The Long-Term Effect of Humanitarian Emergencies on Adolescents: Existing evidence, gaps and considerations for research and practitioners

Cirenia Chávez, José Cuesta, Michelle Godwin and Jeremy Shusterman

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THE LONG-TERM EFFECT OF HUMANITARIAN EMERGENCIES ON ADOLESCENTS: EXISTING EVIDENCE, GAPS AND CONSIDERATIONS FOR RESEARCH AND PRACTITIONERS

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ABSTRACT

This short paper grew out of discussions at a two-day research workshop focused on famines and adolescents. It explores some of what we do and do not know about the impacts of humanitarian situations on adolescents’ lives. Adolescents and their specific capacities and vulnerabilities have tended to be overlooked in the design and implementation of humanitarian responses, including in social protection and further components of such responses. This paper seeks to bring these questions to the attention of researchers, policy makers and practitioners in order to address identified priority gaps; build on existing knowledge; invest in better evidence generation; and include adolescents in research and response efforts in meaningful ways. Such improvements to humanitarian responses would assist in developing more inclusive efforts that consider all ages in the child’s life-course; aim for more sustainable well-being outcomes and help meet core commitments to children in these settings.

KEYWORDS

Adolescents; Humanitarian Emergencies; Evidence and Gaps; Famine.

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1. HUMANITARIAN EMERGENCIES ALSO AFFECT ADOLESCENTS

The humanitarian system is still struggling to keep pace with the increasing frequency and complexity of humanitarian crises (Bennett, 2016). Part of this complexity arises from serious disruption to basic services and often includes issues of access to adequate food. In 2017, an estimated six million people in South Sudan – more than half of the population – were food insecure. Several countries in the Greater Horn of Africa also currently face a grave food security situation (WHO, 2018). In the refugee influx experienced in Cox’s Bazar, Bangladesh, more than 850,000 people were provided with emergency food assistance in April 2018 alone (FS Cluster, 2018). The now seven-year devastating war in Syria has killed 250,000 (UCDP, 2017) and is disproportionately affecting children, with 13 to 17-year-old adolescent boys considered to be the group most at risk (Salama and Dardagan, 2013). Such complex emergencies constitute extreme shocks that can have dire consequences on well-being both immediately and in the longer term.

Considering humanitarian emergencies broadly – including but not limited to situations of famine, armed conflict, and natural disasters – this paper explores some of the impacts of humanitarian situations on adolescents’ lives. For example, famines, like other crises, are not one-dimensional nor do they occur in isolation: they are typically intertwined with intense social upheaval or a total collapse of the social contract (Sen, 1981; de Waal, 2005). With over 1.2 billion adolescents in the world and the far-reaching impacts of protracted crises disrupting the childhoods of millions (UNICEF, forthcoming), this paper is one contribution to the important conversation about the effects of humanitarian crises on this age group.

As such, we have three main objectives:

1) to discuss the existing evidence base on the effects of humanitarian emergencies on adolescents (what we know);
2) to point toward the main knowledge gaps (what we do not know and why); and
3) to lay out the possible ways forward to build an evidence base that will be useful for further research and programming on this issue.

2. FRAMING THE EFFECTS OF EMERGENCIES ON ADOLESCENTS IS CRUCIAL FOR EFFECTIVE PROGRAMMING

Conceptually, we frame humanitarian emergencies and adolescence as part of the UNICEF life cycle approach to understand, protect and foster children’s well-being. First, emergencies constitute extreme shocks that have dire consequences on well-being both in the short and long run. Furthermore, adolescence constitutes a period in life where individuals have specific vulnerabilities and risks. The intersection of extreme shocks and specific vulnerabilities during this stage is an

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1 Data from UCDP, Armed Conflict Dataset and Battle-Related Death Data Sets indicates that, in the period from 2010 to 2016, 250,120 individuals have died in Syria, considering both low and high intensity conflicts, as defined by Uppsala (UCDP, 2017).

2 Emergencies have technical definitions and classifications – The Inter-Agency Standing Committee (IASC), the primary mechanism for inter-agency coordination of humanitarian assistance at the international level, provides guidance here. Berman et al (2014: p.2) provide this useful broad summary: “Humanitarian crisis or emergency refers to an event or a series of events in a country or region that causes serious disruption to the functioning of a society, resulting in human, material, or environmental losses which exceed the ability of the affected people to cope using their own resources. A crisis may be further classified according to its speed of onset (sudden or slow), its length (acute or protracted) or cause (natural or man-made hazard or armed conflict or a complex mixture)” (IASC, 2015 in Berman et al, 2014: p.5).
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area of special interest that experts note has often been ignored. Adolescence constitutes a critical period of cognitive, emotional, physical and sexual development, when individuals have specific vulnerabilities and risks (UNICEF Office of Research – Innocenti, 2017; Banati and Lansford, 2018). These risks are amplified in crises settings.

