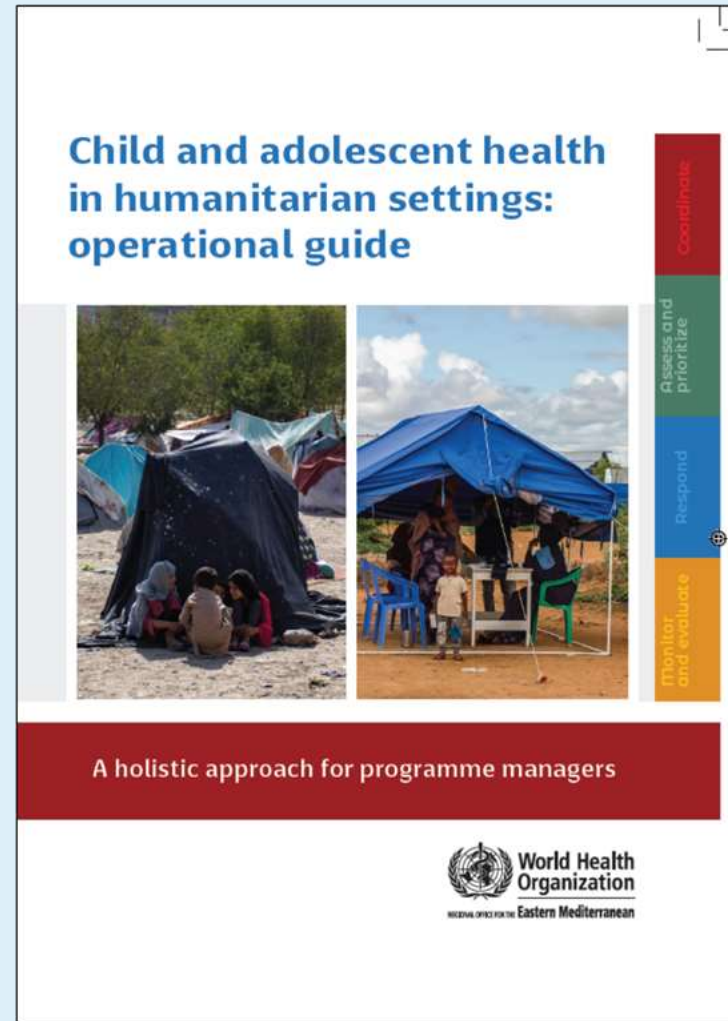




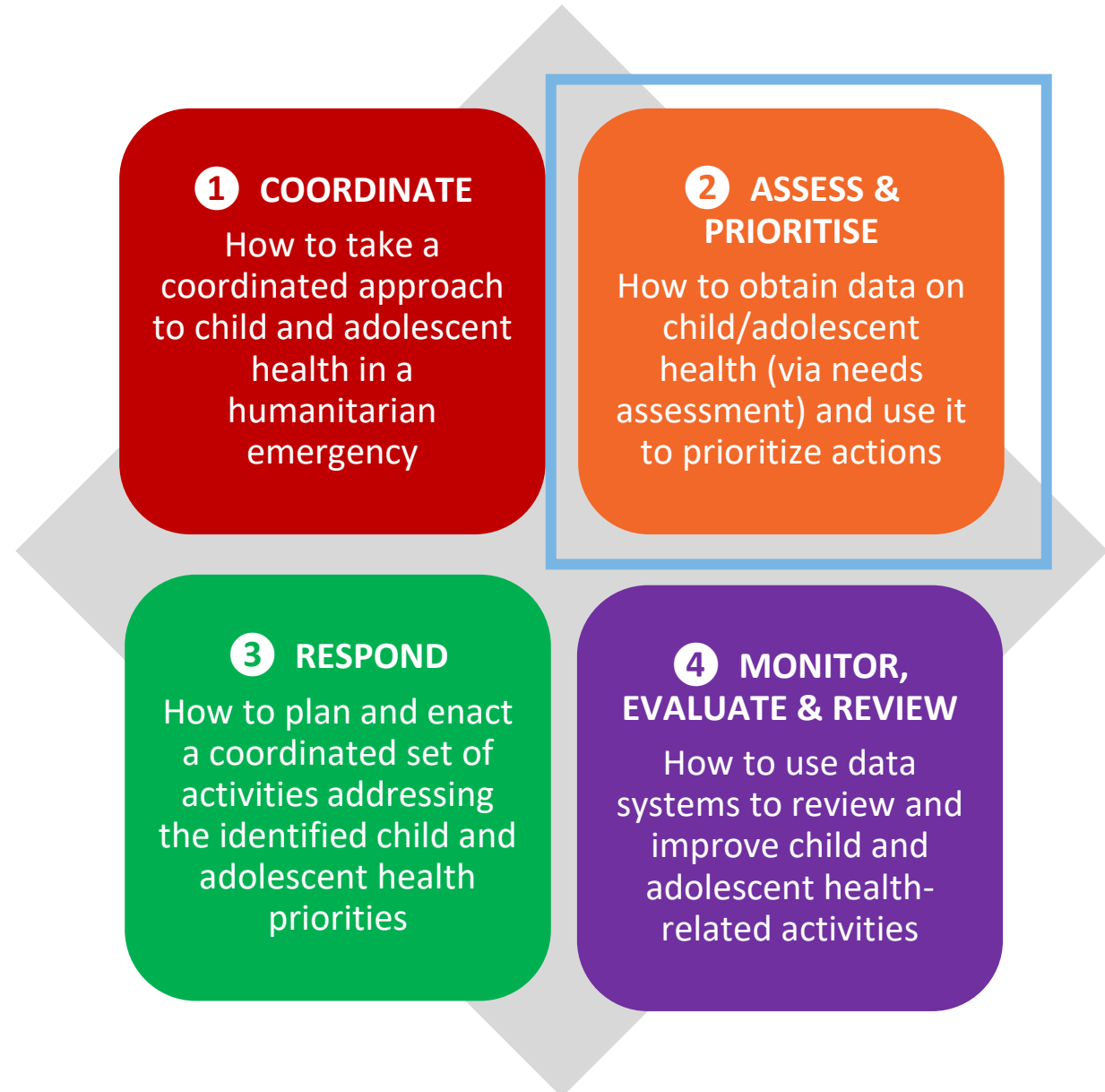
Module 2: Assess and prioritize



Child and adolescent health in humanitarian settings: operational guide



The four interconnected programmatic action areas of the operational guide



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Assess and prioritize

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1. Include child and adolescent health in initial health assessment



