

Analysis of **international aid levels** for early childhood services in crisis contexts

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Acknowledgments

This brief is the result of research undertaken in Fall 2019 as part of a collaboration between the Moving Minds Alliance and SEEK Development. The financial analysis is part of a broader set of analyses that also covered the institutional and advocacy landscape for early childhood development in emergencies globally, as well as policy and programming. This research benefitted from interviews and analyses conducted on these other topics.

The results of this research were presented at a Moving Minds Alliance workshop in December 2019 and in a webinar in February 2020. Comments and questions have been taken into account and integrated in this version.

About the Moving Minds Alliance

The Moving Minds Alliance is a funders collaborative and network convened to scale up coverage, quality and financing of support for young children and families affected by crisis and displacement. Drawing from on-the-ground experience and shared learning, Moving Minds seeks to catalyse a new way of responding to crises to address the inter-sectoral needs of the youngest refugees and their families.

Learn more: movingmindsalliance.org

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Acronyms

CRS	Creditor reporting system
ECD	Early childhood development
ECDiE	Early childhood development in emergencies
ECHO	European Civil Protection and Humanitarian Aid Operations
EU	European Union
FTS	Financial Tracking Service
G8	Group of Eight
HRP	Humanitarian Response Plan
KFW	Kreditanstalt für Wiederaufbau
MNCH	Maternal, newborn and child health
NCF	Nurturing Care Framework
ODA	Official Development Assistance
OECD	Organisation for Economic Co-operation and Development
OECD DAC	Organisation for Economic Co-operation and Development's Development Assistance Committee
RRP	Refugee Response Plan
UN	United Nations
UNICEF	United Nations Children's Fund
UNOCHA	United Nations Office for the Coordination of Humanitarian Affairs
WASH	Water, sanitation and hygiene
WFP	World Food Programme
WHO	World Health Organization



Key definitions

Early childhood development (ECD)

Early childhood development refers to the physical, social, emotional and cognitive abilities a child acquires from pregnancy to age 8. For the purpose of this analysis, we define early childhood as the period from conception to age 5. This is informed in part by the availability of previous methodologies to estimate funding specifically for children under 5, and in part by the type of services included in the funding analysis (i.e., excluding primary school).

Early childhood services

Early childhood services are interventions aimed at children and caregivers, focused on ensuring children's optimal physical, social, emotional and cognitive development between conception and age 8 (age 5 for this analysis). These include:

- Health services (e.g., maternal, newborn and child healthcare and hygiene);
- Nutrition services (e.g., exclusive breastfeeding, healthy eating);
- Protection interventions (e.g., birth registration, protection from violence);
- Responsive caregiving support (e.g., coaching caregivers on child development and caregiver responsiveness, caregiver mental health support); and
- Early learning opportunities (e.g., pre-school, childcare provision, learning through play).

For a full list of recommended early childhood interventions, see the [Nurturing Care Framework](#) (WHO, UNICEF, and World Bank 2018). See Annex 1 for a full list of services/keywords included in this research.

Early childhood development in emergencies (ECDiE)

This analysis focuses on funding for services supporting early childhood development in contexts of (humanitarian) crisis, which we refer to in the report as 'early childhood development in emergencies' (ECDiE). We define crisis as an acute or prolonged breakdown in a group's ability to meet their own needs independent of external support, caused by an event or series of events that represent a critical threat to the health, safety, security or well-being of the group (e.g., war/conflict, natural disaster, pandemics or a combination).

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Key insights

The first years of a child's life are a critical window of opportunity for optimal development, laying the foundations for learning, behaviour and well-being later in life.

Young children growing up in crisis settings are vulnerable to a range of compounding risks that threaten their long-term development and well-being. Evidence shows that quality early childhood services for young children and their caregivers can provide a buffer against these risks and help children reach their developmental potential.

Despite the growing need for investment in early childhood development in emergencies (ECDiE), no methodology currently exists to track and report on donor commitments and funding. This report aims to help fill that gap by estimating funding going to ECDiE in recent years.

Using a two-track methodology, the analysis draws insights from:



Development aid to countries affected by crisis



Humanitarian aid explicitly targeting early childhood interventions

The two-track logic builds upon growing interest in the humanitarian-development nexus, which may offer new potential funding sources for ECDiE. While the findings from these two tracks cannot be aggregated, they provide different sets of insights,

which stakeholders and advocates can use to make the case for increasing investment in services for young children and caregivers affected by crisis.

This report is a first attempt to estimate current global funding levels towards early childhood development in crisis settings. To better understand the extent to which children and their caregivers in crisis-affected contexts are supported to survive and thrive, donors, decision-makers and advocates should push for increased transparency on, and traceability of, funding for ECDiE. Finally, while this report provides initial insights on current funding levels, the funding need—and thus the extent of the gap—is still unknown. An overarching funding goal for ECDiE needs globally—based on scenario planning informed by the findings of this analysis—is being developed by the Moving Minds Alliance and its partners.

Despite the growing need for investment in early childhood development in emergencies, no methodology currently exists to track and report on donor commitments and funding.

Key insights:

Development funding

15% 
Humanitarian aid

85% 
Development aid



Source: OECD CRS

Development aid is an important source of financing for ECDiE. Development aid represented 85% of all international assistance in 2017. A growing share goes to countries covered by Humanitarian Response Plans or Refugee Response Plans: 44% of all Official Development Assistance (ODA) for early childhood development—US\$ 2.5 billion in 2017—went to countries affected by crisis. See Figure 1

While the absolute amount of funding has increased, the share of development aid for ECDiE is consistently low. Even if the total amount of early childhood development (ECD) funding in crisis-affected countries is rising (up from US\$ 1.3 billion in 2013), it represents only 3.3% of total development aid going to crisis-affected countries in 2017 (up marginally from 2.7% in 2013). See Figure 5

Trends suggest a growing role for multilateral organisations as funders of ECDiE. While traditional bilateral donors are responsible for 49% of development funding for ECDiE, the share of funding from multilaterals has risen from 39% in 2013 to 51% in 2017. The World Bank leads the way, contributing 11% of all development funding for ECDiE in 2017—a significant increase from just 4% in 2013. See Figure 7

Integrating missing ECDiE elements into already funded health and nutrition programs is an effective way to increase access for young children and caregivers in the near term. In crisis-affected countries, 95% of development aid consistently goes to health and nutrition interventions. Although these interventions already serve the target audience for ECDiE, they often neglect critical services, such as caregiver coaching and mental health support. Integrating elements of ECDiE into these well-established sectors could be an expedient approach to increasing coverage, while also addressing unmet needs. See Figure 6

Education and WASH services for children under 5 years old are severely underfunded; for child protection and responsive caregiving interventions, information on funding is unavailable. Only 2% of ECD funding for crisis-affected countries goes to WASH, and only 1% to pre-primary education. Responsive caregiving and child protection—two critical elements of nurturing care and ECDiE—are not traceable in existing datasets. More precise tagging of funding for children under 5 years old would help improve tracking of resources going to these areas. See Figure 6

Key insights:

Humanitarian funding

The share of aid for ECDiE is consistently **LOW**



At just 2%, the share of humanitarian aid supporting ECDiE is minimal. Humanitarian aid explicitly targeting ECD stood at US\$ 463 million in 2018, only 2% of the total. This excludes two private foundation grants of US\$ 100 million each awarded to ECDiE projects in 2018 (to be disbursed over five years), suggesting that philanthropy has played a growing role in humanitarian financing for ECDiE in recent years.

See Figure 8

Together, three bilateral donors and the EU provided 75% of all ECDiE funding in 2018. Germany (US\$ 143 million), the United States (US\$ 73 million), the United Kingdom (US\$ 22 million) and the European Union (US\$ 109 million) are also the largest donors to the humanitarian sector overall. UNICEF, the UN agency focused on children, contributed US\$ 25 million (5%) to ECDiE.

