

Study on International Development Cooperation for Children

Chinese Academy
of International Trade
and Economic Cooperation

UNICEF China



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ACRONYMS

AIBO	Academy for International Business Officials
AIECO	Agency for International Economic Cooperation
BMZ	Federal Ministry of Economic Cooperation and Development
CIDCA	China International Development Cooperation Agency
CICETE	China International Centre for Economic and Technological Exchanges
CRC	Convention on the Rights of the Child
DFID	Department for International Development
FAO	Food and Agriculture Organization
FCDO	Foreign, Commonwealth, and Development Office
GDF	Global Development and South-South Cooperation Fund
GIZ	German Agency for International Cooperation
GNI	Gross National Income
IMF	International Monetary Fund
JICA	Japan International Cooperation Agency
KfW	Credit Institute for Reconstruction
MDGs	Millennium Development Goals
MFA	Ministry of Foreign Affairs
MNCH	Maternal, Newborn, and Child Health
MOE	Ministry of Education
MOF	Ministry of Finance
MOFA	Ministry of Foreign Affairs
MOFCOM	Ministry of Commerce
NDRC	National Development and Reform Commission
NHC	National Health Commission
NMR	Neonatal Mortality Rate
ODA	Official Development Assistance
SDGs	Sustainable Development Goals

U5MR	Under-five Mortality Rate
UN	United Nations
UNDP	United Nations Development Fund
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UK	United Kingdom
US	United States
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme

1.EXECUTIVE SUMMARY

More than three years after the start of the COVID-19 pandemic, global economic growth remains sluggish, and inequities in child development continue to be exacerbated. Against the backdrop of food insecurity, spread of infectious diseases, climate change and humanitarian crises, children increasingly face multiple deprivations, putting their health and well-being at significant risk. To address these development challenges, there is an urgent demand to strengthen international development cooperation for children to ensure the achievement of the Sustainable Development Goals by 2030.

International development cooperation for children is vital to safeguarding child rights. From the perspective of human development, good nutrition and early learning are vital to children's brain development, and build the foundation for them to cope with challenges, manage social interactions, and support emotional development. From the perspective of social development, early investment in children is cost-effective and accumulates human capital, improves productivity, and tackles intergenerational poverty.

This summary report presents case studies on international development cooperation for children among four top donors, including the United States, the United Kingdom, Japan and Germany. It examines the different contexts, strategies, policies, institutional mechanisms and challenges related to international development cooperation for children. The United States has been a strong proponent for international development cooperation for children, and works closely with the United

Nations and international organizations to invest in the development, protection, dignity and security of children and their families around the world. Despite budget changes due to Brexit and the COVID-19 pandemic, the United Kingdom continues to prioritize child rights in its foreign policy and international development cooperation. Japan has aligned its international development cooperation for children with the SDGs, and focuses on developing tools and products to promote maternal and child health, primary education, and child nutrition. Germany's international development cooperation for children adopts a holistic and cross-disciplinary perspective, with gender equality as a core principle. The SDGs have been a driving force in Germany's ongoing efforts on promoting child development, honing its own comparative advantages in areas such as education, health, and gender equality.

The research revealed several notable characteristics of international development cooperation for children. First, the importance of child development is recognized globally. Synergistically, international development cooperation for children promotes the achievement of the SDGs, including the improvement of people's livelihoods, and is in line with the development priorities of recipient countries. Second, investment in child development has strong spillover effects. Child development is a cross-cutting discipline that encompasses health, nutrition, water, sanitation and hygiene, education, child protection and social policy. Study has shown that cross-sectoral improvements in these fields can also help

combat poverty and promote economic growth. Third, top-level policy design for child development has improved. With child development receiving increased attention, countries have formulated top-level policy frameworks and strategies to ensure a multi-sectoral, non-fragmented approach to support child development. Fourth, priorities on international development cooperation for children have diversified. In general, maternal and child health, water and sanitation, basic education, infrastructure, and democratic governance are among the prominent topics of international development cooperation for children. Lastly, international development cooperation for children engages a variety of partners, with most countries pursuing international development cooperation for children through bilateral and multilateral organizations such as United Nations agencies and international financial institutions.

China's international development cooperation model for children has evolved substantially in the past few decades. It has transitioned from bilateral aid to a combination of multilateral and bilateral aid, with a focus on comparative advantages of multilateral organizations in supporting child development. The model has transformed from traditional infrastructure investment to provision of infrastructure and technical investment, attaching greater importance to technical assistance and capacity building on child development. In terms of financing, China has also transitioned from primarily bilateral aid funds to providing diversified funds, including the Global Development and South-South Cooperation Fund, the China-United Nations Peace and Development Fund, the Food and Agriculture Organization-Government of China South-

South Cooperation Trust Fund, and private funding complementary to these efforts.

China has yet to develop a dedicated foreign aid policy or development agenda for children. Foreign assistance provided to children is often at the request of the recipient countries, rather than driven by a specialized policy or strategic plan. In addition, the management of China's foreign aid for children is led by multiple government ministries, and there is no designated entity responsible for projects focused on children. At present, infrastructure development accounts for a relatively large proportion of China's foreign aid, while investments in "soft aid" such as capacity building remain comparatively small. It is necessary in China's foreign aid policy to further strengthen capacity development in health and education in child development.

Considering the new demands and challenges in international development cooperation for children, this report provides six recommendations to the Government of China: 1) accelerate formulation of policy propositions for child development, and mainstream child related issues in top-level policy design; 2) strengthen bilateral and multilateral exchanges to ensure alignment on child development strategies; 3) leverage the strengths of United Nations development agencies to build synergy; 4) increase financing for child development and mobilize resources from different stakeholders; 5) infrastructure development and in-kind assistance should be supplemented with technical support to ensure sustainable results; and 6) leverage China's comparative advantages to facilitate the development of quality technical products to support child development.

2. INTRODUCTION

2.1 Objective

This report aims to summarize the key characteristics of international development cooperation for children in the United States, the United Kingdom, Japan and Germany; review China's bilateral and multilateral cooperation on child development; and put forward policy recommendations for China to amplify international development cooperation for children.

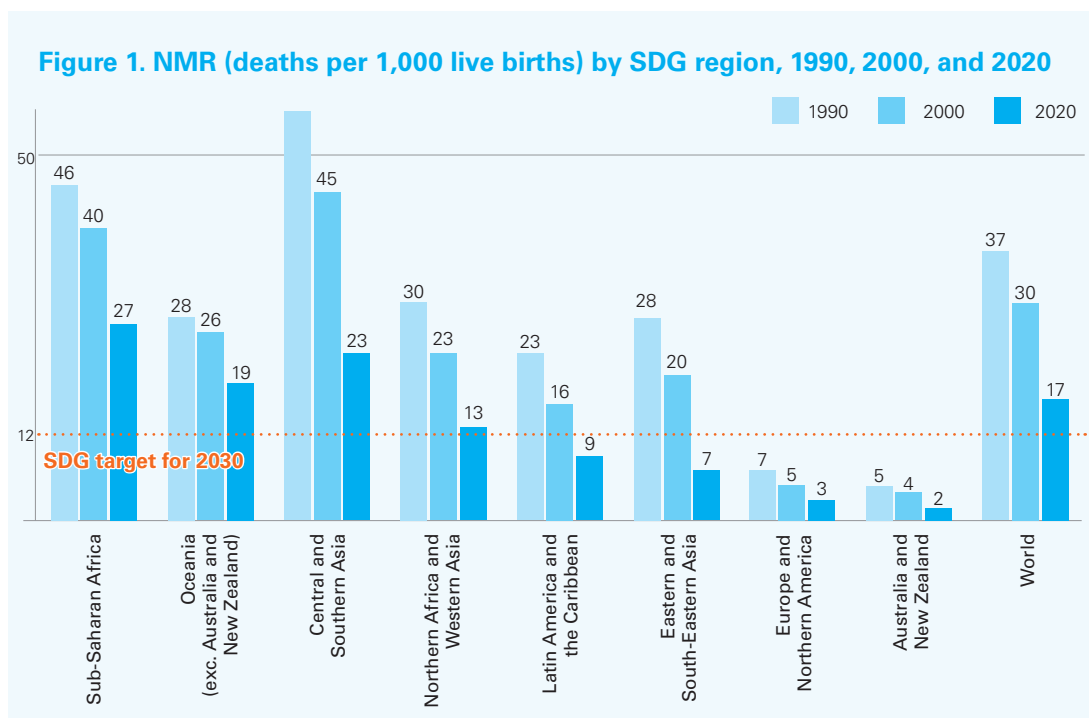
2.2 Context

Child rights have been widely recognized since the United Nations General Assembly adopted the Declaration on the Rights of the Child in 1959, advocating children are entitled to the rights to protection, education, health, housing, and adequate nutrition. Subsequently, the comprehensive Convention on the Rights of the Child (CRC) was developed and adopted by 190 member states of the United Nations (UN) in 1989, becoming the first legally binding international agreement for the protection of child rights, and the most ratified human rights treaty in the world. More recently, the Millennium Development Goals (MDGs) 2015 and the Sustainable Development Goals (SDGs) 2030 have established global development targets for all member states of the UN and key international organizations, including numerous targets on advancing child rights. To ensure the achievement of these global targets and safeguard child rights, many countries have delivered international development cooperation for children.

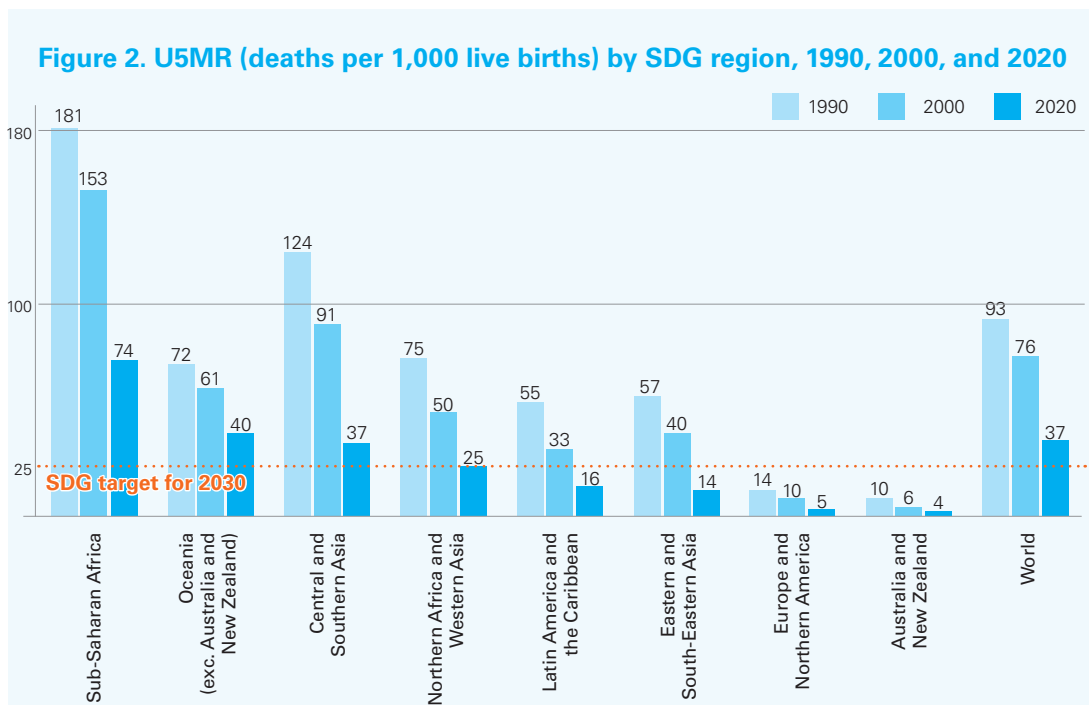
Due to the COVID-19 pandemic, global economic growth remains sluggish, the number of people living in extreme poverty is rising, and inequality is worsening, with children and women in developing countries facing multiple deprivations and vulnerabilities, including food insecurity, terrorism, infectious diseases, climate change and humanitarian crises. This has resulted in serious challenges in safeguarding fundamental child rights, particularly in health, nutrition, and education.

