children safe. The customs and practices of communities for keeping children safe vary greatly across countries, contexts, and cultures. During humanitarian emergencies, there are often new harms that children are exposed to, and new coping strategies employed by families and community members. It is essential that CP actors consistently support community members’ ownership, as outlined in the Minimum Standards for Child Protection in Humanitarian Action (CPMS, Standard 17). In all humanitarian responses, it is critical for CP actors to avoid doing harm. They can achieve this by understanding:

- Community beliefs and concepts regarding child well-being and development
- Existing community structures and power dynamics
- Resources and strengths within the community that protect children
- Local practices of protecting children from violence, abuse, neglect, and exploitation
- Customary practices that may have been designed to protect children, but may actually be harmful to them

Further, CP organizations using this toolkit must meet the minimum standards of case management, as outlined in the CPMS (Standard 19). This includes determining whether case management is contextually appropriate and if the organization is able to provide the needed case management services in line with national systems and procedures. CP organizations implementing case management must have adequate procedural safeguards, data protection standards, staff training, and supervision.
The tools presented in this toolkit and in the supplementary training manual should be used alongside the existing community-level CP and case management global resources, as outlined below:

<table>
<thead>
<tr>
<th>Community-Level CP Resources</th>
<th>Case Management Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>• A Reflective Field Guide: Community-level Approaches to Child Protection in Humanitarian</td>
<td>• Inter Agency Guidelines for Case Management &amp; Child Protection, 2014</td>
</tr>
<tr>
<td>• Strengthening Community-level Child Protection in Humanitarian Action: Capacity Building</td>
<td>• Case Management Supervision and Coaching Package, 2018</td>
</tr>
<tr>
<td>Package, 2020</td>
<td></td>
</tr>
<tr>
<td>• A guide for supporting community-led child protection processes, 2018</td>
<td></td>
</tr>
<tr>
<td>• Toolkit for reflective practice in supporting community-led child protection processes, 2018</td>
<td></td>
</tr>
</tbody>
</table>
In humanitarian responses across the globe, community volunteers are an essential part of the response to cases of violence, abuse, neglect, and exploitation of children. While volunteers often take on a variety of roles when responding to the needs of children in their communities, this toolkit focuses on the specific roles of community volunteers related to case management.

What the Research Tells Us

In 2020, the Alliance for Child Protection in Humanitarian Action conducted the Community Engagement in Case Management Study, which focused on the roles of community volunteers in the case management process. The study identified the capacities and limitations of community volunteers and identified best practices. It provided evidence that served as the basis for this toolkit and the training manual. The key findings related to community volunteers’ engagement in case management are summarized below.

Benefits

In humanitarian responses, there are significant benefits to children, families, and the broader community when CP organizations engage community volunteers, as the volunteers:

- Are the critical bridge extending support from CP actors to children and families affected by crises
- Are ever-present in the community when no other system exists or when humanitarian actors cannot gain access
- Bring a deep understanding of the context and relationships with children, families, communities, and religious leaders
- Develop a sense of agency and positive identity within the community
Potential risks

- Often CP organizations do not adequately recognize volunteers as members of the affected community in need of protection and humanitarian assistance.
- Community volunteers are frequently expected to respond to CP cases without the training, supervision, or support needed to do the work safely and effectively. At worst, this was referred to by some key informants as potential exploitation.
- Power dynamics are a central, complex part of community volunteers’ lives; with the CP organization, the community, and the volunteers’ relationships with children at risk.
- They frequently face emotional and physical risks, as well as threats of retaliation.
- The limited support and recognition, coupled with complex power dynamics, can lead to potential risks of harm to children and families.
- Negative consequences can arise if community volunteers are engaged with inadequate resources or with too little thought given to the issues highlighted above.

As outlined in the research, the engagement of community volunteers in case management can at times be problematic and potentially harmful to children and families. Volunteers are frequently expected to support CP cases without the training, supervision, or support needed to do the work safely or effectively. In addition, the research showed that community “volunteers”, some of whom are provided with limited incentives, are often expected to work full time, leaving little time for them to meet their own economic or family needs. The evidence suggests that this situation is not sustainable; it can also affect the safety and well-being of the volunteers and, ultimately, of the children and families they serve.
The evidence gathered in the research points to clear ethical practices for the engagement of community volunteers in a CP case management program. They include:

- Clearly defined roles and responsibilities of community volunteers, with clear limits to their roles in case management
- Fair compensation and recognition for community volunteers according to the CP organizations’ expectations
- Enough resources for the community volunteers to be successful
- Engagement of community groups and structures, children, and caregivers in volunteer selection
- Investment in ongoing training, supervision, and coaching of community volunteers
- Integration of community volunteers into CP case management teams, and eventually into the broader social service workforce
- Prioritization of community volunteer safety and well-being
- Strong policy and leadership support from donors, organizational leadership, and policymakers for the ethical engagement of community volunteers

The table below is based on the ethical practices outlined above. It aims to outline the various roles that community members can assume in case management and distinguish who the volunteers should be. Note that community members can be recruited by CP organizations as caseworkers responsible for the children’s care from identification to case closure. The role of a caseworker must be a paid staff position with ongoing training, supervision, and coaching (as outlined in the CPMS). Meanwhile, natural helpers are community members who are already helping children on an informal basis; they should be recognized as resources, although they are not formally engaged by the organization. Community volunteers, finally, are community members who are contracted by a CP organization with specific limited responsibilities related to case management. They should be provided with ongoing training and supervision, and may be offered an incentive, but they are not expected to work full time.

