![Chemonics - Development works here.]

Syria International Development and Early Learning Assessment (IDELA)

Baseline Report
September 19, 2018

Acknowledgments

CONTENTS

EXHIBITS

ACRONYMS

CBO.. community-based organization

IDELA... International Development and Early Learning Assessment

ISELA ....International Social and Emotional Learning Assessment

PSS ....psychosocial support

Executive Summary

The Syria International Development and Early Learning Assessment (IDELA) baseline study set out to assess the levels of early learning and socio-emotional competencies among children 3.5 to 6 years old. The study took place in two Injaz-funded child centers that serve the target age group: Partner C/Location 1, located in an internally displaced persons' camp, and Partner I. These centers provide psychosocial programming and remedial education to internally displaced children in Raqqa Governorate in northeast Syria. We collected the data in partnership with Save the Children using its IDELA tool, which has been used in more than 45 countries. We made no adaptations to the tool since it has been used in similar contexts.

Given that IDELA targets preschool-aged children (3.5 to 6 years old) and most children in Raqqa do not attend preschool, it was difficult to find a large population of students. While we initially identified 28 young children in two child centers for the IDELA baseline assessment, we found only 16 who were present and able to participate. Since IDELA is not designed to accommodate students with disabilities, six students with war-related disabilities at Partner I were unable to participate. Other students did not participate because their parents did not provide consent, which may have been due to lack of understanding, security risks, or other cultural concerns.

The IDELA instrument covers four developmental domains: Motor Development, Emergent Literacy, Emergent Numeracy, and Socio-Emotional Development. These domains include 22 subtasks. IDELA also includes optional questions related to executive function (short-term memory and inhibitory control) and approaches to learning (persistence, motivation, and engagement). We analyzed data for the entire sample to generate mean scores for each domain and subtask.

The results of the IDELA study will be used to develop age-appropriate and context-relevant learning interventions for children in the two child centers we assessed, and may inform activities for other centers in Raqqa Governorate.

Key Results

Students achieved 58 percent correct results across all four domains. They scored highest in the Socio-Emotional Development domain (65 percent correct) and lowest in Emergent Literacy (51 percent correct). However, it is important to note that scores within each domain and subtask included a great deal of variability. Across all domains, the highest average score was 75 percent, while the lowest was 16 percent. A higher proportion of students scored below the mean than above the mean, but because a few students scored in the 85 to 95 percent range, the mean score may over-represent actual performance.

- In the **Emergent Literacy** domain, the overall mean score was 51 percent correct. There was significant variability, with scores ranging from 89 to 6 percent. Students demonstrated good listening comprehension (63 percent) but struggled with letter identification and emergent writing.
- In the **Emergent Numeracy** domain, the overall mean score was 58 percent correct. Average scores in this domain ranged from 91 to 28 percent correct. Students showed strength in measurement (90 percent correct), but very low competency in number identification (20 percent correct). Problem solving also proved challenging, with 45 percent correct scores.
- In the **Motor Development** domain, the overall mean score was 58 percent correct. There was also substantial variability in scores, with averages ranging from 96 to 9 percent correct. Students could draw a person and hop on one foot with an average score of 60 percent. Students could fold paper with 70 percent accuracy; copying a shape was more challenging (45 percent correct).
- In the **Socio-Emotional** domain, scores ranged from 85 to 23 percent correct, with an overall mean score of 65 percent. Students exhibited a high degree of empathy, self-awareness, and emotional awareness, with scores averaging 75 percent on these subtasks. Sharing/solving conflicts and naming friends were more difficult, with scores averaging 51 percent correct.

On the optional subtasks, students' scores in the executive function subtask were 51 percent correct. Students demonstrated low inhibitory control (40 percent), average short-term memory (61 percent), and very high approaches to learning (85 percent), such as test-taking ability and persistence.

Across domains, girls and children in Wefaq Center B tended to score more highly. We found no discernible achievement trends in relation to age. These results are likely due to the small sample size and imbalanced numbers of students by sex, age, and location.

Conclusions and Recommendations

Given the small sample size and our inability to generalize results, we recommend using the results to develop pilot interventions within the two centers to address low competencies in each domain. Injaz should work with the centers to design appropriate activities, train staff, and monitor program implementation, while continuing to assess student learning.

Considering that some children scored very highly in each domain and many children scored low, child centers will need to support teachers to recognize differences in children's development and ensure that their activities engage all learners.

Recommendations for future assessments include adding a caregiver survey to better understand contextual factors that may be influencing early learning and adapting the tool for children with disabilities to reach the large population of children in Syria with war-related injuries. It would also be helpful to conduct the assessment with a larger sample to identify trends and factors associated with children's development and support them with statistical analysis.

Background Context

The conflict in Syria has devastated local governance, access to education, and provision of life-sustaining services. According to UNICEF, Syria is the world's biggest producer of both internally displaced people and refugees, and more than 1 million Syrian children lack access to education.[1]

Raqqa, ISIS' former stronghold in Syria, was liberated in October 2017. During ISIS' occupation, secular schools were closed and replaced with ISIS schools that focused on incitement to jihad. Access to formal education is still limited, with only 2 percent of schools operating in Raqqa Governorate.[2] Children returning to school or nonformal education must overcome obstacles that include trauma, difficulty integrating into the classroom, insufficient literacy and numeracy for their grade level, lack of instructional materials, and instructors with varying levels of teaching experience and certification.

