



## EARLY CHILDHOOD DEVELOPMENT IN EMERGENCIES AND POST-CRISIS TRANSITION

Case study from Democratic Republic of the Congo

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## ACKNOWLEDGMENTS

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## ACRONYMS

CPAP	country programme action plan
CSSPECE	Support and Monitoring Committee for the Promotion of ECD Centres
ECD	early childhood development
EMIS	Education Management Information System
FAO	Food and Agriculture Organization of the United Nations
MICS	Multiple Indicator Cluster Surveys
NGO	non-governmental organization
OCHA	Office for the Coordination of Humanitarian Affairs
SNV	Netherlands Development Organisation
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
WFP	World Food Programme
WHO	World Health Organization

## INTRODUCTION

Every child has the right to survival and development. Experience and research have shown that a minimum set of conditions is necessary to ensure a fair start in life, if these rights are to be fulfilled. These conditions include effective and responsive caring by the child's family and the community; access to and use of quality basic social services by pregnant and lactating women, as well as children; and a supportive policy environment.

During emergencies, these conditions are compromised at best, and absent at worst. Young children in such situations often miss out on the opportunity to receive the caring and services they need to develop to their full potential.

The Democratic Republic of the Congo is facing one of the world's worst and most complex humanitarian crises. Ongoing conflict is accompanied by targeted sexual violence, including mass rape, and children and young people are routinely forced into armed groups. Flooding, cholera and chronic malnutrition further threaten life and health. Around 1.7 million people are displaced, more than half of them children. And dysfunctional or non-existent infrastructure impedes the delivery of humanitarian aid.

Attacks and threats of attacks forced UNICEF partners to temporarily suspend some programmes in 2010, depriving desperate people of crucial assistance. Such conditions present enormous and long-lasting barriers to children's cognitive, social and emotional development, and UNICEF has therefore long supported early childhood development (ECD) programmes in countries afflicted by emergencies.

The UNICEF Education in Emergencies and Post-Crisis Transition (EEPCT) programme began in 2006 through a partnership between UNICEF and the Government of the Netherlands with additional support from the European Commission. The objective of the initiative, called 'Back on Track', was to put education in countries affected by emergencies and in post-crisis transition on a viable path of sustainable progress towards providing quality basic education for all. Now in its final year, the initiative has been implemented in 42 countries.

One of those countries is the Democratic Republic of the Congo, where UNICEF has been working to improve the quality of education. To address the needs of preschool-aged children, ECD centres were established around the country – allowing parents to leave their children in a safe and caring place during the day. At these centres, children have access to high-quality, developmentally appropriate services and psychosocial support.

During 2011, at the request of the Government of the Netherlands, countries participating in the EEPCT programme focused on building evidence and consolidating successes. As part of the knowledge-building effort, UNICEF headquarters selected several hallmark interventions to be the subject of detailed case studies during the year.

The Democratic Republic of the Congo was selected for a study of its initiative to support early childhood education in emergencies. This case study documents and evaluates some of the achievements, focusing on nine early childhood education centres in two communities in Équateur Province. These communities, Mbandaka and Bikoro, were affected by various conflicts during 1997–1998, 2005–2006 and 2009.

## EARLY CHILDHOOD DEVELOPMENT IN EMERGENCIES AND POST-CRISIS TRANSITION

### Case study from Democratic Republic of the Congo

#### Challenges to providing basic education

Basic education has improved in the Democratic Republic of the Congo during recent years despite armed conflict and its many corollaries. These include a weakening of state capacity – particularly in terms of providing education and protection – along with increased poverty and deteriorating living conditions.

The gross enrolment rate in primary education increased from 83.4 per cent in 2006/07 to 90.8 per cent in 2009/10.<sup>1</sup> The provinces affected by the emergency – Équateur, Maniema, Nord-Kivu and Province Orientale – registered comparatively higher increases than the more stable provinces. These rates of enrolment contrast markedly with preschool enrolment rates, which increased marginally, from 2.7 per cent in 2006/07 to a still-dismal 3.2 per cent in 2009/10.<sup>2</sup>

According to the 2010 Multiple Indicator Cluster Surveys (MICS), 8 per cent of children nationwide (9 per cent of girls and 7 per cent of boys) in the first year of primary school had attended a preschool the previous year. Attendance in urban areas was 10 times higher than in rural areas, at 23 per cent and 2 per cent, respectively.

Families frequently do not recognize the value of preschool education and early childhood development, and access to these services is inhibited by the relatively high cost, particularly considering the high levels of poverty that have been worsened by recurring conflict.

The MICS 2010 also calculated a child development index score,<sup>3</sup> defined as the percentage of children aged 36–59 months who are on a good development track in at least three of four child development areas: physical growth; literacy and numeracy; socio-emotional development; and the ability to follow simple instructions and occupy oneself independently (learning).

The data indicate that 89 per cent of children in the Democratic Republic of the Congo are on track in physical growth, 72 per cent in learning and 70 per cent in socio-emotional development, but only 11 per cent in literacy and numeracy. The child development index score for the country is 49 per cent. This means that only about half of the children aged 36–59 months enjoy the conditions necessary for a good start in life.