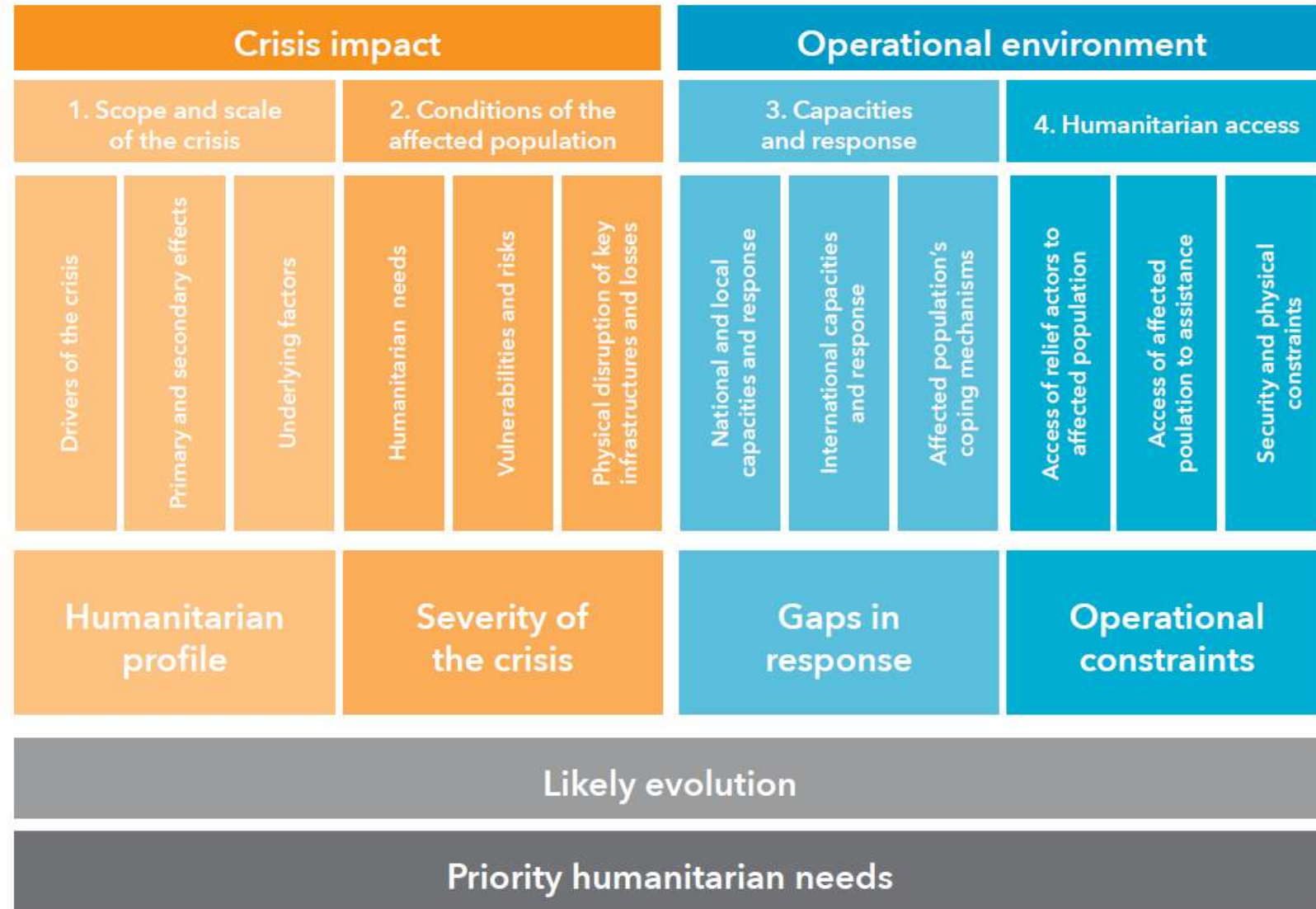
Humanitarian program cycle

- Humanitarian emergencies are **complex and chaotic**
- Key agencies should initiate a **coordinated needs assessment** at the start of a humanitarian emergency, including:
 - **Assess how the situation may evolve**
 - **Identify gaps in response**
 - **Assess operational constraints**



Components of a needs assessment

- **Careful, coordinated assessment** of the situation and ongoing **monitoring of the response and changing needs** is critical to effective humanitarian action
- Needs assessment should consider:
 - **Crisis impact**
 - Scope and scale crisis
 - Conditions affected population
 - **Operational environment**
 - Capacities and response
 - Humanitarian access

