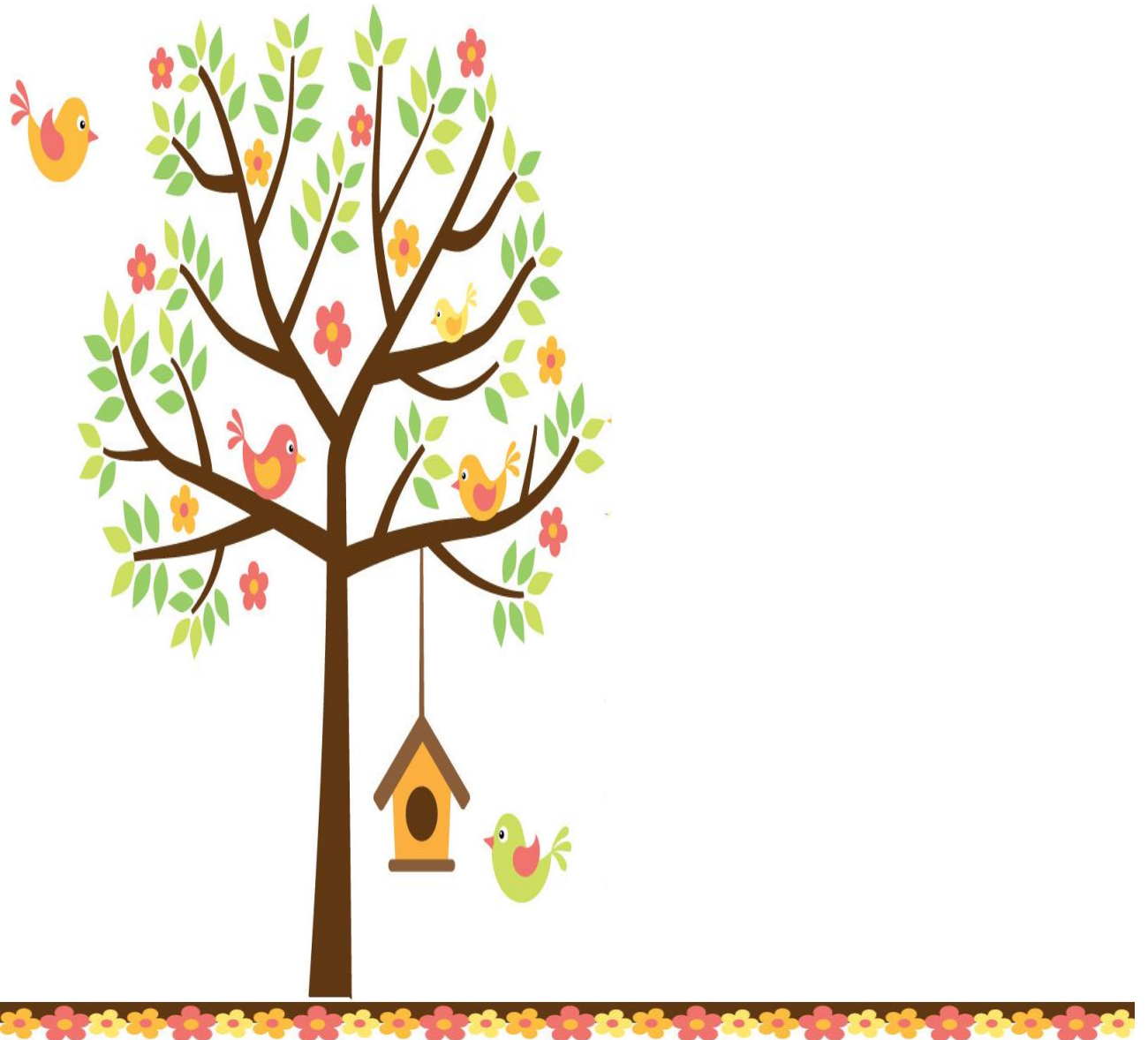


Early Childhood Development (ECD) Program

Procedure Manual



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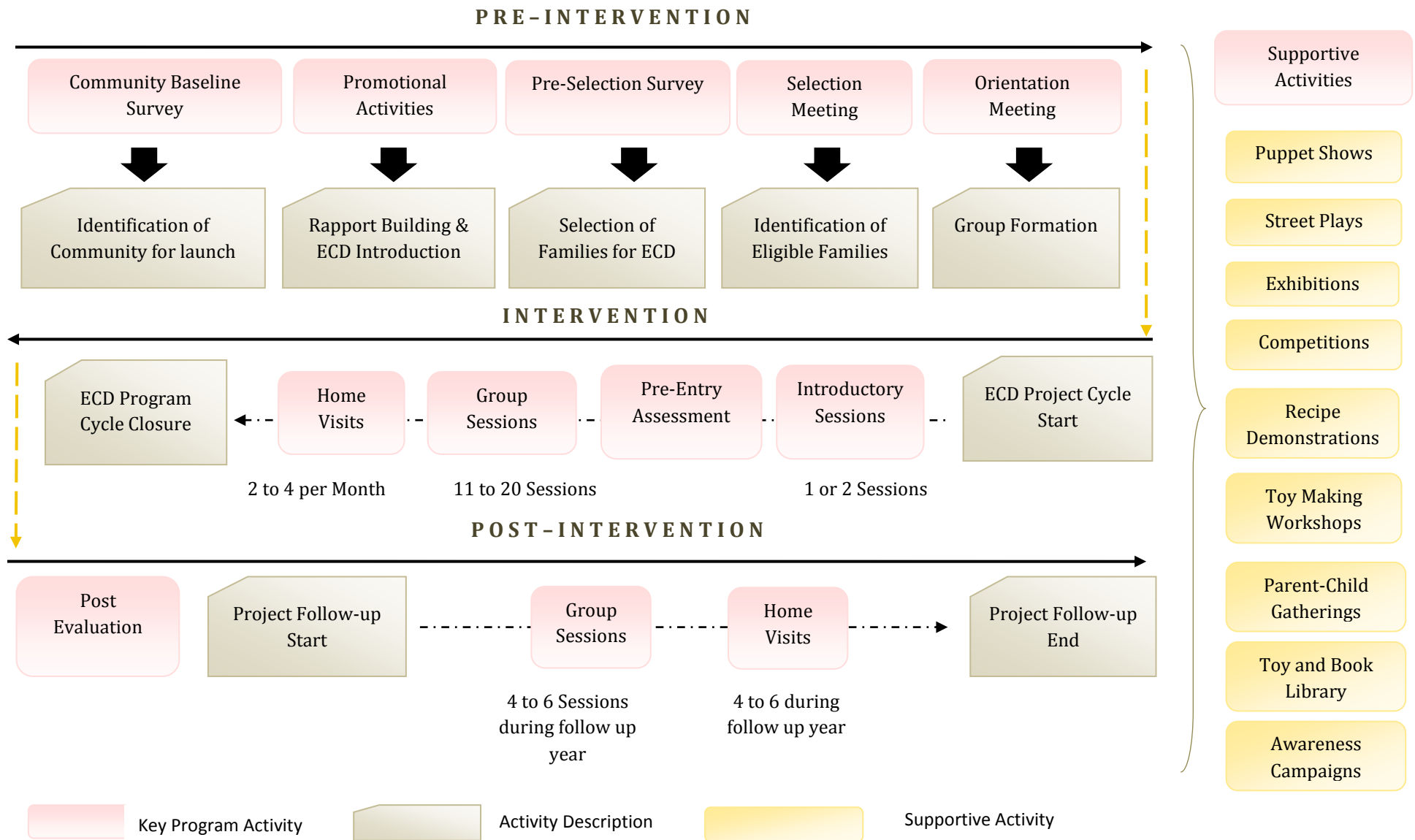
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Purpose of Document

This procedure manual serves as a reference document for the field and management staff involved in the implementation and execution of the Early Childhood Development (ECD) Program as well as any person to understand the standard ECD program procedure. This document provides the detailed summary along with a graphical depiction of each step during the different phases of the program implementation. Every step is further explained with a detailed description of its purpose, implementation strategies, key activities involved as well as expected outcomes and the responsible person. This manual is just for reference purpose, as the procedure explained below could be altered matching the nature of the needs of the target audience in urban slum communities.

