# Evaluating and improving child-friendly spaces in emergencies

Child-friendly spaces (CFS) provide psychosocial support to children in emergencies, but little research has been available to support the value of their use. This study 'Evaluating the longer-term mental health, developmental and systems impact of child friendly spaces in humanitarian emergencies', conducted between 2014 and 2016 by World Vision International (WVI), Columbia University and other partner organisations, sought to provide the first robust evidence on the impact of CFS.

The study findings led to a substantive and important change to the 2019 update of the Child Protection Minimum Standards, a key guiding resource for international humanitarian actors. Knowledge and understanding increased within the humanitarian community, which in turn has led to more demand for further research and evidence into CFS. Collaboration between researchers and humanitarian practitioners has been strengthened, and contributions from the study have also improved the CFS evaluation practices of partner agencies. The project led to a follow-on study, also funded by R2HC, and continues to inform the approach to child protection at WVI.

Title: Evaluating the Longer-Term Mental Health, Developmental and Systems Impact of Child Friendly Spaces in Humanitarian Emergencies

Location: Jordan, Nepal and Uganda

Study type: Mixed methods: longitudinal impact evaluation

#### **IMPACTS**

- Substantive and important change to the Child Protection Minimum Standards, reflecting shift towards needs-focused approach to CFS
- Humanitarian actors have used the study findings to improve delivery and strength child protection
- Contributed to improvements in monitoring and evaluation practices by providing new tools

#### RESEARCH IMPACT LEARNING

- The value of core team members having skills and competencies in both research and humanitarian policy and practice
- Taking research agendas co-owned by humanitarian stakeholders into account during study design increases relevance of findings



### BACKGROUND



CFS are a widely used approach to providing psychosocial support to children in emergencies. However, little evidence documents their impacts on those who have benefited from the intervention. Recognising this, the Child Protection Working Group of the Global Protection Cluster and the Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support in Emergency Settings identified research of CFS as a high priority.

In Uganda, a rural Congolese refugee settlement camp offered robust existing data on CFS. In Jordan, a 'non-camp' refugee setting offered novel urban data and upcoming availability of data, and Nepal provided a rapid-onset natural disaster scenario (ie, working with people affected by an earthquake). These locations presented a variety of contexts to be studied, each with existing strong links to WVI and Save the Children teams to facilitate engagement. An update to the Child Protection Minimum Standards due in 2019 offered a timely opportunity to use the study to create influence.

# THE STUDY



WVI initially set out to investigate CFS in 2012, and this study was a follow-up to that initial work. Starting in 2014, it examined the short- and longer-term impacts of CFS to inform the work of key child protection actors, including WVI, UNICEF and Save the Children.

Over 1,000 children and 1,200 caregivers across 23 CFS in Uganda, Jordan and Nepal participated in the research. They were first assessed before any CFS intervention, and then after three months of the intervention. A third follow-up assessment was completed 12–15 months later, when CFS activities had stopped. Researchers sought to collect information from the same children and caregivers at all three time-points (whether or not the children had been attending CFS). Measurements were taken in three key areas – wellbeing, development and protection – by surveying households in the target communities using cluster randomized sampling.

Qualitative data from children, caregivers and community leaders was also collected to identify child protection concerns, referral networks and community activities related to the support and protection of children. The same methodology was adopted across the three sites to develop a robust evidence base on effectiveness that could inform global policy and practice.



# **FINDINGS**



The study found major differences in the short- and longer-term impacts of CFS across the participants and locations.

In the short term, it found that CFS had a positive impact on the psychosocial wellbeing of younger children, but little evidence was found of this impact in older children. The quality of CFS implementation also varied across sites, with high quality implementation crucial for the intervention to have the intended impact.

In the longer term, the benefits seen initially dissipated as other children 'caught up' with those who had received the intervention. In all locations, protection concerns and mental health symptoms improved over time – but these changes were seen irrespective of whether the participant had actually attended CFS or not.

# COMMUNICATIONS AND ENGAGEMENT



Existing relationships with the intended research users and research collaborations between WVI and Columbia University were crucial to facilitate engagement of stakeholders with research results during and after the study. Involvement with the Alliance for Child Protection helped to raise awareness of the study and expectations around the findings. A research workshop was held with key agencies before the study to define the research objectives and methodological approach, and regular and consistent updates were shared with them.

