Putting Children at the Heart of the World Humanitarian Summit
This report was commissioned by the World Humanitarian Summit Advisory Group on Children to ensure that children’s perspectives are considered and their priorities and recommendations are reflected in the Summit outcomes. The Advisory Group was established in 2014 to ensure that children are included as part of the global stakeholder consultation process. Its members currently include ChildFund Alliance, Plan International, Save the Children, SOS Children’s Villages International, UNICEF, War Child Netherlands, War Child UK and World Vision International. The report is based on a review of children’s consultations in risk prone, fragile and emergency settings over the last ten years and represents the views of more than 6,000 children. The report was researched and written by Andy West and edited by Helen Kearney. Funding for this research was generously provided by UNICEF. The Advisory Group gratefully acknowledges the collaboration with the World Humanitarian Summit Secretariat throughout the development of this report.
Putting Children at the Heart of the World Humanitarian Summit

Children’s perspectives and engagement in humanitarian emergencies

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“Decisions being taken today will affect me more than those taking the decisions.”

“Adults may want to do it themselves. They may think we don’t have the capacity – that we can’t do it. But actually, if given a chance and some guiding directions we children can do anything.”
– child participating in disaster risk reduction programme in Thailand

In Syria, 83% of children surveyed said they would participate in the relief effort if given the chance.

“We would like to help other children by raising their spirits, playing with them and entertaining them. We belong to one generation, and we understand what they lack and need, both psychologically and emotionally. We would love to take part in relief efforts and help other Syrian refugees and friends to help wipe away their tears and the pain of being away from their country.”

“After the 2004 tsunami, children made significant and concrete contributions to the relief efforts. Apart from saving others, providing emotional support and helping find food and shelter, children also led group prayers and joined adults on guard duty. Yet despite such effort in the early stages of the emergency response, children found themselves soon sidelined when troops and international aid agencies arrived and took control of the relief work.”

“A playground is important because we need to practice sports so we can have powerful bodies in order to carry each other when we get injured.”
– child in besieged community in rural Damascus
INTRODUCTION

All children have the right to be heard and participate in decision-making that affects their lives – whoever they are, and wherever they are. Yet girls and boys’ perspectives are often overlooked. This is especially true in the chaos of an emergency when practical, organizational, cultural and ethical issues can create barriers to meaningful participation.

The right to be heard is a guiding principle of the UN Convention on the Rights of the Child (UNCRC) – the most widely ratified international human rights treaty in the world. Children can and do play an important role in their own protection and in their communities’ response to an emergency. For humanitarian actors, child participation is a vital way of ensuring accountability and effectiveness. Children who recognize abuse and violence against themselves and others, and who are empowered to participate in the humanitarian response, contribute to long-term development after the crisis. They build safer communities where vulnerability and risk are reduced, children speak out and their needs are prioritized.

This literature review reflects the thoughts and opinions of over 6,000 girls and boys. It draws on recent consultations with children during and shortly after armed conflicts, disasters, displacement and other emergencies. Aiming to contribute to discussions at the 2016 World Humanitarian Summit around “Future humanitarian challenges related to natural hazards and conflicts”, it asks the following questions:

1. How can engaging children improve humanitarian effectiveness?
2. How can engaging children reduce vulnerability and manage risk?
3. How can children’s ideas and perspectives drive transformation through innovation?
4. What are children’s perspectives on their needs in conflict?

Background to this review: Why engage with children?

Children comprise half or more of the affected population in emergencies and are disproportionately affected by their impacts. New data shows that one billion girls and boys live in areas that were affected by armed conflict in 2013 or 2014. Over the last decade, more than 250 million people were affected by disasters each year – over half were children. UNICEF estimates that typically 50 to 60 per cent of the population affected by disasters is children.

Emergencies can take up a significant proportion of a child’s formative years, influencing crucial stages of social, cognitive, emotional and physical development. In times of crisis, children face significant protection risks. Existing vulnerabilities are exacerbated by environmental, economic and social disruptions. Boys and girls may face injury and disability, physical and sexual violence, psychosocial distress and mental disorders. They may be separated from their families, recruited into armed groups, economically exploited...
or come into contact with the justice system. Evidence repeatedly shows that these protection risks are interconnected and compounding.

As a large proportion of the affected population in any emergency, girls and boys should be at the heart of humanitarian programming and able to hold humanitarian actors to account. Recent developments such as the 2014 Core Humanitarian Standard and the IASC Commitments on Accountability to Affected Populations mean practitioners and policy-makers have clear and universal benchmarks describing exactly what it means to be accountable and engage crisis-affected children. States parties to the UNCRC have made strong commitments to child rights, and they play a central role in preparedness, response and recovery in times of crisis. Furthermore, evidence now shows that accountability mechanisms improve the quality, impact and sustainability of programmes.

This literature review reveals how the failure to consult and engage children reduces the effectiveness and efficiency of humanitarian programming, the capacity to reduce vulnerability and manage risk, and the ability to innovate. Children highlight issues and difficulties that may be overlooked by adults – especially those concerning their safety and protection. Adults who fail to consult children often fail to understand how problems may be connected and why intended outcomes are not achieved.

Since the adoption of the UNCRC in 1989, the scope and scale of child participation has increased. This has resulted in the development of minimum standards for child consultation and participation, growing numbers of academic studies on the topic, the issuance of a General Comment by the UN Committee on the Rights of the Child and subsequent toolkits, as well as the development of national and regional strategies for children’s participation. Save the Children, for example, applies nine basic requirements when planning and monitoring child participation, to ensure that it is: 1) transparent and informative, 2) voluntary, 3) respectful, 4) relevant, 5) child-friendly, 6) inclusive, 7) supported by training for adults, 8) safe and sensitive to risk, and 9) accountable.

Children are not a homogenous group. No one child or group of children can be expected to speak for peers of different ages, gender, socioeconomic status, disability, race, religion or ethnicity. Moreover, childhood is a period of rapid change and evolving capacities. The only way to effectively take account of changing circumstances and perceptions is to engage children in ongoing consultations and to involve them in preparedness, response and monitoring and evaluation.

A substantial body of research has demonstrated the benefits of child participation at the individual, family and community levels, as well as in devising and implementing services and solutions. For the individual, child participation promotes the acquisition of knowledge, life-skills and self-confidence, while stimulating personal and social development. Child participation also enhances community development and
solidarity,25 and improves relationships within families and parental support for children.26,27 School and the experience of education improve through participation.28,29,30 The realization of the right to health improves, for example through initiatives such as peer education and children's research.31,32,33 Participation in climate change adaptation enables the development of a sense of justice and social responsibility, helping children to "reach their full potential and develop essential life skills such as problem analysis, decision-making, negotiation and communication, and working in groups. It increases children's self-confidence and adult respect for children's capacities."34

However, child participation remains far from systematic. In 2012, shortly after Typhoon Haiyan in the Philippines, a group of international agencies noted that only adult priorities had been gathered and acted on the need to speak with children when making assessments. In 2014, a review of lessons learned from emergency responses in conflict noted that children are still routinely seen as passive recipients of aid designed by others. The shortcomings of this traditional approach were highlighted by the fact that children know much more about their own needs than adults – especially where adults may be part of the problem.

**METHODOLOGY**

Children's perspectives reviewed here are drawn primarily from consultations with children undertaken by international non-governmental organizations or their partners during recent emergencies, and in disaster risk reduction and climate change adaptation work. There is an identified shortage of consultations during and immediately after situations of armed conflict but evidence from these situations has been reviewed and cited wherever possible.

Emergencies with the most consultations are recent: the 2010 Haiti earthquake, the 2013 Philippines Typhoon, the 2014 Ebola epidemic in West Africa and the ongoing Syrian conflict (2011-present). These are supplemented by material from a range of conflicts including the Central African Republic (2012-present), the Democratic Republic of the Congo (1994-2003), Afghanistan (2001-present), South Sudan (2013-present), Sierra Leone (1991-2002), and other emergencies such as floods and food shortages in parts of Asia and Africa. The disaster risk reduction and climate adaptation work is principally from parts of Asia and Africa.

The scope of examples available parallels the increasing recognition of the importance of child participation leading to an increase in the number of consultations held with children in recent years. International NGOs and their partners have also been involved in international research on children's experiences of violence that has necessarily involved child consultations.35 Efforts have been made to gather children's views for the Post-2015 Development Agenda, and child participation practices have been included in
programme development and accountability. These provide some context for children’s lives, circumstances and needs, but the main focus in this review is the consultations with children in humanitarian emergencies, usually undertaken as an assessment of their views and circumstances.

Most consultations have been conducted as part of assessments in early stages of emergencies, up to a few months of onset. In most instances, children are involved separately from adults and often divided into age groups. The age groupings vary (see table of examples below) but generally at least three sets are seen as necessary, typically 14-17, 10-13 and in some cases 6-9. Children under 10 years are generally less consulted, and for those under 6 years parents were used as a proxy in one assessment. Recent research has indicated the practical possibilities of involving younger children in participatory research and consultation. Some consultations included youth, but this report focuses on the voices of children and presents disaggregated information for under-18s wherever possible.

The UNCRC defines a child as a person under 18 years of age. However, it should be noted that local understandings of children and childhood vary greatly worldwide. These may depend on ages when under 18s are expected to assume domestic responsibilities, take paid work, marry or have children themselves. In addition, many governments have national policy definitions of ‘youth’ overlapping with the UNCRC definition of ‘child’: from 12-29 (Mexico), 13-19 (UK) or 16-40 (Nepal). Other laws, for example on the age of consent to marry or the age of criminal responsibility further add to the diversity of what is expected of children. See Annexes I and II for examples of variations in national policy definitions of youth, including children, as well as data on child marriage prevalence by country.

Consultations have mainly used focus groups and/or workshops involving child friendly tools such as body maps. The convening organizations are rights-based and use the UNCRC as a framework, enabling the easy categorization of themes and responses in terms of rights, especially to education, protection from violence, abuse, neglect and exploitation, and health. Other themes include recovery, access to services, priorities and future aspirations. Survey questionnaires have also been used. Children have also been involved as peer researchers in disaster risk reduction and climate adaptation, but this is usually after the immediate emergency phase.
### Examples of Emergencies with the Highest Number of Consultations

<table>
<thead>
<tr>
<th>Place</th>
<th>Report</th>
<th>Girls</th>
<th>Boys</th>
<th>Total</th>
<th>Ages</th>
<th>Method</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Philippines</td>
<td>Save the Children, Plan International, World Vision, UNICEF 2013</td>
<td>n/a</td>
<td>n/a</td>
<td>124</td>
<td>7-12 yrs, 13-17 yrs</td>
<td>Body map, Questions Visioning: done in child friendly spaces</td>
<td></td>
</tr>
<tr>
<td>Typhoon</td>
<td>Save the Children 2014a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>8-15 yrs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Save the</td>
<td>Children 2014b</td>
<td>90</td>
<td>72</td>
<td>162</td>
<td>6-9 yrs, 10-12 yrs, 13-17 yrs</td>
<td>12 groups, 3 in each of 4 locations</td>
<td></td>
</tr>
<tr>
<td>World Vision</td>
<td>TANGO 2014</td>
<td>127</td>
<td>126</td>
<td>253</td>
<td>12-17 yrs</td>
<td>Body map, Priorities</td>
<td></td>
</tr>
<tr>
<td>World Vision</td>
<td>2014b</td>
<td>306</td>
<td>290</td>
<td>596</td>
<td>11-17 yrs</td>
<td>Survey with N. American tool</td>
<td></td>
</tr>
<tr>
<td>Haiti</td>
<td>Plan Haiti 2010</td>
<td>n/a</td>
<td>n/a</td>
<td>925</td>
<td>5-10 yrs, 11-16 yrs, 17-24 yrs</td>
<td>54 focus groups</td>
<td>Separate groups boys and girls</td>
</tr>
<tr>
<td>Earthquake</td>
<td>World Vision, TANGO 2010</td>
<td>162</td>
<td>136</td>
<td>298</td>
<td>n/a</td>
<td>20 focus groups, three themes: Vulnerability/ resilience, access resources/services, problems/impacts/solutions</td>
<td></td>
</tr>
<tr>
<td>World Vision</td>
<td>2012a</td>
<td>93</td>
<td>83</td>
<td>176</td>
<td>12-16</td>
<td>Separate focus groups boys/girls, 4 themes: recovery, external support, disaster risk reduction, hopes and aspirations</td>
<td></td>
</tr>
<tr>
<td>Global Movement for Children Haiti 2011</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>10-30 parents</td>
<td>Focus groups &amp; discussions with parents of children &lt;10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liberia</td>
<td>Plan 2015a and 2015b</td>
<td>98</td>
<td>19</td>
<td>224</td>
<td>12-18</td>
<td>20 focus groups</td>
<td>Case studies</td>
</tr>
<tr>
<td>Ebola</td>
<td>2014d</td>
<td>n/a</td>
<td>n/a</td>
<td>391</td>
<td>10-17 yrs</td>
<td>13 communities: power walk, community map, image theatre, ranking, body map, focus groups</td>
<td></td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>War Child 2013a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>Interviews, visits, FGDs</td>
<td></td>
</tr>
<tr>
<td>Ebola</td>
<td>War Child 2013a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Syria</td>
<td>World Vision 2014c</td>
<td>n/a</td>
<td>n/a</td>
<td>140</td>
<td>10-17</td>
<td>80 Lebanon/ 60 Jordan: Group discussions, interviews, using themes</td>
<td></td>
</tr>
<tr>
<td>TOTALS</td>
<td></td>
<td></td>
<td></td>
<td>1140</td>
<td>1039</td>
<td>3759</td>
<td></td>
</tr>
</tbody>
</table>

The table includes examples of consultations cited in this report but is not an exhaustive list of all the literature reviewed.