**REMEMBER:**

There are many CP organizations who are unable to meet all of the standards outlined in the toolkit due to current limitations in the humanitarian context and funding restrictions. This guidance is meant to encourage organizations to move closer toward ethical practice, which in many cases will take time.
<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Natural Helpers</th>
<th>Volunteers (the focus of this toolkit)</th>
<th>Caseworkers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Member of the community?</td>
<td>From the community</td>
<td>From the community</td>
<td>May or may not be from the community (volunteers can, over time, progress into this job)</td>
</tr>
<tr>
<td>Formally engaged by an organization?</td>
<td>No, though they may be recognized and engaged as a local resource for children</td>
<td>Formal agreement with an organization</td>
<td>Employment by an organization</td>
</tr>
<tr>
<td>Time commitment?</td>
<td>No time commitment</td>
<td>Limited time commitment; not full time, considering that they are not paid a salary; allows for other livelihood activities</td>
<td>Full time</td>
</tr>
<tr>
<td>Educational expectations?</td>
<td>No educational criteria</td>
<td>Should be decided according to the context, might be expected to have a secondary education</td>
<td>Secondary education required, at a minimum</td>
</tr>
<tr>
<td>Roles and responsibilities related to case management?</td>
<td>No formal responsibilities; help children informally; might be asked to support a child as part of a case plan, and might be informed on how to refer children at risk</td>
<td>Not responsible for the full case management process, but may help with: the identification and referral of cases, follow-up on cases when needed (especially in remote, hard-to-access settings), accompanying children to services, interpretation for caseworkers</td>
<td>Responsible for the full case management process</td>
</tr>
<tr>
<td>Documentation/reporting?</td>
<td>None</td>
<td>Minimal/simple documentation, as might be required, limited to referral forms and basic tracking of follow-ups</td>
<td>All case management forms, including Best Interests Assessments, in refugee contexts</td>
</tr>
<tr>
<td>Training?</td>
<td>Might be trained in how to identify children at risk and refer them to CP organizations</td>
<td>Brief training related to CP, including identification and referral; and basic training in case management (sessions 1-9 in the training manual, at a minimum)</td>
<td>Full case management training</td>
</tr>
<tr>
<td>----------</td>
<td>------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>Supervision?</td>
<td>None</td>
<td>Regular group supervision; individual supervision recommended, when feasible</td>
<td>Regular individual and group supervision</td>
</tr>
<tr>
<td>Payment?</td>
<td>No payment</td>
<td>Must be decided according to the context, with stipends/incentives agreed upon by interagency partners</td>
<td>Salary equivalent to that of an employee of the government or of other NGOs</td>
</tr>
</tbody>
</table>
Six Steps to Ethical Practice for CP Organizations Working With Volunteers Supporting Case Management

This toolkit supports CP actors to achieve ethical practice standards by progressing through six essential steps. Building on the evidence, all six steps include guidance on how to engage volunteers in each part of the process.

1. Assess and analyze community volunteers’ engagement in case management in the context

2. Decide how to engage or adapt community volunteers’ roles in case management

3. Implement case management projects that ethically engage community volunteers

4. Strengthen and develop community volunteers’ capacity to support case management

5. Engage in Monitoring, Evaluation, Accountability, and Learning (MEAL) with community volunteers to ensure accountability and safeguarding

6. Advocate for Ethical Engagement of Community Volunteers in Case Management

Before selecting the proper implementation tools and capacity development materials to use (steps 3 and 4), it is essential that CP teams undertake the assessment, analysis, and decision-making phases (steps 1 and 2). This recommendation is based on the key finding from the research that CP actors often make decisions on how to engage community volunteers in case management without adequately understanding the conditions, challenges, and realities that volunteers face on a daily basis. Frequently, community volunteers are engaged without a clear framework or plan for sustainability, leading to potential harm to children, families, and communities.

Step I: Assess and Analyze Community Volunteer Engagement in Case Management in the Context

What the evidence says: Safe, effective, and sustainable CP case management programming must include the organization’s continuous understanding of the context, in collaboration with the community, especially community volunteers.

This section of the toolkit is for CP organizations that are engaging community volunteers or are planning to do so. The target audience includes managers, advisors, and/or technical staff who are responsible for assessing the context and designing programs. It is essential that they think critically about how their organizations are already engaging community members in a humanitarian response, and how their organizations plan to engage community volunteers in case management. The findings of an assessment can provide Child Protection Case Management (CPCM) actors with the critical information they need to implement ethical programs.

Assessments for CP organizations can vary in nature, depending on the phase of the response and the existing level of engagement with community volunteers. Regardless of the phase, however, some key assessment questions about the context need to be considered, and they are outlined in the table below.

Note: It is expected that users of this toolkit are implementing a case management approach, with paid caseworkers. Thus, the assessment questions are for volunteers who are tasked with supporting caseworkers.

### Key Questions About the Context (for all CP organizations)

<table>
<thead>
<tr>
<th>Engagement of Community Volunteers in Support of Case Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>• What is the expected benefit of engaging community volunteers in support of case management? (To children, families, the community, and the CP organization)</td>
</tr>
<tr>
<td>• What assets and knowledge can community volunteers bring to the CP team?</td>
</tr>
<tr>
<td>• What are the possible risks to community volunteers who support case management?</td>
</tr>
<tr>
<td>• Would these risks differ between male or female volunteers, among volunteers from different ethnic groups, or among volunteers with disabilities?</td>
</tr>
<tr>
<td>• If community volunteers provide support for case management, what are the possible risks to the children and families? (Consider the issues of safeguarding and confidentiality.)</td>
</tr>
</tbody>
</table>
Community Workforce

- Who are the community members already responding to children’s needs (including the “natural helpers”)?
- Who are the community members that children and families trust?
- What educational levels do these community members have?
- What roles/jobs did community members have before the humanitarian emergency?

Power Dynamics

- What are the current power dynamics among community members?
- Who are the community leaders, and is their leadership accepted?
- What are the relationships among the different cultural/ethnic groups or nationalities?
- What are the relationships between the affected population and humanitarian organizations?
  - Are there issues of power and trust?
  - Does the affected population speak a different language from that of most of the humanitarian organization staff?

Remuneration

- Do members of the affected community — such as refugees and internally displaced persons — have the right to work?
- What livelihood opportunities exist for the affected community?
- Will volunteering enhance or reduce livelihood opportunities for community volunteers?
- What is the minimum expenditure basket in the context?¹¹ (This information can be gathered from colleagues engaged in economic empowerment, food assistance, or livelihood programs)
- What is the legal minimum wage in the context?
- How much does a government social worker and/or a para social worker earn?
- What is the compensation/incentive policy for other NGOs involved in the humanitarian response?
- How might remuneration impact community volunteers’ well-being and safety?
- What is the CP organization’s policy on incentives or stipends for volunteers?

Sustainability

- How long will the funding likely continue for the CPCM program?
- If funding is discontinued for the CPCM program, what is the organization’s exit strategy?
- If community volunteers are engaged, how can they be integrated into the national CP system and social service workforce?

(For CP organizations not yet engaging community volunteers, skip to Step 2.)

Assessment with Current Community Volunteers

For CP organizations already engaging community volunteers, it is recommended that they use Tool 1. Interview Guide on Community Volunteer Engagement and Tool 2. Workshop Guide on Community Volunteer Engagement. These tools will help CP organizations answer the following fundamental questions:

1. Are the roles of community volunteers working in case management appropriate and ethical?
   - How are community volunteers supporting case management?
   - What are the roles of community volunteers on the case management team?
   - How are community volunteers supporting children with protection concerns and their families?
   - What types of cases are community volunteers working on, if appropriate (including the risk levels)? How is this determined?
   - How much time does their role require of them?
   - Do community volunteers have time for livelihood activities to support their families?

2. Are volunteers receiving sufficient recognition, training, and supervision?
   - What is the CP organization doing to recognize its volunteers?
   - What training(s) have the volunteers received? Has the training adequately prepared them for their roles?
   - Are the volunteers being regularly supervised and coached? If so, what does that look like and is it enough?

