

Parenthood is not natural, as it needs continuous training and guidance...

Background

Early experiences last a lifetime! Early childhood is considered as the most rapid period of development, generally from pre-natal to eight years of age, during which children progress through an identifiable sequence of physical, cognitive, social and emotional development. A child starts learning as soon as it is born and the process continues for the rest of its life. However the intensity for learning that a child demonstrates during its early years is at its peak. Yet, the early childhood years are unfortunately given the least attention and the lowest investment from the governments worldwide.

Every year millions of infants around the world succumb to death on their journey from newborns to three-year-olds, deprived of care, love, attention, care and safety, which is essential for them to survive, grow, develop and learn in order to become healthy proactive adults in future. UNICEF [2011] statistics highlight - "But even when children do survive, they too often do not thrive. At least 10 per cent of all children – over 200 million in all – suffer some form of physical and/or mental disability or developmental delay (significantly low cognitive ability). An even larger number suffer from diminished learning capabilities and other disadvantages that limit their overall prospects for reaching their full potential." The 'Millennium Development Goals Charter' by UNFDP [2003] claims that widespread adoption of the integrated approach to early childhood is a precondition to meeting six of the eight Millennium Development Goals, including lowering child mortality, promoting gender equality, achieving universal primary education and eradicating extreme poverty.

The United Nations Convention on the Rights of the Child (UNCRC) outlines the basic human rights for the children and acknowledges every child's right to have every chance to survive and thrive. It is widely recognized that early childhood the most crucial period for the development of child and the opportunities missed during the early years cannot be made up at later stages of the child's life. Hence ensuring optimal opportunities and enough resources for a child's early years is one of the best investments that a country can make if it is to compete in a global economy based on the strength of its human capital. But Dipankar Ghosal of World Bank [2011] points out that "while most developed countries endeavour to give children a better start in life by providing universal early childhood education – either through the public or private sector -, this has remained a neglected area in South Asia.

As per census 2011, India has 158.7 million children in the age group of 0 to 6 years, out of which Maharashtra alone has 12.8 million in the same age group. Total children (0-6) in Pune city are 324,572 as per figure from Census India report on 2011. There were 171,152 boys while 153,420 are girls. The child forms 10.42 % of total population of Pune City. The Indian constitution has made provision for early childhood development through the amended article 45 (The Constitution Act, 2002), which directs that "The State shall endeavour to provide Early Childhood Care and Education (ECCE) for all children until they complete the age of six years". The National Policy for Children (1974) prioritized the need for ECCE by launching the Integrated Child Development Services (ICDS) Program, the first flagship program for the integrated development of children from prenatal to six years of age in 1975 on pilot basis with the objective of strengthening the foundation for holistic and integrated child development and building capacities of the

caregivers. The program focused on providing a package of six services comprising of supplementary nutrition, early childhood education (pre-school education), nutrition and health education, immunization, health check-up and referral services to the children below six years and pregnant women and lactating mothers. The National Policies for Health and Nutrition also recommend various supportive interventions for child care and development.

The discussion in a regional conference organized by the World Bank and the Centre for Early Childhood Education and Development of the Ambedkar University in New Delhi in 2012 points out that even though the ICDS program, which seeks to benefit some 80 million children from birth to 6 years of age, includes early childhood education, but the quality of the education provided is not very satisfactory. The other issues highlighted in this domain are mostly ad-hoc and negligible financing for ECCE, little co-ordination between institutions that provide other early childhood services such as health and nutrition and a non-existent legal framework for developing early childhood education.

- ✦ Despite existence of multiple service provisions, there is no reliable data available about the actual number of children attending ECCE provisions and their breakup as per delivery of services/ type of services. [The Draft on National Early Childhood Care and Education (ECCE) Policy]
- ✦ Non-formal pre-school, nutrition and health education for caregivers are not functioning adequately as planned and the infrastructure, basic amenities and training components are in need of much work and strengthening. Gupta A (2013)¹
- The ICDS program is supposed to provide early childhood development services with an integrated approach, but in reality it lays greater focus and emphasis on providing services only related to health and nutrition. The education of mothers on early childhood receives the least attention due to limitation of space in the urban settings, low honorarium and competition from private pre-schools.
- ✦ The utilization of ICDS services is much lower than estimated due to low awareness levels about its existence and services among the needy population.
- ✦ The Anganwadi Workers lack training and community mobilization skills necessary for conducting nutrition and health education sessions for capacity building of mothers [women in the age group of 15-45 years] due to insufficient training provisions for the workers.
- ✦ While Anganwadi Centers focus specifically on children above three years, the organized or ad-hoc services for children below 3 are almost non-existent in urban poor settings, except for those operational under the Government's scheme for setting up crèches for poor, working and ailing mothers.
- The outreach of the ICDS services is better for rural population as compared to the e urban poor as only about 227 projects are available in the urban areas in India covering 1.5 million children out of the total 6 million urban slum children below 6 years of age.

¹ INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS) SCHEME :A JOURNEY OF 37 YEARS A Gupta, SK Gupta, Baridalyne Nongkynrih. Uttar Pradesh and Uttarakhand Indian Association of Preventive and Social Medicine State Chapter, Vol. 25 No. 1 (2013)

Gaps in the implementation of the ICDS program:

- The outreach of the ICDS services is available to rural poor better than the urban poor as only about 227 projects are available in the urban areas in India covering 1.5 million children out of the total 6 million urban slum children below 6 years of age².
- The utilization of ICDS services is much lower due to low awareness levels among the needy population about its services.
- As the name suggests, the ICDS is supposed to implement the early childhood development with an integrated approach, it continues to lay greater focus and emphasis on providing services related to health and nutrition.
- The training and community mobilization capacities of the anganwadi workers are limited for conducting the nutrition and health education for capacity building of mothers [women in the age group of 15-45 years] in the absence of sufficient training for the workers. The mother education is also a low priority on the objective radar of the ICDS program, which is worsened further due to limitation of space in the urban settings, low honorarium and competition from private preschools.
- While Anganwadis focus only on children above three years, organized or ad-hoc services for children below 3 are almost non-existent in urban poor settings, except for those operational under the Government's scheme for setting up crèches for poor, working and ailing mothers and also the mobile crèche movement.

The key findings from Gupta A (2013)³ suggest that ICDS has expanded rapidly in its scope and coverage since its inception and today it covers approximately 7.6 million pregnant women and lactating mothers and around 36 million children less than six years of age. Though immunization activities under ICDS have been implemented with appreciable success, non-formal pre-school, nutrition and health education for caregivers are not functioning adequately as planned and the infrastructure, basic amenities and training components are in need of much work and strengthening.

The Right of Children to Free and Compulsory Education Act (RTE) effective from 1st April 2010 has also addressed ECCE under Section 11 of the Act which states, "with a view to prepare children above the age of three years for elementary education and to provide early childhood care and education for all children until they complete the age of six years, the appropriate Government may make necessary arrangement for providing free pre-school education for such children". ECCE services have been delivered through public, private and non-governmental channels since a long time with ICDS being one of the world's largest programmes imparting ECCE in India. The Draft on National Early Childhood Care and Education (ECCE) Policy claims that "Despite

² Khosla R. Urban Child Issues & strategies. Early Childhood Care and Education of children growing up in condition of Poverty in Urban areas. New Delhi: National Institute of Urban Affairs; 1993; 28-36.]