The child development index is markedly better for children who attend preschool than for those who do not, at 73 per cent and 48 per cent, respectively. This suggests that preschool education is effective in preparing children for primary school attendance, although this effectiveness is limited by very low preschool enrolment rates. This may

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<sup>1</sup> Education Management Information System (EMIS), Ministry of Education.

<sup>2</sup> EMIS, Ministry of Education.

<sup>3</sup> Multiple Indicator Cluster Surveys (MICS), 2010, pp. 198–201.

explain, in part, why only 14 per cent of children entering first grade will reach sixth grade. Therefore, much remains to be done – beginning at the preschool level – to improve the education system and achieve Education for All targets and the Millennium Development Goals.

The UNICEF-Government country programme action plan (CPAP) 2008–2012 addresses issues related to increasing access to and retention of children in quality formal and non-formal educational structures. The plan calls for achieving gender parity and reaching vulnerable groups through ECD centres, primary and secondary schools, and remedial education centres for primary-school-age students.

The project on early childhood development was designed to facilitate access to high-quality, long-term community training and facilities that offer integrated services, and to promote home-based parenting education while strengthening parents' commitment to and participation in early childhood development. A component on ECD in emergencies and post-crisis transition was also incorporated.

## Case study methodology

The purpose of this case study is to document stakeholders' perceptions of strengths, weaknesses and lessons learned in the ECD in emergencies programming. It was conducted through a literature review, followed by primary data collection during visits to nine ECD centres in two selected communities of Équateur Province. The study covers the period 2006–2011, and the fieldwork was conducted during August 2011.

**Literature review:** Data collection began with a review of five categories of documents:

1. Normative documents such as terms of reference.
2. Programme documents (CPAP, results framework and action plans).
3. Implementation reports (progress reports and UNICEF midterm reports).
4. Monitoring and evaluation tools.
5. Reports of studies, evaluations and surveys, government statistics and documents from non-governmental partners implementing the programme.

**Primary data collection:** Primary data were collected through visits to nine ECD centres in Équateur – five in Mbandaka (the provincial capital), two in Bikoro, and two on the road between Mbandaka and Bikoro (at Mpenda and Iyembe Moke).

Using tools previously developed for this purpose, major stakeholders were interviewed in these localities. A total of 188 people (excluding children) were interviewed, 14 individually, 29 in groups and 145 in focus groups. The 14 individual interviews involved political and administrative authorities, representing technical and financial partners, including UNICEF, the World Food Programme (WFP), the World Health Organization (WHO) and a local non-governmental organization (NGO).

Group interviews consisted of briefings with authorities and their staff, or meetings with stakeholders, including representatives of the private sector, local NGOs, an international NGO, WFP and UNICEF. The focus group interviews involved 76 managers and teachers at ECD centres and members of their support committees, 49 parents of children enrolled in ECD centres and 20 community leaders.

Children enrolled in the ECD centres were observed performing skits, which displayed the skills and competencies they acquired through the programme.

The individuals to be interviewed were selected based on their participation or actual and potential influence on the development of early childhood education. The selection of ECD managers and teachers for interviews was based on availability, as the study took place during school holidays. Participants discussed their perceptions of the strengths, weaknesses, lessons learned and best practices pertaining to ECD in emergencies and post-crisis transition and the feasibility of continuing, replicating and scaling up the initiative.

Primary data collection using interview guides was coordinated by the consultant. Interviews in the communities were undertaken in the Lingala language with the help of local NGOs and UNICEF staff, who also made the translation into French for the consultant. A journalist-photographer helped in capturing testimony and images. Daily debriefings led to an analytical synthesis of data and an initial draft report that was shared with all stakeholders in Kinshasa and Mbandaka.

**Limits of the data collection approach:** It is possible that some of the data collected through interviews does not reflect the views of larger groups. Scientific sampling was difficult because no census has been taken for the past 10 years, resulting in unreliable population data. Additionally, there is the possibility of conformity, censorship, evasion and other behaviours inherent to focus groups. The results should therefore be viewed with caution, particularly in regard to inferences or generalizations. Lessons learned and best practices should be extended only upon verification of the underlying assumptions.

