

Asia-Pacific

ECD in Emergencies Workshop

Phuket, Thailand

26 – 29 May 2009



**UNICEF (APSSC, EAPRO, ROSA) & Save the Children
Alliance**

**With the support of INEE (Inter-Agency Network for Education in
Emergencies) & the Consultative Group on Early Childhood Care and
Development's Emergencies Working Group**

Asia-Pacific ECD in Emergencies Workshop **26 – 29 May 2009, Phuket, Thailand**

Introduction

In emergencies, when family and social order are torn apart by conflict and disaster, ECCD programming can fill the gaps and help the youngest, and most vulnerable, victims to survive and thrive during and after the emergency. Those concerned with helping children during emergencies, including Governments, UNICEF, Save the Children Alliance, INEE, the Consultative Group on ECCD, local and International NGOs should form strong partnerships to tackle the problems faced. With good collaboration more attention can be focused on young children in emergencies to effect important change to ensure their specific needs are met.

Aims of the Workshop

A four day regional workshop on ECD in Emergencies was held for participants from across South Asia and the Pacific (see Annex 1 for Agenda). The workshop brought together fifty participants from thirteen countries. The aims of the Workshop were to:

- Provide participants with an increased understanding of Early Childhood Development (ECD) in emergencies.
- Make the argument for giving increased attention to the ECD age group of 0 to 8 years, in preparation for and during emergencies.
- Provide participants with an opportunity to share country experiences in relation to emergency preparedness and response.
- Stimulate creative thinking about ways to provide for young children and their families, given the actors that are part of the process and the characteristics of the children and families involved.
- Support participants in the development of country plans for Disaster Risk Reduction and actions during the various phases of an emergency for the purposes of providing needed attention to young children.

Workshop Process

The Workshop brought together a cross section of stakeholders interested in Early Childhood Development. There were representatives from Government, UNICEF, Save the Children and local NGOs in Afghanistan, Bangladesh, Cambodia, China, India, Indonesia, Maldives, Myanmar, Nepal, Philippines, Sri Lanka, Vanuatu and Vietnam. The participants were Educationalists, ECD specialists, Emergency Coordinators and Health specialists.

The Workshop Facilitators included representatives from UNICEF, Save the Children Alliance, Inter-Agency Network for Education in Emergencies (INEE) and the Early Childhood Care and Development in Emergencies Working Group (EEWG). The oral presentations have been summarized and have not been individually attributed but are listed in the Annex and are included in the CD. The Workshop agenda balanced plenary work and group sessions to facilitate a two-way exchange of information.

Day One:

The participants main expectations for the workshop:

- Learn current thinking and direction of ECD development.
- Identify key players and service providers (who's doing what?)
- Establish steps to develop the capabilities of key player and service providers.
- Share examples of good practice in different countries
- Reflect on relevant experiences and share lessons learned.
- Discover how to effectively advocate for ECD in Emergencies cross sectorally.
- Discuss how to develop indicators and standards to monitor progress.
- Determine how to move the ECD in emergencies agenda forward regionally and nationally.

ECD in Emergencies

Until recently the educational needs of the youngest children affected by crisis was commonly left in the hands of the parents and caregivers, with international and national organisations providing little in the way of targeted services for this age group. There is increasing recognition that learning begins at birth and children in early childhood (0 to 8 years) must also be included in emergency education response.

No clear dividing line exists between 'emergency' and 'regular' early childhood education and much accepted good practice applies equally across both. However in times of crisis children are more vulnerable to physical and emotional harm. Early childhood education in emergencies provides physical protection through the creation of safe learning spaces that can also be centres for the provision of other essential services such as nutrition and basic health care.

More and more countries are affected by conflict and disaster and most are concerned that ongoing climate change will result in an increase in the frequency and ferocity of natural disasters. These may, in turn, have an impact on migration patterns creating conflicts over natural resources. It is therefore imperative to understand the impact of emergencies on young children and their families. The implementation of ECCD programming in emergencies needs to be prioritized. The response of humanitarian agencies must be broadened to include provision of developmentally appropriate interventions that help young children, families and communities to withstand, overcome and rebound from the chaos of crisis.

Who is Involved in ECD in Emergencies at the International Level

A group of actors that include UNICEF, Save the Children Alliance, Inter-Agency Network for Education in Emergencies (INEE) and the Early Childhood Care and Development in Emergencies Working Group (EEWG) have been engaged in dialogue regarding how to

integrate ECD into emergency planning and actions. They have developed a set of recommendations to move the agenda forward internationally.

EEWG Recommendations for ECD in Emergencies

Knowledge generation and research

- Establish an ‘ECCD in Emergencies’ knowledge database on good practices and lessons learned for improved ECCD programming in emergencies.
- Produce and contribute to new and existing tools, guidelines and standards for ECCD in emergencies.
- Support research on ECCD in emergencies, linking and coordinating with current researchers, agencies and donors.
- Develop indicators to effectively monitor and evaluate the impact of ECCD programmes on children, caregivers and families.

Advocacy and communication

- Advocate for ECCD inclusion through the development of communication and advocacy materials.
- Work with response agencies through the Cluster system to ensure ECCD programming is included in emergency preparedness, response and early recovery interventions.

Training and capacity building

- Develop capacity building plans to promote ownership, coordination and sustainability of ECCD programs in emergencies.
- Share existing practical guidelines, tools and materials to facilitate the implementation of ECCD activities into humanitarian responses.

Day Two:

Country Presentations (see Annex II)

Each of the 13 countries participating in the workshop was asked to give a presentation on the situation of ECD in emergencies in their own country, including information on:

- Context – a basic introduction to the country in terms of demographics
- Emergencies – types, frequency and location
- Challenges – in relation to the emergencies (inaccessibility, poor communication)
- Achievements – including integration of ECD in Emergencies into National Plans)
- Lessons Learned
- Recommendations for Policy and Practice.

During each presentation participants were asked to listen and notes were taken. After all countries had given their presentations mixed country groups were challenged to discuss what they had learned about the realities of ECD in emergencies. They were then asked to summarise the core issues.

Group summaries of Key ECD in Emergency Issues (Annex III)

- ECD policy and components exist in almost every country but they are not routinely integrated into emergencies because it is not seen as a priority.
- Although ECD in emergencies is being done in most countries this is not yet reflected in national policies and it tends not to be done in a holistic, cross-sectoral way.
- Continuous advocacy, technical support and materials development are required to integrate ECD emergencies at all levels; working with International and Regional networks, governments, academics, communities, parents and children.
- The integration of ECDs in Emergencies is, at present, more focused on children 3 to 8 years than the younger, more vulnerable 0 to 3 year olds.
- The implementation of ECD in emergencies requires contextually appropriate approaches, locally specific language and conflict sensitivity.

Day Three:

ECD Sectoral Mapping

Emergencies require the involvement of many actors – from those directly affected by the emergency, to the neighbouring communities, to civil society, to governmental and non-governmental agencies at all levels and even to the international community. The level of coordinated efforts (inter-sectoral, government – NGO, national – local) is a critical factor influencing the quality and sustainability of ECD initiatives in normal and emergency situations. It is also critical that sectors work together.

An integrated cross-sectoral approach to ECD in emergencies is based on the premise that children's growth and development is cross-sectoral by nature. The physical, intellectual, social and emotional aspects of a child's development are interrelated and interdependent. It has been clearly demonstrated that intervention in a single sector will provide only limited results.

Effective low cost and efficient projects in crisis situations tend to be those that are fully integrated at the local level. They include elements of education, health, nutrition, sanitation/hygiene and protection.

Participants looked at the key characteristics and developmental needs of young children from birth up to 8 years of age. They were divided into groups and were given a fictional disaster scenario. They were then told that they were ECD experts planning a response across all sectors for the next 6 months. Each group was asked to focus on the needs of a specific age group (0 to 1 year, 1 to 3 ½ years, 3 ½ to 5 years, 5 to 8 years).