### Limitations

- There is a shortage of children’s consultations and reports available from the period during and immediately after armed conflict. In places, this literature review may appear skewed towards children’s perspectives from disaster situations.
- Some reports clearly state the views and priorities of children by age group and gender, but others fail to disaggregate those views from the views of adults even where they have been collected separately. Where it is not clear whether the views of adults or children are being reported, these have not been included in this review. Reporting conventions often still prioritize the views of adults by presenting them first and then suggesting that children’s views follow similarly, rather than the other...
way around. Formats for reporting are not uniform and information is occasionally missing, such as ages of children, and particularly how children have been selected to participate. Where international NGOs and their partners are already working in an area, or where they have established child-friendly spaces, camps or shelters, it appears that children are consulted in those locations, partly as a means of accountability. But it is not clear how and whether those children who might be socially marginalized or excluded before emergencies, such as street connected children, are involved in consultations. Children in some emergencies point to the need to include those children. Similarly, the range of issues for children orphaned and separated from families, or of child-headed households, may not be apparent without specific consultations, as indicated in their comparatively minimal representation in these reports.

**RESEARCH QUESTION 1: HOW CAN ENGAGING CHILDREN IMPROVE HUMANITARIAN EFFECTIVENESS?**

“Safety is everything and without it nothing is possible.”
- child from Homs, Syria

Effectiveness is one of the most important challenges for the humanitarian sector today. The landscape and context of emergencies has changed tremendously over the past few decades. Ongoing crises such as protracted conflict in Syria and the chronic food and nutrition crises in the Sahel highlight situations where the needs of affected populations far outstrip available resources and capacity to respond. A core theme for discussion at the World Humanitarian Summit asks: How can the humanitarian needs of people affected by crises be most effectively met? This literature review contributes to the discussion by examining evidence of how engaging and consulting children improves effectiveness – both for children themselves and for the broader affected population.

Most often, girls and boys are already taking part in recovery efforts. However, studies show a lack of recognition of their contributions, both from adults in their families and communities, and from humanitarian agencies.

In Haiti (2010), an assessment noted that children’s contribution to the recovery went largely unacknowledged:

“Children and youth represent more than half of the population affected by the January 12 earthquake. Children and youth are, on the one hand, among the most vulnerable groups affected by the disaster, yet on the other hand many of them have already mobilized to support their communities in the response and taken on strong leadership roles. Despite this, their voices, needs and priorities have yet to be adequately listened to or taken into consideration.”

This realization prompted a consultation with children to be undertaken by Plan International and UNICEF. Less than two years later, in the Philippines:

“As the response moved into its third week, Save the Children, Plan, UNICEF and World Vision identified a gap in the needs-assessment phase, namely inadequate consultation with children. Children’s insights, voices and experiences are not yet systematically reflected in needs
assessments. While 41% of the affected population is girls and boys, assessments so far have focused almost exclusively on needs and priorities expressed by adults.  

Listening to children improves humanitarian effectiveness because children often highlight or prioritize perceived needs and risks differently from adults. For example, in Kenya in 2011 adults who were also consulted raised the same issues as children, but with differences in how they saw the impact, for example raising but giving less emphasis to education. In Somalia and Tanzania in 2013, adults did not consider education, while it was a main focus for children: “whereas children tend to be more concerned with their education, adults were more likely to rank livestock, health, or household income as a priority problem during the drought.” In Kenya, “children and adults ranked priority problems during the drought differently, yet both named food and water as the top issues,” but while in Kenya “currently, children continue to face the same priority problems as during the drought ... child protection issues have gained urgency.” Consultations in Somalia also highlighted differences: “Children and adults expressed similar priority problems during the drought, with water as the first priority, then loss of livestock and food scarcity, among others. They differed as adults also mentioned lack of money while children identified displacement and shelter problems.”

This review examines how engaging children can improve humanitarian effectiveness by asking:

- What do children do during and immediately after emergencies?
- What do children identify as their priorities and needs during and immediately after emergencies?
- What gaps and problems do children highlight?

What children do

Children are active in family and community life during and after emergencies just as they are beforehand. Roles and tasks are often allocated by family members, and may vary according to age, gender, disability, local expectations and norms, as well as household income, status and situation. Children routinely assume domestic and household responsibilities and these often continue in times of crisis. However, as noted, children’s actions in recovery and relief efforts have historically been overlooked in assessments and consultations.

After Typhoon Haiyan/Yolanda in the Philippines, it was clear from initial consultations that “Children and young people played an important role in the evacuation and preparedness before Yolanda made landfall.” However, despite these actions, by six weeks after landfall, children felt sidelined, and although they wanted to help, they were not included in meetings or organized activities.
In Syria, a survey showed that 83% of child participants said they would participate in the relief effort if given the chance.63 “We would like to help other children by raising their spirits, playing with them and entertaining them. We belong to one generation, and we understand what they lack and need, both psychologically and emotionally. We would love to take part in relief efforts and help other Syrian refugees and friends to help wipe away their tears and the pain of being away from their country.”64 Yet, even when children are allocated work, they may not be supported. Among Syrian refugees, “One group of children explained how they were given the responsibility of cleaning up certain spaces in the shelter, but they lacked cleaning materials.”65

Different levels of child agency are also seen in disaster risk reduction programmes, in terms of ‘actions that seek to protect, influence or transform’. Such actions include: ‘Children protecting themselves and their communities, for example through child-led disaster drills at schools or small environmental and risk reduction projects; influencing the actions of others, for example through advocating for and leading behavioural change; transforming their environment, by informing or changing wider agendas; and addressing the root causes of vulnerability and risk management through institutions, policies and processes beyond their community boundaries.”66

**WHAT CHILDREN HAVE DONE IN EMERGENCIES AT DIFFERENT AGES:**

<table>
<thead>
<tr>
<th>Children aged 5-10 years:</th>
<th>Children aged 12-17 years:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Making toys for younger children;</td>
<td>• Rescuing and saving younger children;</td>
</tr>
<tr>
<td></td>
<td>• Caring for younger children;</td>
</tr>
<tr>
<td></td>
<td>• Training younger children and peers;</td>
</tr>
<tr>
<td></td>
<td>• Treating wounds and caring for injured people;</td>
</tr>
<tr>
<td></td>
<td>• Clearing up after emergency;</td>
</tr>
<tr>
<td></td>
<td>• Helping to trace families;</td>
</tr>
<tr>
<td></td>
<td>• Helping old people to collect food and rations;</td>
</tr>
<tr>
<td></td>
<td>• Helping families with small children to collect food and rations;</td>
</tr>
<tr>
<td></td>
<td>• Packing food for distribution;</td>
</tr>
<tr>
<td></td>
<td>• Providing information about milk powder wanted;</td>
</tr>
<tr>
<td></td>
<td>• Cleaning camps;</td>
</tr>
<tr>
<td></td>
<td>• Cleaning and painting buildings;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Children aged 9-12 years:</th>
<th>Children aged 12-17 years:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Providing first aid;</td>
<td>• Rescuing and saving younger children;</td>
</tr>
<tr>
<td>• Playing and supporting children who lost family members;</td>
<td>• Caring for younger children;</td>
</tr>
<tr>
<td>• Talking to and supporting friends who were sad;</td>
<td>• Training younger children and peers;</td>
</tr>
<tr>
<td>• Collecting food and rations for old people;</td>
<td>• Treating wounds and caring for injured people;</td>
</tr>
<tr>
<td>• Helping prepare food;</td>
<td>• Clearing up after emergency;</td>
</tr>
<tr>
<td>• Helping to clean camps;</td>
<td>• Helping to trace families;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Children aged 12 years:</th>
<th>Children aged 12-17 years:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Teaching younger children;</td>
<td>• Rescuing and saving younger children;</td>
</tr>
<tr>
<td>• Caring for younger children;</td>
<td>• Caring for younger children;</td>
</tr>
<tr>
<td>• Working as part of an emergency task group.</td>
<td>• Training younger children and peers;</td>
</tr>
<tr>
<td></td>
<td>• Treating wounds and caring for injured people;</td>
</tr>
<tr>
<td></td>
<td>• Clearing up after emergency;</td>
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<td>• Helping to trace families;</td>
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<td>• Helping old people to collect food and rations;</td>
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<td>• Helping families with small children to collect food and rations;</td>
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<td></td>
<td>• Packing food for distribution;</td>
</tr>
<tr>
<td></td>
<td>• Providing information about milk powder wanted;</td>
</tr>
<tr>
<td></td>
<td>• Cleaning camps;</td>
</tr>
<tr>
<td></td>
<td>• Cleaning and painting buildings;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Children aged 12 years:</th>
<th>Young people aged 18 and over:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Teaching younger children;</td>
<td>• Rescuing and saving younger children;</td>
</tr>
<tr>
<td>• Caring for younger children;</td>
<td>• Organizing entertainment;</td>
</tr>
<tr>
<td>• Working as part of an emergency task group.</td>
<td>• Developing businesses;</td>
</tr>
<tr>
<td></td>
<td>• Providing community communications;</td>
</tr>
<tr>
<td></td>
<td>• Negotiating with outsiders on behalf of community.</td>
</tr>
</tbody>
</table>

(Drawn from several sources, especially Plan 2005)
Rapid assessments in Thailand, Indonesia, India and Sri Lanka examining children’s well-being in emergencies found that “a common theme across assessment locations is that children consistently found ways to participate during response and recovery efforts.” In emergencies, children have often acted autonomously and spontaneously, taking action as they see necessary, as well as being allocated tasks. Children have also been involved in advocacy. In Haiti, after the earthquake, following consultations with children on reconstruction, a group of nine children presented these ideas at a forum in New York in July 2011, and to the Haitian parliament and president.

**Philippines: Typhoon Haiyan/ Yolanda**

In the Philippines, three months after the typhoon children noted that they take on new roles and chores to support their families in the emergency. Even in the first weeks after the typhoon “some children feel that taking on new responsibilities makes them feel important and accomplished.” But they also recognized “their chores and responsibilities have increased after Yolanda... for example, in Capiz girls and boys indicated that some of the usual chores undertaken by children have doubled because they have to help their parents and families to recover” and they had less time for themselves, friends and play. Also, “while all children talked about new responsibilities, boys and girls described a different set of roles. In Iloilo and Samar, girls say they are mostly taking on cleaning, cooking and looking after their siblings and boys are helping their parents with repairs and income-generating activities.”

Children’s immediate actions included: “Older children carried their young siblings on their shoulders”; children “help[ing] their neighbours to get to safety, carrying children and belongings as far from the coast as they could before the water started to rise.”

**Six weeks after the Typhoon**

**Activities children are doing as part of the recovery phase include:**

- helping to clear up the debris around their homes;
- cleaning up their schools;
- helping their parents to find materials to start making small repairs to damaged homes;
- looking for extra things to eat and drink;
- finding things (scraps) to sell to add to family income; and
- lining up for relief packages when their parents are busy.

Other actions taken in the Philippines by children to support their families included making “personal sacrifices of reducing their school allowance and working” and “children apply[ing] for working students program at school (cleaning class rooms or other duties), or find[ing] outside work before, between, after school hours to earn income; children...”
engag(e)[ing] in family livelihood or other work: raising hogs, catfish, collecting metal and plastics, sell[ing] goods (shampoo, cheese curls, candies, etc.), accept[ing] laundry, planting and selling root crops, squash, tomato, okra, etc.)."

Other emergencies
Following the floods in Thailand in 2010 “Children responded by helping their families and caring for each other, by making visits to friends by boat or calling if possible as well as by swimming or fishing.” One girl noted, “We were united. We cooked food and gave it to neighbours.” In Mongolia during periods of food shortages among some families, children were aware of the situation and took action by eating elsewhere if they could. One girl shared, “Sometimes I have dinner in a different household and tell my family to take care of themselves”. In the Ebola emergency in Liberia and Sierra Leone, older children not only looked after their siblings but were teaching younger siblings at home.

CASE STUDY: Zimbabwe children’s committees
Children’s knowledge of their locality was found to be important and useful in Zimbabwe when dealing with food security and shortages, where committees of children have been set up specifically for monitoring and feedback. “Through the committee, children have been able to point to their peers and younger children missing out on aid, and other problems. These activities demonstrate the importance of properly involving all sectors of a community, including children in information, consultations and particularly feedback and monitoring work.”

Zimbabwe Children’s Committees for evaluation and accountability
In Zimbabwe in 2003, a survey was conducted on the distribution of food aid in the ‘hungry season’ from November to April. It was found that children were often not registered in cases where their parents had died or were absent. In addition, child-headed households in many instances did not know of their entitlements. Complaints were not made out of fear that food aid might be terminated. In response, Save the Children established a Children’s Committee to collect feedback, complaints and make suggestions for improvement. By April 2004 seven committees were established in seven communities. Children raised issues around allocation of food, including within households, and marginalization of orphans by caregivers. They also raised cases of child abuse. Child representatives on the committees had been trained beforehand, in information gathering skills, accountability, and documentation. Also, parents and community leaders were involved beforehand in detailed discussions, in order to obtain their permission and agreement on the process. The local management board “generally believes that this intervention has provided information of a nature and quality that may not have been possible through the normal post-distribution monitoring visits conducted by international NGOs.” The process appears to have threatened some established interests: “As one councilor remarked, it is a short step from promoting the accountability of food aid deliveries to demands for greater accountability among elected office-holders.”

The process provided important learning points for methods of children’s participation to ensure accountability during emergencies. Above all, it showed how power inequalities are too easy to bypass, and the importance of involving children themselves.