Second, we also frame this issue as an evidence gap in terms of impacts that are or can be age and gender-specific but for which we have no significant indications. Closing such evidence gaps will help identify the most appropriate interventions against unfolding humanitarian crises and their aftermaths. Failing to do so ignores specific vulnerabilities of adolescents and makes it more difficult to: (i) achieve sustainable progress in well-being globally; (ii) narrow inequalities; and (iii) guarantee human rights to everyone. Children’s rights constitute a third pillar of our basic conceptual approach to discussing adolescence and humanitarian emergencies. Although the UN Convention on the Rights of the Child (CRC) and its recent General Comment No. 20 on Adolescence (2016) lay out special provisions for protecting and empowering adolescents in crisis and conflict (paragraphs 83–84), the activities supporting this group may not be delivering the intended results in emergencies. In part, this is because interventions have largely overlooked adolescents as a specific target group with their own vulnerabilities.

This programming oversight has been raised before. Salama and Collins (2000) argued that the response to the 1998 South Sudan famine failed to provide aid to adolescents due to inadequate scientific literature on the diagnosis and treatment of malnourished adolescents and adults, a prevailing bias in the nutritional epidemiology research – which focuses on the under-five age group – and the inexperience of the international community in implementing adolescent and adult feeding programmes. Despite such cautions and the renewed focus on normative frameworks, we have not advanced far in understanding the impact of famines, and humanitarian emergencies more generally, on older children (see Box 1: Famine and Adolescents Workshop, a convening activity during which a group of experts highlighted some of the most relevant evidence gaps).

A lot is at stake due to this oversight. Adolescents can be particularly susceptible to certain threats and risks that create specific needs, particularly in emergencies, where the instability in adolescents’ lives can be further exacerbated (Plan International, 2016: p.27). A growing body of evidence increasingly shows that cognitive development and sensitivities related to social and emotional well-being are important during the second decade. In general, around half of all mental health disorders in adulthood start by age 14 (WHO, 2016). Physically, adolescence also constitutes a second window of opportunity to address stunting after which there is limited chance for catch-up growth (Prentice et al., 2013).

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3 See Box 1 and the Outcome Report from the Famine and Adolescents Workshop Florence, Italy, 26–27 October 2017, Hosted by UNICEF Office of Research – Innocenti and Supported by CIFAR

Box 1: Famine and Adolescents Workshop

In October 2017, the UNICEF Office of Research – Innocenti, with support from the Canadian Institute for Advanced Research (CIFAR), hosted a workshop on famine and adolescents in Florence, Italy. The workshop brought together experts from academic and policy circles, as well as programme staff from UNICEF, to share existing evidence, knowledge and increase common understanding of how humanitarian crises impact the adolescent population vis-à-vis other population groups. Participants agreed that while there is some evidence of more adverse impacts of emergencies on this population group, it is neither abundant nor conclusive. A wider evidence base to allow assessment of impacts of humanitarian emergencies disaggregated by age groups is still largely lacking. Read more here.

3. WHAT DO WE KNOW?

Research is demonstrating that adolescence constitutes a ‘second window of opportunity’ for improving the life chances of young people and mitigating the impact of deleterious life circumstances in early childhood (Banati and Lansford, 2018). Ample evidence from the biological and the medical literature demonstrates that it is also a period of human growth spurt (Beard and Blaser, 2002; Bogin, 1999; Lissauer and Carroll, 2018; Prentice et al., 2013; Sawyer et al., 2012; Silventoinen, 2003; Tanner, 1962). It is when 15 to 20 per cent of adult height is achieved (Campisi et al., forthcoming). Although children and young infants are at a high risk during famine and much work has been carried out with under-fives (for example, see Ampaabeng and Tan, 2013; Galler and Barrett, 2018), older children should not be overlooked (Prentice et al., 2013).

Directly, critical fat mass is necessary for the achievement of puberty among girls. For boys, there is some evidence that attainment of a certain height is permissive to puberty. Undernutrition is believed to affect the puberty tempo: children who undergo puberty later will go through this period quicker, which then shortens the amount of time that they have to gain some height (Campisi et al., 2018).

