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Human Resources Development and Operations Policy



Integrated Early Child Development: Challenges and Opportunities

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Integrated Early Child Development: Challenges and Opportunities

by Mary Eming Young

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A larger version of this report, including annexes, can be obtained from the author upon request.

Abstract

Early child development is a relatively new theme in the Bank. At the end of the 1970s studies commissioned by the Bank recommended the implementation of policies designed to assist poor children by working directly with their families and by stressing educational support to the family unit. In the early eighties, very few Bank projects addressed this issue. Starting in 1985, however, the number of free-standing projects addressing early child development has increased markedly. These activities are located within Social Sector, Nutrition, Health and Education Loans.

Early child development programs promote the physiological and intellectual development of young children, helping to ready them for further schooling and a productive role in society. Cumulative research indicates that most rapid mental growth occurs during infancy and early childhood and that on the whole, the early years are critical in the formation and development of intelligence, personality, and social behavior. Scientific research indicates that, given the decisive influence of children's early stimulation on physical, psychological, and social development, primary school and even kindergarten programs (for children 4 to 5 years old) can prove to be too late to counteract some physical, neurological, psychological, and social factors closely associated with early deprivation and lack of adequate stimulation.

As a part of its strategy of poverty alleviation, the Bank faces the challenge to assist governments in expanding and sustaining programs of various kinds to improve the development of children. The Bank has gained valuable experience in the development and support of early childhood programs and interventions. However, the Bank can do substantially more. It can begin encouraging an add-on approach to existing programs while promoting the development of integrated, multi-sectoral programs. There should also be an expansion of sector work focusing on the needs of young children. More research and evaluation needs to be undertaken, especially in costs and financing, and in the development of monitoring and evaluating instruments. Furthermore, the Bank can collaborate with UNICEF to bring people together from various program sectors and formulate an integrated policy towards human resources development. The Bank should also draw on the experiences of bilaterals and NGOs, such as the Bernard van Leer Foundation, Save the Children, and the Christian Children's Fund. Within the Bank, awareness of the pivotal role of early childhood development in human capital formation needs to be increased, through dissemination of best practices, training seminars, and workshops.

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"A child is born without barriers. Its needs are integrated and it is we who choose to compartmentalize them into health, nutrition, or education. Yet the child itself cannot isolate its hunger for food from its hunger for affection or its hunger for knowledge." (Alva, 1986, in Myers, 1992b).

I. Introduction

Over the past two decades, attention to and demand for early childhood programs has grown worldwide as a result of: (i) an increasing number of parents employed outside the home in environments where the presence of young children is neither desirable nor practical; (ii) a steady improvement in children's survival, so that the society can begin to look at broader issues of quality of life; and (iii) a recognition that early childhood experience can have significant effects on subsequent development, especially schooling.

At the international level, three events have given new visibility to children's issues and have highlighted institutional and organizational challenges for early childhood programs at the national level. The 1989 UN Convention on the Rights of the Child, the 1990 UN World Summit for Children, and the 1990 World Conference on Education for All, along with its 1993 follow-up, The Education for All Forum, emphasized the importance of early childhood care and development programs. In recognizing the value of these programs, the conferences also drew attention to the links between the welfare of children and community development, the changing role of women, poverty alleviation, and school performance. These meetings have heightened the awareness of the international donor community and governments alike of the importance of early learning and have led to greater commitment by both to early childhood programs.

This growing awareness is critical because children in the developing world, in particular poor children and girls, are under serious threat of developmental deprivation. Fortunately the scientific and operational means of ending or reducing deprivation appear both available and affordable. In the past two decades the Bank and other multinational agencies (UNICEF, UNESCO, and NGOs such as the Bernard van Leer Foundation, Aga Khan, and Save the Children), along with national governments, have examined data and gathered the experience needed to design effective early childhood programs.

Early child development is comprised of both caring for the basic health and safety needs of children and providing for the multidimensional growth of their mental, emotional, and social development. Child care, that is custodial provisions, and child development, the social and psychological stimulation of children, should not be considered separately. Programs that provide childcare should also incorporate child development goals. Similarly, programs designed to enhance early development must consider the needs of families. In short, programs must respond to the complete well-being of the child. This approach involves the family and the community.