## ECD implementation strategies

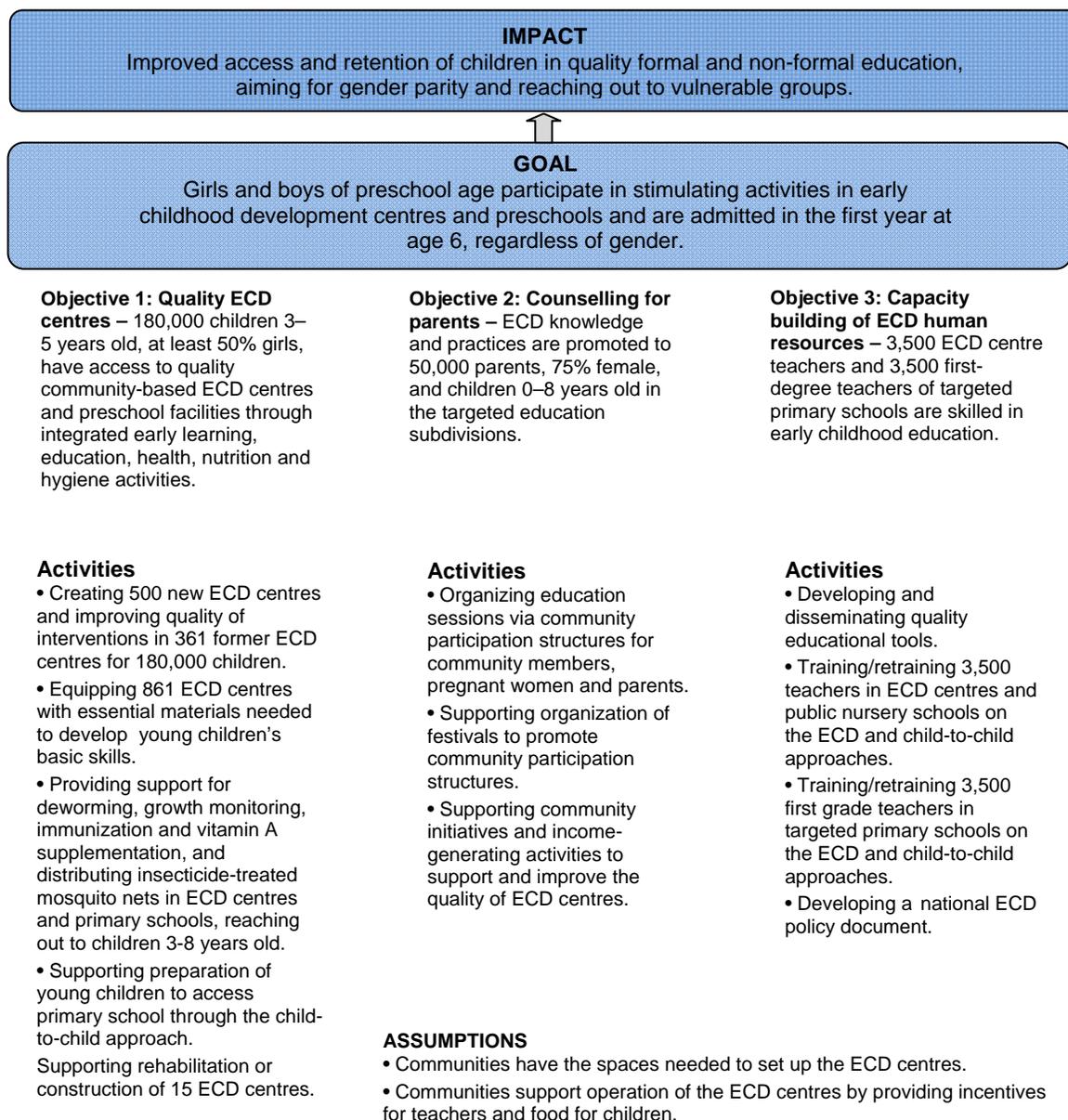
Project activities are organized around three major objectives: establishing quality ECD centres; counselling parents about the importance of early childhood development; and developing the capacities of ECD personnel, primarily teachers (*see figure below*). The strategy is to raise awareness among parents about the importance of early childhood development, thereby encouraging them to seek such services for their children.

Communities are then helped by UNICEF and a local non-governmental organization to establish ECD centres, as well as to engage in income-generating activities to raise funds to support the centres. Teachers are recruited and receive training on children's early learning skills. Resource centres were established to provide teacher training.

Support provided by parents includes student fees paid to teachers and meals for the children. The centres also provide hygiene, health and nutrition services such as deworming, growth monitoring, immunization, and distribution of vitamin A capsules and insecticide-treated mosquito nets.

The initiative aimed to teach 50,000 parents about early childhood development, establish 500 new ECD centres and refurbish 361 existing centres. The overall objective was to serve 180,000 children aged 3–5 throughout the country. A total of 7,000 teachers, half in ECD centres, half in primary schools, were to receive ECD training. In addition, a national policy promoting early childhood education was to be developed.

**Figure 1. Logical framework**



Five major strategies were identified to implement the ECD project: (1) advocacy; (2) mobilization and community participation; (3) capacity building for managers and institutional actors; (4) service delivery; and (5) communication for behaviour change. The following section outlines the key details for each strategy.

**Advocacy:** Traditional leaders and local government officials were asked to promote, supervise and protect the initiatives for early childhood development and provide them with the required resources – including land for ECD centres, human resources in the form of teachers and managers, and support for parents' committees.

**Mobilization and community participation:** The project is implemented by communities through religious organizations, non-governmental organizations and village committees, with guidance from the Government of the Democratic Republic of the Congo and support from UNICEF and other bilateral and multilateral development agencies.

The typical approach is for local governments to set up a session to inform the community about the importance of early childhood development and how the centres provide it, leading communities to request assistance in operating such centres. They receive technical and material support from UNICEF and supervision by the Government. Parents are not required to construct permanent facilities but are encouraged to make use of available spaces.

