

Tracking outcomes linked to an integrated approach to early childhood care and development (ECCD) in Cambodia

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Overview

- ▶ Plan Cambodia's Integrated ECCD Programmes
 - ▶ Overview
- ▶ Tracking outcomes: recent efforts to enhance monitoring and evaluation
 - ▶ Plan Cambodia's Outcomes Monitoring System (OMS)
 - ▶ Baseline Study - actions / implications
 - Evidence of impact on children's learning and health
 - ▶ Challenges & limitations



Background

- ▶ Commitment to integrated, community-based ECCD in Cambodia
 - ▶ Krousar Yoeung; Bandos Komar; Wathnakpheap
 - ▶ Siem Reap (2009); Tbong Khmum (April 2015); Ratanakiri (February 2016)



- Aligned with ECCD National Policy
- Responds to National Action Plan
- Contributes to SDGs

PROGRAM OBJECTIVE :
Girls and Boys aged 0-5, especially the most marginalized, grow up healthy, happy, and are ready for school

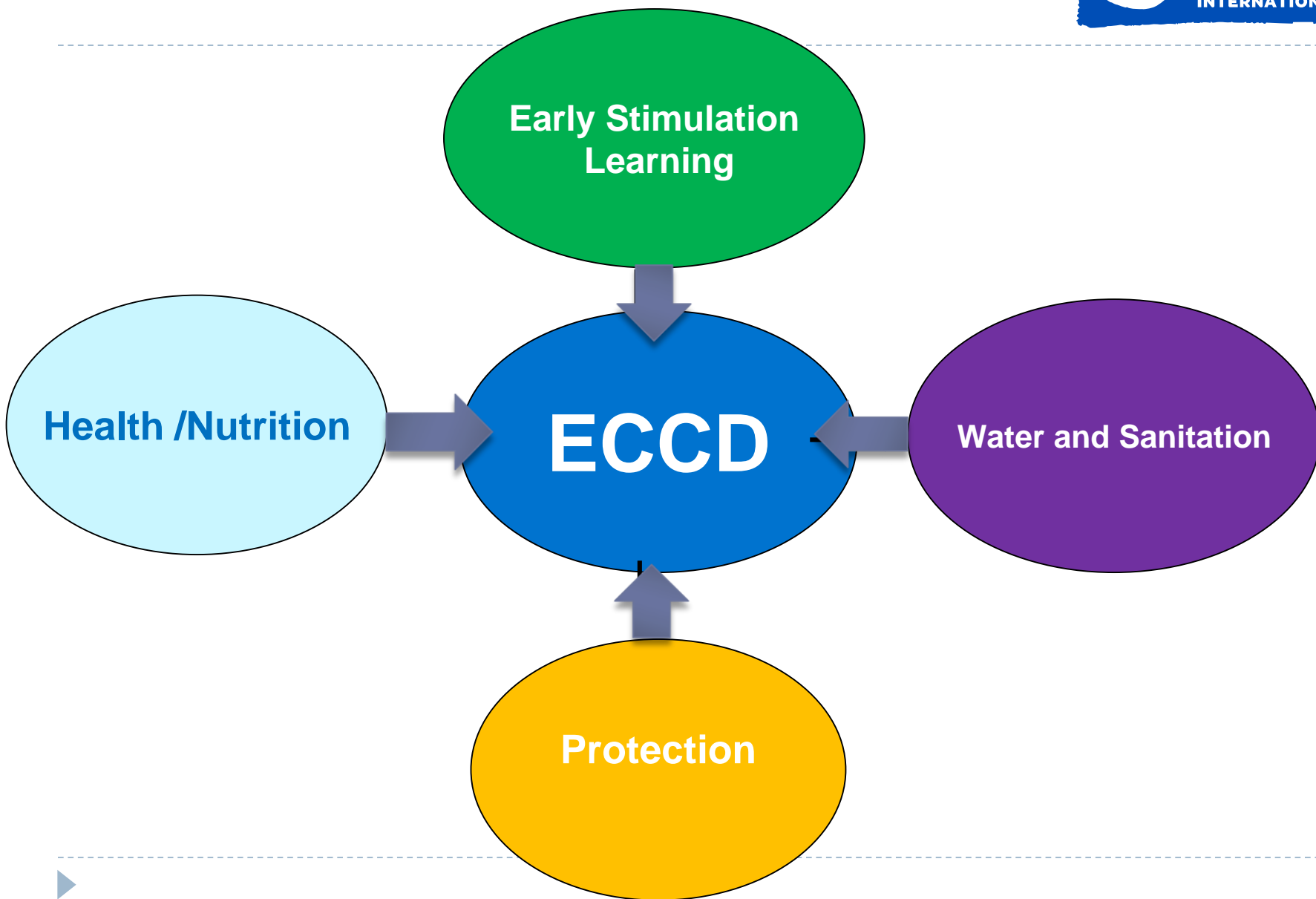
Support relevant ministries to provide adequate budget and technical support to CPS and parent and caregiver groups.

