

Save the Children's experience ECD in emergencies

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For one moment, imagine a reality made from the nightmares of childhood – parents dead, house collapsed, friends missing, favourite playthings crushed in rubble. In recent years, thousands of children have woken up to this picture: mudslides in Colombia, earthquakes in Iran or victims of the Asian tsunami. Even more children living in war zones around the world have experienced similar realities; Palestinian, Afghan and Sudanese children grow up with these nightmares as part of their everyday lives.

This article draws on Save the Children's early childhood development (ECD) in emergencies work in the Middle East, Asia and the Balkans. While these examples offer a picture of ECD responses within a range of emergencies, we believe that many of the principles of good ECD work remain the same whatever the context.

Why ECD in emergencies?

Both acute and chronic emergencies can have devastating effects on the people caught in their wake. Those working in emergencies build their responses around two core beliefs, codified in the *Humanitarian Charter*: (1) that all possible steps should be taken to alleviate human suffering arising and (2) those affected by disaster have a right to life with dignity <www.sphereproject.org>. While education – and ECD – are not traditionally prioritised in such contexts, education responses in emergencies do have an important role to play both in alleviating suffering and strengthening the dignity of those affected.

Many of those working with children and families in emergencies share a commitment to make a reality of children's rights. Like all people affected by emergencies, children have basic physical needs –

shelter, food, water and medicine – essential for their survival. However, informed by the UN Convention on the Rights of the Child, an analysis of the rights of children would also stress developmental support – social, cognitive, creative and emotional – as being as fundamental as physical assistance.

This commitment to children's rights has led Save the Children to increasingly focus on education support during the early phase of an emergency and beyond. ECD is one of a range of education and care contexts that we find important in helping communities cope and recover. ECD programmes assist young children in maintaining a sense of normality and control in their lives. These efforts are built around a philosophy that children are not necessarily passive victims. Much can be done by working with them in constructive ways, drawing on their own resilience and on the strengths and assets of their communities.

What happens to young children in emergencies?

The damage of war and natural disasters is easy to see in terms of damage to the material aspects of life. However, the impact a crisis can have on the social, economic, political and cultural fabric of communities can be just as damaging for children's development.

For young children, the most profound impact is often that their carers are missing, dead or wounded – or perhaps emotionally and physically exhausted – and that they are unable to call on the usual support networks that are available at times of family crisis. In this instance, play can be an essential support for young children; not just because play in itself is a formative experience for the individual child – but because play itself is often rooted in the experience

and representation of events and objects within a family and a community. Moreover, play can enable children to come to terms with past events.

Evidence suggests that in many cases, young children who have experienced the trauma of conflict or displacement do not need specialised therapy or intervention (Richman 1993). The majority of children who manifest distressed behaviours (e.g., disrupted sleep, increased alertness, bed-wetting, profound sadness or increased aggression) will benefit from the routine, familiar environment and materials after a short time in an early years group. Children acquire a 'safe space' in which to establish relationships with sympathetic and supportive adults.

What can we do?

For practitioners concentrating on young children in emergencies, the Inter-agency Network for Education in Emergencies (INEE) presents a checklist specifically concerning ECD in crisis situations to supplement the more general Minimum Standards for Education in Emergencies (MSEE) guidelines <www.ineesite.org/edcon/early.asp>. This assessment protocol enables agencies to map out what early childhood services existed before and therefore what practices can be built upon. A selection of these questions includes:

Pre-emergency:

- Did early childhood education exist before the crisis? Was food provided? Was the service half-day or full day?
- Did parents pay for their children to attend? Was the service only for people who belonged to a certain company of the government?

Existing activities in ECD centres:

- Are there any ECD activities presently within the community? Are all children able to access these activities, including minorities and children with disabilities?
- Is there a system of referral in place for traumatised children or children with special protection needs? To whom are they referred? What cases have been referred?

