

Enhancing Refugee Self-Reliance and Wellbeing - quality, holistic and gender transformative Early Childhood Development - MultiStakeholder Pledge

Background

With an estimated 43.3 million children forcibly displaced (UNICEF, 2023), there is an urgent need to prioritize and invest in quality, holistic, and gender-transformative early childhood systems and support for children and caregivers in crises. Youngest children (ages 0-8) bear the greatest burden of poverty, disease, disability, war, social marginalization, and limited health, nutrition, and education services and are particularly vulnerable to the impacts of crisis and conflict. Early Childhood Development services in humanitarian and fragile settings provide life-saving and life-sustaining support for children and their families. They are integral to ending preventable deaths of newborns and children under five, supporting healthy and holistic development, achievement of the foundational learning skills essential for success in school and in life, and the mental health and psychosocial well-being of youngest children and their caregivers. The Nurturing Care Framework provides the basis for Global Refugee Forum pledges encompassing early learning, responsive parenting, good mental and physical health, nutrition, safety, and security, recognizing the cross-sectoral nature of ECD. This framework offers a proven, holistic approach to effectively support refugee, displaced, and host community children and their caregivers in all their diversity.

Operationalized through a multi-sectoral, coordinated approach, the ECD multi-stakeholder pledge incorporates the following aspects, to be selected and adapted by actors making specific commitments, recognizing that each party to this pledge has unique remits, responsibilities, resources, and capacities, and that each refugee and displacement context is different.

1. Financing

- Funders, including bilateral and multilateral donors, invest at least 10% of humanitarian funding to support local, national, and community organizations and host governments as well as international organizations, where appropriate, to scale up local ECD solutions. Ensure that humanitarian funding is connected to existing development initiatives through cross-sectoral coordination and accountability, for improved national ECD service delivery.
- Investments in ECD to be made early, equitably, and with high quality, including ensuring that local ECD actors and Community-Based Organisations (CBOs), who are experts in the context, are the first to respond, and the best placed to provide sustained responses for refugee and host populations are directly funded and included in decision making about program design, implementation and evaluation given their expert knowledge and experience.
- Provide **flexible and multi-year funding** that is particularly targeted at strengthening local ECD actors and systems, with a view to sustainability.
- Ensure adequate **investments in ECD infrastructure** to increase and improve the service delivery capacity of local ECD actors and CBOs.
- 2. Multisectoral Coordination
- Development and implementation of a holistic, integrated, and multisectoral **national ECD policy** that is inclusive of refugee and displaced children, their caregivers, and host communities.
- Government establishment of a **national ECD coordination platform** to support the provision of high-quality ECD programming for refugee and displaced children, their caregivers and host communities.
- 3. Evidence Generation and Advocacy
- Leverage local and community-led research institutions to support **evidence generation** demonstrating the impact of low-cost, high-impact holistic and multisectoral ECD interventions for refugee and displaced children, their caregivers, and host communities.

- **Collect and report age, sex, and disability disaggregated data** and evidence on the early childhood age group, including identifying gaps in service provision, and ensuring greater accountability for results.
- Support advocacy and sharing of best practices relating to ECD, including joint advocacy with affected populations (children, caregivers), to increase visibility and elevate the importance of ECD programming in humanitarian, fragile, and development refugee response settings, to attract increased funding and ensure inclusion of ECD in humanitarian response plans.
- 4. Early Childhood Education
- Provide access to a minimum of 1 year of quality, inclusive, play-based pre-primary/early childhood education for all refugee and host community children, and ensure their transition into primary school.
- Embed Mental Health and Psychosocial Support (MHPSS) + social and emotional learning (SEL) interventions into national education curriculum and budgets, starting from early childhood education, including ensuring that teachers are trained and supported to deliver MHPSS + SEL through play-based approaches.
- Invest and improve in the **recruitment**, **retention**, **and continuous professional development** of the early childhood education workforce, including refugee and community-based teachers and facilitators starting from preschool education and integrated into early education.
- 5. Responsive Caregiving and Caring for the Caregiver
- Enhance knowledge and skills of parents and caregivers to provide responsive care and support children's learning from birth, including through whole family/caregiver and child interventions
- **Support caregivers' mental health, well-being, and livelihoods** to enhance the provision of nurturing care to their children and strengthen family functioning.
- 6. Health
- Support the **health and well-being of refugee and displaced children**, including through addressing the mental health and psychosocial support needs of children and their caregivers through trauma-informed care and psychological first aid provided by trained teachers/practitioners.
- Support sustainable inclusion of refugee and displaced children and their caregivers in maternal and child health systems and services, and in social health protection schemes, including through capacity building of health personnel.
- 7. Nutrition
- Support good nutrition for children under 5, pregnant and lactating women, and adolescent mothers, recognizing their particular vulnerability to malnutrition and stunting.
- 8. Safety and Security
- Ensure that refugee and displaced children have **non-discriminatory inclusion in, and access to, quality national and local child protection systems and services** for protection from abuse, neglect, exploitation, and violence, including gender-based violence, and harmful practices, through integration and coordination of ECD and child protection in emergencies programming.
- Consider the particular vulnerability of refugee and displaced children to environmental risks, including climate change, and **support climate adaptation and resilience** through ensuring access to nurturing care, playful early learning, holistic development opportunities, and protection from violence and abuse.
- 9. Peace and Social Cohesion
- Commit to ECD programs in host countries and countries of origin that **reinforce positive values, attitudes, and skills that contribute to peace and social cohesion and the valuing of diversity**, so that children grow up with the vision, desire, and capability to live peacefully, with benefits to families, communities, and countries.
- Ensure that ECD programs help to reduce impacts of gender inequality.