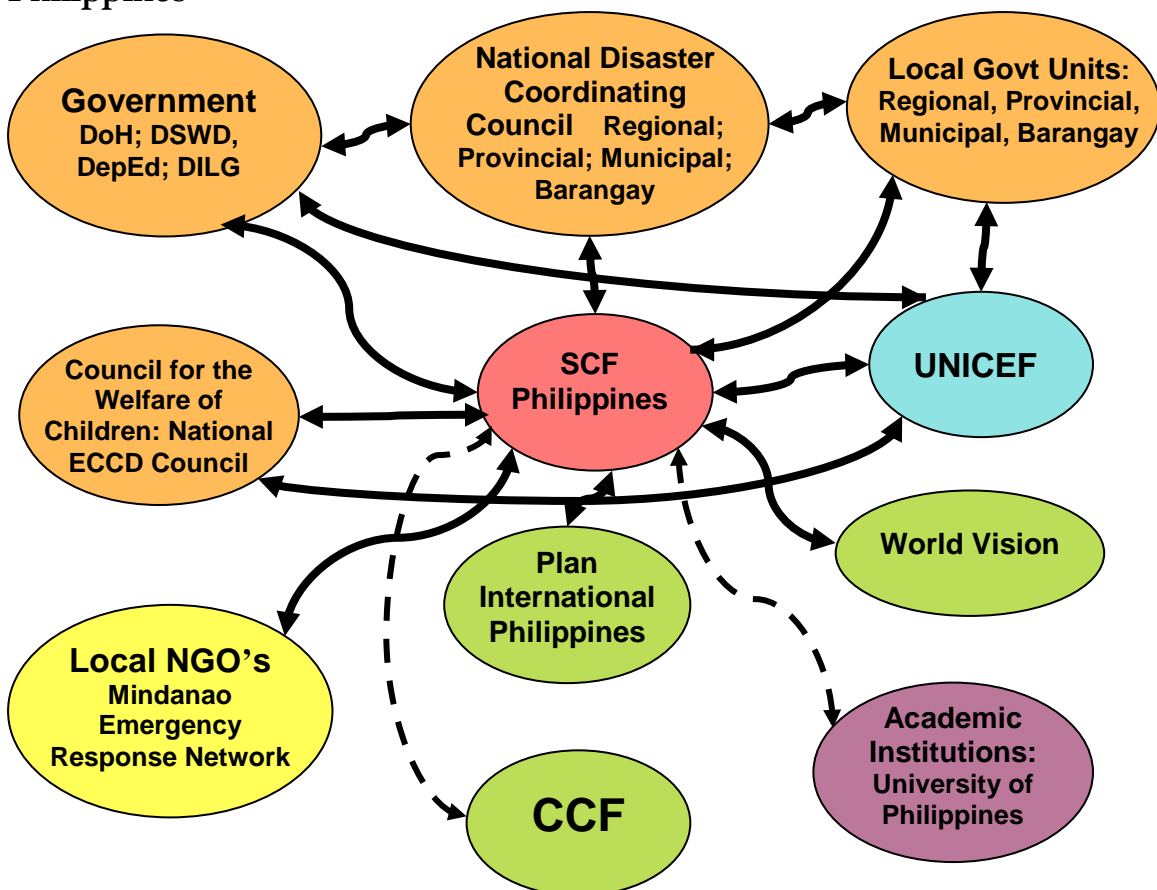
Feedback on how to include ECD Cross-Sectorally

Participants outlined basic needs for each age group for ECD in Education, Health, WASH, Protection and Nutrition (see Annex IV for results). Most participants found it difficult to identify specific areas for cross-sector collaboration in the time given and this area could benefit from further analysis.

Capacity Mapping:

Participants worked in country groups. They were asked to consider who the key players are that can address ECD in emergencies in their own countries. They drew a 'map' of the relevant organisations showing what type of partnerships exist between them. The relative strengths or weaknesses of these partnerships was shown by the types of lines that linked them. Arrows indicated whether it was a two way partnership or not. Other organisations and potential partnerships were also included on the map. Dotted lines showed where linkages need to be strengthened. Lines with slashes across them showed where there are serious problems that need to be addressed.

Capacity Mapping example from the Philippines



Self-Assessment Exercise (SWOT):

Country teams were asked to consider what has already been accomplished in their own countries and what the challenges are in relation to ECD in emergencies. They had to identify strengths and weaknesses, opportunities and threats (SWOT) to the implementation of ECDs in emergencies. They looked at weaknesses and threats identified and thought about how advocacy campaigns could strengthen those areas.

Advocacy – What is it and How do we do it?

Advocacy is the deliberate and strategic use of information to influence decision making. An advocacy strategy is a combination of approaches, techniques and messages by which the planner seeks to achieve specific goals and objectives.

The importance of identifying issues and problems that need to be addressed was stressed. Data has to be collected and analysed and exercises such as SWOT can be effective to help identify key issues for strategic advocacy.

Identifying the decision makers was stressed as an important part in an advocacy campaign. The capacity mapping exercise the country teams undertook helped them to recognise key players who were adversaries, partners or decision makers.

Participants were asked to think about how they would develop core advocacy messages. Styles and types of appeals that can be effective in different situations use different persuasive techniques. A strategy then has to be prepared identifying the role of the key players, resources needed and timelines need to be created. The message formats depend on several factors but could include press releases, leaflets or video documentaries.

The value of monitoring and evaluating any advocacy strategy used was stressed, particularly since ECD in emergencies is relatively new and has been overlooked. Lessons learned by any region or country need to be shared in order to help push the agenda forward. Everyone can build on what others have done. Once again the importance of working together was emphasized.

Advocacy Priorities Identified by Participants

- Strengthen the partnerships between NGOs and Government; develop that network.
- Leverage the strength of local NGOs and International NGOs for greater resource allocation to ECD in Emergencies.
- Lobby for ECD in emergencies to be included in National Policy.
- Influence early warning plans and ensure ECD in emergencies is included into the preparedness planning process.
- Cross-cutting advocacy is required within the coordination structure; identify focal points who are drawn across multiple sector stakeholders

ECD KIT

The ECD kit was developed after a survey of stakeholders revealed that 80% believed that there was a need for an Early Childhood equivalent of the successful School-in-a-Box. It has been piloted in several countries and will be officially launched in June in Geneva. Information on the ECD kit, developed and produced by UNICEF, was presented to the participants. It was described as a box of early-learning, play and psychosocial materials that address the survival and developmental needs of children from birth to age six. It has been produced to meet the needs of 50 children in emergency and transition settings and costs \$230.

As well as material for young children it includes material, activity sheets and a handbook for caregivers. Participants were asked to reflect on what they felt about the kit and why, when and where they would use ECD kits in their countries. They were also asked to consider the advantage and disadvantages of developing their own ECD kits locally.

Feedback on the ECD Kit

Most participants considered that the ECD Kit contained a wide range of items that encouraged parents and caregivers to play with young children and that developmental needs had been considered. Limitations discussed included the weight and bulk of the Kit and the problems that this would cause when trying to transport it to remote areas. Concerns were also raised about whether it was culturally or gender appropriate for all countries and some items were considered too luxurious.



It was explained that the Kit was contained in a heavy, lockable metal, storage box for security reasons; it also protected all the contents from damage. It would not be possible to make smaller, lighter, cheaper kits because it would cost more to produce them.

Participants from several countries described their experiences making their own kits locally. Cambodia has done so successfully and examples of what they had produced were shown. Other countries have faced difficulties in producing their own kits. Some have found sourcing safe materials to be a problem. Others expressed the view that some organisations, such as UNICEF, have such complicated procedures for local procurement that it would probably be more cost effective and time efficient to order the ECD Kits from Copenhagen.

Day Four:

Follow Up at All Levels

First steps country participants will follow when they get home.

- The cyclone response is happening now. Immediate action will be taken to check to see if ECD is being included (Bangladesh)
- Awareness raising within our own offices (Maldives)
- An ECD meeting with the government is already planned for the beginning of June 2009 (China)
- Planned meeting with government to share needs for ECD advocacy (India)
- Leading a workshop with Alliance members about ECD in emergencies, beginning of June 2009 (Afghanistan)
- Will coordinate with ECD and Emergency units within UNICEF, share information about the workshop and discuss what technical action needs to be taken to move the ECD agenda forward (Indonesia)
- By the end of June will draft TOR to look at ECD in emergencies (Nepal)
- Will share experiences with Government and NGO partners (Cambodia)
- Review existing research on trauma for 0 to 6 year olds in emergencies; pull out key activities that need to be focused on. Set up meeting to disseminate what has been learned at Workshop (Philippines)

All countries

Review the country plans that were put together in the workshop with relevant partners; make adjustments where necessary and develop the ideas into concrete, detailed plans.

International and Regional Level Follow Up:

INNE and EEWG are putting together a position paper outlining the rationale for ECD in emergencies. Since this has only been highlighted as an important issue fairly recently there is a real need to produce real compelling evidence to carry forward the agenda of early childhood development in emergencies. In order to do this more research and case studies, at all levels, are needed to persuade the decision makers of its importance. It is essential that the participants in the workshop monitor the impact of any ECD interventions in emergency situations in their own countries. They were urged to send in their own examples.

In 2009 the objectives include the development of monitoring and evaluation tools and the development of minimum standards for ECD in emergencies. The ECD kit will be launched and policy briefs are being developed to be included in the kits.

ARNEC The Asia-Pacific Regional Network for Early Childhood (ARNEC) is a network established to bring strong partnerships in early childhood across sectors and different disciplines, organisations, agencies and institutions in the Asia-Pacific region. ARNEC is supported by UNICEF, UNESCO, Save the Children Alliance, Plan International and Open Society Foundation. It aims to strengthen advocacy, policy reviews and development, research and innovative practices in early childhood at national and regional levels aligned to the Convention on the Rights of the Child.

The ARNEC Newsletter and website are used to disseminate information from and to countries and region. They are used to help countries to share their experience in ECD and they urge more countries to send them their stories. ARNEC plan to do a mapping exercise with country by country information and will facilitate peer review processes. Policy reviews have not yet included ECD in emergencies but they intend to do so from now on. It is agreed that the importance of the 0 to 3 year old children is still not reflected and they are trying to develop relevant advocacy materials.

Evaluation

A brief look was taken at the participant's original hopes and expectations of the workshop and whether or not these expectations were met.