3. Are the material support and remuneration being offered to community volunteers adequate for their roles?
   - What remuneration is being offered to the community volunteers?
   - How is the remuneration funded and sustained?
   - Does the remuneration adequately reflect the volunteers’ expected roles and responsibilities?
   - Do volunteers have the material support they need to be successful in their roles? (This typically includes communications, transportation, and visibility/identification.)

4. What are the challenges, risks, and power dynamics that community volunteers must face?
   - What challenges are the volunteers facing as part of their work in the community and in case management?
   - What risks and power dynamics are the volunteers navigating
     - in their communities?
     - from other volunteers?
     - from the management at their CP organizations?
   - How do the volunteers feel about their CP roles within the community?
   - What motivates community volunteers to continue in their roles?
   - How do community members feel about the roles and responsibilities of the volunteers?
Analysis of Community Volunteer Engagement in Case Management

Following the assessment, the next recommended phase is a joint analysis by the CP team members, including staff and volunteers. This joint analysis will help determine what is going well and what needs to be improved in the ways that volunteers are involved in the CPCM response.

This approach aims to promote reflection and decision-making, with the CP organization and volunteers taking ownership of different opportunities to address challenges and promote current positive practices. Due to power dynamics, it is important that there be separate sessions — with the volunteers alone and the CP staff alone — before they come together in the final gathering.

Tool 3. Analysis Guide of Community Volunteer Engagement in Case Management breaks down the analysis process into three sessions:

<table>
<thead>
<tr>
<th>Sessions</th>
<th>Goals</th>
<th>Who Attends?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Volunteers: What have we learned? (2 hours)</td>
<td>Summarize the findings of the assessment, brainstorm what the CP team can do to make improvements.</td>
<td>Approximately 20 volunteers (try to ensure representation, to have a geographical area, age, and gender balance).</td>
</tr>
<tr>
<td>2. Staff: what have we learned? (2 hours)</td>
<td>Summarize the findings of the assessment, brainstorm what the CP team can do to make improvements.</td>
<td>CP Staff members (caseworkers, supervisors, and the manager; if appropriate, HR or proposal-development colleagues may also attend.)</td>
</tr>
<tr>
<td>3. CP team: what can we do together? (3 hours)</td>
<td>Present suggested actions and develop a joint plan together, as a team.</td>
<td>If possible, all of the volunteers and staff should operate in this session as one collective CP team.</td>
</tr>
</tbody>
</table>

In the countries where the toolkit was piloted (Nigeria and Malawi), small task teams of staff and volunteers were formed to work together. The task teams were responsible for implementing the action plan over several months, and they were required to report back to the rest of the CP team. This approach might be replicable in other contexts.

Tools Associated with Assessment

Tool 1. Interview Guide on Community Volunteer Engagement
Tool 2. Workshop Guide on Community Volunteer Engagement
Tool 3. Analysis Guide of Community Volunteer Engagement in Case Management

12. These numbers are suggestions. Attendance should always be determined in line with the current local COVID and safety regulations.
Step 2: Decide How to Engage or Adapt Community Volunteers’ Roles in Case Management

What the evidence says: Clearly defining the roles and expectations of community volunteers involved in case management is critical. When there are unrealistic or unclear roles and expectations, community volunteers and children may be put at risk.

Following the assessment and analysis step, the CP organization should make some important decisions regarding the way forward with community volunteers’ roles in case management. Depending on the stage of programming, these decisions might vary. For instance, it might be possible to implement some decisions immediately, while others might require longer-term strategies and advocacy.

A key factor in sustainability of programming and ethical engagement of community volunteers is the involvement of the volunteers in decision-making. Volunteers should also be encouraged to implement changes that were agreed upon in the final analysis session with the CP team.

Determining Roles and Expectations
It is suggested that the roles of community volunteers be determined based on Tool 4. Community Volunteer Role Description. The CP organization should discuss and decide with the community volunteers what their roles are, and are not. The organization should describe, using the tool, the responsibilities of the community volunteers, as well as its responsibilities to the volunteers.

Community volunteers may have multiple functions, depending on the context, and there may be many different types of volunteers working with an organization. At times, there are different “tiers” or “types” of CP volunteers, depending on the needs of the context. If there are different types of volunteers, the amount of training, supervision, and remuneration should increase for those with greater responsibilities and expected time dedicated to their activities.

A case management system demands skilled and fairly paid caseworkers. Caseworkers must be fairly paid and trained if a case management approach is to be implemented in an ethical, effective and sustainable way. Individuals from the community can be recruited as caseworkers, but they must meet the required competencies, be paid fairly for their responsibilities and workload, and provided ongoing training, supervision and coaching. If the context does not allow individuals from the community to be legally paid as staff (such as in many refugee contexts), they should not be tasked with the responsibilities of caseworkers. Further, if there are not adequate financial resources for paid caseworkers and supervisors, this is not an appropriate justification to task community volunteers as caseworkers.

It is important that all community volunteers involved in case management clearly understand their roles and responsibilities, including the limits of these roles, and where to go for support. Finally, it is essential that the roles of community volunteers are clearly and regularly communicated within the community. Clarifying roles with the volunteers, children, and the broader community is a key element of volunteer safety (as discussed below in the “Safety of Volunteers” section.)

Community volunteer roles supporting CPCM may include:

- Building supportive and trusting relationships with children, families, natural helpers, and leaders in the community
- Identification of children with protection concerns in the community
- Safe referral of children with protection concerns to caseworkers in a timely manner
- Monitoring and follow-up for children and families as part of a case plan
- Accompanying children and families to formal services
- Linking the case management team to local CP structures
- Interpretation for caseworkers when they speak with children and families
- Simple documentation, such as monthly reports or referral forms, but not case management forms

Regardless of the contextual differences, it is essential that certain red lines are not crossed:

- The role of the caseworker, who retains the responsibility for the child’s care, from identification to case closure, is a role for paid staff only.
- Community volunteers who engage with and support caseworkers must get ongoing training, coaching, and supervision.
- Community volunteers should work only limited hours for the CP organization, so they may have time to devote to their livelihoods and families.
- The safety and well-being of community volunteers is part of the CP organization’s “duty of care,” and must be prioritized.

**Bottom line:** If there is not enough funding for paid caseworkers to implement case management with ongoing training, coaching, and supervision, the case management approach should not be implemented.
Budget Considerations for Community Volunteers’ Support to Case Management

**What the evidence says:** CP organizations must ethically compensate volunteers and fund training, supervision, program materials, and equipment, so that volunteers can successfully fulfill their essential roles.