Children also suffer trauma and emotional stress from internal displacement and the daily threat of violence. In the first two months of 2018 alone, 1,000 Syrian children were reportedly killed or injured.[3] Symptoms of emotional distress include fear, difficulty sleeping, grief, depression and withdrawal, aggression, nervousness, hyperactivity and tension, speech problems or mutism, and somatic symptoms.

Recognizing the conflict's effects on children's well-being and education, the Injaz project, funded by the U.S. Department of State's Bureau of Near Eastern Affairs, provides remedial education and psychosocial programming to internally displaced children, primarily between the ages of 6 and 12, both in and out of school. Injaz delivers its education program through child centers operated by community-based organizations (CBOs).[4] Two of the 11 centers that Injaz supports welcome children under the age of six. The Injaz project operates in northeast Syria, mostly in Raqqa Governorate.

Injaz child centers' holistic approach provides structured remedial literacy and numeracy along with psychosocial support (PSS) to address children's learning and socio-emotional needs. As teachers use more inclusive, child-centered teaching approaches to improve the learning of remedial skills, both learners and teachers undergo improvements to their psychosocial well-being. In turn, students' improved psychosocial well-being fosters greater learning.

All remedial activities are designed to prepare children for entering or re-entering formal schools managed by local councils. One Injaz-supported CBO also provides remedial literacy instruction to teachers in five formal schools. Thus, Injaz targets both internally displaced children (mostly living in camps) who attend child centers and students in formal schools, which are managed by local councils.

The Injaz project has the following goals:

- Provide remedial literacy and numeracy education and self-learning materials to children and youth in child centers as a path to formal education
- Provide PSS for children, teachers, parents, and the broader community
- Train teachers on strategies for helping emotionally distressed students through tailored PSS activities that can be incorporated in the classroom
- Train teachers on remedial education and self-learning materials, and provide textbooks
- Create a safe physical environment for learning through school rehabilitation

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[1] UNICEF USA, "Syrian Crisis." https://www.unicefusa.org/mission/emergencies/child-refugees/syria-crisis. (Accessed August 2018).

[2] Assistance Coordination Unit. (2017). "Schools in Syria: Thematic Report." Retrieved from http://wos-education.org/uploads/reports/Schools-in-Syria-2017-ACU-IMU-EN.pdf. (Accessed August 2018.)

[3] UNICEF USA, "Syrian Crisis."

[4] The Injaz project coined the term "child centers" to refer to CBO facilities that provide remedial and psychosocial programming to internally displaced children.

- Support local initiatives in technical and vocational education and training for youth

To date, no assessments to measure children's early-learning competencies have taken place in Raqqa Governorate. This baseline assessment is intended to help better understand students' emergent literacy, emergent numeracy, and socio-emotional competencies. The children who participated in IDELA have been benefiting from PSS for at least two months, and have not received any remedial education at the Injaz-supported centers. The baseline assessment will thus help inform approaches to the learning needs of students ages 3.5 to 6.

Purpose of Assessment

The IDELA case study addresses the research question, "What is the status of early learning (emergent literacy, emergent numeracy, motor skills, and socio-emotional skills) for children between the ages of 3.5 and 6 in two Injaz-supported child centers?"

The case study analyzes current baseline levels of early learning (e.g., emergent literacy, emergent numeracy, and motor skills development) and socio-emotional development among children ages 3.5 to 6 in two Injaz-supported child centers. The results, indicating children's strengths and areas for improvement, will be used to develop context-relevant learning interventions for children in these centers.

IDELA Sample Size and Characteristics

We selected 28 children in two child centers for the IDELA baseline assessment (Exhibit 1). We focused on two Injaz-supported child centers that included children ages 3.5 to 6. At Partner C/Location 1, we assessed all six children within the target age group, while at Partner I, we assessed 10 children from a target group of 22. The primary reason for the shortfall is because six students at Partner I had war-related or other disabilities, which IDELA is not designed to accommodate.

Exhibit 1. Sample Size and Center Distribution

Name of Center	Target	Actual
Partner C/Location 1	6	6
Partner I	22	10
Total	**28**	**16**

Exhibit 2 shows the age and sex distribution of the children we assessed.

Exhibit 2. Age and Sex Distribution

	4 years old	5 years old	6 years old	Total
Girl	2	3	1	**6**
Boy	1	7	2	**10**
Total	**3**	**10**	**3**	**16**

Assessment Methodology

What Is IDELA?

IDELA is a holistic, open-source tool that measures early learning and development in children ages 3.5 to 6. IDELA was developed by Save the Children in 2014 and has been used in 45 countries.

IDELA measures four developmental areas: Motor Development, Emergent Literacy, Emergent Numeracy, and Socio-Emotional Development. Exhibit 3 presents an overview of the main constructs and items covered by IDELA in these four domains. IDELA also includes optional questions related to executive function (short-term memory and inhibitory control) and approaches to learning (persistence, motivation, and engagement).