See Figures 11 & 12

Within the humanitarian cluster system, most humanitarian funds for ECDiE go to food security and nutrition. Education, WASH and child protection all manage less than 5%. Food security and nutrition manage US\$ 55 million each, or a combined 53% of total cluster funds for ECDiE. Four other clusters with direct relevance to ECDiE manage 27%: health (17%), education (5%), child protection (3%) and WASH (2%).

See Figure 9

Coordination of funds across clusters to meet the needs of children under 5 years old is limited. Less than one-fifth of ECDiE funds (19%) is reported as 'multi-sector' funding (i.e., including at least one ECD-related sector, such as health, nutrition or education).

See Figure 9



Introduction

Early life experiences shape the architecture of the brain and lay the foundation for later development and inequities.

Appropriate support for children’s physical, mental and socioemotional needs, and close relationships with nurturing caregivers during this time can form the foundation for lifelong success and resilience, family and societal cohesion, and sustainable and peaceful societies. Conversely, the absence of consistent, responsive relationships and stimulation during the early years can pose a serious threat to a child’s development and well-being. As noted in previous reports and briefs,¹ children and families facing crisis, conflict and forced displacement are especially vulnerable to these threats and are in need of quality and holistic early childhood development (ECD) services.^{2,3}

In the context of crisis or forced displacement, quality ECD integrates essential interventions into health, nutrition, early learning and education, child protection, HIV/AIDS and WASH, as well as social policies and services that support children’s development and uphold their rights. Providing this care and counteracting the negative impacts of conflict and crisis on young children and families requires investment and cooperation across national boundaries.

Increasing interest in ECD among international donors has so far failed to translate into significant, concrete action.

Increasing interest in ECD among international donors has so far failed to translate into significant, concrete action. Moreover, it has remained a lower priority topic within discussions around humanitarian aid. Data and standards to assess current investment levels in early childhood development in emergencies (ECDiE) are underdeveloped. Due to a siloed system for humanitarian assistance and the cross-sectoral nature of early years interventions, this crucial area of support often falls in between the main sectoral clusters, making it difficult to track commitments and assess whether they are translated into action. Similarly, national government budgets do not lend themselves to identifying the comprehensive set of investments benefiting young children.

In this context, the need for accurate and comprehensive tracking of programmatic interventions and funding is greater than ever. Accurate data is essential for advocates, donors, governments and practitioners to identify emerging opportunities and monitor critical gaps. In addition, clear standards enable donors and policymakers to ensure quality assistance and focus their efforts on the most effective interventions.

Interventions focused on the early years of a child’s life that are known to deliver short-term and long-term positive outcomes are more relevant than ever in a world increasingly characterized by protracted conflict and displacement. Crises today displace more people and last longer. Between 2014 and 2018, the

¹ See Resources/Bibliography, page 28. ² Bouchane et al., 2018. ³ Moving Minds Alliance, 2019.

Figure 1 Total international assistance, 2017



Source: OECD CRS

average length of crises nearly doubled to more than nine years, and nearly three quarters of people now targeted for humanitarian assistance are in countries impacted by humanitarian crisis for seven years or more.⁴ As displacements become progressively more permanent, the acute responses of the humanitarian sector begin to shift increasingly towards long-term development projects. Key actors including UNOCHA and the OECD DAC have not only pointed out the increasingly blurred lines between the humanitarian and development sectors, but have also called for a multidisciplinary lens to address the short- and long-term needs of crisis-affected persons.^{5,6}

Early childhood development in emergency settings sits at the nexus of humanitarian and development assistance, as these programmes address the acute needs of very young children and caregivers, while also contributing to improved individual and societal outcomes in the longer term. This is reflected in donor financing as well, as the analysis shows

increasing complementarity between development and humanitarian aid for sectors relevant to the early years, such as for social services and infrastructure, health and education.⁷ In absolute terms, much larger amounts are spent on development aid (including in crisis-affected countries) than for humanitarian aid: In 2017, development aid stood at US\$ 164 billion (85% of total international assistance), with the remaining US\$ 28 billion provided as humanitarian aid (15%). Analysing both humanitarian and development approaches and financing flows for this age group is therefore necessary.

Accordingly, this report presents two initial approaches to reach a better understanding of the current development and humanitarian financing landscape for ECDiE. Our hope is that a clearer picture of the existing investments and remaining funding gaps will bring further resources and attention to this critical field and continue to elevate ECDiE on donors' agendas.

⁴ UNOCHA, 2019.

⁵ UNOCHA, "Humanitarian Development Nexus: The New Way of Working," <https://www.unocha.org/fr/themes/humanitarian-development-nexus>

⁶ OECD DAC, 2019, "DAC Recommendation on the Humanitarian-Development-Peace Nexus," <https://legalinstruments.oecd.org/en/instruments/OECD-LEGAL-5019>.

⁷ Development Initiatives, 2019. The *Global Humanitarian Assistance Report 2019* shows gradual increases in funding for social infrastructures and services as crises continue: +27% in fifth year of response compared to year before appeal. Data based on 27 countries with 5 or more consecutive years of UN-coordinated appeals between 2000 and 2017.

Methodological approach

To develop initial estimates of funding for ECDiE, we take a two-track approach that draws insights from two of the most comprehensive and authoritative databases on development assistance and humanitarian aid:



For Development Aid

The Organisation for Economic Co-operation and Development (OECD)'s [Creditor Reporting System \(CRS\)](#)



For Humanitarian Aid

The United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA)'s [Financial Tracking Service \(FTS\)](#)



Figure 2 Nurturing Care Framework



Source: WHO, UNICEF, World Bank 2018

For this analysis, we employ a holistic definition of ECD, based on the widely accepted [Nurturing Care Framework](#) developed by the WHO, UNICEF, and the World Bank.⁸ ECD services are typically delivered through multiple sectors and ideally require coordination across the essential domains of child development: responsive caregiving, early learning, health, nutrition, and protection (or safety and security). They include interventions from the pre-natal period through children’s entry into primary school, focusing on the child and their direct environment, including the primary caregiver(s).

Accurately tracking ECD funding is a complex task. This is due in part to the multisectoral nature of the most critical interventions and the current lack of a marker to track or tag investments in the early years across the different databases. This means we are forced to rely on global proxies to estimate funding for ECDiE. Based on the structure and content of each database and the availability of previous estimates for ECD funding, we have developed two distinct methodologies. Both approaches aim to isolate disbursements for children under five⁹ years old and their caregivers.

...we are forced to rely on global proxies to estimate funding for ECDiE

⁸ World Health Organization, UNICEF and World Bank Group, 2018.

⁹ The age range chosen for this analysis was determined by the availability of previous methodologies to estimate funding for children under five. It is not a reflection of a decision by Moving Minds Alliance or SEEK Development to restrict the definition of ECD interventions to those that target children younger than five – see Key definitions above.