2.2.1 Health

Notable results have been achieved in child health over the past three decades. The global neonatal mortality rate (NMR) reduced from 37 per 1,000 births in 1990 to 17 per 1,000 births in 2020. Similarly, the global under-five mortality rate (U5MR) decreased from 93 per 1,000 births in 1990 to 37 per 1,000 births in 2020 (see Figures 1 and 2). However, regional imbalance continued to threaten the healthy development of children, with child mortality rates remaining high in sub-Saharan Africa, central and south Asia, and Oceania (excluding Australia and New Zealand). For example, due to insufficient medical care, food shortage, prevalence of infectious diseases, and other factors, the NMR in sub-Saharan Africa was 27 per 1,000 births in 2020, and the U5MR was 74 per 1,000 births. In 2021, children continued to face severe obstacles to survive and thrive, and more than 5.0 million children aged 0-5 died. This included 2.3 million newborns and 2.1 million children and youth aged 5-24, of which 43 per cent were adolescents (see Figure 3).

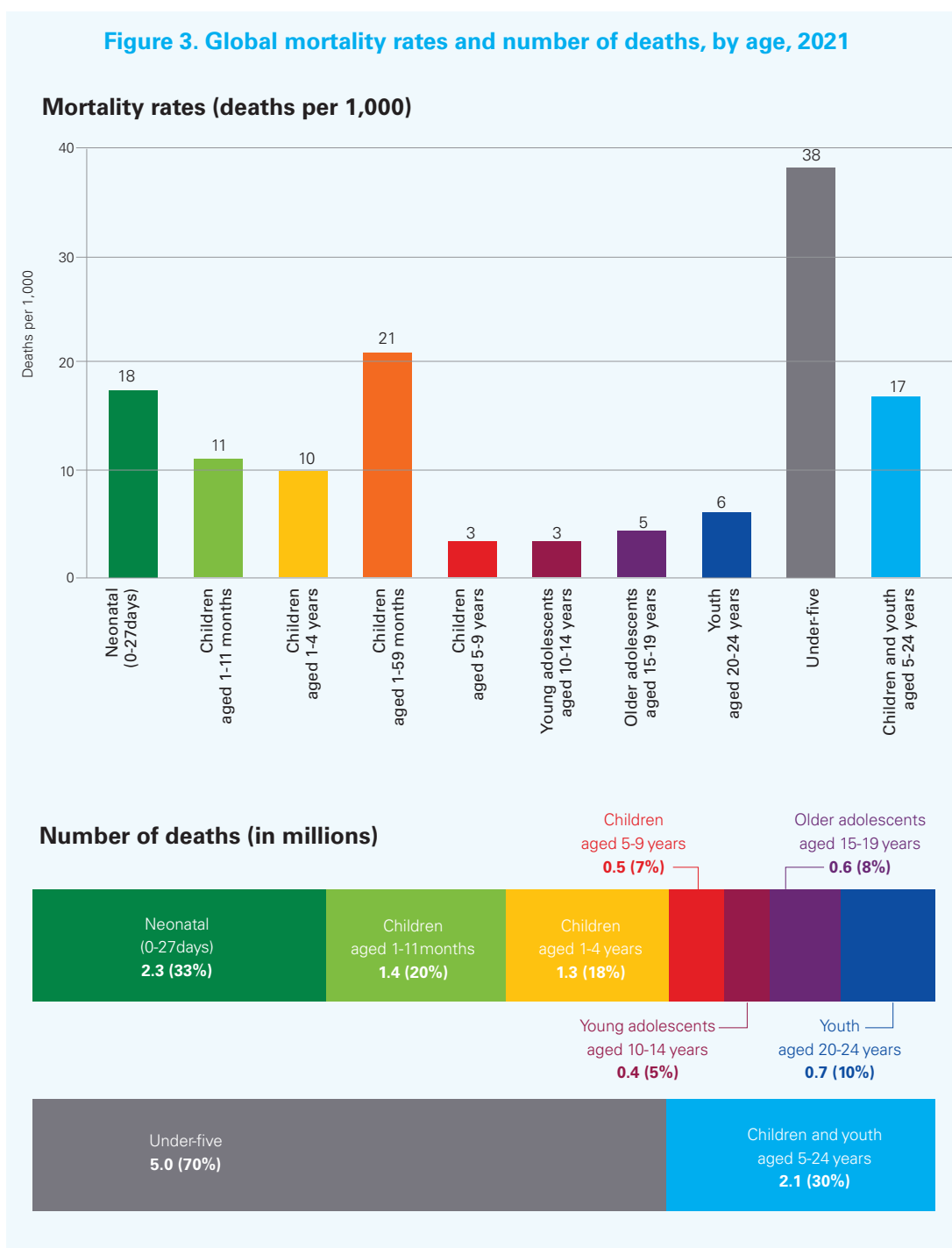


Source: UNICEF global monitoring data on the situation of children and women



Source: UNICEF global monitoring data on the situation of children and women

Figure 3. Global mortality rates and number of deaths, by age, 2021



Source: United Nations Inter-Agency Group for Child Mortality Estimation Report 2022

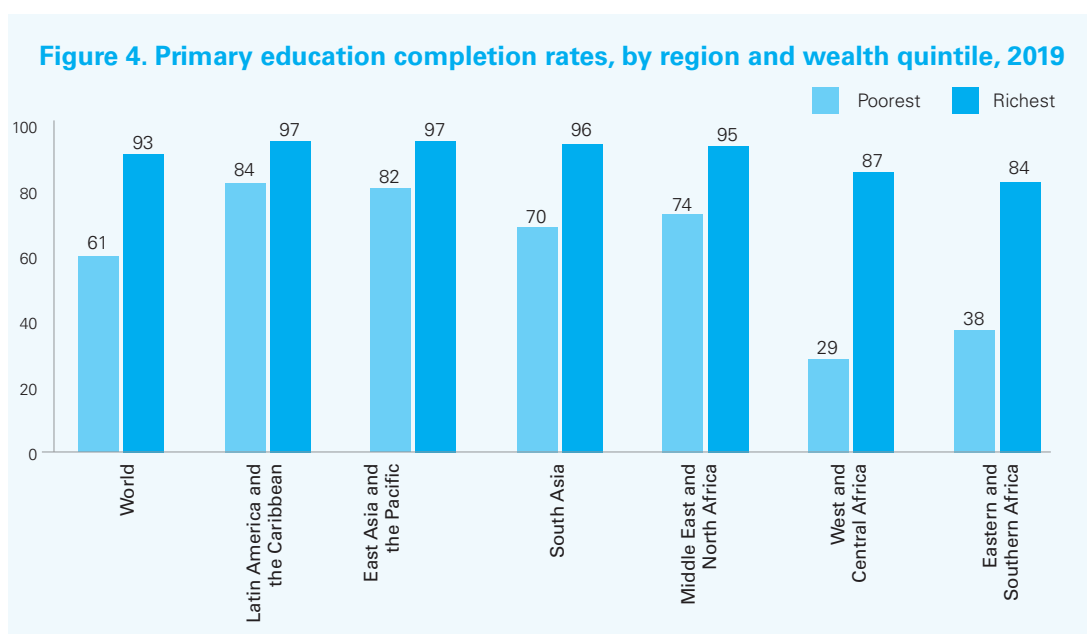
2.2.2 Nutrition

One third of children under-five in the world still lack adequate nutrition. Stunting and wasting are key indications of malnutrition, threatening the survival, development and growth of children. Globally, 149 million children under 5 were estimated to be stunted, 45 million were estimated to be wasted in 2020.¹ Moreover, 340 million children under five have vitamin and mineral deficiencies that are harmful to their growth and well-being. Research has shown that iron deficiency negatively impacts children’s learning ability. In addition, childhood obesity and overweight have become prevalent. Globally, 38.9 million children were overweight or obese in 2020, primarily in the Middle East, North Africa, North America, and Eastern

Europe.² This is also correlated to the early onset of type 2 diabetes and mental health issues in children.

2.2.3 Education

The imbalance in education has been evident across the globe. In 2019, 61 per cent of the global population in poor areas completed primary education, with the figure as low as 29 per cent in western and central Africa (see Figure 4). In comparison, 93 per cent of the global population in developed areas completed primary education. The COVID-19 pandemic has further exacerbated challenges in education. At the height of the pandemic, 1.5 billion schoolchildren were affected by school closures, and 463 million had no access to remote learning.³ Schoolchildren



Source: UNICEF global monitoring data on the situation of children and women

1 World Health Organization, 'Malnutrition', <www.who.int/news-room/fact-sheets/detail/malnutrition>, Fact sheet, 9 June 2021.

2 Ibid.

3 United Nations Children’s Fund, 'COVID-19: At least a third of the world’s schoolchildren unable to access remote learning during school closures, new report says', <www.unicef.org/press-releases/covid-19-least-third-worlds-schoolchildren-unable-access-remote-learning-during>, Press release, 26 August 2020.

in sub-Saharan Africa were the most affected: at least half of all students could not be reached with remote learning. Moreover, the number of out-of-school children and youth has risen by 6 million since 2021, and totalling 250 million in

2023.⁴ With increased expenditure on health due to the pandemic response, government budgets for education have decreased, and vulnerable groups were less likely to access education.

Table 1. Schoolchildren unable to access remote learning by region during COVID-19

Region	Minimum proportion of schoolchildren unable to access remote learning (%)	Minimum number of schoolchildren unable to access remote learning
East and Southern Africa	49%	67 million
West and Central Africa	48%	54 million
East Asia and the Pacific	20%	80 million
Middle East and North Africa	40%	37 million
South Asia	38%	147 million
Eastern Europe and Central Asia	34%	25 million
Latin America and the Caribbean	9%	13 million
Global	31%	463 million

Source: UNICEF Remote Learning Reachability Report 2020

2.3 International development cooperation for children

International development cooperation for children was first delivered at the end of World War II, in the form of emergency humanitarian support to children in countries affected by the war. Today, in addition to humanitarian assistance, international development cooperation for children has expanded to address long-term needs of children and mothers in developing countries.

