Gender and early childhood development (ECD) go hand-in-hand in times of crisis. Women and children are more vulnerable to the impacts of a crisis – young children are more likely to be injured, to become malnourished and to die from preventable diseases compared to older children and adults.

Young children depend completely on their primary caregivers for their health, nutrition, safety and stimulation needs and their caregivers are usually women (Cuartas et al., 2020). When mothers are supported, their children thrive (Ewerling et al., 2020; Black & Kowalski, 2021). When mothers and fathers are supported in parenting, there is even greater potential for improving early childhood development outcomes (Diniz et al., 2021). Men’s engagement in caregiving not only improves children’s development, but also results in the improved health and wellbeing of mothers (Tokhi, 2021).

Immediate physical and survival needs of young children (and their families) are paramount in a crisis situation. That said, humanitarian organizations must also work with parents, caregivers and communities to support young children’s access to gender-transformative, nurturing care, childhood services and support. Crises can be a catalyst for organizational and systems change, providing an opportunity for addressing gender inequalities in existing early childhood programming. However, they can also lead to a higher risk of gender-based rights violations and exacerbate gender norms and stereotypes that disproportionately impact women and girls.

When mothers and fathers are supported in parenting, there is even greater potential for improving early childhood development outcomes.

1 Parents/caregivers and their children may be impacted differently by crises, depending on their age, sex, location, and other factors of social exclusion such as (dis)ability, sexual orientation, gender identity and expression or sex characteristics (SOGIESC), religion, ethnicity, etc. ECD programming should respond to the different vulnerabilities, needs, priorities and capacities of children and parents/caregivers of all genders and ages.
The early years are the most important years of a person’s life. 90% of a person’s brain is formed before the age of five (Brown & Jernigan, 2012). Experiencing prolonged and/or frequent adversity in early childhood – due to factors such as abuse, neglect, exposure to violence or distress from humanitarian emergencies – without adult support, can cause life-long effects on a person’s cognitive, social and emotional development. Early childhood is a time where children learn about the gendered norms, attitudes and expectations of their community and society, including how they’re supposed to behave, how they’re valued differently and what their future roles will be (Plan International, 2017; Whiting & Edwards, 1988). While the effects of these early experiences and systematic gender differences may not be evident until adolescence, the seeds are sown from the earliest phases of a child’s life (Bornstein et al., 2016).

One factor that contributes to gender inequity in the early years is the preference for sons over daughters, that exists in many countries around the world. This phenomenon leads to girls receiving less nutrition, stimulation, play and learning opportunities than boys (Anukriti et al., 2021; Plan International, 2017). It may also mean that policies intended to benefit females may not have the desired impact (Anukriti et al., 2021). This places girls at risk of poor school performance and lower lifetime incomes, limiting their ability to ensure the health and wellbeing of their own children and thus perpetuating a cycle of poor life outcomes (Plan International, 2017). Gender dynamics in household decision-making can determine whether young children have access to early learning and play materials (Moore et al., 2022). For instance, male caregivers in crisis settings in Bangladesh have a prominent role in how family finances are allocated, including for early stimulation, learning and play materials for young children (Moore et al., 2022).
ECD services and programmes help close the gender gap

Quality of ECD services can have a significant impact on closing the gender divide and reducing the negative impacts of gender inequality later in life. In crisis settings, ECD programming must, at minimum, be gender-responsive, meaning programmes are designed to target gender inequalities and seek to reverse them. However, in order to effectively disrupt the cycle of discrimination and address the root causes of gender inequality, ECD programming must be gender-transformative. When ECD programmes are gender-responsive or transformative, they (Plan International, 2017):

- Engage parents, caregivers, community leaders and educators in equitable ways to change how children are raised, so that unequal gendered norms and attitudes are challenged from an early age.
- Work to ensure that girls and boys are provided with equal care and opportunities.
- Successfully promote men’s active engagement in childcare and domestic work as well as equal sharing of responsibility with their partner for promoting the health, wellbeing and development of their children.
- Support women’s rights to health, freedom from violence and empowerment.