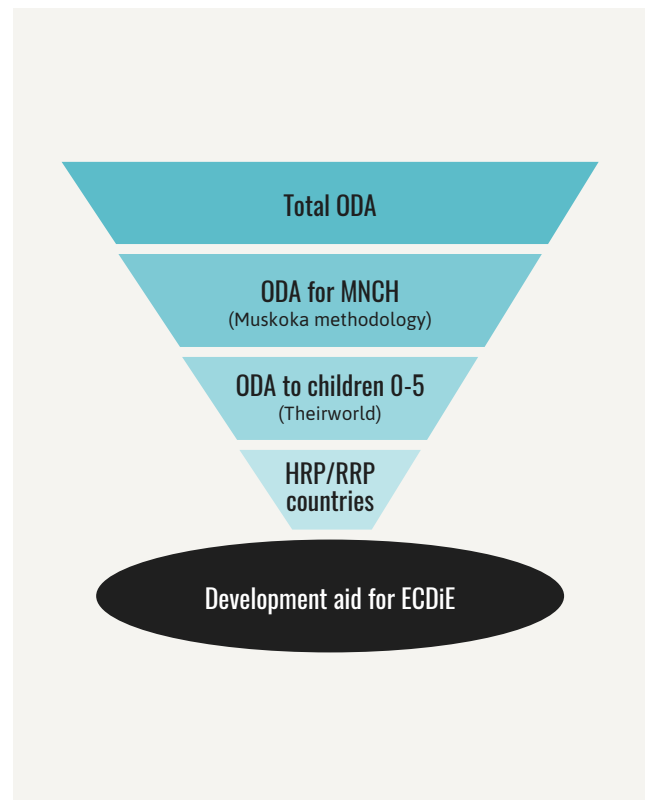
Methodological approach:

Development aid

The analysis of development aid builds upon several layers of existing methodology to estimate funding for early childhood services in crisis-affected countries. This includes the methodology for tracking donor disbursements for ECD services developed by Theirworld,¹⁰ which itself builds upon the Muskoka methodology,¹¹ devised by the 2010 G8 Health Working Group to capture aid disbursements to maternal, newborn and child health (MNCH). These are all based upon the self-reported funding as submitted to the OECD CRS mechanism of governments' disbursed budgets. These methodologies only take into account development assistance and thus exclude funding reported to the OECD CRS as humanitarian aid. This methodology provides an imputed share for each relevant sector to estimate global funding benefitting children between the ages of zero and five (including the pre-natal period) and their caregivers (see Annex 2 for the share of each OECD CRS purpose code imputed to MNCH and to children under five). To look at funding potentially available for ECDiE, we restricted our analysis to countries that were covered either by a Humanitarian Response Plan (HRP) or a Refugee Response Plan (RRP) in a given year (see Annex 3).

¹⁰ Theirworld, 2019. ¹¹ G8 Health Working Group, 2010.

Figure 3 ODA for ECD in crisis-affected countries



Data limitations and important notes:

- Data only includes donors providing official development assistance (ODA), including bilateral donors and public multilateral institutions (e.g., UN organizations, development banks, vertical funds, EU Institutions). Private donors were excluded due to irregular reporting and the inability to compare data over time.
- This methodology focuses on funding dedicated to health; nutrition; water, sanitation and hygiene (WASH); and education, but does not allow us to isolate funding for responsive caregiving and child protection, two very important components of ECDiE. Nor does the methodology benefit from real-time insight in national budget allocations or stated political priorities.
- The list of countries covered by HRP/RRPs varies each year, often driving strong variations in the data. In addition, the methodology yields estimates for funding going to these countries *as a whole*, and does not enable us to differentiate, within that funding, the share that went to conflict- or displacement-affected populations specifically. These data are nevertheless increasingly relevant due to the growing drive to integrate emergency response within host states and to support these countries with response coordination.
- Analysis ran up until 2017, the latest data available at the time of the analysis.

Methodological approach:

Humanitarian aid

This analysis of humanitarian aid explicitly targeting ECD builds upon similar approaches used in previous analyses. These include the methodology developed by Save the Children¹² to track humanitarian funding for child protection and a 2019 paper on accountability for funds for Nurturing Care published in the *Archives of Disease in Childhood*.¹³ The analysis aims to isolate humanitarian aid that explicitly targets early childhood services and is based on data reported to the UNOCHA FTS, the most comprehensive public data source on humanitarian aid. To provide an overview of funding explicitly targeting ECD within humanitarian aid, we created a keyword search that isolated all projects whose description included at least one keyword that points to an ECD-related intervention (see Annex 1), creating a subset of funding flows, on which we then ran the different analyses.

¹² Thierry, 2019. ¹³ Arregoces et al., 2019.

Figure 4 Humanitarian aid explicitly targeting ECD interventions



Data limitations and important notes:

- The FTS database is restricted to internationally provided aid and excludes domestic expenditure on crisis response within a government's own borders. Reporting is done on a voluntary basis by donors and recipient organizations; keywords search output is therefore dependent on the quality and completeness of funding flows and project descriptions by reporting institutions.
- Keyword-based research always contains a degree of subjectivity due to the selection of keywords and to differences in how donors describe their projects.
- This methodology only selects projects that explicitly mention ECD-related interventions (as per the keywords listed in Annex 1), and thus does not take into account funding flows that indirectly or implicitly benefit children under age five and their caregivers.
- Data is reported in real time. Flows analyzed in the context of this analysis are up to 2018 (latest complete year at the time of the analysis).
- Two large grants of US\$ 100 million each from two private foundations, The John D. and Catherine T. MacArthur Foundation and the LEGO Foundation, awarded for ECDiE programs in December 2017 and December 2018 respectively, were not included as they had not been reported to the UNOCHA FTS at the time of the analysis. Both grants run over a five-year period.

Findings

The findings of this analysis summarise the financing situation in two areas:



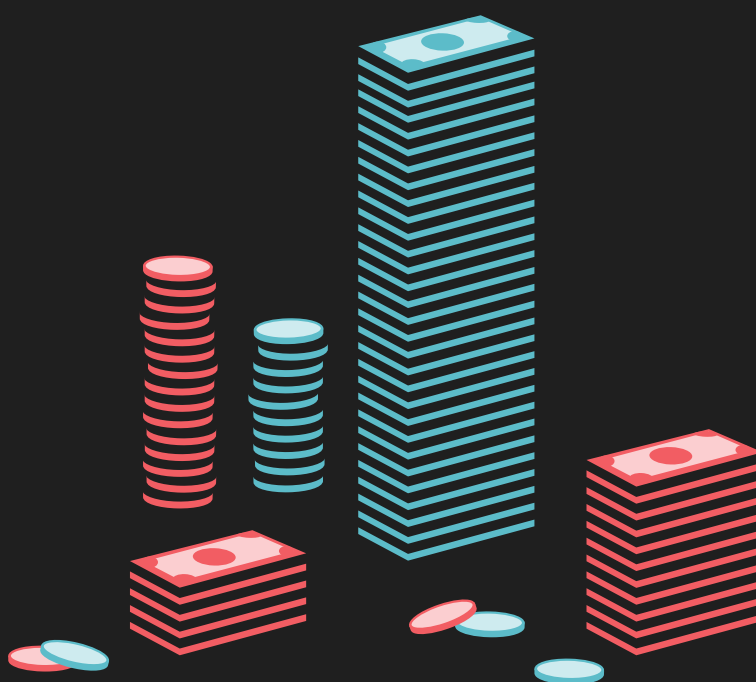
Development aid for ECD in crisis-affected countries

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Humanitarian funding flows explicitly targeting ECD

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Note: All funding amounts are listed in US Dollars (US\$)

Findings overview:

Development aid

Beginning with development aid, trends in ODA volumes show funding for ECD in crisis-affected countries has doubled since 2013, reaching a total of US\$ 2.5 billion in 2017. However, despite increases in absolute amounts, the proportion of ECD within overall ODA has remained relatively stagnant and low; in 2017, it represented 3.3% of total ODA spent in crisis-affected countries (largely stable from 2.7% in 2013).