Expectations	Appraisal
Learn current thinking and direction of ECD development.	Introduced to key concepts of ECD in emergencies & some resources.
Identify key players and service providers	Identified key International and Regional actors. Carried out country mapping on strategic partnership building. Must continue.
Share examples of good practice and lessons learned in different countries.	Each country made a presentation covering lessons learned and recommendations. Knowledge Management Structures for ECD need to be established & signposted.
Discover how to effectively advocate for ECD in Emergencies cross sectorally	Capacity building & advocacy among National Disaster Preparedness and Response agencies identified as a priority...
Discuss how to develop indicators and standards to monitor progress.	INEE work in progress, need to feedback & network.
Determine how to move the ECD in emergencies agenda forward regionally and nationally.	Covered basics but needs to be followed up and countries regularly updated. (When/How)

Summing-up the facilitators agreed that Early Childhood Development in Emergencies is going in the right direction; it is pioneering work and what each country is doing is a major contribution to this field regionally and globally. They acknowledged that many countries have plans but they are not yet systemic and explicit. There are major gaps and it is essential that the needs of all young children in such vulnerable situations as emergencies must be addressed to prevent long term harm. International and regional groups represented at the workshop, such as INNE, EEWG and ARNEC are keen to help countries by providing evidence based information to help with national advocacy by showing that what we are doing has a developmentally needs based approach. In

order for them to do their work well they need help from all the participants who can gather more information to verify the need for ECD in emergencies.

The importance of all partnerships was emphasized as being crucial to the success of Early Childhood Development in Emergencies.

‘Let us be like geese and stay together with those who are headed where we want to go and be willing to accept their help, as well as give ours to others. Like this we will all get to our destination faster.’

AGENDA

Tuesday 26 May 2009

Day 1: Introduction & Review

Time	Item	Facilitators
8.30-10:00	Opening & Introduction Welcome: Gary Ovington/Terry Durnnian Keynote address: Louise Zimyani Setting the agenda & clarification of objectives	Gary Ovington/Terry Durnnian Louise Zimyani Judith L. Evans
10.30-11:00	ECD in Emergencies What is ECD and why is it important in emergencies?	Louise Zimyani
11:00-12:00	What do we know about ECD in Emergencies and where are the gaps? EEWG/INEE Task Team: review and discussion of workplan based on gaps identified	Louise Zimyani/ Marian Hodgkin/ Arnaud Conchon
1.30-3.00	Humanitarian Reform & the Cluster Approach What is Humanitarian Reform? What is the Cluster Approach? What does the Cluster approach mean for ECD: planning/ coordination/mainstreaming?	Gary Ovington/Nick Finney/Arnaud Conchon
3.30-4.30	Disaster Risk Reduction: What does it mean for ECD?	Gary Ovington/Judith L. Evans

Wednesday 27 May 2009

Day 2: Sharing Experiences & Examining Outcomes

Time	Item	Facilitators/Notes
B8:30 – 9:00	Getting the day started What to listen for in country presentations	Judith L. Evans
9:00 -3.00	Country Offices Share Experiences Context, challenges, achievements, lessons learned, recommendations for practice. Summarise conclusions.	3 countries present. Rotating chair for the different time slots
3.30-5.00	Reflection	Judith L.Evans

Thursday 28 May 2009

Day 3: Planning for ECD in Emergencies – Coordinated Preparedness & Response

Time	Item	Facilitators/notes
8.30 – 9:00	ECD Sectoral Mapping Use of matrix for planning	Judith L. Evans Work in small groups by sector
9:00 - 10.00	ECD Sectoral Mapping (continued) Continued group work, presentation & discussions	Judith L. Evans Work in small groups by sector
10.30-12.00	Capacity Development for ECD Practitioners INEE Minimum Standards: Update Capacity mapping. What capacity do we have in-country to address ECD in emergencies? Self-Assessment Exercise SWOT.	Arnaud Conchon/ Louise Zimyani Marian Hodgkin Judith Group work by country
1.30-3.00	Advocacy: How do we make necessary changes?	Judith L.Evans
3.30-5.00	ECD Kit	Arnaud Conchon

Friday 29 May 2009

Day 4: Planning for ECD in Emergencies – Coordinated Preparedness and Response; Advocacy; Next Steps

Time	Item	Facilitators/notes
8.30-10.00	Review: Where are we now & what needs to be done	Judith L. Evans
10.30-12.00	Country Planning	Arnaud Conchon/

	Including ECD in Emergency Plans	Gary Ovington/Nick Finney
1.30-3.00	Sharing the Planning	Judith L. Evans
3.30-4.30	Next Steps in the region	Gary Ovington
4.30-5.00	Workshop Evaluation Closing	Judith L. Evans/Gary Ovington Peter Delahaye

ANNEX II

COUNTRY PRESENTATIONS

Afghanistan

Context: Afghanistan Intro

- Population: 32,738,376
- Pop. Growth Rate: 2.63%
- Age Structure: 0-14: 44.6%
- Infant Mortality Rate: 154.67 deaths / live births
- Fertility Rate: 6.58 children / woman
- Ethnicities: Pashtun 42%, Tajik 27%, Hazara 9%, Uzbek 9%, Turkmen 3%
- Languages: Dari / Pashto
- Literacy: 28.1% (men 43.1%; women 12.6%)

Emergencies in Afghanistan

Natural Hazards:

- Earthquakes
- Floods
- Drought
- Landslides
- Sandstorms
- Avalanches / Severe Winters
- Epidemics and Disease

Man-made Hazards:

- War / Ongoing Conflicts
- Unexploded Ordinances

Challenges to Emergency Response and Preparedness in Afghanistan

- Chronic insecurity
- Series of natural disasters
- Fragile economic situation
- Need for stronger coordination among stakeholders
- Need for more knowledge/capacity/resources
- Disaster Risk Reduction (DRR) capacity limited to a select number of persons

- Need raised awareness on education in emergencies

Achievements in the Afghanistan Emergency Context

- Establishment (and functioning) national and sub-national ANDMA
- Disaster Management Committees (provincial, district) – currently establishing links
- Cluster System established – Save the Children co-leads with UNICEF the Education Cluster
- Draft Early Childhood Education national policy
- Current pilot in ECD groups using Child-to-Child (home safety) – potential to link to DRR

Lessons Learned and Upcoming Plans

Lessons Learned:

- Need to extend DRR national priorities to district and community levels Need to bridge gap between emergency response and development programming (break the cycle)
- Existing community-based governance structures should be used for DRR
- Cluster System still in organization phase; opportunity to raise awareness of ECCD needs in Education and Protection Clusters

Upcoming Plans:

- Save the Children summer workshop on DRR – to include ECCD
- Roll-out of Child-to-Child in ECD programming – investigate (pre) DRR for young children as topic
- National Plan of Action for ECE policy to be developed (2009-2010) – in consultation with stakeholders. Opportunity to investigate inclusion of emergency context

Bangladesh

Country Context

- Area : 147,570 sq km
- Population : 140 m (49% female) approx. 20% of children between 0 – 8 yrs
- More than 310 rivers and tributaries have made this country a land of rivers
- 580 kilometres (approximately) of exposed coast line along the Bay of Bengal, of which 120 km is unbroken sandy beach
- Bangladesh being an alluvial deltaic plain is divided into three zones, e.g. hills, terraces and flood plain
- Long unique geographical location forming a lower part of the basins of three mighty rivers of Padma, the Brahmaputra and the Meghna
- Bangladesh with its fragile state of economy depends predominantly on agriculture that has strong linkage with seasonal weather systems

Kinds of Emergencies in Bangladesh

Experienced to manage/ respond

- Flood
- Cyclone
- Arsenic Contamination
- Tornadoes
- River Bank Erosion
- Monga / famine
- Drought

Challenges

- Geographical location, land characteristics, multiplicity of rivers and the monsoon

- Climate change render Bangladesh highly vulnerable to natural hazards
- Poverty
- High density of population
- Lack of alternative livelihood options, especially in flood prone areas
- Lack of measures, knowledge and capacity to save livestock
- Immediate response do not constitute of specific basic needs of women and children
- Protection of children from abuse, exploitation, migration, displacement, separation
- Challenges for EiE
 - Consideration of education in immediate response is relatively new
 - No guideline/policy to target pre school children and education sector
 - Recognition by the policy makers and front line responders to include education as a priority during immediate response

Achievements

- Separate ministry on disaster management
- Disaster Management Bureau (DMB) acts as a technical arm to the Ministry of Food & Disaster Management
- Standing Order on Disaster (SOD): Explaining duties and responsibilities regarding disaster management at all levels
- National Plan for Disaster Management 2007-2015 (Draft)
- Structure and a mechanism of the Government both at national and local level to prepare and respond in emergencies
- Early warning system at national and local level for cyclone
- Flexible school calendar (disaster and context specific)
- Government strategy to have provision for shelter cum schools in disaster prone areas
- Large scale projects implemented by both GOB and NGOs helped to improve the preparedness and disaster risk reduction strategies
- Context and issue specific networks, forums and groups both at national and local level, e.g. on DER groups, Education cluster, Disaster forum etc.