³ INTEGRATED CHILD DEVELOPMENT SERVICES (ICDS) SCHEME :A JOURNEY OF 37 YEARS A Gupta, SK Gupta, Baridalyne Nongkynrih. Uttar Pradesh and Uttarakhand Indian Association of Preventive and Social Medicine State Chapter, Vol. 25 No. 1 (2013)

existence of multiple service provisions, there is no reliable data available about the actual number of children attending ECCE provisions and their breakup as per delivery of services/ type of services.” As per Ministry of Women and Child Development (MWCD) statistics, out of 158.7 million children in the below six years category only 75.7 million children i.e. 48 percent have been reported to be covered under the ICDS. Broad estimations indicate that a significant number is also covered by the private sector and no data is available on the limited coverage by the NGO sector.

The Draft on National Early Childhood Care and Education (ECCE) Policy also claims that the quality of non-formal pre-school or early childhood care and education imparted through these multiple channels is uneven. The ECCE coverage is negatively impacted by inadequate institutional capacity and the absence of standards, regulatory norms and mechanisms as well as lack of understanding of the basic philosophy of ECCE. There is a strong need to ensure Early Childhood Care and Education (ECCE) for every child below six years across the country as a matter of government policy through reforms, measures and corrective actions and for this purpose, the existing early childhood care and education programs need to be strengthened and implemented more effectively and holistically.

Early Childhood Development Approach

What happens in the early years of a child matters a lot! Lawrence Schweinhart, president of the High Scope Educational Research Foundation in the United States claims that “High-quality early childhood education has long-term benefits and produces strong returns on investment”. It impacts cognitive skills, social skills, societal skills, high school graduation rates, and employment prospects, in addition to contributing to a reduction in crime.

Early Child Development (ECD) is a comprehensive and proven approach, which specifically aims at providing opportunities and motivation to child and its caregivers for the child’s holistic development. The approach is based on an established fact that young children respond best to their environment when caregivers use specific play techniques designed to encourage and stimulate progress to the next level of development (The World Bank, 2011). ECD interventions involve sensitizing and supporting parents about child care, delivering a range of essential services to children and parents, developing capacities of caregivers and teachers and using mass communications to enhance parents and caregiver's knowledge, skills and practices. The ECD programs could be centre- or home-based, formal or non-formal and may involve specific interventions for parents.

The Early Childhood Development programs play a significant role to improve young children’s capacities to learn and develop through formal (nursery, kindergarten, etc.) or informal (parenting, socialization, etc.) means by changing the development trajectory of children before the start of the school education.

A range of early childhood programs have been implemented worldwide for reducing inequalities and improving developmental outcomes for young children in low and middle income communities and countries to improve food intake and reduce stunting (supplementation programs, exclusive breastfeeding, conditional cash transfers,

nutrition monitoring), stimulation programs combined with nutrition and health programs, centre based programs, parenting and parent-child programs.

The Early Childhood Development programs in developed as well as developing countries claim to have shown positive outcomes for children, families and communities. World Bank's data confirms that evaluations of well-conceived ECD programs designed to foster early development demonstrate that children who participate in these programs tend to be more successful later in school, are more competent socially and emotionally and show better verbal, intellectual and physical development during early childhood than children who are not enrolled in these programs. The child development interventions are likely to be more effective and less costly when it is provided earlier in life rather than later. The most important advantage of ECD programs is that early identification of developmental problems lead to early interventions and referrals for better and timely response essential for the holistic development of a child.

The established benefits of the ECD programs in developing world:

✦ ***Possibility of reduction in social inequality***

It has been established by various longitudinal studies on the evaluation of early childhood development program that the early child development approach may help in reducing economic and social disparities in future, if implemented with socio-economically deprived communities. For instance - In India's Haryana project, school dropout rates did not change significantly for children from the higher caste but fell a dramatic 46 percent for the lower caste and an astonishing 80 percent for the middle caste (Chaturvedi et al 1987). The ECD programs in India and Guatemala resulted in a significant decline in the enrolment age for another traditionally disadvantaged group i.e. girls (Myers 1995).

✦ ***Reduction in school dropout rates***

Early interventions for development definitely have shown a positive influence on the prospects of formal education in future for a child. In India's Dalmau program (the only study in which attendance was measured); the later school attendance was 16 percent higher for children in the age group of six to eight. Similarly in Colombia's Promesa program, third-grade enrolment rates rose by 100 percent reflecting lower dropout and repetition rates and 60 percent of program children reached the fourth grade against only 30 percent of children in the comparison group.

✦ ***Higher school enrolment and less repetitions***

The Colombia Promesa program cited significantly higher enrolment rates in later schooling among ECD program children than among non-participants. Also children who participated in an early childhood program repeated fewer grades and made better progress through school than did non-participants in similar circumstances. The evaluations of Colombia Promesa program⁴ in the Alagoas

⁴ The project Promesa was implemented on the Pacific coast of the province of Choco in Colombia and its extension to the inland area of the province in 1978. The key objective of the program was to influence the physical and emotional health of the children as well as their intellectual development.

and Fortaleza in Northeast Brazil as well as in Argentina also showed on average lower rates of repetition in school for the children from ECD program.

✦ ***Improved cognitive development and school achievement***

The children, who participated in early childhood development interventions under Jamaica's First Home Visiting Program, Colombia's Cali project, Peru's Programa No Formal de Educacion Inicial (Pronoei) and the Turkey Early Enrichment Project, scored higher on intellectual aptitude tests than the non-participants. Another study conducted in Jamaica suggests that nutritional supplementation for undernourished children, who are most likely to come from disadvantaged families, improves mental development (Grantham-McGregor et al 1991).

✦ ***Improved nutrition and health***

Early childhood development activities have also been instrumental in providing better health and nutrition to children. India's Integrated Child Development Services (ICDS) program has been successful in strengthening the existing public health efforts by running initiatives such as mass immunizations or community-based health camps. These programs also aim at influencing the parent's attitude and behaviour towards child care by providing useful information to the parents about the health and nutrition needs of their children. A longitudinal study of child nutrition in the Philippines has proven how better nourished children perform significantly better in schools in later years (Glewwe, Jacoby and King, 2001).