ECD Procedure Map



Procedure Description

The ECD program is implemented in three phases – pre-intervention, intervention and post-intervention. The program cycle is expected to last for a period of 4 to 6 months. Even though the key program activities have rough time estimates, they could vary depending upon the individual scenarios such as needs of the target audience, situation in the community. The intervention phase consists of group sessions and home visits conducted by the ECD group facilitators with the identified participants.

PHASE I: PRE-INTERVENTION

Community Baseline Survey

The ECD program has been designed specifically to cater to the needs of urban low-income slum communities. The management staff identifies the communities, which are suitable for ECD interventions by collecting preliminary information on these communities from different sources – local corporator, SHG groups, child welfare department, zonal government office and other institutions and organizations active in the community. The community pre-selection information includes census, socio-demographic profile, existing facilities, formal or informal services or organizations active in the community, status of basic services such as health, education, etc. The community is shortlisted on the basis of the following selection criteria:

- 👉 Community size i.e. around 1500 to 3000 population
- 👉 Location in terms of accessibility and feasibility for program implementation
- 👉 socio-economic profile of the families

The emphasis of the pre-selection process is to reach to the most needy and disadvantaged populations. After the preliminary survey, a baseline survey is conducted in the identified community to gather more detailed information about the community. The survey is conducted with the help of a questionnaire by the field staff. The sample of the survey is decided based upon the size of the community and its population i.e. if the community is small to medium then every 10th house otherwise every 5th house is surveyed. The survey information includes socio-demographic profile of families, family composition, housing conditions and economic situation.

The community is selected based on the following selection criteria:

- 👉 Significant number of children between birth to 3 years age group
- 👉 Availability of female caregivers for the program sessions
- 👉 More and significant needs related to parenting
- 👉 Poor socio-economic conditions
- 👉 Low awareness levels regarding child care
- 👉 Lack of formal or informal forms of support for parenting
- 👉 Lack of provision of basic needs of life such as sanitation, education or health
- 👉 Unreached or partially reached by any governmental or non-governmental schemes and/or insufficient services
- 👉 Lower education levels
- 👉 Limited or low exposure and confidence leading to less opportunities for accessing information and resources for healthy and responsible parenthood

Promotional Activities

The objective of initial promotional activities is to introduce the ECD program in the community and for building the rapport with the community. The promotional activities could be door-to-door home visits or corner meetings. The expected target population for the corner meetings is on an average 10 mothers or female caregivers having children between the birth to 3 years age group. The corner meetings are conducted by using different interactive media such as puppet shows, role plays, poster exhibitions, etc. Through these activities, the community members are given a brief overview of the program such as importance of early development approach, its objectives, interventions / services provided under the program, etc. The families are also reached through different community-based events. For example - health camps for children or competitions for fancy dress, healthy baby, low-cost nutrition recipes, etc. The mothers could also be contacted during this period at immunization centers, waiting rooms at child specialists, parents meeting at Balwadis or crèches, play centers, etc. in the community.

Pre-Selection Survey

Pre-selection survey is conducted in different pockets of the selected community to identify the families with at least one child in the age group of birth to 3 years. For this purpose, the field staff visits each household in the community. In these shortlisted families, pre-selection survey is conducted with the primary female caregiver in the family (which is generally mother, aunt, stepmother or elder sister) using a survey form/ questionnaire. The survey helps to collect detailed information regarding family composition, socio-economic profile, pre-natal and post-natal history (of child as well as mother), family environment, etc. The field staff also notes the observations about primary female caregiver interviewed - awareness levels, curiosity about the program, interest in program participation, etc. These observations help the management staff to understand the profile of female caregivers and families in the community adequately. The findings of the pre-selection survey are analyzed in the selection meeting.