Parents and caregivers provide positive early stimulation, effective care and support to learning of girls and boys aged 0-5

Community based pre-school (CPS) teachers and parent group leaders have the capacity and commitment to support stimulation and learning of girls and boys

Commune councils (CCs) and village leaders provide support to early stimulation and quality learning outcomes for girls and boys aged 0-5

ECCD HOLISTIC APPROACH



Methodology /approach

- ▶ Community and Commune Managed
- ▶ Partnership with Local NGOs, CBO, Communes
- ▶ Strengthening Local Government
- ▶ Capacity building (Local NGOs, CBO, CCs)
- ▶ Rights Based Approach
- ▶ Supporting excluded groups
- ▶ Gender transformative
- ▶ Engages men, especially fathers









ECCD PARENTING EDUCATION



Current model:

- ▶ Promotes early stimulation (Plan materials) and the 12 key family practices (MoH materials)
- ▶ Provide TOT to Core parents and Core parents leaders (6 days)
- ▶ Support and provide training manual & IEC materials.
- ▶ Provide support for monthly meeting (Refreshment)
- ▶ Support OD/ POE/ PHD and CCWC to monitor parenting Education
- ▶ Support activities of complementary feeding (Food demonstration)





Local toys and learning material production



Tracking outcomes: Outcomes Monitoring System (OMS)

Baseline → *actions*

Mid-line evaluation → *actions*

6-monthly monitoring → *actions*

Annual monitoring → *actions*

Baseline study design

Jan '16 / mid-line just completed



▶ To enable future evaluation:

- ▶ A comparison group design: intervention + control groups
- ▶ *Tbong Khmum / Ratanakiri = baseline / Siem Reap = mid-line evaluation*

▶ Random sampling approach

- ▶ Random selection of *20% of the total villages in each of the provinces
(*20%-30% of the entire program portfolio should be subject to evaluation for accountability purpose (UNDP, 2009))
- ▶ Total number of participants
 - 572 parents / 455 children aged 0-5 years olds (281 aged 3-5 years)

Ratanakiri (parents=107; children = 81)	Siem Reap (parents =317; children = 233)	Tbong Khmum (parents = 148 children = 141)
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Research Question	Tool
What is the current status of children’s health /development?	Anthropometric surveys EAP-ECDS
What is the current status of parents’ knowledge, attitudes and practices regarding 12 key family practices; WASH; nutrition and early stimulation?	Plan Cambodia parent KAP questionnaire
What is the current status of CPS teachers’ feelings of self-efficacy, and their needs?	Teacher self-efficacy reports / interviews
What is the current status of quality of teaching and learning environments in preschools?	Cambodia Early Childhood Education Environment
How ‘child-friendly’ are participating and control communities?	Child-friendly Communities measure

Any differences between the intervention and control groups (particularly in Siem Reap)?