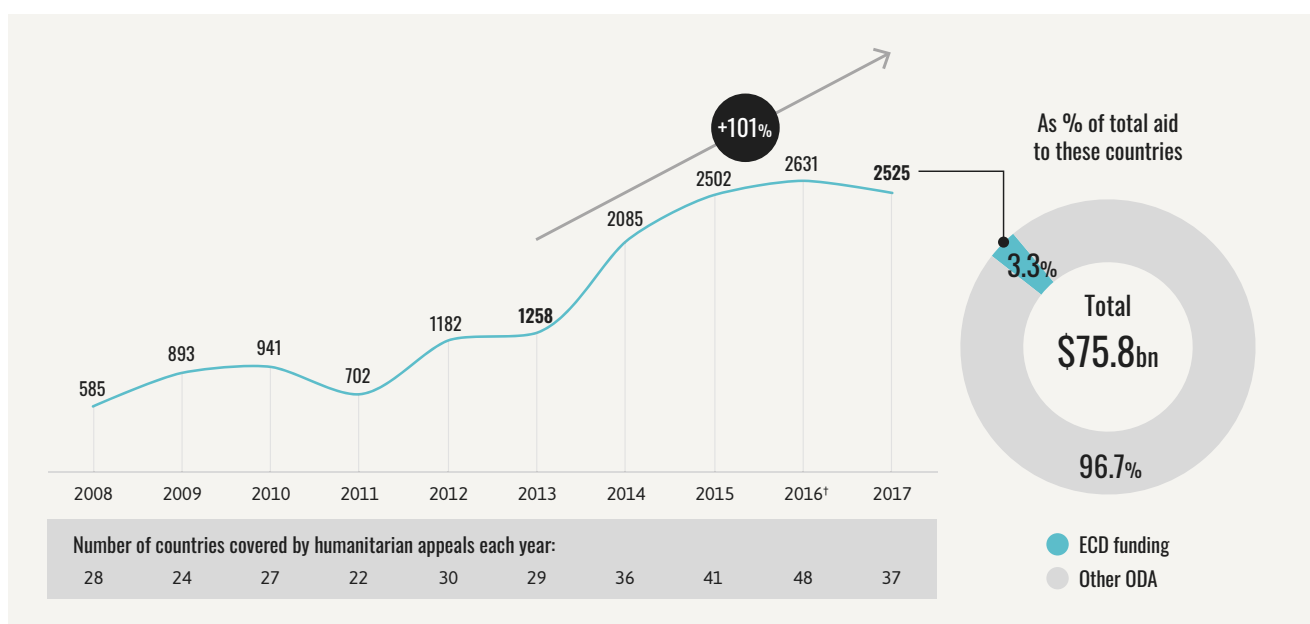
The increase in the overall funding envelope for ECD in crisis-affected countries is largely explained by the growing number of countries placed within this category, rather than an increased focus on ECD. In the same time period that total ODA funding for ECD in crisis-affected countries doubled, the number of countries covered under this definition (i.e., those covered by HRP/RRPs) increased from 29 to 37,

Almost half (44%) of development aid going towards ECD is now spent in countries affected by crisis (up from 14% in 2013).

including some countries that traditionally receive large amounts of ODA (e.g., Nigeria and Ethiopia). This means that almost half (44%) of development aid going towards ECD is now spent in countries affected by crisis (up from 14% in 2013), showing the increasing need to address barriers faced by young children in crisis settings specifically.

When interpreting these numbers, it is important to remember that they are an imperfect indicator of funding devoted to ECDiE, as they only show financing for ECD spent within a country affected by crisis, rather than financing spent directly and only for populations affected by the crisis. However, the numbers remain highly relevant as an indicator, particularly in a context in which the role of host country governments becomes increasingly important.

Figure 5 Development aid for ECD in crisis-affected countries,* US\$ millions



Source: SEEK Development estimates. *Crisis-affected countries are countries covered by a humanitarian appeal or refugee response plan in a given year (including regional plans). †2016 includes countries covered by regional appeals for Europe Situation and for the Sahel (see Annex 3).

Trends in the sector distribution of ECDiE funding suggest a concentration of resources within some sectors and a scarcity of resources in others. Out of all funding going to ECD in crisis-affected countries, more than 90% consistently goes to health and nutrition interventions, which are typically delivered as standard components of humanitarian response. This is consistent with the findings from Theirworld,¹⁴ which found that in 2017, 95% of ECD-related funding was spent on traditional health- and nutrition-related interventions. This leaves little funding for interventions such as WASH (2%), pre-primary education (1%) and other critical programmes. Notably, responsive care and child protection are not tracked in OECD CRS, so it was not possible to isolate funding for these two critical elements of nurturing care.

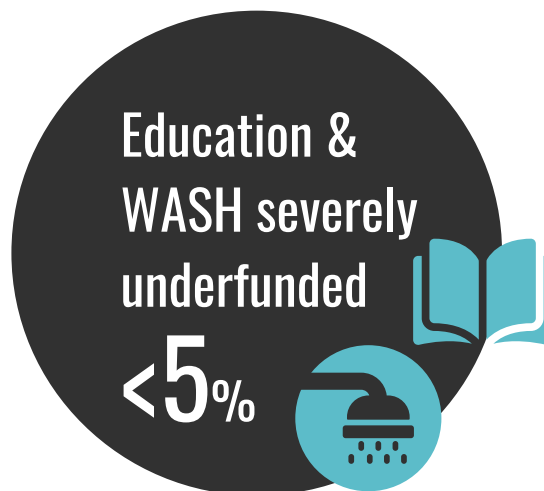
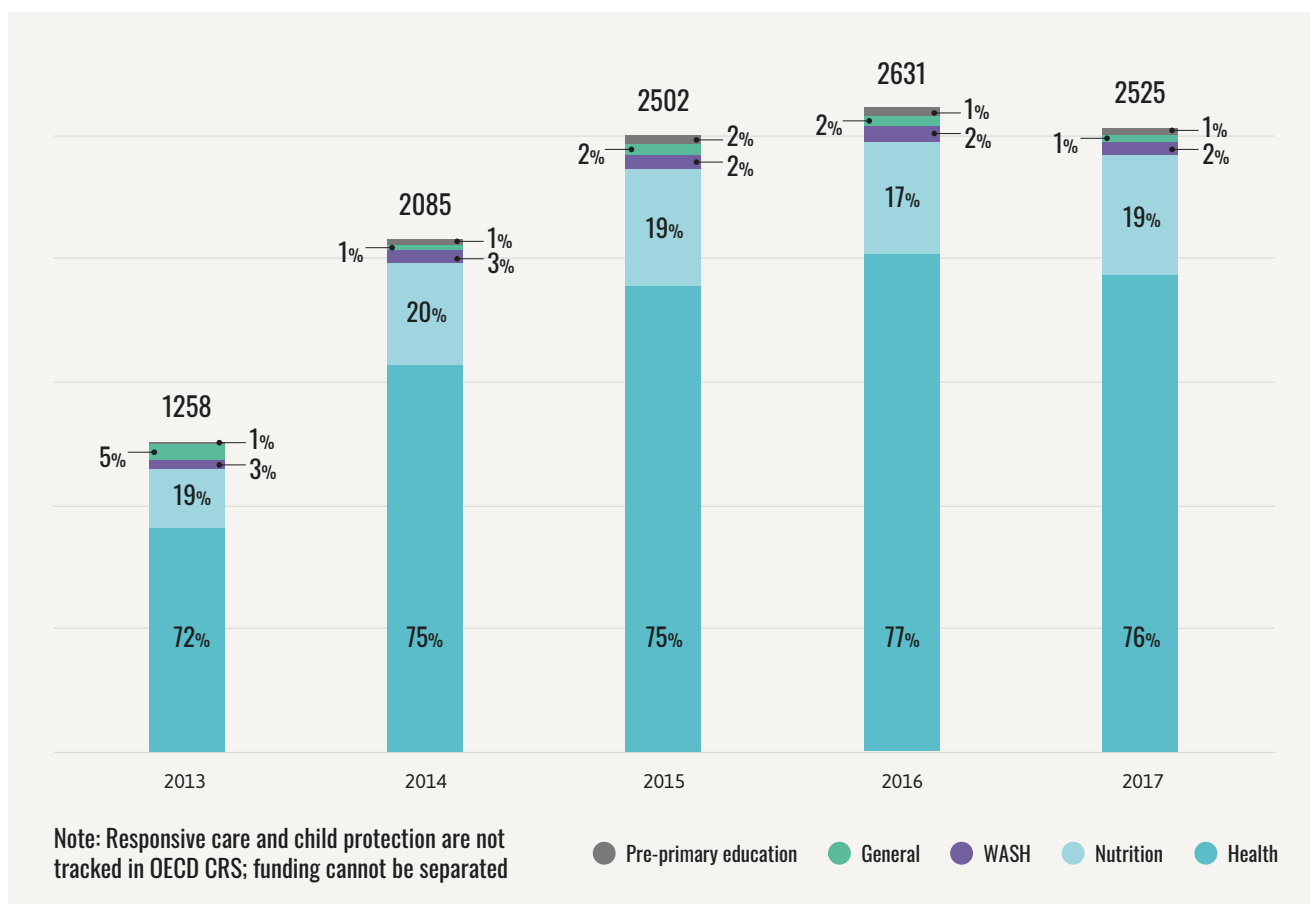


Figure 6 Development aid for ECD in crisis-affected countries, by sector, US\$ millions



Source: SEEK Development estimates

¹⁴ Zubairi and Rose, 2019.