There is global consensus on the importance of child development to the

overall economic and social development of a country. International development cooperation for children effectively promotes the achievement of the SDGs, with recipient countries welcoming the support and assistance. It can also be catalytic in promoting child rights and cultivating shared values among international partners. For example, empowering and supporting early childhood development improves children's educational attainment, advances their awareness of nutrition, water and sanitation, and consequently enables them to live healthier lives. In addition, international development cooperation for

⁴ United Nations Educational, Scientific and Cultural Organization, 'UNESCO: Global number of out-of-school children rises by 6 million', <www.unesco.org/en/articles/unesco-global-number-out-school-children-rises-6-million>, Press release, 18 September 2023.

children has demonstrated a high return on investment, with long-term investment contributing to help lift families out of poverty and stabilize social development. Through collaboration on child development, countries can build trust and cooperation across multiple departments and achieve substantial results, and improve long-term bilateral relations.

2.3.1 Significance

International development cooperation for children is vital to safeguarding child rights. From the perspective of human development, good nutrition and early learning are vital to children's brain development, and build the foundation for them to cope with challenges, manage social interactions, and support emotional development. In terms of social development, early investment in children is cost-effective and accumulates human capital, improves productivity, and tackles intergenerational poverty. Studies have shown that every USD 1 invested in quality early childhood programmes can yield returns between USD 4 and USD 16.⁵ In the SDGs, at least ten out of the 17 goals are related to child development. As countries endeavour to achieve these ambitious targets, investment in child development is crucial.

2.3.2 Urgent demand

Global poverty and inequality have intensified due to the COVID-19 pandemic, climate change and conflict, further threatening child health and well-being. In December 2021, UNICEF launched a record USD 9.4 billion emergency funding appeal to reach more than 327 million

people affected by humanitarian crises and the COVID-19 pandemic worldwide, including 177 million children.⁶ To address these development challenges, there is an urgent demand to strengthen international development cooperation for children to ensure the achievement of the SDGs by 2030.

2.3.3 Importance of China's participation

China's contribution and investment towards international development cooperation for children should be bolstered to realize the 2030 Agenda for Sustainable Development. China's national poverty alleviation efforts since 2012 have lifted nearly 100 million people out of poverty by the end of 2020. According to the World Bank, this accounted for more than 70 per cent of the global population lifted out of poverty in the same period. As the world's second largest economy and the largest developing country, China has the opportunity to share proven poverty reduction interventions that can be adapted to different contexts in developing countries. In addition, China has long prioritized child development in its social policy, and accumulated valuable experiences in reducing child mortality, improving child health and nutrition, and optimizing basic education. Thus, China's development models, technologies and products such as in maternal and child health, rehabilitation care for children with disabilities and micronutrient packets Ying Yang Bao can be further tested, adopted and localized in other developing countries to strengthen South-South cooperation.

⁵ First Things First, 'Investing in Early Childhood', <www.firstthingsfirst.org/early-childhood-matters/investing-in-early-childhood>, accessed 22 November 2023.

⁶ United Nations Children's Fund, 'UNICEF Launches US\$9.4 billion Emergency Funding Appeal for Children Affected by Conflict, the Climate Crisis and COVID-19', <www.unicef.org/press-releases/unicef-launches-us94-billion-emergency-funding-appeal-children-affected-conflict>, Press release, 7 December 2021.

3. COUNTRY CASE STUDIES: TOP DONORS

Traditional donor countries have accumulated significant experience in international development cooperation for children. This section summarizes the history, strategic and policy frameworks, institutional mechanisms and resource expenditure on international development cooperation for children of four top donors: the United State, the United Kingdom, Japan and Germany.

Table 2. UNICEF's top donors by contributions received, 2022 (USD millions)

Ranking	Donor Country	Regular Resources	Other Resources		Total
			Regular	Emergency	
1	United States	134	167	985	1,286
2	Germany	98	690	259	1,047
3	Canada	12	196	55	263
4	United Kingdom	-	68	160	228
5	Sweden	63	87	72	222
6	Japan	19	33	146	199
7	Netherlands	34	94	45	173
8	Norway	44	57	32	133
9	Denmark	11	24	23	58

Source: UNICEF Annual Report 2022

3.1 United States

3.1.1 Summary

The United States (U.S.) began delivering international development aid to children at the end of World War II. It played a leading role in the establishment of the United Nations Relief and Rehabilitation Administration in 1943, which planned, coordinated and delivered emergency relief to victims of war, including children. Then in the 1950s, the U.S. played a vital part in transforming emergency aid agencies for children into long-term development agencies, and vigorously advocated that child development has a high return on investment. With the increasing consensus among countries on investing in children and the long-term funding gap for child development, the U.S. developed a comprehensive, multi-sectoral strategy and policy framework for child development. Today, it continues to support international development cooperation for children and leverage multilateral platforms such as the UN. This has greatly enhanced the emphasis on child development globally.

3.1.2 Key strategies and policies

The U.S. has actively legislated and published strategies for international development cooperation on children. Notably, the government introduced the *Assistance for Orphans and Other Vulnerable Children in Developing Countries Act in 2005*, and the *Advancing Protection and Care for Children in Adversity: A U.S. Government Strategy for International Assistance (2019–2023)* in 2019, which outlined the commitments and implementation pathways to invest in the development, protection, dignity and security of children and their families around the world.

In education, the U.S. Congress passed the

Reinforcing Education Accountability in Development Act in 2017 to strengthen educational cooperation with partner countries. Then in 2018, eight agencies jointly released the *U.S. Government Strategy on International Basic Education for Fiscal Years 2019–2023*, which specified that providing high-quality education for children can produce a ripple effect that promotes economic growth, enhances democratic governance, strengthens resilience to crises, maintains public health and social stability, and reduces violent conflicts and extremism.

In health, the governments of the U.S., India and Ethiopia, together with UNICEF, launched the *Action Initiative* in 2012 to reduce child mortality rate to less than 20 deaths per 1,000 live births by 2035. As part of the COVID-19 response, the U.S. and its partners worked in 25 key countries to restore routine immunization services, prevent supply chain interruption, ensure high-quality family planning commodities, and improve infection prevention measures in health facilities.

In nutrition, the U.S. government published the *Multi-Sectoral Nutrition Strategy (2014–2025)* to link development initiatives of the government to the 2025 global nutrition target adopted by the World Health Assembly in 2012, with eight agencies engaged in the implementation.

3.1.3 Institutional mechanisms

The U.S. adopted a Whole-of-Government Approach to work with recipient countries to deliver international development cooperation for children, where representatives of various agencies established multi-sectoral coordination in recipient countries to integrate external communication in accordance with the specific country strategies. The U.S. government subsequently mobilized

agencies with the greatest comparative advantage to participate in the child development projects.

Several agencies are involved in international development cooperation for children, including United States Agency for International Development (USAID), Department of State, Department of Defence, Department of Treasury, Department of Education, and the Peace Corps. Specifically, the Bureau for Resilience and Food Security, Bureau for Economic Growth, Education, and Environment, and Bureau for Democracy, Conflict, and Humanitarian Assistance of USAID support child health, nutrition, education and protection. Within the Department of State, the U.S. Citizenship and Immigration Services provides protection for displaced and stateless children; Bureau of Democracy, Human Rights, and Labour, and the Office of the U.S. Global AIDS Coordinator and Health Diplomacy promote gender equality, boycott child soldiers, child trafficking and child marriage, and support the prevention of infectious diseases and HIV/AIDS among children and adolescents. Moreover, the Department of Defence implements humanitarian actions for child protection; the Department of Treasury leads engagement with multilateral development banks to protect child rights; the Department of Education implements child education programmes focused on technical cooperation with other countries; and the Peace Corps sends volunteers to reduce illiteracy and organize science education in primary schools.

3.1.4 Resource expenditure⁷

In 2021, the U.S. was the largest Official Development Assistance (ODA) donor. It provided USD 47.8 billion in ODA, representing 0.20 per cent of its Gross National Income (GNI). The U.S. contributed USD 14.6 billion (30 per cent of total ODA) to global health, of which USD 1.6 billion (4 per cent of total ODA) was focused on maternal, newborn and child health (MNCH).⁸ Moreover, USD 1.4 billion or 3 per cent of total ODA was put towards education.⁹

More than one third of the U.S.' bilateral ODA was allocated to social infrastructure and services, accounting for 39.5 per cent of bilateral ODA commitments (USD 16.9 billion), with a focus on support to health (USD 11.4 billion) and education (USD 997.3 million). Globally, the U.S. also provided the highest share of humanitarian assistance (36.6 per cent of bilateral ODA or USD 15.7 billion). In terms of geographic region, U.S. bilateral ODA primarily focused on Africa. With USD 14.2 billion allocated to the region, accounting for 36.5 per cent of gross bilateral ODA. Comparatively, USD 4.3 billion was allocated to Asia, accounting for 11.1 per cent of the gross bilateral ODA.

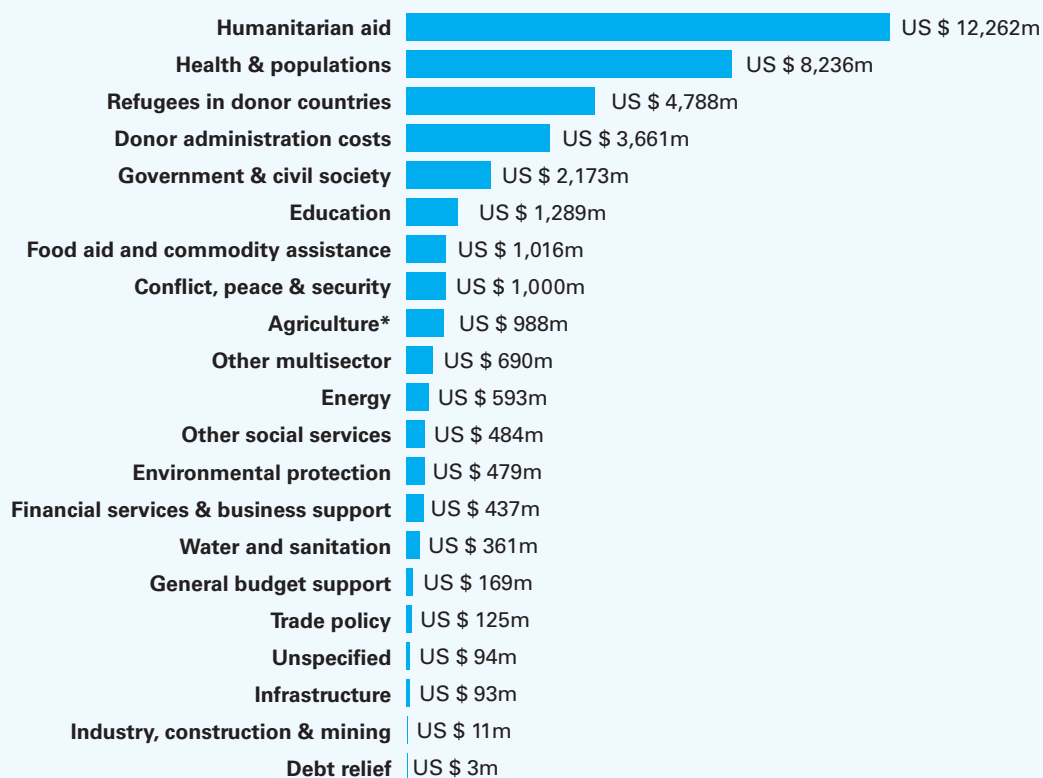
A significant portion of the U.S.' ODA was provided through multilateral channels working with UN agencies (USD 10.2 billion or 55.2 per cent of multilateral ODA). The top three UN recipients of U.S. multilateral ODA were World Food Programme (WFP), United Nations High Commissioner for Refugees (UNHCR) and UNICEF.