Exhibit 3. IDELA Developmental Domains and Skills Assessed

Domains	Motor Development	Emergent Literacy	Emergent Numeracy	Socio-Emotional Development
Subtasks	Copying a shape Drawing a human figure Folding paper Hopping on one foot	Expressive Vocabulary Print awareness Letter identification First letter sounds Emergent writing Oral comprehension	Measurement/comparison Sorting/classification Shape identification Number identification One-to-one correspondence Simple operations (addition and subtraction) Simple problem-solving	Self-awareness Peer relations (friends) Emotional awareness Empathy Conflict resolution

IDELA uses simple tasks and games to elicit children's demonstration of certain skills. The full assessment takes 30 minutes. If the child demonstrates a given skill, it is marked as correct (1). If the child does not demonstrate the skill, it is marked incorrect (0). If the child has "refused to answer" or "skipped a question," it is recorded as 999. For questions that seek to gain an understanding of the child's depth of skill, the maximum number of responses is 10.

We used IDELA to assess 16 students between the ages of 3.5 and 6 without adaptation.

Enumerator Training

We recruited 31 enumerators for IDELA/ISELA[5] data collection. Their qualifications included experience working in education, working with students, or administering surveys.

The enumerator training workshop took place from May 28 to May 31, 2018. The facilitators trained 31 enumerators to administer IDELA/ISELA, with scoring guidelines provided by Save the Children. In consideration of security concerns, facilitators conducted the workshop remotely from Berlin with enumerators in Raqqa using Jitsi Meet open-source video conferencing software. Jitsi Meet was deemed the best platform to use given limited internet connectivity in the area.

During the four-day workshop, enumerators learned about the tools' objectives, structure, subsections, and scoring procedures. The workshop also included simulated sessions using both tools.

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[5] The study took place in tandem with one that targeted children ages 6 to 12 using the International Social and Emotional Learning Assessment (ISELA). Both studies collected data from the same centers.

Training Challenges and Limitations

One challenge we faced during the workshop involved its timing and duration. The sessions took place during Ramadan, when workdays are often abbreviated due to daytime fasting and feasts at sunset. We therefore adapted the workshop's timing and content to allow no more than three hours of training per day over the course of four days. Additionally, due to the remote nature of the training and poor internet connectivity, facilitators could not interact with each enumerator individually and oversee the role-playing simulations between enumerators. Enumerators also lacked opportunities to practice one-on-one administration with children in a child center or school setting, because we could not locate a control group of students and schools were closed for Ramadan. Instead, training facilitators requested three parents to bring one child to the training site for a mock assessment and only one parent responded, so the mock assessment took place in a group format. We also eliminated planned inter-rater reliability testing due to time constraints.

In the future, we recommend conducting practice IDELA sessions in a child-care setting so that enumerators can practice one-on-one administration. We also recommend that training workshops take place in better conditions — not during Ramadan or extreme weather — and over four or five days, allowing time for inter-rater reliability testing and center visits.

Data Collection

Chemonics engaged the Syrian subcontractor Partner L for data collection. Data collection took place over the course of three days, from June 4 to 6, 2018. Enumerators completed all assessments in Partner C/Location 1 within one day, and spent three days completing the remaining assessments at Partner I. Each enumerator completed four assessments per day.

Supervisors and trainers provided enumerators with frequent guidance during data collection through WhatsApp calls and email. Child center managers also shared their feedback, and the team advised enumerators on how to ensure that students had a quiet, safe, and conducive environment for carrying out the assessment tasks.

By the end of data collection, the enumerators had assessed only 16 of the 28 targeted students. Since the IDELA instrument is not designed to accommodate students with disabilities, six students with war-related disabilities in the Partner I center were unable to participate. Other students did not participate because their parents did not provide consent, which may have been due to lack of understanding, security risks, or other cultural concerns.

Enumerators reported that some students had problems performing motor tasks, expressing themselves verbally, and following instructions, which may have been due to physical or learning disabilities.

Data Analysis

We aggregated the data to determine mean scores by domain and subtask. Mean scores should be interpreted with caution, given the small sample size. Distribution of scores provides a more accurate picture of the actual performance of students. Therefore, we also show the distribution of average scores for each domain, disaggregated by child sex, age, and location. We analyzed results to determine if there were any achievement trends based on these variables. One limitation of the data analysis is the absence of a caregiver survey or data on contextual factors beyond child sex, age, and location.

IDELA Results by Domain

Exhibit 4 shows overall results for each domain, as well as an overall IDELA score. Domain scores are an average of subtask performance (the percentage of correct responses for each subtask). The total IDELA score is an unweighted average representing overall early learning and development.

Children's average scores ranged from 50.8 percent to 94.9 percent across these domains. The total IDELA score was 57.9 percent. Students scored highest in the Socio-Emotional Development domain, and lowest in Emergent Literacy.