(Original – Box 25 in UNICEF 2007)
What children want to do

Some consultations collected information on what children would like to do to support recovery and relief, including working for money to contribute to family and household expenses. Children repeatedly reported frustration at not being allowed to help and contribute. In the Philippines, “They are not invited to community meetings and so they just help out in whatever activities they find or are asked to do by adults.” Yet children had ideas for what they wanted to do, for example “Many see the solutions to their shelter problems as their own to resolve through the physical labour of construction, collecting and recycling cheap materials, and through earning income to purchase housing materials;” “children mostly described working even harder as the key to resolving their current livelihood and financial woes.” As one girl noted: “We should not be dependent on what is being provided to us like relief, because when relief stops what will we do? It would be great for us to plant root crops and vegetables to earn money. We should also be thrifty.”

What children understand: knowledge of community and family circumstances

Apart from actions taken by children, their capacities for involvement are also reflected in the knowledge they have of community and family circumstances. For example, six weeks after Typhoon Haiyan in the Philippines, “children demonstrated a clear understanding of the relationship between the impact of the disaster and their family’s income-generating ability”. In Iloilo, where fishing is one of the main income sources, children openly discussed their worries about what would happen if their fathers were not able to go out fishing. They said they were “scared they will go hungry” and “scared they won’t be able to go back to school.”

Children demonstrated knowledge of family debt processes in many settings. For example, in Mongolia food security assessments, boys explained, “Many herders are giving their animals to the bank in order to pay back their loans and they are becoming poor”; “You patch your front with the part from your back” (taking loans one after another); “Because of lack of cash we are becoming cautious about food consumption,” and one girl noted, “Unemployment means people are experiencing poor health, lack of cash and are drinking more.”

In the Philippines, “children also describe mounting family debt and dependency on relatives and aid to survive.” A boy shared: “According to my father, the cost of our boat and fishing nets that were damaged is 40,000 pesos. But we have an existing loan so my parents cannot afford to take another loan. We are already in bad debt.” Children also recognized that they were dependent on relief, and would go hungry if that stopped.
What children see as priorities and needs

Children's consultations in different types of emergencies, including conflict, highlighted broadly similar needs and priorities, but specific gaps and problems varied. School and education are the most cited needs throughout all reviewed studies. Children reported not being able to go to school for a variety of reasons, including school closures and lack of schools; distance to school; active conflict making it unsafe for children to go to school; families not prioritizing attendance; the need to work; the cost of going to school; hunger and lack of food. These issues indicate a variety of general needs, such as nutrition and transport, which children express in the context of going to school and getting an education.

Assessments where children and adults have been separately consulted indicate differences -- often subtle but important -- between their views in various emergencies. For example, in Somalia and Tanzania in 2013, adults did not consider education, while it was a main focus for children: “whereas children tend to be more concerned with their education, adults were more likely to rank livestock, health, or household income as a priority problem during the drought.” Consultations in Somalia also showed some variation: “Children and adults expressed similar priority problems during the drought, with water as the first priority, then loss of livestock and food scarcity, among others. They differed as adults also mentioned lack of money while children identified displacement and shelter problems.”

Children recognize that needs are interconnected, and that they change over time. In the Philippines, "(…) children stop schooling (including college) because fees can’t be paid; children are too hungry to study – resulting in ineffective school performance; children are unable to improve grades with extra projects because of costs for materials; or one child is prioritized over others for schooling; rather than studying, children work after school and late into evening to pay for family’s food; children stop schooling to help parents earn income.”

Context is essential: while consultations in different emergencies may highlight broadly similar core needs for children (such as education and protection), the range of other rights that remain unfulfilled and specific child protection concerns varies according to context, including the situation prior to the emergency. Moreover, there are specific and important challenges to humanitarian effectiveness in conflict settings. See RESEARCH QUESTION 4: WHAT ARE CHILDREN'S PERSPECTIVES ON THEIR NEEDS IN CONFLICT?

Age and gender differences

Differences in age and gender have been found in consultations, and disaggregation of children's views is essential if responses are to be useful. An example of disaggregated reporting is provided in the box below where consultations were conducted one to
two months after the earthquake in Haiti, so children’s views were informed not only by their lives before the event, but also by the event, its immediate aftermath and initial aid responses.

<table>
<thead>
<tr>
<th>Example of age and gender differences in most urgent priorities: Haiti 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>5-10 age group</strong></td>
</tr>
<tr>
<td><strong>Boys</strong> prioritized education (schools), health, the country’s reconstruction and protection against disasters;</td>
</tr>
<tr>
<td><strong>Girls</strong> prioritized children’s rights, security, leisure, school, agriculture, environment and housing.</td>
</tr>
<tr>
<td>Across all age groups, among the many priorities, education was widely selected.</td>
</tr>
<tr>
<td><strong>11-16 age group</strong></td>
</tr>
<tr>
<td><strong>Boys</strong> prioritized decentralization, training on disasters, schools and leisure;</td>
</tr>
<tr>
<td><strong>Girls</strong> chose participation, security, health and education.</td>
</tr>
<tr>
<td>Here again, education was unanimously selected and as in the younger group, girls gave more emphasis to the issue of security compared to their male counterparts – demonstrating their concerns for greater vulnerability to gender based violence and other child protection risks.</td>
</tr>
<tr>
<td><strong>17-24 age group</strong></td>
</tr>
<tr>
<td><strong>Boys and young men</strong> prioritized university, electricity, internet and professional training;</td>
</tr>
<tr>
<td><strong>Girls and young women</strong> prioritized employment, university and decentralization.</td>
</tr>
</tbody>
</table>

Drawn from 54 focus groups held separately with 925 boys, girls and young people in three age groups covering nine departments of Haiti, areas both directly and indirectly affected by the disaster.

Summarized quotation taken from Plan Haiti 2010 p19, and methodology p28-29.

**Education**

School, education and training opportunities have been raised as priority issues for children in consultations across all types of emergency, including conflicts, over the past decade. Conflict-affected children raised a number of problems that affected their education when they did go to school. These included lack of safety and the military use of schools, violence at school, hunger and food shortage, and discrimination related to ethnicity and particularly affecting disabled children. These are explored in greater detail under EDUCATION.

Children understand the importance of education for various reasons, most often connected to their future aspirations. According to children, a key purpose of education is to secure employment outside of the household. During the Sierra Leone civil war, “Education and training was key to psychosocial well-being, according to young people, who named it their top concern,” and elsewhere, a boy in the Philippines shared:

“If you were not able to go to school, you could not find work. If you don’t know how to add, how can you engage yourself in selling? You would not know if the amount is big or small.”

A girl similarly stated, “We should study hard to finish school in order to get a better job with better salary to have a good future and be able to provide for our family. I can’t be like my parents without a stable source of livelihood.”
Girls and boys perceive the fact of not receiving an education as impacting on other areas of their lives. During the Ebola epidemic, children and adults said that teenage pregnancy has increased greatly. They linked this to girls no longer being at school and their need to seek a provider when parents have insufficient food and money. Participants also linked teenage pregnancy to an increase in the risk of sexual exploitation, for example through exposure to a working environment where girls have more contact with men. Participants in a girls’ group in Sierra Leone shared, “We are encountering lots of teenage pregnancy (…) Prostitution is rampant, girls don’t eat unless they sleep with older men for money (…) Now, we girls have sex with our fathers’ age group, because we need money and men don’t give money for nothing.”

A need for further research on the impact of the Ebola outbreak on sexual health, teen pregnancy and the possible sexual exploitation of girls was pointed out. Children saw the concomitant disruption to employment and education as underlying factors. Restoring education is repeatedly emphasized, for example by a 9-year-old girl: “I think reopening the classes with new training is what we most need right now.”

In the Philippines, younger and older children said they were affected differently. Older children highlighted the lack of secondary education, frequently aware of how missing out could impact on their futures. Some felt there was a lack of attention to secondary school students, for example in the materials provided for them after the Typhoon in Philippines. A year after Typhoon Haiyan, “older children worry that it will impact on their access to secondary and tertiary education, which has now been derailed by their interrupted schooling and competing demands of their families as they try to recover. Older children also noted that they need greater support – beyond school supplies – to achieve their dreams.”

As elsewhere, it is essential to understand the context prior to the emergency. In post-earthquake Haiti, children highlighted “high costs of schooling, poorly built/maintained schools, not enough schools in general, no secondary schools, long travel distances, underpaid teachers and teachers going on strike, and parents unable to afford tuition and school materials.” These are all problems that pre-existed the earthquake.

**Barriers to attendance: Closed schools**

In areas affected by armed conflict, children are missing out on their education because schools are closed, have been repurposed as a shelter for the displaced or are used by armed forces and armed groups for military purposes, or because travel is dangerous due to active conflict. Apart from school closures in South Sudan, some are taken and re-used for military purposes. In Syria, “reasons given by children to explain why a parent/caregiver preferred them not to attend school include: To avoid risks while travelling to school or while at school.”
Schools closures as a result of damage to buildings were cited by children in Thailand after floods, in Haiti after the earthquake and in the Philippines after the typhoon when they were repurposed for use as shelters. As one child noted, “We do not want our evacuation centres to be in our schools because it disrupts our space and classroom time.”

In Haiti children also highlighted “fear of being in concrete buildings due to the risk of aftershocks and flooding” particularly as “heavy rains in February caused the collapse of one school in Cap Haitien killing four students.”

Distance and travel
Challenges related to long distances and difficult travel to school were raised by children in various emergency settings. Some occurred because of the impact of disaster, such as flooded roads in Thailand and also in Haiti, although distance to school was already a concern prior to the earthquake. In Haiti, “The long travel distance to schools damaged the children’s shoes, hurt their feet and they often arrived late. There was also mention of teachers hitting children when they arrived late.” Long distances to schools were also noted by children (and adults) in the Philippines. For example, a girl shared: “Our school is far from here. It takes us two rides to San Fernando. If we can’t pay for the transportation cost we tend to have absences.”

Family attitudes, gender and not prioritizing education
Children spoke of gender differences in families not prioritizing girls’ education, and the perceived unsuitability of educational environments. Girls may not go to school because of early marriage, or because they drop out of school to take a greater share of household work or to care for siblings. In Kenya after the drought in Marigat, “children talked about not going to school due to early marriage and working as house helps.” Although the practices of early marriage and domestic work may exist before emergencies, children see them continuing and perhaps exacerbated because of household vulnerabilities and reduced incomes during emergencies. In the Ebola emergency in West Africa, the barriers to school not only included costs of materials but also, “early pregnancy and an unwillingness to return to education among adolescents who had started earning money.”

Need to work for family
Children mentioned having to work for or to contribute to the family instead of going to school, or because the school was closed, or in addition to going to school. In the Philippines, one boy noted: “My father said I will be absent from school whenever he needs me to help him catch fish.” Work, or income generation activities, may include begging or stealing. As one boy stated, “It is hard to find money. Some kids ask for alms in the market place...” Another girls noted, “There are people who steal because they do not have money and they have a lot of children to feed. Even if the person doesn’t want to steal he is forced to so he can feed the family.”
In some places, dropping out of school may have been likely prior to the emergency but these circumstances were exacerbated by the emergency. In the Horn of Africa, “children were needed to tend livestock and when the family moved to a new place, education was disrupted.”

The challenges stemming from the need to contribute to the household income not only included children having to work, but a need to remain motivated in order to study. As mentioned by children in the Philippines after the typhoon, “children's ideas to resolve their education issues primarily entailed redoubling income generation efforts and staying more focused on studies despite having to work or to go to school without food.”

**Costs of school – tuition and school materials**

Children often cited the costs of both tuition and school materials as reason for not going to school but in some places spoke about them separately. Children see these as major problems, made requests for help, and commented on the usefulness of what they had received. Emergencies made problems worse where school materials, including uniforms and clothes as well as books, were lost or destroyed. As children mentioned in the Philippines, “Loss of school books and materials in Typhoon.”

In the conflict in Syria, the rising cost of educational materials and the reduction in availability of school books were stated by children as a reason why they were not sent to school.

**Food shortages**

Children also mentioned food shortages and hunger as reasons why they do not attend school or find it difficult to study. For example, in food security assessments in Sri Lanka, a boy noted: "We face difficulties in going to school in the times when we don’t have food to eat." In the Philippines, where children described hunger as leading to poor school performance and dropping out, also to illness, begging and stealing, one girl said, ‘After Yolanda the food prices increased; we don’t have enough money to buy food.”

**Safety, security, protection and play**

“*We want more friendly spaces for children to meet so that we can feel safe, share feelings and put our minds at ease.*”

A second major category of concerns prioritized by children encompasses safety, security, protection and play.

Children raised feelings of fear and stress in various emergency contexts, particularly in early consultations or assessments.
Multiple protection-related concerns were raised by children in situations of armed conflict during focus group discussions on other issues, including recruitment into armed forces/armed groups, safety concerns in shelters including sexual violence and discrimination, child marriage, child labour, challenges to accessing education including violence and the threat of violence. These are explored in greater detail under RESEARCH QUESTION 4: WHAT ARE CHILDREN'S PERSPECTIVES ON THEIR NEEDS IN CONFLICT?, but are clearly relevant when considering barriers to humanitarian effectiveness. In Syria, these multiple violations were not identified as a priority, because children's overwhelming priority was safety. A child in Homes noted: “Safety is everything and without it nothing is possible.” Children raised concerns not only about safety and security, but also a lack of certainty and fear of the future: “When will it end?” “What will happen next?” “What will happen to us?” These questions were asked by children in multiple communities.