ECD Program @ Pune

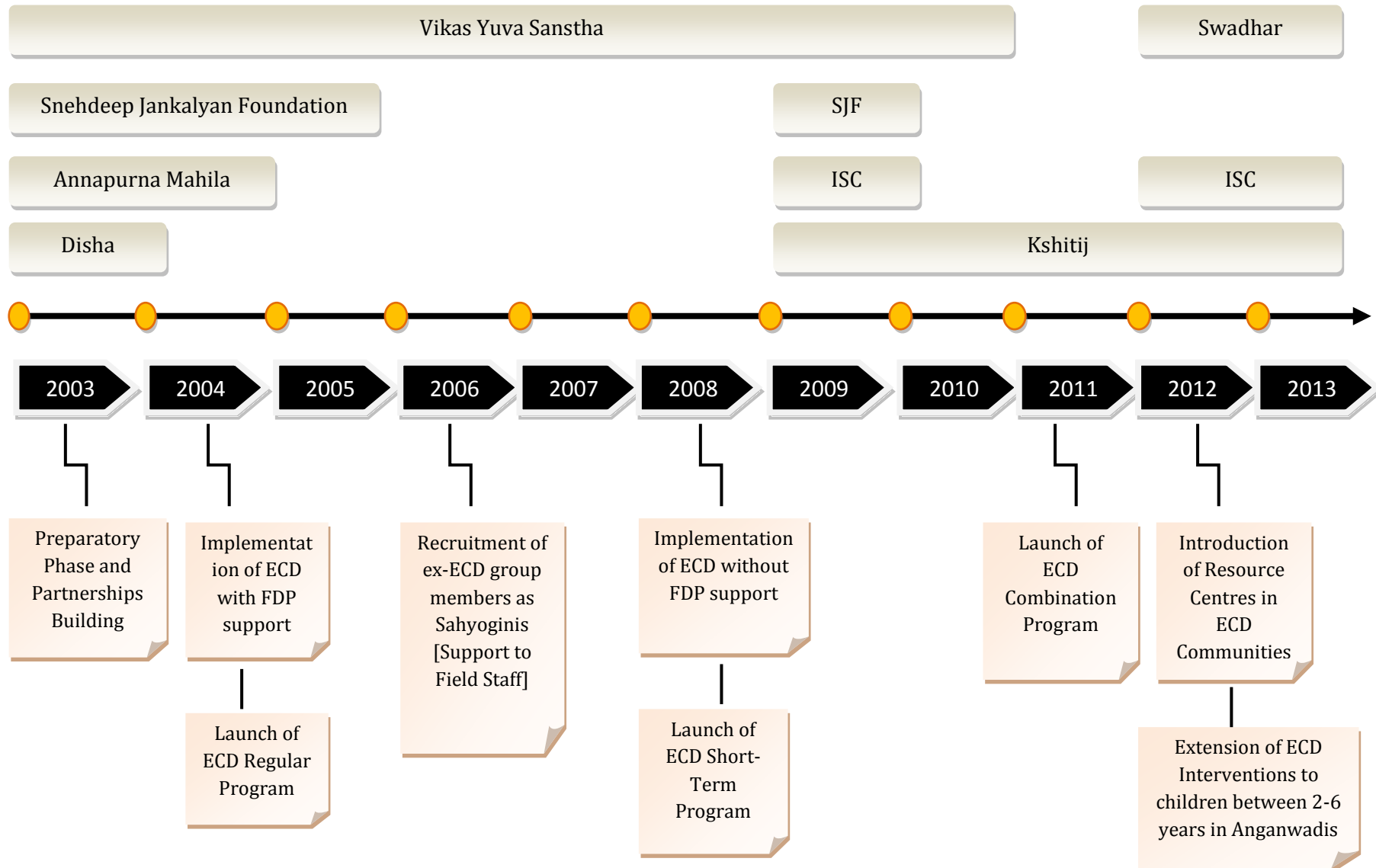
Interaide's Early Childhood Development (ECD) program is an outcome of the experiential learning from its Family Development Program (FDP), a community-based outreach program implemented since 1980's in different countries around the world such as Brazil, Philippines, Madagascar and India. FDP focuses on developing the capacities of underprivileged urban slum families through guided interventions involving individual guidance on mutually identified issues impacting quality of life in general. Based on the observations of the FDP field staff, a critical need was identified to intervene specifically for improving the poor understanding of the families, especially of the parents, in identifying and responding to the needs of the children in the early childhood development stage and a focused and structured initiative for providing services related to early childhood in urban slum communities under the name of Early Childhood Development Program was designed and implemented first in Philippines and later in India. The philosophy behind ECD program was to create a nurturing and stimulating environment for developing healthy parenting practices among parents of children coming from economically disadvantaged backgrounds through sustained attention and efforts. ECD program evolved over a period of time by simulating different implementation strategies based on the prior learning and experience in the field of early childhood development as well as the actual experience of working on ECD program in urban slum communities during the pilot phase.

Early Childhood Development program in Pune was initiated in 2004 in collaboration with various grass-root level organizations. The program aimed at sensitizing the

caregivers to respond to the needs of children between birth to 3 years of age by providing them focused guidance on importance of play, providing stimulation and care to children for development and creating opportunities for responsible and enjoyable parenting. The program was implemented under the umbrella of the Family Development Program initially, but later on it evolved as an independent initiative on the basis of information gathered and learning from the experiences of working with Balwadis (nurseries), crèche and FDP project. The Technical Support Team (TST) managed by Swabhimaan provides on-going training support as well as technical inputs to the staff working on the program at different levels through review meetings or individual consultations. The program has been implemented in urban low-income communities for past 10 years and has made significant contribution to the domain of early childhood development in terms of improved best practices and knowledge.

ECD program, an outcome of the Family Development Program, was designed to be launched initially only in the FDP communities during pilot phase. Proposing ECD activities in the context of FDP to parents and their children has proven to be an effective strategy, as building rapport and trust with beneficiaries turned out to be easier, as parents feel more comfortable to open up about issues related to children rather than other personal issues affecting the family stability. The field staff also experienced improvement at the level of family communication and relationship as a whole including older children. Through ECD interventions, it was possible to work on deeper issues beyond the young children's conditions and issues, as the younger children become the indirect entry point to the family dynamics, issues and systems.

ECD Pune's Journey of last 10 years



Why it is important to focus specifically on birth to 3 years age group in early childhood development intervention programs?

"We worry about what a child will become tomorrow, yet we forget that he is someone today." - Stacia Tauscher

The early childhood is generally defined as the age before the formal schooling begins for a child – five years in most of the countries worldwide but U.S. National Association for the Education of Young Children and UNESCO defines early childhood as before the age of eight. In India, early childhood has been defined as the period from birth to 6 years. Early childhood is a time of remarkable brain growth, which lays the foundation for subsequent learning and development for a child. However, birth to 3 years period remains the most ignored in the process of child development due to caregiver's belief that a child is unable to respond adequately. The first three years of a child's life is considered as the most crucial period for the development process of child for the following reasons:

- ✦ The maximum and fastest brain development takes place from birth to 5 years. The development of a child's brain depends on environmental stimulation, especially on the quality of care and interaction that the child receives. By age three, the brains of children are 2.5 times more active than those of adults. If the extraordinary brain development capacity of a child does not receive the necessary stimulation during the first three years, the learning process is substantially reduced in the future.
- ✦ Early experiences provide the base for the brain's organizational development and functioning throughout life.
- ✦ Infant's height is 50% greater than it was at birth at the end of first year and 75% greater at the end of two years.
- ✦ The psychosocial development of a child occurs most prominently between birth and one year of age.
- ✦ Babies understand and start learning language and communication skills before they start speaking.

Why ECD programs are more needed in the low-income communities?

For some outcomes later in life, particularly those related to achievement skills and cognitive development, poverty early in a child's life may be especially harmful.

Early childhood is the most important as well as particularly sensitive period in a child's life, in which economic deprivation may affect and compromise the access to opportunities for achievement and success. Inclusion of all marginalized groups in universal as well as specific interventions along with affirmative actions is the key to ensure equity in access and quality. Social researchers have been investigating the linkages between family poverty and subsequent child development for decades.

A large body of research evidence highlights that ECD programs, parent-focused or child-centred, have been successful in helping children coming from disadvantaged backgrounds directly or indirectly, for significantly resisting the detrimental effects of poverty on child development especially during the crucial and initial six years of life.

Nair M.K. (2004) in his article 'Early Childhood Development in Deprived Urban Settlements' points out that "But it would not be an exaggeration to say that ECCD programs in most of the developing countries are not always planned and implemented

with a clear understanding of the issues specific to the urban poor living in slums and peri-urban settlements; with the result that a greater percentage of under fives in the poor urban areas still remain un-reached by any early child development programs.”

The paper “Long Reach of Early Childhood Poverty” by Greg J. Duncan and Katherine Magnuson reviews the highest quality research evidence linking poverty to negative childhood outcomes.

Economists: The families with better economic resources are able to purchase or produce better resources necessary for young children’s development such as nutritious meals, enriched home learning environments and child care settings outside the home, safe and stimulating neighborhood environments, and higher-quality schools and post-secondary education for older children

Sociologists: The low-income parents are more likely than others to use an authoritarian and punitive parenting style and less likely to provide their children with stimulating learning experiences at home.