## Exhibit 4. Total IDELA and Core Domain Scores
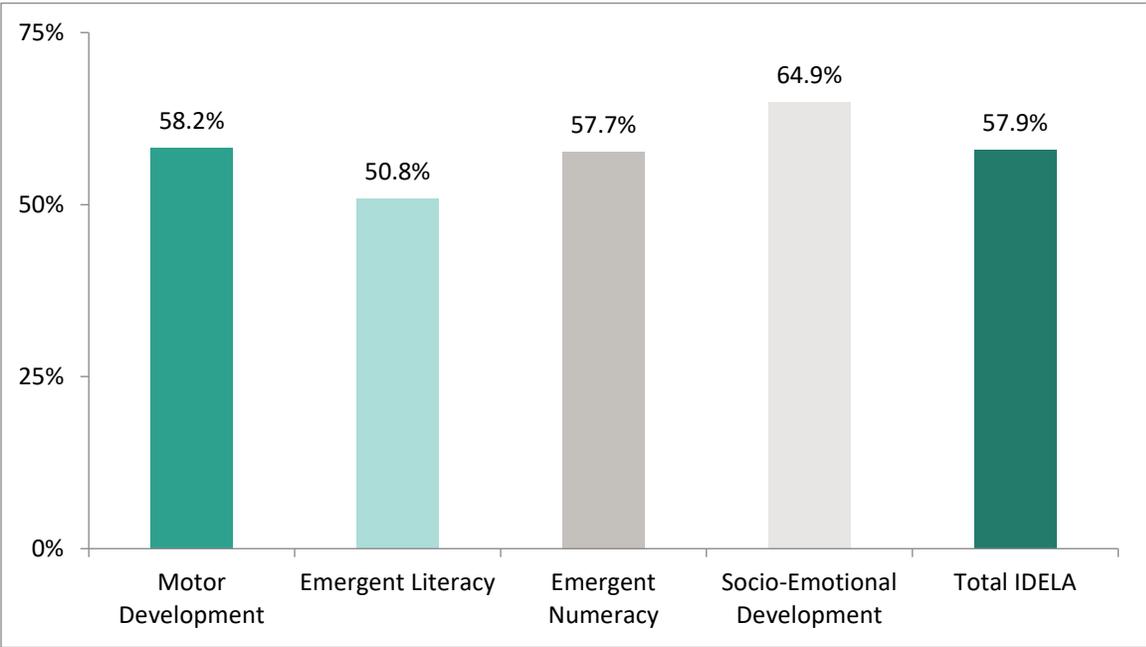
Results by Domain and Sex

Exhibit 5, next page, shows significant variability among scores in each domain, especially Motor Development and Emergent Literacy. The highest score in the Motor Development domain was 96 percent and the lowest was 8.8 percent, while scores in the Emergent Literacy domain ranged from 89 percent to 5.6 percent. Overall, more students scored below the mean score than above it, based on the total IDELA score.

Girls on average scored higher than boys across all domains, and most scored above the mean score. We are unable to substantiate this finding statistically due to the small sample size.

Exhibit 5. Student Scores by Domain and Sex

Legend: ◆ Girls　▪ Boys　+ Average score
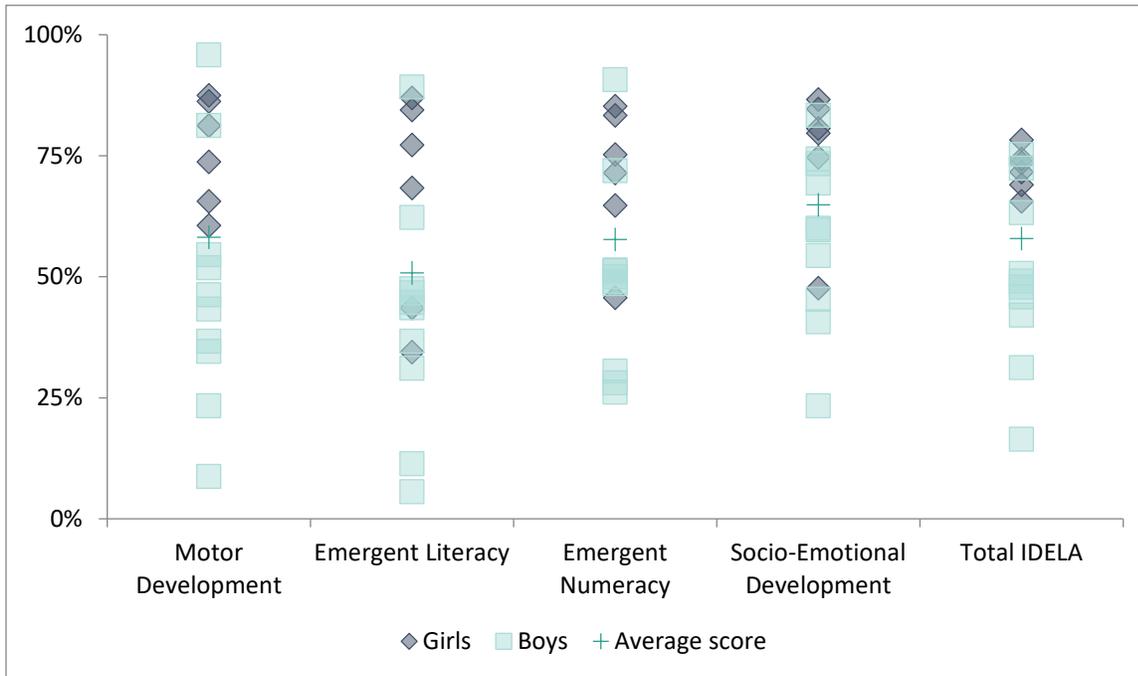
Results by Domain and Age

There does not appear to be a consistent pattern of performance by age (Exhibit 6): a 4-year-old scored highest in Motor Development and Socio-Emotional Development, and a 6-year-old scored highest in Emergent Literacy and Emergent Numeracy. This is likely attributable to sample size and the disproportionate number of 5-year-olds (10 versus three students in each of the other age groups).