Since 2013
multilateral
funding is up
12%

The overall distribution of donors to ECDiE also reflects the importance of multilateral organisations. Bilateral donors—primarily OECD DAC members—play an important role, directing 49% of ECD funding in crisis-affected countries in 2017. At the same time, funding trends suggest a growing role for multilateral organisations, as their share of ECDiE funding has risen to 51% in 2017, up from 39% in 2013. This growth is due in large part to stronger engagement from the World Bank, which in 2017 represented 11% of all funding ECDiE, up from just 4% in 2013.

Figure 7 Development aid for ECD in crisis-affected countries, by type of provider, 2017, US\$ millions



Source: SEEK Development estimates

Findings overview:

Humanitarian aid

Of all humanitarian funding reported in 2018, only 2% explicitly targeted the early years or mentioned ECD-related interventions.

ECDiE funding within humanitarian aid is more complex to track and report, as no methodologies currently exist to estimate the share of ECD funding within broader sectors or clusters. Our research shows that very few humanitarian funding flows explicitly mention children under five as a target, or use ‘Early Childhood Development’ and related interventions in project descriptions.¹⁵ Of all funding reported to the UNOCHA FTS (US\$ 25.2 billion in 2018), only 2% (US\$ 463 million) explicitly targeted the early years or mentioned ECD-related interventions (309 programs).

Looking at the reported sector focus of financing flows, funding for ECD is very fragmented: the largest share (37%, US\$ 171 million in 2018) was reported as ‘multi-sector’ funding (including at least one ECD-related sector, such as health, nutrition or education). This is followed by nutrition (16%, US\$ 74 million), and food security (14%, US\$ 65 million, driven by a large WFP program in Somalia).¹⁶ This fragmentation highlights once again the cross-sectoral nature of ECDiE, and points to the difficulty for the issue to gain traction in a system largely driven by existing thematic clusters.

A look within the humanitarian cluster system shows that slightly below half of ECDiE funding (45%; US\$ 207 million in 2018) is managed by existing clusters. A closer look at the distribution across clusters provides insights into which clusters currently manage the largest funding flows targeting ECDiE, as well as how future coordination might work.¹⁷ Although there is no single cluster with responsibility for all elements of ECD, the largest share is managed by the Food Security Cluster (27%, US\$ 55 million, driven by WFP programs), followed by nutrition (26%, US\$ 55 million) and health (17%, US\$ 35 million). Almost a fifth (19%, US\$ 39 million) is reported as managed by multiple clusters. Of these, Global Nutrition is the cluster that manages the largest share relative to other sectors included in the Nurturing Care Framework. Education and child protection receive relatively small amounts (respectively, 5%, US\$ 11 million and 3%, US\$ 6 million).

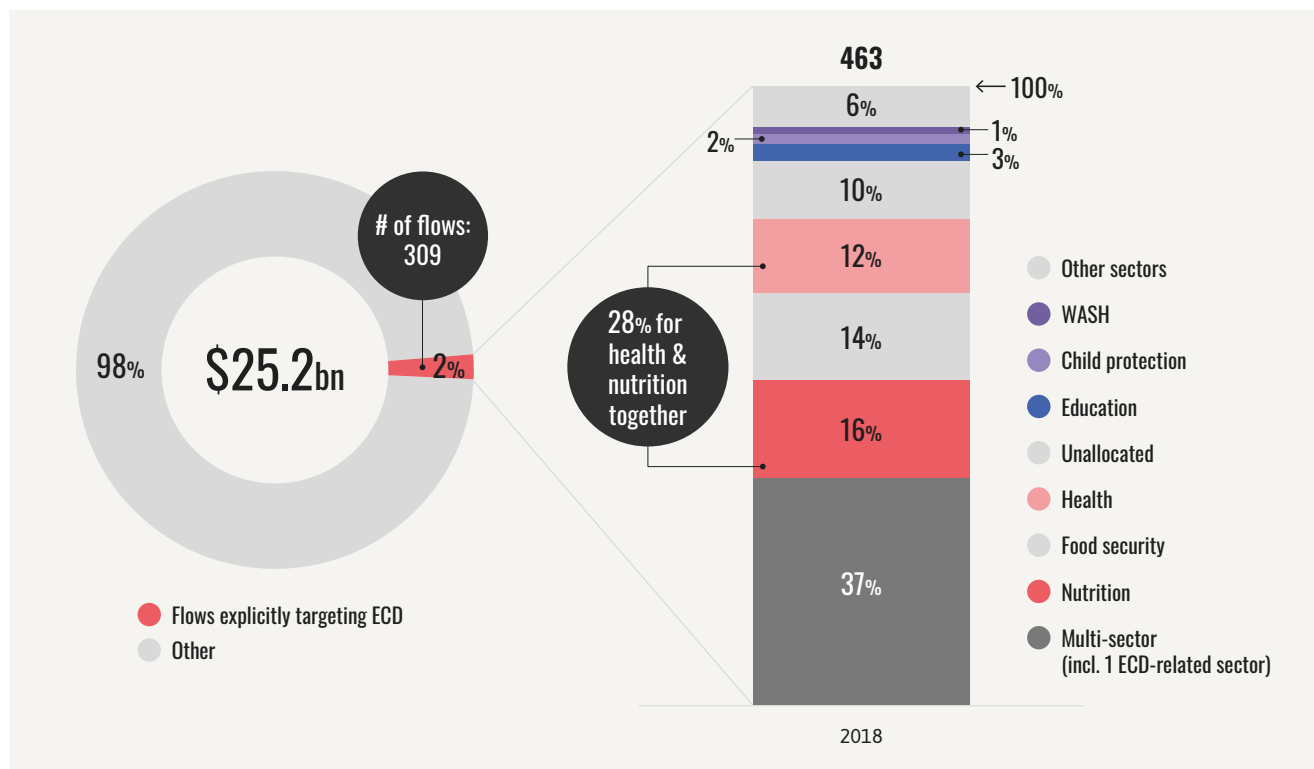


¹⁵ See ‘Methodological approach’ section for more details on what exactly this entails.

¹⁶ Note that due to different reporting systems and data structures, these numbers are not directly comparable with development aid figures cited above. For instance, funding flows cannot be reported under several sectors to the OECD CRS database, whereas these make up the largest category of ECD flows reported to the UNOCHA FTS.

¹⁷ There is currently no clear agreement on which cluster(s), if any, should take on coordination of ECD within humanitarian response.

