

## Overview

The *Global Reference Group for Children Affected by Crisis* was initially established in July 2021, as the *Global Reference Group on Children Affected by COVID-19*, to produce global estimates for the numbers of children facing pandemic-associated deaths of their parents and caregivers, and to link these estimates to a unified strategy for evidence-based action.

**Now, given the escalating *compound crises* threatening the wellbeing of children globally, the *Global Reference Group for Children Affected by Crisis* aims to link data and estimates to evidence-based action and advocacy in the following 3 areas: contagion, conflict and climate events.** These co-occurring compound crises are increasing in frequency and severity, accentuating the urgency of investing in care for disproportionately affected children and their families. Lessons from past crises warn us that children of caregivers disproportionately affected by threats due to social determinants of health will be most at-risk of adverse consequences as compound crises occur.

The urgent task of the GRG remains the same: to use data and evidence-based action to advocate for the integration of ‘care for children’ affected by crises into mainstream Emergency and Crisis Response planning and action – whether the crises are due to contagion (*pandemics, epidemics, as well as health threats such as overdose and mental health crises*), conflict, and/or climate.

The Global Reference Group consists of 16 standing members and up to 10 ad hoc members and fosters a unique collaboration between NGOs/CSOs; UN specialized agencies, including World Health Organization and World Bank; International Agencies; academics; partnerships; philanthropic organizations; media; and faith sectors, for promoting best practices ‘care for children’ affected by crisis, including in the context of compound crises. The *Global Reference Group for Children Affected by Crisis* is supported by the University of Oxford, in collaboration with World Bank, CDC, World Health Organization, USAID, Imperial College London, Harvard University, Maestral International, University College London, University of Cape Town, University of the Witwatersrand, Johannesburg, and World Without Orphans.

## Aims

*The Global Reference Group on Children Affected by Crisis: Joint Estimates and Action* aims are:

### **Raising awareness / Advocacy:**

1. To raise awareness and strengthen advocacy about the urgency of prioritizing investments during Emergency and Crisis Response to include ‘care for children’ who are disproportionately affected by adverse impacts of crisis.
2. To facilitate integration of the core principles of “care for children” affected by adverse impacts of crisis into all sectors of Emergency Response and Crisis Response, with an emphasis on a menu of discrete options that are scalable and adaptable across crisis settings.
3. To raise awareness at global, regional, national, and sub-national levels of the magnitude and consequences of crisis-linked adverse outcomes on children, including orphanhood and death of co-residing caregivers, displacement, poverty, food insecurity, violence, exploitation, adolescent pregnancy, child marriage, sexual and reproductive health problems, family separation, loss of education, and health and mental health threats -- and to advocate for effective response programs and policies for impacted children. These programs and policies include: 1) for children in need of alternative family-based care: preparing kinship, foster, or adoptive care and ensuring every effort is made to avoid residential care for children; and 2) for both children living with their families and those in alternative family-based care: supporting ‘cash + care’ programs to build resilience and recovery; 3) for all children affected by crises: linking children and their families to contextualized health services and mental health and psychosocial support.

### **Collective Evidence-Based Action:**

1. To commit to collaboration amongst agencies and diverse stakeholders (such as governments, communities, donors, international agencies, the private sector, civil society and faith-based actors and sectors) for immediate, short-term, and long-term “care for children” affected by the adverse impacts of crisis into standard Emergency and Crisis Responses, with an intentional focus on those children whose parents and caregivers are compromised by pre-crisis threats, such as social and economic vulnerability, substance abuse, or mental illness.
2. To focus in a collaborative and coordinated way on these key questions for every major crisis that occurs:
  - What are the numbers and locations of children affected?
  - What are ages, types of vulnerability and trends over time?
  - What are the risks for these children and their families?
  - How to flag vulnerable children and their families for services?
  - What is the minimum package of care for children and their families?
  - Delivery mechanisms: What is deliverable, scalable, affordable around crises?
  - What is our advocacy and communications strategy to raise the profile on these issues?
  - What are sources of funds, political buy-in, and platforms to be leveraged?
3. To support interagency and multi-stakeholder coordination and activities at global, regional national, and subnational levels.
4. To adapt existing evidence, effective models, and lessons learned through multilateral, bilateral, philanthropic and civil society organizations in caring for ‘orphaned and vulnerable children vulnerable children’ (OVC), with particular attention to children orphaned by HIV/AIDS or by COVID-

