Building Futures: Applying the Early Childhood Development Service Quality Standards

21 April 2021
Our focus in this webinar

• Understanding the Early Childhood Development Service Quality Standards for South Asia and beyond, and how they might be applied
Objectives

Introduce the ECD Service Quality Standards and Guidelines and how they can develop a common understanding of the holistic, integrated and developmentally appropriate nature of quality in ECD.

Reinforce how the standards can be applied especially in the context of COVID-19 where a blended approach to delivering ECD services is common.

Facilitate a discussion with ECD experts and practitioners from the Region on how the standards can be adapted.

Encourage countries to think about how to apply these standards given their own contextualized specifications for quality.
Our Moderator

Ms. Mita Gupta

- Early Childhood Development Specialist and Disability-Inclusive Education Focal Point, UNICEF ROSA

- Supports the promotion of ECD and inclusive education in the South Asia region
Dr. Jim Ackers
Regional Education Adviser at the UNICEF Regional Office for South Asia and co-chair of Education 2030+ with UNICEF East Asia and the Pacific Regional Office and UNESCO Bangkok
Gentle Reminders

Please note that the webinar will be recorded, and resources shared will be made available on the ARNEC’s website afterwards.

Please use the Question & Answer (Q&A) feature located in your ZOOM Meeting Control to ask questions. You can upvote a question by clicking the thumbs up.

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Key Questions

1. **Why** is there a need for ECD service quality standards in the South Asia region?

2. **What** are the ECD service quality standards and who can use them?

3. **How** can these standards be used? What are the perceptions of stakeholders within countries in the Asia-Pacific Region of the standards – why are these important and how can these standards be applied based on their own contexts and experiences?
Our speaker and presenters

Dr. Venita Kaul
Professor Emerita (Education) Ambedkar University Delhi and former Chairperson of the Advisory Committee of Center for Early Childhood Education and Development at the university

Introducing the ECD quality standards for South Asia, the need for contextualisation and adaption, and the increasing importance of uptake with the impact of COVID-19 on ECD.
Dr. Sheldon Shaeffer
Chair of the Board of Directors of ARNEC and formerly Chief of UNICEF's global education programme in New York and Director of UNESCO's Asia and Pacific Regional Bureau for Education

Sharing an expert’s opinion on the importance of holistic ECD standards and how can they be used for blended learning approaches during this time of COVID-19
Ms. Mahmuda Akhter
Executive Director of the Institute of Child and Human Development (ICHD). She is also the Vice-Chair of Bangladesh ECD Network (BEN) and the Convener of South Asia Forum of Early Childhood Development Professionals (SAFECDP)

Providing insights from a national ECD network perspective on how they see the standards being promoted and adapted in Bangladesh.
Ms. Sumitra Mishra
Executive Director of Mobile Creches in India, ensuring the voice of most vulnerable young children is central to the policy agenda of governments, businesses and civil society where their areas of work overlaps with rights of children

Sharing experiences from NGO lens on adapting similar ECD standards in their programs and advocacy initiatives – how did they do it, lessons learned, and what should be considered when adapting standards like this.
Introducing the ECD Service Quality Standards

Dr. Venita Kaul
Presentation Overview

1. Introducing the ECD Quality Service Standards Document
   - What do we mean by ECD services?
   - Why should establishing services’ standards be a priority for a country?
   - Who can use these ECD standards?

2. The Context for the ECD Services’ Standards
   - What are the guiding principles for the standards?
   - What are the ECD quality standards (conception to childbirth, birth to three years, 3- to school entry age)?

3. Guiding principles and standards
   - What are the guiding principles for the standards?
   - What are the ECD quality standards (conception to childbirth, birth to three years, 3- to school entry age)?

4. Setting up Quality Assurance and Monitoring systems informed by standards

5. Creating an Enabling policy and provisioning environment for quality ECD
Introducing the Document “Building Futures”

**Process:**

Phase 1
- Review of standards from 8 countries
- Case studies of India, Sri Lanka and Thailand
- Review of Global guidance documents e.g. Nurturing Care Framework
- Peer group consultation and review

Phase 2
- Preparation of draft standards
- Peer group consultations
- Review workshop with South Asian counterparts
- Finalization of document

**Structure:**

Preface

Part 1: Early childhood development services: Significance and priority.

Part 2: ECD Services and Service Quality Standards

Part 3: Use of ECD Service Standards and Quality Assurance and Monitoring System

Bibliography and Annexures
What do we mean by ECD Services in South Asia?

**Definition**
“any community-based intervention, either centre-based or home-based, that meets or supports the needs of pregnant and lactating women, infants and/or young children that are vital to their early childhood development.”