Lesson Learned

- Disaster Risk Reduction- Priority agenda both for govt. and other partners
- Indigenous coping mechanism is found very participatory & effective
- As immediate solution - protection of children at the time of disaster is ensured by the local community but no mechanism for longer term solution
- Effective GO-NGO cooperation to adopt and mainstream good initiative/ practices from non government sector
- Child protection issues are monitored by several government ministries but none of them has any agenda for protecting children during emergency
- Capacity building at multi sectoral level is critical

Recommendations

- Immediate emergency response should be inclusive of young children and gender specific needs
- Shelters/ camp situation should include child protection, recreation and education needs
- Disaster management should be an integral part of regular development program
- Legal definition of ‘orphan children’ should be broadened to ensure service for children without mother and of missing parents. (Amendment of Orphanage Act and Children’s Act harmonized with CRC)

- Adoption of a holistic and comprehensive child focused emergency approach to integrate disaster risk reduction into sustainable development policy, planning and programming at all levels
- Inclusion of “Emergency” as a major component in the NPA for children

China

Country Context

- 9,600,000 square meter
- 1.3 billion population, 360 million children
- 31 provinces and autonomous region

Emergency in China

- Earth quake
- Typhoon/ cyclone
- Tsunami
- Ice and snow
- Flooding/drought
- Fire
- Communicable disease (e.g. Avian flu)
- Fake formula powder (melamine)

Earthquake

- Serious negative impact on young children both physically and psychologically (Survey by society of preschool education in China)
- On emotion and behavior
- On healthcare and nutrition

No shelter

- 38.1% house felled down (64.6% in the most serious affected areas) .Poor environment

Teachers traumatized

Most of the teacher protected children during earthquake, but after it

- 74.6%over sensitive to sound ;
- 65.3% fear of memories about earthquake ;
- 59.5% have difficulties in sleep; 53.1%unstable in emotional statues
- 51.9%nightmare ;
- 46.3% high tension/panic sometimes ;

Challenges

- Gov. role of ECD(preschool edu) remains not clearly defined
- The gov emergency preparedness plan focus on the relief and foods, shelter, medical ,life – related provision, limited preparedness focus on needs of young children both developmental and psycho-social
- less attention of ECD(health reform in going on, nutrition and developmental dimension get less attention)
- Not adequate guideline of educational preparation/response, especially preschools education at national level

Achievement

- Committee and ministry departments on disaster preparedness and relief plan
- Strong government response to the disasters:
 - huge military deployment ,
 - “Hand in hand” assistance in relief and re-construction from the un-affected provinces
 - More open to international assistance
- Healthcare is timely implemented, no consequent disasters
- Increased NGOs/volunteers participation
- Local community ensure the protection of children

Child Friendly space

- Gov. awareness on the impact of emergency on young children
- Coordination between gov. NGO, volunteers and academics
- Inadequate guidelines
- Guide on media
- Disaster reduction: e.g school building

Recommendation:

- Monitoring /quality assurance of programme
- Evaluation, document best practices/model for policy advocacy
- High level advocacy --Integrate ECD into the ministry/state level emergency preparation/reponse plan
- Guideline and capacity building of the stakeholders
- Sustain the emergency assistance into the public service system:
- National plan of action for children (e.g. for migration and left behind children)
- Cluster approach in China?

Kingdom of Cambodia

Context

- Population of around 14.36 millions (2007), with a annual population growth rate of 1.81 % (2005)
- Agricultural country with between 85-90 % of the population engaged in farming.
- Literacy rate (from 15 years old): 73.6% (2007)
- The total population under 6 years of age : 1.83 millions (2007),
- Children 3-5 years old having access to ECD services: 15 % (SY 2008-2009)
- Infant Mortality Rates: 65/1000
- Child Mortality Rates (under 5) : 82/1000
- 40% of all child disease death associated with malnutrition (WHO 2006)

Emergencies that the country is facing

Post- Armed Conflict Disaster

- Complete peace about 10 years.
- Three decades of brutal conflict remain influencing on the lives and work of the people: land mines, trauma, sense of individualism,...etc

Natural Disaster

- More disaster-prone country
- From 1987-2007:
 - Flood: 12 events; 1,125 killed; 275,805 homeless; 9,514,614 populations affected.
 - Drought: 5 events; 6,550,000 population affected.

–More flood events happening than last 10 years

Long-Term Disaster “Poverty”

- Households under the Poverty line: 34.67% (2005)
- Evidences indicate badly effects on whole child development.

Challenges in relation to emergencies

- Capacity to interpret international education trends into country context.
 - importance of ECD in Emergencies
 - absence of a national guidelines and national plans on ECD in Emergencies.
 - inadequate data/information in relation to young children affected by disasters.
- Lack of resources, professions and skills on ECD in Emergencies.

Achievements

- Home and community based ECD to reach the vast majority of disadvantaged young children, affected by long-term disaster "poverty".
- ECE policy for 3-5 years (MoEYS) & national ECCD policy for 0-5 years (in progress).
- Mechanisms for Disaster Management: (a) National: Govt,UN and NGOs; (b) Provincial to commune levels.
- National Policy/Strategy on Disaster Management.
- Mainstreaming Disaster Risk Reduction (DRR) in the Education Sector: Intervention Mechanism within the MoEYS, Integration of DRR in School Curriculum and School Construction.

Lesson Learned

- The home/community based ECD approaches to address overall issues of young children (health, nutrition, learning, protection) in the context of long-term disasters "poverty" is fundamental to fulfill the right of poor young children.
- Existing home/community approaches have some shortfalls in the situations of emergencies. For example: removing fear and anxiety and removing boredoms in temporary shelters.
- Mobilization of primary school system for ECD produced more results than only used ECD system.
- Different solutions (no uniform solution) for different types of disasters, and situations (immediate violent danger, temporary shelters, re-establishment in their own old home).

Recommendation for practices

- Apply home and community based approaches into the ECD in Emergencies with enriched contents to cover children's needs in the emergencies.
- Improve the existing EMIS to cover data/information of young children affected by disasters.
- Promote understanding the importance of ECD in Emergencies among policy makers and practitioners.
- Develop a national guidelines and national plans on ECD in Emergencies.
- Provide professions and skills on ECD in Emergencies relevant stakeholders

Chhattisgarh, India

Chhattisgarh Profile

A new state formed on Nov 1, 2000.....

- Area:146361 SqKm(9th largest)
- Forest Cover: 40%
- Population :2.79crores(Census 2001) Rural-80%, Urban-20%,

- SC-12%, ST-33%,
- *Has 7 of nations' primitive tribal groups*
- *Has a very high language diversity.*
- Population Density :154 /sq.km
- Sex ratio: 990
- No. of districts:18
- Blocks:146(Tribal –85)
- Literacy Rate:65%
- Female Literacy:52.4%

ECD in Chhattisgarh – some facts

- 82% of the children attend pre schools
- Cooked Mid Day Meal provided in Pre schools
- Diverse communities form 45% (SC 12%, ST 33%) of the population
- 6 districts affected by conflict affecting children enormously
- **Indigenous peoples:** large tribal population present and their lower literacy rates reflect limited access
- **Rural residents:** disparities are greater in rural & tribal areas with low overall literacy rates
- Implementing ministries are different and there is lack of coordination

Chhattisgarh: the highs

- Small state with only 18 districts
- Cash rich state with government willing to spend on proven interventions
- Open and approachable bureaucracy
- Vibrant IT environment

Chhattisgarh –the lows

- High proportion of socially excluded: 33% of tribal population and 12% of SC population
- Large number of very small habitations making service implementation difficult and monitoring weak.
- Problem of access compounded by very high staff vacancies
- Poor human resource base: technical talent/ institutions almost non existent.
- Political interference very high along with corruption which slows down implementation
- Insurgency in select districts affects overall MDG progress and is programatically time consuming

Emergencies in Chhattisgarh

- 6 districts adversely affected by on going civil strife affecting around 30% of the children in 0-14 age group
- Southern Chhattisgarh is highly Malaria Endemic
- Flash floods, migration into other states

Challenges

- Access to villages in the strife affected region
- Infrastructure available but not child friendly
- Inadequate capacity in institutions working towards achieving results for children
- Coordination between different ministries working for children
- Building capacities at short notice to address the situation

Achievements

- ECCE Policy in Place
- Module for good parenting to create awareness among the community and parents

- Theme Based ECCE Package available and being implemented across 10000 centres
- 62000 Mitanin (health volunteer) trained and provides guidance to pregnant women and mothers for child care
- Hot cooked mid day meal provided to all children attending ECCE centres across the state
- Child rights protection forums set up at the panchayath level to oversee the delivery of essential services to children

Lessons Learnt

- In a state where the socially excluded groups are as high as 45% of the population, there is a need to focus on the most excluded. To achieve the results for children there is a need for an integrated approach to address the tribal characteristics of the state.
- Innovations are required to address access issues in the tribal districts.
- Policy level changes on HR recruitment will be needed to overcome some of the most critical human capacity issues of the state.
- An evidence base has to be effectively packaged to make it politically powerful in order for it to be most effective.
- The size of the state lends itself to state-wide implementation of critical interventions.