The potential consequences of exposure to famine during adolescence are shorter stature, delayed puberty and altered height potential (Campisi et al., forthcoming). In addition, there is evidence of impacts on cardiovascular health in adult life (van Abeleen et al., 2012) infancy, or childhood is associated with an increased risk of cardiovascular disease in adulthood. As data on postnatal developmental programming are scarce, we investigated whether exposure to undernutrition during childhood, adolescence, or young adulthood is related to coronary heart disease (CHD), higher prevalence estimates of diabetes (Wang et al., 2017), and a higher propensity for cancer (Campisi et al., 2018).

While this evidence sheds some light on the impact of famine on adolescents, we cannot conclusively

5 Van Abeleen et al. (2012) infancy, or childhood is associated with an increased risk of cardiovascular disease in adulthood. As data on postnatal developmental programming are scarce, we investigated whether exposure to undernutrition during childhood, adolescence, or young adulthood is related to coronary heart disease (CHD) found that amongst those who experienced the Dutch famine (1944–1945) at ages between 10 and 17, cardiovascular disease risk was significantly higher amongst those who had been severely exposed in comparison to those who had not.

6 This is true for those exposed to famines during adolescence but also during fetal and adulthood stages.

7 In a study looking at the whether the effects of the Chinese Great Famine (1959–1962) in three different life stages (fetal, childhood and adolescence/adulthood) was associated with the development of diabetes later in life, Wang et al. (2017) found that it was associated with significantly greater prevalence estimates of diabetes amongst the three groups, further supporting the idea that the adverse effects of famine exposure could extend beyond the first 1,000 days.
say that outcomes for adolescents exposed to famines are worse in comparison to other age groups, as there is not enough research evidence to make this claim. Yet, what we do know suggests that in specific emergency contexts – of war, for example – individuals exposed at an adolescent age are more severely impacted.8 A relevant study on the Nigerian Civil War of 1967–1970 found that women who had been exposed to the war were shorter in height, had a higher body mass index (BMI), and were more likely to be overweight (Akresh et al., 2017). These adverse effects were larger for those exposed during adolescence (ages 13 to 16) in comparison to those exposed at an earlier age.

Girls who were exposed to the war between the ages of zero and three suffered a reduction in adult height of 0.75 centimeters in comparison to unexposed girls. For girls aged 13 to 16, there was a 4.53 centimeter deficit in adult height. Regarding the effects of the 1974–1979 Cambodian and the 1994 Rwandan genocides (which in the former case also included a famine), Cuesta et al. (2017) preliminarily found differences in adult height associated with exposure to war but the evidence was neither systematic nor followed a clear pattern. In the Arab region, exploring the effect of exposure to civil war on adolescent and child health, the probability of stunting was shown to increase in high-conflict areas: the highest effects were visible for children and adolescents aged 7 to 12 in conflict areas with an intensity of 50 battle-related deaths per month (Calderon-Mejia, 2017).

In addition to the physical impacts, there are important psychological consequences that should not be divorced from the effects on growth (Horton, 2017). A handful of studies have found that not only are adolescents more likely to be the victims of war in comparison to younger children,9 they are also more likely to suffer from mental health issues as a result of exposure to armed conflict. This risk includes a higher likelihood of developing post-traumatic stress disorder and other negative psychological disorders such as depression and anxiety. These impacts may be gendered, with girls exhibiting internalizing symptoms, such as anxiety and excessive withdrawal, and boys exhibiting externalizing symptoms, such as aggressive and/or risky behaviour (see, for example, Dimitry, 2011; Dubow et al., 2010; Harel-Fisch et al., 2010).

4. WHAT DO WE NOT KNOW AND WHY?

**Distinctive impacts by gender and age.** Although exceptions exist, most research findings do not provide data disaggregated by gender and age. Disaggregated data would allow examination of the impacts for younger and older adolescents, as well a greater understanding of the specific vulnerabilities by age group. It would also help identify the markers, triggers and tipping points and the investments needed to improve intervention impact. To unpack these differences, it is necessary to look not only at distinctive direct impacts of humanitarian emergencies, but also, for example, how these emergencies affect social norms in general as well as gender roles both within the household and within the community. The link between food insecurity and gender-based violence is established and practitioners have long called for making adolescent girls more visible in assessments to better target life-saving responses (Humanitarian Practice Network, 2014).