Selection Meeting

This meeting is conducted between ECD field and management staff. This is a review meeting for analyzing the information gathered during the survey. In this meeting, the participants matching the selection criteria (listed below) are selected for the ECD program.

Selection Criteria

The key participants for the ECD program are generally at least one female caregiver in the selected families. The emphasis is on inclusion of mothers, who are primary caregivers in the family and are consenting to participate in ECD activities with their children. However, the grandmothers, aunts, foster mothers or elder sisters could also be involved in the program along with the mothers, if they are interested and willing to participate. The preference is given to the first-time mothers / female caregivers and those having more than one child between the birth to three years age group as well as the female caregivers lacking adequate formal or informal support for child care and parenting.

Exclusion Criteria

The mothers, who are not available on regular basis for the program sessions due to their work commitments or any other personal reasons, are not enrolled in the program, as the field staff has limitations in terms of working hours and timings i.e. conducting sessions or home visits early mornings or late evenings. Also the mothers having children with special needs (physically or mentally challenged) are also not included in the program, as neither the field staff is equipped with necessary skills nor the ECD program has been designed to cater to the special needs of these children.

The ECD group sessions could be delivered in three different forms – regular, combination or short-term. The ECD staff takes a decision in the Selection meeting, which type of group sessions would be suitable for the identified participants. The decision is based on the following selection criteria and approach for each type of group session.

Selection Criteria

	<i>Regular</i>	<i>Combination</i>	<i>Short-Term</i>
Community Level	<ul style="list-style-type: none"> 👉 Stable communities 	<ul style="list-style-type: none"> 👉 Lack of rapport of the organization implementing ECD with the community 👉 If the community involvement would be essential for the ECD program 👉 <i>For example – if the communities have specific problems such as hygiene or security which may affect the quality of child care provided in most of the households, then working with individual families or participants would not be an effective strategy</i> 👉 Conducting regular or short-term modules is not possible or is ineffective 	<ul style="list-style-type: none"> 👉 Unstable communities i.e. a significant percentage of migratory population or unauthorized construction with a possible threat of demolition 👉 Families working in unorganized sector and having irregular/ seasonal work
Family Level	<ul style="list-style-type: none"> 👉 If the mothers need not to work outside home as the family income is adequate to meet the daily basic needs 	<ul style="list-style-type: none"> 👉 If the awareness levels of families regarding parenting and child care are low or limited, then engaging participants through community-level programs is necessary to build the foundation for providing guidance through group or individual interventions 	<ul style="list-style-type: none"> 👉 Earning for female members of the family is essential to support the family income
Participant Level	<ul style="list-style-type: none"> 👉 Willing to participate in long-term program 👉 Well acquainted with the language used to conduct ECD program 👉 Feasibility to spare time for group sessions on regular basis 	<ul style="list-style-type: none"> 👉 Unable to attend long-term regular group sessions due to certain personal constraints 👉 Well acquainted with the language used to conduct ECD program 	<ul style="list-style-type: none"> 👉 Unable to attend long-term regular group sessions due to certain personal constraints 👉 Not acquainted with the language used to conduct ECD program

Approach

<i>Regular</i>	<i>Combination</i>	<i>Short-Term</i>
<ul style="list-style-type: none"> 🐦 Group Sessions coupled with Individual guidance through home visits 🐦 Focus on concept clarification 🐦 Closed group interventions 🐦 Target audience – identified through survey matching ECD selection criteria 🐦 More frequent home visits and longer duration for group sessions 🐦 Fixed curriculum with detailed coverage of all the aspects related to early childhood development and parenting 🐦 Follow-up provision 	<ul style="list-style-type: none"> 🐦 Combination of structured community awareness sessions followed by closed group sessions focusing on hands-on training 🐦 Target audience – reached through community-level awareness sessions 🐦 Group formation is based on voluntary enrolments 🐦 Duration of session dependant on the needs of the community and individual families 🐦 Tailor-made curriculum as per community and group needs 🐦 No follow-up provision 	<ul style="list-style-type: none"> 🐦 Group sessions coupled with individual guidance through home visits 🐦 Focus more on hands-on training and practical tips 🐦 Closed group interventions 🐦 Target audience - unreached population [i.e. working, poorer] 🐦 Less frequent home visits 🐦 Shorter duration for group sessions 🐦 Curriculum designed based on essential parenting skills and needs prioritized by the group 🐦 No follow-up provision