Case management budgets typically include essential items such as transportation, communications, and office space. However, the materials needed for volunteers to be successful in their roles are often inadequately budgeted. It is important to think carefully about what is needed for volunteers to be equipped and safe in their community roles. For example, if community volunteers are in a remote location and access is unstable, it is recommended to ensure they have access to a mobile phone and adequate phone credit in order to have regular and close communication with their supervisor or the appropriate caseworker. Other considerations include ID cards, safety equipment, and training costs. **Tool 5. Budget Checklist for Community Volunteers** outlines budget considerations to ensure that there is adequate funding for community volunteers to have the necessary equipment and materials to be successful in their roles supporting case management.

After reviewing the roles and expectations of community volunteers, CP organizations must determine a fair compensation policy. This should be decided according to the results of the assessment “remuneration” questions in Step 1. Where there is no “right to work” (e.g., refugees are not allowed to work in around 50% of asylum countries), careful thought must be given to how the remuneration will be carried out.

There must be careful consideration if remuneration would be appropriate at all, as incentives might disrupt existing local practices. Organizations must take in account the potential backlash and safeguarding concerns. Whatever the form of compensation — payments, reimbursements, in-kind services, or financial incentives — the amount should not be much higher than the local market value of the work performed, as this could cause social tensions (e.g., jealousy, backlash from the community) and safety issues for the volunteers.

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16. Bacalso, Cristina and Moxon, Dr. Dan, Plan International. 30 March 2021, Guidance on Compensation for Young People Engaging with International NGOs.
Determining a fair compensation policy for community volunteers

If a financial incentive is deemed the most appropriate form of compensation for the volunteers’ workload and responsibilities (allowing them time for their own livelihood activities, if necessary), it should be aligned with the compensation offered by other CP and humanitarian actors through coordination structures, in order to avoid luring volunteers away from those other organizations. Remuneration should be standardized among interagency partners according to:

- The skill level and responsibilities required
- The amount of time dedicated to the role
- The local minimum wage, but also the typical salary of a government social worker or para social worker

Any form of incentive for community volunteers must be transparent to community members, and to all volunteers working with other organizations operating in the same region. Incentives or payments must be provided in a safe, consistent, and timely manner.

REMEMBER:

Remuneration does not make volunteers staff or employees. Rather, the remuneration should reflect the time commitment expected of them. Thus, if they work during limited hours, the remuneration can be in the form of a financial incentive; however, if they are expected to work full time, they should be paid as staff.
Step 3: Implement Case Management Projects That Ethically Engage Community Volunteers

This section includes guidance and tools on the following implementation topics:

- Identifying and selecting community volunteers
- Community volunteers as part of the case management team
- Peer support
- Remote case management teamwork
- Supervision (including remote supervision)
- Power dynamics
- Protecting the safety and well-being of community volunteers

Identifying and Selecting Community Volunteers

*What the evidence says:* The process of identifying and selecting volunteers will greatly influence the project’s effectiveness in responding to children’s needs, maintaining the volunteers’ safety, and building acceptance in the community.

The selection of community volunteers should be done in collaboration with the community in order to build acceptance, reduce the risks of exploitation and abuse of children, and reduce the risks faced by community volunteers themselves. The selection criteria should prioritize interpersonal skills of communication, openness, humility, and dedication to helping children. Power dynamics around volunteer selection should be carefully considered. It is important that community leaders are involved in the process, but not the decision-makers. Volunteers should be representative of the diversity within the community, and should not be selected on account of their personal ties to people with power.

There are often natural helpers from the community who might be interested in undertaking a formal role as a volunteer. Other natural helpers might not want to be volunteers, but they should still be encouraged to continue their efforts to support children. Further, there may be potential volunteers who already support the activities of another program or organization. It is important that interagency partners agree on selection processes, expectations, and remuneration of volunteers, in order to avoid overburdening volunteers or causing high attrition rates due to varied incentives among agencies.

There are seven detailed steps in community volunteer identification and selection, as outlined in Tool 6. Community Volunteer Selection:
Once community volunteers are selected in collaboration with the community, they should be given an orientation to the CP program, and introduced as new members of the team. Their role description should be reviewed carefully and signed by both the volunteer and the CP organization, and a copy should be provided to the volunteer in their own language.

As part of their orientation, all community volunteers must be trained in child safeguarding and the prevention of sexual abuse and exploitation (PSEA), and they must sign Tool 7. Community Volunteer Code of Conduct. (If the organization already has a code of conduct, it might be appropriate to adapt it in order to address the specific issues concerning community volunteers). At a minimum, the training should also include the “core” sessions outlined in the supplementary training manual.

During the onboarding of community volunteers, they should be formally introduced to the relevant community representatives, such as community or religious leaders. The representatives, in turn, should be informed about the volunteers, especially about the roles the volunteers will be fulfilling (and those they will not). Community members should be aware of where to anonymously provide feedback on the community volunteers. See the section below on Monitoring, Evaluation, Accountability, and Learning (MEAL) for more details on the feedback mechanisms.

**Community Volunteers as Part of the CP Case Management Team**

*What the evidence says:* Recognizing community volunteers and incorporating them into the CP team will improve the effectiveness of case management programs.

As part of a “team approach,” it is important to recognize the roles of community volunteers, caseworkers, and supervisors as being complementary. Incorporating community volunteers into the case management team involves valuing their skills and knowledge, understanding of the context, and regarding both as critical to the team’s efforts to serve children and families.
As members of the case management team, community volunteers should be involved in decision-making, problem solving, and team discussions, incorporating their valuable insights and knowledge into the team’s work. Further, community volunteers must receive ongoing training, supervision, and coaching.

The global research highlighted different structures of teams engaging with community volunteers, which CP organizations might consider. One example is the “buddy system” in which a caseworker is paired with a community volunteer, as was done in Rakhine, Myanmar. This structure was particularly appropriate because the caseworkers did not speak the language of the affected community. Meanwhile, in many other contexts, such as the Syrian refugee response in Lebanon, there was a structure in which 5 Syrian community volunteers were paired with 1 caseworker.

The CPMS emphasizes that quality case management requires well-supervised and competent teams that have sufficient time, resources, and support to carry out their work with individual children and families. As described in the CPMS, both staff and community volunteers should have reasonable workloads and clear expectations that match their levels of experience with case management systems, so they can ethically support children and families.

Regardless of the structure that is chosen by the CP organization, clear standards should be set regarding time commitments, required skills, and recruitment. If caseworkers are responsible for supervising a group of community volunteers, their caseload should be reduced in order to maintain a reasonable workload.
Among the training sessions associated with this toolkit, Session 9. We are Better Together offers an opportunity for volunteers, caseworkers, supervisors, and other members of the CPCM team to reflect on their complementary roles. It is essential to work collaboratively and to recognize one another’s responsibilities and added value. Through a team approach, the volunteers’ and case management staff’s respective strengths can better promote the protection and well-being of children and families.