Parent training:

- Who traditionally takes care of young children within the household (older siblings,

STOP: A framework for ECD in emergencies

This framework for working with young refugees was first devised by Swedish Save the Children (Gustaffson 1986) and has been subsequently adapted. It sets out an easy-to-remember way of ensuring that the key principles of good early years practice to support children affected by conflict are in place, and can apply to the provision of early years services not only in an emergency situation, but also once children have sought refuge.

S – space and structure

T – trust, time and talking

O – opportunities to play

P – partnership with parents

Space and structure are vital to any early years programme. For a child affected by an emergency, getting to know the predictable routine of the early years setting will be an antidote to the chaos they may have experienced. For families living in temporary housing, conditions maybe cramped and children also benefit from the physical space of the setting.

Trust is often the primary casualty of emergencies, from the perspective of the young child. Time is needed to re-establish trusting relationships with (a) key carer(s), through talking, play and creative activities. Young children often feel that they have enormous power, because their feelings are so strong and overwhelming. This may, in turn, make them feel guilty or responsible for the enormous changes that have befallen them and their families. By creating a place of safety, it is possible to explore a child's feelings and to begin to explain and give meaning to events – so helping to remove feelings of guilt.

Opportunities to play are some of the defining features of childhood. These can range from organised group activities such as games, dancing and singing, to explorative play with a wide range of materials.

Parents and other carers will themselves need support and opportunities to talk, or just to sit and feel safe in the setting. It is vital to welcome carers and let them participate as little or as much as they choose. ECD provides an opportunity to support carers' ability to care.

grandparents, others)? Are these people attending the trainings? How is this training spread throughout the family?

Community training:

- How has the community been sensitised to the importance of early childhood education?

Drawing from experience

The need to address education needs in emergency situations has been increasingly accepted within the humanitarian relief and aid community. Implicit is the importance of maintaining or establishing in emergency situations educational and other supports for the development of children in their early years. The challenge now is to turn the principle into practice. This article offers some experience from Save the Children's interventions in emergencies where a commitment to ECD has been central to our activities.

Earthquake in Bam

On December 26, 2003, an earthquake measuring 6.5 on the Richter scale struck the southern city of Bam, Iran, and surrounding villages. Over 26,000 people were killed and 85 percent of the city was destroyed or severely damaged. Save the Children arrived the next day and immediately began distributing tents, blankets and other non-food items. Our child protection team was on the ground soon thereafter, identifying orphaned children and those separated from their families. However, there were hundreds of other children sitting quietly in tents next to their parents. What could be done for them?

Several community members approached us and said that if we provided tents and supplies, they would organise activities. There had been a history of preschools in some neighbourhoods, but in others we identified enthusiastic parents to take part. Soon tents and children's recreation boxes were being distributed to neighbourhood volunteers.

In time, local NGOs began to get more involved, and Save the Children set up formal partnerships for them to provide longer-term support to the 'children's centres' for three to six months after the crisis. We worked with these NGOs to train teachers and volunteers in a range of psychosocial, developmental and recreational activities for the children.

The enormous numbers of dead and injured rendered local basic services ineffective, including those for children. From the beginning, Save the Children coordinated with Behsisti (the government social welfare organisation) in its provision of toy boxes, chairs, tables, children's clothes, teachers' packs and blankets to these children's centres. Over time, Behsisti was able to take on a role in support of children's centres, and the assets from the children's centres were eventually transferred to Behsisti, which took over their administration. A year and a half after the crisis, a number of the children's centres have been transformed into preschools, while others remain less formal and are staffed at the community level.

Sri Lanka and the tsunami

One year later, another earthquake and the accompanying tsunami left over 200,000 dead in coastal areas of the Indian Ocean. Buildings were destroyed, teachers and children killed, with the survivors left to piece together a system; the picture was similar to Bam, as were the education needs and our response.

In Sri Lanka, Indonesia and India, Save the Children offered an early response supporting play activities at welfare centres, safe spaces in displaced camps, and the re-establishment of the integrated childhood development system centres, including material support and teacher training. In Sri Lanka, play activities – including music, drama and local games – were set up for young children at centres for the displaced. As families are sent to transit camps or return to their villages, temporary ECD centres will be constructed. Save the Children will train teachers and provide incentives for up to one year. As communities become more permanent, the focus will be on sustainability, with plans to establish a foundation to support ECD centres and teacher salaries.

