



# CHILD PLAY-BASED ASSESSMENT TOOL

**Pakistan Red Crescent**

**CASE STUDY**





Photo description: Pakistan Red Crescent and IFRC volunteers and staff supporting pilot project  
Photo credit: Pakistan Red Crescent and IFRC

## Background

Sesame Workshop and IFRC have formed a strategic partnership to create content and programs focused on the safety, early education, and mental health of children aged 4-8. Recognizing gaps in understanding and assessing young children's mental health, they have developed a play-based assessment (PBA) tool for use in humanitarian and non-humanitarian situations.

In June and July 2024, the Pakistan Red Crescent Society (PRCS) tested the PBA for the first time with financial and technical support from the Canadian Red Cross (CRC) in the emergency context of two remote districts affected by the 2022 floods and one urban location in Islamabad, where the PRCS engaged with Afghan refugee children.

The team conducting the PBA comprised IFRC and PRCS professional staff experienced in flood recovery and working with children in emergencies along with experienced volunteers. In other words, they were well-capacitated and skilled in using the PBA.

A one-day detailed orientation was organized for 18 volunteers (9 men and 9 women) at three locations. The sessions covered data collection tools, warm-up activities, animal dance, and methods to engage children in the activities and roles and responsibilities for different functions of the team (e.g. facilitator and enumerators).

## Who was Supported and How

The PBA was used with children in two remote flood-affected districts, Larkana and Dadu of Sindh province, and one area of Islamabad Capital Territory (ICT). The participants were children ages 4-8 years, including both boys and girls from diverse castes, social and economic backgrounds, ethnicities, and both rural and urban areas. Caregivers/parents of the children were also interviewed following the assessment format.

The following approaches were used for this assessment:

1. For the implementation of the pilot project, PRCS coordinated with district branch management and the Youth and Volunteering department to nominate volunteers for orientation and further engagement in field activities.
2. All parents/caregivers were informed a day prior about their and their children's participation through community focal persons.
3. Premises for the assessment were agreed upon based on accessibility for children and parents, utilizing community centers and schools for interviews.
4. Considering the high temperatures (45 to 50 degrees Celsius) in these districts, proper sitting arrangements, provision of drinking water, and electricity were ensured before starting the activities.
5. Parents/caregivers were briefed about the purpose of the engagement with children, and consents and assents were collected for the assessment, interview, and photos.
6. A group of 4 children, along with one male and one female volunteer enumerator and facilitator, participated in exercises including warm-ups, feeling check-ins, puppet drawing, and animal dances.
7. At the end, enumerators and children received participation certificates and refreshments, and sessions concluded with a vote of thanks to the parents, community focal persons, and children.

## Successes

The pilot project was successfully completed within the given timelines. The online orientation provided by the Sesame and IFRC Geneva and also by PRCS staff at the national level for the local districts were very helpful in organizing all the activities in the field.

Another important step was the translation of the guidance for facilitators into the local language, which helped volunteers quickly understand the instructions.

The design of the PBA was excellent and easily manageable for the age group of 4-8 years, contributing to the success of the pilot project. All three districts where this assessment was conducted reflected the successful use of the PBA.

Teamwork in conducting the assessment was the major reason for its success. The note-taker / enumerators participating in the assessment needed to be keen observers to provide accurate scores, while the facilitator needed to have patience to help children understand the instructions. Additionally, the guidance and support from the PRCS added significant value to the successful implementation.

The warm-up activities and songs at the beginning were translated into the local languages of each region, making the children more comfortable and engaged in the PBA.

This tool was understandable to the enumerators who assessed the children and interviewed the caregivers/parents.

Additionally, the children participating in the PBA enjoyed the assessment process.



## Challenges and Difficulties

- The piloting in ICT with Afghan refugee children, took a lot of time. In ICT, PRCS had a partnership with an local, external stakeholder, PAGE organization, which works on girls' education. The involvement of a partner added value and yet also meant several additional steps and delays.
- At some stages, enumerators and facilitators felt shy while doing animal dances during orientation, and the same happened in the field. To address this, PRCS repeated the animal dances during orientation and in the field to make the enumerators and facilitators comfortable participating in the PBA.
- Despite clear communication with communities in districts Dadu and Larkana, many parents requested to involve their children in the activity, but PRCS had to refuse due to the predetermined targets already being set.
- During the puppet drawing activity, some of the children ages 4-6 years were unwilling or seemed less confident to draw anything. PRCS volunteers encouraged and helped them to draw something of their interest.