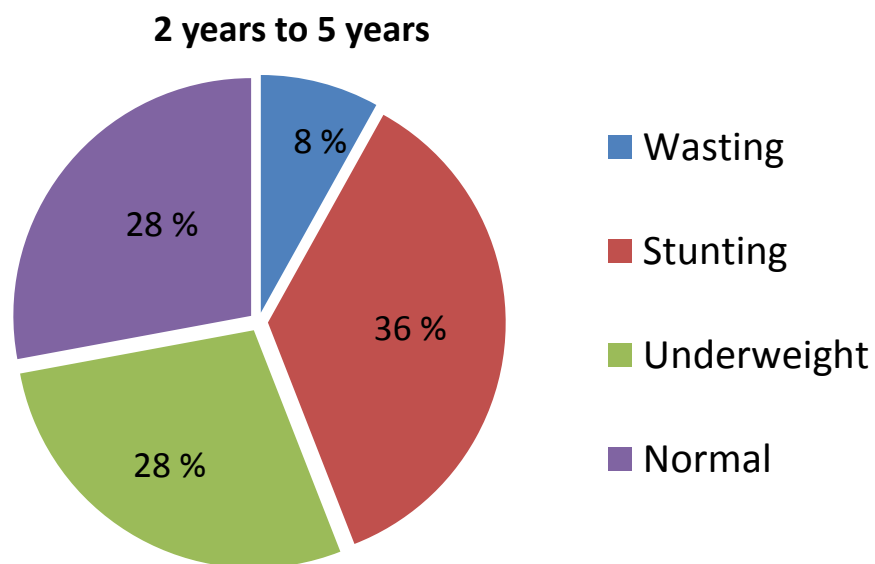


*What we found –
Snapshots of data from the Baseline
study*



Key Outcomes

Children's health: All provinces



Prevalence of malnutrition from age 2 to under 5 years:
Siem Reap; Tbong Khmum; Ratanakiri combined

Across all provinces:

Anthropometric surveys indicated high level prevalence of wasting (acute malnutrition), stunting (chronic malnutrition), and underweight

Of concern is that the data demonstrate increases in stunting and underweight as children grow older, indicating that malnutrition is a long-term condition for many children.

Evidence of impact:
Children in Siem Reap intervention group appear to be less likely to suffer from stunting

Outcomes: Parent-reported practices related to Water, Sanitation, Health & Hygiene (WASH)

- ▶ Low rates of handwashing before handling food (up to 35%) & after disposing of children's faeces (8%)
- ▶ High numbers (up to 21%) of parents across all provinces / groups report that they never treat water
- ▶ Given that parents also report diarrhoea as one of two most common childhood illnesses, an emphasis on handwashing behaviours seems crucial.



Actions / implications

- ▶ *Anthropometric measures indicate high levels of stunting, malnutrition across all provinces*
 - ▶ *Actions:*
 - ▶ *Strengthen messages regarding nutrition and feeding delivered in parent groups*
 - Recently completed mid-line evaluation indicates reductions in some rates of wasting and stunting across intervention villages, but room for further interventions, such as parental training on diversifying farming practices.
 - ▶ *Strengthen messages related to hand washing before handling food and after handling children's faeces*
 - Mid-line data: significantly improved hand-washing before food, but still very low rates of handwashing after handling children's faeces.
 - ▶ *Strengthen messages related to treating water*
 - Mid-line data: small improvement.



Key Outcome

happy, healthy children 'ready for school'