**Scope**
Includes services sponsored by any sector, including health, nutrition, education, water and sanitation or rural development and be a public, private or community initiative. Could be single window approach or multiple but complementary windows of delivery.

**Categories**
- Universal support services
- Targeted support services
- Indicative support services
What is the categorization of ECD services for the proposed standards?

Center based services:
Creches, day-care centres; nutrition rehabilitation centres; health facilities; preschools, destitute care; etc

Home based services
Parenting programmes; Volunteer-based outreach to families; Nutrition programmes; Health campaigns; Creches run by Mothers’ groups etc

Integrated approach: 5 domains viz. Responsive care, health, nutrition, early learning, safety & security
Why should establishing/ contextualizing ECD services’ standards be a priority for a country?

**Early Years are significant:**
- Early Years are significant and environment matters
- ECD participation can have long term impact
- ECD quality is key to ensuring impact
- ECD spend makes a sound investment
- Are all children’s rights being fulfilled?
- Commitment to Sustainable Dev Goals: Goal 4.2

**Standards will facilitate high quality ECD provisions as they:**

1. Provide guidance on planning, implementation, mentoring, monitoring and regulation of ECD

2. Align with respective Policies & Early Learning Development Standards (ELDS), enable systematic defining / monitoring of quality indicators & allow for objective measurability to assess & standardize quality.
Who can use these standards?

Potential Users

- Policy makers / Planners
- Development Partners
- Implementing organizations, entrepreneurs, service providers.
- Parents / care givers / community members
- Research / Program evaluation / Monitoring

Will facilitate (along with ELDS):

- Common vision for ECD amongst stakeholders;
- Enable planners & service providers to design, monitor age appropriate & quality provisions;
- Enable parents / caregivers make informed choices
- Ensure Effective monitoring, mentoring, supervision and evaluation of programs.
- Provide framework for research.
The ECD Service Quality Standards

GUIDING PRINCIPLES

DOMAIN WISE PRIORITIES

STAGE WISE SERVICE STANDARDS

QUALITY STATEMENTS PER STANDARD

INDICATORS: STRUCTURAL, PROCESS & OUTCOMES
8 Guiding Principles…

**Equity, inclusion & acceptance of diversity** are the cornerstones of any good ECD service.

Every child has the right to survive, grow & thrive to her/his full potential.

**Approach to planning & implementing ECD services** should be rights based & not in a ‘welfare’ mode.

**Good quality ECD services** could break the cycle of intergenerational poverty & deprivation & promote economic growth, social equity & prosperity.

**The role of parents & families as primary caregivers** of a child must be acknowledged, respected & supported.

**Incorporate state of the art knowledge** at the global level for ECD in planning for children’s development, situated within national & local cultural ethos.

**ECD services should be guided by cultural sensitivity & contextual relevance** for effective impact & acceptance.

**Spending on scaffolding the early continuum of nurturing care, development & learning** is an investment & not an expenditure.
<table>
<thead>
<tr>
<th>Domain specific considerations</th>
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<tr>
<td><strong>Health</strong> –</td>
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<tr>
<td>Children must be healthy &amp; safe to be able to develop &amp; learn optimally.</td>
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<td><strong>Health</strong> –</td>
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<tr>
<td>Healthy development means that children of all abilities, including with special health care needs, are able to grow up in an environment in which their physical, social, emotional &amp; learning needs are being met.</td>
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<td><strong>Health</strong> –</td>
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<tr>
<td>Early years experiences can also impact the health status of individuals in their adulthood. Adverse experiences in childhood may cause toxic stress in children, which can negatively impact their brain architecture &amp; make them more disease prone in adulthood.</td>
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<td><strong>Nutrition</strong> –</td>
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<td>Good food, good practices &amp; good services are essential for nutrition adequacy for children.</td>
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<td><strong>Nutrition</strong> –</td>
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<td>Mother’s nutritional status &amp; intake during pregnancy influences not only her own health &amp; well-being but also that of the child while in the womb &amp; during childbirth.</td>
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<td><strong>Nutrition</strong> –</td>
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<td>Exclusive breastfeeding from immediately after birth to the age of six months, along with skin to skin body contact, provides a sound foundation for a baby’s growth &amp; development in the first 1,000 days.</td>
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<td><strong>Nutrition</strong> –</td>
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<td>Between 6 &amp; 23 months breastfeeding &amp; access to a diverse range of nutritious, safe foods &amp; avoidance of unhealthy foods provides minerals &amp; nutrients needed to develop to children’s full potential, with benefits enduring into adulthood.</td>
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<td><strong>Nutrition</strong> –</td>
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<td>Maintaining a warm, caring &amp; interactive environment while feeding improves children’s acceptance of food &amp; helps ensure adequate food intake conducive to nutritional well-being, optimal growth &amp; development.</td>
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<td><strong>Nutrition</strong> –</td>
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<td>Nutrition is influenced by availability, access, affordability &amp; desirability of food; availability &amp; use of quality nutrition services, free of disease &amp; unsanitary conditions; &amp; feeding &amp; care practices. These are shaped by broader social, cultural, political &amp; economic factors.</td>
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Responsive caregiving—
Encompasses sensitivity & responsiveness. ‘Sensitivity’ is being aware of a child’s acts & vocalizations from birth. ‘Responsiveness’ is the capacity of caregivers to respond appropriately to these signals.

