

# CHILDREN'S VOICES, CHILDREN'S RIGHTS: ONE YEAR AFTER THE NEPAL EARTHQUAKE



Owen Raggett / Plan International



# Executive Summary

Over one million children are estimated to have been affected by the earthquakes in Nepal on 25 April and 12 May 2015 which resulted in massive destruction and the death of around 8,959 people. Children, who represent 40 per cent of the population, suffered trauma and loss.

This report is based on consultations with 680 children in five of the most severely affected 14 districts, and interviews with 36 officials at central and district levels. It has the primary objective of assessing the progress made in addressing the main concerns and recommendations that children made one month after the disaster, presented in the report, *After the Earthquake: Nepal's Children Speak Out*. It also highlights the ongoing and/or new challenges that children are facing, as well as their priorities for the recovery.<sup>1</sup>

The consultations highlight the high rate of penetration of the Nepal earthquakes response (97.5 per cent of consulted children acknowledged to have benefitted from relief assistance), likely due to the 'blanket approach' adopted by the government and the humanitarian community. Despite this breadth of assistance, the overall activities for recovery and reconstruction need to be substantially accelerated. Pledges made at the June 2015 donor conference remain to be fully utilised. Restrictions in movement of materials and supplies following protests against provisions contained within the newly promulgated constitution compounded this.

The report finds that, while some progress has been made (such as access to water and sanitation in the community), children still reported the following issues:

- Not being consulted on their views by decision makers and humanitarian responders (76 per cent of children)
- Living in temporary shelter and/or damaged houses<sup>2</sup> (33 per cent of children)
- Studying in unsafe environments (30 per cent of children)
- Reductions in the number of meals regularly consumed since the earthquake (17 per cent of children)
- Studying in schools that lack access to toilets (57 per cent of children)
- Challenges in accessing medicines (30 per cent)
- Increased frequency of diarrhoea (27 per cent)
- Increased respiratory problems than before the earthquake (32 per cent)
- Overreaction to loud noises (50 per cent)
- Trouble sleeping for fear of another earthquake (23 per cent)

These findings highlight the immediate and long-term impact of the disaster on children's protection, well-being, and development. Damage and destruction of homes has resulted in many children living in cramped conditions that lack adequate space and privacy. Over 50 per cent of children share their beds with family members, and 27 per cent of children reported being uncomfortable in these conditions, which could have repercussions on children's health, development and protection. For example, the lack of space at home was often mentioned in discussions to justify the lack of confidence children have about successfully passing their exams. The lack of privacy particularly impacts women and girls, especially during menstruation.

<sup>1</sup> The consultations took place in three similar areas per district, selected for their contrasts: one semi-urban / urban (e.g. District or Municipality headquarters), one remote (inaccessible by vehicle) and one rural but accessible Village Development Committee (VDC). At least one of the VDCs in each district was the same as in the previous consultation, ensuring greater comparability between the studies. In each area two groups of children of different age groups (8-12 and 13-18 years old) disaggregated by sex were interviewed, using a mixed methodology of direct questioning, as well as child-friendly tools such as body mapping and visioning exercises and asked either direct questions, or in group.

<sup>2</sup> We asked children to describe the state of their shelter against a pre-defined list, in order to measure children's knowledge or perception of the shelter. The description of their housing is expected to differ from a structural assessment. However, these findings roughly correspond to the November 2015 estimate by the shelter cluster (Shelter Cluster, Nepal Earthquake Recovery Monitoring Assessment: Nepal 25 April/12 May Earthquakes Response, November 2015)

Following the construction of 3,576 Temporary Learning Centres (TLCs), nearly all children that we spoke with have returned back to school, although they attend less frequently now than before the earthquake. Of serious concern, however, is the high proportion of children that reported studying in unsafe environments, particularly in remote and rural areas.

This poses a serious threat to children's safety, as well as on their confidence. Children studying in safe schools feel much more confident about passing their examinations than children studying in temporary, damaged or partly damaged learning environments. Older girls experience far lower confidence in succeeding at school, compared with younger girls and boys of all ages. The earthquakes have also led to an increased labour burden on both girls and boys. These additional responsibilities, including fetching water, manual labour and household chores, are placing stress on their ability to attend school as regularly.

This situation has led to the emergence of new challenges: whereas prior to the earthquake, quality education focused on teachers' capacities, curriculum and schools materials, there is an additional need to accelerate the construction of transitional as well as permanent, earthquake-resistant, schools and ensuring a safe and supportive learning environment for all girls and boys.

In addition, children's ability to concentrate in school might be hampered by health and food security risks, as well as access to water, sanitation and hygiene (WASH) facilities in school. The lack of access to adequate WASH facilities constitutes a major barrier to effective enrolment at school, especially for girls when they start to menstruate.