Exhibit 6. Student Scores by Domain and Age

Legend: ◆ 4 years old　▪ 5 years old　● 6 years old　+ Average score
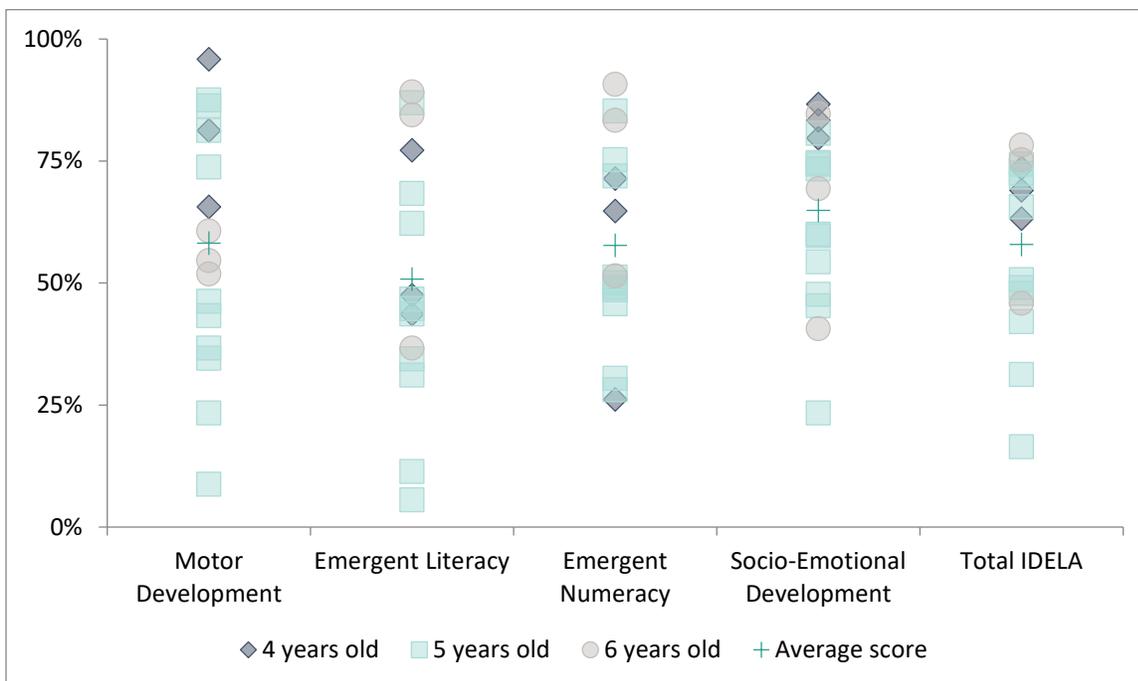
Results by Domain and Location

Results disaggregated by location (Exhibit 7) show that students from Partner C/Location 1 performed more highly than students from Partner I. This finding is attributable to sample size and the imbalanced number of students from each center (six from Partner C/Location 1 and 10 from Partner I), as well as selection bias, since participating students were selected by each child center.

**Exhibit 7. IDELA Results by Domain and Location**
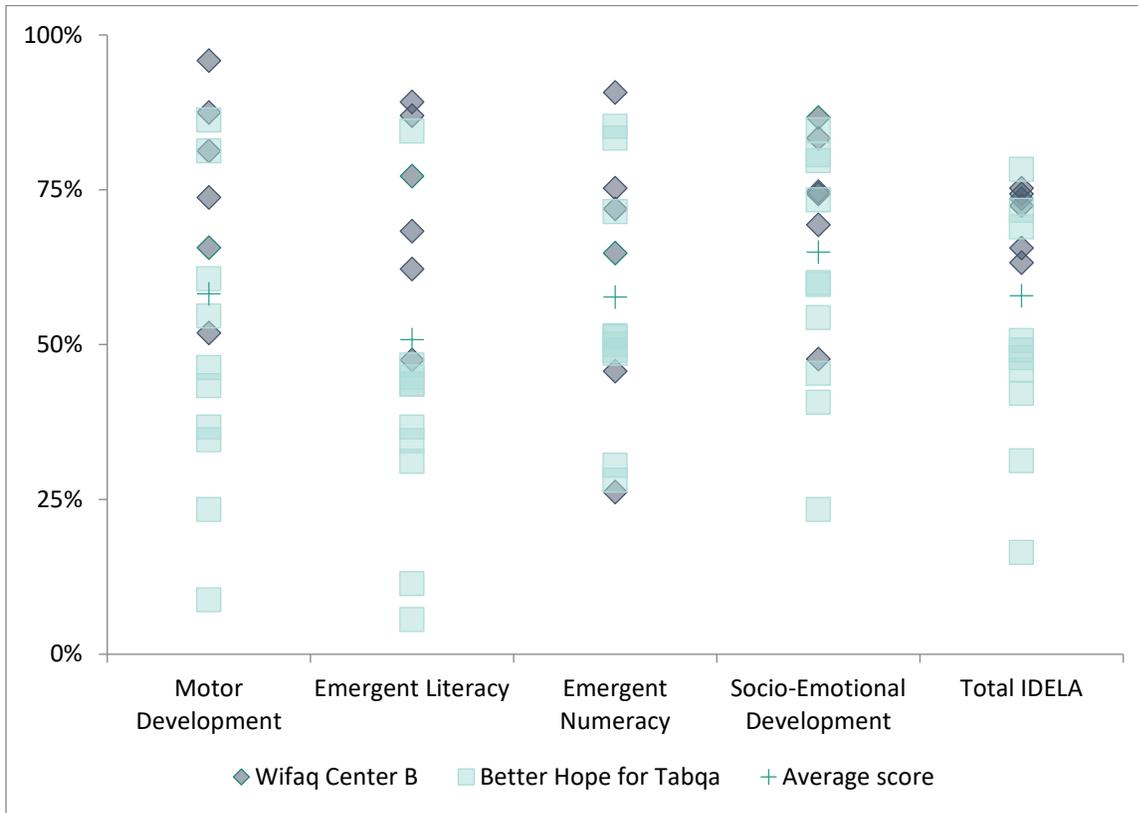
IDELA Results by Subtask

Motor Development Subtasks

There was little variation in scores for the five Motor Development subtasks (Exhibit 8, next page). Students scored highest on folding paper, with an average score of 67.2 percent correct. Meanwhile, copying a shape proved the most difficult task, with fewer than half (45.8 percent) of items scored correctly.