Recommendations

- Institutional capacity building is the key to sustain ECD at state and district level
- Partnership with Panchayaths, CSOs is the way forward
- ECCE implemented by Women & Child Development Ministry with support from Education

Myanmar

Emergencies

- Socio Political Crisis/ Conflict/ Violence (Collapse of cease-fire /Escalation of conflicts, Civil unrest, Bombing,.)
- Acute Economic Crisis (High inflation, Sudden increase in commodity prices, Increased sanction,.)
- **Natural Disasters** (Floods, Flash Floods, **Cyclone**, Earthquake, Fire, Heatwave,.)
- **Epidemics** (Pandemic influenza, Cholera, Malaria, DHF, Measle, HIV/AIDS,.)

Challenges

- Education and ECD was not seen as priority
- Limited access for partnership in Education
- Lack of accountability for ECD by policy makers (e.g. DSW vs MoE)
- Limited role of MoE/Education cluster in Emergency relief committee
- Gaps in availability of reliable data
- Mobility of communities
- Limited funding source (shelter vs safer schools for children)
- Limited capacity to absorb early response services into regular programming in rehab/development phase

Achievements

- Cluster Approach operationalised for Nargis emergency response
- Extension of ECD Knowledge beyond Education (e.g. caregivers of CFS,.)
- Increased demand for ECD services
- Psychosocial books/pamphlets for children were developed

- Education cluster emergency response plan developed including common ECD assessment tool
- Mapping of education partners done
- Documentation on lessons learnt

Lessons Learnt

- Education cluster was seen by partners as a good forum for information sharing
- Role of education cluster as coordination with decision makers/ funding mobilization is very limited
- Lack of continuity of cluster coordinators from lead agencies hamper coordination with government
- Safer schools as good entry point for educating families on DRR (Housing improvement, infrastructures improvement)
- Proactive communication at all level is essential to avoid overlaps and fill the gaps

Recommendations

- Advocacy at the highest level, the national emergency relief committee, prior to emergency could help put ECD on the relief agenda
- Advocate GOM to prepare holistic emergency preparedness plan with clear cut roles and responsibilities at all levels including formalizing partnership with NGOs and INGOs
- Clear cut strategies for cluster mechanism (specific for ECD) in country at all level should be developed based on experience
- Promote minimum standards for schools/ECD buildings to withstand wider range of hazards that exist in Myanmar (eg. Earthquake and cyclone).
- Reflect lessons learnt into education cluster strategy and beyond (e.g.Safer school experience to share with shelter cluster to scale up for family level DRR)
- Integration of DRR module into pre-service ECD teachers’ training
- Develop modular training materials to train the caregivers for quick response and in transition

Nepal

Nepal Context

ECD In Emergencies:

- Child friendly Space (CFS) introduced
- Education cluster focused on 3-5 and 6-12 age group, 0-3 by Health/Nutrition Cluster
- CFS – integrated platform for health hygiene, nutrition, protection and psychosocial input
- 61% children covered from 107 CFS centers

Kinds of Emergencies

Natural created:	Human Induced
Floods, landslide: Regular in Terai and hill areas Earthquakes: Great Fear Epidemic diseases: Occasionally Fire, Storm: Occasionally Hunger and drought: Area Specific	Silent Emergency: Political and religious pursuit: (Terai Conflict) Abduction- School and ECD center affected Conflict: Mine risk, bombing,

Challenge

- Education and ECD are not immediate priority for emergency (it can wait attitude)
- Inadequate discussion & coordination at National level
- Capacity gap at different level to preparedness and response (National, regional, district)
- Limited resource (human resource, finance, materials..)

Achievement

- Good coordination among agencies lead by DDRC
- Introduced and expanded the child friendly Spaces (CFS) during emergency : around 3000 children covered
- Cluster approach activated/ capacity build up focusing on ECD
- Community mobilization and participation from planning to monitoring.

Lesson Learned

- ECD need became visible during emergencies
- Policy at the national level necessary
- Contingency plan should also focus on ECD
- Cluster approach effective for addressing the ECD in emergencies
- Response plan to be cultural/ethnic sensitive

Recommendation

- ECD in emergency should be integrated in national policies and plan (education, health, local government's policies).
- Integration of ECD concept in curriculum, trainings.
- Capacity building at different level (national, regional, district, local) – Government and NGOs
- Advocacy for resource allocation for ECD purpose.
- Formation of technical team to support ECD in Emergencies at different level.
- Technical support from regional/HQ to advocate ECD in Emergencies

Maldives

Introduction - Maldives

- Situated in the Indian Ocean/covering a total of about 90,000 sq. km
- Approx 1,196 small low lying – coral islands / 20 atolls / 7 provinces
- dispersed /inhabited islands
- Total population: 398,968 (Census, 2006)
- Annual growth rate 1.69 (Census, 2006)

Kinds of emergencies that the country is facing/potential risks

- **Environmental risks:** Local flooding/ Tidal waves, land degradation, Shortages of drinking water during dry season Tropical storms, pollution, Tsunami, earth quake
- **Health Risks:** Transport accidents, communicable and non communicable disease, advance health incidents and their consequences.
- **Social risks:** Urban congestion, increasing drug usage.
- **Political Risks:** political movements

Challenges in relation to emergencies

- Access barrier: Geographical nature of the nation
 - Minimal transport facilities/Communication

- Lack of community awareness
- Lack of policies/facilities /resources to accommodate community demand.
- Early Years education not mainstreamed into the formal system
- Lack of an established mechanism to respond to ECD in emergencies

Achievements

- After the Tsunami (1994) which was the major disaster occurred which affected nationwide: e.g. Normal schooling within 2 weeks
- National Disaster Management Centre developed & Several projects developed /continued (capacity building progs of the communities) by the government, international voluntary organizations and NGOs
- Development of Online Nutrition Child Surveillance system
- The Safe Island policy promote people move to safer islands

Achievements specific to education

- Island communities supported to developed preschools
- Awareness progs on ECCD for teachers/parents
- Play based methodology scaled up to cover nationwide / accepted by the community

Recommendations for policy and practice

- Establish /implement a mechanism to respond to ECCD in emergencies with development of policies, strategies, programs, protocols and guidelines which would address the overall development of the child
- Incorporate ECCD in Emergencies to the existing ECCD progs

Philippines

Country context

- 80 million Filipinos
- 17.7% or 13.5 million are 0-6 years old
- over 60% of families estimated to be living on an income below \$1/day

Kinds of emergencies

- earthquakes, landslides, floods, tsunami, volcanic eruption; most prone to radical shifts in weather patterns due to climate change
- armed conflict between the Armed Forces of the Philippines (AFP) and the Moro Islamic Liberation Front (MILF) in the island of Mindanao (528,053 persons affected in Sept '08).

Challenges in relation to emergencies

- Security and access
 - Sites are difficult to reach due to damaged road network
 - Civilian population affected by armed conflict. There is a high possibility for humanitarian workers of being interrogated or harassed at check points and their relief items confiscated.
- Coordination
- Funding

Achievements & Lessons Learned

- Capacity building for ECD service providers on ECD in emergencies
 - modules/content should be incorporated in ongoing capacity building programs

- Activate and strengthen Local Councils for the Protection of Children to plan & invest on ECD in emergencies
- Safe spaces for pre-school children (3-5 yr)
 - Include Parent and child (0-3) playgroups
 - Integrate health and nutrition services

Recommendations for policy and practice

- Expand 0-8 program to incorporate key messages on ECD in emergencies (e.g., Early Steps to School Success – continuum of integrated services)
- Advocate for support for ECD in emergencies programming (DRR, emergency response, etc.) with local/national government partners as well as other donors
- Recommendations for policy and practice
- ECD in emergencies as part of professional development framework for ECD service providers
- Develop key messages for advocacy
 - Localize existing documents (e.g., ECCD in Emergencies Principles and Practice; EEWG and INEE)
 - Simplified tools

Indonesia

Context & Background

- 230 million of population, 28 million children age 0-6
- 58% out of those children (equals to 16 million children) live in villages and rural areas
- 17,000 islands, 33 provinces, 473 districts

Category of Emergency

- Natural Disasters (Earthquake, Tsunami, Volcanic Eruption, Floods, etc.)
- Man-made Disasters

Challenges

- To shift the paradigm of emergency response into emergency preparedness
- There is a need to harmonize one coordination and command under government decentralized system in managing disaster and emergency work
- Lack of trust, care, awareness and participation from community in disaster management

Achievements

- Government issued new disaster management law No. 24 in 2007
- Capacity building for community and government at national and local level
- Integrating DRR into lesson plan for primary school
 - Revitalization of ECD centers in tsunami and earthquake affected areas in Aceh, Nias and Jogjakarta
- Education contingency plan produced.