In Thailand after the 2010 flood both boys and girls described stress, worry, fear and sadness as major concerns along with physical illness: “All children expressed fear due to the situation being out of their perceived control.” In Haiti, consultations revealed “that children and youth in all nine departments are experiencing trauma and fear. Most children and youth show signs of trauma as a result of witnessing the numerous deaths, injuries and disabilities caused by the earthquake”, and consultations “brought to light symptoms of stress and trauma including lack of sleep and great anxiety.” A boy in the 5–10 age group said, “Any noise I hear, I think of the earthquake.” An 8-year-old girl shared, “I can't sleep at home. Seventeen of my friends were killed.”

However, evaluations conducted a couple of years after the Haiti earthquake indicated that children's perceptions had changed and education was now their main concern. “Children in focus groups stated that emotional distress was the main post-earthquake challenges that they and their friends faced. Children explained that their current priority and aspiration for the future is education, relating to their hopes for the future.”

In the Philippines six weeks after the typhoon struck, consultations found “All groups of children described feelings of worry and fear about another typhoon hitting their communities. Many children identified the sound of winds and waves as being specific noises that trigger feelings of fear and worry, particularly at night time when they are trying to sleep.” This state of fear was linked to other concerns, particularly felt at night with lack of electricity, and concerning the supernatural and news-stories: younger children “expressed fears of ghosts and ‘aswangs’ (witches) roaming around because of the dark”, while older children were worried about escaped prisoners coming into their homes at night.

Children also described their fears of violence. In one consultation where most children were living in an evacuation centre (Tent City), “the group talked at length about some of the problems arising from adult consumption of alcohol. They described seeing fights
between men in some parts of Tent City and feeling worried at night because they can hear noises and they know that there are some adults nearby who have been drinking."138

This problem was raised again in a later consultation:

“In the evacuation centres someone needs to help us, there are cases of men who drink alcohol and fight, the fighting makes us worried and scared, sometimes we had to share tents with people who had been drinking."139

Consultations with children in situations of armed conflict, in both Syria and South Sudan, raised similar concerns such as fear of adults fighting, which they link to increased alcohol consumption. See WHAT CHILDREN PRIORITIZE: SAFETY, PROTECTION AND EDUCATION.

Discussions among children on their fears and responses to their fears included suggestions for psychosocial support, and to be better prepared for emergencies, but also the need to extend protection to groups such as street-connected children and sexually exploited children.

In armed conflict situations, unaccompanied and separated children spoke of their vulnerability: “Many talk about the risks they face daily – begging for food; walking alone; vulnerability to attack, kidnap or rape; and fear of being caught by armed groups or arrested by police in whom there is little trust.”140 In a set of consultations with children in North and South Kivu, “More than a third told us they are afraid all of the time or every day, while more than half are orphaned or separated from their parents, and a quarter live without any adult support. More than a third described either witnessing or experiencing episodes of violence, at times extreme and graphic, in their lifetime.”141

Many children in the Philippines understood the psychological and social importance of play in the wake of an emergency, highlighting its absence as a major concern. One adolescent boy in Leyte observed, “children have no more time after Yolanda to meet with friends and no time for gimmicks (fun).”142

In Haiti, an initial assessment included play spaces, and found “In most areas, it appears children did not have designated areas where they can play. Most played in their own yards or in public spaces such as streets or natural areas such as rivers, gardens and fields. Girls appeared to be more restricted in how and where they play.”143 In the project evaluation, the development of play spaces was noted, and comments by children in focus group discussions indicated that they recognized the establishment of child friendly spaces. However, some children expressed sadness about not having places to play and the issue of older children not playing well with those who are younger. One boy noted, “They have installed tents on almost every playground where we could play.”144

In the Philippines one year after the typhoon, children said that “Child Friendly Spaces were important to them, and that they helped them to cope, to build resilience, and to be more equipped for the future.”145
"I am happy whenever I am at the child friendly space. We feel as though no super typhoon hit us. We forget our problems at home" 11-year-old girl.\textsuperscript{146}

Yet three months after the typhoon children also said that they wanted as priority "youth clubs so that we can have a place to meet and talk after school"\textsuperscript{147} which might suggest that the child-friendly spaces were not entirely suitable for older children.

In the Ebola emergency in Sierra Leone and Liberia children described a complete change in the way they play. They spoke about "being confined to the home or family compound, and losing daily contact with friends as a result of the school closures. The ban on gatherings meant that football, volleyball, kickball and other sports could no longer be played. The places where older children socialized were closed, including the video clubs and places to get food and drink, for example."\textsuperscript{148}

**Displacement and shelters**

In the Haiti consultations with children, "many families still lacked access to basic services such as shelter and child protection even after receiving assistance. One 16-year-old boy explained what he needed: "If I had the chance to ask for three things, I would ask for tents because my family and I, we don't have anywhere to sleep. We are five in the family. Then, I would ask to take care of children, I mean, to protect them without discrimination. And finally, I would ask people to continue to help us, we need support at every level."\textsuperscript{149}

Displaced children raised concerns over safety and privacy in the shelter especially for girls. In the Philippines after the typhoon, "The girls need more privacy in the evacuation centre, there is no privacy to change clothes and it is really hard to take a bath in restrooms as there is no privacy."\textsuperscript{150}

Many similar concerns were expressed by displaced children in the context of armed conflict. See SAFETY IN SHELTERS.

**Health**

Health concerns raised by children included both physical and mental health, with the recognition that emotional stress was leading to physical problems among the population in both disaster and conflict situations. Access to healthcare was cited as a concern, noting that in some contexts professional healthcare was not readily available to all before the emergency.

In Haiti, "many children described that they were often self-treated by parents, or brought first to witch doctors and traditional healers, and were often not taken to formal health care providers unless they had serious conditions that were seen as medically treatable,
but there were poor road conditions and long distances to these providers." Children recognized the lack of access to healthcare in their ideas of rebuilding for a new Haiti, in which "the children emphasized the need for health centres and hospitals to be better equipped and have qualified staff to better cater to everyone’s needs. They should also offer more equitable access, especially for the most vulnerable. They discussed how health facilities should provide patients with information about malaria and typhoid prevention, hygiene and sanitation, about sexual and reproductive health and contraception. They also suggested a greater need to engage the media in public health campaigns." The cost of healthcare was also mentioned with one boy noting, "It is expensive to get sick."

Access to healthcare was mentioned by children after the floods in Thailand, when many adults and children became sick with influenza, diarrhea and infection due to exposure to contaminated flood water or contaminated food.

The lack of and cost of medicine was also identified as concerns by children in the Philippines three months after the Typhoon:

"More medicines for sick people; there are not enough medicines in the health centre and families cannot afford to buy them from far away." Here they also pointed out a need for mosquito nets "We should have mosquito nets to protect us while we are at home, so we can play safely and not worry about getting dengue during the day," a problem also found in Haiti, leading to vulnerability to malaria.

Changes in health care in the Philippines following the Typhoon were noted by children. They saw the status of healthcare shifting from inadequate to better but then declining again by the end of the year. Children said that healthcare systems before the emergency were inadequate, inaccessible because of long distances, with limited staff and outreach. They said in the immediate aftermath of the typhoon, healthcare was present and highly visible. They saw large numbers of doctors, a lot of medicine and vaccination drives and nutrition assessments: "But now, one year later, children say that the most basic medical services are not available or not accessible." Children also note the current shortage of medicine: "all children (all groups, all ages, boys and girls) say that medicine shortages is a big concern and families cannot even get paracetamol when needed."

"The doctors came to our community only once. There was medicine but the supplies are not enough now."

Problems of stigma and loneliness were cited in the Ebola emergency. "Many children in their own words spoke about being unhappy, about feeling lonely, about being heartbroken at the loss of loved ones and about fear," while a child in Liberia mentioned experience of stigma:

"I used to go to choir practice every Saturday but since I lost my mother to Ebola, they no longer
allow me in their midst. People stigmatize me as if I am responsible for what happened to my mother”. 162

In situations of armed conflict, inadequate or unavailable healthcare provision was a major concern for children, and many recognized the interconnection of health problems with fear and stress brought on by the emergency. See HEALTH.

Food and water

Food and water shortages were raised by children in various settings, and linked to problems of being unable to study, socialize, and seeing others become thin and weak. In assessments of drought in Kenya, "all the children say they see shortage of food, and think about what they will eat at home and at school. They state that they cannot learn when they are hungry. Some children in Kolowa said that they have seen people fighting for food resources. Most children mention not engaging in recreational activities such as playing and visiting friends because of hunger and lack of food to share. Some children spoke about collecting wild fruit and hunting wild animals. Some children go to the nearby centres to beg for food and money. Some children said they see people growing thin and weak due to lack of food and water. One focus group talked of seeing the slaughter of animals for food. Some children talked of feeling angry, or guilty as they see people die as a result of hunger and hear people talk desperately about lack of food to eat.” 163

Children also mentioned receiving food aid from international agencies. 164 Children spoke of a need for

“Food aid from the government, INGO and others for school children and vulnerable households and to improve access to water and sanitation through the construction of water pans, dams, drilling of boreholes, provision of water tanks, and use of river water for irrigation. In addition, existing pans and dams should be protected. The government and NGOs should construct toilets for schools.” 165

In the Ebola emergency, children reported decreasing food availability and increasing dependence on food aid: “Children described in detail a reduction in the number of cups of rice their family were eating per day and how they were no longer eating meat, fruits or other quality foods. Almost all those interviewed described an increase in child undernourishment in their community as a result of Ebola. The only sites where food shortages and hunger were not heavily reported were those receiving food aid as part of the Ebola response. There was disquiet among the interviewees in relation to the distribution of food aid to Ebola victims. People felt that the crisis was affecting every community and family, not just those suffering directly from Ebola.” 166

In Haiti, the limited access to drinking water and the distance to fetch water were mentioned by children in the course of assessments in 2010, with children concerned
about this as a health and thirst problem and a barrier to taking regular baths, preparing food, washing clothes and doing housework. They also mentioned that in times of water shortage, gardens couldn’t be watered and animals died.167 Two years later, at least for some children, this had not been resolved, in the eyes of one girl: “Before the earthquake I had a place very close where I used to go to collect water; now we have to go very far away because we can’t buy the water from the people in the camp.”168

**RESEARCH QUESTION 2: HOW CAN ENGAGING CHILDREN REDUCE VULNERABILITY AND HELP MANAGE RISK?**

“In the new Haiti, my advice for the government is to implement information units in schools on how to prevent disasters, how to behave during and after a disaster” – young woman169

The number of people affected by humanitarian crises globally has almost doubled in the past decade, and over half are children.170 The cost of humanitarian aid has tripled in the same timeframe.171 Global challenges – including inequality, climate change, unstable food and energy prices, environmental degradation, rapid population growth and urbanization -- all contribute to increased vulnerability and growing humanitarian needs. In this context, humanitarian actors must not only respond to the impact of emergencies, but also work with communities, governments and development actors to reduce vulnerability and manage risk.

Children have a crucial role to play. They have invaluable knowledge and perspectives on their present circumstances, and will be the next generation of parents, workers, community leaders and government and international representatives.

This review examines how engaging children can reduce vulnerability and manage risk by asking:

- What do children do to reduce vulnerability and manage risk?
- What do children want in terms of disaster risk education and preparedness?
- What do children want to do, and what are their ideas on how to reduce vulnerability and manage risk in the future?

Few existing reports address this question directly, but children have been increasingly involved in disaster risk reduction and management especially since the 2004 Asian tsunami and through cooperative initiatives including Children in a Changing Climate.
What children do

To date, efforts have focused on:

- Children learning about vulnerability, risks and actions to be taken;
- Children being consulted and engaged as significant actors in community-wide disaster risk reduction and management;
- Children taking a lead in identifying vulnerabilities and risks; and
- Children taking a lead in managing risk reduction.

This has impacted both policy and children’s involvement at varied levels of decision-making. For example, in Bangladesh “action taken by children at the community level led to their inclusion in decision-making at the regional level, which is in turn influencing decision making at the national level. The children also encouraged adults to move away from a fatalistic ‘nothing can be done’ point of view to a ‘yes we can’ outlook.” Children themselves have pointed out the benefits of their involvement:

“If children are taught disaster preparedness, they will bring a revolutionary change in the society as they are the future keepers of the villages and schools. Besides, children of today will become parents of tomorrow, which will ensure that they pass this knowledge to their children, making disaster preparedness a societal practice, which will keep on passing from generation to generation.”

A review of children’s involvement in disaster risk reduction programmes have found that children can make a number of positive contributions to disaster risk reduction including:

- As analyzers of risk and risk reduction activities;
- As designers and implementers of disaster risk reduction interventions at community level;
- As communicators of risks and risk management options to parents, adults or those outside the community;
- As mobilisers of resources and action for community-based resilience, including social networks and capital.

Children have been involved in identifying problems, mapping hazards, and taking action on what they have found. For example, in Cambodia, children identified the following priority concerns:

- Lack of access to water and irrigation infrastructure, threatening livelihoods and affecting food and income sources.
- Insecure livelihoods, constraining access to education and exacerbating food deprivation.
- Floods, which create physical barriers to accessing schools, and pose safety and protection challenges for children when travelling to school.
- Risk of abuse due to families migrating for work because of increasing scarcity of food.
- Insufficient participation in resource management decisions.
The effects of climate change have had consequences for the realization of children’s rights in Cambodia with particular consequences for education, protection and participation:

- **Education**: children spend more time in farming and non-farming activities (pumping water for the rice fields, etc.) and do not attend school.
- **Protection**: drought has impacted children, putting them at risk of child labour, poor health, and exploitation, causing them to fear for their safety.
- **Participation**: children’s perspectives regarding resource management are not taken into account.

Children have been involved in mapping hazards and assessing vulnerabilities in their communities.

“We have done a community map identifying where the risks and safe areas are. Our community map also identifies which families have children and elders, and how we can help them when a disaster strikes” Boy, 15, Thailand.