Exhibit 8. Motor Development Subtask Averages
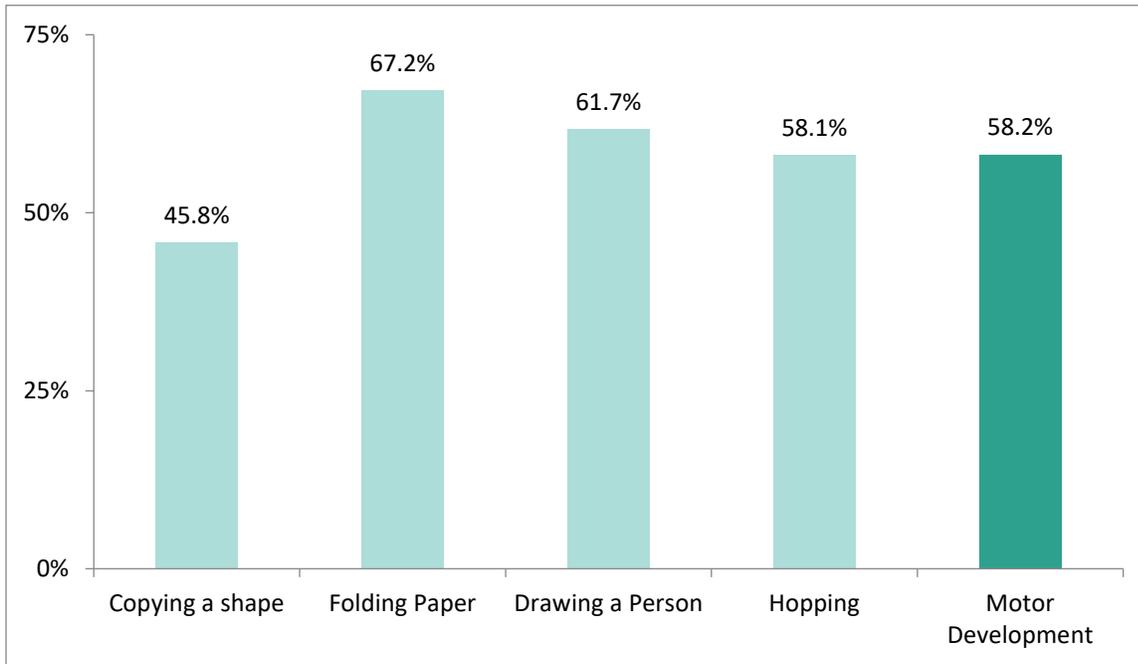
Emergent Literacy Subtasks

Children demonstrated average scores in four of the six subtasks: oral vocabulary, print awareness, oral comprehension, and initial sound discrimination (Exhibit 9). The highest score (62.5 percent) was in oral comprehension. Students struggled most with the letter identification and emergent writing subtasks.

Exhibit 9. Emergent Literacy Subtask Averages
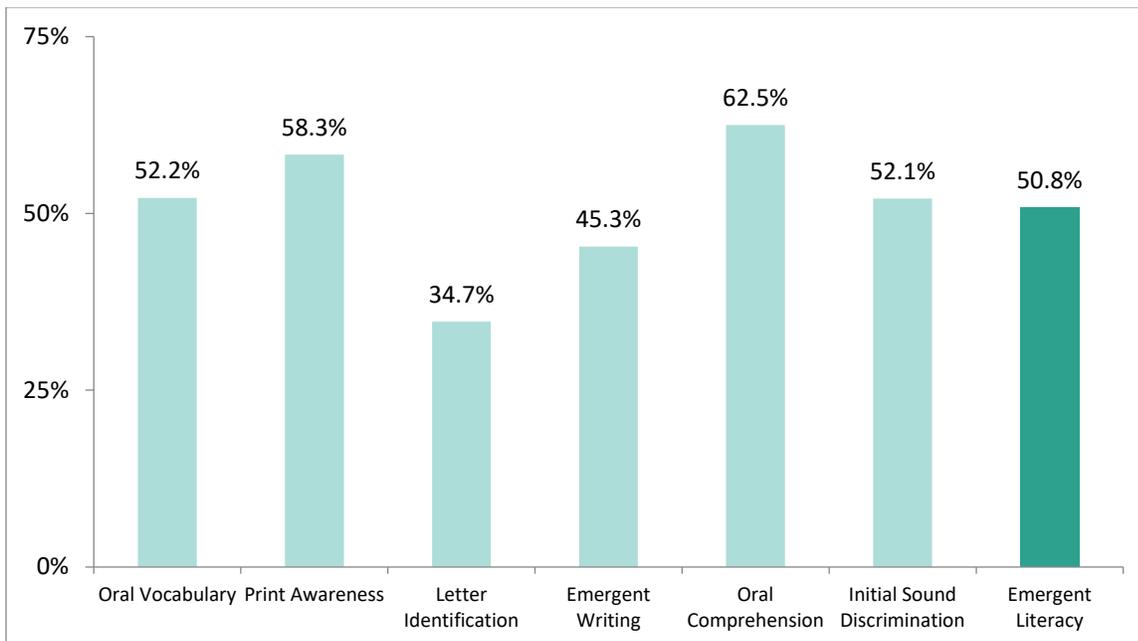
Emergent Numeracy Subtasks