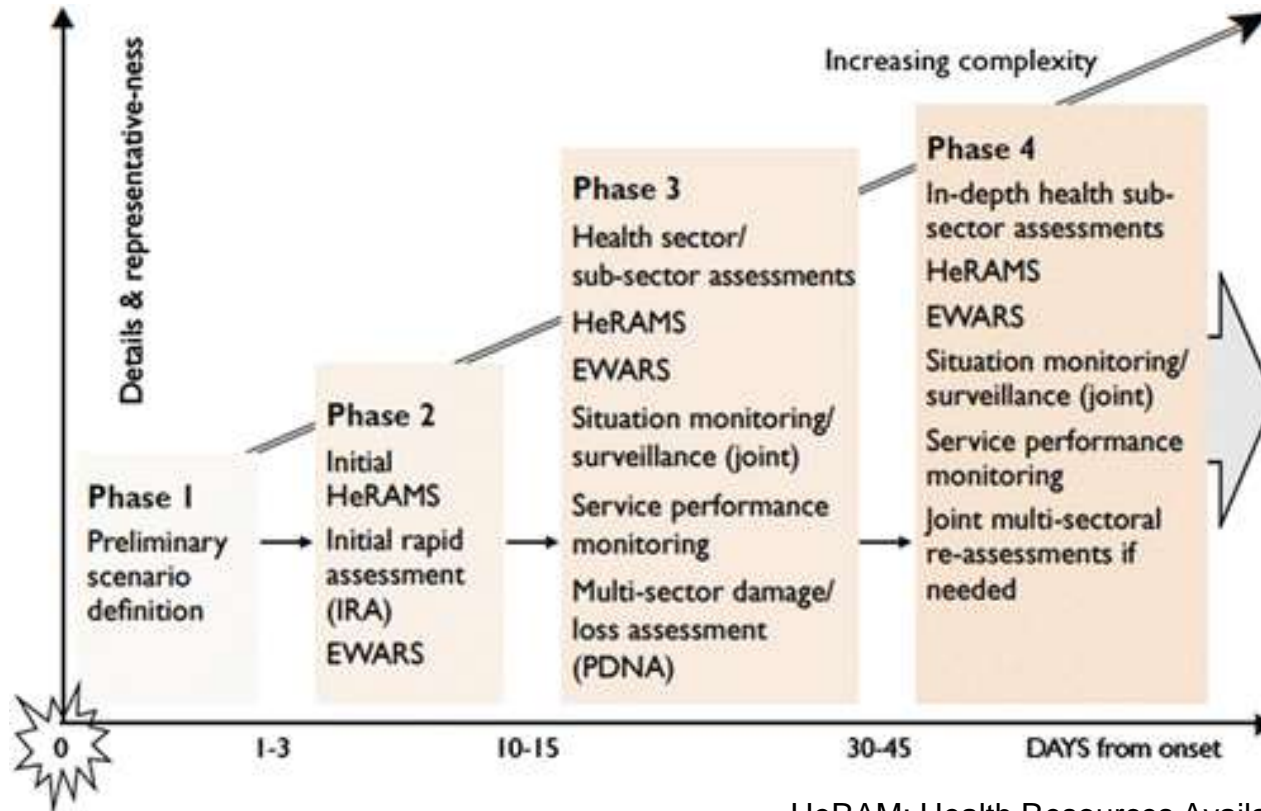


Ten principles for conducting needs assessments

- 1. National leadership:** Promote national and local government leadership in assessments for ownership
- 2. Preparedness planning:** Incorporate assessments into emergency preparedness plans
- 3. Data utilization:** Build assessments on existing CAH data, e.g. national demographic surveys and prior emergency response reports
- 4. Alignment with monitoring:** Ensure a link between assessments and ongoing monitoring efforts
- 5. Data relevance:** Collect data directly relevant to decision-making
- 6. Inclusive approach:** Involve all stakeholders, utilizing technology, including social media, to engage with young people
- 7. At-risk groups:** Address priority needs and groups, such as gender, age, disability, unaccompanied minors, and ethnic minorities
- 8. Information management:** Implement effective information management strategies
- 9. Context analysis:** Include an analysis of the overall context
- 10. Long-term perspective:** Conduct assessments with an eye toward future recovery and development activities

Coordinated assessment and phases in humanitarian crisis

IASC operational guidance



The rapid health assessment will address:

- **Health status and risks**
- **Health resources and service availability**
- **Health system performance** (including coverage, quality, access and utilization)

Role of the RMNCAH/CAH working group and individual agencies in the assessment stage

Active participation

ensure that children and adolescents are counted and assessed accurately

Age disaggregation

including newborns, < 5 years, 5–9 years, 10–14 years, and 15–19 years

Integration broader needs assessment activities

integrate child and adolescent needs within broader assessments

Specific CAH vulnerabilities and risks

Young children
(<5 years old)

Girls

Undocumented
migrants,
unaccompanied and
separated children

Children and
adolescents from
ethnic or religious
minority populations

Children and
adolescents with
disability or chronic
health conditions

Child and adolescent
caregivers or **primary**
income earners

Children and
adolescents in the
armed forces (and ex-
combatants) or justice
system

Children and
adolescents in **forced**
or exploitative labour,
including sex work

Child and adolescent
survivors of physical,
sexual and emotional
abuse

Issues to consider for children at risk

- Violence, trauma
- Food insecurity, undernutrition
- Disease outbreaks
- Uncontrolled endemic disease
- Mental health and psychological well-being
- Gender
- Age