**Adolescents’ coping strategies and empowerment in periods of crises.** Most of the limited research available has focused on exploring the negative mental and physical health impacts, neglecting

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9 Available data on the Syrian war from the beginning of the war to 2013 indicated that the number of adolescents aged 13 to 17 that had been killed was disproportionately higher in comparison to the proportion of children aged three to seven, with the former constituting 37.4 per cent of victims, while the latter constituted 20.4 per cent of victims (Salama and Dardagan, 2013).
consideration of resilience, capacities and positive engagement in these challenging settings.
According to Barber (2008), despite the expectation and reality that exposure to armed conflict will have negative effects, many young people also develop positive coping strategies in the face of adversity. Some studies have found that youth exposed to political violence can extend capacities to effectively develop flexible responses, including self-determination and tolerance as well as maintaining educational aspirations and continued moral development (Barber, 2009).

Such skill development has important implications for programming, which should build on adolescents’ rights to active participation in processes of reconstruction or rebuilding throughout and in the aftermath of emergencies. However, it is often the case that their “right to protection, and [realizing] their potential role in supporting communities and helping to mitigate risk” (CRC, 2016) is difficult to achieve. Trauma faced by adolescents exposed to emergencies also relates to their active membership in society, as they can be recast as vulnerable dependent children in order to obtain priority for aid (Tefferi, 2007). While young people are expected to perform a considerable amount of productive work and take everyday life decisions, they are often constricted in humanitarian agencies’ response frameworks and are required to sit in make-shift classrooms or ‘child-friendly spaces’, which usually target younger children. Denying their involvement in activities that their communities consider respectable in order to access assistance can be a source of acute frustration for adolescents and youth and can risk contributing to feelings of powerlessness (Tefferi, 2007).

Striking a better balance between adolescent protection and empowerment is necessary in crisis response and reconstruction plans. This balance requires active consultation and systematic, meaningful involvement in development processes. Adolescents’ achievements against the odds in contexts of response and recovery programmes provide some lessons. In Nigeria, for example, the outcomes of a universal primary education programme (UPE) implemented after the end of the civil war illustrated how an intervention following a negative shock (war, in this case) could partially offset its impacts: The UPE programme was found to mitigate the effects of war exposure on education by almost 70 per cent (Akresh et al., 2017). Similar positive results in terms of educational attainment have been found in large-scale education programmes following periods of crisis in Indonesia (Duflo, 2001), Benin (Wantchekon et al., 2015) and Vietnam (Dang, Hoang and Nguyen, 2018).

Underlying mechanisms and interactions operating in complex crises. Research designs that draw on quantitative methods and limited data are unable to account and control for the multitude of (physical, emotional and social) effects of emergencies on adolescents. Qualitative studies typically lack sufficient validity for representative results beyond their specific contexts. Mixed method designs seem necessary to disentangle mechanisms in order to explain causality and counter-intuitive findings and these require more careful consideration. Particularly important to understand are the effects of exposure to multiple and varied shocks over time, that is, the cumulative effects on adolescents’ well-being of the myriad of shocks and crises characterizing famines and the distinctive effects of ‘human-made’ versus natural shocks and crises. While some work has been carried out in the context of crises with regards to protection mechanisms to soften impacts (see Doocy and Tappis (2016) for a review of cash-based interventions in humanitarian contexts), much less has been done on protective mechanisms to support adolescent well-being outcomes (see Asghar, Rubenstein and Stark (2017) for interventions to prevent violence against children and women in humanitarian contexts).

Lack of specialized data sources. Gathering information in emergency contexts generally involves significant logistic and ethical challenges. Most data collection instruments, for example, have
relied on existing surveys (DHS and MICS) and most research produced to assess the impact of emergencies has been quantitative in nature. One of the problems with existing data sets is that they do not address the research questions that should be asked in emergency contexts – such as exact location during the emergency or specific consequences of their exposure – largely because they were designed independently without a deliberate specialization for these settings. Instruments such as longitudinal data are useful and have been deployed to address questions on the long-term impact of crises (for example, Dercon’s (2004) research on large-scale famines in rural Ethiopia in the 1980s), but they usually do not contain data specifically customized to humanitarian emergencies. In addition, the situational volatility means attrition in these contexts can be higher than is usually observed in such longitudinal studies.