Early efforts at coordination after the tsunami were confused, with most agencies clamouring to work on school reconstruction and provision of materials. While Save the Children were involved in these areas to some extent, we tried to emphasise human resources at the same time: working with the authorities on teacher training, psychosocial and play activities, encouraging community and parental



Children benefit from their routine, familiar environment and materials in an early years group

providing activities. Parents felt in retrospect that the provision of early childhood activities during these extreme events had been enormously beneficial to both adults and children.

During the Kosovo crisis, one of Save the Children's responses was the creation of 'safe areas' that included a strong component for young children and their mothers (Nicolai 2003). These were established first within the camps in Albania and Macedonia and once again upon repatriation to Kosovo. A staff member involved in work in Macedonia had this to say:

involvement, and looking at crisis-related needs for marginalised groups of young children.

The Balkans

When the former Yugoslavia began its break-up in 1991, ethnic tensions that had been dormant exploded into some of the most brutal violence since the Second World War. Prior to these conflicts, education was a high priority for the state, and literacy rates were similar to those throughout Eastern Europe. There was a history of ECD provision, although it was largely an urban phenomenon and varied extensively in terms of its quality.

The importance of strengthening families and rebuilding communities was at the heart of initiatives to establish early childhood centres as an emergency response in the Balkans. Centres were provided in refugee camps and were established in areas affected by violence. In some cases, resources were provided to enhance activities that had been established by members of the community during the months of conflict. In one area, teachers and parents had worked together to set up make-shift early childhood centres in the basements of their apartment blocks. During months of shelling and fighting, parents carried on creating structured opportunities for young children to play. When the fighting subsided and aid agencies entered the city, parents were able to carry on

“When the full Save the Children team arrived, they had to orient themselves quickly. We planned to open a preschool playroom, just a safe place to come. We managed to get a tent but there were 30,000 people in the camp, and between 2,000 and 3,000 young children. We ran it on a shift system, an hour at a time, for seven sessions a day. Then it got too hot, and we were afraid the children would dehydrate, so we introduced a noon break. We tried to make it a really nice environment for the children, so they would feel good about being there. The camp was very muddy, so we put in a cheap wooden floor rather than plastic sheeting.”

As a follow on to the 'safe areas' initiative, Save the Children became involved with re-establishing preschools and kindergartens. This has included reconstruction, provision of supplies, and training for teachers and staff.

The Lebanon crisis

Save the Children's experience with ECD in the Middle East and North Africa extends back to the 1980s and the civil war in Lebanon. The acute crisis occasioned by that conflict ended in 1991, but many of the Play and Learning Centres for young children in Palestinian refugee camps still experience military incursions and bombing from outside, and the threat of factional fighting inside, the camps.

An investigation of the history of the conflict and its effect on early childhood provision was carried out in 2003 (Grazia 2003). This study used participatory techniques to elicit from the communities involved their perspectives on the emergency, and also their suggestions about how their experience could be adopted in other conflict ridden contexts. The researcher did not find it easy to identify an unambiguous definition of what should be considered an emergency for planning, monitoring and evaluating ECD. Informants held two quite distinct views of what they considered an emergency: (1) a direct and tangible threat to security, for example clashes, curfew, occupation and shooting incidents, and (2) a long-term process of deprivation of rights, chances and opportunities. Informants tended to use the definitions interchangeably.

In reacting to emergency situations teachers stressed the importance of having agreed within parents' groups and community groups on practical guidelines for making a quick response. Whenever an upsurge in violence occurred, such as military invasions of camps, internal clashes, or other direct threats to security, people moved to safer areas. Even though an emergency brings about family separation and scattered clusters of internally displaced 'refugees', the setting for interventions had to be in whatever physical area people found shelter. Efforts were made in order to link the isolated Palestinian community with the 'external' Lebanese environment; informants, however, continued to perceive themselves and their situation as separated with few links 'to the outside'.