7 Organisation for Economic Co-operation and Development, 'Development Co-operation Profiles: United States', OECD Publishing, Paris, <<https://doi.org/10.1787/45472e20-en>>, accessed 22 November 2023.

8 Donor Tracker, 'At a Glance: US', SEEK Development, Germany, <donortracker.org/donor_profiles/united-states>, accessed 22 November 2023.

9 Ibid.

Figure 5. U.S.’s bilateral ODA spending by sector, 2021



Source: https://donortracker.org/donor_profiles/united-states

3.2 Germany

3.2.1 Summary

Germany is a pragmatic actor in international development cooperation for children that has emphasized education, health and gender equality. Its international development aid strategy does not list child development as a separate development agenda, rather child development is mainstreamed in cross-disciplinary sectors such as education, health and nutrition. From the beginning of the 21st century, Germany regarded international development cooperation as a critical means to reshape its international image. In 1992, the German Federal

Parliament adopted the CRC and implemented it as a law domestically. In 2001, Germany’s Federal Ministry of Economic Cooperation and Development (hereinafter the BMZ) adopted its 2015 Action Plan based on the MDGs with a focus on poverty reduction. Since the publication of the SDGs, Germany’s international development cooperation for children has entered a new stage with increased attention on child development.

Germany’s international development cooperation for children adopts a holistic and cross-disciplinary perspective, and regards gender equality as a core principle. Moreover, the MDGs and the SDGs have been a driving force in Germany’s efforts on

child development, formulating relevant policies for children and honing its own comparative advantages in areas such as education, health, nutrition and gender equality.

3.2.2 Key strategies and policies

Currently, child development is not a separate development agenda in Germany's international development cooperation, however, child issues have been integrated across development sectors such as education, health and nutrition. Notably, Germany issued two policy documents aimed directly at children: a position paper in 2011 titled *Young People in German Development Policy - A Contribution to the Implementation of the Rights and Children and Youth* that emphasized a rights-based approach; and an action plan in 2017 titled *Agents of Change: Children and Youth in Development Cooperation Activities* that summarized Germany's key activities in international development cooperation for children.

In education, key priorities are included in *Germany's Coalition Agreement 2021–2025*, focusing on creating employment opportunities, and promoting basic education, vocational training and continuing education. In 2015, Germany introduced the strategy of *Creating Equal Educational Opportunities for All* in line with the UN 2030 Agenda for Sustainable Development, which primarily focuses on the African continent and countries affected by fragility and conflict, to provide all children with equal access to education, improve education quality through teacher training, and promote inclusiveness and gender equality.

In health, Germany prioritized maternal and child health, sexual and reproductive health, prevention of common diseases,

and WASH for all. A number of guiding policy documents have been published, including the inter-ministerial global health strategy titled *Responsibility-Innovation-Partnership: Shaping Global Health Together (2020-2030)*; the position paper titled *Global Health: An Investment in the Future (2019)*, and the *One Health in Development Cooperation (2021)*.

In nutrition, addressing malnutrition among pregnant women, mothers and children are Germany's key concern in agricultural and rural development and food nutrition security. The foundational policy document is the *Special Initiative: One World No Hunger*, which aims to improve the nutrition status of 7.5 million people by 2024, prioritizing women and children. The policy document remains one of the five key priorities of the BMZ according to its *2030 Reform Strategy*.

3.2.3 Institutional mechanisms

The BMZ is responsible for overseeing Germany's international development cooperation for children, with the involvement of the German Agency for International Cooperation (GIZ) and Credit Institute for Reconstruction (KfW), as well as other agencies such as Engagement Global, and German Institute for Development Evaluation. GIZ and KfW are state-owned international development agencies overseen by the BMZ, and both play a key role in implementing international development cooperation for children. In addition, the Ministry of Finance, Ministry of Foreign Affairs, Ministry of Education and Research, Ministry of the Interior and Community, and Ministry of Environmental Protection are involved in different aspects of international development cooperation for children.

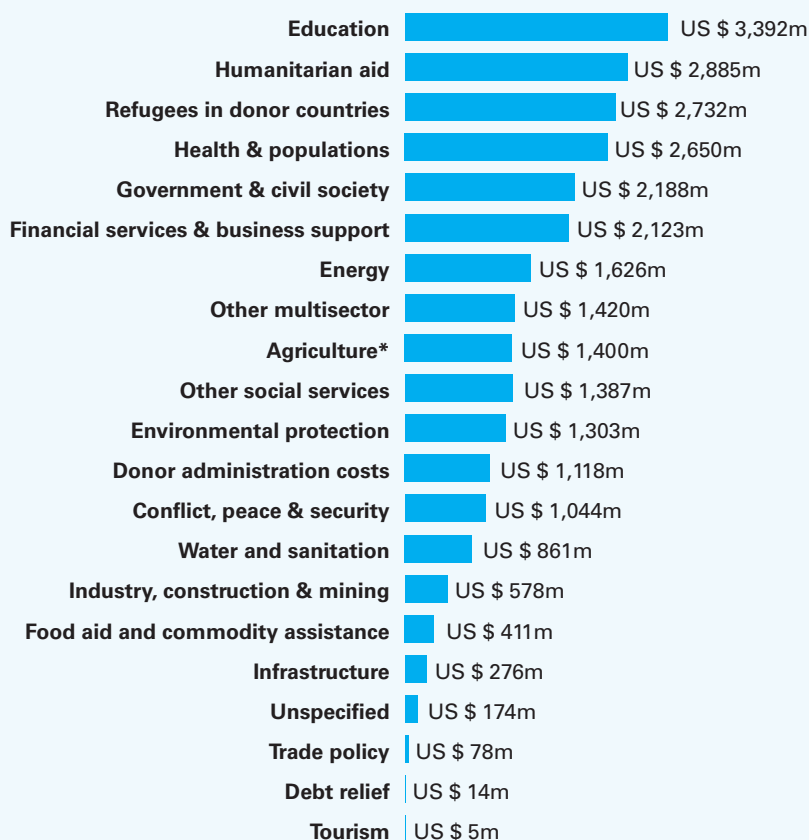
3.2.4 Resource allocation¹⁰

In 2021, Germany was the second largest ODA donor. It provided USD 33.3 billion in ODA, representing 0.76 per cent of GNI. Germany prioritized global health, and provided USD 4.7 billion in funding, accounting for 13.1 per cent of its total ODA.¹¹ Moreover, USD 686 million was allocated to MNCH, of which 14 per cent was for basic nutrition.¹² It also provided

USD 3.7 billion to education, accounting for 10.4 per cent of its total ODA.¹³ According to data published by BMZ in 2021, Germany also invested EUR 600 million through the One World No Hunger mechanism in support of nutrition.

Germany’s bilateral ODA focused on reducing inequalities, poverty and climate action goals of the UN 2030 Agenda. Just under half (43 per cent) of Germany’s

Figure 6: Germany’s bilateral ODA spending by sector, 2021 (USD million)



Source: https://donortracker.org/donor_profiles/germany

10 Organisation for Economic Co-operation and Development, ‘Development Co-operation Profiles: Germany’, OECD Publishing, Paris, <doi.org/10.1787/2dcf1367-en>, accessed 22 November 2023.

11 Donor Tracker, ‘At a Glance: Germany’, SEEK Development, Germany, <donortracker.org/donor_profiles/germany>, accessed 22 November 2023.

12 Ibid.

13 Ibid.

bilateral ODA was allocated to social infrastructure and services, totalling USD 13.5 billion, and included support to education (USD 4 billion) and health (USD 3.5 billion). In addition, 15.7 per cent (USD 4.9 billion) of Germany's bilateral ODA was allocated to economic infrastructure and services. Germany's bilateral humanitarian assistance totalled USD 3 billion (9.6 per cent of bilateral ODA). In terms of geographic region, Germany's bilateral ODA focused mainly on Africa and Asia. Specifically, USD 6.7 billion was allocated to Africa and USD 5.1 billion to Asia, accounting for 24.4 per cent and 18.6 per cent of gross bilateral ODA, respectively.

Predominantly, Germany's ODA was accomplished through bilateral channels (76.5 per cent), and the remaining 23.5 per cent was carried out through multilateral institutions including the European Union and the UN. The UN system received 39 per cent of Germany's multilateral contributions. Out of this USD 6 billion, the top three recipients of Germany's support were WFP, UNICEF, and UNDP.

3.3 Japan

3.3.1 Summary

Despite the tightening of national fiscal budgets in 2021 in the midst of the COVID-19 pandemic, Japan increased its contributions to ODA, surpassing the U.K. to become the third largest contributor to ODA after the U.S. and Germany. Japan believes international development cooperation is an important way to engage in global development, participate in policy discussions, establish standards, and safeguard its national interests. Child

development has been a common denominator for Japan in promoting global health, human rights, social development, disaster prevention and mitigation, and women's empowerment.

Japan was an early advocate for child development. Between the 1940s and 1960s, the Japanese government issued a series of child rights policies¹⁴, and advanced its child protection systems¹⁵, including the Child Welfare Law in 1947. Between the 1960s and 1980s, Japan engaged in international dialogue on child development, and dispatched the first Japan Overseas Cooperation Volunteers to Africa. Since the 1990s, Japan has been an active participant in international development cooperation for children. It officially ratified the CRC in 1994, which contributed to the enhancement of child rights. Recently, Japan has prioritized human security and joined the Global Partnership to End Violence against Children in 2018 to ensure no one is left behind.

Japan's international development cooperation for children does not have strategies and policies in place, nor does it have a dedicated department in charge. Japan does not have an overarching strategy on children, and Japan's international development cooperation for children is mostly implemented through projects focused on developing tools and products to promote maternal and child health, primary education, and child nutrition. The government has also integrated the SDGs in its domestic policies, thereby aligning Japan's implementation with the international framework.

¹⁴ This included Poor Relief Law (1929), Young Person's Act (1933), and Child Maltreatment Prevention Act (1933).

¹⁵ This included Outline for War Orphan Protection (1945) and Emergency Measures for the Protection of Homeless Children and Other Child Protection Issues (1945).

3.3.2 Key strategies and policies

The Official Development Assistance Charter is the fundamental legal document for Japan's international development cooperation for children. Issued in 1992 by a resolution of the Cabinet, the Charter was later amended in 2003 and 2015 and emphasizes that Japan's international development cooperation should be consistent with the SDGs.