Psychologists: The higher incomes improve parents’ psychological well-being and their ability to engage in positive family processes, in particular high-quality parental interactions with children.

Neuroscientists: Early childhood period is the most critical in brain development and for establishing the neural functions and structures that shape future cognitive, social, emotional, and health outcomes, as the astonishingly rapid development of young children’s brains leaves them sensitive (and vulnerable) to environmental conditions.

Early childhood development programs are extremely important for the children from urban slum communities, as in large urban settings children are exposed constantly to various social and environmental stressors such as addictions or crime within or outside home, which are detrimental to the holistic development of the child. It has been observed that children from urban slums have a higher risk of turning to addictions, prostitution and crime and hence building the capacities of parents and specifically of children is very crucial in shaping their futures better.

Education, particularly early childhood education, is very crucial in giving children the opportunity to achieve and hence the programs that seek to help children born into poverty or low-income families are essential. Anderson⁵ [2003] highlights that the children’s opportunities to learn and develop its capacity are particularly important for children in communities disadvantaged by high rates of poverty, violence, substance abuse, and physical and social disorder. Manning (2010)⁶ shows strong evidence that comprehensive early childhood development programs increase educational success of children coming from low-income families and decrease their likelihood of committing crimes later in life. Therefore the family’s economic stability during early childhood may be far more important in shaping children’s ability, behaviour and achievement than the conditions later in childhood.

⁵ Anderson L., Shinn C., Fullilove M., Scrimshaw S., Fielding J., Normand J., Carande-Kulis V. The Effectiveness of Early Childhood Development Programs : A Systematic Review

⁶ Manning M, Homel R, Smith C. A meta-analysis of the effects of early developmental prevention programs in at-risk populations on non-health outcomes in adolescence. *Children and Youth Services Review*. 2010;32(4):506-19. Accessed on April 10, 2012

Frame (2001)⁷ points out that urban poverty impacts parent's sense of self as caregivers and their beliefs about relationships with their children. The conditions of urban poverty generate specific kinds of psychological distress such as sense of difficulty in providing daily necessities of life to one's children; lack of self-worth due capacity to provide limited opportunities and time for children; low physical energy or emotional availability due to the competing demands of livelihood options, impediments to protecting one's children from harm in the environment; and sense of foreshortened future for child.

Implementing ECD programs with socio-economically deprived families may build hope for bridging economic disparities in the society in future.

Why ECD program is relevant in urban slum communities in Pune?

As per the figures of Census 2011, an estimated 40 percent of Pune's population (about 14 lakh people) is living in slums pushing Pune to the third position among cities in India with the largest number of slums. Moreover, the Environment Status Report of 2009-2010 stated that the rate at which the slums in Pune city are expanding, at least 50 percent of the city's population would be living in slums soon considering the rise in migrant population in the city due to city's economic development. Unfortunately the efforts to provide better homes and other basic facilities to the urban poor have not met with enough success. A news report published by Times of Indian on March 3, 2011 highlights – "Municipal commissioner Mahesh Zagade said that following the central government's directions to expedite the public-private partnership (PPP) model for slum rehabilitation, the civic body will tap the possibility of involving private players to complete projects under the Basic Services to Urban Poor (BSUP)." In spite of protests by various city-based NGOs working for the rights of slum-dwellers, the government machineries have not been effective in improving the conditions of people residing in these communities. Inter Aid and Swabhimaan felt a strong need to implement the programs, which focus mainly on working with families and providing the individual family members with necessary guidance to improve their life conditions rather than relying on the outside help.

During the implementation of the FDP program in urban slum communities of Pune, the field staff observed that child care and parenting either was the most neglected issue in the families or the most pressing issue for the families while seeking guidance or support from the field staff. The consultation with the key stakeholders of the FDP project i.e. female members in the families through baseline survey and during pilot implementation of the ECD program highlighted certain scenarios in the families that makes the programs like ECD not just relevant but crucial in urban slum communities in Pune.

✦ ***Lack of relevant guidance or support for parenting:***

Considering the small size of houses in slums and migrant nature of the population residing in urban slums, the nuclear family is seen as a current trend. The disintegration of the joint family system in the urban context has taken away the biggest advantage that it had to offer to first-time parents was passing on of the traditional knowledge and skills related to parenting and child care. The young parents in nuclear families also lack the support and safety net offered by the joint family system earlier making them more vulnerable and anxious regarding the child care practices. The urban slum communities

7 Frame L. Parent-Child Relationships in Conditions of Urban Poverty: Protection, Care, and Neglect of Infants and Toddlers.

also do not have other formal support systems such as parent counseling centers or parenting courses for equipping them with knowledge and skills required for effective parenting. Absence of hygienic and basic facilities such as sanitation, healthcare, etc. at the community level also increases risk for child's health and development.

✦ ***Financial constraints***

Majority of the households in these slum communities are one-person-income families with limited means of making enough money to support the household. Due to which either mothers need to support the household with dual responsibilities i.e. household chores as well as out-of-home work in unorganized sectors such as domestic help or construction laborer, leaving them with very limited time to spend with child, which is essential for effective parenting. The financial constraints also result in limited resources for basic needs of children such as food, clothing or education.

✦ ***Low priority for parenting:***

The parenting is generally given the lowest priority in the urban slum households, as the families struggle with many other critical issues such as livelihood, relationships, health etc. The burden on mothers for supporting home as well as outside responsibilities and pressure of other issues such as domestic violence or relationship problems make them prone to higher stress levels. The resulting frustration and anger is generally subjected towards children in the form of abuse, who are generally the easy and only target for mothers.

✦ ***Low Control of Women over Sexual and Reproductive Health***

The women in the urban slum communities are generally married off by their parents at an early age - somewhere between 13 to 18 years, which increases the possibility of early pregnancy. The lack of awareness or decision-making capacity over the issues related to one's sexuality such as sexual health, family planning or sexual relationships result in early and frequent pregnancies and having more number of children than the available resources.

✦ ***Low Education and Exposure***

Due to lower education, absence of guidance and limited exposure, the parents generally lack the essential knowledge or skills to identify the child's needs as well as development milestones.

✦ ***Gender Inequalities***

The prevalent gender inequalities are quite prominently observed in urban slum communities, which are further accentuated due to limited resources for children. As a result, the preference is generally given to the male child, whether it is concerned with the basic needs of life or time available with parents. The male children are also pampered excessively, especially by grandparents. For example - the male child is given everything it demands such as junk food, which may affect its health negatively or the male child is always held into arms or protected excessively, which may affect his physical growth. The bias towards girl children in general results in parent's disinterest or apathy in providing the opportunities necessary for her early childhood development.

✦ ***Misconceptions and Superstitions***

High prevalence of misconceptions and superstitions related to parenting and child care results in various practices detrimental to child development. For example – The parents prefer to take the children to temples or local quacks for treatment in case of illnesses rather than healthcare system.

Why parenting is the most essential aspect in early childhood development?

Newborns need an uninterrupted, intimate and continuous attention and care from their surroundings especially in the early years. The parents and family are the first and foremost social contact for a child. Hence the parents form the biggest and most prominent influence on its development, when the child is completely dependent upon its parents during its early years. The interaction of parents with its child during the early childhood years has a long-lasting and important impact on the child's future development. Parents, grandparents, foster parents and other caregivers in the family affect language development, emotional growth, social skills and personality of a child.

The parental engagement in early learning and development is particularly important for a child to reach its full potential. Young children need to spend time in a caring and responsive environment that protects them from neglect and abuse. The role of the parents is more of a 'supporter' than just 'provider', as the child care is not just about providing for material resources for the child but also giving attention, affection, time, information and opportunities necessary for the holistic development of the child.