## Lessons Learned

- The different geographical settings (urban vs. rural) in Pakistan have significant discrepancies in accessing services, including schools, exposure to modern society, play, and supplies. Thus, the PBA needs to be adaptable to the local context (e.g., locally adopted songs, animals used in the tools).
- The tool must consider the varying backgrounds of children while conducting the PBA. Differences in age (e.g., 4-year-olds versus 8-year-olds) and socio-economic status (e.g., financially strong children versus those raised in poverty) should be addressed. By considering these contextual factors, the PBA tool can be better tailored to meet the unique needs of children in different environments. This customization will help ensure that the tool is relevant and effective across diverse settings, enhancing its ability to support the safety, mental health and well-being of children in emergencies.
- This tool helped understand how children's moods can be influenced by different scenarios.
- Based on the observations and experiences, facilitators and enumerators must participate in each activity themselves to make children comfortable.

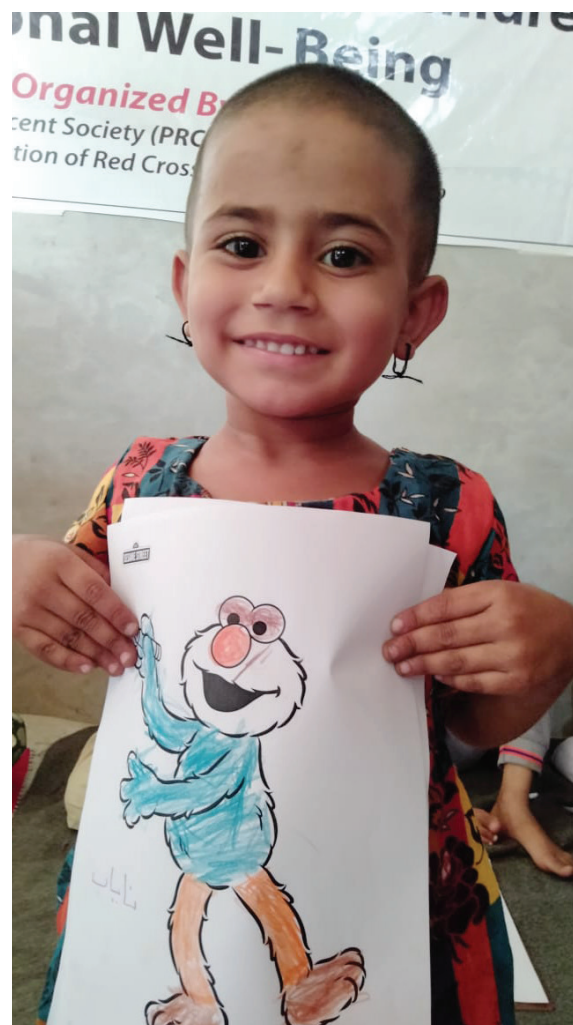


Photo description: Child participating in Pakistan Red Crescent pilot project  
Photo credit: Pakistan Red Crescent and IFRC

- Additionally, facilitators and enumerators engaged in the assessment must be well-trained before carrying out the assessment.
- Encouragement and appreciation given to children helped children open-up more and actively participate in the activities.
- In the tool, "Caregiver's Report of Child's Emotional Well-being":
  - Question number 8 should have an option for more than 8 family members.
  - Questions 18 and 19 were not clear, resulting in the same options being selected for both regarding education level.
  - Question 22: Instead of "clean drinking water," the proper term should be "safe drinking water."
  - Question 23 asks about heating facilities, but in the Pakistan context, where temperatures reach 50 degrees, it should also include options for cooling facilities/electricity/fans, etc.
  - In Section 7, when children respond with different feelings for their puppet compared to the feeling check-in in Section 3, a question can be added on the reason behind the change in children's feelings.
  - Tools can be added to help identify if children have been abused, harassed, etc. Although PRCS understand this needs a lot of expertise while engaging children and communities on such sensitive topics.
  - Questions can be asked about how frequently the child gets sick to better describe their physical health, as caregivers seemed confused when asked about physical health.
  - A question can be asked about the child's relationship with their siblings or other family members.