

House Foreign Affairs Committee

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Statement of Marianne Menjivar, Director for the Venezuela Response, International Rescue Committee (IRC)

Thank you, Chairman Castro and Ranking Member Malliotakis, for convening this hearing today on the compounding crises facing young children in humanitarian and development settings. My name is Marianne Menjivar, and I am the Director for the Venezuela Response at the International Rescue Committee (IRC). Your leadership on early childhood development is not just admirable, it is critical to address both present and future threats to the health, well-being and prosperity of children, families and whole societies.

The IRC's mission is to help people whose lives are shattered by conflict and disaster to survive, recover and gain control of their future. We work in approximately 40 countries affected by conflict and crisis around the world, meeting the needs of our youngest clients through addressing all of the components of early childhood development: health, nutrition, early learning, safety and responsive caregiving.

The need we see is dire. One in every six children globally currently lives in a conflict zone,¹ and 29 million babies were born into conflict in 2018 alone.² As the duration of conflicts and displacement continue to rise, recent statistics show that 71 million children globally under the age of 5 have lived in conflict areas for their entire lifetimes.³ This means that increasingly, children affected by crisis and conflict are spending their whole childhoods without access to the necessary foundations of healthy human development.

We know just how crucial this foundation is. The early years is a time of the most rapid brain development; one million neural connections are formed every second, leading to the brain being 90% developed by age 5.⁴ But young children in crisis settings face significant risks. Substantial evidence from neuroscience shows that experiences of severe, prolonged adversity such as war and displacement in this narrow and critical window of time can disrupt healthy brain development, with devastating impacts on children's cognitive abilities, physical and mental health, and behavior which can last throughout their lives. The "double emergency" introduced by COVID-19 has only compounded these challenges. This, in turn, threatens the futures of children, families, whole communities and regions, creating a cycle of instability and poverty that affects both individual prospects as well as larger societal goals of social cohesion, resilience, stability, prosperity and equity.

The situation, however, is not hopeless if we act with urgency. We know that the impacts of adversity can be mitigated with proper interventions that include the essential components of early childhood development (ECD). Children are resilient, and the right support can build this resiliency to help them

¹ Østby, G., Rustad, S.A., et al. (2020). "Children Affected by Armed Conflict, 1990–2019". Conflict Trends, Vol. 6

² UNICEF. (2019). Press release. <https://www.unicef.org/press-releases/29-million-babies-born-conflict-2018>

³ Østby, G., Rustad, S.A., et al. (2020). "Children Affected by Armed Conflict, 1990–2019". Conflict Trends, Vol. 6 (2020)

⁴ Brown, T.T., Jernigan, T.L. (2012). "Brain Development During the Preschool Years". Neuropsychol Rev 22.

recover and fulfill their potential. ECD is not only an impactful investment, it is a cost-effective one: evidence shows that quality support in the early years for young children and their caregivers can provide returns on investment of up to 13% per year through improved education, health, and increased earnings.⁵ As the famed economist Heckman notes, the gains of ECD are significant; the cost of inaction tragic. ECD must be a crucial component of any humanitarian response if we are to contribute to self-reliant societies.

The United States government has long been a generous and influential partner in ensuring the health, education, and safety of children affected by crisis and conflict. The passage of the Global Child Thrive Act is a critical step in ensuring this remains a priority and focus of US investments. Now is the time to build on that legacy to ensure that children – especially young children – are not just surviving adversity, but thriving. We hope today’s discussion will focus not only on the problems, but the solutions that we know are possible. With the right commitment to implementing and funding evidence-based programs and research to further build the evidence on what works, the United States has the potential to be a great leader in solving this global problem.

With the overarching aim of improving young children’s cognitive, language, motor and social-emotional skills, the IRC has built and strengthened early childhood programming in conflict and crisis settings and is recognized as a global leader by WHO, World Bank, UNICEF and others. Understanding that the holistic needs of young children and families cannot be addressed by a single-sector approach, IRC works to develop integrated, cross-sectoral sets of interventions that begin before pregnancy and extend through early childhood. These have a clear focus on early learning and responsive caregiving, but can also include integration of reproductive health, maternal and child health, nutrition, water and sanitation, protection, parental and family support, as well as childcare, early learning programs and preschools and support for caregiver economic recovery. We reach children wherever they are-- working with caregivers, service providers and local government ministries to implement activities at homes, in centers, in schools, and within communities, through high, low and no tech solutions as the situation requires.

I oversee all of IRC’s programs in Colombia, Ecuador and Venezuela, where we are providing critical early childhood programs to respond to the impact of COVID-19, compounded with a prolonged socio-economic crisis, civil unrest, and one of the largest global displacement crises.

Colombia hosts approximately 460,000 Venezuelan children. ECD services offered in the country currently do not include a focus on migrant families, and an IRC study found that only 27% of the surveyed population of Venezuelan migrants had access to early childhood education. One of IRC’s intervention models supports migrant families on the move by providing access to family play spaces at key service points, supplying young children and their caregivers with a traveling play kit that contains playful early learning materials, and promoting responsive caregiving resources and information about

⁵ Garcia, J. L., Heckman, J., Leaf, D. E., and Prados, M.J. (2017; revised 2019). “Quantifying the Life-cycle Benefits of a Prototypical Early Childhood Program,” NBER Working Paper No. 23479

services along the migration route. Ultimately, these play spaces will be a resource to over 22,000 families and traveling play kits will be distributed to 15,000 children. In addition to providing these critical services, IRC has partnered with a local organization to promote positive teaching practices and play-based early learning methods to support early childhood education for crisis-affected children, which will strengthen the capacities of over 200 teachers and early education services providers in four regions of the country.