The children grow, learn and develop rapidly, if they have more positive early experiences, especially stable relationships with caring and responsive adults, safe and supportive environment, appropriate nutrition and health care.

The research evidence suggests that -

- ✦ parental involvement in children's formal and non-formal education is a key factor in improving children's academic attainment and achievement.
- ✦ Improved awareness motivates parents to achieve/ demand better health, nutrition, sanitation and education facilities i.e. quality life for child.
- ✦ A strong parent-child bond in early childhood prepares children to better handle stress throughout life.
- ✦ When parents and other family members take an interest in what children are learning, provide opportunities to do learning activities at home, and offer encouragement to a child's learning efforts, the impact can be significant.
- ✦ A secure attachment to a parent is related to the child's development of self-confidence and social competence Stronger parental attachments build a strong emotional foundation upon which that child can more adequately develop good social skills.
- ✦ A literacy-rich home environment, quantity and quality of cognitive stimulation, parental sensitivity and child-centered emotional support and emphasis on the value of learning leads to positive outcomes to children's early years of education.
- ✦ The parents, who are involved actively during the early years of education for a child, were more likely to take interest in the later formal education i.e. kindergarten and elementary schooling and to engage in building positive relationships with teachers and the parents of other children in the school.
- ✦ A healthy relationship between parents affects their parenting behaviour i.e. being more responsive, affectionate, and confident with their infants; more self-controlled in dealing

with defiant toddlers and better confidants for teenagers seeking advice and emotional support.

- ✦ An involved parent has a better understanding of his or her child's developmental needs and abilities, as he/she may be able to notice a developmental delay easily resulting in scope for timely and necessary interventions for the child's better development and growth in future.

“The family seems to be the most effective and economical system for fostering and sustaining the child’s development. Without family involvement, intervention is likely to be unsuccessful, and what few effects are achieved are likely to disappear once the intervention is discontinued.” —Urie Bronfenbrenner, noted Child Psychologist, Cornell University

Early childhood programs now recognize that they alone cannot prepare children for kindergarten. Instead, they need the support of families and communities. To acquire this support, they need to encourage the family involvement processes that research has shown to be effective in encouraging children’s learning and socio-emotional development” —Family Involvement in Early Childhood Education, Harvard Family Research Project, 2006

While providing ECD services, it is important to consider every aspect of a child’s life and to look at the dynamics of the entire family, including parents, grandparents, children and then more broadly, at the community.

What role can the fathers play in early childhood development?

“ Mothers are crucial to a child's overall development considering their caregiving roles, however the added involvement from a father in parenting responsibilities helps children tremendously.”

In more recent decades, the changing gender roles and advent of industrialization, urbanization and globalization has greatly impacted the household distribution of work among parents bringing a huge change in the role of fathers in terms of child care and development specifically. In tandem with the growing autonomy of women, the other prominent trends such as declining fertility, increasing rates of divorce and re-marriage, increase in single-parent families and childbirth outside marriage have resulted in a transition from the traditional role fathers from bread-winners and providers to a range of undefined parenting responsibilities and functions. The fathers are expected to be seen in a more *nurturing, caring, tender, involved and concerned parenting role than earlier.*

The research evidence on father-child relationship and its effect on child development has pointed out that the influence of father’s involvement in child development, especially early child development, is as positive as that of mother. And it's important to note that this father figure doesn't have to be a biological father in order for children to benefit, but he could be an adoptive father, foster father, stepdad or any adult male relation in the care-giving role.

- ✦ Children whose fathers are actively involved with them from birth are more likely to be emotionally secure, confident in exploring their surroundings, have better social connections with peers as they grow older, are less likely to get in trouble at home and at school, and are less likely to use drugs and alcohol.

- ✦ Fathers also tend to encourage independence and achievement in children, in contrast to the nurturing and protective nature of mothers.
- ✦ The father has an indirect influence on the child's development through the quality of his relationship with the mother. The male children, who see their fathers treating their mothers with respect and dealing with the conflicts within the relationship in appropriate manner, are more likely to be respectful towards other women in their lives later. Also the girls having non-aggressive and caring fathers understand how they should expect men to treat them and are less likely to become involved in violent or unhealthy relationships.

Involving fathers in ECD program is a very important yet efficient approach, as it brings lasting improvements in the family dynamics and situations considering the more decision-making capacity with fathers in traditional households. It has been observed that with proper motivation guidance, the fathers are eager to join and participate enthusiastically in the ECD program.

Inclusion of Mother in ECD program Pune

The ECD program in Pune focuses specifically on engaging mothers or other key female caregivers such as grandmother, elder sister or aunt in the absence of a mother. Due to the traditional gender roles – women as caregivers and men as providers - prevalent in urban slum communities, majority of the mothers prefer to stay at home for child care, at least during early years of a child and fathers engage in out-of-home work for almost 8 to 12 hours a day. The mothers become the most important person in the child's life, as mothers are continually available with and for the child. Hence engaging mothers in the ECD program was comparatively easier and feasible. The retention of mothers in the program is also better due to their easy availability.

Experience of working with fathers in ECD Program Pune

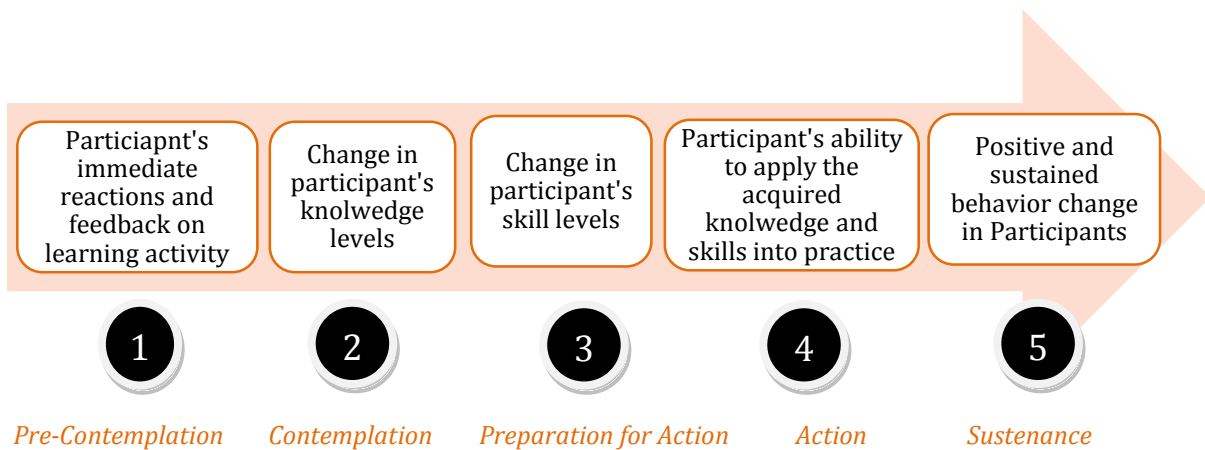
Involvement of mothers in the ECD program was a strategic decision considering their easy availability and caregiving role in the family, however it was realized that there is a strong need to involve fathers in the program activities due to following reasons:

- ✦ The mothers were expected to pass on the knowledge and skills acquired during the program sessions to the family members, especially fathers. It was observed that women lacked the confidence and necessary skills to pass on the information to their spouses.
- ✦ The communication between mothers and fathers at the community level is generally observed to be less or completely missing due to lack of privacy, low maturity levels due to early marriages, control of adults over interaction, traditions and customs informing the behaviour of parents, etc.
- ✦ Women's lower status in the family impacts their decision-making capacities, which eventually reduces their negotiation power at the family level in the matters of child care and parenting. Hence it is necessary to influence the father's beliefs, opinions and roles related to parenting.
- ✦ In some families, the mothers are very busy with household chores and outside home work, which makes it difficult to involve them in the program. In such families,