Common data collection tools for humanitarian emergencies

Data collection method	Comments
IASC Multi-sector initial rapid assessment (MIRA) tool (26)	MIRA is the coordinated approach to overall assessment of a crisis situation, and is led by OCHA. It includes the rapid health assessment which is led by the health cluster.
WHO Health Resources Availability Monitoring System (HeRAMS) (27)	HeRAMS is a tool for initial assessment and ongoing monitoring of human resources for health, and is used by the health cluster.
WHO service availability and readiness assessment (SARA) (28)	SARA is an alternative tool for cross-sectional assessment of health service availability and readiness.
WHO rapid risk assessment (29)	Rapid risk assessment guides the initial rapid assessment of acute public health events.
WHO Early Warning and Response System (EWARS) (30)	EWARS is a system for early detection of crises. (See also action area 3 – Monitor, Evaluate, Review)
3W/4W/5W (31)	This tool assesses humanitarian response: who, what, when, where, and for whom.
WHO strategic tool for assessing risk (32)	The WHO strategic tool for assessing risk is mainly used for planning (preparedness).
SMART nutrition assessment (33)	SMART is a method for rapid assessment of nutrition in emergencies.

Key actions – needs assessment (1/2)



Review data

- Members of the RNMCAH/CAH working group review the OCHA risk profile, all hazards response plans and other relevant information sources



Context assessment: Contribute to a systematic, objective, and ongoing assessment of the context and stakeholders (intersectoral)

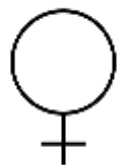
- The RMNCAH/CAH working group coordinates input
- Advocate for disaggregation of data by sex and age
- Use pre-existing data as much as possible

Key actions – needs assessment (2/2)



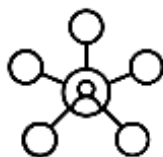
Assess safety and security

- Focusing on children and young people, to identify threats, violence and human rights violations
- Consider using the child protection rapid assessment toolkit



Consider gender impact

- Consider gender roles/norms/stereotypes affecting children's and adolescent's experience of and response to a crisis



Share findings widely

- Use multiple communication channels and share with affected populations as well

Key indicator – needs assessment



The health sector lead agency has conducted an **initial rapid assessment**, with **active involvement** of the RMNCAH/CAH working group.

2. Assess existing resources and capacity



Rapid assessment of health needs and response capacity

- The rapid assessment offers a **preliminary understanding** of needs and response capacity
- To gain a more comprehensive view, the health cluster and RMNCAH/CAH working group should conduct an **in-depth assessment of health service resources and capacity**



Key actions – health service assessment (1/2)



Coordinate CAH assessment

The RMNCAH/CAH working group coordinates additional CAH assessment in collaboration with the health cluster lead and information management group



Review policies and protocols

- Avoid duplication and conflicting recommendations with existing programs and protocols
- Facilitate government-NGO communication through UN if necessary



Update CAH guidelines and tools

- Review and update CAH clinical guidelines, health promotion materials, and training tools
- Collaborate with government, UN agencies, and NGOs when creating new resources



Key actions – health service assessment (2/2)



Health facility assessment

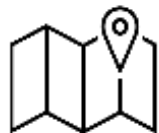
- Map existing facilities, assess capacity, CAH services, and damage by using HeRAMS, SARA, 3W/4W, or field tools



Evaluate staffing and competency in all essential CAH services and **document the number and type of skilled health providers and facilities**



Access medicines and supplies: review essential medicines and procurement procedures



Create service map for coordination and decision-making and share it with decision-makers, partners and the community

Key indicators – health service assessment

- ✓ The RMNCAH/CAH working group has prepared a **plan (with the health cluster lead) to conduct additional assessments of CAH needs and response capacity.**
The plan includes a **timeline of activities and designates responsibility.**
- ✓ The RMNCAH/CAH working group has helped the health cluster lead to **create and disseminate a service map.**

Elements of a service map

Geographical locations.
Existing health care networks
for RMNCAH/CAH.

Distances from affected
communities. Distances
between peripheral
RMNCAH/CAH health
facilities and larger hospitals.