Lessons Learned & Recommendations for Policy and Practice

- Emergency Preparedness Planning and Stockpiling of Essential Emergency Supplies
- Incorporating ECD in emergency preparedness response into ECD National Strategy & Policy Guideline
- Strengthen partnership among government, NGOs, CBOs and international agencies
- Capacity Building of counterparts and communities in emergency preparedness and response

Sri Lanka

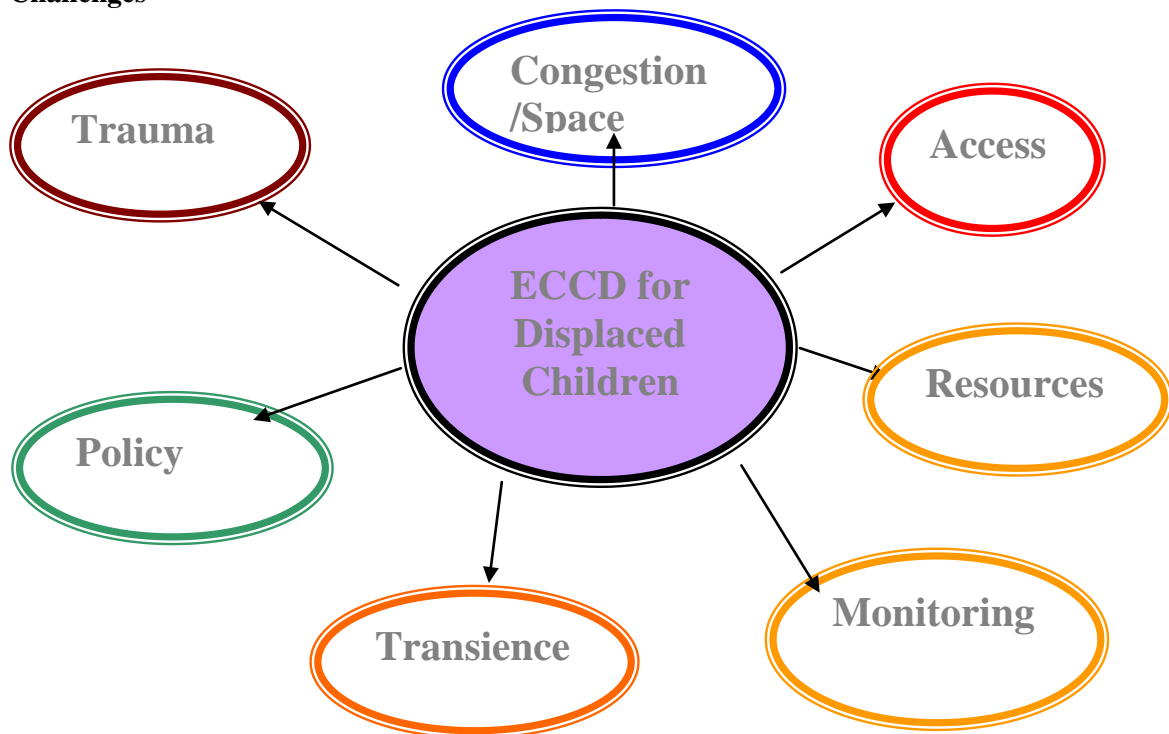
Country context

- Population 20 m
- Children 6.2 m
- Children(0-5) 1 m
- Sinhalese 70%
- Tamils 16%
- Muslims 09%
- Other 05%

Types of Emergencies

- Conflict
 - Acute conflict – Massive displacement
 - Post conflict
 - Resettlement
- Natural Disasters
 - Land slide
 - Floods / drought
 - Tsunami

Challenges



Achievements so far

- **Policy & Planning**
 - Different Ministries
 - MoCDWE’s overall coordination
- **Systems**
 - Advocacy and lobbying
- **Coordination**

- Working National /local UN/NGO/ Govt. coordination mechanisms
- **Implementation (Response)**
 - Provision of CFS, feeding centres at IDP sites
 - Teacher/volunteer identification, training, manual distribution and monthly incentives
 - Teacher / Children emergency packs/kits

Lessons Learned

- Inter-sectoral collaboration
- Zonal/Divisional level planning
- Community and family participation
- Sharing best practices
- Cluster planning and advocacy

Vanuatu

The Vanuatu Context

- The Republic Island of Vanuatu is located in one of the highest disaster prone areas. Vanuatu is geographical located in the ‘ring of fire’ and the ‘cyclone belt’ area of the Pacific, and its archipelagic geological characteristics and wide distribution of a number of small islands in a large EEZ, together with limited financial and technical capacity make Vanuatu particularly vulnerable to many different hazards.
- Vanuatu regularly suffers from volcanic eruptions, cyclones, earthquakes, droughts and floods, some of which are increasing in frequency and variability, as well as extreme events due to climatic variability and sea level rise associated with human induced climate changes.
- Increasing population, uncontrolled growth of urban centres and spontaneous peri-urban settlements are contributing to increased levels of vulnerability. The potential for devastating cyclones and earthquakes in fast growing urban areas, such as Port Vila, highlights the need for a more coordinated approach to urban planning as natural hazards can trigger other hazards in a domino effect.

Challenges

- ECD is often non existent / ignored during an emergency
- Traveling and access to locations can be difficult/expensive due to islands being separated by vast areas of water and road structure is often difficult.
- More knowledge, capacity and resources needed for ECD in Emergency.
- Child trauma service/counseling is non existent in the country.

Achievements

- A National ECE Policy is in draft form and will be endorse by the end of 2009 for implementation
- Early Learning Standards in Draft form.
- VESAP upgrade of 210 Early Childhood centres to quality standards.
- The Ministry of Education is taking an interest in ECD/ECE activities and is including ECD into its annual budget planning.
- With UNICEF support an emergency ECD kit has been prepared.

Lessons Learnt

- Vanuatu Early Childhood needs to consult with stakeholders to include ECD in its Emergency context.

- Incorporate ECD in Emergency preparation response into ECD/ECE National Strategy and Policy Guidelines.
- Cluster planning and advocacy in ECD emergency needs to be created and implemented.
- It is important to bridge the gap between NDMO/Emergency groups and the community.
- Need to extend DRR from National level to Provincial to Island to Zone to community.

Recommendations

- Awareness and DRR for ECD must be in place – child friendly space/health/activities
 - Capacity building in terms of management, coordination in emergency and preparedness.
 - Needs assessment /data in ECD in emergency be in place.
 - NDMO to include ECD in its policy and strategy plan – children 0 – 8 yrs.
-

Viet Nam

Country Context

- Population 84 million, Children are about 33%, with around 10 million children under 5 year old.
- There are more than 54 ethnic minority groups
- Vietnam is approximately 331,688 km²
- Viet Nam have 3200km long border with sea of Indian and Pacific ocean where near by one of 5 biggest storm center of Pacific Ocean

The kinds of emergencies that the country is facing

- Storm, Whirlwind, Flood (around 30/ year)
- Drought
- Accident
- Epidemic diseases (HIV, Shars, diarrhoea including Cholera, ...)
- Forest fire
- Earthquake

Challenges

- The diversify and complex of disaster (kind of emergencies)
- Poor forecast system
- Low awareness, knowledge and skill of people on emergencies – behaviors change
- Low capacity in term of management, coordination in emergency and preparedness.
- Lack of or limitation of technical support program and comprehensive program or model for emergency
- Weak linkage between national emergencies strategy and action plan with child friendly school model

Achievements

- National strategy and action plan for disaster preparedness
- Disaster preparedness and response committee at all level
- Considering disaster preparedness in development of national plan and national infrastructure development program
- BCC on the risk and consequences of disaster and other kind of emergencies. Training for local partners and community people on emergency preparedness.
- Experience and quickly response to emergency are gained recently
- Emergency networking and PCG

Lesson learned

- Emergency preparedness is incorporated into Commune Social Economic Development Plan
- School Plan and construction and infrastructure consider emergency preparedness.
- Detail plan for emergency response including available of emergency response equipment and facilities
- Loss assessment and timely report to higher management level for urgently support
- Child friendly environment model should be considered as one of solution for consequence minimization
- Children education on emergency preparedness is important
- Important of capacity building and awareness raising on emergency preparedness for partners and community people

Recommendations

- Strengthen legal and sub-law documentation related to emergency – Child Friendly Commune
- Develop emergency preparedness strategy and national action plan with considering right of the child and use participatory approach
- Capacity and training need assessment and development of national capacity building program especially for education sector.
- Strengthen capacity and system to access update information, BCC focuss to the poors and life skill training for children
- Considering gender equity in emergency
- Strengthen network and learning to gain technical support and develop good model for Viet Nam

ANNEX III: Summary of Lessons Learned and Recommendations from ECE Country Presentations

Lessons Learned	Countries Affected	Recommendation
1. Whilst the Education Cluster System is still in an evolutionary phase, there is opportunity to raise awareness of ECCD needs in WASH, Education and Protection Clusters.	Afghanistan; China; Nepal; Indonesia; Sri Lanka; Vanuatu; Vietnam	1. National Policy / Strategy / Plan of Action for Early Childhood Education in Emergencies to be developed in consultation with all key stakeholders.
2. Lack of continuity of Cluster Coordinators from lead agencies hampers coordination with government, especially on resource mobilisation and allocation priorities with decision makers.	Myanmar; Nepal; Maldives; Sri Lanka; Vietnam	2. Codes of Practice for Education Cluster mechanism (specifically for ECD) should be developed in country based on best practice experience.
3. Need to extend Disaster Risk Reduction national policy and capacity to district and community levels and in so doing, make use of existing community-based governance structures to maximise capacity building for decentralised DRR-ECCD.	Afghanistan; Cambodia; Chhattisgarh, India; Nepal; Philippines; Sri Lanka; Vietnam	3. Make greater use of planned training events on DRR with ECD as an opportunity to build capacity and further the roll out of Child-to-Child approaches in ECE programming.
4. Effective and growing Government - NGO cooperation mechanisms exist to support the adoption and mainstreaming of good DRR initiatives & practices with respect to emergency Early Childhood care from the non government sector.	Bangladesh; China; Chhattisgarh, India; Myanmar; Nepal; Maldives; Philippines; Indonesia; Sri Lanka; Vanuatu;	4. Adoption of a holistic and comprehensive child-focused emergency approach to integrate disaster risk reduction and ECE planning and programming at all levels of Government – NGO interaction.
5. Immediate indigenous coping mechanisms are found to be very participatory & effective though State actor follow-up roles are fragmented through multiple Government	Bangladesh; Myanmar; Nepal; Indonesia;	5. Strengthen advocacy among multiple Government stakeholders on “child first” principles, care and protection measures through the National Plan for ECE, ensuring fully inclusive care for