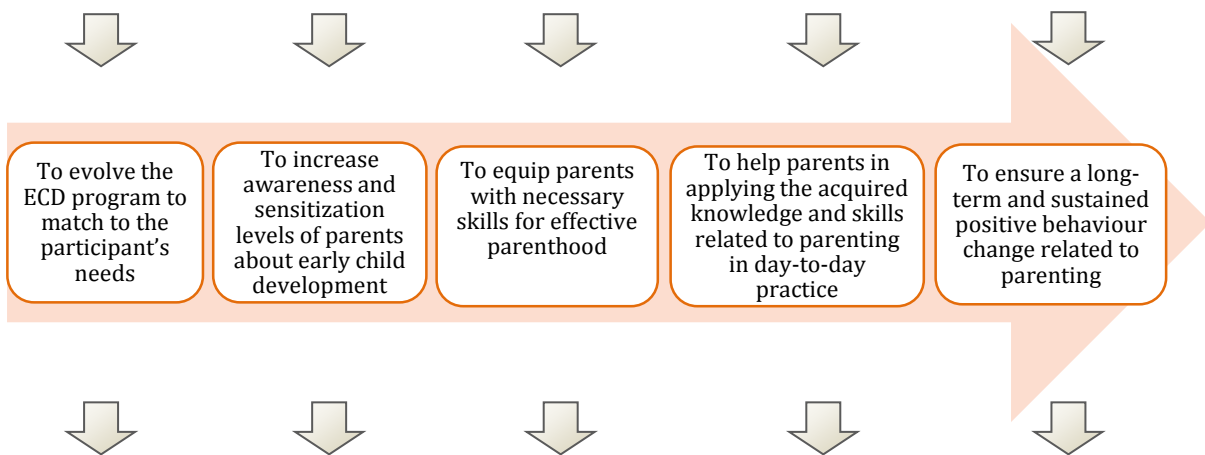
inclusion of fathers in the program improves the chances of better parenting for the child.

Program Objectives v/s Program Outcomes

The key objective of the ECD program is to promote healthy and conducive environment for holistic development for the children in the age group of birth to 3 years in urban low-income slum communities. This objective is achieved by strengthening specifically on parent-child relationship by helping parents to evolve healthy child care practices through focused and customized individual as well as group interventions.



To promote healthy and conducive environment for holistic development of the children from birth to 3 years of age group in urban slum families



Expected Outcome	<ul style="list-style-type: none"> ☞ Active and high level of participation in the program activities ☞ Positive Feedback on program content and design 	<ul style="list-style-type: none"> ☞ Increased awareness about needs of child ☞ Increased awareness about importance of responsible parenting for early childhood development 	<ul style="list-style-type: none"> ☞ Ability to identify the needs of child ☞ Ability to learn parenting skills and think of other creative and appropriate ways to respond to the child's needs 	<ul style="list-style-type: none"> ☞ Increased motivation levels to respond to the child's needs and take necessary actions ☞ Making available a wide range of useful and practical learning opportunities to the child for its holistic development 	<ul style="list-style-type: none"> ☞ Positive attitude towards parenting and child development ☞ Formation of stronger bonds between parent and child ☞ Ability to simulate acquired parenting knowledge and skills for future scenarios
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- ✘ Offering stimulating and friendly learning environment,
- ✘ Creating development and socialising opportunities for young children;
- ✘ Providing information to parents on children's learning and development;
- ✘ Stimulating sharing of information about learning and development at home and outside;
- ✘ Enhancing parents self-esteem as caregivers;
- ✘ Helping parents reconcile family and work responsibilities;
- ✘ Linking parents to other support systems in the community, such as health, housing, training and employment;
- ✘ Linking parents to other informal learning, cultural and leisure amenities in the community (playground, library, parks, swimming pool, cultural centres)
- ✘ Improving family dynamics and interpersonal relationships in case of conflicts;
- ✘ Making parenthood an enjoyable experience
- ✘ Creating opportunities for parents, specifically mothers, of increased mobility outside home and fostering friendly relationships with other program participants
- ✘ Helping parents to identify the children with special needs and providing appropriate guidance and referrals, if needed

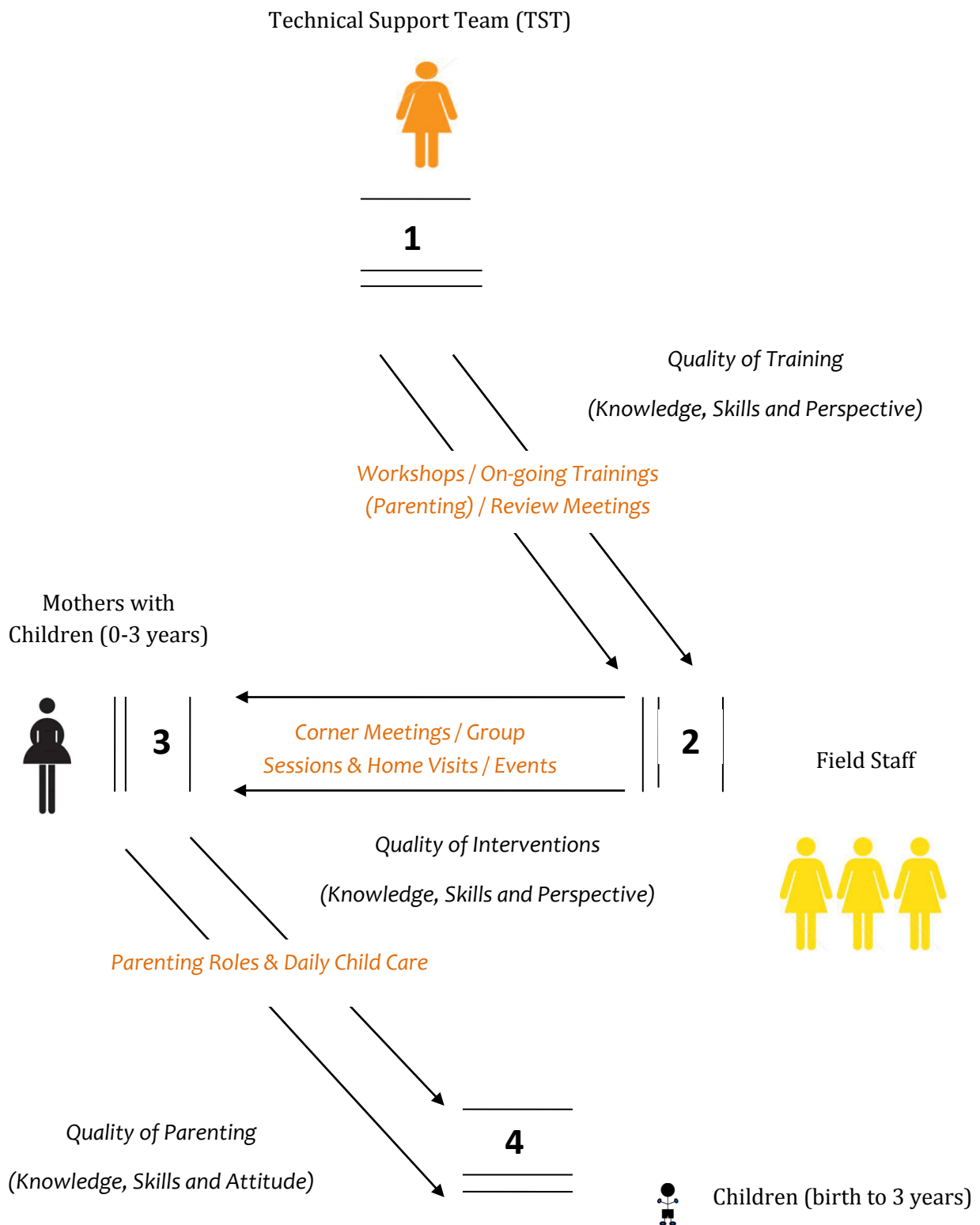
Implementation Strategy

Infants, toddlers and young children who experience positive and stimulating experiences and relationships with people and the environment are well equipped to reach their potential in life. A skilled and passionate early childhood educator plays an important role in the lives of young children. Educators of young children need to have sound theoretical knowledge and be able to apply this in practical ways when interacting with young children. Additionally, educators will reflect on their teaching techniques, strengths and challenges and seek ways to develop both personally and professionally in order to be confident and competent educators of young children.