Figure 8 Humanitarian aid flows explicitly mentioning ECD interventions, by sector, 2018, US\$ millions



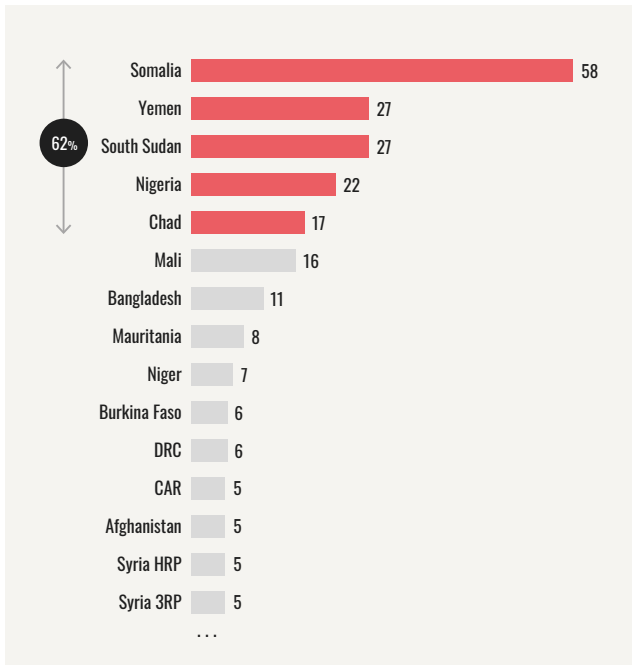
Source: SEEK Development estimates

Figure 9 Humanitarian aid flows explicitly mentioning ECD interventions, by cluster, 2018, US\$ millions*

Cluster	US\$ millions (% of funds managed by clusters)	Related to Nurturing Care Framework
Food security	55 (27%)	
Nutrition	55 (26%)	●
Multiple clusters	39 (19%)	
Health	35 (17%)	●
Education	11 (5%)	●
Protection	7 (4%)	
Child protection	6 (3%)	●
WASH	4 (2%)	●
Other clusters	2 (1%)	

Source: SEEK Development estimates. *Only includes flows reported under a specific cluster, i.e., 45% of total humanitarian aid explicitly targeting ECD, for a total of US\$ 207 million.

Figure 10 Top 15 HRPs/RRPs receiving humanitarian aid explicitly mentioning ECD, 2018, US\$ millions

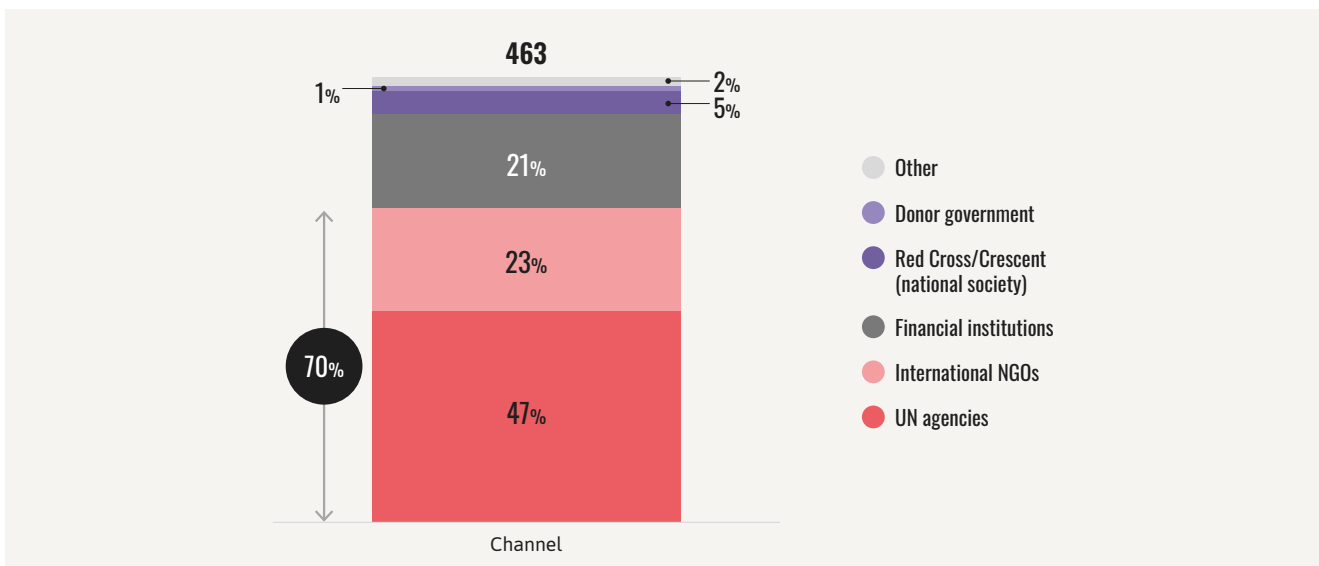


Source: SEEK Development estimates

In line with trends common to humanitarian aid overall, the bulk of funding for ECDiE is concentrated within a handful of HRPs/RRPs. Of the humanitarian aid for ECDiE that went to HRPs/RRPs, 62% (US\$ 151 million) went to five HRPs: Somalia (US\$ 58 million), Yemen (US\$ 27 million), South Sudan (US\$ 27 million), Nigeria (US\$ 22 million), and Chad (US\$ 17 million). The other 24 plans shared the remaining 38% of ECDiE funding for HRPs/RRPs.

Before reaching these countries, humanitarian aid for ECD is largely channelled through international organisations, which are key actors in humanitarian programme implementation. The primary implementers include UN agencies and international non-governmental organizations (NGOs), which receive 47% and 23% respectively of all humanitarian flows for ECD. The largest channels in 2018 were UNICEF (US\$ 114 million), WFP (US\$ 71 million) and the Red Crescent Society of the United Arab Emirates (US\$ 10 million). Financial institutions and development banks also represent a large share (21%), although all of this funding comes from the German Development Bank, KfW (US\$ 98 million).¹⁸

Figure 11 Humanitarian aid flows explicitly mentioning ECD interventions, by channel, 2018, US\$ millions