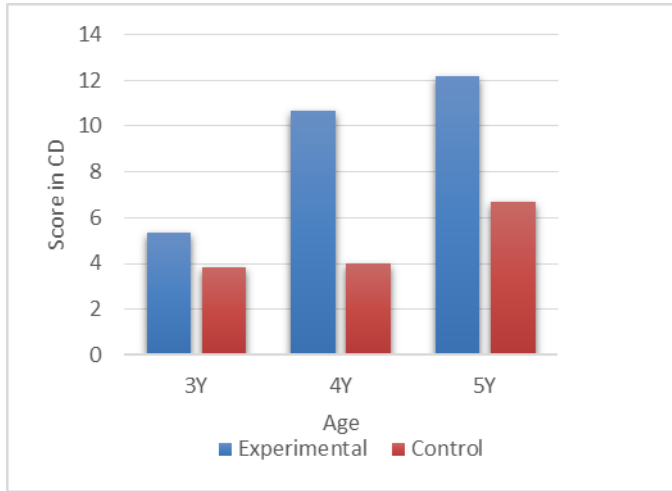
- **Across all provinces**
 - **Older children achieved higher scores than younger children** on all domains of the adapted EAP-ECDS scale (CD; SED; LEL; MD; CKP; ATL; HHS)
 - **In Ratanakiri (RK) and Tbong Khmum (TK)**
 - No differences across intervention and control groups were found for children in these 2 provinces. This is to be expected: The holistic ECCD program had been operational for only a few months.
 - **In Siem Reap**
 - **Children in the intervention groups scored higher than children in the control group** on all domains, ***indicating*** that the holistic ECCD program in this province is having a positive impact on children's developmental status. Again, this would be expected as these programmes have been operational for more than two years.
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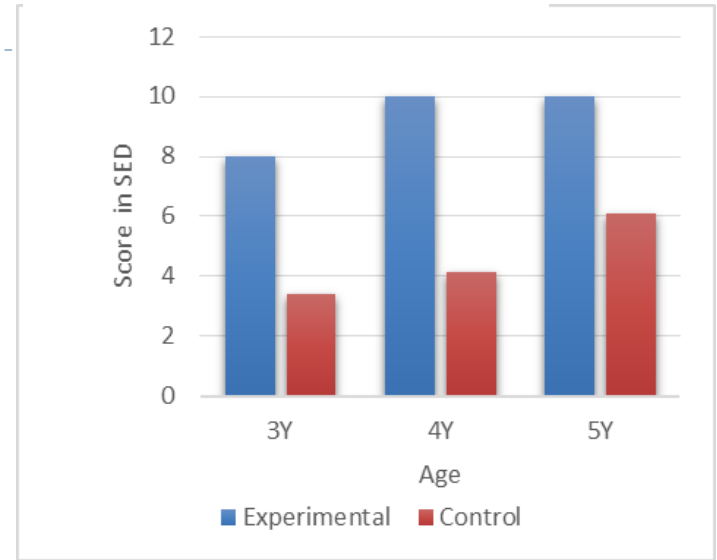
Siem Reap 'outcomes': statistically significant differences between 'experimental / intervention' and 'control' groups