Responsive caregiving—
While ‘custodial’ care is important for the protection of the child, ‘responsive’ care is significant for the child’s holistic development.

Responsive caregiving—
Warm & consistent care & relationships are key to the development of basic trust & security in children in the early years.

Early learning –
Early stimulation & regular interaction with the child, through immersion in language & interactive play, stimulates brain growth, early learning & development.

Early learning –
Learning begins at conception. Talking with the baby in utero helps it recognize the mother’s voice after birth & bond better with her. It can impact the child’s speech & language development.

Early learning –
Opportunities for play, activity & interaction with other children & adults are the vital ingredients through which children learn & co-construct their own knowledge, not through ‘one way teaching’ by adults.

Early learning –
Children learn best in their own home language or mother tongue, although they can pick up many languages if exposed to them in the environment.

Early learning –
Children are not developmentally ‘ready’ for formal learning of the 3Rs, in the early childhood years. Starting teaching of academic skills too early can lead to a poor foundation for life & be counterproductive.

Early learning –
Children with special needs or from marginalized communities must be included with others, to enable them to receive equitable opportunities.
Safety and security –
Every child must be protected from abuse, violence, neglect & harm by ensuring measures & appropriate practices for prevention & intervention.

Safety & security –
Children in these early years are vulnerable to risks as they do not developmentally have the required capability to protect themselves. Ensuring a risk-free immediate environment for every child is vital.

Safety & security –
Longer-term risks include environmental pollution, exposure to chemicals or traffic hazards, natural disasters or emergencies, often leading to children/family separation, which adds to children’s vulnerability & toxic stress.

Safety & security –
Sexual exploitation of children, often even during infancy, is becoming more commonly reported. Sexual exploitation can traumatize a child for life.

Safety & security –
Children are becoming victims of emergency situations in countries around the world, which can create toxic stress and have serious consequences for physical & emotional health often leading to social maladjustment.

Safety & security –
Ensuring caregivers’ mental health & working with them to prevent maltreatment of children is also important.
Stage wise Service Standards: Conception to childbirth

1. Every woman and her newborn receive evidence-based routine care and management of complications during labour, childbirth and early postnatal period, as per WHO guidelines

2. The health information system enables use of data for early & appropriate action to improve care for every woman & newborn

3. Every woman & her newborn with conditions that cannot be dealt with effectively with the available resources is referred.

4. Communication with women & their families is effective & in response to their needs & preferences.

5. Women & their newborn receive care with respect & dignity.

6. Every woman & her family are provided with emotional support that is sensitive to their needs & strengthens capabilities

7. For every woman & newborn, competent & motivated staff is consistently available to provide routine care & manage complications

8. The health facility has an appropriate physical environment with adequate utilities, medicines, supplies & equipment for routine maternal & newborn care & management of complications
Standards: Childbirth to 3 years (Home based)

1. Every caregiver is given parenting guidance & support by a service provider in responsive caregiving & parenting, which strengthens the caregivers’ own parenting capabilities to meet the holistic needs of their children/wards, while retaining sensitivity to their own needs & socio-cultural context & respecting their role as primary caregivers.

2. Every child is given holistic & age-appropriate opportunities for his/her development & early learning, irrespective of the child’s caste, socio-economic status, gender, language, ability & social context.

3. Every child’s health is nurtured through conducting/facilitating periodic health check-ups; monitoring the immunization schedule; promoting breastfeeding & age-appropriate, nutritious & safe complementary foods, which are nutrient rich without excess energy, saturated & trans fats, & free of sugars or salt; promoting nutritional supplementation; & regular growth monitoring along with referrals, as & when required.

4. Every child’s safety & security, physical & socio-emotional, is considered paramount in the centre & all possible precautions are taken to create conditions that will ensure the same.

5. Competent, professionally trained & motivated service providers are available to identify & address the holistic needs of each child by supporting the parents or family as caregivers, as & when required, through home visits or through community-based interventions.
Service Standards: Childbirth to 3 years (centre-based services)

1. The centre places value on nurturing relationships & creating an inclusive, responsive & enabling climate that promotes warm & responsive interactions between children & adults & among adults, for children to grow & thrive.