Remote Case Management Teamwork

Many current humanitarian responses are occurring in fragile contexts with fluctuating access restrictions for CP organization staff. Since 2020, the majority of CP actors have experienced the realities of lockdowns and public health containment measures associated with COVID-19.

During times of limited access to communities for CP organizations, there must be limits to the responsibilities that are transferred to community volunteers in case management. Given the wide range of humanitarian crises occurring across the world, it is recommended that CP organizations prioritize preparedness and training of community volunteers, as loss of access to families and communities can be expected. When CP organizations lose access, community volunteers can continue support through their limited case management functions, such as conducting home visits to children and families as part of the case plan, and identifying children at risk. However, they should not be asked to take on additional risks; their safety and well-being must be prioritized.

When operating in a remote or hard-to-reach location, it is recommended that community volunteers should have access to mobile phones and adequate phone credits, so they can communicate with caseworkers and supervisors. The CP organization should set guidelines and regulations about the safe and appropriate use of phones for volunteering purposes. Information management and data protection policies must be maintained in order to protect children’s data and confidentiality. CP organizations can refer to The Alliance’s “Transitioning to Remote Case Management” guidance and training module.

Peer Support

Volunteering to support CP case management can be rewarding, but it often is a stressful and complex role. A key strategy to cope with the challenges that come with being a community volunteer is to create a network of peer support. While CPCM is part of the essential services that cannot be stopped suddenly, it is important that CP organizations do not transfer all responsibilities and risks to community volunteers, as this may cause more harm.
A peer support group is a non-hierarchical, self-led group of community volunteers. Such a group helps volunteers share issues confidentially and offer emotional support. The members can support one another by sharing new insights and problem solving. With the help of the group, volunteers may identify challenges or issues faced by children, families, community members, or themselves that might require a response or advocacy.

**REMEMBER:**

1. Peer support is not a replacement for supervision.
2. Groups must maintain the confidentiality of CP issues and of any information shared by the members.
3. Volunteers should know when and how to seek additional support outside the peer support groups.
4. The principles of “do no harm” and child safeguarding must be promoted by all volunteers participating in peer support groups.

Peer support can be a complementary option alongside supervision. It can be especially useful in contexts that are hard to reach or that have restricted access, in which supervision can only happen remotely.

In order to be successful, volunteers need to feel ownership, actively engage, and see the benefits of peer support. Key elements of peer support include:

- Concern, empathy, respect, and trust
- Effective listening and communication
- Clear roles
- Teamwork, cooperation, and problem solving
- Discussion of work experience

All volunteers who participate in peer support should be trained in child safeguarding, psychological first aid, and communication skills. If a CP organization chooses to promote peer-support groups among volunteers, Tool 8. Peer Support Group provides guidance. Further, during Training Session 8. My Emotional Wellbeing as a Community Volunteer, there is an opportunity to introduce the Peer Support Group Tool to volunteers.

In addition to peer support groups that meet regularly, another option is a buddy system in which volunteers work in pairs and assist one another. They might work together in the field or be from the same community. Paired volunteers should check in with each other regularly to help each other solve problems and manage stressful situations.

Volunteers should have clear guidance on when to seek support beyond their “buddy” or peer group for issues such as child safeguarding, physical threats, and complex cases. CP organizations must have systems and communication channels in place to support volunteers to respond in a safe and timely manner.

Supervision

According to the Guidance Manual on Strengthening Supervision for the Social Service Workforce, “Supervision in the social services is a supportive relationship. It is carried out in regular meetings, which focus on accountability, well-being and skill development. Through regular contacts, the supervisor provides coaching and encourages the supervisee to critically reflect on their practice. The ultimate aim of supervision is to improve the service to clients.” The manual further emphasizes that supervision is critical for motivating volunteers, retaining them, and enabling them to do their work effectively. Further, as described in the Alliance’s 2018 Case Management Supervision and Coaching Package, the role of consistent, quality, and supportive supervision directly relates to positive outcomes for children.

### Supervision is a Protective Practice

<table>
<thead>
<tr>
<th>That:</th>
<th>Should Be:</th>
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<tbody>
<tr>
<td>• Keeps children at the center of the supervision process</td>
<td>• Regular and consistent</td>
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<tr>
<td>• Protects children and families from workers (including volunteers) who have inadequate experience, are careless, or breach professional boundaries</td>
<td>• Collaborative</td>
</tr>
<tr>
<td>• Protects workers (including volunteers) from making mistakes, suffering burn-out, or over- or under-involving themselves — all of which may cause harm to children</td>
<td>• Safe and confidential</td>
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<tr>
<td></td>
<td>• An opportunity for learning and professional growth</td>
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<tr>
<td></td>
<td>• Part of ensuring effective and accountable programming</td>
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<tr>
<td></td>
<td>• Concerned with promoting staff (and volunteer) well-being</td>
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All members of a case management team, including volunteers, should receive structured and supportive supervision. The number of hours that a community volunteer is expected to work and the extent of their responsibilities should determine the frequency and types of supervision that are most appropriate. In many contexts, group supervision will be the primary modality of supervision for volunteers who support case management. Additional individual supervision on a monthly or bimonthly basis is recommended, if resources and the context allow.

As a general principle, supervision should be more regular immediately following training, or when a volunteer is newly recruited. With time and the development of volunteers’ skills, the frequency of supervision sessions can be reduced.\textsuperscript{23} However, supervisors should be prepared to provide extra or more frequent supervision sessions following moments of crisis or in emotionally demanding circumstances faced by volunteers.\textsuperscript{24}

There are two tools that have been adapted from the Case Management Supervision and Coaching package for community volunteers within this toolkit. The table below summarizes these tools:

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<tr>
<th>Tool</th>
<th>Type of Supervision</th>
<th>Definition</th>
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<tbody>
<tr>
<td>9</td>
<td>Individual supervision meetings</td>
<td>Regular one-on-one sessions between the supervisor and volunteer that addresses administrative, developmental, and supportive functions</td>
</tr>
<tr>
<td>10</td>
<td>Group supervision meetings</td>
<td>Regular sessions including the supervisor and volunteers that are collaborative, confidential opportunities to identify and address professional-development and learning needs and to facilitate an exchange among team members</td>
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It is important that the CP organization consider who is qualified to supervise different members of the case management team. The Guidance Manual on Strengthening Supervision for the Social Service Workforce states:

\textit{Supervisors must have the experience and skill to provide this guidance and help the supervisee reflect on and critically evaluate their own practice, skills, beliefs and attitudes. Identifying those with this experience, expertise and confidence can be challenging where social service workforce development is in the nascent stages, yet is vitally important.}\textsuperscript{25}

In some contexts, caseworkers will be tasked with supervising volunteers, while in other settings there may be case management officers supervising both volunteers and caseworkers. It is critical that CP organizations carefully consider the appropriate team and supervision structures, and have the financial resources to meet the needs and ongoing capacity development of the team.