Transport options between
locations, and potential
access issues (e.g. security
risks, safety issues and
cultural factors).

Communications systems
(e.g. telephone and Internet).

RMNCAH/CAH services
provided (preventative and
curative). Medicines and
medical supplies. Costs.

Staff-to-patient ratios

3. Prioritize child and adolescent health interventions



Health needs and prioritization of actions for humanitarian responders

01

Adaptable prioritization:
prioritize to minimize suffering and adapt to changing contexts

02

High-risk groups:
focus on vulnerable child and adolescent populations

03

Efficient resource use:
balance the desire for more services with the need to reach more people within available resources

04

RMNCAH/CAH working group's role:
assist the lead health agency in prioritizing services

Key actions – prioritization (1/2)



Coordinated prioritization

- The health cluster lead coordinates the systematic prioritization of health services and activities
- Advocacy by the RMNCAH/CAH working group for newborn, children and adolescent health



Data review and prioritization

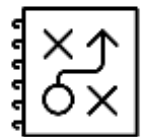
- RMNCAH working group review assessment findings, morbidity and mortality data, and service availability



Prioritize

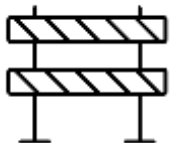
- The most likely and largest causes of excess morbidity and mortality
- Population groups most affected
- Most effective interventions in reducing morbidity and mortality
- The most feasible interventions

Key actions – prioritization (2/2)



Inclusive assessment and strategy development

Assess needs and capacities in hard-to-reach areas and at-risk groups, and develop strategies to include them in the humanitarian response



Access barriers identification and solutions

Identify barriers hindering access to prioritized CAH services, and seek practical solutions to overcome those



Adaptive prioritization

Revisit the prioritization as the response evolved to address changing needs

Key indicator – prioritization



The RMNCAH/CAH working group and health cluster lead have produced a **document explaining the identified CAH priorities, and disseminate it to health actors**

Resources – Assess and prioritize

- Guideline. Coordinated assessments in humanitarian crises. Geneva: Inter-Agency Standing Committee; 2012 (https://interagencystandingcommittee.org/system/files/legacy_files/operational_guidance_for_coordinated_assessments_in_humanitarian_crisis.pdf).
- World Health Organization. Health cluster guide: a practical handbook. Geneva: World Health Organization; 2020. (<https://healthcluster.who.int/publications/i/item/9789240004726>).

Tools – Assess and prioritize

1. **Health Cluster Tools:** Utilize global health cluster tools, including [HeRAMS](#), the initial rapid assessment toolkit, and the [UNHCR health information system](#).
2. **Multi-Sector Rapid Assessment:** Refer to the [Multi-Cluster/Sector Initial Rapid Needs Assessment \(MIRA\)](#).
3. **Cluster Surveys:** Access [Multi-Indicator Cluster Surveys \(MICS\)](#) by UNICEF.
4. **Public Health Risk Assessment:** Use the [Rapid Risk Assessment of Acute Public Health Events](#) by the World Health Organization.
5. **Resource Availability Monitoring:** Explore the [Health Resources Availability Monitoring System \(HeRAMS\)](#).
6. **Risk Assessment Toolkit:** Consider the [Strategic Tool for Assessing Risk](#).
7. **Information Coordination:** Employ the [3W/4W/5W system](#) for coordinating information.
8. **Health Service Assessment:** Utilize the [Service Availability and Readiness Assessment \(SARA\)](#).
9. **Child Protection Assessment:** Access the [Child Protection Rapid Assessment Toolkit](#).
10. **Health Information System:** Implement the [District Health Information Software \(DHIS2\)](#).
11. **Disease Outbreak Detection:** Use the [EWARS system](#) for detecting disease outbreaks.
12. **HIS Toolkit:** Find guidance in the [Health Information System \(HIS\) Toolkit](#) by UNHCR.
13. **SMART Methodology:** Refer to the [SMART Methodology Manual 2.0](#) for standardized monitoring and assessment.
14. **Newborn Health Field Guide:** Access the [Newborn Health in Humanitarian Settings Field Guide](#) for newborn assessment tools.

Thank you

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