2. Every child is given holistic & age-appropriate opportunities for his/her development & learning that meet his/her needs for responsive care & early learning, irrespective of caste, class, gender, language, ability & social context.

3. Every child's H&N is nurtured through periodic health check-ups; immunization schedule; promoting breastfeeding & age-appropriate, nutritious & safe complementary foods; promoting nutritional supplementation, nutritional calorie & micronutrient contribution; & regular growth monitoring along with referrals.

4. Every child's safety & security, physical & socio-emotional, is considered paramount in the centre & all possible precautions are taken to create conditions that will ensure the same.

5. Competent, professionally trained & motivated service providers are available to identify & address the holistic needs of each child in the centre.

6. Every parent/family is given guidance & support in responsive caregiving & parenting that strengthens their own parenting capabilities to meet the holistic needs of their children by complementing the centre's curricular vision, while retaining sensitivity to the parents' own needs & socio-cultural context & their role as primary caregivers.

7. The centre has adequate, secure & well-ventilated facilities for children's optimal growth & development.
Service Standards: 3 years to school-entry age

1. The centre places value on nurturing relationships & creating an inclusive, responsive & enabling climate that promotes warm & responsive interactions between children & adults & among adults, for children to grow & thrive.

2. Every child is given holistic & age-appropriate opportunities for development & learning that meet the child’s needs for responsive care & early learning, irrespective of his/her caste, class, gender, language, ability & social context.

3. Every child’s H&N is nurtured through periodic health check-ups & immunization schedule; age-appropriate, nutritious, safe complementary foods, promoting nutritional supplementation & nutritional calorie & micronutrient contribution; & regular growth monitoring along with referrals.

4. Every child’s safety & security, physical & socio-emotional, is considered paramount in the centre & all possible precautions are taken to create conditions that will ensure the same.

5. Competent, professionally trained & motivated service providers/teachers are available to identify & address the holistic needs of each child in the centre.

6. Every parent/family is given guidance & support in responsive caregiving & parenting that strengthens their own parenting capabilities to meet the holistic needs of their children by complementing the centre’s curricular vision, while retaining sensitivity to the parents’ own needs & socio-cultural context & respecting their role as primary caregivers.

7. The centre has adequate, secure & well-ventilated facilities & materials for children’s optimal growth & development.
Sub-stage indicators for quality monitoring

Structural:
- Dosage
- Physical space & facilities
- Staffing

Process:
- Domains Covered
- Age appropriateness
- Sensitivity to parents
- Technical knowledge of providers
- Parents’ satisfaction level

Outcome in five domains:
- Frequency of desired behavior
- Demonstration of knowledge
- Appropriateness of learning opportunities
- Priority to safety & security
Creating An Enabling Environment for High Quality ECD

- Autonomous authority for ECD
- An approved multisectoral policy
- A multisectoral National Plan of Action
- Systemic mechanism for convergence & coordination
- Holistic & integrated ECD services in place

- A cadre of professional service providers established
- Professional training institutions in place
- Decentralised parenting & parental support programs/provisions
- Dedicated Financial allocations for ECD
- System of registration, monitoring & regulation
Quality Assurance and Monitoring System (QAMS) for ECD

To serve as the monitoring/regulatory and development authority in a given country for ECD services for children 0-3 and 3-6 years.

To serve as a single window for resource materials, technical guidance and information on initiatives for capacity strengthening and quality improvement of services.
An ‘Enabling cum Enforcing’ Framework for Quality Assurance
Impact of COVID-19 on ECD Quality: Are children continuing to get opportunities for development of all five domains?

- Need to designate ECD health/nutrition services as ‘essential’ services so that these do not see any disruption.

- Parenting has emerged as a vital resource but how can responsive and positive parenting practices be strengthened with additional “parental burden of child care”?

- Can online/blended learning approaches promote holistic development i.e socioemotional, cognitive/language, physical and motor and creativity?

- Country uptake of these standards in South Asia and beyond is more important than ever with the impact of COVID-19 on ECD
Q&A

Please type your questions in the chat box!
Response from experts and practitioners

Dr. Sheldon Shaeffer
Importance of ECD service standards and how they can be used for blended learning approaches during COVID-19

Ms. Mahmuda Akhter
Bangladesh ECD Network perspective on how they could see the standards being adapted in Bangladesh, and how to promote them

Ms. Sumitra Mishra
India Mobile Creches NGO perspective on adapting similar standards, lessons learned and considerations for adapting standards

What is the importance of these ECD service quality standards and how can they be used?
Closing program
Requests and reminders

Download the presentations from the ARNEC website.

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Time: 3 PM (Singapore Time) GMT+8
Duration: 90 mins

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