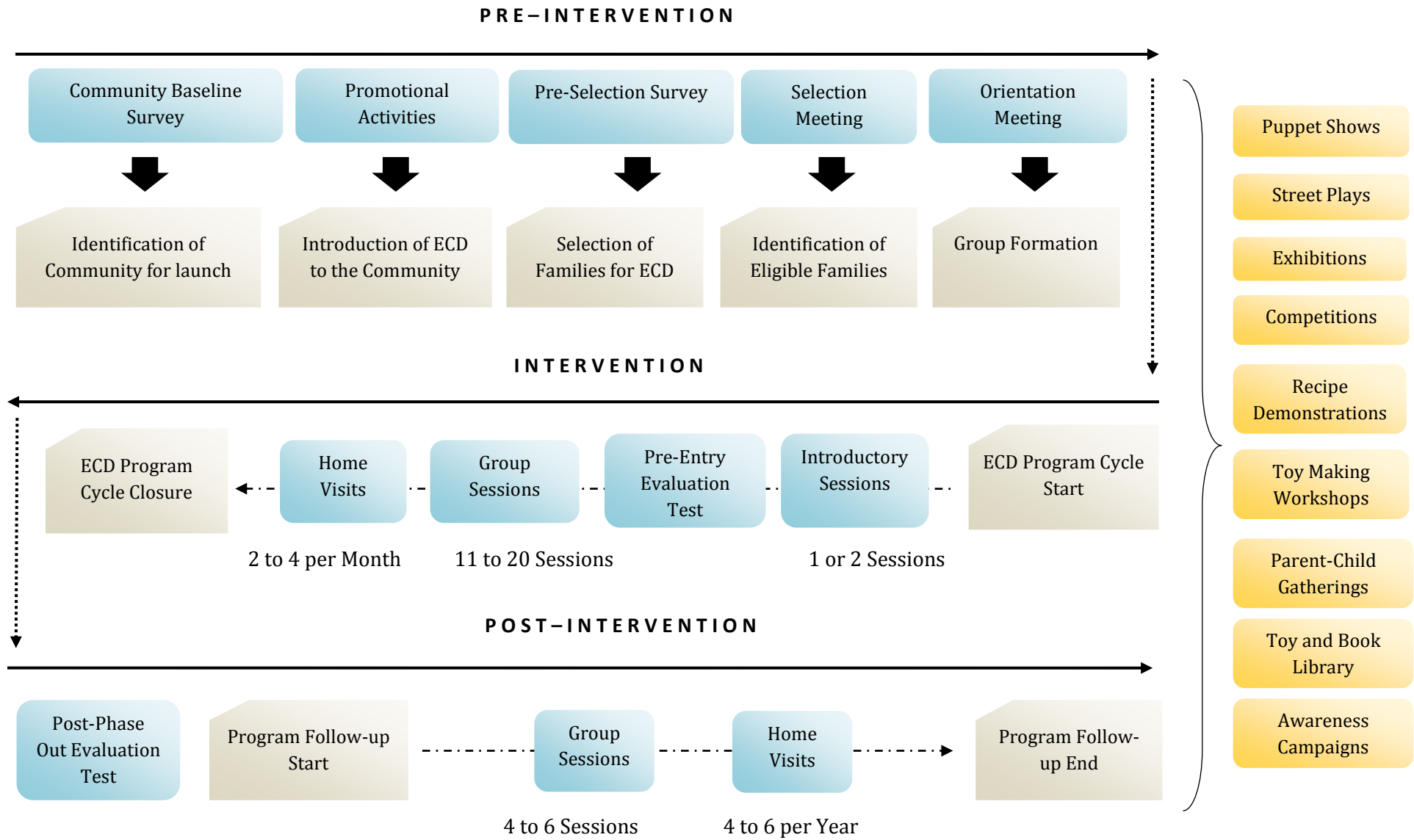
Interaide philosophy says that developmental work with underprivileged families and slum communities must include social guidance for their capacity building and future sustainability. Hence the ECD program has been designed to create a nurturing and stimulating environment for developing healthy parenting practice related to early childhood development for children coming from economically disadvantaged backgrounds through sustained attention and efforts. ECD program has been designed specifically for the primary caregivers of the children i.e. mothers, which involves a non-directive, play-oriented and participative activities based on experience-based approach.

ECD program can be implemented in any low-income urban community independently as well as a complementary to other programs related to family or community such as Family Development Program, community crèche, Balwadis, Self-help groups. ECD provides a convenient and easy entry point for any other community-based development programs, as parenting and child care are important and common needs in any community. It is easier to build rapport with the family using the thread of parenting and child care, as families are generally open and willing to seek help in this area and then the family could be motivated to seek help related to other issues in their lives.

The implementation of ECD activities should be a dynamic process with a constant reflection on the activities' outcome (vis-à-vis the program's objectives) and the beneficiaries' needs. The program has been designed in such a flexible manner that it can be tailor-made matching the needs of the individual communities and families.



Process Map



PHASE I: PRE-INTERVENTION

Community Baseline Survey

The ECD program has been designed specifically to cater to the needs of the urban low-income slum communities. A baseline survey is conducted in the identified community to gather information regarding the socio-demographic profile of families, family composition specifically detailed information on children in the family, housing conditions and economic situation. The community is selected on the basis of size i.e. around 2000 to 3000 population and the economic level of the community i.e. needy and poorest of poor population.

Promotional Activities

The objective of the promotional activities is to introduce the ECD program to the community. The promotional activities could be conducted in the form of door-to-door home visits or corner meetings. The corner meetings are conducted by using different interactive media such as poster exhibitions, puppet shows, role plays, etc. Through these activities the community members are provided information related to ECD program such as program design, its objectives, interventions provided, etc. The families are also approached using various other community-based events such as health camps for children or arranging competitions for fancy dress, healthy baby, low-cost nutrition recipes, etc. The mothers are also contacted during this period at immunization centers, child specialist waiting rooms, parents meeting at Balwadis or crèches, play centers, etc.

Pre-Selection Survey

Pre-selection survey is conducted in the different pockets of an identified community to identify mothers having children between the age group of birth to 3. The field staff visits individual families to gather detailed information with the help of a questionnaire.

Selection Meeting

This meeting is conducted between the field staff and ECD management staff, in which the gathered information is reviewed and the families matching the selection criteria (listed below) are enrolled in the ECD program.