Lessons Learned	Countries Affected	Recommendation
stakeholders		<u>ALL children without primary care givers.</u>
6. Need to integrate ECD into the Ministry/State level emergency preparation/response plans.	China; Cambodia; Myanmar; Nepal; Maldives; Philippines; Indonesia; Sri Lanka; Vanuatu	6. Step up high level advocacy, development / adaptation of guidelines and capacity building to raise awareness on Early Childhood concerns in emergencies (e.g., ECCD in Emergencies Principles and Practice; EEWG and INEE).
7. Caregivers have identified the need for first-line response kits to address ECD needs during the first 72 hour post crisis.	Myanmar, Nepal; Philippines; Indonesia; Vanuatu; Vietnam	7. Develop modular training materials to train caregivers for quick response and integrate DRR modules into pre-service ECD teachers' training
8. Poor data availability on young children and particularly weak gender disaggregation in disaster prone areas tends to limit problem recognition and willingness to respond on ECE.	Cambodia; Chhattisgarh, India; Vanuatu; Vietnam	8. Improve the existing EMIS to cover data/information of young children affected by disasters by distinct age and gender categories & re-package the evidence generated to make it more compelling for political action.
9. In states and regions where there are significant socially excluded groups there is a need to focus on the most excluded with an innovative, integrated approach which addresses the unique characteristics of the population.	Chhattisgarh, India; Nepal	9. Amend / adjust HR recruitment and deployment policies to raise capacity building efforts with ECE to be more culturally sensitive.
10. Safer school construction is a good entry point for educating families on DRR (Housing improvement, infrastructures improvement) and ultimately ECCE.	Cambodia; Myanmar; Maldives; Indonesia; Vietnam	10. Promote minimum standards for schools/ECD buildings to withstand the range of hazards that exist (eg. Earthquake, floods and cyclone).

ANNEX IV

SECTORAL MAPPINGⁱ

	Birth to One Year
Education	<ul style="list-style-type: none"> - Provide safe place for children to explore/play/establish CFS - Locate qualified teachers/care givers or train volunteers - Plan awareness raising activities for parents/caregivers - Provide safe, age appropriate play materials/ ECD kits - Encourage parents/caregivers to stimulate children - Provide safe place for children to explore/play - Encourage host families to provide safe space for children
Health	<ul style="list-style-type: none"> - Provide prenatal support to pregnant mothers (nutritious food, care, advice, birth plans, check ups, birth kits etc) - Establish newborn care facilities - Organize immunization program - Provide basic health care information to mothers and caregivers on prevention and treatment of diarrheal and respiratory diseases
Nutrition	<ul style="list-style-type: none"> - Encourage exclusive breastfeeding - Find surrogate mothers to breastfeed separated/orphaned babies

	<ul style="list-style-type: none"> - Provide formula for the cases where no other options is feasible - Provide sufficient infant formulae, clean water and guidelines - Provide nutritious food to mothers and toddlers - Raise awareness of parents and caregivers about nutrition - Provide supplementary food where necessary
WASH	<ul style="list-style-type: none"> - Guarantee availability of adequate, safe water - Install sufficient, accessible latrines and provide potties - Develop awareness of importance of personal hygiene to mothers and caregivers and provide soap - Distribute jerry cans and washing basins - Establish baby bathing centers - Ensure there is adequate monitoring and maintenance of latrines and water supplies
Protection	<ul style="list-style-type: none"> - Counseling and psychosocial support for caregivers and families - Provide non discriminatory practices - Create a close, safe environment for communities within the camp - Support caregivers to create and develop attachment bonding with children and host families/caregivers - Promote and encourage the older children to play and care for the younger ones

-	One Year to Three and a half years
Education	<ul style="list-style-type: none"> - Ensure ECD is part of education - Assessment tool – children 0 to 8/preg and breastfeeding mothers - Look for existing ECD systems, structures - Identify trained/qualified adults/caregivers - Train volunteers (adults and older children) - Select and make appropriate materials - Establish mother and childcare spaces - Parent education – childcare, health, nutrition, hygiene, san, protection - Organize play activities for children, parents, caregiver - Establish process and outcome indicators and a monitoring system
Health	<ul style="list-style-type: none"> - ECD part of needs assessment tool - Arrange vaccination/immunization of young children - De-worming, hygiene education, ORS - Organize parenting health care orientation - Establish referral based services – (HIV/AIDS) - Set up baby clinics with ante-natal and post-natal services - Establish growth monitoring facilities in clinics - Organize periodic height/weight monitoring at clinics/CFS - Longer term periodic visits from health workers/local government officials. - Community health workers engaged and trained
Nutrition	<ul style="list-style-type: none"> - ECD part of needs assessment tool - Ensure appropriate food available for this age group AND for lactating mothers

	<ul style="list-style-type: none"> (coordinate feeding time with CFS) - Secure space for mothers to breastfeed in CFS - Include essential behavior in parenting programs. - Regular visits to CFS to assess nutritional status of children, growth monitoring - Referral system for undernourished cases, supplementary feeding/micronutrients - Establish positive interaction between mothers and children
WASH	<ul style="list-style-type: none"> - Ensure ECD part of needs assessment tool - Safe water available in sufficient quantities in CFS - Hand washing baby friendly (appropriate height etc) - Children trained in hygiene behavior/toilet training - Provision of sufficient functional toilets with water supply (app size etc) - Set up baby bathing stations - Arrange for safe disposal of faeces and hand washing (demonstrationsb) - Hygiene kits
Protection	<ul style="list-style-type: none"> - Ensure ECD part of assessment tool - Ensure identification, reunification of separated children, make provisions if no family located - Identification and referral system for children with disabilities - Mental health and psychological support for children and caregivers - Information campaign and preventive measures against trafficking (abuse) - Ensure birth registration through awareness raising campaign - Check safety in CFS (safe environment)

Three and a half to Five Years	
Education	<ul style="list-style-type: none"> - Establish temporary ECD centers/community pre-school and home-based ECCD - Recruit and train volunteers/core mothers and train them - Create safe places where children can play, involve community - Provide play materials/help community create their own - Mobile library - Establish management committee/network - Training/orientation of caregivers/facilitators
Health	<ul style="list-style-type: none"> - General health checkups/screening, early identification of symptoms of illness (referral to mobile clinics) - Immunization - Health education through parenting education and at CFS - Demonstrations of ORS preparation - Personal hygiene (health promotion) - Stimulation through education - Vitamin A through nutrition - De worming/anti-helminth medicine distribution
Nutrition	<ul style="list-style-type: none"> - Training and orientation of caregivers - Targeted feeding at CFS - Distribute essential vitamin supplements at centres (Vit A etc)

WASH	<ul style="list-style-type: none"> - Coordinate to ensure safe & sufficient water supply for age group - Ensure provision of child friendly latrine facilities at CFS and home (small sanpan/potty) and safe disposal of excreta with information dissemination of safe practices - Facilitate hand washing practices in ECD centers, CFS and schools (child-to-child, parents) - Introduce safe drinking practices (child-to-child, parents)
Protection	<ul style="list-style-type: none"> - Wherever possible keep children with their mothers and other caregivers - When children are separated, identify orphans and vulnerable children - Establish an identification and reunification system - Support parents and caregivers with psychosocial services - Organize play facilities for vulnerable children - CFS/FTR

Five to Eight Years	
Education	<ul style="list-style-type: none"> - Form School Management Committee. - Identify & train facilitators - Create learning spaces & Safe Play Spaces - Provide learning materials (school in a box) - Parenting Education
Health	<ul style="list-style-type: none"> - Establish health check ups and follow ups (weekly for first 2 months, then twice a month) - Link up with mobile clinic, arrange regular visits to learning space - Set up immunization for all children at safe spaces - Provide a health record card for each child - Volunteer identification and training, teach prevention and first aid - Provide and display IEC material - Establish First Aid/ORS/Basic Medicines available at safe spaces
Nutrition	<ul style="list-style-type: none"> - Establish school feeding program - Distribute micronutrients (x2) per child per week - Provide meals in safe spaces - De worming - Monitor nutritional status in health check up and referral system, identify early warning signs for malnutrition
WASH	<ul style="list-style-type: none"> - Establish 2 toilets per safe space - Provide water points for safe spaces - Arrangement for regular maintenance - Hygiene kits

