

# SETTING THE GLOBAL RESEARCH AGENDA FOR CHILD PROTECTION IN HUMANITARIAN CONTEXTS



# Introduction

Armed conflict, natural disaster and forced displacement affect millions of children each year. Such humanitarian crises can erode existing family and community protection mechanisms - increasing the risk of abuse, neglect, exploitation and violence. Within these contexts, child protection experts work to prevent and respond to protection concerns. Yet the evidence-base that should inform these interventions is lacking. There is limited analysis available on the causal pathways for child protection risks and vulnerabilities in humanitarian crises and few of the commonly used interventions have been rigorously evaluated in relation to child protection outcomes.

At the end of 2017, the Assessment, Measurement and Evidence (AME) Working Group of the Alliance for Child Protection in Humanitarian Action undertook a research prioritization exercise, adapted from the Child Health and Nutrition Research Initiative (CHNRI), to identify and rank research priorities for child protection in emergencies. Forty-nine child protection experts working in a range of humanitarian contexts were consulted to inform this prioritization exercise. The results are intended to inform a child protection research and evidence agenda for humanitarian practitioners, academics and donors.

Below is a summary of the highest-ranking priorities.

### Top Fifteen Research Priorities based on Research Priority Score

Overall	Research Question
Rank	
1	How effective are cash-based social safety nets for improving child well-being?
2	How effective are family strengthening interventions for improving child well-being?
3	What are the best practices for para-social work models in humanitarian settings?
4	How can we better evaluate the effect of multi-sectoral programs on child well-being, including how various components interact with one another?
5	Which systems strengthening interventions have a measurable impact on children?
6	What is the prevalence of child labour in humanitarian settings?
7	What are the best practices for bridging humanitarian and development initiatives for CP systems strengthening?
8	How effective is psychosocial programming for improving child well-being?
9	What is the added value of child protection interventions when mainstreamed within other sectors (i.e. health, education)?
10	How effective are interventions to reduce child labour?
11	How effective are capacity building interventions to improve child well-being?
12	What are the risk factors associated with children with disabilities (particularly non- observable disabilities)?
13	How effective is case management to improve child well-being?
14	What are the best practices for engaging the local social service workforce in emergency settings?
15	Translate existing literature on humanitarian emergencies in urban settings to better adapt CP programs to current contexts

### **Cash Transfers**

Understanding the effects of cash transfers on child well-being outcomes has emerged as the most important research question for the sector. The assumption driving the proliferation of cash transfers in humanitarian contexts is that they are an effective way of mitigating crisis-induced economic shocks, thereby preventing the use of coping strategies that may have negative effects on children such as school drop-out, child labor and family separation. However, these assumptions have not been fully tested within disaster, conflict- affected or displacement contexts.

### Family Strengthening

Within the child protection in emergencies sector, there has been increased emphasis on the importance of working with family units to achieve child protection outcomes. Existing research undertaken in development contexts demonstrates the ability of family strengthening interventions to reduce household violence. While family strengthening programs, including parenting education, training in positive discipline, family counseling and livelihoods support have been included within program models, the evidence specific to humanitarian contexts remains weak.

### **Child Labor**

Child labor in humanitarian settings was also a common theme among the top priorities for research investment. Child labor has been examined across multiple development settings, however, there is a general lack of evidence on the prevalence and dynamics of child labor, particularly the worst forms of child labor in humanitarian contexts, similar to other complex child protection issues. There is a need to better understand the prevalence, dynamics and effective interventions to reduce this risk for children in different humanitarian contexts (natural disaster and conflict), as well as in urban, rural and camp settings that takes into account children in both visible and invisible forms of labor.

### Methodologies to Better Capture the Effects of Multi-Sectoral Interventions

Experts indicated a need to evaluate multi-sectoral interventions. This methodological research priority underscores the need for study designs that allow for the rigorous evaluation of multiple components within increasingly complex program designs, including analyses on how various components interact with one another to improve child well-being. Guidance from the health sector offers insight on how this may be taken up by child protection actors.

Similarly, experts identified a need to quantitatively demonstrate the added value of child protection interventions when mainstreamed within other sectors, such as health, nutrition or education. If protection interventions are found to be effective in improving non- protection related outcomes for children, this type of evidence would bolster advocacy on the importance of child protection interventions in achieving desired results in other areas of humanitarian relief.