In education, Japan published two key strategy documents in 2016: *the Development Strategy of Gender Equality and Women's Empowerment* that emphasized the importance of girls' education; and the position paper on SDG 4 (Education) that emphasized learning, human resources development for science, technology, and innovation, and education for building inclusive and peaceful societies. In 2019, Japan published the *G20 Initiative on Human Capital Investment for Sustainable Development: Quality Education for Creating Inclusive, Resilient and Innovative Societies* and announced the Education x Innovation Initiative to improve knowledge learning, STEM curriculum, and e-learning among 9 million children and adolescents from 2019 to 2021.

In health, Japan's international development cooperation for children focused on the prevention and control of infectious diseases such as malaria, tuberculosis, and HIV/AIDS, the main causes of death for children under five. Notably, Japan published the *Mother and Child Health Handbook* in 2011, and established multi-level trainings to promote the maternal, neonatal, and child health in developing countries. In 2013, Japan launched the *Global Health Diplomacy Strategy* to realize a world where every person can receive basic healthcare services.

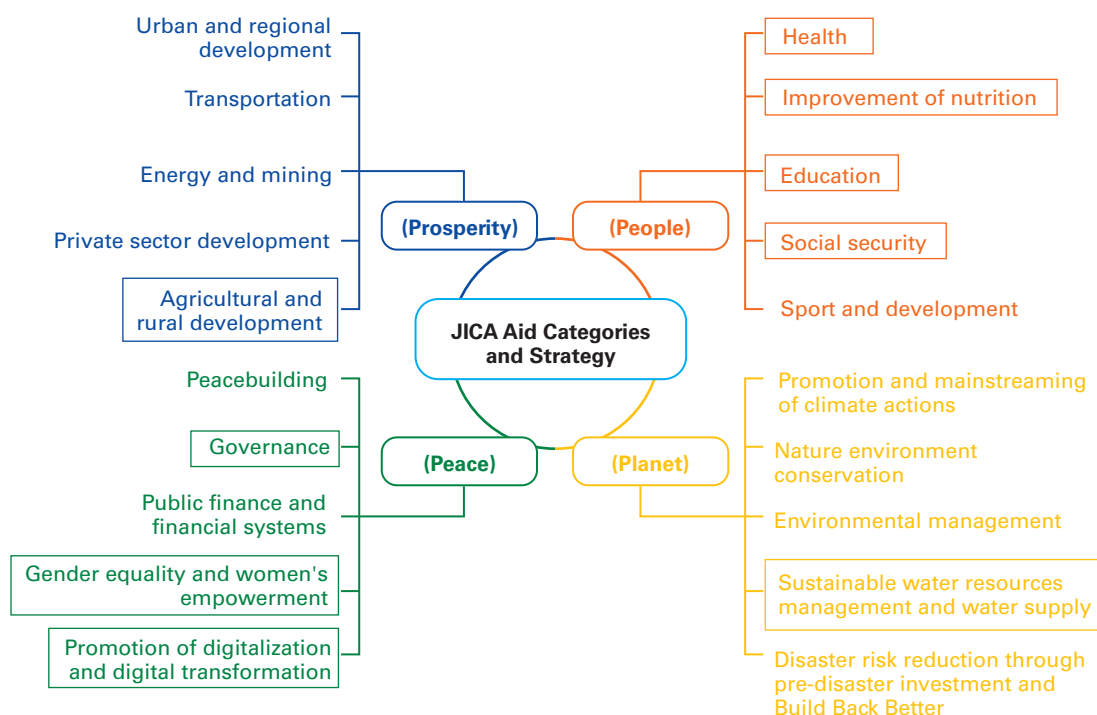
In nutrition, Japan prioritizes five key areas: 1) nutrition and universal health coverage; 2) safe, sustainable, and healthy food system; 3) interventions for malnutrition in vulnerable situations; 4) data-driven accountability; and 5) nutrition financing. In 2019, Japan partnered with the World Bank to establish the Japan Trust Fund for Scaling Up Nutrition Investments to address malnutrition. In 2021, Japan pledged USD 2.8 billion to support international development cooperation on nutrition in the next three years, in an effort to contribute to universal health coverage and the establishment of sustainable food systems.

3.3.3 Institutional mechanisms

The main government departments involved in Japan's international development cooperation for children include the Ministry of Foreign Affairs (MOFA), Ministry of Finance (MOF), and the Japan International Cooperation Agency (JICA). MOFA is the main decision-making department responsible for formulating international development cooperation policies, supervising and managing JICA, reviewing projects and loans, and coordinating development cooperation with the UN. MOFA also shares Japan's development experiences at international forums, and leverages its small investment budget for development financing. MOF is responsible for the overall coordination of the international development budget, including child development priorities, particularly for multilateral cooperation with the World Bank, International Monetary Fund (IMF), and regional development banks.

JICA is the main executing agency of Japan's international development cooperation, and manages more than half of Japan's bilateral ODA funds. In terms of child development, JICA implements the

Figure 7. Child-related components of JICA's international development strategy



Source: Figure adapted from the JICA annual report 2021

strategies and initiatives of the MOFA through technical cooperation and international development projects. JICA's fifth implementation plan (2022-2026) focuses on infrastructure and economic development, people-centred development, universal values and peacebuilding, and global issues. Under the framework, major issues facing developing countries are categorized under the "4Ps": Prosperity, People, Peace, and Planet (Figure 5). JICA's foreign aid strategy does not have an independent category for child development, it is instead integrated under components such as health, education, nutrition, and gender equality and women's empowerment.

3.3.4 Resource expenditure¹⁶

In 2021, Japan was the third largest ODA donor. It provided USD 17.6 billion in ODA, representing 0.34 per cent of GNI. Japan contributed USD 2 billion (9 per cent of its ODA) to prioritize global health, including USD 442 million to MNCH (of which 13 per cent to basic nutrition).¹⁷ The allocation to MNCH more than doubled in 2021 in response to the COVID-19 pandemic. Japan also contributed USD 695 million to education, accounting for 3 per cent of total ODA.¹⁸ Notably, 51 per cent or USD 295 million of Japan's bilateral ODA in education was focused on higher education.

16 Organisation for Economic Co-operation and Development, 'Development Co-operation Profiles: Japan', OECD Publishing, Paris, <doi.org/10.1787/2dcf1367-en>, accessed 22 November 2023.

17 Donor Tracker, 'At a Glance: Japan', SEEK Development, Germany, <donortracker.org/donor_profiles/japan>, accessed 22 November 2023.

18 Ibid.

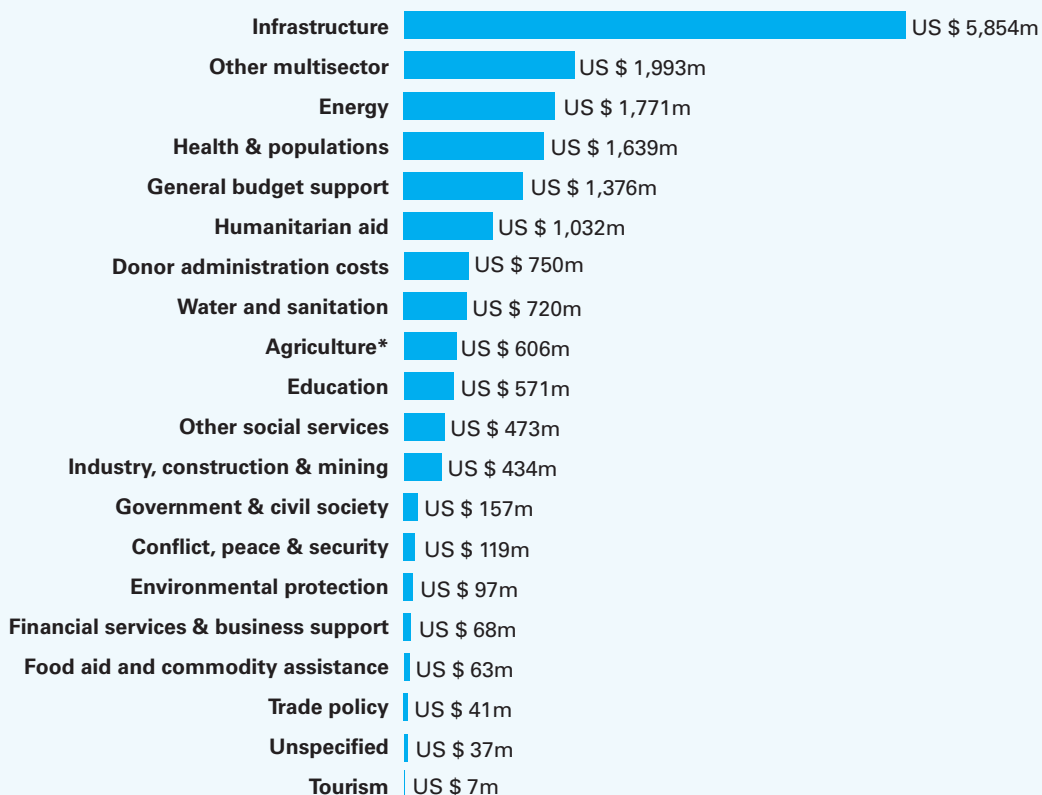
Japan focused most of its bilateral ODA on industry, innovation and infrastructure, climate action, and sustainable cities and communities in 2021, contributing to the goals of the UN 2030 Agenda. Specifically, 35.8 per cent of its bilateral ODA was allocated for economic infrastructure and services, totalling USD 5.5 billion. Social infrastructure and services accounted for 27.8 per cent of its bilateral ODA and totalled USD 4.3 billion, with a focus on support to health (USD 1.8 billion), water and sanitation (USD 1.2 billion) and education (USD 498.2 million). Japan's bilateral humanitarian assistance totalled USD 950.5 million (6.2 per cent of bilateral ODA).

Eighty-one per cent of Japan's ODA was delivered through bilateral channels, and

the remaining 19 per cent was allocated through multilateral institutions. The UN system received 28.7 per cent of Japan's multilateral contributions. In 2021, UNICEF was the UN agency that received the largest amount of multilateral ODA from Japan. Out of the USD 1.6 billion, the top three UN recipients of Japan's support were UNICEF, UNDP and WFP.

In 2021, Japan's bilateral ODA primarily focused on Asia, with USD 10.7 billion allocated to Asia, accounting for 60.3 per cent of gross bilateral ODA. In comparison, it allocated USD 2.4 billion to Africa, accounting for 13.5 per cent of gross bilateral ODA. In addition, Asia was also the main regional recipient of Japan's earmarked contributions to multilateral organizations.

Figure 8: Japan's bilateral ODA spending by sector, 2021 (USD million)



Source: https://donortracker.org/donor_profiles/japan

3.4 United Kingdom

3.4.1 Summary

The United Kingdom (U.K.) has consistently emphasized child rights in its foreign policy and decision-making, and provided high-quality health, nutrition and education for children in developing countries to ensure they achieve their greatest potential.

Although Brexit has created some complexities in the U.K.'s foreign policy, child-related issues remain a current and future international development priority.