In Venezuela, where there are 1.6 million pre-primary school-aged children, IRC has designed and implemented a multi-sectoral approach to address the holistic needs in prenatal and postnatal stages of indigenous communities. By adapting the Reach Up and Learn curriculum--an evidence-based home visiting program which originated in Jamaica--and conducting qualitative research within the community to understand the unique needs of this population, the IRC trained local partners and community members to conduct home visits to families with young children to promote and model learning through play. Caregivers and children are also provided with an option to attend group sessions at their local health clinic. Caregivers receive messages on basic care of young children, caregivers' own overall wellbeing, breastfeeding and other topics prioritized by the community. To respond to the complex needs of this community, complementary services are also offered to caregivers and young children, including guided play sessions, one-on-one coaching at the clinic, referrals to support needs related to gender-based violence, child protection, health and nutrition services.

To address the critical need for education alternatives during and after school closures caused by the pandemic, the IRC launched an education audio program to promote learning among young Colombian and Venezuelan children through play-based educational content. For children without access to remote or in-person education, the audio show delivers entertaining social emotional-learning episodes that complement and support standard academic learning. The show, called "On the Air with Harry," delivers 20 episodes in which children, accompanied by a friendly migrant chameleon, explore diverse topics to help them identify, manage, and express their feelings and opinions. Since May 15th, the show has been broadcast weekly on RCN, Colombia's largest radio station with a listener base of 3.5 million. The episodes are accessible in different environments, delivered via radio, interactive voice response (IVR) calls, social media, WhatsApp and SMS, and podcast hosting sites covering regions where access to the internet is limited.

Beyond ECD interventions in this region, IRC is also leading the implementation of the largest ECD program in humanitarian settings, Ahlan Simsim, supported by the landmark \$100 million investment from the MacArthur Foundation, and in partnership with Sesame Workshop and NYU- Global TIES for Children. Through this support as well as similar large-scale investments in this and other programs by the LEGO Foundation, the IRC is working together with partners to give millions of crisis-affected children in the Middle East, East Africa, and Bangladesh the support they need to learn, grow, and thrive. Ahlan Simsim is comprised of mass media as well as direct services for children and caregivers. Programs for children focus on providing safe, secure, joyful and engaging opportunities for playing and learning. Ahlan Simsim establishes pre-schools and play spaces in tents, vacant classrooms and other safe community spaces where children engage in developmentally appropriate play and learning

activities with trained facilitators or teachers. Responsive caregiving and parenting support is also a core focus of the project, that includes home visiting, group sessions and counseling during visits to the health clinics. Where face-to-face services are not possible, we distribute early learning kits including culturally relevant and developmentally appropriate local toys, books and games that can be used to enhance development combined with remote delivery of early learning and parenting content via WhatsApp, SMS and personalized phone calls.

As these programs demonstrate, ECD is a real opportunity to gain greater value and more efficiencies across sectors and accounts, maximizing the ability to achieve meaningful outcomes for children in humanitarian settings. The Global Child Thrive Act offers a blueprint for U.S. foreign assistance by strengthening coordination and evaluation of ECD investments across humanitarian and development programs. But this is just the first step, and for its full realization, we will need leadership within the Administration, a commitment to rapid implementation and financing of ECD programs with the relevant agencies, and focused oversight from Congress.

First, to ensure the Global Child Thrive Act is implemented, we need strong leadership at USAID, and I urge the appointment of a Special Advisor for Children in Adversity. Additionally, it is important for USAID to develop specific implementation guidance to help identify opportunities for existing foreign assistance programs serving vulnerable children and their families to integrate early childhood development interventions.

Secondly, the United States government must galvanize and commit the resources needed to meet the learning and developmental needs of young children in crisis and conflict contexts at scale. Funding should be increased across all of the accounts that meet the needs of young children including but not limited to Vulnerable Children, Basic Education and Maternal and Child Health. The United States government has generously contributed nearly \$407 million to the Venezuelan regional crisis, but we do not know how much of that is going to ECD. The Global Child Thrive Act can help us track and communicate transparently how much funding is going to ECD, where, to what, for whom, and with what results.

The United States has a unique opportunity and obligation to not only lead the world in humanitarian ECD investments, but to call on others to follow suit. By increasing its own funding and leveraging its influence and relationships globally to encourage partners to expand their investments, the U.S. can help every child in crisis secure a brighter future. The U.S. should use its membership and leadership positions in institutions such as the G7, G20, UN bodies, and the World Bank to encourage bilateral and multilateral partners to deepen financial commitments for young children in crisis and conflict contexts.

Finally, while there is significant evidence on the effectiveness of early childhood interventions for children who have experienced adversity in stable contexts, there is a lack of research in crisis contexts. Future U.S. investments for ECD in these settings should be guided by the best available existing evidence and should include resources to expand the evidence base in crisis settings. This includes funding rigorous research as part of programs on what works, for whom, under what conditions and at

what cost. Dedicated funding for evaluation, implementation, measurement and cost research can provide necessary guidance on the most cost-effective ECD approaches in crisis settings that can improve child health, safety, well-being and learning outcomes in order to inform policy, program and financing decision-making.

There is a famous quote that reads: “If we change the beginning of the story, we can change the whole story.” The Global Child Thrive Act is the essential first step towards changing the beginning of the story for children in crisis contexts-- but to see meaningful change both now and in the future on individual lives and whole societies, the U.S now needs to take the necessary actions to see its full implementation realized.

I offer my sincere thanks to the Subcommittee for its commitment to ECD in fragile and crisis-affected settings and for giving me the opportunity to share the challenges facing IRC’s youngest clients, and the solutions we know are possible. I look forward to answering your questions.