Childcare

Childcare has been recognized as an unmet need for young children in emergency settings (Ponguta et al., 2022). Safe, high-quality childcare can promote gender equality (UN Women, 2015). It provides a safe space for children to socialize, play and learn, while freeing up time for parents to work, collect food, tend to their own physical and mental health needs and carry out other tasks to support their families. Women particularly benefit from having high-quality and affordable childcare, as it opens opportunities to go back to work, which in turn reduces gender inequality in professional and domestic settings and creates jobs in the paid care sector (UN Women, 2015; Dooley & Bassett, 2022). Childcare can also benefit adolescent girls, who may be unable to attend school because they’re caring for younger siblings or their own children.
Data from some lower-income countries suggests the number of child marriages and adolescent pregnancies has increased during the COVID-19 pandemic (UNFPA, 2021; UNFPA & UNICEF, n.d.). This has triggered some organizations, responding to crises, to further their gender equality programming in order to address emerging needs. This includes creating safe, private spaces for breastfeeding, as part of accelerated learning programmes, for adolescent mothers to continue their education whilst providing nurturing care for their infants (UN Girls Education Initiative, 2022).

**Early childhood education**

Early childhood education (ECE) helps close the gender gap (VVOB, 2020). For young children affected by humanitarian crises, ECE programmes can be a key source of happiness, fun, stability and structure. Disadvantaged female students are shown to benefit from ECE and preschool programmes more than boys (Plan International, 2017). Participation in ECE programmes can prevent childhood development gaps, allowing girls to enter primary school on a more level footing. This results in girls staying longer in school and can help eliminate inequalities in educational outcomes and economic productivity.

Children's educational environments strongly influence gender norms and attitudes. Educating young children in a gender transformative way can counteract restrictive gendered attitudes, norms and expectations that influence self-worth, self-esteem and expectations for the future (Plan International, 2017). ECE programmes in crises must pay particular attention to psychosocial wellbeing activities and social-emotional learning. They should be play-based, ensure children have equal access to materials, and include discussions about gender differences through games and comics (including both free and structured play and organized games). They should also be child-centered, inclusive and support the holistic development of children, regardless of gender, ability or other identity.

In both crisis and non-crisis settings, adequate and quality workforce professional development opportunities for ECE service providers is a critical gap (Dormal et al., 2019; Ponguta et al., 2022). Ensuring that ECE service providers have professional development opportunities, that include how to promote gender-responsive pedagogy, is critical for promoting gender equality in the short window young children receive ECE services. Gender-responsive pedagogy requires attention to how materials are used, the organization of space and activities and the types of interactions young children are having with one another, as well as their ECE providers. It also requires an enabling leadership and school environment (VVOB, 2020). Providing age-appropriate, gender-based violence (GBV) reporting mechanisms, referral pathways in ECE or community-based learning centers and play and development services is essential in ensuring that violence against young children, including GBV (experienced or witnessed) is reported and addressed.

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“Across many contexts, girls and boys are being “socialized into” and taught gendered attitudes, norms and expectations about their behaviours, value and future role right from birth. These are potentially limiting for both sexes, but have a particularly significant impact on girls and their feelings of self-worth, self-esteem and their expectations for the future.

— Plan International, 2017 (p. 25)
Parent/caregiver education

Parents and caregivers are children’s first teachers and role models - they play a vital role in teaching children social, emotional and pro-social skills, including their sense of belonging and cultural identity. Children learn about gender from their parents/caregivers. The quality of the parent-child relationship, interactions, the care provided by families and the home environment are the most important determinants of early childhood development. They’re also significantly associated with learning skills, educational achievement and quality of life. Research suggests that parental interventions geared towards mothers in crisis settings can reduce harmful parenting practices (Ponguta et al., 2020).

Gender-responsive parenting programmes promote gender-equal relationships, shared decision-making, improved couple communication and non-violence and changes to gender norms, roles and stereotypes. They provide men and women with safe spaces to reflect on and actively question what it means to be a ‘man’ and a ‘woman’ in society and to challenge inequitable gender norms and power imbalances. Parenting programmes can improve parents’/caregivers’ self-esteem, confidence and knowledge of parenting behaviours, leading to a sense of empowerment and improved physical and mental wellbeing, while creating networks of peer support and solidarity.