5. MOVING FORWARD – CLOSING THE GAPS

UNICEF is uniquely placed to address evidence gaps in such settings, given its global presence and its research and operational capabilities. In fact, UNICEF is leading some of the most innovative evidence generation and dissemination and is convening efforts globally, including investing in: (a) improving data collection in humanitarian contexts to better understand distinctive impacts (e.g., new post-emergency module in the new MICS round; rapid mobile phone-based surveys that can be mobilized immediately after shocks); (b) extending rigorous evidence on cash-based interventions in humanitarian settings (e.g., evaluation of Lebanon’s 2016–2017 No Lost Generation pilot cash transfer to increase Syrian refugee children’s schooling; the analysis of long-term effects of genocides on adolescents’ well-being); and (c) convening international and national partners on bridging the humanitarian–development divide (e.g., gathering of experts at the conference in 2017 on Social Protection in Contexts of Fragility and Forced Displacement).

UNICEF Office of Research – Innocenti is working to actively address knowledge gaps and, ultimately, contribute to the design of interventions that improve the well-being of children and adolescents exposed to emergencies (see Box 2). A few priorities in Innocenti’s forward-looking agenda on adolescents in emergencies are:

1) Address research–programming divides. We need to continue to provide more opportunities to convene and learn from joint work that researchers and practitioners do in humanitarian contexts. While there might be a widespread perception that researchers and policymakers approach evidence generation and use it in different ways and over different timescales (Fast, 2017), there are examples of a successful and symbiotic research–programmatic continuum in these complex settings. One example is the innovative evaluation of Lebanon’s 2016–2017 No Lost Generation pilot cash transfer (de Hoop et al., forthcoming) that brought together operational and research colleagues at UNICEF Lebanon alongside government and other international community partners. This convening work needs further strengthening to ensure that all types of actors are brought together to: discuss the state of the evidence on the impact of humanitarian emergencies on adolescents; identify successful stories of research–programming cooperation; and, lay out possible directions for future work. Further efforts of this nature should continue to be pursued to overcome the theory–practice divide that separates those working on conflict and

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10 For considerations of how UNICEF seeks to learn from emergency practitioners, see Shusterman (2018).

11 This quasi-experimental evaluation examines the intervention in question using an innovative geo-referenced regression discontinuity design comparing children living along the geographical border separating areas participating in a pilot cash transfer programme from those that do not. For more information see: de Hoop, Morey, and Seidenfeld (Forthcoming).
2) **Address data gaps and needs.** It is necessary to evaluate the availability and quality of data, and to explore whether current data allows the evidence base on the impact on adolescents to be expanded. One avenue to improve data collection is building on the processes and innovative approaches operational agencies have set up to collect and triangulate data on programme results in hard-to-reach, insecure and volatile environments. This can be done, for example, through partnerships for third party monitoring or real-time monitoring mechanisms such as SMART surveys for nutrition – currently only used for children under five – in acute crises such as those in Syria and Yemen.

A further possibility could be to foster a closer collaboration with teams conducting systematic *needs assessment* designed to inform programme response, which could be expanded with additional questions to advance knowledge on adolescent impacts. A more ambitious goal is to collect further data on adolescents in household surveys for tailored research that will inform targeted programmatic interventions. This can be done by expanding existing instruments to include an *adolescent-specific module* (in DHS and/or MICS) that evaluates the impact of emergencies. Expanding research synthesis exercises, systematic reviews and evidence gap maps to include more grey literature complementing (quasi-)experimental studies may also contribute to better understanding of evidence gaps.

While UNICEF is investing in improving data collection in humanitarian contexts to better understand distinctive impacts, more work is needed in piloting dedicated data collection instruments that capture long-term effects of humanitarian crises on the well-being of children and adolescents. All further work should address questions about the timing of data collection and ethical issues (more below) while at the same time acknowledging that in the most heightened, insecure and acute crisis settings, some collection and data limitation obstacles will be always difficult to fully overcome.

3) **Include adolescents’ own views.** In effect, adolescents’ own views must be incorporated into research designs throughout all stages of the research or programme cycle noted above (CRC, 2016). Continued efforts to seek opportunities to employ youth-led and participatory approaches, to collect real-time data, and to engage appropriate technology and research that work alongside operations designs can assist in this objective. There are many examples and tools for engaging such methodologies that directly and indirectly support adolescent empowerment in complex settings: for example, Ozer and Akemi Piatt (2017) emphasize that *youth-led participatory research* is an increasingly popular and appreciated approach. The research with this methodology is led by adolescents and young people themselves and is conducive to promoting social change and improving community conditions (ibid).