Orientation Meeting

The participants identified are invited by the field staff for an orientation meeting. The meeting is used as a platform for providing further information on ECD program to the participants i.e. importance of early childhood interventions and parenting, program benefits, implementation strategies and their relevance, etc. The consent (oral or written) is taken from the participants interested in joining the program. The forum is also used for identification of convenient time and venue for the group sessions and availability of the participants. Based on the convenient time and venue, the ECD groups are formed and a group facilitator is assigned for each group. The rules for the smooth functioning of the group are also discussed and agreed upon mutually by all the group members.

The number of groups in each community is decided based on the availability of field staff and size of the needy population matching the selection criteria of the program. The field staff takes more efforts in the orientation meeting to encourage the caregivers, who are more in need of the guidance related to parenting but are unable to participate due to some personal constraints.

PHASE II: INTERVENTION

Introductory Sessions



















The ECD program cycle begins with two introductory sessions with the formed groups. The purpose of these sessions is to help the participants to get to know each other and the group facilitator. The focus is mainly on to create a non-threatening environment, in which the participants feel comfortable sharing their personal experiences openly. The group members are also oriented with the program curriculum and program schedule. These sessions also help the group facilitator to build a rapport with the group members and develop a better understanding of the participants' current attitudes and perceptions related to parenting and child care.

Pre-Entry Evaluation Test

Along with the introductory sessions, the group facilitator conducts a pre-entry evaluation test for the participants (mothers) selected and their respective partners. The objective of pre-evaluation is to assess the pre-program knowledge, skills and attitudes of the parents and also their needs related to child care. The pre-entry evaluation can be conducted using different methodologies such as focused group discussions, key-informant interviews, participatory learning and action (PLA) tools, etc. The format and approach for conducting group sessions is decided based on the evaluation results of pre-entry test of group participants.

Group Sessions

The group sessions are used for disseminating information, creating awareness and imparting skills and knowledge on parenting and child care to the participants. The group sessions are delivered in the format decided in the selection meeting. The salient features of the 3 types of group sessions are as follows:

<i>Features</i>	<i>Regular</i>	<i>Combination</i>	<i>Short-Term</i>
<i>Duration</i>	5-6 Months	3-4 Months	2 Months
<i>Session Type</i>	20-22 Group Sessions	6 Community + 6 Group Sessions	6 Mandatory + 2 Optional Group Sessions
<i>Group Size</i>	Group Sessions - 10 to 12 participants with their children	Group Sessions - 10 to 12 participants with their children Community Sessions – 20 to 25 participants	Group Sessions - 10 to 12 participants with their children
<i>Session Duration</i>	Group Sessions - 1 & ½ hours [45 minutes of discussion / demonstration + 30 minutes of voluntary play session]	Group Sessions - 1 hour [45 minutes of play session + 15 minutes for debriefing] Community Sessions – 1 & ½ hours	Group Sessions - 1 hour [45 minutes of play session + 15 minutes for debriefing]
<i>Curriculum Modules</i>	<ul style="list-style-type: none">  Child Development  Physical Development  Importance of Play  Nutrition  Language Development  Social Development  Cognitive Development  Emotional Development  Health & Hygiene  Safety & Security 	<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  Any 2 optional sessions from Health, Hygiene, Nutrition, Safety & Security

Participants gather with their children for weekly group sessions in the community centers (if available) or some group member's home or any other 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 facilitator aims at sharing inputs on a specific topic and encourages the group members to share and learn from their own experiences, issues and identified solutions. The sessions are delivered using participatory techniques and tools, which has already been proven as the most effective and beneficial strategy for any program reaching out to populations with low awareness as well as education levels. During the sessions the participants are initially provided with theoretical knowledge and later are encouraged to practice the prescribed techniques and skills necessary for good parenting.