In Mbandaka, for example, community involvement has mainly consisted of religious communities providing temporary spaces for the centres. At Mpenda and Iyembe Moke, the spaces are provided by people in the community, but the infrastructure still needs to be built.



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The centres for early childhood development in Iyembe Moke (above) and Bikoro.

In Bikoro, communities were unable to find land for the centres, so the sites are rented by the supporting non-governmental organization, which limits the ability to make infrastructure improvements. Community engagement with the political and administrative authorities in Bikoro, however, is virtually non-existent. The local NGO, with UNICEF support, will need to take action to persuade these authorities to allocate the land.

**Capacity building for managers and institutional actors:** Support is also provided in building ECD capacities among managers and institutional actors; establishing income-generating activities for parents and others in the community to enable them to support the operation of the ECD centres; and providing incentives for teachers and managers, as well as training. Grade 1 primary school teachers also receive training to aid the children's smooth transition from preschool to primary school.

**Service delivery:** UNICEF support generally consists of education kits, toys, and hygiene and cooking equipment. The ECD centres also receive support from other development partners, including WFP, which provides food supplements. These were greatly appreciated by the parents and children, and when WFP ended its support, many centres became less attractive to children and some parents.

In some provinces, FAO provided support by assisting food cultivation for children's meals in the centres. World Vision briefly participated in the programme by creating play spaces for children.

**Communication for behaviour change:** Behaviour change activities focus mainly on education for parents to encourage adoption of key family practices, including proper hand washing, immunization, birth registration and sleeping under insecticide-treated mosquito nets.

## Monitoring project implementation

Project implementation is monitored jointly by the implementing partners, under the leadership of the Ministry of Primary, Secondary and Vocational Education with UNICEF support. Monitoring takes place from the central level out to the community level through provincial and zonal levels. It is conducted by a provincial team consisting of ECD focal points, including nursery education inspectors, nutritionists, trainers for ECD teachers and supervisors of the centres.

In each provincial division of the Ministry of Primary, Secondary and Vocational Education, the planning staff organize and manage data collection at the beginning and end of each school year, using the forms and tools developed for this purpose. In the areas visited for this case study, data collection is the responsibility of the local non-governmental organization that is responsible for most of the ECD centres, known as CSSPECE.

UNICEF support is channelled via its ECD specialists to the implementing public services and non-governmental organizations, through the provincial Ministry of Primary, Secondary and Vocational Education focal points. The UNICEF field office has been very effective in supporting CSSPECE, particularly in providing technical support for development of monitoring tools and data collection. The UNICEF country office includes monitoring and evaluation studies in its Integrated Monitoring and Evaluation Plan, which incorporates ECD indicators.

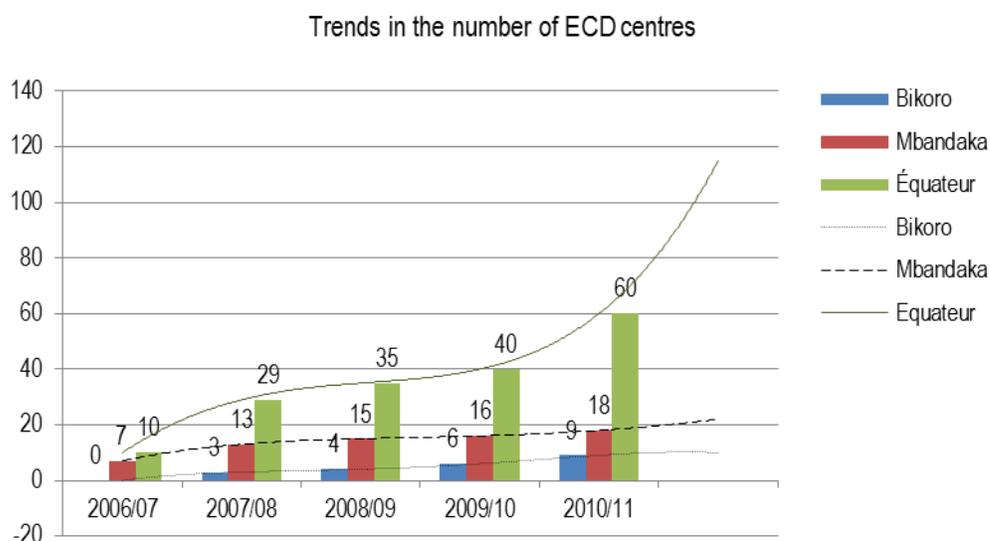
Monitoring data are periodically compiled in provincial synthesis or statistical yearbooks, with support from the United Nations Educational, Scientific and Cultural Organization. MICS data are important secondary sources for ECD programme evaluation.

