International evidence underscores the importance of the early years and the value of early intervention as a tool to mitigate the negative effects of poverty on children’s short- and long-term outcomes. It is clear that children’s development is the product of multiple, interconnected influences, from family environments to the availability of community supports to broad national policies and economic resources. These circles of influence (Figure 1) form the organizing framework of this policy brief.

Poverty challenges child development at all levels, yet in both developed and developing countries research has shown the benefits of early childhood education and development (ECED) services for a child’s short- and longer-term health and development, as well as economic benefits to society from investing in ECED. This evidence has influenced significant government attention to ECED policies and services in Indonesia. In the past decade, the government has taken steps to strengthen the policy environment for ECED, including the establishment of an early childhood directorate, the inclusion of ECED as a priority in national planning documents, and the creation of national ECED standards.

The government has also, with support from the World Bank and other development partners, provided new early childhood services in 6,000 poor communities across 50 districts in the country. An impact evaluation of the ECED project is examining the development of a sample of children from the project, using a battery of internationally validated measures in multiple domains. The lessons from this experience are the focus of this brief. A final round of the evaluation is being conducted and further results will be presented in subsequent briefs.
Aspects of the Project’s Design

Working together, the Government of Indonesia and the World Bank created the ECED project to:

1. Increase integrated ECED service delivery through community-driven mechanisms in targeted poor communities;
2. Develop a sustainable system for ECED quality; and
3. Establish effective program management, monitoring, and evaluation.

To reach these objectives, project teams implemented multiple activities, including ECED policy development and capacity-building efforts at central and local levels of government, sensitization about the importance of ECED within villages, training of community members to serve as ECED teachers, and monitoring and evaluation of project activities.

Community participation was especially important to program design. Using a community-driven development process, trained local facilitators helped village members identify their ECED needs and prepare proposals for small grants. Most communities used their resources to establish center-based playgroups in existing, renovated facilities, primarily serving children ages 3 to 6, with some satellite services in surrounding areas. Centers typically operate at least 3 days a week, usually in sessions of 2 hours a day. To date, these centers have served more than 500,000 children.

Villages selected local individuals to serve as ECED personnel. Criteria for eligibility included a secondary school education, an interest in young children and a commitment to ECED. Using a cascade training approach, those selected participated in 200 hours of training.
Young Children in Indonesia’s Low-Income, Rural Communities: How Are They Doing and What Do They Need?

Although there is general enrollment information for ECED services in Indonesia, very little information exists on child development outcomes. This study fills this gap through a variety of child assessments carried out in 2009 and 2010 (see Box 1). Assessments—some of which were used in Indonesia for the first time—were based on child performance or mother report.

Children’s development shows strengths but also areas of concern.

In physical development, this sample of rural children in poor villages showed high rates of stunted growth, wasting, and being underweight for age. The percentage of children with these growth problems declines somewhat with age but remains very high in relation to children in other countries and is consistent with national statistics for Indonesia.

In the domain of language, cognitive, and conceptual development, children in this sample have not gained foundational, age-appropriate school readiness skills in literacy, math, and other aspects of cognitive problem-solving and do not seem to have much interest in these domains (as reported by their mothers). Children do improve in their cognitive and conceptual development as they get older, but their competencies in this domain remain low compared with children of the same age in other settings. Children’s conceptual development was limited at age 4 but improved considerably by age 5; however, there were wide variations in children’s abilities.

Assessment of children’s executive function skills indicated that children in this sample seem to be developing their abilities to plan and manage their thinking and behavior at about the same rate as children in other countries.

With respect to communication and general knowledge, children performed well. Mothers reported that their children speak clearly and can express their wants and needs to others. Children in this sample are able to play imaginatively, tell stories, and show understanding of the everyday world around them.

Finally, in social and emotional development, in most respects children in this sample are doing well. Mothers described their children as independent and cooperative, and they reported few behavior problems or examples of emotional difficulties.

Parents are missing opportunities to promote positive development at home.

Daily activities. Parents or other primary caretakers in the study seem not to be taking advantage of everyday opportunities to support development in the home environment. They do not generally read books to their children or tell them stories, for example, activities that predict children’s later competence in language and literacy. About one-quarter of mothers in these rural villages reported that their children never play outdoors, and 17% of 4-year-olds never draw or scribble at home. Children living in the greatest poverty are the least likely to have such positive experiences.

Mothers’ feeding practices. Like mothers in other parts of Indonesia, this sample of mothers does not breastfeed exclusively for as long as recommended. Furthermore, for older children, they reported giving children snack foods more often than vegetables or milk.

Parenting practices. Because higher quality parenting is associated with better developmental outcomes, a 24-item Parenting Practices interview assessed parents’ warmth, consistency, and hostility in relation to their children. There were wide variations across parents in their child-rearing techniques.

Box 1: Data on Child Development Are Detailed But Not Nationally Representative

The study examines the development of a sample of children residing in 310 poor villages across 9 districts in Indonesia, using a battery of internationally validated measures in multiple domains. Two age cohorts were assessed, first in 2009, when the children were aged 1 and 4, and again in 2010, when they were aged 2 and 5. These 9 districts are a subset of the 50 districts involved in an ongoing project that provided expanded access to ECED services for children between the ages of 0-6. Final data will be collected in 2013.
Access to affordable ECED services in poor villages is limited.