### **Serving Children with Cognitive & Intellectual Disabilities**

Disability inclusion has gained traction as a critical component within humanitarian assistance. However, this work often addresses physical disabilities where programmatic accommodations are typically tangible and straightforward, such as the fitting and distribution of assistive devices. This prioritization exercise found that many experts felt ill- equipped to properly serve children with cognitive and intellectual disabilities, agreeing that an examination of the protection risks for such children should be prioritized.

### **Urban Operations**

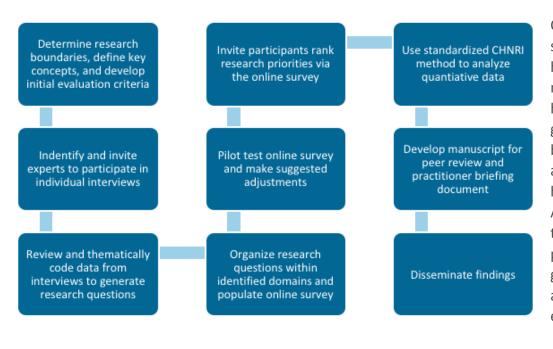
Rapid urbanization has resulted in more densely populated cities and towns, increasing the potential impacts of a humanitarian crisis. The Syrian refugee crisis has seen over 5 million people flee to neighboring countries, seeking refugee predominately in the cities and towns of Lebanon and Jordan with another 6 million internally displaced within Syria, primarily in urban and periurban settings. The delivery of humanitarian assistance in urban areas, rather than in camp-based settings, requires further consideration and the development of new approaches. Experts identified a need to apply learning from existing research on urban operations to child protection programming. Other actors within humanitarian response have begun to give this issue greater attention, which should enable the child protection sector to use available evidence, gathered through a review of secondary literature, to inform child protection program design and approaches.

### **Localization and Sustainability**

Localization and sustainability were also key themes. Within the top 15 research priorities, experts conveyed a need to identify best practices for both engaging the local social service workforce in emergency settings and establishing sustainable para-social work models in order to ensure that structures will exist past the duration of humanitarian intervention. At the same time, respondents would like to understand best practices for bridging humanitarian and development initiatives for child protection systems strengthening. Taken together, these items demonstrate a desire to understand how best to engage local social service structures (formal and informal) and connect the work done during a crisis to a longer-term development agenda.

# **Methods**

Fig. 1. Research Prioritization Flow Diagram



CHNRI was designed as a tool to help guide investment in children's health research globally and has been used across a broad array of health disciplines. At the first stage of the exercise, experts discussed the gaps in knowledge and evidence that existed within the

### **Box 1. Ranking Criteria**

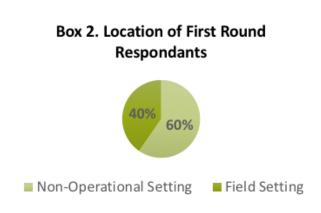
**Relevance**: research will support learning that contributes to the prevention of and response to abuse, neglect, exploitation, or violence in humanitarian settings

**Feasibility**: research is feasible to conduct in an ethical way

**Originality**: research will generate new findings or methods

Applicability: research will be readily applied to programs and policies

sector, generating research priorities to address these gaps. Forty-seven experts participated in this first round of evidence generation with representatives from Non-Governmental Organizations (NGOs), United Nations (UN) agencies, donor agenciesand research institutions. Interview notes were then collated to identify 90 unique research priorities which were listed in an online survey organized by theme - Epidemiological Research (prevalence of child protection concerns and determinants of risk); Policy and Systems Research; and Intervention Research (evaluation of interventions). Experts who participated in the interview process were invited to take part in the online ranking portion of the prioritization exercise. Each of the 90 research priorities were ranked on four criteria: (see Box 1). Of the 49 respondents invited to take part in the online ranking, 41 experts participated in the ranking exercise. For each research question, participants were asked to state their level of



agreement, ranging from strongly agree to strongly disagree. A priority score was calculated under each of the four judging criterion by taking the point totals and dividing them by the maximum number of points available. For each question, the overall Research Priority Score (RPS) was then calculated by taking the average score across judging criterion. Research questions were then ranked from highest to lowest on overall priority scores.

## Conclusion

Rigorous, scientific research that assesses the scope of child protection risks, examines the effectiveness of existing child protection interventions and translates evidence to practice is critical to move the sector forward and respond to donor calls for programming that is evidence-based. It is our hope that this prioritization can guide a global research agenda, facilitating cooperation among a diverse set of actors to pursue a coordinated approach to evidence generation.

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