



# Child Health in Emergencies and Humanitarian Settings Subgroup

## Terms of References

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[www.childhealthtaskforce.org](http://www.childhealthtaskforce.org)

### Background

Since 2016, the iCCM Task Force has been undergoing a process of reflecting on and changing its scope and terms of reference. In recognition of an evolution in global child health priorities, with a greater focus on health system strengthening and strengthening the community health platform to deliver a comprehensive package of services across the RMNCH continuum, the Task Force has expanded its scope from iCCM only to child health. This change in scope will also align with the priorities of new funding mechanisms, such as the Global Financing Facility, which emphasizes the continuum of care and development of integrated investment plans. The new Child Health Task Force will include a number of subgroups, including:

- Costing and financing
- Institutionalizing iCCM
- Strength of implementation (workforce issues, supply chain management, supervision, demand generation and social mobilization)
- M&E
- Expansion of the child health package (inclusion of ECD, TB/HIV, Newborn)
- Child health in emergencies
- Private sector involvement
- Innovations and digital health

Accordingly, a Child Health in Emergencies subgroup will be established. Within this group, there will be the opportunity to create smaller task teams around specific topics.

### Mandate

The goal of the Child Health in Emergencies subgroup will be to strengthen equitable and comprehensive child health programs – focused on children aged 0 to 18 in line with Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030) – through primary health care, inclusive of community health systems in emergencies and fragile settings. This will be achieved by providing a forum for:

- Sharing of information, evidence, and best practices
- Coordination of activities at the global level
- Advocacy
- Joint fund raising

- Achievement of additional deliverables as prioritized by the group

The subgroup will also provide an opportunity to more effectively coordinate and share information with other multi-agency coordinating bodies, such as the Global Health Cluster, the UHC2030 partnership, the Sphere Project, the CORE Group, and the Inter-Agency Working Group on Reproductive Health in Crises.

## Operating Structure and Procedures

### Leadership

The subgroup will be led by two co-chairs from two different organizations. The initial co-chair organizations will be UNICEF and Save the Children. Roles and responsibilities of subgroup co-chairs include:

- Organize and facilitate working group meetings
- Facilitate the selection of priority activities and deliverables of the working group
- Track the progress on completing deliverables
- Coordinate and track the activities of the task teams

### Members

Membership in the subgroup will be open to donors, governments, and partners at global and country levels working to strengthen equitable and comprehensive child health programs focused on children aged 0 to 18 years of age in emergency or fragile settings.

Roles and responsibilities of subgroup members include:

- Sharing of information, evidence, and best practices with the subgroup
- Define specific objectives, tasks, and deliverables for the subgroup
- Provide technical leadership and facilitate development of standards, activities, and products that will advance child health programs in emergencies and fragile settings
- Develop and disseminate tools and offer trainings to child health program managers to increase program performance and quality through analysis, reporting, and use of data
- Identify knowledge gaps and propose research to build evidence on child health programming
- Support coordination, dissemination, advocacy, and fund raising efforts of the subgroup

### Meetings

Meetings will be held on a quarterly basis. We will plan for one face-to-face meeting per year to allow for more in-depth discussion of technical issues, review of progress in the last year, and planning for the coming year.

### Task Teams

Task teams will be formed based on specific deliverables that are prioritized by the group. Task team leadership will be on a volunteer basis. Task teams will be time limited based on the achievement of deliverables.

## Expected Results (2018-2020)

1. Production of an annual subgroup work plan produced and updated which defines specific objectives, tasks and deliverables for the subgroup.
2. Quarterly teleconferences held with members.

3. Carry out evidence review, documentation of experiences, evaluations, and implementation research leading to the development and dissemination of guidance on implementation of community health interventions in humanitarian settings.