Access to health follows the same pattern. The destruction of health posts, as well as the

shortage of medicines as a result of disruption of essential supplies due to border restrictions over the winter, has hampered the quality and effectiveness of health services. Children reported more health problems after the earthquake, while the psychosocial impact on the earthquakes remains prominent. Children expressed general feelings of insecurity, fear and anxiety, with a high number raising concerns related to child labour, trafficking and abuse. Children's priorities for child protection were to have a police post in every village, to be free from abuse, and to be treated equally in school, which were exactly the same as in the previous consultation.

In order to support a safer and resilient recovery and reconstruction, which needs to be accelerated, significant investment in capacity building and system strengthening is needed. Long-term funding is required to facilitate safer rehabilitation and rebuilding of damaged and destroyed schools, water and sanitation facilities, and health posts. Concerted efforts are needed to strengthen the comparatively weak child protection system, which is not prepared to protect children in future disasters. All of this necessitates a much greater focus on policy implementation, monitoring and accountability. The latter must meaningfully engage children, as well as children and their families of traditionally marginalised and excluded communities.

The full report provides detailed results of the consultations with children, as well as interviews with key stakeholders at the national, district and VDC levels. It highlights children's key concerns and priorities for the recovery. We could not do justice to all of these views in the executive summary, as they are many. However, based on the pointers from the children that were consulted, as well as our own experience as child rights organisation working in Nepal, we are making the following key recommendations that should be considered during the recovery and reconstruction process:

# Key Recommendations

- **The pace of reconstruction needs to be urgently accelerated** so that vulnerable households are able to have adequate shelter, education and healthcare facilities, with a focus on 'building back better' and strengthening resilience. It should be ensured that aid delivery is prioritised based on the levels of vulnerability and needs of the affected children and their families in line with humanitarian principles. Assistance needs to be provided in a neutral, impartial and independent manner in order to ensure the most vulnerable groups are assisted as a matter of priority.
- **Disaster risk reduction efforts should be integrated into all recovery and reconstruction programs** to build greater resilience to shocks, stresses and future crises. Child-sensitive and socially inclusive district-level disaster preparedness plans must be developed through an inclusive and participatory process, with a focus on ensuring the safety and resilience of families and communities, and ensuring that they are better prepared to cope with disasters. It should be ensured that the opportunities are used during the recovery phase to develop capacities that reduce disaster risk in the short, medium and long term, including through the development of measures such as land use planning, structural standards improvement and the sharing of expertise, knowledge, post-disaster reviews and lessons learned. This should also apply to temporary settlements for any affected communities displaced by the earthquake.
- **Children should be seen as agents of change who have clear priorities for recovery, and their views should be taken into account.** The findings of this report, as well as other consultations undertaken with children by district and local officials, should inform national and local level planning. In addition, the NRA and government line ministries should develop and/or strengthen mechanisms for seeking and acting upon input from children, women, children and vulnerable groups throughout the reconstruction process.
- **The reconstruction of permanent houses cannot wait.** In the meantime, it is imperative that families are supported to upgrade their temporary shelters to ensure that they offer an adequate, comfortable and safe space that protects children and their families from heavy wind and rain of the coming monsoon. Additional efforts are needed to **identify vulnerable and deprived households** (e.g. those without proper legal documents, including landless people) and individuals that are unable to self-recover **and provide targeted assistance to construct permanent shelters.** Attention should be paid to ensure that all shelter is accessible to people living with disabilities.
- **Reconstructing and retrofitting earthquake resistant schools should be an urgent priority.** The government and donors should promote a coordinated, **standardised national approach to school safety** and adopt and implement the internationally agreed Comprehensive School Safety Framework that addresses safe school facilities, school disaster management and risk reduction and resilience in education. In the meantime, efforts should be increased to improve the quality of temporary learning centres. At a minimum, this will mean ensuring that all TLCs provide access to clean water, handwashing facilities, and have separate toilets for girls and boys. **No child should be in a classroom before it is declared completely safe** by government appointed experts.
- Significant investment needs to be made in **strengthening the health system**, including re-building health facilities, investing in health workers, and increasing the number of health and nutrition services that are available, accessible and suitable for children and adolescent girls. Support reconstruction and the "building back better" of health facilities, as well as cold-chain infrastructure and ensure plans are in place and adequately funded to **integrate psycho-social and mental health services into primary health care** level.
- It must be ensured that girls and boys are protected from violence, abuse, exploitation and neglect by **strengthening child protection mechanisms and mainstreaming child protection and child safeguarding within all recovery and reconstruction programmes.** In particular, the national child protection system and local child protection mechanisms and structures should be prepared to respond in future emergencies and have increased awareness and capacity on psycho-social support, with adequate resources attached