There was a great deal of variation across the seven emergent numeracy subtasks (Exhibit 10). Scores ranged from 90.6 percent correct on the measurement subtask (comparison by size and length) to 20.6 percent correct on the number identification subtask — in fact, students could only identify four of 20 numbers presented. Puzzle completion was also challenging, with 45 percent correct scores.
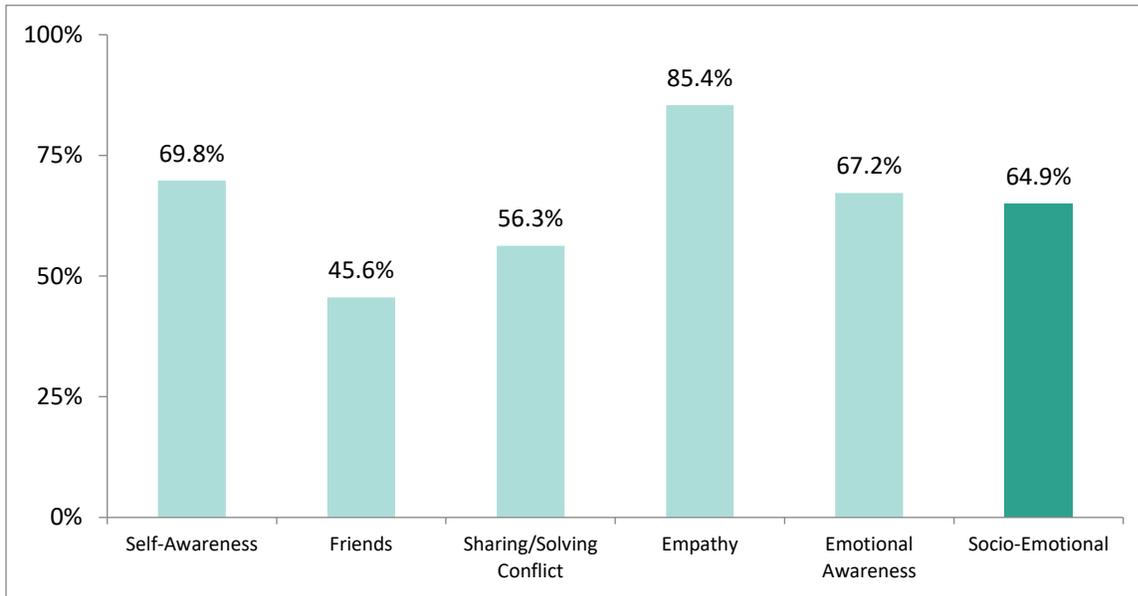
Exhibit 10. Emergent Numeracy Subtask Averages
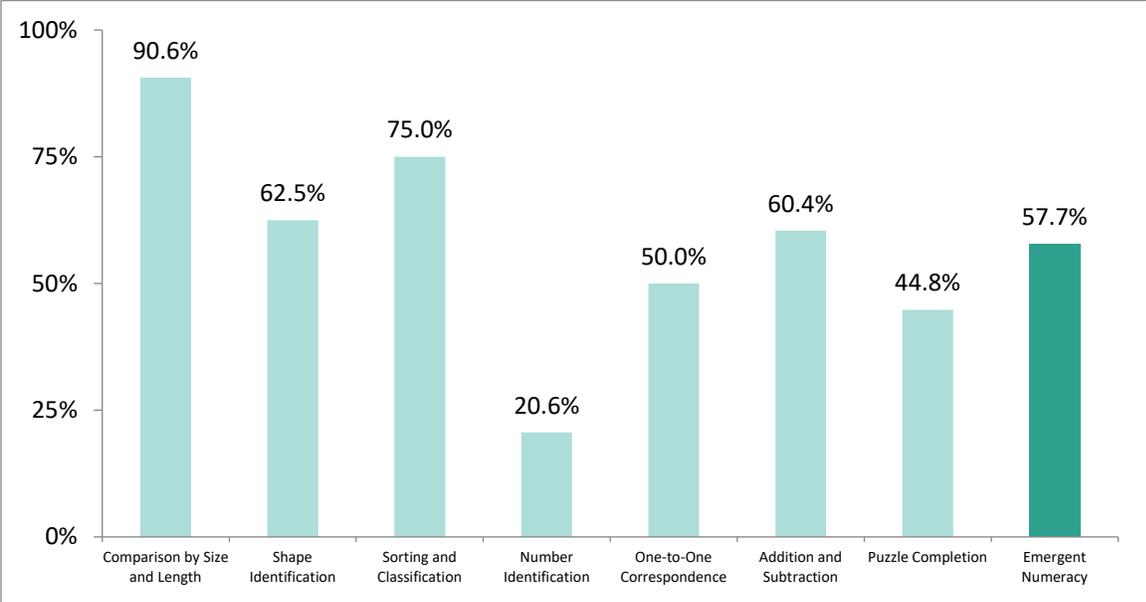
Socio-Emotional Subtasks

Students showed a high degree of empathy, emotional awareness, and self-awareness (Exhibit 11, next page). The sharing/solving conflict and friends subtasks were the most difficult, at 56 and 46 percent respectively.