The U.K.'s international development cooperation for children ramped up in 1990 when the government signed the CRC and adopted the convention as legislation. Between 1997 and 2015, the U.K. attached great importance to international development cooperation, which made up one of the three pillars of its foreign policy alongside defence and diplomacy. By 2013, the U.K.'s ODA accounted for more than 0.7 per cent of GNI for the first time, becoming the only G7 country to achieve this target, demonstrating strong financial support to international development cooperation for children. Before 2015, the U.K. was the world's largest ODA donor, however, due to Brexit and the COVID-19 pandemic, the government's strategy for international development has been narrowing and its foreign aid budget has been shrinking. In 2020, the government reduced its ODA target to 0.5 per cent of the GNI, with the U.K. investing resources in areas in line with domestic interests. This reorientation of the foreign aid strategy will have a significant impact on international development cooperation for children.

3.4.2 Key strategies and policies

The U.K.'s foreign aid policy prioritizes poverty reduction and sustainable development, while honouring international commitments to improve foreign aid transparency and efficiency. The *International Development (Reporting and Transparency) Act* was adopted in 2006, which requires annual reporting on international development aid. The U.K.'s adoption of the *International Development (Gender Equality) Act* in 2014 and the *International Development (Official Development Assistance Target) Act* in 2015 provided a solid legal foundation for international development cooperation for children. The U.K. has also published seven white papers on international development strategy,¹⁹ demonstrating strong policy continuity.

In education, the guiding policy document titled *UK Aid: Changing Lives, Delivering Results* was issued in 2011, and focused on basic education, teacher training, infrastructure construction, and education quality, with a priority on girls' education. The COVID-19 pandemic increased the risk of school dropout among the most vulnerable girls. Accordingly, the U.K. government announced an additional GBP 5 million emergency aid for education as part of its broader global humanitarian response, benefiting 26 countries. In the U.K.'s latest 2022 development strategy, girls' education continued to be a core development goal.

In health, the guiding policy document was titled *Health is Global: UK Government Strategy (2008-2013)*, and focused on the

¹⁹ This includes 1) Overseas Development: the Changing Emphasis in British Aid Policies: More Help for the Poorest (1975); 2) Eliminating World Poverty: A Challenge for the 21st Century (1997); 3) Eliminating World Poverty: Making Globalisation Work for the Poor (2000); 4) Eliminating World Poverty: Making Governance Work for Poor People (2006); 5) Eliminating World Poverty: Building Our Common Future (2009); 6) UK Aid: Tackling Global Challenges in the National Interest (2015); and 7) UK Government's Strategy for International Development (2022).

prevention of HIV/AIDS, tuberculosis, malaria and other common diseases among children and mothers. To help vulnerable children cope with COVID-19, the U.K. pledged GBP 1.65 billion in the next five years to support the immunization of children in the poorest countries. The U.K. also published several other strategies, including the *Framework for Results for Improving Reproductive, Maternal and Newborn Health in the Developing World*, with a priority on safe pregnancies and deliveries.

In nutrition, *Scaling Up Nutrition: The UK's Position Paper on Under-nutrition* was published in 2011, with the aim to address malnutrition in children and pregnant women. In 2017, the *Saving Lives, Investing in Future Generations and Building Prosperity: the UK's Global Nutrition Position Paper* was issued, prioritizing the first 1,000 days to treat severe undernutrition among children under-five.

3.4.3 Institutional mechanisms

In 1997, the Department for International Development (DFID) was set up, which provided institutional support for international development cooperation for children, with efforts to improve children's well-being, promote their protection and participation, and deliver effective and sustainable services. From 1997 to 2020, DFID was responsible for the U.K.'s international development cooperation for children. In June 2020, the former Foreign Commonwealth Office was merged with DFID to establish the Foreign, Commonwealth and Development Office (FCDO), a policymaking and a programme

management department. It is at the centre of implementing the U.K.'s foreign aid policy and plays a coordination role with other agencies. In 2020, the FCDO allocated 73.7 per cent of the U.K.'s ODA, with government departments allocating the remaining 26.3 per cent.

More than a dozen government departments are engaged in the management of foreign aid, including Ministry of Defence, HM Treasury, Department of International Trade, Department for Environment, Food and Rural Affairs, and Department of Health and Social Care. In health, the FCDO and Department of Health and Social Care led the design and implementation of international development cooperation projects for children; in education, the FCDO and Department of Education took a leading role; and in nutrition, the FCDO formulated and implemented nutrition policies in developing countries.

3.4.4 Resource expenditure ²⁰

In 2021, the U.K. was the fourth largest ODA donor. It provided ODA that totalled USD 15.7 billion, accounting for 0.5 per cent of the GNI. The U.K. contributed USD 2.4 billion (15 per cent of total ODA) to global health, of which USD 318 million (3 per cent of total ODA) was allocated to MNCH.²¹ In addition, USD 839 million (5 per cent of total ODA) was allocated to education.²²

The U.K. focused its bilateral ODA on gender, peace, poverty and health. Over one-third of the U.K.'s bilateral ODA was allocated to social infrastructure and services, accounting for 39.7 per cent of

²⁰ Organisation for Economic Co-operation and Development, 'Development Co-operation Profiles: United Kingdom', OECD Publishing, Paris, < <https://doi.org/10.1787/2dcf1367-en>>, accessed 22 November 2023.

²¹ Donor Tracker, 'At a Glance: UK', SEEK Development, Germany, <donortracker.org/donor_profiles/united-kingdom>, accessed 22 November 2023.

²² Ibid.

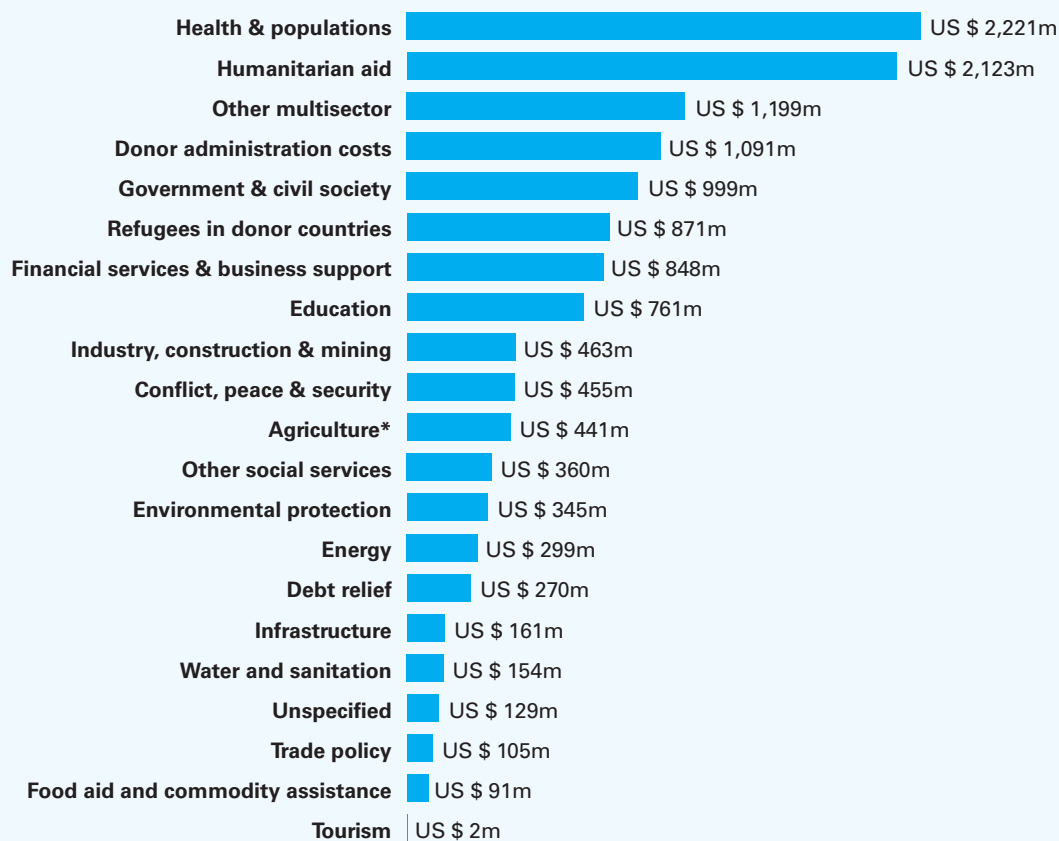
3. COUNTRY CASE STUDIES: TOP DONORS

bilateral ODA commitments (USD 1.4 billion), with a strong focus on health (USD 500.4 million) and education (USD 245.4 million). Bilateral humanitarian assistance made up the second largest category (USD 593.6 million or 16.5 per cent of bilateral ODA). In addition, the U.K. committed USD 530.3 million (15.2 per cent of bilateral ODA) to address the immediate or underlying determinants of malnutrition in developing countries, including the areas of maternal health, and water, sanitation and hygiene (WASH). In terms of geographic region, the U.K.'s bilateral ODA primarily focused on Africa. It allocated USD 2.4 billion to the region, accounting for 24.1 per cent of gross bilateral ODA.

In comparison, USD 1.3 billion was allocated to Asia, accounting for 12.5 per cent of gross bilateral ODA.

In 2021, the majority of the U.K.'s foreign aid was delivered using bilateral ODA, accounting for about 61 per cent. The remaining 39 per cent was delivered using multilateral channels, including collaboration with multilateral organizations such as UNICEF and the Global Fund to Fight AIDS, Tuberculosis and Malaria. The UN system received USD 2 billion or 23.9 per cent of the U.K.'s multilateral ODA. The top three recipients that received core and earmarked contributions were WFP, UNICEF, and UNDP.

Figure 9. UK's bilateral ODA spending by sector, 2021



Source: https://donortracker.org/donor_profiles/united-kingdom

3.5 Key characteristics of international development for children

The research revealed five notable characteristics of international development cooperation for children. **The importance of child development is recognized globally.** With increasing consensus among governments on the importance of investing in children, child development has not been a politically sensitive topic. Moreover, the importance of child development is highly recognized by the international community and aligned with global development goals. The SDGs aim to leave no one behind and put children and other vulnerable groups at the centre of advancing global development. Synergistically, international development cooperation for children promotes the achievement of the SDGs, including the improvement of people's livelihoods, and is in line with the development priorities of recipient countries.

Investing in child development has strong spill-over effects. Child development is a cross-cutting discipline that encompasses several different fields, including health, nutrition, water, sanitation and hygiene, child protection and social policy. Study has shown that cross-sectoral improvements in these fields can also help combat poverty and promote economic growth. For example, investing in compulsory education can contribute to improved results in nutrition, water safety, and child protection. These spillover effects highlight the far-reaching positive impacts of international development cooperation for children.

Top-level policy design for child development has improved. In the past few decades, child development has received increased attention from the

international community. Countries have formulated top-level policy frameworks and strategies to ensure a multi-sectoral, non-fragmented approach to support child development. Top-level policies on international development cooperation for children have been developed by the U.S., Germany, the U.K., and Japan, along with sector-specific development policies for child health, basic education, the development of girls, and nutrition for children.

Priorities on international development cooperation for children have diversified. Due to differences in national contexts and development advantages, countries have developed different priorities and strategies on international development cooperation for children. For example, the United Kingdom places emphasis on strengthening basic education and girls' education in recipient countries, while Japan's education assistance focuses on using international platforms to support the improvement of education in the Asia Pacific region. In general, maternal and child health, water and sanitation, basic education, infrastructure, and democratic governance are among the prominent topics of international development cooperation for children.