Men’s engagement

Fathers and male caregivers are more engaged when they’re emotionally involved, responsive and take an active role in protecting, supporting and promoting the health, development and well-being of their children; share responsibilities for care and household decision-making; and foster a respectful, nonviolent, caring and equitable relationship with their partner. There’s no one model of an “engaged” father, every family should be supported to make the decisions that work best for them.

Parenting programmes that explicitly seek to engage fathers in providing nurturing care have shown to reduce violence at home, including intimate partner violence and corporal punishment of children (Digolo et al., 2019). Parenting programmes must also recognize the concept of caring for the caregivers - supporting parents to first look after themselves and manage stress - including through strengthened support systems – so they can then provide nurturing care for their children.

A recent study found that engaging fathers in nutrition and parenting interventions led to both parents rejecting inequitable attitudes toward women, an increase in fathers’ daily time spent on domestic chores and an increase in women’s decision-making power in the home (Galvin et al., 2022). Another study showed that fathers who are more engaged look positively upon their children, their children are happier, and the relationship between the mother and child is more harmonious, even when the father isn’t around (Hein et al., 2020). Men’s participation in their children’s lives is also hugely beneficial on their physical and mental health and happiness (Levtov et al., 2015).

When service providers across all sectors serving young children (education, health, nutrition, protection, WASH) conduct services in a gender-responsive way, young children and the societies they live in reap tremendous benefits.
Illustrative examples of integrating gender and ECD across sectors in humanitarian contexts

In humanitarian contexts, many examples illustrate the effective integration of gender and ECD to promote gender equality and quality childhood development. One example is Blue Dot hubs, which offer safe spaces across migratory routes that provide refugees with critical information and support to help them on their journey. These hubs offer a variety of services, focusing mainly on the needs of women and children. Services include counseling for women and referrals for GBV and safe spaces for children to play. UNICEF and UNHCR have set up Blue Dots along key border entry points serving refugees from the Syrian and Ukraine crises (Dooley & Bassett, 2022).

Another example is the 17 ECD Centers established along the Côte d’Ivoire and Liberia border during the political crisis (UNICEF, 2015). The centers were formed by multi-ethnic women’s groups, where mothers of preschool-age children provided a package of ECD services and programmes to their young children, as well as basic literacy, numeracy and income generating sessions (UNICEF, 2015). The centers promoted social cohesion between women of different ethnic groups and a platform for women’s empowerment, as women had a safe space to discuss issues affecting them and their children, including community tension, violence and conflict (UNICEF, 2015).

Mobile childcare crèches, childcare hubs and home-based care are also models of childcare provision in acute and protracted crises. In Sri Lanka, UNHCR trained officers of the Child and Women Development Units of the Ministry of Women and Child Affairs in handling SGBV cases safely and confidentially, with referral mechanisms to help survivors gain access to support systems. Child Development Officers in particular were leveraged for this task (UNHCR, 2017).

In Uganda and South Sudan, Education Cannot Wait funded Multi-Year Resilience Programmes implemented by Plan International have incorporated breastfeeding and care needs for infant and young children of adolescent girls returning to school after extended COVID-19 school closures (UNGEI, 2022).

In Myanmar, Rwanda, Burkina Faso and Ethiopia, Plan International has been implementing its Parenting Under Pressure (PUP) programme, which empowers parents and caregivers of girls and boys aged 0-8 in crisis settings to provide nurturing care for their children. PUP offers support networks to parents/caregivers and promotes their improved psychosocial wellbeing. This programme ensures both female and male parents/caregivers are equally equipped and supported to provide adequate care for their children, work together in equal and respectful teams as co-parents and provide equal care and treatment of their sons and daughters.
How humanitarian workers can promote gender equality through ECD

Humanitarian actors can integrate elements of nurturing care for young children in their gender-responsive or transformative work. For example:

- The education sector ensures that gender-transformative education starts in ECE within temporary learning shelters, camps and community or home-based learning centers. This includes building capacity amongst ECE teachers and service providers to deliver gender-responsive and socially cohesive pedagogy, ensuring interactions are gender-equal (between the service provider and child and children as peers) and using curricula, daily routines and play materials that challenge, rather than reinforce gender stereotypes, roles and norms. FAWE and VVOB provide examples of how to do this in their Gender Responsive Pedagogy for Early Childhood Education (GRP4ECE) toolkit.