The following were the lessons learned from the experience in Lebanon and drawn up as conclusions to the study:

1. Where the emergency is localised, safe spaces outside the area of danger must be identified for continuing in the provision of education services.
2. Provision of quality education and ECD during 'normal' periods guaranteed better results during emergencies.
3. Key elements of quality ECD were identified as:
 - involvement of parents in activities focused on early childhood care and a close relationship between teachers and parents;
 - creative use of space (class arrangements) and tools (i.e., toys from junk);
 - active learning methods, utilising older children to encourage learning, participation and play;
 - continuation of planning, monitoring and evaluation using participation of children, parents and other carers (social workers, school teachers);
 - community as support body for ECD and education processes;
 - focus on programme rather than on institutions.
4. Use of small and local groups or informal relationships (key persons) in order to facilitate the implementation of programmes.

Occupied Palestinian Territories

The Lebanon study was part of a larger project to demonstrate and disseminate locally viable and replicable models for quality education provision during the chronic crisis in the occupied Palestinian Territories. Since the collapse of the Oslo peace process and the start of the Palestinian uprising in September 2000, Palestinian society and its economy have suffered. Military incursions and movement restrictions have prevented children and teachers from reaching their schools and ECD centres. Even when able to attend, children face a difficult environment where tensions, violence and disruption within schools are affecting relationships, concentration and opportunities for play and social interaction.

Violence dominates Palestinian children's lives. Exposure to armed clashes and the suffocating curfews and closures have caused acute psychological stress. In three villages directly affected by the Wall, Save the Children UK found that 92 percent of children said the Wall made them feel more afraid (Save the Children 2004). A study by Save the Children US found that 93 percent of Palestinian children feel unsafe, and more than half feel their parents can no longer protect them. Half of the children surveyed witnessed violence affecting an immediate family member, and 21 percent have had to flee their home for a period because of the conflict. Almost all parents report traumatic behaviour including nightmares, bedwetting, increased aggressiveness and hyperactivity.

As a result, we identified six main objectives for their intervention in kindergartens in the territories:

- reducing parents' stress;
- strengthening parents' understanding of their children;
- empowering the community to provide support for children's development;
- providing an opportunity for normal development: socially, physically, intellectually, creatively, emotionally and morally in difficult circumstances;
- developing children's resilience.

The activities are based on a model for co-ordination between home and kindergarten. The model creates a space for children in their home (space can be either physical, mental or temporal) and encourages parents to observe their children through easy activities. Activities can be spontaneous, developed by children or planned by teachers and parents. Common resources are developed to facilitate planned activities in the form of 'treasure boxes', containing materials and equipment. The relation between parents and teachers is developed through routine meetings and discussions, and 'fundays', where the setting becomes an open house for the children and teachers and their families.

There have been spin-offs and ongoing initiatives independent of the project. For example, one kindergarten is holding an exhibition of work that mothers have been doing in their homes. Mothers have started their own fundays and invited others; treasure boxes have been added to and developed by families (using scrap materials, leaves, seeds etc.). Homes now have 'corners', in the form of real or conceptual spaces for children to play and learn. Some fathers are asking for workshops on how to raise their children. Mothers who had been brought together for the first time around fundays and treasure boxes said, "We actually knew how to do this or that, but we didn't realise it".

Conclusion

In emergencies, the normal mechanisms for protecting the population from harm break down. ECD provision can be a source of protection for young children – and a way to cope with the nightmares – where their families, law, social order

and government can no longer ensure their well-being. The provision of basic ECD activities can act as a focus for adults in the community, who can be involved working in the centres. At the same time, children can have opportunities to establish routines of play and care in the face of the unpredictability of the surrounding crisis.

The principles of ECD in emergencies are not substantially different from ECD at other times. 'Good practice' is common to all circumstances. What may differ are the location of intervention, the identity of carers, types of activities which may emphasise psychosocial concerns. Moreover, emergencies often present an opportunity to introduce ECD provision and concepts where there has been none before. For this reason, adherence to best practice and rigorous standards should be a major priority for supporting ECD in emergencies.

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