Communication materials such as webinars, technical reports, infographics and videos communicated the key findings with humanitarian audiences, with an emphasis on developing engaging, visually appealing outputs tailored to the needs and priorities of humanitarian programmes, technical, and policy staff. Many presentations were led by WVI, the humanitarian partner, taking advantage of their positioning with these audiences. Overall, more than 14 conference presentations or webinars across academic and humanitarian sectors were delivered, including to the Inter-Agency Standing Committee Reference Group on Mental Health and Psychosocial Support and at the annual meeting of the Alliance for Child Protection in Humanitarian Action. Specific country-focused outputs included written evaluations for Jordan and Uganda, and a video for Nepal. Three peer-reviewed articles were also published, in *The Journal of Child Psychology and Psychiatry, BioMed Central Public Health* and *Journal of Global Health Reports*.



# UPTAKE AND IMPACT



The findings from the study led to a substantive and important change to the Child Protection Minimum Standards, updated in 2019. As a key guiding resource for humanitarian actors worldwide, this will potentially have translated into positive impacts on the many thousands of children and young people reached by CFS interventions each year. However, given that the study found that CFS are not always implemented in line with established quality standards, monitoring and evaluation of interventions remains crucial.

Humanitarian actors have used the study findings in a number of ways. WVI and the International Federation of the Red Cross (IFRC) subsequently improved their joint delivery of CFS, as reflected in their CFS toolkit, cited in the aforementioned 2019 updated standards, and which is hosted in WVI, IFRC and the Save the Children knowledge libraries. The results continue to inform WVI's technical guidance for child protection in emergencies. Collaboration around child protection has been strengthened, and a multi-agency collaboration including UNICEF, Save the Children, Mercy Corps and AVSI has evolved to provide guidance and support on CFS implementation for the humanitarian community.

"The research was very influential. Everyone was aware of it. I know that organisations like Save the Children, and IRC were paying very close attention to how the evaluation turned out." – Key Informant Interview, Alliance for Child Protection

Shifts in knowledge and understanding were reported, in particular the importance of a locally tailored approach with robust attention to monitoring and evaluation. It is now also understood that CFS must be needs-focused, ie, delivered only when appropriate in response to needs, rather than 'defaulting' to it. The study, and a subsequent trial, have continued to inform WVI's development of operational guidance on CFS, contributing to an approach that seeks to utilise CFS where it can be most impactful, whilst also drawing on a wider toolbox of interventions in humanitarian settings where CFS may be less appropriate.

"The research has contributed to internal discussions around appropriate use of Child Friendly Spaces and programming beyond CFS to address more complex child protection issues in humanitarian settings, avoiding as much as possible a one-size-fits-all solution, and promoting more integrated approaches to achieve holistic outcomes."

- Marco Grazia, WVI Global Director, Child Protection & Education in Emergencies



# **UPTAKE AND IMPACT**



Increased demand for, and value of, research and evidence were also seen among the humanitarian agencies involved in the study. The findings contributed to improvements in evaluation practices – the methodological design used in the study was used in other WVI evaluations of CFS, contributing further evidence to the effort to better understand how CFS improves outcomes for children. Monitoring and evaluation tools produced during the study are available for practitioners as part of the aforementioned toolkit.

"Participating in this study gave us a richer understanding of the positive impact and challenges in our work for and with children, and hopefully helps the whole sector advance."— Maike Röttger, National Director of Plan International Germany [from a speech at the launch of the Alliance for Child Protection in Humanitarian Action]





# RESEARCH IMPACT LEARNING



#### INDIVIDUAL SKILLS AND COMPETENCIES

The study team comprised co-Principal Investigators who both had expertise and first-hand experience of research as well as humanitarian policy and programmes. This ensured that the research design and outputs were both high quality from a research perspective and informed by the reality of humanitarian implementation.

# THE VALUE OF LONG-TERM RESEARCH AGENDAS CO-OWNED BY HUMANITARIAN STAKEHOLDERS

The increased awareness and strengthened partnerships emerging from the study may have contributed to an ongoing research agenda around child protection in emergencies supported by the interagency group — including an ongoing follow-up randomised control trial on CFS, funded by R2HC. This has further added to the evidence-base and supported dialogue with key humanitarian stakeholders, such as the Protection Cluster.

#### **PARTNERS**

World Vision International; Columbia University; Columbia University Middle East Research Center (CUMERC); Save the Children; Makerere University; UNICEF; Plan International

#### **ABOUT ELRHA**

Elrha is a global organisation that finds solutions to complex humanitarian problems through research and innovation. This study was funded by Elrha's Research for Health in Humanitarian Crises (R2HC) Programme which aims to improve health outcomes by strengthening the evidence base for public health interventions in humanitarian crises.

R2HC is funded by the UK Foreign Commonwealth and Development Office (FCDO), Wellcome, and the Department of Health and Social Care (DHSC) through the National Institute of Health Research (NIHR).

R2HC captures detailed case studies through a process that triangulates and validates evidence on uptake and impact. The case study methodology and full version of this summary case study including references are available on request.



Research for health in humanitarian crises





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