## Results achieved

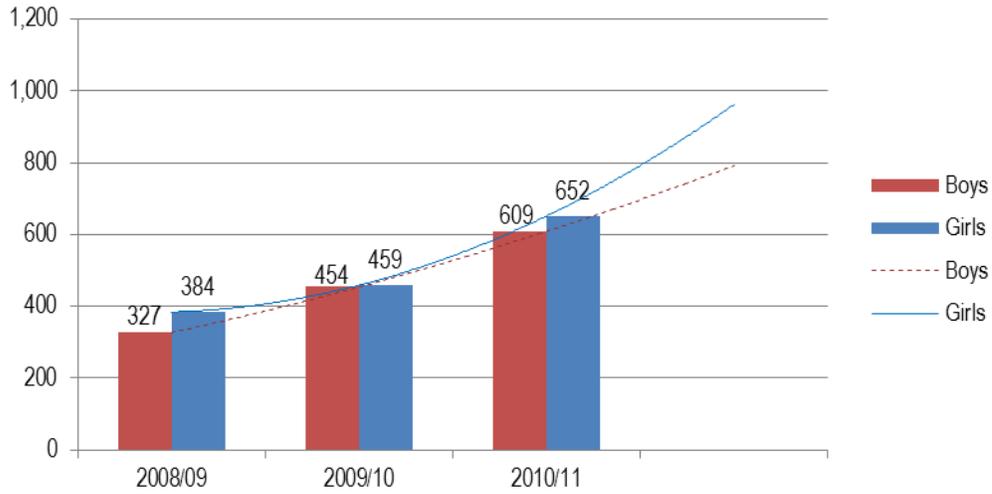
The CPAP set an overall target of providing access to quality ECD centres and preschool facilities for 180,000 children aged 3–5. Since the project began in 2008, nearly 77,500 children have benefited from preparation for primary school in the ECD centres and child-to-child primary schools, in which children in Grades 5 and 6 help prepare the younger ones for school success. More than 503 ECD centres have been developed, and 1,900 ECD teachers and 1,900 primary school teachers have received training on the ECD approach.

The number of ECD centres in Équateur Province doubled, from 29 in 2007/08 to 60 in 2010/11 (see figure below), demonstrating the growing demand for this type of preschool preparation. Similar trends are apparent in the number of children enrolled in the ECD centres throughout the province.

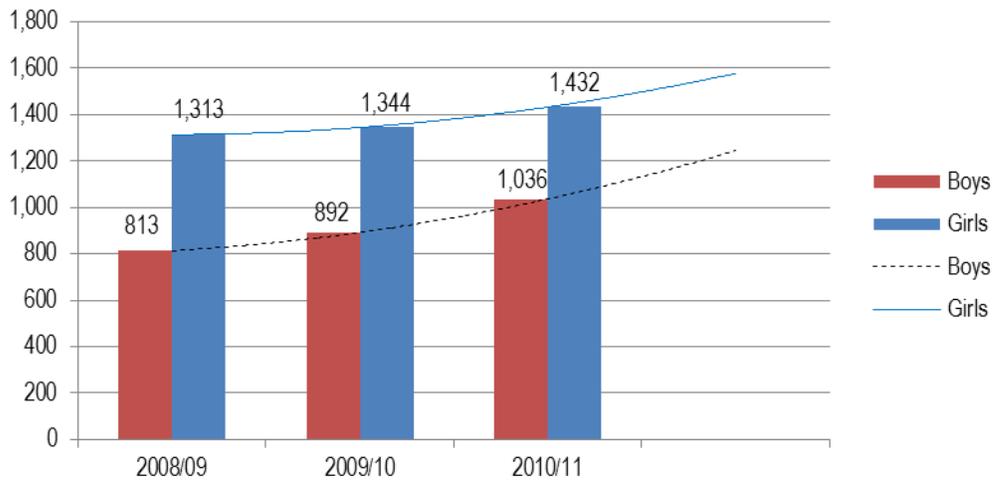
The growing number of children enrolled demonstrates the urgency of strengthening the stakeholders' capacities and expanding the number of centres and trained teachers. The fact that the number of girls enrolled is higher than the number of boys might be a result of the specific focus in the ECD programme on girls' participation.

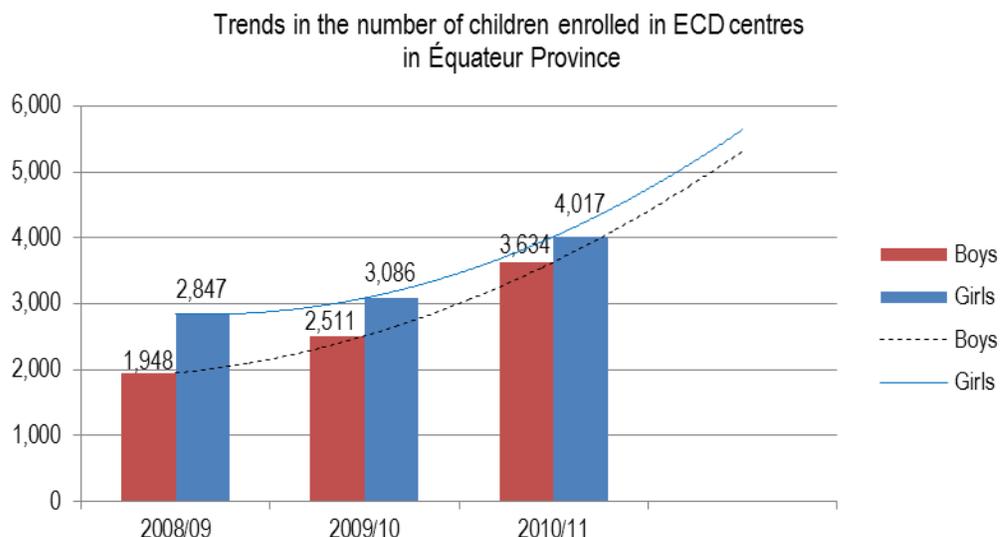


Trends in the number of children enrolled in ECD centres in the Bikoro area



Trends in the number of children enrolled in ECD centres in the Mbandaka area





## Unplanned effects

The ECD centres had a number of unplanned effects, which almost all stakeholders described as strengths to be built upon. These effects include:

**Young children living in post-conflict poverty are protected in the centres, contributing to stabilization and peacebuilding.** In the context of poverty and institutional weaknesses resulting from armed conflict, protecting young children was one of many problems facing communities. The ECD centres responded to this need, which explains part of their popularity and the community demand for them. In addition, ECD centres complement post-conflict stabilization efforts, particularly child-friendly spaces and user-friendly information centres for teenagers, by providing a framework for children's participation and development.

**The centres offer supervision of children and renew hope among families.** The conflicts afflicting the country have left young children with inadequate supervision and nothing to do. All of the parents who were interviewed agreed that the ECD centres have helped to reduce idleness among preschool children.

ECD centres have an important role in preventing vulnerability among children who otherwise would be exposed to various forms of abuse, violence and exploitation. The positive changes in children give parents joy and pride, as well as hope for the future, allowing them to leave behind the trauma of the conflicts.

**Early childhood education fosters better performance in primary school.** All of the stakeholders who were interviewed recognize that children who have attended ECD centres are more successful in primary school than other children, including those from other nursery schools. The multi-sectoral ECD approach is more beneficial for children

than the traditional nursery school approach, which focuses on cognitive skills such as pre-reading and pre-writing.

**Child participation increased.** All respondents said that children who have attended ECD centres are better able to express themselves without fear. The self-expression encouraged in the ECD centres endows children with the capacity to participate in decisions that affect them and become full and active stakeholders in their own development.

**Birth registration rates were higher.** In collaboration with the UNICEF child protection programme, the ECD centres ensure birth registration of children, and birth certificates are issued during public ceremonies.

**Access to education increased and gender equality improved.** The ECD centres have provided access to education for children who were denied service due to geographical isolation and cost. Because ECD activities are organized by community-based caregivers, isolation and remoteness are diminished. The centres also welcome all children without discrimination and are therefore effective in promoting girls' participation.

**The centres provide a framework for promoting children's rights.** The ECD centres have raised awareness of children's rights among communities and have helped to fulfil their right to education, both preschool and primary school. The centres also encourage child participation and monitor fulfilment of children's rights, such as birth registration.

**Communication within families improved.** Children who have attended ECD centres are very effective in relaying information to their families and other people in their community. They communicate to their parents and neighbours what they learn at school, including in the five ECD areas – health, education, nutrition, protection, hygiene – and the key family practices of hand washing, immunization, birth registration and sleeping under insecticide-treated mosquito nets.

Some parents became aware of the importance of birth registration by their children and were brought by them to registry offices to obtain their birth certificates. Encouraged by the messages and behaviours of their children, such as washing hands before meals, some parents were encouraged to improve household hygiene conditions and practices. The success in promoting communication within families has made early childhood education a tool for launching initiatives such as vaccination campaigns, an endorsement of the inter-sectoral nature of ECD.

**Adult attitudes can change.** The ECD experience shows that adult attitudes can be changed through young children, who can share important information and serve as models of healthy behaviour in the family environment. In areas affected by tribal conflict, involving children from diverse backgrounds in play activities is one way to tackle discrimination, prejudice and marginalization. This is observed with a number of minority group children in the areas of Bikoro, Iyembe Moke, Mbandaka and Mpende.

**The centres provide a solution for preschool preparation in rural areas.** As in most African countries, nursery schools in the Democratic Republic of the Congo are typically expensive. In urban areas, they are offered primarily by the private sector, and rural communities are generally deprived of preschool opportunities. This vacuum is increasingly filled by the ECD centres, although the gap is still large.

## Areas for improvement

In specifying the assumptions and risks of the programme, the logical framework applies the following assumptions to all outcomes:

- Communities have the space necessary for implementation of early childhood education.
- Communities support the operations of ECD centres (motivation of teachers and food support).
- Support to the ECD centres and service delivery by the health, nutrition, protection, WASH (water, sanitation and hygiene) sectors is provided.

Because these assumptions are not attached to any specific result, they have limited use when analysing the achievement of expected results. Assumptions should be specified for each desired result, taking into account:

- Development and coordination of partnerships locally and nationally.
- Coordination of service providers.
- Coordinated mobilization of sectoral ministries.
- Capacity of national partners, communities and families.
- Political and institutional stability.
- Degree of support from political and administrative authorities locally and nationally.
- Integration of sectoral programmes for long-term sustainability, effective service delivery and policy development.

Other areas that could be improved are outlined in the following sections.