**Exhibit 11. Socio-Emotional Subtask Averages**

Executive Function and Approaches to Learning

The IDELA child assessment also includes measures of short-term memory and inhibitory control as proxies for executive function, and overall observation and persistence/motivation as proxies for approaches to learning. Because these items are less well validated than the core IDELA items, they are not included in the composite score, but rather reported as additional items.

Based on the results for each of these optional domains (Exhibit 12), students have low inhibitory control (40 percent correct) and average short-term memory (60.9 percent correct). However, they scored very highly in the enumerator-reported approaches to learning subtasks (84.6 percent correct), demonstrating good test-taking ability and strong persistence/motivation.

Exhibit 12. Executive Function and Approaches to Learning Subtask Averages
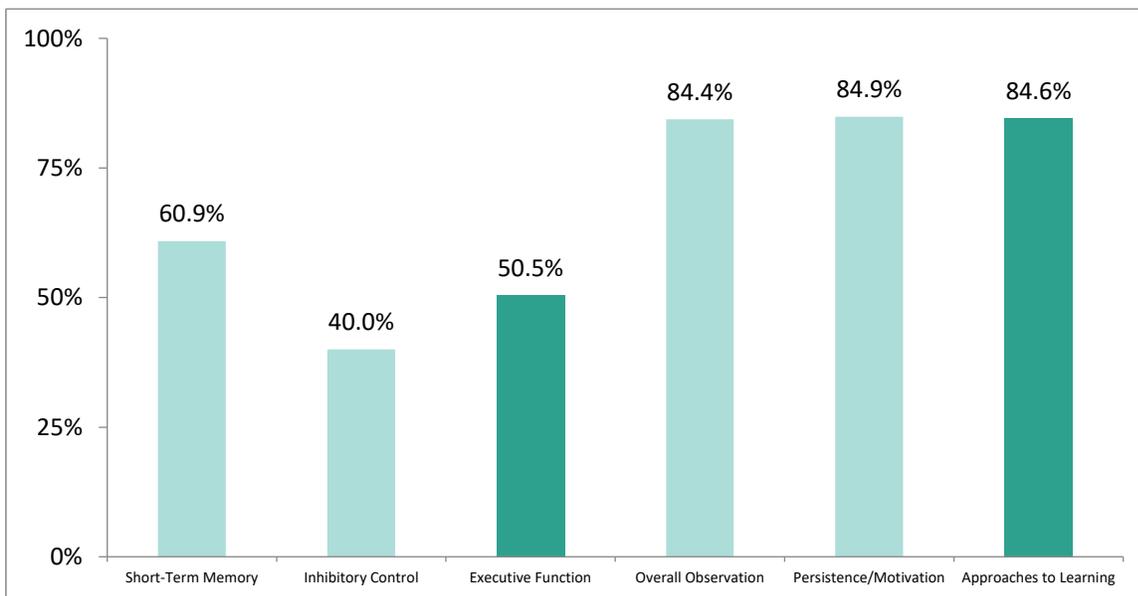
Conclusions

Students performed well overall, with a total IDELA score of 58 percent. On average, students showed the highest competency in Socio-Emotional Development and the lowest in Emergent Literacy. In the latter domain, students struggled with letter identification and emergent writing. Students also struggled with number identification and problem solving in the Emergent Numeracy domain.

Scores for each domain and subtask saw a significant amount of variability. A higher proportion of students scored below the mean than above, but because several students scored in the 90 percent range, the mean score appears above average and may over-represent the actual performance of all students sampled.

Across domains, girls and children in Partner C/Location 1 tended to score more highly. We found no discernible achievement trends in relation to age. These results are likely due to the small sample size and imbalanced numbers of students by sex, age, and location.

The study's primary limitation is its small sample size, which makes it hard to generalize results and use descriptive statistics. A further limitation is the lack of parent-provided contextual data, leaving only age, sex, and location with which to identify patterns and contextual factors influencing results. Because of the small sample size and lack of additional contextual data, we were unable to identify factors associated with learning outcomes with any degree of confidence or statistical significance.

While children with disabilities were not assessed, the few students who performed very poorly in the Motor Development domain could have had some war-related or other disabilities, or suffer from lack of stimulation. This worrying trend has appeared in other refugee samples and warrants further study.

Recommendations

Given the small sample size and our inability to generalize results, we recommend using the results to develop pilot interventions within the two centers to address low competencies in each domain. Injaz should work with the centers to design appropriate activities, train staff, and monitor program implementation, while continuing to assess student learning.

Considering that some children scored very highly in each domain and many children scored low, the child centers will need to support teachers to recognize differences in children's development and ensure that their activities engage all learners.

Recommendations for future assessments include adding a caregiver survey to better understand contextual factors that may be influencing early learning and adapting the tool for children with disabilities to reach the large population of children in Syria affected by war-related injuries. It would also be helpful to conduct the assessment with a larger sample to identify trends and factors associated with children's development and support them with statistical analysis.