Selection Criteria

The ECD program is implemented only in urban low-income communities. The community is selected by conducting a baseline survey for assessing the level of poverty of individual households. After the selection of the community, the individual families are surveyed for assessing the family's socio-demographic profile, economic situation and family composition. The following criteria are used for selecting the mothers from the families in the community to be enrolled in the ECD program:

- ✦ Mothers who have children between birth to 3 years

- ✦ Mothers consenting to participate in ECD activities with their children

The preference is generally given to the first-time mothers having a child between birth to 3 years age group and the mothers without much family support. The mothers, who are not available on regular basis due to work commitments or those having children with special needs, are not included in the program, as the ECD program’s field staff is not equipped with necessary skills or are unable to work outside the office hours to cater to the needs of such mothers or children.

Orientation Meeting

The mothers or female caregivers (in the case of absence of biological mothers) in the families selected for the FDP program are invited by the field staff for an orientation meeting. The meeting is used as a platform for giving detailed information about the ECD program to the participants and seeking the consent of the mothers interested in joining the program. In this meeting, the field staff discuss with the mothers consenting to participate in the program their convenient time for conducting the program sessions. The field staff takes more efforts to encourage specifically the vulnerable mothers, who are more in need of the guidance related to parenting.

Taking into consideration the consenting mothers’ availability for the program, the time and venue for the ECD program sessions is decided. Also it is decided at this point of time, what kind of group sessions would be ideal for the formed group. The mothers are also motivated to attend all the program sessions regularly by highlighting the benefits of the program. The rules for the smooth functioning of the group are decided through discussion and mutual consent of all the group members. Each program cycle covers several groups (approximately 6 to 7) depending upon the availability of field staff and size of the needy population matching the selection criteria of ECD program.

The ECD program group sessions can be offered in three different ways – regular, combination and short-term. The selection criteria and the approach for the selection of type of group sessions are as follows:

Category	Regular	Combination	Short-Term
Selection Criteria			<ul style="list-style-type: none"> ✦ Mothers from families with less stability i.e. migrant population ✦ Mothers working in unorganized sector having irregular and long working hours ✦ Mothers who are unable to attend long-term group sessions on regular basis due to certain

			<ul style="list-style-type: none"> personal constraints ✘ Mothers who are not fluent in Marathi or Hindi language
Approach	<ul style="list-style-type: none"> ✘ Group Sessions coupled with Individual Guidance ✘ Focus on concept clarification ✘ Closed group interventions ✘ Follow-up provision 	<ul style="list-style-type: none"> ✘ Mix of community and group interventions ✘ Focus on general awareness and later on guidance ✘ Tailor-made curriculum as per group's needs 	<ul style="list-style-type: none"> ✘ Designed to reach out to unreached mothers [working, poorest, etc.] ✘ Emphasis on more hands-on training and practical tips

Orientation Sessions

Generally two orientation sessions are conducted with each formed group, in which the members get introduced to each other and they share their background information. The purpose of these orientation sessions is to create a safe and non-threatening environment, in which everyone feels comfortable sharing their own experiences and participate without any inhibitions. These sessions also help to build a good rapport between the facilitator and the group members. The group members are also given overview about the program curriculum and its schedule.

Pre-Entry Evaluation Test

After the orientation sessions, the group facilitator conducts a pre-entry evaluation test for both the parents with the help of a questionnaire. The objective of pre-evaluation is to assess the pre-program knowledge, skills and attitudes of the parents and also evaluate their needs related to parenting and child care.

PHASE II: INTERVENTION

Group Sessions

The group sessions can be delivered in the form of regular, combination or short-term structure depending upon the needs of the identified groups. The salient features of the 3 categories of group sessions are as follows:

Features	Regular	Combination	Short-Term
Duration	5-6 Months	3-4 Months	2 Months
Type of Sessions	20-22 Group Sessions	6 Community + 6 Group Sessions	6 Mandatory + 2 Optional Group Sessions
Duration of Sessions	1 and ½ hours [45 minutes of discussion or demonstration on the program topic + 30 minutes of voluntary play session]		1 hour [45 minutes of play session + 15 minutes for debriefing]
Group Size	10 to 12 Mothers with their children		
Curriculum Modules	<ul style="list-style-type: none"> ✦ Child Development ✦ Social Development ✦ Cognitive Development ✦ Physical Development ✦ Language Development ✦ Health & Hygiene ✦ Nutrition ✦ Safety & Security ✦ Importance of Play 	<ul style="list-style-type: none"> ✦ Health & Hygiene ✦ Nutrition ✦ Safety & Security ✦ Role of Community ✦ Importance of Play 	<ul style="list-style-type: none"> ✦ Importance of Play in child development ✦ Improving parent-child relationship ✦ 2 optional sessions [Health, Hygiene, Nutrition, Safety & Security]

Mothers with their children gather for weekly sessions in the community centers (if available) or some group member's home or any convenient location in the community. The sequence and content of the topics for group sessions is flexible in nature and is decided based on the needs and priorities of the respective group members. The group sessions are not delivered but rather facilitated i.e. the facilitator aims at sharing inputs on a specific topic and encouraging the group members to share and learn from their own experiences, issues and solutions. The participatory nature of these group sessions proves to be more beneficial to the group members, as the participants are initially given theoretical knowledge and later are encouraged to practice the prescribed techniques and skills.

The program staff is trained not only on the session content but are also equipped with necessary skills and work ethics, which helps them to develop a consistently supportive and accepting attitude towards the group members. The focus for these sessions is mainly on creating opportunities for practical and first-hand experience for the parents. The group sessions are further supported with a variety of activities to help the participants to translate their acquired knowledge and skills into practice by providing additional learning opportunities

through demonstration, discussion and practice. The supportive activities along with the group sessions are as follows:

Balmela (Child Fair):

Home Visits: The group sessions are coupled with regular weekly home visits to the group members, generally twice in a month or as and when required. The home visits are intended to provide individual need-based guidance to the needy mothers as well as to observe how the mothers are implementing the newly acquired knowledge in skills in their day-to-day parenting practices. The field staff provides the guidance as needed and help the mothers to develop their capacity to solve the problems.

Recipe Demonstrations: Nutrition, one of the most important aspect of parenting, it is very important for mothers not just to know what nutrition means for a child, but also how they could cater to the nutritional needs of the child appropriate to its age. The recipe demonstrations are designed in such a way that mothers could learn how they can prepare healthy and low-cost for the child using the generally available ingredients in the kitchens in low-income households and how they can make the food taste and look appealing to the child by using some quick and easy practical tips.

Resource Center: The resource center could be located within the community or in the office of the organization, where the mothers could come and seek guidance as and when the need arises. The resource center is also equipped with toys, books and other reference material on the topics related to parenting.

Toy and Book Library / Sessions:

Referrals: If the mothers are facing certain issues outside the scope of the ECD program or capacities of the field staff such as domestic violence or children with behavioral problems, then the mothers are provided with appropriate referrals to third-party government or non-government organizations or individuals.

PHASE III: POST-INTERVENTION

Post-Phase out Evaluation Test

After the completion of the group sessions, the group members are assessed for their knowledge, skills and attitudes towards parenting and child development. The post-phase out evaluation process involves measuring the program outcomes vis-à-vis the program objectives i.e. whether the identified program objectives have been met successfully or not. The post-evaluation has been designed based on the PRA (Participatory Research and Action) techniques

and tools, which provide an opportunity to assess the program participants' capacities in an interactive and easy manner.

Follow-up

The follow-up visits are planned with each group member after the program phase-out evaluation is complete. The frequency of the follow-up visits is generally 3 per month or as per needs of the individual member. The follow-up visits give the group members an opportunity to seek support from the field staff, if they are facing any issues regarding their parenting roles. These visits also create window for the field staff to observe the families post-intervention and assess the change in their parenting practices post-program completion.

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