Supervision is a shared responsibility. It is up to CP organizations to create the necessary conditions to allow supervision to take place, and supervisors and community volunteers are responsible for engaging meaningfully in the process. All staff members who are supervising volunteers and caseworkers in humanitarian contexts should be trained using the Case Management Supervision and Coaching Training.

\textsuperscript{23} McBride, Kelly and Travers, Aine (The IFRC Reference Centre for Psychosocial Support and Trinity Centre for Global Health.) 2020. Integrated Model for Supervision.

\textsuperscript{24} McBride, Kelly and Travers, Aine (The IFRC Reference Centre for Psychosocial Support and Trinity Centre for Global Health.) 2020. Integrated Model for Supervision.

Remote Supervision

While face-to-face supervision is recommended, it is often challenging in humanitarian contexts due to restricted access, infectious disease outbreaks, etc. As an alternative, remote supervision can be facilitated over the phone or through digital apps such as Skype, Teams, Zoom, or WhatsApp. If remote supervision is the primary modality of supervision, community volunteers should have phone credits (and, if necessary, mobile phones) provided by the CP organization.

It is important that supervisors teach volunteers how to use the technology needed for remote supervision and see that backup options are available. When digital platforms are being used, it is particularly crucial that supervisors prevent confidential information from being shared, unless the platforms have been secured to allow for confidential information sharing.

It is possible to achieve a trusting relationship through remote supervision, despite the challenges of communicating via a digital platform. This may require supervisors to allot more time during the sessions to building rapport. See the Integrated Model for Supervision and the Guidance Manual for Supervision for key considerations related to organizing remote supervision.

Power Dynamics

What the evidence says: Acknowledging and addressing the power dynamics faced by community volunteers is essential for their effectiveness in supporting case management.

Power disparities in humanitarian responses across the world affect the quality, sustainability, and effectiveness of CP programs. As noted in the research, volunteers often find themselves involved in complex power dynamics as an “insider” and “outsider” in their communities. According to the research:

Volunteers are “insiders” in that they are working within their own communities, even if these communities are sometimes displaced in some humanitarian contexts. They shape their working identities around the idea that they belong and therefore have a purpose linked to caring for the people who live alongside them. By becoming part of a formal volunteer program, this insider status very often is disrupted. They are given training and can earn incentives, which raises their status, and they are also “branded” as volunteers with t-shirts, hats or vests. While this branding can help them access homes, talk to community leaders and access services on behalf of the children and families they support, it can also confirm their outsider status. Families who are neighbors can question their right to “interfere” in their lives, questioning why they suddenly have the power to do this. In some contexts, volunteers aligning themselves...
with a particular organization or even just being part of the hierarchy of services in the community can create distrust, particularly in places like refugee camps, which often have complex political realities.

CP organizations must understand and help volunteers navigate the power dynamics in their communities and within the organization itself. In order to promote the ethical engagement of community volunteers in case management, CP organizations should consider the power relationships:

Issues regarding power should be explored and understood by the team. When power is not acknowledged, there are risks of threats and violence between and toward community volunteers, as well as potential risks of abuse and exploitation of children and families. Further, a key issue contributing to community volunteer resignations is the lack of empowerment and acknowledgement.

The inclusion of community members and volunteers in each step of this toolkit is intended to help address power dynamics. Ethical practice when engaging community volunteers requires power dynamics to be considered during the initial assessment, analysis, and decision-making steps. The consideration of the remuneration of volunteers based on their roles influences power dynamics. As outlined earlier, the identification and selection of community volunteers must take into account the power dynamics within the community. A team approach, in which volunteers are recognized and valued for their contributions, knowledge, and skills by the staff members, also represents a shift to a more collaborative relationship, rather than a hierarchical one. These approaches are part of having “power with,” rather than “power over” community volunteers. Shifting the power norms, and listening to community members and community volunteers, promotes more effective and sustainable programming.

Power dynamics can be addressed with volunteers themselves by facilitating Session 12. Power Within My Role as a Community Volunteer, and then with the Child Protection team in Session 15. Power, risks and wellbeing of volunteers.

Further, there should be anonymous reporting mechanisms for community volunteers, children, and families, so that any misuses of power can be safely reported and addressed.

The Safety of Community Volunteers

What the evidence says: Risks related to physical and emotional safety are a daily reality for many community volunteers, yet this is an issue seldom acknowledged or addressed by organizations.

The research showed that volunteers face significant physical and emotional risks in their roles in case management. These risks can be caused by the actions they need to take, such as reporting perpetrators of sexual abuse, or because they are not able to respond with the services or resources that community members assume they should. In order to address these realities, there is an urgent need for the development of safety protocols for community volunteers.

Ensuring that community volunteers are safe from physical threats, combined with support for their mental health and well-being, is not only part of an organization’s duty of care, but can also lead to improved motivation and satisfaction, better-quality services, and increased retention rates, which ultimately benefit the children and families.

It is the responsibility of CP organizations to prepare their community volunteers to safely carry out their work. This includes ensuring that volunteers have the minimum equipment and materials needed for their roles within the

What is important to volunteers when it comes to their safety and wellbeing? (adapted from “Volunteers Stay Safe!” International Federation of Red Cross and Red Crescent Societies [IFRC])

1. To feel that the organization cares about them and provides the necessary support
2. To know that the organization has clear plans and rules on security matters; to be aware of the risks/threats/dangers involved and of the strategies and actions established to mitigate them
3. To feel comfortable, respected, accepted, and integrated; to have a friendly working environment, which reduces stress and is conducive to delivering quality humanitarian services
4. To be aware of the security procedures
5. To receive supervision and coaching on a regular basis
6. To be sure that their family and loved ones are safe and not in need, especially when a disaster/emergency occurs, or in the case of tensions and conflict
7. To be sure that they have decent, safe living conditions, and a suitable environment for their active participation
8. To have safe access to children in need

CP organizations should create a space for community volunteers to share their thoughts about the risks they are facing by facilitating **Session 7. My Safety as a Community Child Protection Volunteer**. Following the facilitation of this session, it is important for the CP organization to respond to the suggestions offered by the volunteers and to help them take actions to remain safe as individuals or in groups. **Tool 11. Community Volunteer Safety and Well-Being Checklist** outlines the key considerations for CP organizations when promoting volunteer safety and well-being. The outcomes of this checklist can also contribute to actions that the CP organization can take.

An additional way to promote volunteer safety is for the CP organization to have a clear communication strategy and transparent programming approaches, in order to prevent misunderstandings on the part of key stakeholders and the broader community. The research found that volunteers are frequently targeted by members of the community based on grievances against the broader humanitarian response. They should thus be introduced, with a clear description of their roles, to all stakeholders, authorities, traditional leadership, the wider community, and service providers. In fact, descriptions of the volunteers’ roles may need to be repeated regularly, especially in dynamic contexts. The CP organization should provide community volunteers with identification, such as a badge or uniform. In addition, the organization should provide community members relevant and timely information about programming and ongoing humanitarian assistance, to protect volunteers from being targeted and blamed.