In the Philippines, this led to the organization of a children’s group:

“…training in assessing the community’s hazard vulnerability and its coping capacity when a disaster happens (…) encouraged me to organize a children’s group. Why children? Because during disaster we are the most affected in the society and should be prioritized. The children have the right to participate in any community capacity development. And we too can easily understand those which can harm us and use our talent to influence duty bearers to protect children against the risk of disaster.” – 14-year-old boy

Children shared the positive benefits learning what to do in an emergency and how these newly acquired skills have been applied in practice. In Nepal, for example, a 15-year-old girl explained:

“As I gained skills in helping people after a disaster, carrying out rescue work during disasters, and giving first aid to people injured by disasters, my self-confidence has increased and I now know what to do if any disaster should happen in my school or in the community.”

In Bangladesh, preparedness has proven valuable in dealing with fires. A 14-year-old community volunteer from Dhaka explained how people know better how to deal with fires and keep buckets of water and sand ready, which “has been possible only because of the slum volunteers like me who shared the awareness messages among the community people.”

He continued, “It is now acknowledged by the older people in our community that we have special capacities to be independent, strong survivors who are capable of contributing to reducing disaster risk.”

**What children want: Disaster risk education and preparedness**

Children indicated that they wanted disaster risk training and to be included in disaster risk programmes. This was particularly emphasized in Haiti and the Philippines.
In Haiti, a 16-year-old boy stated,

“Before the event of January 12, I received no training, no information on natural disasters, not even at school. So I think that we have to better prepare for potential earthquakes, avoiding uncontrolled construction, using suitable materials and building to the standards.”  

A youth shared, “The state must train all citizens in the country on procedures in case of natural disaster.” And a young woman shared her perspective, “In the new Haiti, my advice for the government is to implement information units in schools on how to prevent disasters, how to behave during and after a disaster.”

In the Philippines, soon after the typhoon, children wanted information about what to do during disasters, and expressed a desire to be involved in preparedness. “In each consultation, children expressed a need for more information about disasters. For example, one young girl in Iloilo said that being informed before a storm or typhoon hit would stop children from running around...being rattled, nervous, confused. In the future, they want parents and the local authorities to tell them what to do the next time a ‘calamity’ is going to affect their community.”

This was reiterated in other consultations, for example three months after the typhoon, where children requested information for preparedness and also felt they were not getting this from adults or from authorities: “Younger children should be given more information about typhoons and how to prepare for them, and about how to tell adults that you are afraid but also want to help.” (…) “We are still scared and we want more information about the storm, and what to do, we need adults and authorities to talk to us.”

The same request was repeated in consultations held one year after the typhoon: “children wish to be systematically included in disaster risk reduction programmes.”

**What children want to do**

During emergencies, children said they want to be involved in reducing the risk of disaster both now and in the future. In Haiti, children looked forward to reconstruction that included preparedness:

“In the new Haiti, the youth must take responsibility. We must teach younger children how to cope with natural disasters; many people died because of ignorance.” – young woman.

In the Philippines, a few weeks after the typhoon made landfall, children said they wanted to be involved in disaster risk reduction in the immediate term. Having had the experience of some immediate preparation just before the typhoon, including helping people to evacuate, and being aware of vulnerability, children wanted to take action now to reduce risks. They had suggestions for what they could do, and specifically wanted to be involved in community decision-making (see box below).
Children's views about what they could do to reduce the risk of disaster in the Philippines after Typhoon Haiyan

Children's views about what they could do to reduce the risk of disaster in the Philippines after Typhoon Haiyan
Children identified specific activities that they would like to be involved in in the immediate term to reduce future risk. These included:

• Planting trees to protect land from future floods;
• Cleaning up the streets and the environment to eliminate mosquitos;
• Listening to weather forecasts so they can prepare and share information with their parents and teachers;
• Teaching younger siblings and children in school what to do if a disaster is coming;
• Recycling and reusing materials;
• Making sure they have an evacuation plan for their families; and
• Being involved in community decision-making about disaster preparedness.  

Trends in child-focused and child-led disaster risk reduction

Knowledge: there are numerous examples of good practice in protecting children, through child-focused disaster preparedness, such as adapting infrastructure (e.g. school buildings) and enhancing children's knowledge.

Voice: There is also some evidence that adults working in disaster risk reduction are seeking out children's views and giving them a voice either within their local or regional communities or wider international platforms. In some cases this has led to policy that is more child-centred, reflecting children's needs and concerns, and recognizing child rights.

Action – Protect: Disaster risk reduction is most empowering, and likely to be more beneficial for children, when they lead it. Many initiatives seeking to foster child-led disaster risk reduction have focused on engaging children in efforts to protect their own homes or communities. Children often engage in mapping and assessing their local community as a first step, or may discuss the impact of a recent disaster on them and how they think that disaster might have been prevented. This diagnostic effort generally feeds into child-led projects.

Action – Influence: There are a few examples of where children's Disaster Risk Reduction efforts have gone beyond protective measures, to include advocacy and influence at a local level. Children have worked together to influence community leaders to act in ways that not only protect children from disasters but most importantly, can protect whole communities. Children are able to encourage adults to do things the children cannot do alone.

Action – Transform: Child-centred disaster risk reduction policy does not necessarily yield child-centred practice. There is little evidence of children having transformational impacts through their engagement; for example, affecting the drivers of vulnerability locally such as logging that contributes to landslides and flooding or globally such as climate change. This is the next frontier in child-led disaster risk reduction.

Climate change

The ways in which children's participation can be harnessed in consideration of climate change are suggested as:

The knowledge gap: There is a need for better understanding of how adaptation policy and practice can be appropriate to local priorities. This requires approaches for gathering
accurate and disaggregated data on impacts and adaptation strategies of different groups - including children across different socio-economic, geographic and cultural situations. Informing and influencing: This information is best provided by children themselves, as long as they are provided with the appropriate spaces to do so. Learning and adapting: Children have a greater capacity to learn and adapt to new things. In the context of climate change, children are therefore well placed to drive forward shifts in behaviour, which enable climate resilient development. Implementing: Children also have an important role as implementers of some of the actions identified under the UN Framework Convention on Climate Change. For example, at community level children have often proved to be more effective than adults at raising awareness of climate change issues.

Preparation for climate change adaptation has included training children on climate change and preparation including identifying problems on local and policy levels, as well as other actions for reducing vulnerability and risk.

Children in Nepal: views on what needs to be adapted for climate change
Stop deforestation: children identified the planting of trees as a long-term priority, along with environmental conservation programmes developed and implemented at the local level. Children see depletion of forests as a main reason for flooding
Access to improved agricultural technologies: children see a need to learn new agricultural approaches, and grow more crops for survival.
Improvement of basic infrastructure: children identified a need for durable bridges, construction of embankments and gabion walls to enable them to get to school during monsoon season. Many children are not able to attend because of the increasing number of rivers that flood. In addition, children cited training for community members to reduce the effects of large landslides.
Improved awareness: children want to see increased awareness and skills in their communities through peer education and training, so people can understand the risks and impacts of a changing climate on people, livestock and crops.
Good disaster risk reduction: children think that local authorities should plan ahead and design appropriate plans and programmes to reduce the risks from disasters caused by extreme weather.

RESEARCH QUESTION 3: HOW CAN CHILDREN’S IDEAS AND PERSPECTIVES DRIVE TRANSFORMATION THROUGH INNOVATION?

In the Philippines, children had the idea to develop a `Disaster Risk Reduction Texter Clan': "Using our mobile phone we send text messages about disaster risk reduction, warning people of an incoming typhoon and preparedness to our friends who live in high risk areas. When a typhoon is coming, I forwarded text messages on the weather forecast shared by our disaster risk reduction project staff taken from the weather bureau. We also send tips on what to do during bad weather. Our initiative was appreciated by the people in our town. Our members reached to 95 youths who came from different barangays of Oras, Eastern Samar.” – 14-year-old boy
Change is needed in the humanitarian system. A ‘business as usual’ approach is entirely inadequate in the face of unprecedented challenges. Many traditional ways of working fail to reflect social, political and economic realities. New voices must be heard in decision-making processes, new technologies must be included and new approaches must be adopted.

Full and serious engagement with children is a vital way in which humanitarian actors can understand today’s realities and tomorrow’s challenges.

This review examines how children’s ideas and perspectives can drive transformation through innovation by asking:

- In disasters and epidemics, what do children want to change in humanitarian interventions?
- In armed conflicts, what do children want to change in humanitarian interventions?
- How do children want to innovate?

Some consultations specifically asked children their views on improving emergency interventions, while in others information arose incidentally. The first section below looks at disasters, with examples from Typhoon Haiyan in the Philippines and Ebola in West Africa as recent emergencies, and the second at conflict, with examples principally from Syria.

**What children want to change (disasters and epidemics)**

**Typhoon Haiyan**

In the Philippines, following Typhoon Haiyan, three sets of consultations with children were conducted at different times – at six weeks, three months and one year after – and these, especially the first, offer some of their ideas on how relief and recovery could be improved.
Typhoon Haiyan/Yolanda: Children’s recommendations for improving the response (<6 weeks after Typhoon)

Children are receiving assistance. They are also seeing first-hand how it is delivered and who receives it. They expressed clear views about what people do with different types of assistance and whether what is distributed is what adults, young people and children actually need.

When asked what adults should do to improve the response, children made the following recommendations:

- Boys said that names of beneficiaries receiving assistance should be encoded on a laptop instead of relying on hand-written records.
- Relief packages should include nails and carpentry tools to help parents to repair and rebuild homes.
- Distribution of clothes and shoes should be more orderly and should be checked before they are given out because “many of them are second-hand damaged clothes and shoes in big sizes”.
- Adolescent girls said that hygiene kits should include more sanitary napkins.
- In Iloilo, children recommend that the oil spill should be cleaned up quickly. Fish are dying and parents may not be able to resume fishing to support households.
- Children who are still in the evacuation centres want more toilets and washing facilities.
- In Tent City, adolescent girls want more privacy when they are using the toilets and washing facilities. Adolescent boys also said that there should be more toilets and washing facilities for girls.
- Everyone should be sure to “take care of Mother Nature”. Children suggested that more could be done to recycle and reuse materials and also to clean up the debris that is making water sources dirty.
- Children who are lining up for relief items for their parents say that a separate line is needed for children so that they are not “squeezed and pushed aside by adults”.
- Aid should be distributed fairly to all people who need help.

In the Philippines two months after the typhoon, children mentioned the need to improve the education programme to assist children who have dropped out of school. One girl noted, “Some of our friends are out of school. How we wish that the government would develop a programme to help them back to school or provide skills training for them to become productive.”

Three months after the typhoon a further set of consultations with children indicated their ideas and needs for improvement. They added,

“"In the evacuation centres someone needs to help us, there are cases of men who drink alcohol and fight, the fighting makes us worried and scared, sometimes we had to share tents with people who have been drinking."

“The girls need more privacy in the evacuation centre, there is no privacy to change clothes and it is really hard to take a bath in restrooms as there is no privacy.”
Children also asked that other locations be found for evacuation centres. “We do not want our evacuation centres to be in our schools because it disrupts our space and classroom time.”

Children made suggestions to improve the provision of school materials: “Educational materials should be delivered so that we can recommence school, especially pens, backpacks and notepads, because we don’t have any of these left.” “Ballpoint pens, school backpacks and plastic containers are needed so that we can keep school materials safe during the rainy season and the floods – it is hard to find dry places at home to keep our books.”

“More sanitary towels in school kits for girls; this will make it easier to go to child friendly spaces, as it is embarrassing when you don’t have them.”

“We want more friendly spaces for children to meet so that we can share feelings and put our minds at ease.”

Children also had suggestions for immediate improvements for rebuilding: “More tools and some chainsaws should be given to our parents so they can cut the fallen coconut trees into lumber to build new houses.” In addition, children suggested, “Immediate assistance to help repair fishing boats and nets.”

They also pointed out “Some jobs for older children while they wait for school to resume and so they can help out their families.”

One year after the typhoon, a further set of consultations with children looked back over the responses so far, while “Children say the government and aid agencies are slowly forgetting them,” children made recommendations for future work but also identified improvements in response. These include specific points in education and improvements in other areas: “In education they recommended changes to the standard education kits supplied to older boys and girls, based on their feedback; also a review of education services to identify whether coordination of education services can be broader and faster in times of emergency, and so that small and local organizations, private sector actors and international NGO roles are coordinated to minimize discrepancies.”

Provision of sanitary equipment for girls needs improving (despite this having been raised in previous consultations); More financial, livelihood and food security support to poor and very poor families is needed; Medical appointments with doctors need improving; Basic medicine stocks should be replenished when they are found to be in shortage; Improve provision of water supplies; Include children systematically in emergency response assessments, monitoring and evaluations, and in disaster risk programmes and preparation planning. Child Friendly Spaces and school feeding programmes were approved and greatly appreciated.
Ebola and other examples

In the Ebola emergency in Liberia and Sierra Leone, lessons were broadcast through community radio when schools were closed. In Sierra Leone, for example, just over half of groups consulted recognized the value of these broadcasts, but “just under half of the children’s focus groups said that the radio programmes were not useful because: their parents did not have a radio, or could not afford batteries; they could not gather to listen at another household because of the restrictions on contact; the radio teacher went too fast; the sound was unclear; or children were not able to follow as they could not see the teacher or ask questions.”

At the same time, children also spoke of how services linked to education provision had ceased and the negative outcome. As one boy noted, “When we were going to school, some NGO workers used to come and supply books and pens for us and preventive pills for our sisters. Because they are not coming now most of our sisters are pregnant.”

