

- *Concept Note* -

CSW61 side-event: Delivering integrated education and health services in humanitarian situations

The fourth panel of the Every Woman Every Child Everywhere series

We are faced with an unprecedented number of humanitarian crises worldwide, where women, children and adolescents are disproportionately affected. Children and adolescents are prevented from going to school, and women lack access to basic maternal health services. At the same time, failure to meet basic needs in health, education, and other essential services undermines the ability of communities to prevent, manage, and recover from disaster.

People do not experience humanitarian crises in sectoral silos. Their needs span across humanitarian and development agency mandates, programs, and disciplines. In the case of protracted crises, their needs may extend far beyond what is addressed through short-term humanitarian response. In order to ensure access to sufficient and quality services, a whole-of-person approach in emergency planning and response is paramount.

This panel – hosted by the Permanent Missions of Norway and the United Arab Emirates, in partnership with Every Woman Every Child – will examine how we can deliver integrated education and health services to women, children and adolescents affected by and at risk of humanitarian crises.

The panel will consider:

1. Barriers to the integration of health services, food security, nutrition, and relevant education for children and youth, including refugees and internally displaced persons in humanitarian situations and emergencies;
2. Gender issues related to education and health in emergencies - challenges and successful approaches; and
3. Innovative approaches to secure access to service delivery, including cross-sectoral approaches and bringing in new partners.

The panel will consider the experience of actors in providing tailored and integrated health services and education for children and adolescents in emergencies. It will look at approaches needed to

ensure the provision of relevant education, including how to bridge the gap between the humanitarian-development divide.

Additionally, the panel will consider how to address the inclusion of girls and a gender perspective, as well as the need to have cross-sectoral approaches to ensure the education, health, and well-being for children and adolescents in emergencies.

Background

Humanitarian crises and conflict disproportionately affect the life course and well-being of women, children and adolescents. In order to achieve the 2030 Agenda and ensure healthy lives and quality education for all, we need to ensure access to education and health services for women, children and adolescents in humanitarian situations.

Moreover, there is strong evidence of the importance of education and learning in supporting social change and advancing the 2030 Agenda. Education can, for example, make a critical difference to a range of health issues, including early mortality, reproductive health, spread of disease, healthy lifestyles, and well-being. Education can also contribute to safe learning environments, protect children and girls from exploitation, prevent recruitment of child soldiers, increase awareness and knowledge of safe behaviors, as well as open up avenues to psychosocial support. Further, good health and nutrition from early childhood is a prerequisite to growth and development, positively influencing the educational progress of children and adolescents. A whole-of-person, holistic approach is required if we are to adequately address all the needs of this key demographic.

Yet, education is among the least financed sectors in humanitarian response. In 2015, education received less than 1.9% of humanitarian funding and only 31% of its requests for humanitarian aid were received, compared with an average of 55% across all sectors.¹

Armed conflict is one of the greatest obstacles to progress in education. In conflict-affected countries, almost 21.5 million children of primary school age and almost 15 million adolescents of lower secondary school age are out of school.² The most recent UNHCR data estimates that worldwide, 50% of primary school age refugee children are out of school and 75% of adolescent refugees at secondary education level are out of school.³ Furthermore, only 1% of refugees have access to university.⁴

These statistics worsen for girls and young women. Girls are almost two and a half times more likely to be out of school if they live in conflict-affected countries, and they are less likely to finish primary education, and transition into and complete secondary education.⁵

¹ Global Education Monitoring Report, 2016

² Ibid

³ Ibid

⁴ UNHCR

⁵ Global Education Monitoring Report, Gender Review, 2016



Permanent Mission of Norway
to the United Nations

In terms of health in its crudest terms, humanitarian situations are estimated to account for 15% to 60% of the deaths of women and children globally, despite affecting less than 3% of the population, evidencing the size of the gaps in healthcare provision during crises.

But the set of health issues facing this group of women and young people is far broader and extremely threatening to crisis prevention and recovery. In conflict settings, women, children and adolescents are at an increased risk of abuse and sexual violence and are in need of a tailored set of services, including maternal and reproductive health care. In addition, long-term trauma and stress related to violence and abuse affects the whole population.

Preventive, psychosocial interventions, post-trauma treatment, and other mental health services are sparsely provided during and after crisis, due to a lack of professional health personnel, lack of access to health services, a breakdown of local health systems, and cultural factors that may limit international health workers from providing sufficient support. 'Life saving' interventions often receive first priority for human and financial resources, in spite of evidence that mental health directly influences post-crisis development and is a priority area in several emergency guidelines. As with health services more broadly, there is a need to find innovative ways to ensure funds for mental health response in the initial phase of a crisis.

The Every Woman Every Child Everywhere panel series

This panel is the fourth in the series hosted by the UAE and Norway under Every Woman Every Child Everywhere, the multi-stakeholder movement that extends the UN Global Strategy for Women's, Children's and Adolescents' Health to humanitarian settings. This EWEC Everywhere series promotes an examination of policy, operational, and financing approaches, as well as leveraging women as first-responders and decision-makers.

The series was launched in September 2016, on the margins of Secretary-General Ban Ki-moon's and former U.S. President Barack Obama's high-level summits on refugees and migrants. In November 2016, the series evaluated urban humanitarian crises as part of Habitat III's New Urban Agenda. A roundtable on women's, children's and adolescents' health in climate-induced humanitarian settings was held in February 2017.

Panel format

The panel will begin with short opening remarks from Norway and the United Arab Emirates on the rationale and intended impact of the panel series and its specific focus on delivering integrated education and health services in humanitarian situations. It will then shift to a "Davos-style" panel discussion among humanitarian and development actors with interventions from the floor, moderated by HRH Princess Sarah Zeid, Co-chair of Every Woman Every Child Everywhere.