Because baseline data were collected before project services were available, information was gained about what kinds of ECED services are available in typical villages. Only one-third of the communities in this study offered any kind of playgroup or kindergarten. As in Indonesia as a whole, kindergartens typically only serve children age 4 and up and are privately run, placing them out of reach of most of the poorest families. The most common kind of ECED service is provided through the village health post, usually a volunteer-run, once-a-month service primarily tracking children’s physical growth and well-being.

Children from the least-educated and poorest families make the least developmental progress.

Although the villages in this sample were generally poor, it was possible to look at children’s development in relation to levels of parental education and poverty. Results show that even in low-income communities, the poorest children, and the children with the least-educated parents, tend to show lower progress than other children.

Beyond the family: Focusing on communities

Children’s “developmental vulnerability scores” on one of the major measures used in this study—the Early Development Instrument—were compared across the sample of districts in this study. Not surprisingly, since these districts were selected for their high levels of poverty, the children’s vulnerability scores were also high. Within districts, however, there was evidence of socioeconomic disparity—that is, those children living in the poorest households have the greatest developmental vulnerability, especially in the language and cognitive skills domain.

What Impacts Have We Found So Far?

An ongoing impact evaluation, using both experimental and non-experimental analyses, allows assessment of the short-term effects of the project. Data come from two cohorts of children. The younger cohort consisted of children who were one year old when they were first studied (at baseline in 2009) and two years old when they were studied a second time (at midline in 2010). The older cohort consisted of children who were 4 years old in 2009 and 5 years old in 2010.

The evaluation results to date tell us that within the first nine months of the project’s implementation:

- ECED enrollment increased in villages with project-supported services.
- On average, the impact of the project on child outcomes in villages participating in the project was somewhat limited. There were indications of positive effects but for the average child in project villages these effects were generally small.
- However, for the most disadvantaged children, strong and significant effects were evident. This was particularly true for children from poorer families, girls, and children who had not been enrolled in any ECED services at baseline. Importantly, these positive results are seen in the domains of language and cognitive development—areas where children were most behind at baseline.
- No impacts have yet been seen on children’s nutrition outcomes or parenting practices.

Researchers will collect endline data in 2013 and analyze the effects of the project into the beginning of primary school.
Implications for Policy and Practice: Insights from Indonesia

This section draws on these insights about Indonesian children’s development and about the ECED project’s planning, implementation, and midline evaluation, and links these insights to emerging ECED priorities. To organize these priorities, we return to the circles of influence that form the framework of this study.

(1) The Influence of Children’s Current Characteristics: An effort to obtain valid assessments of young children’s health and development must be made, so that the results can inform the focus of ECED interventions. This is critical because
   (a) Information on children’s developmental strengths—not just their vulnerabilities—is a useful basis for planning interventions; and
   (b) Assessing children’s development holistically can identify areas of risk or vulnerability in more than one domain, suggesting priorities for intervention.

(2) Family Influences: A key role exists for families and family-focused interventions in promoting positive outcomes for children.
   (a) Parents’ education and home practices predicted child development, suggesting that parenting education should be a priority in government programs and policies;
   (b) Parents in poor villages are generally eager, motivated supporters of ECED for their children, making them a valuable resource;
   (c) In the absence of explicitly family-focused interventions, it is unlikely that improvements in parenting practices or home environments will be seen;
   (d) Information about home environments and parenting practices is useful in identifying specific targets for family support—such as, low incidences of book-reading and storytelling, or shorter than optimal periods of exclusive breastfeeding.

(3) Community Influences—Community-Based ECED Services: A focus on providing comprehensive, community-based ECED services across age groups and sectors can facilitate holistic development. Lack of accessible, affordable ECED services continues to challenge the holistic development of poor children in Indonesia and elsewhere. Insights from the data and implementation experiences suggest that:
   (a) Enrollment in ECED services helps children’s development, especially children from the poorest environments, suggesting that some targeting of services may be effective;
   (b) Data on village-level enrollment patterns by age provide practical insights and allow regulations to match local preferences and realities;
(c) Communities are ready and willing to engage in a well-facilitated planning process to identify their own ECED needs, but long-term impact may be enhanced through involvement of an influential village leader;
(d) It is important to locate services in places convenient for families, especially the poorest;
(e) Teachers selected from rural villages can, with adequate training, serve as motivated ECED personnel; and
(f) Center-based ECED programs that are organized to serve preschool-aged children have great difficulty meeting the needs of infants, toddlers, and their families. Other approaches to providing holistic services may be more effective for the youngest children.

(4) **Broader Influences:** Policies, systems, and resources that contribute to long-term sustainability of quality ECED services are needed.
(a) Government commitment to ECED is essential. Such commitments build capacity, contribute to sustainability, and provide models for other poor districts.
(b) The presence of significant disparities in children’s progress across and within districts suggests that governments should consider increased support for areas most in need.
(c) National policies are needed to promote holistic, integrated services for young children and their families, addressing common barriers created by the separation of ECED functions into separate ministries and directorates.
(d) A cost-effective, practical system of supports is needed for current and future ECED personnel. Government efforts to implement a variety of in-service activities such as teacher cluster groups and internships may yield promising directions for the future.
(e) Quality assurance systems, including systematic evaluation mechanisms, are essential.
(f) Monitoring and evaluation efforts are vital if interventions are to be continuously improved. Program evaluation design needs to be sensitive to program implementation realities, but once a design has been agreed upon, project implementation needs to ensure that the design is adhered to in order to ensure a quality evaluation.