Staff who are responsible for security within the CP organization should participate in risk assessments and offer security trainings to community volunteers. These volunteers should be included in the organization’s security policies and security phone trees; alternatively, a focal point system could be established in case of emergencies.

### The Wellbeing of Community Volunteers

**What the evidence says:** Working as a community volunteer is emotionally stressful.\(^{32}\) This, coupled with the fact that community volunteers are part of the vulnerable or displaced communities they serve, means that providing emotional support and helping volunteers learn self-care skills are not only ethical, they also contribute to the effectiveness and sustainability of programs.\(^{33}\)

The wellbeing of community volunteers is the responsibility of all members of the team, including the volunteers themselves, and should be discussed.
regularly during supervision. It is critical that volunteers understand what they can and cannot do, and that they manage their expectations and boundaries. Emotional risks are a common issue facing community volunteers. While stress is a normal reaction, if the stressors become too difficult to manage, volunteers may develop harmful stress reactions.

Community volunteers, like others affected by crises, may have normal acute distress reactions and then recover without any long-term negative impact. However, occasionally reactions to crises persist in a way that interferes with day-to-day functioning and could result in long-term mental health issues. Recognizing the signs of distress is a key skill in providing support to community volunteers. The first signs of distress are usually changes in behavior or personality. Supervisors should be attentive to volunteers showing signs of distress. These may include withdrawing from others, work, and social activities; appearing anxious or agitated; or appearing to be “low” to an extent that interferes with day-to-day functioning. It is important that volunteers be allowed personal leave after stressful events, and be given regular annual breaks to combat cumulative stress. CPCM teams should review Tool 11. Community Volunteer Safety and Wellbeing Checklist; also, all volunteers should be trained in Session 8. My Emotional Wellbeing as a Community Volunteer and develop a personal self-care plan.

Tools Associated with Implementation

Tool 6. Community Volunteer Selection
Tool 7. Community Volunteer Code of Conduct
Tool 8. Peer Support Group
Tool 9. Individual Supervision Meetings
Tool 10. Group Supervision Meetings
Tool 11. Community Volunteer Safety and Well-Being Checklist

Sessions Associated with Implementation

Session 7. My Safety as a Community Child Protection Volunteer
Session 8. My Emotional Wellbeing as a Community Volunteer
Session 9. We Are Better Together
Session 12. Power Within My Role as a Community Volunteer
Session 15. Power, Risks, and Wellbeing of Volunteers
Step 4: Strengthen and Develop Community Volunteers’ Capacity to Support Case Management

What the evidence says: The length, depth, and quality of training, as well as ongoing supervision, are all critical for the effectiveness of community volunteers. The essential skills to strengthen include interpersonal skills, notably communication with children and caregivers.

Strengthening the capacities and skills of community volunteers should be an ongoing process. Based on the research, the recommended approach is to begin with the knowledge and positive practices that community volunteers already possess, rather than assuming that they lack any relevant skills or experience.

Essential capacity development for volunteers engaged in case management includes trainings on the code of conduct, child safeguarding, and PSEA. The supplementary training manual offers a core training for volunteers (sessions 1-9), and ongoing trainings in communication skills, power dynamics, and teamwork, as volunteers develop within their roles. A key capacity development strategy includes shadowing, a practice that is used to show new or inexperienced volunteers how to engage with children and families. During a shadowing visit, a senior volunteer or a caseworker conducts a meeting with a child or family. The volunteer is a neutral observer during this contact for the purposes of learning and development. The goal of shadowing is for a senior volunteer or caseworker to demonstrate an interaction with a child to support the volunteer’s development.

CP organizations should invest in ongoing capacity building, coaching, and supervision of volunteers, focusing on relational skills and slowly building the volunteers’ responsibilities according to what is contextually appropriate. (See the “Supervision” section above.) In doing so, it is important for CP organizations to budget adequate resources for strengthening the capacity of volunteers (a minimum of 3-4 initial days, with a 2-3 day follow-up based on the training manual). These should often include training materials, transportation allowances for participants, and refreshment and venue costs. Budget should also be allocated to regular individual and/or group supervision.

It is important to link the training of community volunteers to the broader work of developing the social service workforce. Organizations should explore ways to link community volunteers to ongoing learning processes within the national CP system, whenever possible. CP organizations should provide community volunteers with access to accredited learning and personal/professional development opportunities. Such an investment in volunteers’ learning will improve their abilities to fulfill their roles, motivate them to expand their skills, and enable them to pursue their potential career pathways.
Session 1. I am a Community Child Protection Volunteer
Session 2. Thinking about my Community
Session 3. What is Child Protection?
Session 4. Case Management: an Approach to Respond to Child Protection Concerns
Session 5. My Role as a Community Volunteer in the Case Management Team
Session 6. Guiding Principles
Session 10. Communication with Children
Session 11. Communication with Caregivers

Photo © PLAN International
Step 5: Engage in Monitoring, Evaluation, Accountability, and Learning (MEAL) with Community Volunteers to Ensure Accountability and Safeguarding

**What the evidence says:** Monitoring and evaluating the engagement of community volunteers ensures that CP organizations are accountable to children, communities, and donors, and to the volunteers themselves.

Monitoring, Evaluation, Accountability, and Learning (MEAL) must be a core component of any CP program. The activities of community volunteers should be incorporated into the broader case management MEAL plan and tools.

- **Purpose of monitoring and evaluation:** measuring program progress and quality against the set objectives, activities, and indicators.
- **Purpose of feedback mechanisms and accountability:** measuring program performance against community priorities, and evaluating the actions taken to adapt the program based on community feedback.  

Feedback and reporting mechanisms are key components of accountability, which can be defined as the active commitment to use power responsibly. All CP organizations must consider the most appropriate, convenient, and safe methods to enable children, families, and community members to provide both positive and negative feedback. As stated in the CPMS:

> **Affected populations must be aware of (a) how to use the mechanisms and (b) what response they should expect when they raise a concern or report an incident. All general programme and organisational feedback should be addressed promptly and shared with staff and associates in team meetings and performance reviews in accordance with the principles of confidentiality and need to know.**

Volunteers are themselves members of the affected community, which gives rise to additional risks. Therefore, extra consideration should be given to the best ways to address potential ethics violations, as well as instances of exploitation or abuse of volunteers. It is recommended to incorporate feedback and accountability mechanisms to enable community volunteers to provide positive and negative feedback. As part of their orientation when they join the CP team, volunteers should be informed how to provide anonymous reports on services, potential abuse and exploitation, and violations of the code of conduct.