4) **Address ethical aspects of data collection and operations.** Data collection should aim to address research gaps, but importantly also help inform programming and successful intervention strategies. Collecting evidence during periods of intense suffering; enquiring about sensitive or traumatic events; and seeking parental consent for interviewing children are some of the many ethical issues that need to be carefully considered and addressed. Moreover, ethical issues that are present in other settings are also applicable in the context of humanitarian emergencies, including the capacity to appropriately and respectfully engage children in research according to their evolving capacities. Understanding and acknowledging power relations (between...
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researchers and children but also between groups of children themselves as well as children and adults), seeking and securing informed consent, and maintaining privacy and confidentiality, amongst others, are additional issues that should be considered when incorporating children in the research (Berman et al., 2016).

Box 2: UNICEF Office of Research – Innocenti contributions to the humanitarian agenda


Concrete examples of ongoing work include:

- A component of The Transfer Project that explores the impact of cash support to Syrian households focused on scale-ups of children’s education programmes in Lebanon and Jordan;
- Exploration of the impacts of adolescent exposure to the genocides in Rwanda and Cambodia using four rounds of DHS data spreading over 14 years;
- Deployment of on-the-ground research expertise into Level two and three emergencies in Bangladesh, the Democratic Republic of Congo, Lebanon, Turkey, South Sudan and Somalia to support country offices to identify and respond to protection risks;
- Measurement of multidimensional child poverty in a humanitarian and forced displacement context (Iraq);
- Collating what we know about ethical research involving children in humanitarian settings.

For more information on UNICEF Office of Research – Innocenti’s research agenda and partnerships in this area visit the Humanitarian Research web page: https://www.unicef-irc.org/research/humanitarian-research/ or sign up for email updates here https://www.unicef-irc.org/

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- Bina D’Costa – Research and Evaluation Specialist – Migration

12 Other evidence generation examples include: (a) the analysis of humanitarian food and cash transfer programmes in Uganda’s Karamoja region making use of data collected in a randomized controlled trial impact evaluation by IFPRI, UNICEF and WFP; (b) a journal special issue on social protection in fragile contexts and forced displacement; (c) a joint FAO-Office of Research background paper on the methodological challenges of and strategic opportunities for rigorous research on social protection programming in humanitarian settings; (d) research on ‘children on the move’ and their mobility patterns (in all sending, transit and receiving areas); (e) research on ‘under the radar’ and often invisible children (undocumented, missing, disappeared, left behind, stateless) in Bangladesh.
6. REFERENCES AND OTHER USEFUL READING


UNICEF. (forthcoming). A Young People’s Agenda.


ANNEX A: RELEVANT RESOURCES

From UNICEF Office of Research – Innocenti:

- Adolescent well-being research at UNICEF Innocenti: https://www.unicef-irc.org/research/adolescent-wellbeing/ including latest research papers, briefs and reports as well as a series of briefs on doing research with and for adolescents and a quarterly digest on the latest research on adolescent well-being in low and middle income countries, covering many domains and contexts.

- Overview of humanitarian research at UNICEF Innocenti: https://www.unicef-irc.org/research/humanitarian-research/


From UNICEF programmes, The Evaluation Office and the CRC:

- Adolescence programming guidance for UNICEF https://www.unicef.org/adolescence/


- The UNICEF Core Commitments for Children in Emergencies (CCC) http://www.unicefinemergencies.com/


From other research groups:

- School of Nutrition Science and Policy, Tufts University http://fic.tufts.edu/research/


- Gender and Adolescence: Global Evidence https://www.gage.odi.org/

From WFP:

- Emergency programming http://www1.wfp.org/emergency-programming

- Food Security Cluster http://foodsecuritycluster.net/

- Humanitarian support and services http://www1.wfp.org/humanitarian-support-and-services

- Food assistance: cash-based and in-kind: http://www1.wfp.org/food-assistance


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From FAO and WHO in emergencies:
- Food Insecurity and Famine
- Situation reports from emergency contexts including Yemen, Somalia, South Sudan, others
- “FAO and Cash+: How to maximize the impacts of cash transfers”
- “Early Action Report on Food Security and Agriculture” tool

From global protection actors:
- Global Protection Cluster: Briefing Notes on Famine and Conflict
- Care and Protection of Children - CPC Learning Network
- Child Protection in Emergencies Global Research Priorities

From global protection actors:
- Food Insecurity and Famine
- Situation reports from emergency contexts including Yemen, Somalia, South Sudan, others
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