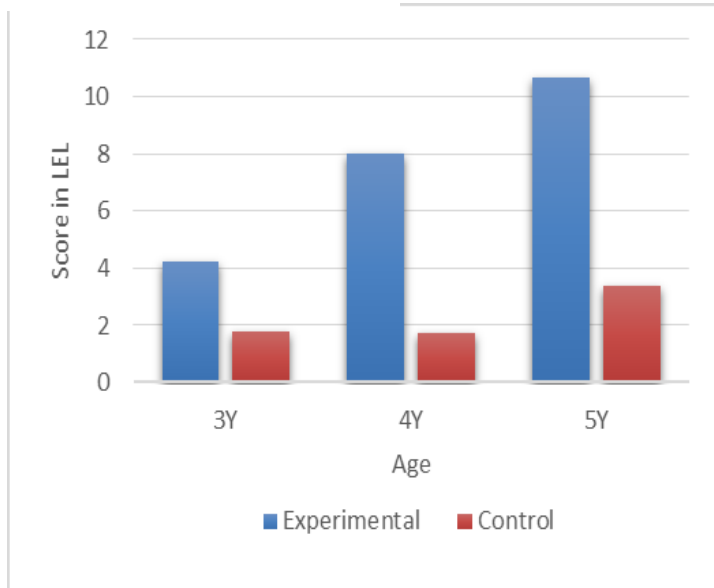
Cognitive Development



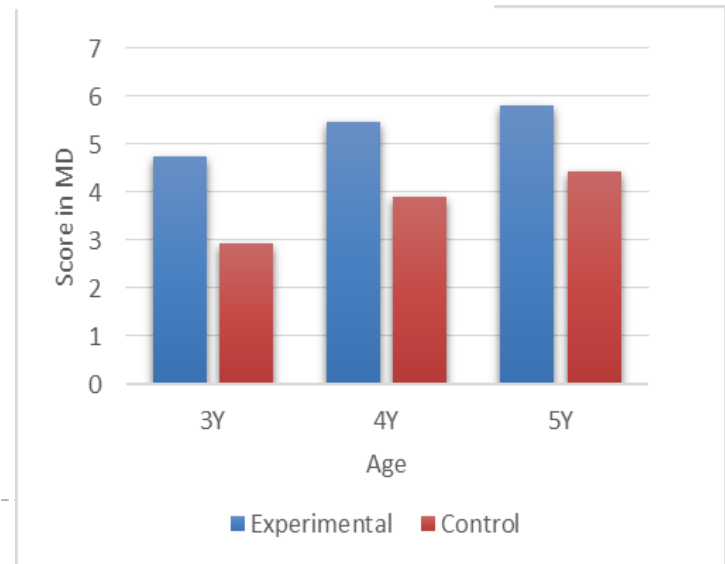
Socio-Emotional Development



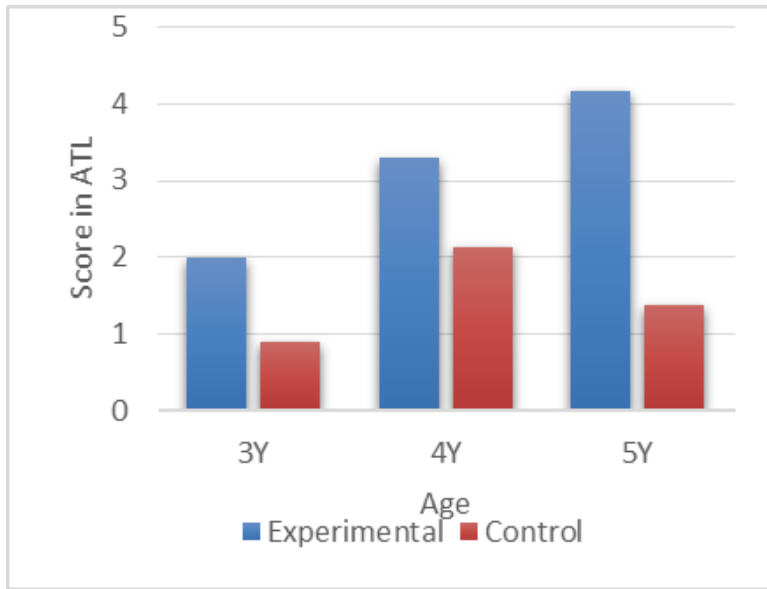
Language & Emergent Literacy



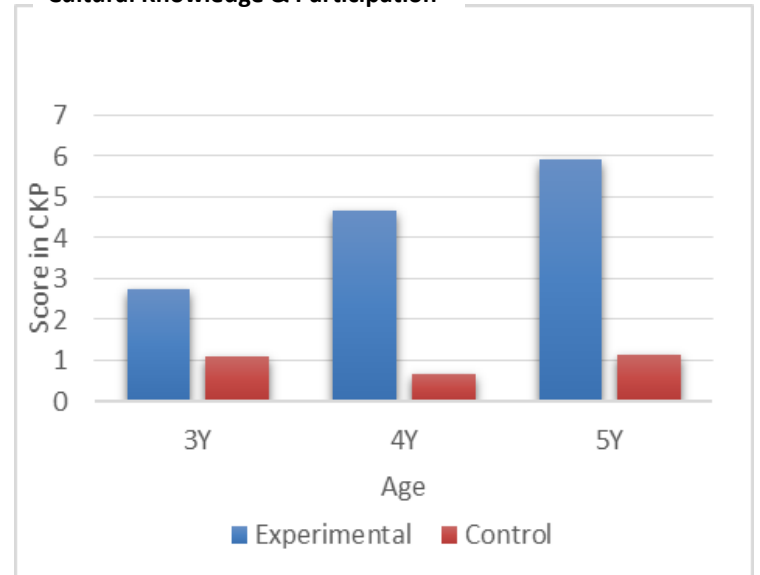
Motor Development



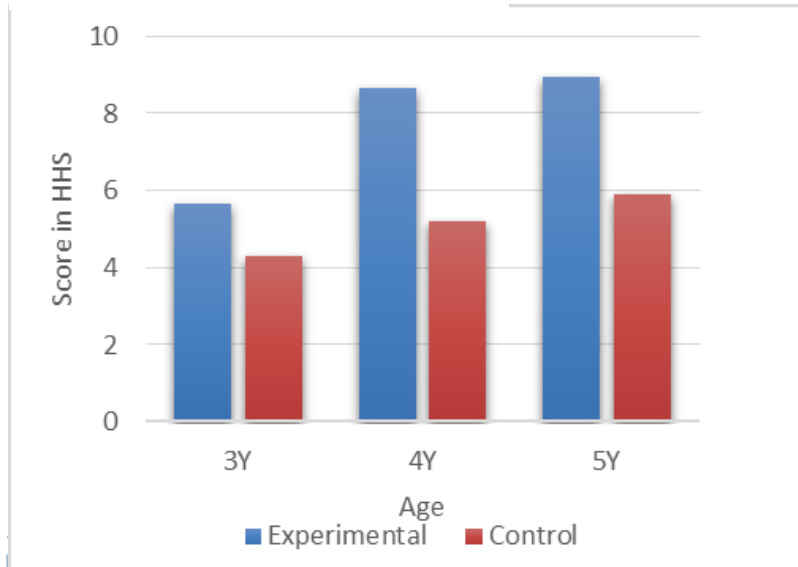
Approaches to Learning



Cultural Knowledge & Participation



Knowledge of Health, Hygiene & Safety



Implications / Actions

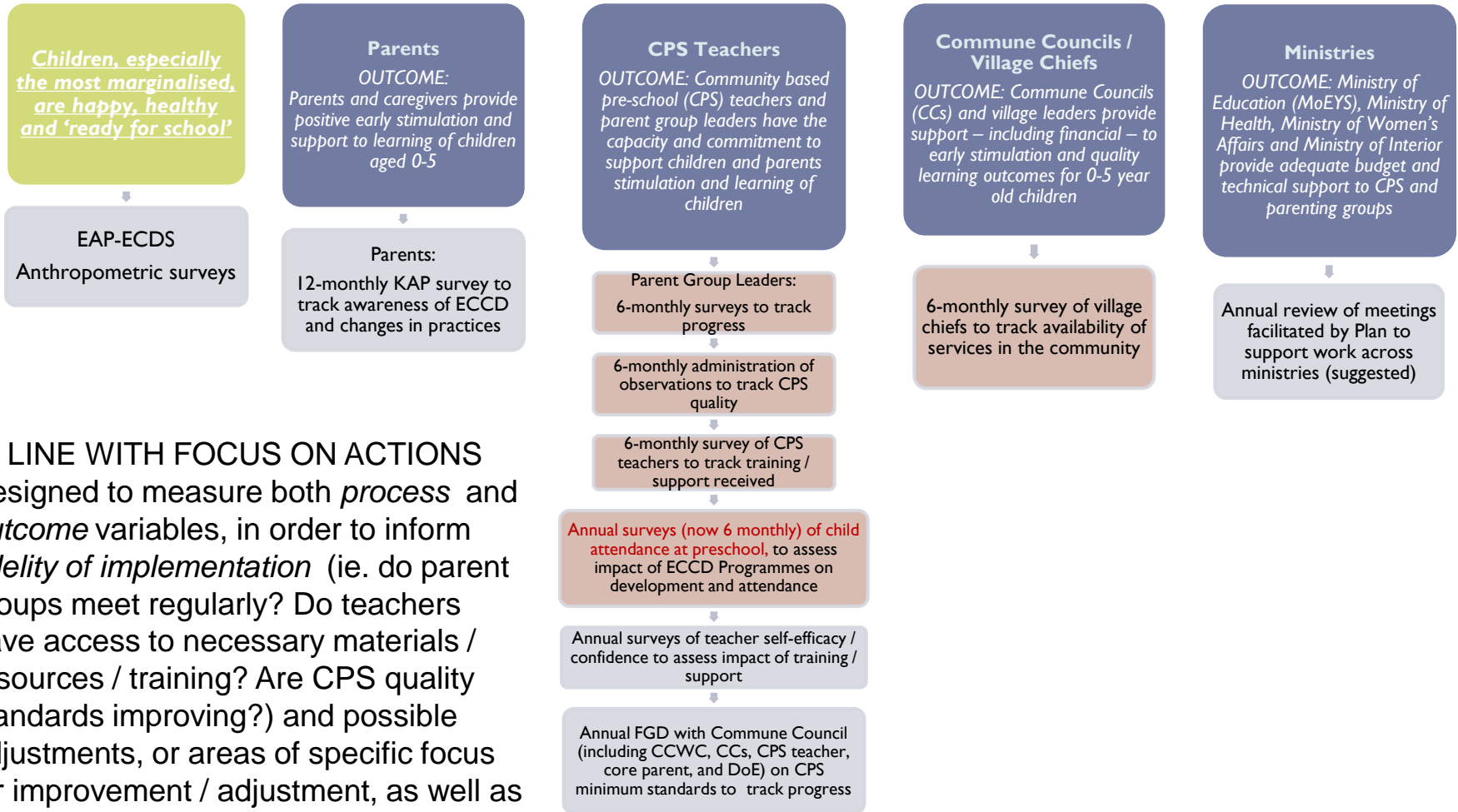
- ▶ *The integrated ECCD programs do seem to be having a positive impact on children's development, according to the EAP-ECDS results in Siem Reap*
 - ▶ *Although we do not cover the findings in detail here, we did find areas for action in the CPS quality data / teacher interviews*
- ▶ *EAP-ECDS scale seems to provide a good indicator of impact*