19. (For example, PEPFAR OVC programs, UNICEF, World Bank, UNAIDS, Global Fund, the Coalition of Children Affected by AIDS, FCDO), programs supported through the US Government Advancing the Protection and Care of Children in Adversity Strategy and the Vulnerable Children's account (previously known as the Displaced Children and Orphans Fund (DCOF)), International Agencies and NGOs such as World Vision, Catholic Relief Services, Islamic Relief, Lumos Foundation, Save the Children, Child Fund, VIVA, Tearfund, Faith-community partnerships, and others).
5. To encourage individual agencies to contribute to implementing the Strategy at the national-to-local level, with a focus on identifying, assessing, supporting, and providing effective and equitable services for children and families affected by adverse impacts of the crisis.
  6. To commit to supporting only those programs, policies, and practices that are open-source (made freely available to download and adapt) and non-commercial.
  7. To share experiences of lessons learned through strategy implementation among Emergency and Crisis Response actors, with a focus on the national-to-local levels.
  8. To interface with the UN Cluster System to include Caring for Children affected by emergencies and crisis-associated impacts, including death of parents and caregivers, displacement, poverty, food insecurity, violence, loss of education, family separation, child marriage, sexual and reproductive health problems, adolescent pregnancy, health and mental health problems, into policies, tools, capacity building, monitoring and evaluation, and planning processes.

#### **Data: Monitoring and Evaluation**

9. To promote, identify, and support innovative and effective methods, at national and global levels, for identification, monitoring, and evaluation of children and families affected by crisis, and by adverse impacts of crisis, as an integral part of Emergency and Crisis Response – including providing estimates of total children and families affected, identification of families most affected, and estimates of families served through programs and policies.
10. To generate, collect, and share new evidence on: a) effective, equitable, and inclusive approaches to identifying and caring for children in need of emergency or long-term alternative family care (kinship/fostering/adoption), b) advancing the equitable protection and care of children at risk of violence, abuse, neglect, exploitation, family separation, extreme poverty, and other types of social vulnerability, and c) strengthening health and mental health services for affected children and their families.
11. For the Expert Reference Group for Estimates, in collaboration with the Expert Reference Group for Evidence-based Action (see membership section below), to support, adapt, modify (in response to new data on female fertility, male fertility, excess deaths, and other key indicators), and adapt or develop 'ourworldindata' Imperial Interactive Crisis-linked Global, Regional, and/or Country Calculators, when relevant and feasible, as was done with COVID-19 through December 2022, for estimates of real-time numbers of children affected by death of parents and caregivers.

#### **Capacity Building**

12. To develop relevant tools linked to implementing evidence-based and best practice policies and programs at national-to-local levels, with a focus on CASH + CARE programming options, as outlined for children affected by the pandemic, since these can be adapted across emerging crises. These best practices and policies are outlined in the 'Strategy for Caring Action,' in Children The Hidden Pandemic <https://stacks.cdc.gov/view/cdc/108199>

13. To facilitate language translations, printing, webinars, and virtual and digital dissemination of crisis-linked Tools, such as Policy Briefs, -open-source peer-reviewed publications, Calculators, Reports, and linked evidence-based programming.
14. To promote and support ongoing capacity development across global regions, to enable effective use of the Strategy and related tools.
15. To provide support to country leaders trailblazing anticipatory planning that includes “care for children” affected by adverse impacts of crisis into national Emergency Response and Crisis Response.

## Membership

*Global Reference Group on Children Affected by Crisis* membership includes the following:

- Expert Reference Group for Estimates: Representatives who are recognized global experts in crisis-associated modeling, including Crisis-associated modeling, complex methods for estimating the numbers of children affected by death of parents and caregivers, and other adverse impact of crisis, as well as associated analytics, visualizations, and informatics engineering.
- Expert Reference Group for Evidence-based Action: Multilateral, bilateral, (governmental) and NGO representatives who are recognized global experts in the epidemiology, research, programming and policies that advance the care and protection of children facing adverse impacts of crises, including death of parents or caregivers, displacement, violence, abuse, poverty, food insecurity, family separation, loss of education, and health and mental health problems.
- Representation on Programs and Policies from Countries and Populations Most Affected: This subgroup is under development and will foster equity by seeking diverse membership and fostering conditions for inclusion and for identifying and addressing disparities.

## Nomenclature

*The Global Reference Group on Children Affected by Crisis* includes, but is not limited to, a focus on ‘children affected by the Crisis-associated death of parents,’ as those who have experienced “Crisis-associated orphanhood,’ in order to avoid labeling children as ‘orphans.’ We aim to facilitate linkages to previous effective models, lessons learned, and increase commitment to investments by use of the term ‘orphanhood,’ defined as the condition of having lost one or both parents. Additional adverse impacts of crisis that we prioritize are those that disproportionately affect children and adolescents, and compromise caregiver’s wellbeing. These impacts include displacement, poverty, food insecurity, violence, loss of education, family separation, child marriage, sexual and reproductive health problems, adolescent pregnancy, health and mental health problems, and institutionalization of children.