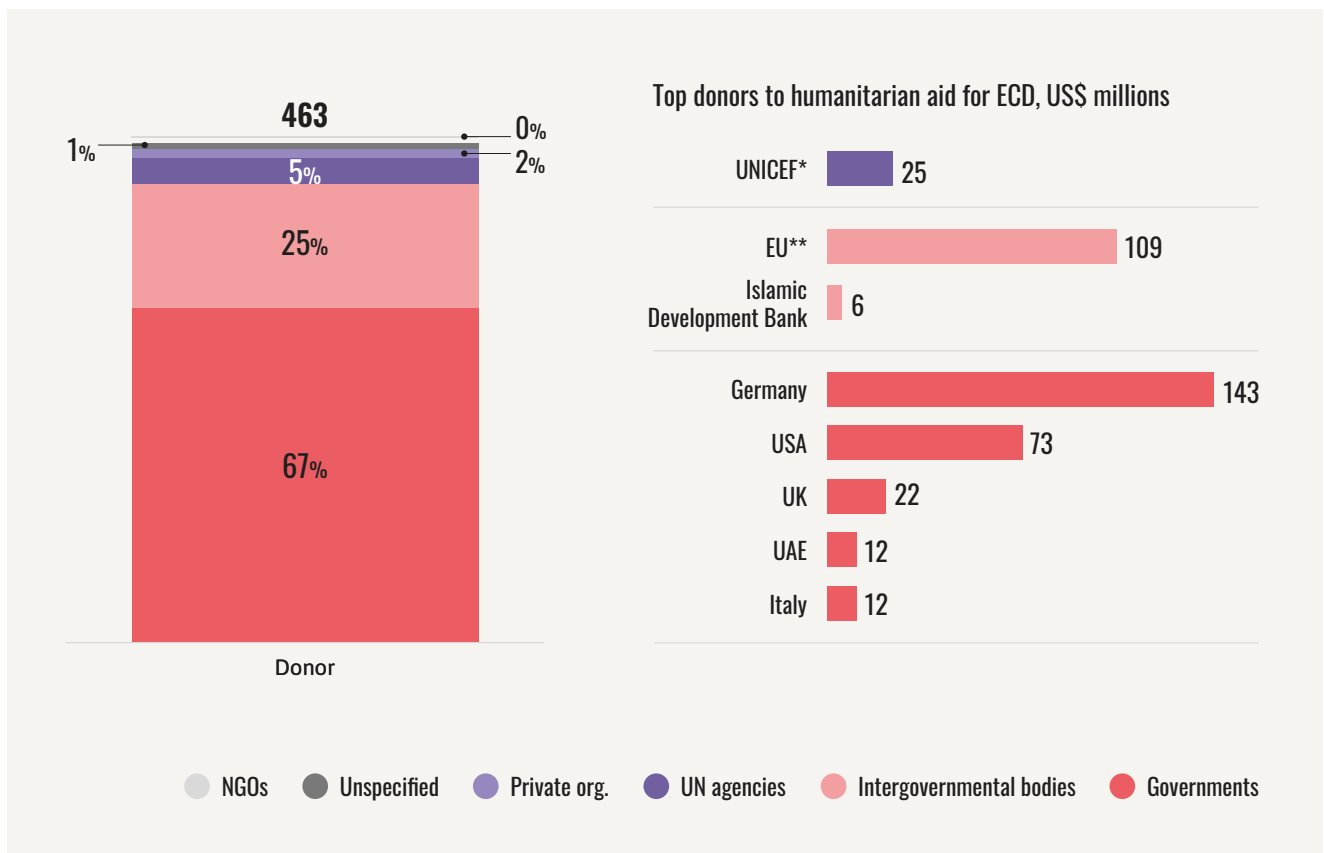
Source: SEEK Development estimates

¹⁸ This funding is made up of two large funding flows: 1) US\$ 85 million in Iraq to improve access and quality of public education, psychosocial and psychological support, public water supply and sanitation facilities, 2) US\$ 13 million in Somalia to 'offer children and young people improved access to basic education and quality early childhood development opportunities as well as improved access to appropriate basic services.'

75% 
**funding from
 3 bilateral and
 1 multilateral
 donors**

Humanitarian funding for ECD comes primarily from a few key public donors. Governments are the source of 67% of all funds (US\$ 310 million in 2018), with intergovernmental bodies (primarily the EU) representing 25% (US\$ 116 million). Among donor governments, Germany, the United States, and the United Kingdom are the largest donors, directing US\$ 143 million, US\$ 73 million and US\$ 22 million respectively in 2018. These three bilateral donors and the EU provided three quarters of all funding in 2018. They are also the largest bilateral donors for humanitarian aid overall. UNICEF, the UN agency focused on children, contributed US\$ 25 million (5%) to ECDiE.

Figure 12 Humanitarian aid flows explicitly mentioning ECD interventions, by donor, 2018, US\$ millions



Source: SEEK Development estimates. *This represents the portion of UNICEF funding (22%) that is not attributed to a specific donor, and so is reported as originating directly from UNICEF. The original source of these funds is not known. **EU funding includes both ECHO and the European Commission.

Conclusions and key insights

This report presents a first attempt at estimating current funding levels towards ECDiE, looking at both development aid and humanitarian aid. Despite limitations to data availability, the methodology and analysis show the low level and relative paucity of funding for ECD in crisis-affected countries.

While an absolute growth in funds is observed in recent years, the share of ECDiE within total international assistance is stagnant. Thus, the needs of millions of young children and their caregivers affected by crisis remain overlooked and underfunded.

Within development aid, ECD represents only around 3% of total development funding to crisis-affected countries—a share that has remained low in the past years. Crisis-affected countries represent a growing share of global development funding for ECD: US\$ 2.5 billion in 2017, or 44% of global ECD funding. The bulk of these funds are directed towards health and nutrition interventions (95%); much smaller proportions go to early childhood education (2%) and WASH (1%). No information is available on development funding for child protection and responsive caregiving through the methodology used in this analysis. Growth in funding is increasingly driven by multilateral organizations, the World Bank in particular.

With regard to development aid, the sectoral distribution suggests an opportunity to integrate missing elements of holistic child development (e.g., responsive caregiving) into health- and

nutrition-related interventions that are already funded, including through large vertical health funds. The Global Fund to Fight AIDS, Tuberculosis and Malaria, and Gavi, for instance, are increasingly working in crisis-affected contexts and have access to the target populations for ECD. In addition, there is a need and opportunity to further engage multilateral organisations (not just traditional bilateral donors) to increase (new) funds for ECDiE across sectors (e.g., education and WASH).

In the humanitarian sphere, the share of funding explicitly targeting ECD interventions is at a similarly low level: just 2% of total humanitarian aid in 2018, or US\$ 463 million. This funding cuts across all sectors and clusters, but remains highly concentrated in the hands of a few donors and goes towards a small subset of Humanitarian and/or Refugee Response Plans. UN agencies (including UNICEF) and international NGOs are crucial in implementing ECD services: together, they channelled 70% of ECDiE funding on the ground.

The needs of millions of young children and their caregivers affected by crisis remain overlooked and underfunded.

Currently, the cross-sectoral nature of ECD is reflected in the structure of the funding and highlights the difficulty for ECD to find a 'natural' place within the current, siloed cluster system. Efforts should focus on ensuring adequate tracking and coordination, to ensure the multi-dimensional needs of young children are met. In terms of increasing funding, a promising way forward may be to work with existing ECDiE donors to further increase their investments in underfunded elements of ECDiE, and build champions that will, in turn, bring other donors on board.

Finally, defining an overall funding need for ECDiE—based on a shared vision of the minimum adequate response and a solid assessment of their

costs—would be a powerful data point for donors, advocates and other stakeholders. Moving Minds Alliance and partners are working to further increase insight into financing needs in order to support the youngest crisis-affected children in their development, and welcome other partners and advocates to join in this effort.

Efforts should focus on ensuring adequate tracking and coordination, to ensure the multi-dimensional needs of young children are met.

Key insights:



Development funding

Development aid is an important source of financing for ECDiE. Development aid represented 85% of all international assistance in 2017. A growing share goes to countries covered by Humanitarian Response Plans or Refugee Response Plans: 44% of all ODA for early childhood development—US\$ 2.5 billion in 2017—went to countries affected by crisis. *See Figure 1*

While the absolute amount of funding has increased, the share of development aid for ECDiE is consistently low. Even if the total amount of ECD funding in crisis-affected countries is rising (up from US\$ 1.3 billion in 2013), it represents only 3.3% of total development aid going to crisis-affected countries in 2017 (up marginally from 2.7% in 2013). *See Figure 5*

Trends suggest a growing role for multilateral organisations as funders of ECDiE.

While traditional bilateral donors are responsible for 49% of development funding for ECDiE, the share of funding from multilaterals has risen from 39% in 2013 to 51% in 2017. The World Bank leads the way, contributing 11% of all development funding for ECDiE in 2017—a significant increase from just 4% in 2013. *See Figure 7*

Integrating missing ECDiE elements into already funded health and nutrition programs is an effective way to increase access for young children and caregivers in the near term. In crisis-affected countries, 95% of development aid consistently goes to health and nutrition interventions. Although these interventions already serve the target audience for ECDiE, they often neglect critical services, such as caregiver coaching and mental health support. Integrating elements of ECDiE into these well-established sectors could be an expedient approach to increasing coverage, while also addressing unmet needs. See Figure 6

Education and WASH services for children under 5 years old are severely underfunded; for child protection and responsive caregiving interventions, information on funding is unavailable. Only 2% of ECD funding for crisis-affected countries goes to WASH, and only 1% to pre-primary education. Responsive caregiving and child protection—two critical elements of nurturing care and ECDiE—are not traceable in existing datasets. More precise tagging of funding for children under 5 years old would help improve tracking of resources going to these areas. See Figure 6

Key insights:



Humanitarian funding

At just 2%, the share of humanitarian aid supporting ECDiE is minimal. Humanitarian aid explicitly targeting ECD stood at US\$ 463 million in 2018, only 2% of the total. This excludes two private foundation grants of US\$ 100 million each awarded to ECDiE projects in 2018 (to be disbursed over five years), suggesting that philanthropy has played a growing role in humanitarian financing for ECDiE in recent years. See Figure 8

Together, three bilateral donors and the EU provided 75% of all ECDiE funding in 2018. Germany (US\$ 143 million), the United States (US\$ 73 million), the United Kingdom (US\$ 22 million) and the European Union (US\$ 109 million) are also the largest donors to the humanitarian sector overall. UNICEF, the UN agency focused on children, contributed US\$ 25 million (5%) to ECDiE. See Figures 11 & 12

Within the humanitarian cluster system, most humanitarian funds for ECDiE go to food security and nutrition. Education, WASH and child protection all manage less than 5%. Food security and nutrition manage US\$ 55 million each, or a combined 53% of total cluster funds for ECDiE. Four other clusters with direct relevance to ECDiE manage 27%: health (17%), education (5%), child protection (3%) and WASH (2%). See Figure 9

Coordination of funds across clusters to meet the needs of children under 5 years old is limited. Less than one-fifth of ECDiE funds (19%) is reported as ‘multi-sector’ funding (i.e., including at least one ECD-related sector, such as health, nutrition or education). See Figure 9

Resources / bibliography

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Annex 1

List of keywords used for UNOCHA FTS keyword search

Set of keywords defined based on areas of the Nurturing Care Framework, adjusted with Senior Advisor input, and with reference to the 2019 paper, “Accountability for funds for Nurturing Care: what can we measure?” (Arregoces et al, 2019).

General	Good health	Early learning	Nutrition	Responsive care	Security and safety
early child	breastfeed	early learning	malnutrition	responsive feeding	child maltreatment
baby	brain development	play	breastmilk	caregiver	abuse
babies	neonatal	pre-primary	stunting	caregiving	psychosocial
toddler	vaccin	pre school	vitamin a	child care	child slav
under 5	birth	preschool	zinc	parents	safe environment
infant	MNCH	safe space	micronutrients	mother	child neglect
nurtur	maternal depression	early stimulation	Iron supplement	maternal	violence against child
young child	development disorder	child care	micronutrient	kangaroo	
newborn	nursery	daycare	supplementary feeding	skin to skin	
youngest	deworming	stimulation	undernutrition	responsive care	
early brain	malaria	child friendly spaces		maternel	
neuro development	antenatal			parenting	
child development	immun			parent coaching	
ECD	lactating				
orphan	perinatal				
	postnatal				
	pregnancy				
	child health				

Annex 2

OECD CRS sectors' share imputed to children under five

Purpose codes		Imputed % to MNCH (Muskoka) (for reference)	Imputed % to children under 5 (Theirworld)
MNCH	Health		
	12110 – Health Policy and Administrative Management	33	10
	12181 – Medical Education/ Training	33	10
	12191 – Medical Services	33	10
	12220 – Basic Health Care	33	10
	12230 – Basic Health Infrastructure	33	10
	12250 – Infectious Disease Control	33	10
	12261 – Health Education	33	10
	12262 – Malaria Control	81	75
	12263 – Tuberculosis Control	26	11
	12281 – Health Personnel Development	33	10
	13010 – Population Policy and Administrative Management	33	10
	13020 – Reproductive Health Care	100	30
	13030 – Family Planning	100	30
	13040 – STD Control including HIV/ AIDS	42	13
	13081 – Personnel Development for Population and Reproductive Health	100	30
	Nutrition		
	12240 – Basic Nutrition	100	100
	Sanitation		
14030 – Basic Drinking Water Supply and Basic Sanitation	10	10	
14031 – Basic Drinking Water Supply	10	10	
14032 – Basic Sanitation	10	10	
Other			
51010 – General Budget Support	3	1	
ECD specific	Education		
	11240 – Early childhood education	0	100
	111 – Education, level unspecified	0	1

Annex 3

List of countries covered by humanitarian appeals each year (1/2)

Country	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Afghanistan	N	C	C	C	C	C	C,D	C	C	C,D	C,D	C,D
Angola		C										
Bangladesh										C,D	C,D	C,D
Bolivia	N											
Burkina Faso		N	N		N	N	C	C	C	C	C	C
Burundi									C	C	C,D	C
Cameroon							C,D	C,D	C,D	C,D	C,D	C
Central African Republic	C	C	C	C	C	C	C	C	C,D	C,D	C,D	C,D
Chad	C	C	C	C	C	C	C,D	C,D	C,D	C,D	C,D	C,D
Colombia				C								
Congo			C				C,D	D	D			
Cote d'Ivoire	C	C			C							
Croatia									D			
Cuba	N					N						
Democratic Republic of the Congo	C	C	C	C	C	C	C,D	C,D	C,D	C,D	C,D	C,D
Djibouti	N			N	N	C	C	C,D	C,D	C,D		
Dominica												
DPR Korea					N	N		N	N	N	N	N
Ecuador									N			
Egypt						D	D	D	C,D	D	D	D
El Salvador		N		N								
Ethiopia							D	D	D	C	C,D	C,D
Fiji									N			
FYR Macedonia									D			
Gambia							N	N	N			
Georgia	C											
Greece									D	D		
Guatemala			N					N	N			
Guinea							E					
Haiti	N		N	N	N	N	N	N	N	N	N	N
Honduras	N							N	N			
Indonesia		N									N	
Iran												N
Iraq	C	C	C		D	D	C,D	C,D	C,D	C,D	C,D	C,D
Jordan			D		D	D	D	D	D	D	D	D
Kenya	C	C	C	C	C	D	D	D	D	D		
Kyrgyzstan	N		C									
Lao PDR	N	N										
Lebanon			D		D	D	D	D	D	D	D	D
Lesotho					N							

Legend:

N: Natural disaster C: Conflict D: Displacement E: Epidemics

Annex 3

List of countries covered by humanitarian appeals each year (2/2)

Country	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Liberia	C				C	C	E					
Libya				C				C	C	C,D	C,D	C
Madagascar					N	N	N	N	N	N		N
Mali					C	C	C	C	C	C	C	C
Mauritania					N	N	N	N	N	N	N	
Mongolia			N									
Mozambique										N		N
Myanmar	N					C	C	C	C	C	C	C
Namibia		N		N								
Nepal	C,N	C	C					N				
Nicaragua				N								
Niger				C,D	C,D	C,D	C,D	C,D	C,D	C,D	C,D	C,D
Nigeria							C	C	C	C	C	C
Pakistan		C	C,N	N	C,N			C	C	C	C	C
Palestine	C	C	C	C	C	C	C	C	C	C	C	C
Peru										N		
Philippines		N		C	C	C	C,N				C	
Rwanda								D	D			D
Senegal							N	N	N	N	N	
Serbia									D			
Sierra Leone							E					
Slovenia									D			
Somalia	C	C	C	C	C	C	C	C	C	C,D	C,D	C,D
South Sudan				C	C	C	C	C,D	C,D	C,D	C,D	C
Sri Lanka	C	C	C	C,N	C							
Sudan	C	C	C	C	C	C	C,D	C,D	C,D	C,D	C,D	C
Syria	N	N	D		C	C	C	C	C	C	C	C
Tajikistan	N	N	N									
Tanzania								D	D			D
Timor-Leste	C											
Turkey					D	D	D	D	D	D	D	D
Uganda	C	C	C				D	D	D		D	D
Ukraine			C				C	C	C	C	C	C
Uzbekistan			C									
Vanuatu								N				
Venezuela												C
Yemen	N		C	C	C	C	C	C	C	C	C	C
Zambia												
Zimbabwe	N	N	N	N	N	C			N			N
# of countries	28	24	27	22	30	29	36	41	48	37	34	37

Legend:

N: Natural disaster C: Conflict D: Displacement E: Epidemics



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