 - ▶ *Action: Keep as a tool for on-going monitoring. Ensure the tool is used by trained data collectors and using the correct materials*



- Across all provinces, parents in the intervention groups show stronger awareness of
 - importance of, and participation in, **early stimulation** than parents in control groups.
 - ‘appropriate’ parenting practices, as measured by the KAP survey.
 - Importance of ECE (more so once children are enrolled).
- Across all provinces, high rates of use of physical punishment
 - ▶ *Action: Further strengthen focus on the importance of parent-child interactions (although higher in intervention groups, in some villages rates could be higher). In particular, need to focus on messages about harm associated with use of physical punishment.*



Summary – OMS & Challenges / limitations



IN LINE WITH FOCUS ON ACTIONS
Designed to measure both *process* and *outcome* variables, in order to inform *fidelity of implementation* (ie. do parent groups meet regularly? Do teachers have access to necessary materials / resources / training? Are CPS quality standards improving?) and possible adjustments, or areas of specific focus for improvement / adjustment, as well as broader outcomes / impact.



Challenges / limitations

- ▶ **Volume of data required**
 - ▶ Integrated programmes require monitoring of the **various aspects** (sometimes with varied funding sources / intended outcomes) of intervention
 - ▶ **Measuring / tracking the ‘integrated’ aspect of **this programme****
 - ▶ Ministry level: Number of inter-sectoral meetings held at Ministry level?
 - ▶ Community level: ‘Child friendly communities’? Commune-level commitment to ECCD?
 - ▶ **‘Fidelity’ in use of tools – realities of collecting data in the field!**
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RESPECT TO PLAN CAMBODIA TEAM!



Thank you!