International development cooperation for children engages a variety of partners. Most countries pursue international development cooperation for children through bilateral and multilateral organizations such as the UN agencies and International Financial Institutions. For example, Germany actively partners with various multilateral organizations, and it was the second-largest donor to UNICEF in 2020.

4. CHINA'S INVESTMENT IN INTERNATIONAL DEVELOPMENT COOPERATION FOR CHILDREN

4.1 Summary

China has provided economic and technical foreign aid through bilateral and multilateral cooperation to other developing countries to enhance their development capacity, enrich people's livelihoods, and promote economic development and social progress. China's international development policies are guided by a top-down approach where key initiatives are announced by top government leaders, with relevant government departments taking the lead to carry out activities in their sectors. Significantly, China has increasingly emphasized child rights in its national governance over the last three decades, and formulated a series of policies and legislation for child development.

China's international development cooperation does not have a consolidated agenda for children and women. Currently, international development cooperation for children has largely been based on requests of the recipient countries, rather than driven by specialized policies or strategic plans. The management of international development cooperation for

children is also not streamlined, with multiple departments and regional offices involved in project planning and implementation. China primarily delivers international development cooperation for children through bilateral aid, with some engagement with multilateral organizations and the private sector.

There is a need to improve standardization and sustainability in China's international development cooperation for children. Thus, it is necessary to further strengthen technical cooperation in operation and maintenance, and increase capacity building initiatives. Moreover, China's proven products, technologies and experiences need to be further tested to enable adoption in other developing countries.

4.2 Key policies and strategies

At present, China has not yet developed strategic plans for foreign aid, nor does it have specified policies for international development cooperation for children. However, there is increasing support from the top leadership for international

development cooperation for children. At the China-Africa Ministerial Conference on Health Cooperation and Development in 2013, China committed to sending 500 medical professionals to contribute to the reduction in maternal mortality rate and infant mortality rate, and providing technical support to 10 African hospitals. At the Global Summit of Women in 2015, China committed to launching 100 health projects for children and women in developing countries. At the Beijing Summit of the Forum on China-Africa Cooperation in 2018, China pledged to implement poverty reduction projects to improve the rural environment and living conditions, and protect the health of children and women in Africa.

4.3 Institutional mechanisms

China's international development cooperation for children is integrated within its foreign aid. To leverage foreign aid as an instrument for diplomacy, strengthen strategic planning and coordination, China established the China International Development Cooperation Agency (CIDCA) in 2018.

Several departments and institutions are involved in delivering China's foreign aid: CIDCA, the administration agency responsible for foreign aid's strategy and policy making; the Agency for International Economic Cooperation (AIECO), the China International Centre for Economic and Technical Exchanges (CICETE) and the Academy for International Business Officials (AIBO) Training Centre under MOFCOM are mainly responsible for the implementation and management of

foreign aid projects; National Health Commission (NHC) and Ministry of Education (MOE) and other key departments with separate foreign aid budgets.(Figure 10).

Specifically, CIDCA, NHC, AIECO, and CICETE are involved in international development cooperation for children. In particular, NHC plays a key role in the project management and implementation of maternal and child health projects. Traditional bilateral aid projects on child development are mainly decided by regional departments under CIDCA, including supply provision, technical cooperation and concessional loans supported projects. Multilateral projects in child development are mainly supported by the Global Development and South-South Cooperation Fund (GDF)²³.

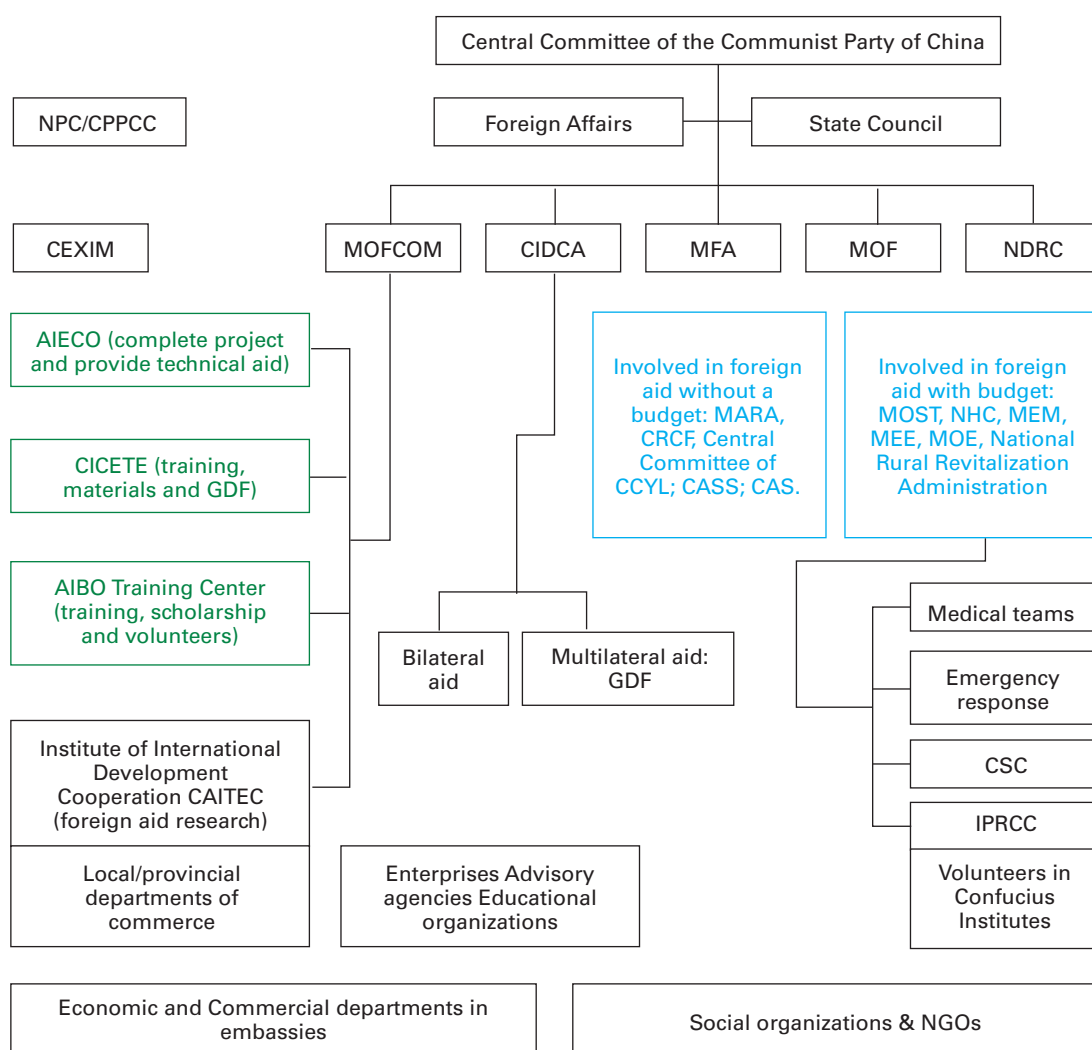
4.4 Models of cooperation

China's international development cooperation for children has gradually shifted in recent years: from bilateral aid to a combination of multilateral and bilateral aid; from a focus on infrastructure development to a combination of infrastructure development and technical assistance on capacity building; from providing bilateral funding to providing diversified funding and allowing private funding to play a complementary role; from traditional bilateral cooperation to a cooperation model led by the government with participation from multilateral institutions, non-governmental organizations, private enterprises and other forces.

²³ Renamed from South-South Cooperation Assistance Fund to Global Development and South-South Cooperation Fund by President Xi Jinping during the High-level Dialogue on Global Development on June 24, 2022.

4. CHINA'S INVESTMENT IN INTERNATIONAL DEVELOPMENT COOPERATION FOR CHILDREN

Figure 10. Institutional management framework of China's foreign aid



4.4.1 Bilateral aid

China's international development cooperation for children is mainly delivered via bilateral aid, encompassing supply provision, technical cooperation, capacity building and humanitarian response.

Turnkey projects are an important aspect of China's foreign aid, where China undertakes the planning and implementation of the foreign aid projects, and hands over the projects to the recipient governments for management and use after completion. Between 2013 and 2018,

China completed a total of 423 turnkey projects.²⁴ In education, China helped developing countries construct 86 primary and middle schools during this period, and provided equipment such as desks, computers and teaching aids. Moreover, China supported the construction of small roads to schools, wells for water supply, and small hydropower facilities. In health, China prioritized the health of children and women through building and upgrading 80 hospitals between 2013 and 2018. In recent years, China has announced major bilateral aid initiatives in health, including the establishment of hospitals, maternal and child clinics, anti-malaria centres, laboratories, centres for disease control and prevention, and children's rehabilitation hospitals.

4.4.1.1 Supply provision

In support of international development cooperation for children, China delivered 890 batches of needed supplies to 124 countries and regions between 2013 and 2018. Notably, it delivered school supplies such as stationery, desks and chairs, teaching equipment, as well as sports and cultural goods. In addition, China delivered medical supplies including transportation vehicles such as ambulances, medical equipment such as Computed Topography machines and colour Doppler ultrasound systems, consumables such as protective clothing, as well as drugs and vaccines for the prevention and treatment of life-threatening diseases such as Ebola, yellow fever, and malaria.

4.4.1.2 Technical cooperation

China's international development cooperation for children also included technical cooperation in health, education, and nutrition. In education, China supported teacher training, curriculum development and platform construction, and dispatched Chinese teachers and volunteers to developing countries. In health, China dispatched long-term medical teams to developing countries²⁵ to provide a wide range of clinical specialties; supported the capacity building of health professionals in maternal and child health; conducted screening and treatment of sick children; and improved disease monitoring, laboratory capacity, and treatment.

4.4.1.3 Capacity building

China's capacity building efforts on child development in developing countries focused on health, education, and nutrition. In education, China conducted training on pre-primary, primary, and secondary education, including topics such as the pre-primary education environment, rural education, and vocational education. In health, China conducted a variety of training, including health system management, hospital management, prevention and treatment of infectious diseases, gynecology and obstetrics, pediatrics, and immunization planning, with more than 20,000 health officials, managers and technicians trained from various recipient countries by the end of 2018.²⁶ In nutrition, China organized

24 State Council Information Office, China's International Development Cooperation in the New Era, <english.scio.gov.cn/whitepapers/2021-01/10/content_77099782_2.htm>, January 2021.

25 Other donor countries mainly dispatch short-term clinical teams and emergency rescue medical teams, rarely sending long-term medical personnel. Long-term medical services are mainly organized by non-governmental organizations.

26 Chinese Academy of International Trade and Economic Cooperation, The Path of International Development Cooperation: China's foreign aid under the tide of 40 years of reform and opening pp, China Commerce and Trade Press, Beijing, May, 2018, p. 144.

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thematic trainings on safe processing and storage of agricultural products, fortified complementary food supplementation, and local application of grain production technology.