What children want to change (situations of armed conflict)

Children’s concerns included perceived inequity in the delivery of and access to aid, and being used to promote publicity for organizations. Children made suggestions for safety and protection in shelters and schools, although this was also linked to equity issues between host and displaced communities.

Examples of needed improvements in the delivery of aid were raised by children following conflicts in Africa and the Middle East. These included equitable distribution of aid and involvement in campaigns, and not being photographed or asked to publicize the source of aid.

In Sierra Leone children and young people spoke of the inequitable sharing of resources: “They believe they are excluded by humanitarian assistance programs or that social welfare systems in general benefit a privileged class.”

In Syria, “children’s perception [is] that aid deliveries are biased, and favour those with family and community connections. Children in a high conflict area also report that they receive expired food products from aid agencies, and that this caused one group of children to get sick.”

Displaced children in Syria found that awareness raising campaigns to improve health and hygiene among displaced communities did not target all equally among those hosted in a local shelter and those in damaged buildings. “The children outside the shelter complained that health campaigns and services in the community only target children living in shelters, which made them feel excluded.”
Children “complain of being photographed while receiving food aid or being asked to carry posters with the name of the source of aid. These concerns could all play a contributing role in preventing children from accessing food and nutritional support, even in communities where it could be made available to them.”

Children’s recommendations to improve their safety and security in shelters in Syria included: “Make the shelter staff aware of how to deal with displaced people, to decrease their suffering” and remove tents within the shelter and secure a proper place for families as well as choosing safer shelter locations, teaching children where to go when there is bombing and points on dealing with weapons within the shelter. “All groups of children stated that support to parents should be provided, to improve their wellbeing and to help them know how to care more for their children. They asked to prioritize the equality of rights and responsibilities between the community and the displaced.”

Children in Syria made various recommendations for their protection at school, including hiring guards. They suggested: “Make new learning spaces that are in or near our shelter”, and that children from all sides of the conflict need “a safe environment for studying.”

**Ideas for innovation**

Children’s suggested innovations include improved connections, in particular internet, use of electronic media and broadcasting messages.

In Java it was suggested that a key problem that prevents “maximizing the active engagement of the community, including children, in any disaster risk reduction or other development work, is the lack of communication facility and equipment. For example, “The availability of internet connection is one of the tools to link my community to the rest of the world out there. But we have to walk around 3 kms if we want to get connected or access warnet (Internet stall). This is something that the government should pay attention to.” – 15-year-old girl

In West Nusa Tenggara, children broadcast messages through local radio on preventing the risk of flooding: “A key message emphasizes the importance of changing the bad habit of littering. We children believe that by littering, it can block the water drainage channel as well as create blockage in the river that could trigger flood in the community...We also remind the community about the experience of a past flood incident in their village, which caused a crop failure and affected the income and livelihood of the community.” – 17-year-old boy from Indonesia

This children’s group also takes action with adults to clean drainage ditches alongside roads, which has also been undertaken by children elsewhere.
RESEARCH QUESTION 4: WHAT ARE CHILDREN’S PERSPECTIVES ON THEIR NEEDS IN CONFLICT?

One billion girls and boys live in areas that were affected by armed conflict in 2013 or 2014. Globally, levels of forced displacement reached a record high for the second consecutive year in 2014, with 59.5 million people fleeing their homes. An estimated 13.9 million people are newly displaced. The majority are children.

These girls and boys face increased risk of all forms of violence, exploitation, abuse and neglect. They may be separated from their families, trafficked, recruited or used by armed forces and groups, economically exploited, or physically or sexually abused. Thousands of children are killed or injured every year by explosive weapons and landmines. In the long term, children’s survival and development may be jeopardized by the psychological impacts of distress and untreated trauma. Their societies’ ability to invest in their future is weakened.

Children growing up in these difficult circumstances have a lot to say about their needs and those of their families. Failing to address the needs of children in conflict situations presents major barriers to humanitarian effectiveness.

### Children and conflict in the Central African Republic

2.4 million children affected of 4.8 million people affected

Mid-2013 survey found just under 10% of women and girls interviewed had been raped

Children shared how they had witnessed executions and the abduction of parents;

In IDP camps, 42% of the most vulnerable children had lost their father; the mothers of 12% had been killed.

Large numbers of older children cannot read or write: 42% of young women and 28% of young men.

### Children’s views – their needs

In a 2013 survey, children explained `what help they needed most’- dealing with trauma, education and income were their main priorities.

“95% of girls and 75% of boys identified their need for psychosocial support to help them cope with the trauma they had suffered;

90% of girls and 85% of boys identified getting access to education as one of their top priorities;

95% of girls and 70% of boys said they needed to find a way of making money to support themselves.”

This review examines children’s perspectives on their needs in conflict (primarily children, but also adults as family and community members). It asks:

- What do children growing up in conflict prioritize?
- What do they identify as needs, and what do they identify as problems in fulfilling their rights?
What children prioritize: safety, protection and education

(See also SAFETY, SECURITY, PROTECTION AND PLAY under research question one: How can engaging children improve humanitarian effectiveness?)

Children expressed fear and preoccupation with issues of safety, security and protection in South Sudan, Syria and the Democratic Republic of the Congo. In South Sudan, “What children told us: they live in fear. They believe that the armed conflict may again be directed at them and their families. Many remember when armed men forced them to leave their homes, and most experience fear and distress without the comfort or familiarity of home.” In Syria, children say the feelings of fear and hopelessness are causing physical health problems. In the Democratic Republic of the Congo “More than one-third [of children] told us they are afraid all of the time or every day.”

As well as the evident anxiety of displacement and the fact of living in proximity to violence, children expressed fear of the effect of conflict on the behaviour of parents, neighbours, other adults such as teachers, peers and siblings.

“We saw lots of children who had been killed at checkpoints. They all had their fingers cut off” 13-year-old girl, “they beat my father in front of me” seven-year-old boy who had been detained, “I was playing with friends and a plane dropped a bomb, so everyone in the village told us to run away (...) we ran to our house and they bombed it. I fell unconscious (...), there were seven children and one old lady killed inside the house” 13-year-old boy. In the Democratic Republic of the Congo, the report of children feeling afraid went on to note the numbers separated from family/adult support and who have witnessed or experienced violence, at times extreme.

Education is seen by children as an essential need in any humanitarian response throughout emergencies, including conflict. In times of conflict, girls and boys prioritized safety over education, although in post-conflict settings these priorities are reversed (as in Sierra Leone, see below). In consultations with children in 2013 in Syria, “Children reported education as the second highest priority issue. Despite the importance of education reflected by all children, it was only identified as the first priority by 12% of children,” protection was given as the first priority, with 81% of children. This concept of protection was “articulate[d] by children through the word safety,” and the research suggested that “Children’s safety and security is interpreted as a necessary precondition, and therefore closely linked, with their access to education.” In consultations in Syria, some children argued that the “right to develop and exist is more important than education, because without it, we can’t learn anything. How can I focus on something and learn if I can’t be guaranteed that I am safe at all?”
What children prioritize post-conflict

In post-conflict Sierra Leone, education was reprioritized although a range of other issues connected to safety and protection were also raised. Consultations conducted by older children with other children, young people and adults found: “With overwhelming consistency, children cite lack of educational opportunities, poverty and lack of health care as their top concerns. These are followed closely by lack of shelter/food/water/clothing, unemployment, and lack of parental/family/home care.”

In these consultations there are variations by age and gender. For example youth generally attributed greater importance to unemployment than adolescents. On average, girls were significantly more concerned about sexual violence and exploitation than boys. Girls ranked “early or forced marriage” and “unwanted/teen pregnancy” twice as highly as boys (2.1 vs. 1.1 in the first instance and 2.0 vs. 1.0 in the second). Girls also ranked “prostitution” and “sexual violence/rape” as substantially higher concerns than boys (2.3 vs. 1.5 for the former and 1.4 vs. 0.8 for the latter). These views also vary according to location (between Makeni and Freetown), with girls in Makeni expressing much greater concern, while boys in Freetown (…) ranked concern over “sexual violence/rape” slightly higher than girls.

Children’s needs and problems fulfilling their rights

Unsafe locations and situations reported by children are complex, and will not be identified or understood by adults without consultation. Because circumstances change over time, regular consultation is required. Children identified places where they felt unsafe, including school, home, shelters and work, as well as situations such as early marriage and environments of high alcohol consumption.

In Northern Uganda children identified where they felt unsafe and why, raising concerns for protection, “To me safety means to grow, learn and play without fear” (12-year-old girl). A survey found children “want to feel safe from corporal punishment, bullying, forced early marriage, forced labour, those who drink alcohol at home, beatings at home.” One survey found 79% of children felt unsafe or scared of beatings at school, while 90% reported feeling unsafe or scared of beatings at home. Children also reported feeling unsafe or scared of: those that drink alcohol at home, 85%; forced labour 94% in two districts and 63% in another; forced marriage 86%; having to change schools 53%; bullying 86%; and child sacrifice (and abduction, sacrifice not defined), 92%.

Family is the most commonly identified factor associated with a child’s feeling of safety and protection. Children identified locations associated with armed threats as the most unsafe. However, these consultations with children showed a more complicated picture, because “despite children’s association of the home (and family) with safety, children also report protection threats and instability within the home environment. A
remote assessment of child protection needs in Syria by the Child Protection Working Group found the home to be the location where children are most likely to be injured or killed.\textsuperscript{253} Child participants report that the increase in aggression is a means for parents to instill control or to release stress. It is reported to be more severe against boys than girls, and more often from the father.\textsuperscript{254} Consultations found that “Some children believe that parents are the most in need of psychological support – as they are seen as more burdened by the conflict.”\textsuperscript{255}

Insecurity and uncertainty are generalized, “They beat up and insult people no matter if they are adults or children. They kidnap and rape girls and they detain people to ask for ransom” (Child speaking about security checkpoints at the entrance to this community).\textsuperscript{256} Children identified and defined areas prone to incidents of sexual violence as dark or isolated locations, although “(S)exual violence was also commonly reported as a threat at checkpoints and by armed groups and authority figures (armed men, management staff of collective shelters, parents, neighbours).”\textsuperscript{257}

**Safety in shelters**

Violence at home was also raised by displaced children in Syria who wanted a safe shelter since “Night raids by armed men, abuse from the guards of the shelter, kidnapping, and the arrest and detention of children were commonly reported by children in all collective shelters – in both areas that have endured heavy conflict, as well as in more stable communities.”\textsuperscript{258}

Safety problems in shelters raised by children include residents as well as outsiders. The fear of adults fighting in Protection of Civilian sites was raised by children in South Sudan. “Children in all focus groups say they are afraid of what will happen to them and their families. Armed groups are a concern for children staying inside and outside Protection of Civilian sites. Children inside these sites are afraid of adults fighting, a common occurrence that they link to increased alcohol consumption, distress and cramped living conditions.”\textsuperscript{259}

Children also raise problems of sexual violence in shelters, partially connected also to lack of privacy. In Syria, “Displaced children regularly highlight a lack of any privacy or daily routine and stability as contributing to a lack of security.”\textsuperscript{260} Displaced girls in shelters or other informal spaces “cite the lack of privacy and place to change their clothes as reasons for feeling vulnerable to sexual harassment. In one shelter for internally displaced people, young girls complained about being watched at night when they change their clothes, by people nearby or in the same rooms.”\textsuperscript{261} In shelters in Syria, “they are too far away; there is no lighting in the evening; they are mixed gender; they are located near to a checkpoint outside or to an authority or armed person inside the shelter; they have thin walls and are located on the periphery of shelters, where bombing can be very clearly heard.”\textsuperscript{262} Children identified bathrooms for mixed gender as specific locations where they are vulnerable to sexual attacks. In an internally displaced people’s shelter “within a low conflict area, several girls reported being sexually abused by their relatives, neighbours or even brothers.”\textsuperscript{263}
Discrimination was raised as a problem by displaced children in shelters: "Displaced children complain that they are treated unfairly or differently to children from the host community and also by staff and volunteers of community centres or shelters. In addition, children living in tents complain of social stigma and that they feel discriminated against by displaced children who are living in a collective shelter or apartment building." 264

**Education**
(See EDUCATION under research question one)

Children see education and school as major needs and priorities despite ongoing conflict. They raise problems of not being able to go to school because of closures, lack of safety traveling to school, violence or threats of violence at school, family attitudes especially towards girls' education, needing to work and costs of attendance, and hunger and lack of food. If schools exist and are open, and children can go, some children report facing problems at school, such as violence and discrimination, which may act as a deterrent and prevent their attendance.

In South Sudan, while "(E)very child we spoke to expressed a desire to return to school. They say school provides them with a sense of stability, but going to school is often not possible, as the education system in the three most conflict-affected states is severely affected and under-resourced" and over 1,100 schools in the most affected states (Jonglei, Upper Nile and Unity) have been closed." 265

**Family attitudes, gender, not prioritizing education**

In Syria, "Children also commonly report a decline in parent's prioritization of education. Reasons for parents to place higher value on other activities vary by gender, with different expectations for boys and girls," 266 but this is also explained as parents' fears for girls: "Children report that girls are more often encouraged to stay at home than boys, due to fear of kidnapping, rape, or forced marriage." 267 In one community in Syria, several young girls "stated that their families forbid them from going to school as they believe there is no point in studying. So instead of wasting time, they should get ready for marriage [at the ages of 15 and 16 years]." 268

In conflict-affected Northern Uganda:
"Girls are always being forced to stay at home and tend to the garden instead of getting to go to school. It makes me sad because it's unsafe and not right." – 12-year-old girl 269

Children reported other reasons for not sending girls to school was to avoid them mixing with boys. "In one high conflict area in Rural Damascus that has seen an influx of more conservative families from more rural areas, children reported that their parents are not sending them to school to prevent girls and boys from mixing." 270 In Somalia children
“mentioned that girls and boys eating together in school violated religious practices and was considered shameful,” but they also suggested solutions, that “girl-friendly spaces be built where girls could eat separately and have privacy for personal needs.” “When we finish elementary and intermediate schools we have nothing to do, and when we ask our parents to send us to high school, they tell us that they have no money (…) We have no girl-friendly space for us, so we mix up with the boys and we do not want that”

Need to work for family

In South Sudan, children said they are working more now partly because schools are closed or have shorter days “Children say they spend more time working – sometimes in hazardous or harmful conditions – and that this has replaced time spent learning. Children are expected to generate an income for their families through jobs such as tending market stalls or transporting goods (…) According to children, child labour existed before the outbreak of violence. Many children say that lack of access to school or a shorter school day are the main reasons they are more engaged in work. Children say they were attending school for six hours a day before the crisis, and now they attend school two to three hours a day.”