	<ul style="list-style-type: none"> - Vector control - Appropriate tools for young children to wash hands/defecate etc
Protection	<ul style="list-style-type: none"> - Register children separated from parents. - Set up child tracing and reunification system, coordinate with camp MTG committee & facilitate reintegration - Set up referral and counseling for children and caregivers - Develop psychosocial activities - Develop child-to-child self protection systems - Organize home visits - Register all children attending safe spaces, monitor attendance and provide follow up

ⁱ Created by the participants on Day Three of the ECD in Emergencies Workshop, Phuket

ANNEX V

SWOT ANALYSIS:

AFGHANISTAN:

Strengths	Weaknesses
<ul style="list-style-type: none"> - Strong individual programmes (MOE, MOPH, CPAN, Unicef, Local partners) 	<ul style="list-style-type: none"> - Lack of awareness of need for ECD in Emergencies - Weak coordination between many of the stakeholders
Opportunities	Threats
<ul style="list-style-type: none"> - Technical Support regionally & globally - Funding - Stronger links between some agencies (Unicef, UNHCR, NDRR, MOLSA, STEP, CPAN) 	<ul style="list-style-type: none"> - Insecurity - Cultural Issues - Existence of many NGOS with no coordination

BANGLADESH:

Strengths	Weaknesses
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<ul style="list-style-type: none"> - Capable implementers available at all levels - ECD/ELD programmes already in place (Govt & partners) - BEN - ECD materials & tools available - Established Forums & Networks on CR 	<ul style="list-style-type: none"> - Lack of coordination at all levels - Not prioritized as an Emergency response - Not addressed in current policy & strategy - Specific materials on EiE do not exist - Shortage of resources & funds - Insufficient capacity - Procedural restrictions
Opportunities	Threats
<ul style="list-style-type: none"> - Recent recognition by Govt. for need for ECD in Emergencies & some steps taken - Positive environment for change in Govt & with partners - Flexible emergency funding by donors 	<ul style="list-style-type: none"> - Climate Change - Frequent natural disasters - Poverty

CHINA:

Strengths	Weaknesses
<p>Government:</p> <ul style="list-style-type: none"> - Policy makers - Powerful - Resourceful <p>NGO</p> <ul style="list-style-type: none"> - Influential - Implementers - Able to respond rapidly <p>Academics</p> <ul style="list-style-type: none"> - Professional capability <p>International Agencies</p> <ul style="list-style-type: none"> - International expertise/experience - Resourceful - Ability to coordinate cross-country 	<p>Government</p> <ul style="list-style-type: none"> - Low priority for ECD - Very bureaucratic <p>NGO</p> <ul style="list-style-type: none"> - Lack of inter agency coordination - Limited resources - Limited influence on policy <p>Academics</p> <ul style="list-style-type: none"> - Limited resources - Limited influence on policy <p>International Agency</p> <ul style="list-style-type: none"> - Limited influence on policy
Opportunities	Threats

<p>Government</p> <ul style="list-style-type: none"> - Awareness raised though Wenchuan earthquake - Rising GDP - Society in agreement <p>NGO</p> <ul style="list-style-type: none"> - More openness - Stronger focus on Social Development - Civil society participation <p>Academic</p> <ul style="list-style-type: none"> - More opportunities to gain practical experience <p>International Agency</p> <ul style="list-style-type: none"> - Govt more willing to focus on emergency preparednes 	<p>Lack of awareness of need for ECD in Emergencies</p> <p>Poor coordination between different stakeholders</p>
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INDIA: CHHATISGARH STATE

Strengths	Weaknesses
<ul style="list-style-type: none"> - ECCE Policy - Joint Steering Group for ECCE - Integrated approach for Child Rights - Panchayath System - Availability of funding for ECCE (TWD, WCD, MOE) - Strong Govt. Ownership 	<ul style="list-style-type: none"> - No special directive for ECD in Emergencies - Coordination by line depts.. - WCD has no technical capacity - Curriculum not holistic (CP, CR, Life Skills, Hygiene) - Lack of focus on Tribals - No Institutional support base - Gaps in Human Resources
Opportunities	Threats

<ul style="list-style-type: none"> - Capacity Building of TWD, WCD, Panchayath - Experience sharing with other states/countries - Good community motivation & support - Self Help Groups - Strong Inter-State dialogue and coordination - 	<ul style="list-style-type: none"> - Poor Security in Sensitive Areas - No National Guidelines for ECCE in Emergencies - Frequent transfer of personnel - Linguistic diversity
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INDONESIA:

Strengths	Weaknesses
<ul style="list-style-type: none"> - Human resources - Funds - Tools (Training, Assessment etc) - NDM Act 2007 - Contingency Plans 	<ul style="list-style-type: none"> - Lack of Coordination - Availability of Up-to-date Data - Heavily bureaucratic system - ECD in Emergencies does not exist yet, low priority
Opportunities	Threats
<ul style="list-style-type: none"> - International support network - Potential resources 	<ul style="list-style-type: none"> - Global Economic Crisis - Climate Change - Disaster prone Country -

MALDIVES:

Strengths	Weaknesses
<ul style="list-style-type: none"> - Political will - Support from Funding Agencies - Increased interest (Govt & other) 	<ul style="list-style-type: none"> - Lack of adequate policies - Lack of human resources - Poor multisectoral coordination - Lack of community awareness of importance of ECD, especially in Emergencies
Opportunities	Threats

<ul style="list-style-type: none"> - Develop strong links to others working on ECD in Emergencies at all levels - Integrate ECD in Emergencies into existing ECD programmes 	<ul style="list-style-type: none"> - ECD in Emergencies is not a priority due to lack of information/data showing otherwise - Climate Change
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MYANMAR:

Strengths	Weaknesses
<ul style="list-style-type: none"> - Experience gathered working together for Narjis response (including Govt) - Common goals & objectives - Trained personnel on ECD/ accountability - Trainers easily deployed (SCF, YF, FBO) - Education cluster as a forum for info. sharing & coordination 	<ul style="list-style-type: none"> - Communication & transportation - Limited access to funding - Unpredictability in approval for interventions - ECD, in educational cluster meeting, not a priority - Credit for CFS? CP vs ECD. ECD kits & resources ECD, activities facilitated by CP. CP got the credit. - Coordination with private sector weak
Opportunities	Threats
<ul style="list-style-type: none"> - Increasing demand for ECD (Govt & communities) - Increasing recognition for ECD in Emergencies (Global, Regional) - More funding available (SC.M) 	<ul style="list-style-type: none"> - Political instability (election 2010) - Possible sanctions - Uncertainty of INGO position (sensitivity/scrutiny)

NEPAL:

Strengths	Weaknesses
<ul style="list-style-type: none"> - National Policy, strategy & guidelines - Established institutional structure of Government (National & Local) - ECD Network Group - Strong civil society & NGOs 	<ul style="list-style-type: none"> - Weak monitoring - Different levels of technical capacity - Low priority for ECDs in Emergencies - Inadequate human resources
Opportunities	Threats

<ul style="list-style-type: none"> - Constitution is being drafted (CRC included – ECD) - National/higher level interest increased in ECD - Allocated resources for ECD (per Child Fund PCF) - Increased allocations from Development Organisations/partners - Collaboration plan/Network of Govt/NGOs/UN 	<ul style="list-style-type: none"> - Political instability - Vulnerability/prone to emergencies & disasters - Climate Change may increase disaster frequency
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SRI LANKA:

Strengths	Weaknesses
<ul style="list-style-type: none"> - National Policy on ECCD - Expertise & Experience - Coordination & Networking (established clusters) - Established Coordination Structure (Children’s Secretariat) - Existing standards - Government commitment - Common Understanding among Stakeholders 	<ul style="list-style-type: none"> - Different priorities of different ministries - ECCD in Emergencies not included in National Policy - Information Dissemination amongst stakeholders is weak - Inadequate documentation
Opportunities	Threats
<ul style="list-style-type: none"> - Possibility of getting funding - Strong technical capacity at Regional and global levels 	<ul style="list-style-type: none"> - Economic crisis - Climate Change

VIETNAM:

Strengths	Weaknesses
<ul style="list-style-type: none"> - Strong National Strategy and Action Plan for ECD - Established Emergency Committees at all levels - Strong community commitment and participation 	<ul style="list-style-type: none"> - Poor coordination between key players - Weak early warning forecast systems - Need to increase Emergency Preparedness

Opportunities	Threats
<ul style="list-style-type: none"> - Strong Technical Support available at Regional and Global levels - More focus on ECD in Emergencies 	<ul style="list-style-type: none"> - No good model of ECD in Emergencies to work from - Economic Crisis - Climate Change - Poverty

VANUATU:

Strengths	Weaknesses
<ul style="list-style-type: none"> - Children's Desk now established - Strong support from NGOs & UN agencies - UN offices in country - Regular meetings of key players - Strong Provincial network 	<ul style="list-style-type: none"> - Communication problems - Lack of political willpower - Lack of funds - Lack of Govt advocacy/low priority - Lack of ECD resource personnel - No incentive for ECD teachers - Lack of coordination between different organisations
Opportunities	Threats
<ul style="list-style-type: none"> - Donor funding available - Advocacy with other partners - ECD in Emergencies/DRR – community level <p>ECD in Emergencies – awareness raising package for all levels</p>	<ul style="list-style-type: none"> - Climate Change - Unique land problems - Frequent disasters