4.4.1.4 Humanitarian response

In order to reduce casualties and economic losses in countries affected by natural disasters, China supported emergency response and dispatched medical and rescue workers. In response to public health emergencies such as the Ebola outbreak in West Africa, China delivered needed supplies, trained local medical workers, and helped build laboratories and treatment centres. China also supported recovery and reconstruction. After Typhoon Haiyan in the Philippines, it supported the construction of 166 temporary school buildings in collaboration with the Red Cross Society. In addition, China provides emergency food aid to Asian and African countries frequently affected by natural disasters through multilateral channels.

4.4.2 Multilateral aid

Since the 1980s, to transcend the limitations of bilateral aid, China began providing multilateral aid in cooperation with UN agencies under the Framework of Technical Cooperation among Developing Countries.

4.4.2.1 Promotion of international exchange and cooperation

China regularly organized policy exchanges and dialogues to promote international exchange and cooperation on children and women. In recent years, China has actively participated in several high-level forums, including the G20 Initiative for Early

Childhood Development, the High-Level Meeting on Cooperation for Child Rights in the Asia Pacific, the Global Women Summit, the Every Woman, Every Child High-level Meeting, and the General Assembly General Debate on the Promotion and Protection of Children's Rights.

4.4.2.2 Provision of funding to multilateral organizations

China has been the second largest contributor to the UN since 2018, and the second largest contributor to UN peacekeeping since 2016. China contributed to development funds in collaboration with the UN, including USD 1 billion to the China-UN Peace and Development Fund in 2015, and USD 50 million to the Food and Agriculture Organization (FAO)'s South-South Cooperation Programme in 2015. In addition, China led the creation of regional and sectoral development funds, such as the USD 300 million Lancang-Mekong Cooperation Fund and the RMB 20 billion China South-South Climate Cooperation Fund²⁷. Moreover, China provided funding to UN agencies and multilateral development financing institutions, and supported the formation of the Asian Development Bank.

4.4.2.3 Support through the GDF

GDF was established in 2015, with the aim to support the implementation of the 2030 Agenda for Sustainable Development in developing countries. With a total investment of USD 4 billion to date, the GDF mainly facilitates the implementation of livelihood projects of the UN and other organizations, particularly in children and

²⁷ Announced by President Xi Jinping during the United Nations Sustainable Development Summit 2015, the China South-South Climate Cooperation Fund was allocated RMB 20 billion (USD 3.1 billion) to help developing countries tackle climate change. Note this funding is managed by Ministry of Ecology and Environment, which is separate from the Global Development and South-South Cooperation Fund managed by CIDCA.

women's development, agriculture and food security, disaster prevention and mitigation, and support to refugee and displaced populations. As of 2021, China has carried out 105 projects in 53 developing countries in Asia, Africa and Latin America through the GDF, benefiting more than 20 million people, including children and women.

In terms of children and women's development, China primarily worked with UNICEF and UNFPA in Uganda, Ghana, Bangladesh, Nepal, Zimbabwe, Lebanon, and Ethiopia. The GDF delivered maternal and child health services; increased knowledge on epidemic prevention and control, malnutrition screening and prevention, and prevention of waterborne disease transmission; promoted child protection; supported economic empowerment of women; provided financial and agricultural trainings; and optimized gender equality policies.

In terms of agriculture and food security, China primarily worked with WFP, FAO, the United Nations Conference on Trade and Development, UNICEF, and the United Nations Industrial Development Organization in Ethiopia, Zimbabwe, Djibouti, Benin, Mozambique, Republic of the Congo, Democratic Republic of the Congo, South Sudan, Madagascar, Myanmar, and Cambodia. To address hunger and malnutrition, the GDF provided nutritious food and supported crop cultivation; to improve agricultural productivity and alleviate poverty, it delivered agricultural products and services, organized rural households' participation in agriculture, established farm-to-market linkages, and conducted agricultural training.

In terms of disaster prevention and mitigation, China primarily worked with

UNDP, WFP and UNICEF in Rwanda, Zimbabwe, Malawi, Mozambique, Sudan, Cuba, Kyrgyzstan, and Kazakhstan. The GDF supported resettlement of affected populations, provision of food and safe water, treatment of malnutrition, and provision of teaching aids and protection services for children. It also promoted resilience through provision of disaster risk management tools and equipment, restoration of infrastructure, and management of solid and medical waste. In addition, the GDF improved disaster prevention capacity through optimization of policies and standards and training on disaster risk assessment.

In terms of support to refugees and the displaced populations, China worked closely with UNHCR, International Organization for Migration, International Committee of the Red Cross, International Federation of Red Cross and Red Crescent Societies and UNICEF in Somalia, Afghanistan, Syria, Lebanon, Jordan, Palestine, Nigeria, Djibouti, and South Sudan. The GDF improved the living conditions of refugee children and women through provision of food, shelter, medical supplies, and teaching materials, organization of health staff training, establishment of water reservoirs, and restoration of school buildings.

4.5 Key challenges

4.5.1 Education

China's international development cooperation on education has prioritized infrastructure development for basic education, senior secondary education, and vocational education. Ensuring the proper utilization of the established schools and facilities has been a key challenge affected by external factors such as family support

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for children's education, availability of teachers and teaching materials, and investment in campus water and electricity facilities. In addition to infrastructure development, China has delivered capacity building for principals and teachers in some recipient countries to improve the quality of education, but efforts have been limited. In the future, both bilateral and multilateral cooperation should be considered to leverage more educational resources for vulnerable children in recipient countries.

4.5.2 Health

China's international development cooperation on health has mostly concentrated in sub-Saharan Africa, where it established specialized hospitals and delivered necessary medical equipment requested by recipient countries to alleviate the disease burden. Similar to the education sector, improving the utilization and sustainability of the established facilities and hospitals has been a key challenge. While Chinese technicians are stationed at the established hospitals to guide and maintain the facilities for one to two years after project completion, it is difficult to ensure the hospitals are well maintained and staffed. There is a need to explore diversified solutions to resolve these challenges in facility maintenance and staff capacity building.

4.5.3 Nutrition

Guided by the SDGs, China's international development cooperation on nutrition prioritized the provision of emergency food aid, dissemination of nutrition knowledge and capacity building, improvement of the nutrition environment, and development of innovations. However, the number of

Chinese institutions with an expertise in nutrition and international project experiences are limited. This contributed to China having insufficient understanding of the nutritional needs of children in developing countries, hindering the development of country-specific solutions. Moreover, due to differing food safety standards, China has faced challenges in the standardization of its nutrition commodities, and requires investment towards further testing and verification.

4.6 Resource expenditure

China's foreign aid totalled RMB 256.29 billion from 1950 to 2009, RMB 89.34 billion from 2010 to 2012, and RMB 270.2 billion from 2013 to 2018.²⁸ China's foreign aid funding can be categorized as grants, interest-free loans, and concessional loans. Specifically, grants to support livelihood projects accounted for about half of the total, and the annual growth rate reached about 30 per cent. Although China does not have detailed statistics on international development cooperation for children and women, the scale of children and women's development projects is gradually growing in proportion to China's overall foreign aid.

²⁸ To date, the State Council has issued three white papers defining China's approach to foreign aid, namely White Paper on China's Foreign Aid (2011), White Paper on China's Foreign Aid (2014), and White Paper on China's International Development Cooperation in the New Era (2021).

5. POLICY RECOMMENDATIONS

China has primarily focused on poverty elimination and the improvement of livelihoods in support of international development cooperation for children, with special emphasis on maternal and child health, education, and humanitarian assistance. Specifically, China invested in social welfare projects that were urgently needed by recipient countries, including the construction of hospitals and schools, provision of emergency food aid, response to infectious disease outbreaks, and support to prevention and mitigation of natural disasters that directly benefited recipient countries with visible quick wins.

China's investment in international development cooperation for children can be strategically strengthened by expanding from project-based support, and further optimizing the combination of infrastructure building, supply provision, and technical assistance in long-term sustainable and strategic development programming. The country's investment in international development cooperation for children is primarily through bilateral aid, while multilateral and civil society support remains at a smaller scale. Moreover, Chinese technologies and experiences with proven track records have not been fully explored for South-South Cooperation.

In 2021, China proposed the Global Development Initiative to contribute to the SDGs and provide a basic policy direction for strengthening international development cooperation. Considering the

new demands and challenges in child development, this report proposes six recommendations for China's contribution to international development cooperation for children:

1) Accelerate formulation of policy propositions for child development, and mainstream child related issues in top-level policy design.

Child development should be mainstreamed in top-level policy frameworks, and special policy guidance should be developed to facilitate targeted investments in children. It is also important to consider social issues related to women and children when designing and managing projects. For example, in the development of infrastructure projects, capacity building to provide relevant quality services for women and children should receive special attention and consideration.

2) Strengthen bilateral and multilateral exchanges to ensure alignment on child development strategies.

Bilateral communication with recipient countries should be strengthened to better understand their development and planning systems, as well as the needs of children in specific regions of the country to ensure programmatic alignment. Engagement with international and regional organizations should be bolstered to support coordinated investment in children, with attention to the UN's strategic priorities on child protection and maternal and child health.

Lastly, cooperation and dialogue on children should be enhanced with both developed countries (e.g., the U.S. and Japan) and developing countries (e.g., Brazil and India) to share experiences and best practices and ensure consensus on child development strategies.

3) Leverage the strengths of UN development agencies to build synergy.

Multilateral organizations, such as UNICEF, have unique expertise and perspectives on child development, which can help to mitigate the shortcomings of technical assistance when extending bilateral aid. China has accumulated rich experiences in rapid economic development and poverty reduction. Thus, China should deepen its cooperation with multilateral organizations such as UNICEF in knowledge sharing and contextualization of technology for child development to jointly advance the SDGs.

4) Increase financing for child development and mobilize resources from different stakeholders.

Child-related SDGs face a huge funding gap, and more funding is urgently required. First, existing aid policies and funds should also be geared towards child development. Furthermore, investments in poverty reduction, public health, climate change, and food security should also prioritize the rights and interests of women and children. Second, development resources should be mobilized from a broader range of stakeholders, including international financial institutions, domestic and foreign enterprises, non-profit foundations, and trilateral cooperation with other donor countries to also amplify the results for women and children. Third, the Government of China could further enhance its overall planning to allocate resources in a targeted and synergistic manner.

5) Infrastructure development and in-kind assistance should be supplemented with technical support to ensure sustainable results.

To ensure hospitals, schools, and other facilities constructed through foreign aid can be sustainably utilized by children and communities, greater emphasis should be placed on 'soft' assistance such as capacity building and people-to-people exchanges for sustainable results. Capacity building components can be integrated into project development plans to amplify the overall results. Taking education as an example, 'soft' assistance such as support to education planning, teacher training, education informatization, and campus nutrition improvement can be provided in schools constructed through China's foreign aid. Partnership building in developing countries should be strengthened to jointly conduct needs assessments and coordinate resource allocation.

6) Leverage China's comparative advantages to facilitate the development of quality technical products to support child development.

China has accumulated valuable experiences and developed reliable technical products and technologies to support child development that can be potentially adopted internationally. Specifically, technical products on maternal and child health, sanitation facilities, child nutrition, pre-primary education, and safe drinking water have demonstrated effectiveness in advancing child development. Efforts to document these technologies and contextualize the technical knowhow in partnership with agencies such as UNICEF can benefit other developing countries.

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