The program staff is trained not only on the session content but are also equipped with necessary skills and work ethics, which help 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 participants and helping participants to translate the acquired knowledge and skills related to parenting in day-to-day practice. The ECD program cycle comes to an end after the planned number of group sessions are delivered.

Home Visits

The group sessions are supported with regular home visits to the group members, generally twice in a month or as per the needs of the individual families. The home visits are designed to help the group members with individualized and specialized guidance and to develop their capacities to solve their routine problems related to child care. The home visits also help the group facilitator to observe how the participants are implementing the newly acquired knowledge and skills in their day-to-day parenting practice.

The program participants are also expected to disseminate the knowledge and skills acquired during the program sessions to her family members for increasing their involvement in the child care. However, the female caregivers identified as key program participants lack necessary skills or decision-making power in the family, which constrains her influencing capacity over other family members. This may create certain obstacles for the program participants in improving the quality of child care at home. In such cases, the home visits provide an opportunity for the group facilitator to get in touch with the participant's family members and help the participants to deal with obstacles arising at the family level through dialogue with other family members. The group facilitator provides individualized and customized guidance, reference material, referrals and supportive knowledge as well as skills during home visits. The home visits also provide an opportunity to the program participants to discuss other personal issues such as relationship or domestic violence with the group facilitator, which may be impacting the quality of child care and parenting. In such scenarios, the group facilitator provides additional referrals, emotional support as well as motivation to the participants to deal with these issues.

PHASE III: POST-INTERVENTION

Post-Phase out Evaluation Test

After the completion of the group sessions, the group members are assessed on 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 involves measuring the program outcomes based on the same or similar change indicators used in pre-entry evaluation. Hence the same or different methodologies and tools could be used for conducting post-phase out evaluation test.

Follow-up

The follow-up visits are planned with each group member after the program phase-out evaluation is complete. The key objectives of the follow-up visits are:

- ✦ To provide additional support and motivation to the program participants after the program phase out to implement the acquired knowledge and skills of parenting in real life scenarios
- ✦ To monitor the progress of the program participants in terms of their capacities to implement the acquired parenting knowledge and skills in day-to-day practice effectively and regularly in their current as well as future parenting roles

The frequency of the follow-up visits could be at least once in a month or as per needs of the individual program participants. During the follow-up phase, the program participants are provided support through additional group sessions, demonstrations, awareness campaigns, expert guidance, referrals or other community-based events.

Supportive Activities

Throughout the ECD program cycle, the standard program procedure is supported by various additional activities, which may increase effectiveness and visibility of the program in the community. These activities could be parent-child gatherings, recipe demonstrations, competitions, exhibitions, toy-making workshops, toy and book library, street plays, puppet shows, etc. The supportive activities help the ECD staff to reach out to the community, family and individual participants easily.

RESOURCE CENTER

The resource center is a community-based center for providing on-going support and guidance to female and male caregivers in the community on parenting and child care. The organization implementing the ECD program would phase out from the community completely, after all the target participants have been covered by the ECD program. The idea of the community center is based on the philosophy of the community ownership – by the people, for the people and of the people i.e. the program participants covered under the ECD program are motivated and supported to run this center independently without constant long-term support from the ECD organization. The resource center is meant to keep the program participants connected with each other and eventually form support groups among the program participants for providing support to each other and to build their capacities for acting as the ‘agents of change’ in their communities as well as in their social network.

The resource center could be located within the community or in the office of the organization, where the caregivers or any community member could come and seek guidance as and when required. The resource center is also equipped with toys, books and other reference material on the topics related to parenting. The resource center is expected to conduct on-going activities such as demonstrations, workshops, exhibitions, trainings for the female caregivers and children in the community to improving the overall quality of parenting in the community. The resource center is envisioned to be a link between the ECD program and the female caregivers, which is not just run but also owned by the community.