In Protection of Civilian sites, displaced “girls and boys of all ages say they work instead of, or in addition to going to school. Boys say they earn money by working outside the home, such as moving goods in wheelbarrows. More than 50% of the boys interviewed in Malakal report working outside the home for 30 to 40 South Sudanese pounds (about US $7–9.50) a day. Both girls and boys, some as young as 7 years old, say they work in market stalls. Girls in Protection of Civilian sites report carrying water for their families. They say they have to walk 10-15 minutes to find water, and the 20-litre jerry can is painful to carry. Girls in Malakal report leaving the Protection of Civilian site to retrieve water from the river because there are too few water points”. This report went on to note, “travelling outside the Protection of Civilian site exposes [girls] to further dangers, such as maiming, abduction and sexual violence”.

In Syria, children attributed a parent/caregiver’s preference for them not to attend school to “(P)reference for children to earn an income and support the family”. A child in rural Damascus said “Young boys are forced by their parents to work since they are considered men whom can be relied upon (…) while girls are responsible to take care of their younger siblings, which is a grave error as how could a child raise another child? This is associated with the lack of educational censorship and the spread of ignorance among adults.”

Issues and problems when going to school

Conflict-affected children raised a number of problems that affected their education when they did go to school. These included the lack of safety and the militarization of schools, violence at school, hunger and food shortage, and issues of discrimination on grounds of ethnicity and particularly affecting disabled children.
The lack of safety and militarization of school was explained in Syria: “Although every child expressed their right to education as a main concern, no child identified school as a safe place. Children explained that a fear of kidnapping, snipers, armed attacks and checkpoints prevent them from accessing school. At school, children said they are afraid of being kidnapped or physically or sexually assaulted. In addition, the militarization of the school (checkpoints are often based in close proximity, or armed guards are present on school grounds) disrupts their access to education.”

Children in all areas assessed, regardless of the level of active conflict, say that their parents are afraid of them going to school because of the risk of armed threats and attack.

Children in Syria made various recommendations for their protection at school, including hiring guards, but also suggested “Make new learning spaces that are in or near our shelter”, and that children from all sides of the conflict need “a safe environment for studying.”

Violence in school has been raised by children in numerous consultations around the world in non-emergency settings, but also in emergency settings from peers and from teachers and other adults. In South Sudan “(A)mong children who go to school, many describe being afraid when children fight each other on the way to school and at school, where they are supposed to be able to escape violence and stress.” Violence was also highlighted in a survey conducted by children in conflict-affected Northern Uganda, where 79% of those children surveyed felt unsafe or scared of beatings at school. Refugee Syrian children in Lebanon also reported violence from teachers at school: “One of my friends received an intense beating from the principal when he accused my friend of something he had not done”, says Mohamed, 14. “When my friend tried to defend himself, the principal did not believe him and hit him on his head till he bled”. Samira, 17, talks about another incident: “Once, the teacher asked my friend to answer a question in English. My friend couldn’t reply because he was weak in English. The teacher hit him.”

Syrian refugee children in Lebanon reported discrimination in form of verbal abuse from teachers and other students affecting their study. They said “We are cursed and humiliated not just by the teachers but by the other students” and gave examples, and said “All these behaviours, curses and humiliations are affecting us and our desire to study” but also “Luckily, there are (…) children who defend us when we are subjected to this kind of violence”. Children also wanted to point out “We would like to emphasize that not all the Lebanese and Jordanian people we meet every day treat us this harshly. Many of them are dear and loyal friends whom we love a lot.”

Refugee children explained how a belief they were ill or carrying diseases caused stigma and discrimination: “One boy inside the school said Syrian children were diseased so they won’t play with us or let us into the school” (13-year-old girl). “They won’t let me into the Madrassa [school] because my face is yellow because I have no food. They think because I am yellow that I have a disease. One boy inside the school said Syrian children were diseased so they won’t play...”
with us or let us into the school. One Jordanian girl wouldn’t sit next to my sister because they think she is ill. I don’t leave the home” (9-year-old girl).

In consultations in Syria in 2013, “Children identified school-aged peers with physical or mental disabilities as the most marginalized from education.” Discrimination by teachers at school against disabled children in Northern Uganda was spoken of by a 12-year-old boy: “When we [children with disabilities] are unable to participate in some of the school activities due to our disabilities, like sports, teachers ask us to do something else like clean the compound. Why should we have a punishment just because we are disabled?”

Schools are also identified by children as potential locations of sexual violence. In rural Damascus “the stairway of a school is a vulnerable area.”

Health
In the conflict in Syria, children’s stated problems of healthcare included “unavailability of medicines and specialized doctors, the lack of access to services, differential treatment in service provision, and the poor environment that is increasing health and hygiene related issues.” Children distinguished between services in different levels of conflict: “According to child participants, healthcare services vary between being extremely inadequate and unavailable in areas of high conflict and besieged areas, while being relatively available but expensive in low conflict areas. The price of medicine has increased in all areas. In multiple communities, children reported that pharmacies and the administration of collective shelters monopolize available medicines and sell them for higher profit on the black market and they noted lack of doctors as well as lack of medication.”

Displaced children from Syria said their health was affected by conditions in shelters, particularly girls. For example, children said that fear of using bathroom had resulted in bladder problems, diarrhea, urinary tract infections and other health issues, especially for girls. Children cited problems such as lack of clean water, accumulation of rubbish, spread of insects and dust pollution as contributing to spread of disease and illness. Meanwhile, “children from the host community or with higher socioeconomic status are perceived as receiving preferential treatment and more access to healthcare.”

Health problems were recognized by children as interconnected with other aspects of the emergency, such as fear and stress. In Syria, “(I)n all areas assessed, children report an awareness that regular feelings of fear, stress, sadness, and hopelessness can contribute to the prevalence of physical illnesses such as frequent vomiting, stomach problems, anxiety, sleeplessness and organ failure.”

Discrimination
Apart from the problems of discrimination experienced by some displaced and refugee children at school, some children identified discrimination in the community.
In Syria, children spoke of discrimination between displaced and host communities when rations were distributed: “A group of displaced children in one community complained that they stand in line for several hours to receive the bread that a member of the host community receives in half an hour.” Such queues are said to be vulnerable to attack. In other places children are sent to shops to get bread: “One group of children explained how they have to walk to a bakery half an hour away from their shelter in order to receive bread. Another child explained how his parents forbid him from going to the bakery after they heard of one being targeted in attack.” Children were also concerned about fairness in queuing and distribution and whether the food tasted good.

**Play**

Play was cited as an important priority for children in consultations in Syria - the “most important issues identified by children in Syria, in order of importance, concern their rights to protection, education, healthcare, nutrition and play – but little remarked upon in other consultations. The reason for importance of play was mentioned in conflict-affected Sierra Leone: “Girls and boys enjoy sports, especially football for boys and volleyball for girls. They say it takes their minds off their troubles, provides opportunities to work out feelings of aggression, and learn teamwork.”

In Syria, despite its pronounced importance, the emphasis on play varied as “children in more vulnerable communities (namely those that have faced blockade of access and resources) gave lower priority to their right to play – in favour of more tangible needs such as nutrition and healthcare. When children in these communities were asked to outline what a safe space to play should include, they included gardens and playgrounds, the presence of friends who have left the country, as well as medicine, water and nutritious food. It is clear from reports that children in besieged areas are among those experiencing the worst suffering in Syria, as their sense of childhood is no longer of great importance to them: “We need to practice sports so we can have powerful bodies, in order to carry each other when we get injured.”

Meanwhile, “Children in areas of high conflict link the lack of space and means for play to feelings of isolation and stress, and to an increase in violence and aggression between children. Children in an internally displaced person’s shelter in an area of low conflict complain that they are losing their talents” and children in shelters said that places once designated as play areas were being converted into “spaces for hosting displaced persons”. Even in low conflict areas, lack of play spaces was an issue and especially in besieged areas.

Children at a camp for internally displaced people in Darfur also mentioned a lack of play spaces, as well as shelter space:

“The weather in the camp is very hot, the shelters are old and not enough for us. There are no children’s parks or playing facilities. We just try to play under a few trees, there are not enough.”
Peace
A major priority for many children is peace. In Syria, children called for “the fighting to stop, the war to end and peace to spread among the parties in the conflict, so we can go back home” along with the chance to help other children, take part in relief efforts, cultivate good relationships in host countries and for “the international community to press their governments to cooperate to help us and end this crisis.” Some saw education as way out of conflict, to live in a peaceful location and go to school: “If I study, I can become an important person and then I can make the decision to stop the war in my country.” – 17-year-old boy

However, the experience of conflict also makes some children claim to be interested in taking up arms. A five-year-old boy was asked by War Child what would make his life better now that he was outside of Syria, and this very young boy answered: “I want a gun so I can fight.” The need to engage with children now, and for the future, is very urgent.

CONCLUSIONS
Children’s voices from diverse situations of armed conflict, disaster, displacement and other emergencies tell us a lot. Records of consultations show children have been active autonomously and under direction in humanitarian relief and recovery, but that their contributions are routinely underestimated.

This literature review reveals how the failure to consult and engage children reduces the effectiveness and efficiency of humanitarian programming, the capacity to reduce vulnerability and manage risk, the ability to transform and innovate, and the ability to understand the needs of people in conflict. Children highlight issues and difficulties that may be overlooked by adults – especially those concerning safety and protection. Adults who fail to consult children often fail to understand how problems may be connected and why intended outcomes are not achieved.

Key messages emerge from this literature review that will inform the four themes for discussion at the World Humanitarian Summit.

1. How can engaging children improve humanitarian effectiveness?
Children are always among the most vulnerable in any emergency, and over half of those affected by humanitarian crises are children. Consultations conducted at different stages of emergency responses show how children’s perceptions and needs differ from those of adults, and that emergencies impact differently on their lives. These facts can be presented to persuasively argue that children must be engaged and consulted to improve humanitarian effectiveness.
Moreover, as childhood and adolescence are periods of rapid change and evolving capacities, this review has highlighted the importance of regular consultation. Children are not a homogenous group, and this review has shown how age and gender, disability, ethnicity, social and economic status and other differences need to be taken into account in consultations and in ensuring actions children take are appropriate. In particular, the needs of children with disabilities and discrimination on grounds of ethnicity were repeatedly raised.

Important needs and rights were mentioned by children in various contexts, in particular education, safety and protection, and the need for spaces to meet and play. These are crucial in the minds of girls and boys for their recovery and for their future, and they worry that time lost cannot be regained. Improved preparation, planning, implementation and monitoring specifically of these rights can be implemented with children, in both preparedness and response.

2. How can engaging children reduce vulnerability and manage risk?
Children are involved in disaster risk reduction programmes and climate change adaptation preparation. They have shown skills and capacities in identifying hazards, communicating information and taking collective action. Children in emergencies want to be involved and have requested information. The increasing practice of child-led disaster risk reduction work, paralleling child-led research and other activities in development programmes, indicates practical possibilities that can be taken up. They would lead to a re-shaping of emergency responses in a way that is more effective, efficient and relevant in meeting the needs, circumstances and rights of children, now and later.

In some initial assessments in emergencies, it appears that no local preparedness work has been undertaken. In the absence of previous consultations with children, some of the issues raised and described in initial assessments actually refer to the period and circumstances before the onset of emergency: the emergency will have exacerbated existing problems. Regular assessment of children's needs and opinions is necessary also to ensure there is not a later decline in services (as indicated by children in Philippines) after an initial improvement.

There is a noted lack of child consultations available in this area during and immediately after conflict.

3. How can children’s ideas and perspectives drive transformation through innovation?
This review has shown children’s capacity to analyze problems and propose innovative solutions. They have demonstrated the potential of electronic, phone and other media in communicating and acting in emergencies.
A primary innovation will simply be better, consistent and committed engagement with the large part of the affected population that is expected to take leading roles in local communities and government in the coming years.

Children’s ideas and perspectives can drive transformation if humanitarian actors (government, non-government including private) are prepared to engage in meaningful consultations, support their credibility with communities, prepare various means and methods for their involvement which are genuinely respectful and committed, and really do take up children’s views and provide space for their decisions and actions. Reports reviewed highlight possibilities for cooperation between international agencies to support these processes, in the examples of joint and coordinated consultations with children in recent emergencies such as typhoon Haiyan, and in programmes such as Children in a Changing Climate.

4. What are children’s perspectives on their needs in conflict?
The one billion girls and boys whose lives were affected by armed conflict in 2013 or 2014 offer vital insights into their own needs, those of their peers, family members and other adults in their communities.

Children growing up in conflict prioritize safety, protection and education. They make concrete suggestions for ways in which the humanitarian response can be improved to better serve people in conflict: reducing the risk of sexual violence in shelters and camps, understanding cultural barriers that mean some girls are kept away from school, explaining why nutrition and health interventions may be failing to meet the needs of the most vulnerable, and others.