- The health sector can provide safe spaces and services that respond to various physical and mental health needs of mothers, such as GBV reporting mechanisms, psychosocial support and physical and reproductive health services (e.g. Blue Dots). The health sector can also work to ensure expecting mothers receive adequate pre- and post-natal care. It can also promote and facilitate men’s engagement in the health of their female partners and their children, recognizing that health services, including post-natal care, are at the forefront. This provides an opportunity for longer-term male engagement. However, involving men in maternal, newborn and child health and nutrition should never be at the expense of a women’s right to make autonomous decisions about their health and body.

- The protection sector can include ECD actors, such as child development officers, in trainings on GBV to ensure they’re able to provide targeted gender-responsive services, such as gender-responsive psychosocial support for mothers experiencing GBV and their young children who may have witnessed GBV.

- The food security and nutrition sector should ensure integration of ECD activities that target both female and male parents/caregivers. Examples include counseling on responsive care, early stimulation, play and early learning-based interventions, and cash and voucher or food assistance as channels to deliver life-saving messaging on ECD and nurturing care (WHO & UNICEF, 2012). Interventions should promote gender equality in childcare, co-parenting and decision-making, particularly in contexts in which men have greater control over the use of household resources. When food is scarce, women and girls are typically the ones who skip, delay, or limit meals (Oxfam, n.d.), and programmes and services must respond to gendered dimensions in food crises, including the increased nutritional needs of adolescent girls and pregnant and lactating women. Services across sectors (non-food items and food distribution sites, temporary learning spaces for young children, health tents or safe spaces for women and girls) can serve as sites for GBV reporting and psychosocial support referrals for survivors.

- Other humanitarian interventions can promote gender equity in early childhood development. Cash for work programmes, when gender-responsive and equitable, could increase women’s opportunities in the workforce. Food distributions can prioritize extra portions or fast-track distributions for families with young children. WASH supplies/services and mobilization can target mothers and fathers with young children to avoid and prevent diarrhoea and other diseases caused by lack of hygiene.
Early childhood development in emergencies
A comprehensive approach that holistically addresses the needs and rights of all young children from pre-conception through to 8 years of age, affected by crises - including children with disabilities, developmental delays and other needs. It comprehends a group of multi-sectoral, culturally relevant interventions that seek to prevent and mitigate crises’ negative effects and champion young children’s optimal development by providing nurturing care, mental and psychosocial support and early learning opportunities while supporting parents, caregivers and families in assuring protective, lifesaving, inclusive environments.

Gender equality
The equal rights, responsibilities and opportunities of girls, boys, women and men. Equality doesn’t mean that women and men will become the same, but that women’s and men’s rights, responsibilities and opportunities will not depend on whether they’re born male or female. Gender equality implies that the interests, needs and priorities of both women and men are taken into consideration, recognizing the diversity of different groups of women and men. Gender equality isn’t just a women’s issue, but should concern and fully engage men as well. Equality between women and men is seen both as a human rights issue and as a precondition for, and indicator of, sustainable, people-centered development.

Gender equity
Fairness and justice in the distribution of benefits and responsibilities between women and men, according to their respective needs. It’s considered part of the process of achieving gender equality in terms of rights, benefits, obligations and opportunities.

Gender transformative
Approaches that seek to actively examine, challenge and transform the underlying causes of gender inequality rooted in inequitable social structures and institutions. It does this by addressing unequal gender and power relations, challenging discriminatory norms and practices and creating or strengthening equitable gender norms, dynamics and systems that support gender equality.

Acknowledgements
This brief was written by Kate Anderson, Nicole Rodger, Tinotenda Hondo, Viktor Kjeldgaard Grønne and Kathryn Moore, and reviewed by Victor Hugo Dahlstroem, Emily Garin, Kirsten Gelsdorf, Ashley Nemiro, Laura Peterson, Anna Pettee, Alisha Parikh, Sarah Sexton, Elvira Thissen and Nour Jarrouj. We’re grateful to Plan International and the U.N. Girls Education Initiative for their inputs and guidance.

About Moving Minds Alliance
The Moving Minds Alliance is a growing collaborative network of 26 member organizations globally, focusing on early childhood in crisis contexts.

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FAO. Joint Programme on Gender Transformative Approaches for Food Security and Nutrition.


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