*Community reliance on external support* – Success of this programme relied on continued community support, which was contingent on the community being made aware of the importance of ECD. In cases where awareness was insufficient among community members, or where consultation with community leaders was lacking, demand for ECD services fell along with the ability of the community to support the services, relying instead on external assistance from agencies like UNICEF and WFP.

In contrast, demand continued to grow in communities where awareness of the importance of early childhood education was high and where there was realization of the need to continue contributing to the operation of the ECD centres.

*Extent of coverage* – In the areas visited, the ECD programme emphasized the participation of girls and minority children such as albinos and children from the Pygmy community, but it had yet to reach many others, including the children of nomadic groups who depend on fishing and live in temporary camps along rivers and streams. The centres should be able to reach these children and facilitate broader coverage of ECD throughout the territory.

*Government involvement* – Political and administrative authorities, both local and national, had little involvement in the programme, manifested particularly in poor supervision by preschool inspectors and the lack of official participation in community sensitization. Advocacy is needed to increase the involvement of government authorities and to support local partnerships for early childhood development. Although the lack of involvement underscores the low priority given to ECD, recent developments related to the ECD policy process and sector strategic planning are gradually influencing the government authorities to pay greater attention to the value of early childhood education for child growth and development.

*Appropriate curriculum for parents' education* – Parents' education on early childhood development has not been effective due to lack of a curriculum. However, the ECD programme that started in September 2011 includes development of a parenting education package.

*Capacity building for local NGOs to support ECD centres* – The local non-governmental organization CSSPECE is mandated to support, monitor and promote the development of ECD centres in Bikoro, Mbandaka and the surrounding communities. This coalition of religious organizations has responded positively to the ECD sensitization campaign organized by UNICEF, which has taken place since 2006 in Équateur Province. CSSPECE receives support from the Ministry of Primary, Secondary and Vocational Education and UNICEF, and it needs further capacity building to effectively pursue its mission. This capacity building should also provide training for staff on working with databases to document and monitor implementation of ECD in a structured way.

## Best practices

### **Rational selection of teachers in ECD centres**

With lessons learned from operation of the first seven ECD centres, a framework for selection of teachers in Bakusu was developed in 2008. Selections were made by a panel of stakeholders – including CSSPECE, the Ministry of Primary, Secondary and Vocational Education, UNICEF and WHO – using a tool developed by the panel. This process was subsequently adopted by the ECD centres under CSSPECE supervision, which has succeeded in upgrading the quality of teachers.

## **Training/study visits promote new centres**

Since 2009, CSSPECE has received numerous requests for guidance from communities wanting to open ECD centres. Unable to respond to this growing demand, the organization arranged a two-week training/study visit for interested parties in the three best-performing ECD centres, which served as training and resource centres for teachers, as well as the two least-performing centres. This approach allowed participants to take up best practices and also learn how to avoid mistakes. This strategy resulted in the opening of several more centres: 10 ECD centres in Mbandaka; one ECD targeted nursery school (a traditional nursery school with an ECD orientation) in Mbandaka; 9 ECD centres in Bikoro and Ibok; and 13 centres in Ndongo and Nguemena.

## **Learning from an existing nursery school**

At the beginning of the programme in Mbandaka, ECD personnel had no idea how to start an ECD centre, so they turned to Esengo, a nursery school, for advice on curriculum development and preschool teaching practices. The ECD centres then added the five ECD domains and key family practices. This supported not only intellectual preparation of children but also teaching of key life skills appropriate to their age. Ultimately, Esengo adopted the ECD approach.

## **Lessons learned**

**ECD centres can be a tool for inclusion.** In communities characterized by marginalization and prejudice, early childhood development helps promote integration and social inclusion. Social barriers break down through daily recreational activities and equal treatment of children. The forest-dwelling Pygmy community, for example, had long been marginalized by the Bantu, to the extent that it was difficult to find a structure led by someone from the Pygmy community in a Bantu area. At the ECD centre of Penda, however, not only do the two communities interact, the head of the centre's supporting committee is a Pygmy.

**Faith-based institutions are effective partners.** Established religious institutions have proved to be more effective in implementing, monitoring and steering community ownership of ECD centres than other categories of implementing partners, as demonstrated in Gemena, Lisala, Mbandaka and Mbouende.

**ECD centres can change adults' attitudes.** It is difficult to change the mindset of adults. The experience of the ECD centres showed that small children, properly informed, can become agents of change within the family.

**More partnership dialogue is needed.** When dialogue between communities, the government and UNICEF is weak or discontinued, communities and political and administrative authorities tend to abandon their role and depend on UNICEF for infrastructure development, operation of centres and support for volunteers. This is

compounded by the communities' lack of knowledge regarding their potential to increase their income and well-being.

**Lack of knowledge limits effectiveness.** In general, community members need more information on how to take advantage of their natural resources and assets to create income-generating activities. Inadequate knowledge limits their capacity to support the operation and development of ECD centres.

**Standards are needed for selecting teachers.** Teachers who are recruited must comply with the requirements previously established and agreed to by a cross-sectoral panel. This helps to avoid the management problems resulting from hiring staff who do not have the appropriate qualifications.