Furthermore, children raise the needs of other adults when they witness violence within the home. Consultations found, “Some children believe that parents are the most in need of psychological support – as they are seen as more burdened by the conflict.”

Moving forward
Building a humanitarian system that genuinely listens to, includes and responds to children requires action and change in several areas. These include mechanisms for and developing regular and effective consultations, the systematic inclusion of children in planning, decisions and actions during emergencies, particular planning and preparation for responding to needs and issues prioritized by children (such as education, protection and spaces to meet), and continuing the involvement of children in disaster risk reduction, preparedness and management.

Assessments with children at the start and end of an emergency are not sufficient to check how needs are being met: consultations need to be held more than once or twice a year,
and any consultations or assessments need to be disaggregated, separating children’s view from adults and looking at different ages, gender and other groups. This disaggregation of children’s groupings needs to be done both in practice and in reporting – it is futile to disaggregate the process, with separate consultations for adults and children and by age and gender and other groups across children and young people, if these are reported without analysis of differences as well as similarities, and also underlying meanings and complexities. In the process of analyzing children’s views, ensure that the shorthand categories of ‘education,’ ‘protection,’ ‘health’ and so on that are widespread among government and non-government agencies are not being used to subsume children’s needs and so not meeting them because of interconnections and complexities in cause and effect. Increased involvement of children in preparedness activities can lead to the identification of particular local hazards and problems and inter-linkages, so that the effects of an emergency are better understood.

Engagement with children at different stages of an emergency, including early assessment, monitoring and evaluation, is essential. Agencies need to be prepared and competent, allocating appropriate human and financial resources.

Engagement and consultations should be:

- Disaggregated in process (adults and children should be separate, there should be diversity in children’s groupings – age, gender, disability, other social and economic status etc.);
- Disaggregated in reporting;
- Include assessment of needs and wants, what children are doing, can do and would like to do, suggestions for improvements;
- Repeated on a regular basis, with previous actions and consultation findings followed up, especially needs, rights, gaps and improvements
- Making use of recent practice innovations so that engagement and consultations are coordinated across agencies and the work is shared.

RECOMMENDATIONS

In order for the World Humanitarian Summit to achieve transformative change, a key outcome must be to ensure that the success of humanitarian action is measured by significant improvements in the situation of the most vulnerable children in countries which are highly susceptible to natural hazards, fragility and conflict.

Through the World Humanitarian Summit, the fate and future of millions of children worldwide can be positively influenced by governments, civil society, donors, UN agencies and implementing partners.
Throughout the literature review, children highlighted several key themes and priorities, which are captured in the Guiding Principles below. Children also made suggestions and recommendations for improvements, which are captured in the Thematic Recommendations.

The child-focused agencies also present their proposals, acting upon what children want and prioritizing their needs. The recommendations are child-centred and needs-based and represent the agencies' collective contribution to the World Humanitarian Summit process.

GUIDING PRINCIPLES

- **Children are not a minority group**: Children comprise half or more of crisis-affected populations and represent the future generation. Children want to be systematically consulted by humanitarian actors before, during and after emergencies. They want their views to be taken seriously and their rights and needs to be addressed in the planning, coordination, delivery, monitoring and evaluation of crisis prevention and response.

- **Children are agents of change**: Girls and boys of all ages want to have and must be given the opportunity to express their views and opinions freely, influence decisions affecting their lives, participate in the rebuilding of their communities and societies and realize their rights. They want to continue their education, help during disasters, support their peers and communities and help to foster peace.

- **Children want to be given the opportunity** to hold humanitarian actors and governments accountable for agreed interventions and call for corresponding mechanisms to be established to facilitate this.

- **Children have the right to be protected at all times and call for this repeatedly**. All humanitarian actors and governments are responsible for ensuring that their actions do not place children at risk in any way and that the responses they undertake as well as the programmes they implement improve the safety and well-being of children.

  **Children prioritize education in emergencies**, including in situations of armed conflict, and express concern for their futures when their education is interrupted. Donors, humanitarian actors and national governments must listen to what children want and ensure they can continue to access an education in times of emergencies and crises.

- **Children want the views of all to be reflected, especially for those who are marginalized**. Data informing prevention and response actions, such as risk and needs assessments, must be disaggregated by age and gender, as well as disability, ethnicity and other social and economic inequalities faced by children.

THEMATIC RECOMMENDATIONS

While recognizing the extensive nature of the consultations that have been represented in this report, the UN agencies, NGOs, governments and the donor community must commit to further research and consultations with socially marginalized groups of children, including street-connected children, orphaned children, unaccompanied and separated children, and child heads of households. In addition, further research and consultations are needed during conflicts and what children need to reduce vulnerability and manage risk in their schools and communities in conflict situations.
Humanitarian Effectiveness and Financing

1. **Measure impact on children**: the impact of humanitarian action on building resilience and improving the safety and well-being of the most vulnerable children should be integrated into monitoring, evaluation and learning processes.
   - A pilot should be committed to by a set of partners at the WHS that would look at developing indicators and measures of progress in: disaster risk reduction, children's health, nutrition, education, protection, psychosocial support, employment and empowerment before, during, and after crises. The pilot should also test a globally defined ‘vulnerability scale’ in an attempt to understand the impact of humanitarian action on reducing children’s vulnerability and realizing their rights.

2. **Two-way community communication**: Seek commitment from humanitarian actors to support programming that enables safe two-way communication with children to ensure their needs are taken into account.
   - Humanitarian actors, including donors, must place child participation and mechanisms to ensure accountability to children at the heart of strategies for strengthening engagement with crisis-affected populations in needs assessments, program delivery and real-time monitoring and evaluation, while simultaneously promoting children's access to communications channels and placing emphasis on innovative approaches for engagement with children.

3. **Long-term, predictable funding streams**: Developing a fit-for-purpose model for humanitarian financing must be the priority of an effective global prevention and response system that provides reliable support to children. This is particularly critical in situations of protracted crises and in transition periods from emergency response to rehabilitation and development. Context-appropriate continuation of development aid is also vital to the survival and development of children in emergency settings, and critical for future stability.
   - A Donor Framework Agreement should be developed and adopted at the WHS around effective multi-year humanitarian aid funding models that ensure sustainable outcomes from international aid for children.

4. **Seek transformative donor commitments** to systematically increase fulfillment of funding requests for the chronically underfunded sectors targeting children, such as education and child protection in emergencies. Child protection and education spending should be reported through the UN Financial Tracking system to ensure more transparency and accountability by donors and humanitarian actors. As part of humanitarian preparedness, response and reconstruction activities children’s specific needs and rights must be mainstreamed (notably education, nutrition, maternal and child health and child protection). This must involve prioritizing and mobilizing the necessary humanitarian financing, support and coordination.
   - As a follow-up to the WHS, develop a set of core standards that ensure neglected crises and chronically underfunded areas of a response, such as child protection and education in emergencies, are fully funded through a fairer distributive appeal process. Additionally, a commitment should be made to evaluate the existing humanitarian system’s ability to respond to child-focused sectors of education and child protection.

Transformation through Innovation

1. **Child-centred innovation**: empower children and build their resilience through the development of innovative child-centred participatory approaches.
   - New multi-stakeholder partnerships should be created through the WHS
process to build investment funds for child-centred and child-led innovation and technologies such as use of mobile technology and radio. Children must be included in identifying and co-developing this type of innovation.

Reducing Vulnerability and Managing Risk: Serving the Needs of People in Conflict

1. **Child-focused planning:** include models that safely consult children, assess the protection risks and their impacts on children’s well-being:
   - **Emergency preparedness, response and recovery plans** that are child-focused and ensure the participation of children must be developed and resourced as standardized procedure within humanitarian action.
   - **Disaster risk reduction activities must be included** in formal and non-formal education programs in emergency-prone contexts and children must be involved in the planning of activities and their implementation.
   - **Consult with children about their needs and wants on a regular basis** and ensure consultation mechanisms include new child participants to maintain a diversity of views, especially in pre-disaster settings.

2. **Prioritize child-focused interventions:** Child protection and education in emergencies must be prioritized as lifesaving interventions alongside health, food, water and shelter. Greater cross-sectoral coordination must be achieved to ensure children’s safety, well being and recovery.
   - **Re-categorize Child Protection as ‘Lifesaving Assistance’**: humanitarian policies, guidelines and practice, including donor policies, must be changed to recognize child protection as a lifesaving intervention.
   - **Recognize that Education in Emergencies forms an integral part** of delivering an effective response for children in emergencies and recognize that a good-quality education response must provide children with psychosocial support. Schools provide a protective environment where children can access essential services and receive what they prioritize the most – an education.
   - **Prioritize, fund and deliver education and child protection** as core aspects of the first phase of an emergency response.
   - **Commit to the use of the Minimum Standards for Child Protection in Humanitarian Action and to the INEE Minimum Standards for Education:** all humanitarian donors and actors must commit to the use of the Minimum Standards, mainstream child protection in all humanitarian interventions and ensure strengthened cross-sectoral coordination and programming.
   - **Support parents to support their children’s continued education** by ensuring that adequate livelihood and aid assistance is provided.

3. **Respect for IHL and Child Rights:** call for urgent and unequivocal respect of International Humanitarian Law and International Human Rights Law, particularly the UN Convention on the Rights of the Child and its Optional Protocols and UN Security Resolutions on children and armed conflict, in crises and end impunity by holding perpetrators of violations against children to account.
### ANNEX 1: EXAMPLES OF VARIATIONS IN NATIONAL POLICY DEFINITIONS OF ‘YOUTH’ INCLUDING CHILDREN

<table>
<thead>
<tr>
<th>Age range (years)</th>
<th>Countries</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-40</td>
<td>Nepal</td>
<td></td>
</tr>
<tr>
<td>18-35</td>
<td>Bangladesh</td>
<td></td>
</tr>
<tr>
<td>15-35</td>
<td>Dominican Republic</td>
<td>National Youth Law 2000 refers to 10 to 35</td>
</tr>
<tr>
<td></td>
<td>Fiji</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Zimbabwe</td>
<td></td>
</tr>
<tr>
<td>16-30</td>
<td>Indonesia</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Vietnam</td>
<td></td>
</tr>
<tr>
<td>15-30</td>
<td>Cambodia</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Philippines</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Kenya</td>
<td></td>
</tr>
<tr>
<td>12-30</td>
<td>Jordan</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Uganda</td>
<td></td>
</tr>
<tr>
<td>15-29</td>
<td>Brazil</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Peru</td>
<td>Identifies additional three age groups: 15-19, 20-24, 25-29</td>
</tr>
<tr>
<td></td>
<td>Ethiopia</td>
<td></td>
</tr>
<tr>
<td></td>
<td>India</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sri Lanka</td>
<td></td>
</tr>
<tr>
<td>12-29</td>
<td>Mexico</td>
<td></td>
</tr>
<tr>
<td>Under 29</td>
<td>Finland</td>
<td>Youth Act and youth decree 2006 define as those under 29</td>
</tr>
<tr>
<td>18-25</td>
<td>Thailand</td>
<td></td>
</tr>
<tr>
<td>16-25</td>
<td>France</td>
<td>Nat Youth Policy 2013 addresses 3-30, focus on 6-25</td>
</tr>
<tr>
<td>Under 25</td>
<td>USA</td>
<td>Draft policy framework Pathways for Youth 2013 defines youth under 25 in 3 stages; under 14, 15-17, 18-24.</td>
</tr>
<tr>
<td>13-19</td>
<td>UK</td>
<td>Youth policy framework Positive for Youth 2011</td>
</tr>
</tbody>
</table>

## ANNEX 2: CHILD MARRIAGE ‘HOT SPOTS’

<table>
<thead>
<tr>
<th>Rank</th>
<th>Country</th>
<th>Percent of girls married before 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Niger</td>
<td>75</td>
</tr>
<tr>
<td>2</td>
<td>Chad</td>
<td>68</td>
</tr>
<tr>
<td>3</td>
<td>Central African Republic</td>
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<tr>
<td>4</td>
<td>Bangladesh</td>
<td>66</td>
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<tr>
<td>5</td>
<td>Guinea</td>
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<tr>
<td>6</td>
<td>Mozambique</td>
<td>56</td>
</tr>
<tr>
<td>7</td>
<td>Mali</td>
<td>55</td>
</tr>
<tr>
<td>8</td>
<td>Burkina Faso</td>
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</tr>
<tr>
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<td>South Sudan</td>
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<td>Malawi</td>
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<td>Madagascar</td>
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</tr>
<tr>
<td>12</td>
<td>Eritrea</td>
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</tr>
<tr>
<td>13</td>
<td>India</td>
<td>47</td>
</tr>
<tr>
<td>14</td>
<td>Somalia</td>
<td>45</td>
</tr>
<tr>
<td>15</td>
<td>Sierra Leone</td>
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</tr>
<tr>
<td>16</td>
<td>Zambia</td>
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<td>17</td>
<td>Dominican Republic</td>
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<td>18</td>
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<tr>
<td>19</td>
<td>Nepal</td>
<td>41</td>
</tr>
<tr>
<td>20</td>
<td>Nicaragua</td>
<td>41</td>
</tr>
</tbody>
</table>

- Child marriage prevalence defined as the percentage of women 20-24 years who were married on in union before the age of 18. Data from UNICEF State of the World’s Children, 2013
Notes


4. Ibid., p.17.


12. Ibid.

13. Ibid.


15. IASC 2011 Commitments on Accountability to Affected Populations (CAAP) Geneva: IASC.


17. IAWGCP (Inter-agency working group on children's participation) 2007 Minimum standards for consulting with children no place: Children in a Changing Climate, p.3.


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