Education in Emergencies & Health Crises
Education is critical to protecting the wellbeing of all children and young people suffering from the pandemic, but the need is greatest in humanitarian settings. While use of remote-learning strategies has soared worldwide, these are often not accessible for the youngest children, girls, children with disabilities, ethnic and language minorities, and displaced children. Violence against children – including child marriage, child labour and association with armed groups – is more likely among children not attending school.

“...I would choose to go to school 1,000 times over virtual learning. You study more. Or the internet connection [at home] sometimes drops and that stops you.”

-Yvana, 15, Venezuelan adolescent girl, refugee in Peru

Although previous health emergencies such as tuberculosis, malaria, ZIKA, SARS, and HIV/AIDS impacted education systems, these emergencies have also shown that the sector can be an ally in the response. Coordination between the education sector and nutrition, as well as Health, Water, Sanitation and Hygiene (WASH), enabled, for example, the provision of critical health and hygiene information, psychosocial support, vaccinations, water and food.

Furthermore, despite its detrimental impacts, the COVID-19 pandemic has created opportunities for innovation in education. It has accelerated, for example, the development of new education technologies and skills in learners and teachers. It has offered a once-in-a-lifetime opportunity to mobilise minds and resources to co-create the long-term transformations in education needed to safeguard the right to education of every child and young person, regardless of their context and status.
What We Know

Health emergencies interrupt learning for millions of children and young people. Disruptions in learning can severely impact children and young people’s ability to learn. The longer children and young people from disadvantaged groups are out of school, the less likely they are to return. These negative impacts are more pronounced for those living in settings affected by conflict and other protracted crises, refugee and displaced children and young people, minorities, children living with disabilities, and children in institutions.

Health emergencies affect the mental health of children and young people, and their families—EiE can support their overall wellbeing.
During health emergencies, children and young people may worry about the health or economic wellbeing of their families, or feel anxious about the uncertainty of the future, experiencing mental distress. Schools may help them stay connected to friends and teachers, access basic psychosocial support and refer those who need specialised services.

EiE can support responses to health emergencies.
For example, to support health and nutrition outcomes, education actors can distribute meals or food baskets during school closures, as well as micronutrient supplements, food vouchers and cash-based transfers to families with school-aged children. They can also disseminate life-saving public health messages and training.

Inclusive, remote learning strategies have the potential to help children and young people learn during health emergencies.
The COVID-19 crisis demonstrated that innovation and transformation are also possible in education. When carefully planned, adequately resourced, and inclusively designed, digital and remote learning strategies can support learning continuity in the face of future school closures.

Urgent Actions

Keep school closures to a minimum and ensure learning continues for all.
Decision-makers must assess how learning and wellbeing can best be supported in each context, considering in particular the benefits of classroom-based instruction vis-à-vis remote learning. In any case, learning strategies, including those in humanitarian contexts, must be inclusive of all children and young people, including those with disabilities, girls, minority groups and children in rural areas.

Invest in the inclusive and holistic recovery of every child and young person.
Address both the academic and wellbeing needs of children and young people. Prepare teachers and schools to respond to MHPSS and socio-emotional needs. Ensure the provision of essential school health packages, promote catch-up vaccination plans (where applicable) and implement return-to-school strategies, especially targeting those children and young people at risk of dropping out. Prioritise child protection actions in recovery plans, including ensuring the continued functioning of child-friendly helplines.

Measure learning loss and introduce evidence-based recovery programmes.
Allocate resources to measure learning losses to identify the most affected areas and groups and to create a baseline against which recovery efforts can be measured. Incorporating this knowledge, and the lessons from the crisis, enable the design of evidence-based accelerated learning and academic remedial programmes.

Invest in digital inclusive learning strategies for all students.
This includes investing in further developing the technology, the pedagogy, and the skills of teachers and students to use digital solutions in support of learning in emergency settings. It also involves making the internet safer for children and young people, closing the digital divide between the connected and the disconnected, and increasing access to electricity, internet connectivity, affordable devices and maintenance.
Children and young people educated today might be the health workers, teachers, entrepreneurs, scientists and politicians dealing with crises tomorrow. Investing in quality and inclusive education is investing in future health emergencies' preparedness. Moreover, post-emergency developments in EiE can mitigate the impact of health emergencies on schools and learning in emergency contexts in the future.

Prepare for future health crises through crisis-sensitive planning and crisis management. Crisis-sensitive planning in education aims to strengthen education planning and delivery before, during, and after a crisis. It involves institutionalising crisis and risk management in education systems by having a policy framework, a dedicated team, and strong coordination mechanisms, including with the health sector, in place at all levels of the system.

Further Reading

Minimum Standards for Child Protection

Inter-agency Network for Education in Emergencies (INEE) and the Alliance for Child Protection in Humanitarian Action (2020)
Collaboration Across Child Protection in Humanitarian Action and Education in Emergencies

The World Bank, UNESCO and UNICEF (2021)
The State of the Global Education Crisis: A Path to Recovery

United Nations Office for Disaster Risk Reduction (UNDRR) and Global Alliance for Disaster Risk Reduction and Resilience in the Education Sector (2017)
Comprehensive School Safety

World Health Organisation (WHO) (2022)
Maintaining essential health promotion and care services

*The members of the Geneva Global Hub for Education in Emergencies contributed their knowledge and expertise to this document, which was developed in consultation with the World Health Organisation (WHO). Contact us.*
SOURCES

Additional Sources
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