## Feasibility of continuing and replicating ECD centres

All stakeholders interviewed as part of this case study stated that they believe early childhood development should be continued, as well as expanded to cover the entire country. The minister in charge of the governor's office in Équateur noted that the ECD programme has "great potential for changing attitudes, for rebuilding the society and for peacebuilding." The minister highlighted two major benefits favouring continuation of the initiative: (1) improved primary school attendance, especially for girls; and (2) the potential for changes in outlook, societal reform and peacebuilding.

### Main challenges

The main challenges in continuing, replicating and scaling up the ECD project include the high cost of infrastructure and the difficulty in obtaining support for operations – including support for teachers (subsistence, incentives, awards), food for children and first aid kits. Obtaining support for teachers is especially difficult because parents see payment of teachers' salaries as a government responsibility.

Building the capacity of local non-governmental organizations so they can effectively supervise and monitor the ECD centres, which are growing in number despite limited NGO presence in some areas, has also been difficult. And community participation in identifying and implementing income-generating activities to enable them to take responsibility for operation of the ECD centres needs to be bolstered. Efforts to increase participation include discussions under way to establish a new partnership dedicated to parenting education and development of livelihoods skills.

The actions recommended to meet these challenges include developing a partnership to mobilize the required technical resources and involving other United Nations agencies – particularly the Food and Agriculture Organization (FAO), Office for the Coordination of Humanitarian Affairs (OCHA), United Nations Development Programme (UNDP), WFP, as well as international non-governmental organizations, such as the Netherlands Development Organisation (SNV), that work to strengthen community participation.

Ongoing collaboration between United Nations agencies, for example, through a joint project with local and international non-governmental organizations, would enable the partnership to become more robust in the face of disruptions such as political or institutional instability.

### **Major opportunities and assets**

The ECD project could take advantage of several opportunities and assets that are already in place. Local non-governmental organizations (CSSPECE and Mboka Ebongi Na Bato) have experience in driving and monitoring the establishment and operation of ECD centres. And the schools set up by these organizations could provide rapid training for ECD centre staff.

International non-governmental organizations, such as SNV, provide extensive experience in community participation. Development projects overseen by the Agency for Technical Cooperation and Development, Oxfam, SNV and WFP are already established in Équateur Province. In addition, MONUSCO – the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo – is helping to consolidate the peace, strengthen state authority and address the structural causes of instability. In Équateur, MONUSCO is implementing other initiatives aimed at strengthening the rule of law and supporting community recovery, including socio-economic strategies.

### **Recommendations**

The following recommendations are made for the continuation, replication and scaling up of the ECD programme, according to the contributions that could be made by United Nations agencies, national and provincial government departments, non-governmental organizations and the private sector.

**United Nations agencies** should expand the partnership for early childhood development in order to strengthen community capacities for creating and managing income-generating activities, so the communities can eventually ensure the development and operation of ECD centres.

Organizing the support provided by United Nations agencies would make the partnership more robust in the face of possible disruptions or instabilities. Joint initiatives by FAO, OCHA, UNDP, UNICEF, WFP, WHO, and local and international non-governmental organizations are highly recommended to meet this requirement. To sustain the activities of United Nations agencies, implementation should be harmonized, particularly between the education and health clusters.

In addition, funding should be obtained from the country education cluster to support development of income-generating activities. And ECD centre teachers could be integrated as community relays (community health workers).

**National and provincial government departments** can organize and coordinate a partnership to support, steer and monitor the expansion of early childhood development, and pass legislation that recognizes and establishes ECD services in Équateur Province. They can also be effective advocates for private sector participation in developing and supporting early childhood development.

Other activities that are recommended for government departments include supporting the development and implementation of a comprehensive ECD parent education curriculum that addresses the needs of children up to 3 years old, and taking measures to formalize and organize children's transition from ECD centres to primary schools. They could also undertake a cohort study that annually investigates and compares the primary school performances of children based on their preschool experiences. Such a cohort study could cover a period of six to seven years, with annual feedback.

**Non-governmental organizations** should seek support in conducting sound parent education that addresses the needs of children up to age 3; organize fund-raising activities to support the development and operation of ECD centres; develop action plans outlining yearly goals and targets – and share them with partners; and seek technical support to develop an ECD database.

**The private sector** could make a valuable contribution by supporting the development and operation of ECD centres in the community. This is an area that could benefit from further exploration.

## Conclusion

The experience in DRC showed that early childhood development interventions can effectively contribute to addressing the developmental and early learning needs of young children. The ECD centres play a critical role in the learning continuum of children, and are instrumental in ensuring not only a higher enrolment rate in early grades (particularly among girls), but also better performance at school. The centres also act as safe havens for children in conflict zones and help foster greater community cohesion, as the needs of children become a binding factor amongst local leaders, parents and other members of the community.

However, the need for continuous dialogue between communities, government and UNICEF was clearly highlighted, as well as the need for awareness-raising activities on the importance of ECD. Without these awareness-raising and advocacy efforts, communities and local authorities risk abandoning their roles and increasing their dependence instead on external sources, such as United Nations agencies and INGOs, to continue the operation of ECD centres.