It is essential that the feedback and reporting mechanisms be established and closely monitored, and reports are addressed promptly.

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Feedback mechanisms play a significant role in the prevention of sexual abuse (PSEA) and in safeguarding children. As noted earlier, it is essential that all community volunteers and staff members are trained in their organization’s code of conduct, as well as in child safeguarding and PSEA. A critical part of training and awareness raising is informing teams and community members about the mechanisms for reporting. Organizations should offer options for reporting, to protect the safety of the survivor and of the individual making the report. This will often include a safeguarding focal point within an organization, as well as hotlines outside the organization.

Feedback mechanisms can vary depending on the organization and context. Feedback and complaints should be processed by a designated team member who has been trained in confidentiality and processing feedback. Ideally, this person should not be directly involved in implementing the program.

![Feedback Mechanism Diagram]

The four steps of feedback mechanisms include:

1. **Listening to feedback**: collecting and acknowledging feedback from children, caregivers, communities, and community volunteers

2. **Categorizing feedback**: recording and categorizing feedback, complaints, or reports, followed by validation of the feedback when required

3. **Responding to feedback**: taking appropriate actions to address feedback, complaints, and reports.

4. **Closing the feedback loop**: informing children, caregivers, or volunteers about the actions taken to address their feedback, and asking them whether they are satisfied with the actions.  

   36. Ibid.
The relevant MEAL tools include:

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<th>Tool</th>
<th>Name</th>
<th>Description</th>
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<tbody>
<tr>
<td>2</td>
<td>Workshop Guide on Community Volunteer Engagement</td>
<td>A participatory workshop to learn from volunteers how they understand their roles and responsibilities, the impact of their role on their lives, and their perceptions of their power and agency as members of the CP team.</td>
</tr>
<tr>
<td>12</td>
<td>Feedback Boxes</td>
<td>Confidential boxes for children, caregivers, community members, and volunteers where they can provide suggestions, comments, or complaints that the CP organization should address.</td>
</tr>
<tr>
<td>13</td>
<td>Volunteer Questionnaire Tool</td>
<td>An anonymous survey completed by the volunteers that can help assess the extent to which they feel recognized and supported in their roles, both in the community and within the CP organization.</td>
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While the support of M&E colleagues is important to have an effective program, it is important that these tools are be used by CP team members. Meanwhile, M&E colleagues have an important role to play in categorizing and analyzing data in order to inform CP programming decisions.

Questions related to the support from community volunteers should be included in the feedback forms for program stakeholders; this is standard case management practice (see [Child Feedback Form](#) and [Caregiver Feedback Form](#)). Examples of such questions include:

- Did a community volunteer support you alongside the caseworker?
- Did the volunteer help connect you to services and support that were helpful?
- Did the volunteer who worked alongside the caseworker talk to you in a way that felt supportive and understanding?
- Did the volunteer who supported you keep your personal details and situation confidential?

Among the training sessions associated with this toolkit, there are several that can help CP organizations gather feedback from community volunteers regarding the risks and power dynamics that the volunteers face. Ultimately, it is critically important that the organization respond to the feedback provided by the volunteers, children, and community members.
Promoting the roles of community volunteers must include advocacy aimed at many target audiences. When creating advocacy messages, it is recommended that they are developed with volunteers. It is important to emphasize volunteers’ essential roles, and the support that will be needed for what they are expected to achieve (ethical remuneration, training, supervision, etc.). When communicating with different stakeholders, it is recommended to use the evidence that is documented in Tool 14. Best Practices Poster and Tool 15. Community Volunteer Policy Brief.

Advocacy related to community volunteers should highlight their capacities and resilience, and avoid presenting community members as passive victims or recipients. Community volunteers themselves should be encouraged to represent their own experiences and expectations, if it is safe for them to do so. It is important to emphasize that community volunteers bring essential knowledge and benefits to CP responses, but given that they are members of the affected community, there must be safe and ethical expectations for their roles. For all key messages related to adequate budgeting, Tool 5. Budget Checklist for Community Volunteers, can be a helpful guide.

Some of the suggested targeted advocacy messages for different actors are summarized below:

<table>
<thead>
<tr>
<th>The Actors</th>
<th>Key Messages and Recommended Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donors funding CP case management in humanitarian settings</td>
<td>• A case management approach can only be implemented if there is adequate funding for paid caseworkers.</td>
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<tr>
<td></td>
<td>• Ethical engagement of community volunteers in case management requires a minimum of one year of funding and a clear sustainability/exit strategy. The strategy should include:</td>
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<td>• Staffing for a CP “team approach,” in which volunteers work alongside caseworkers</td>
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<td></td>
<td>• Recognition (and fair remuneration, when appropriate) of volunteers, according to the work they are expected to do</td>
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<td></td>
<td>• Material support, such as phone credits, ID cards, means of transport, etc.</td>
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<td>• Ongoing training and supportive supervision</td>
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</table>
### NGO leaders and directors

- CP teams need support from the country directors and leadership for its efforts to obtain adequate funding for quality programming. If the funding is not sufficient for CPCM that engages volunteers ethically, alternative programming approaches should be considered.

- Selecting, training, and supporting new volunteers is time-consuming and costly. The retention of community volunteers is closely related to the recognition they receive for their work, and the extent to which the value of their work is made visible in the organization and the community.

- CP organizations should establish clear and transparent volunteer policies with their human resources, operations, and finance departments. This should include the standardization of volunteer roles and remuneration across programs, and efficient systems for volunteer remuneration and material support.

- CP organizations have a duty to care for community volunteers engaged in programming. It is essential to understand the power dynamics and risks they are facing, and to develop mitigation strategies.

### Governments and UN agencies

- The government and its development and humanitarian partners should join forces to develop policies and guidelines for the ethical engagement of volunteers and include them in the social service workforce.

- Policymakers should create national policies that acknowledge community volunteers, paid caseworkers, and social workers as essential to the well-being of children.

- Funding must be made available for the accreditation of community volunteers and their integration into the national CP system.

- Promote the inclusion of internally displaced persons (IDPs) and refugees into labor markets and economic opportunities, so that they can engage in decent work.\(^\text{37}\)
Interagency CP coordination structures

- CP organizations should work together to standardize community volunteer roles, responsibilities, and ethical remuneration. Whenever possible, this should be agreed upon with the government.
- Inter-agency case management standard operating procedures (SOPs) should incorporate standardized roles (including the ethical limits) for community volunteers within case management.
- CP coordination structures should support joint capacity-development plans among partners, as well as inter-agency training opportunities for community volunteers and the teams supporting them.
- Interagency partners should support the accreditation of community volunteers and their integration into the national CP system.

Tool 14. Best Practices Poster
Tool 15. Community Volunteer Policy Brief

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