Evidence suggests that early investments in development of the whole child can bring improvements in the life of a child and provide benefits to the entire society. Cumulative research indicates that most rapid mental growth occurs during infancy and early childhood and that on the whole, the early years are critical in the formation and development of intelligence, personality, and social behavior. Scientific research indicates that, given the decisive influence of children's early stimulation on physical, psychological, and social development, primary school and even kindergarten programs (for children 4 to 5 years old) can prove to be too late to counteract some physical, neurological, psychological, and social factors closely associated with early deprivation and lack of adequate stimulation.

A variety of such programs exist. There are the traditional preschool and kindergarten settings that are often part of the formal education system. However, issues of cost and affordability have directed attention to nonformal program models. In addition, concern with educating parents and caregivers and with the community environment of the child has led to increased interest in the nonformal models and their linkage with an earlier tradition of community development. Initiatives that help organize communities around their own perceived needs often focus on providing for the community's children. Early childhood care and development programs that represent this nonformal community development model have been implemented in countries as diverse as India (Integrated Child Development Services),

Colombia (the Hogares Communitarios or Community Homes), Kenya (the national Harambees or Let's Pull Together movement), Brazil (the Creches Comunitarias or Community Nurseries), Jamaica (Community Study and the backyard nurseries), the United Kingdom (the Playground Movement), and Venezuela (the Hogares de Cuidado Diario or Daily Care Homes).

But it is important to stress here that differences in the cultural and economic milieu caution against assuming that workable solutions in one country will be equally effective in another. Therefore, instead of emphasizing a single program model, it is more appropriate to identify a range of effective models. Even within countries, great care must be taken to identify target populations and help beneficiaries define their needs and devise programs to meet them. For example, formal center-based programs, while perhaps suitable for urban middle-income populations, may not be suitable on a large scale in low-income countries. On the other hand, enrichment programs aimed at caregivers and using parental and community resources can be implemented at low cost and greatly improve both the well-being and learning environment for most children.

This report, designed for World Bank task managers, summarizes why investment in human capital formation through early child development is worthwhile. It reviews lessons learned from programs and projects in operation, and examines how such projects can be designed under various conditions. Discussion will be limited to the nonformal approach. Part II summarizes the rationale for investment in early child care and development. Part III examines program options and programming experiences with projects both inside and outside the Bank. Part IV reviews the essential minimum inputs and approaches to packaging such projects. Part V suggests how the Bank can strengthen its role in this area, and Part VI presents conclusions.

II. Rationale for Investment in Early Child Care and Development

Research concerning the importance of early child development to learning and success in life for low-income children began a few years before the advent of the Head Start program in the early 1960s in the United States in a series of specially designed and controlled projects. Later, evaluation studies were funded to study the impact of the Head Start program, and these two streams converged into a remarkable demonstration of long-term effectiveness. The basic findings conclude that early childhood development can improve the lives of low-income children and their families, and that it can enhance the quality of life for the community as a whole (Schweinhart et al., 1993).

A body of evidence has emerged that supports the case for early childhood care and development in both the developed and the developing countries. The results of programs reviewed suggest that participation in preschool and initial education programs targeting infants and toddlers and preschool programs can improve the child's school readiness skills. Other benefits include the lowering of primary school enrollment ages, reduction of repetition and dropout rates, and improvement of academic performance. Traditionally disadvantaged groups (girls, rural children, and children from families with low socioeconomic status) appear to receive the most beneficial effects. Parental involvement in programs also appears to strengthen the positive impact of early childhood interventions.

Scientific Support

Scientific evidence indicates that 50 percent of the variance in intellectual development is established by age four. Inadequate intellectual stimulation and affective care, coupled with early malnutrition, are likely to result in severe and possibly irreversible damages to physical and emotional capacities. The

¹ This section draws heavily from Robert Myers, <u>The Twelve Who Survive</u>, and the World Bank report, <u>Mexico-The Initial Education Strategy</u> (report no. 10129-ME), which both provide a comprehensive literature review on the scientific and socioeconomic rationales for investment in early child development.

development of these capacities is crucial to further learning. Because of the importance of the early years, elementary schooling and even kindergarten may be too late to develop these capacities in children.

The most rapid mental growth occurs during infancy and early childhood, and on the whole, early years are critical in the formation and development of intelligence, personality, and social behavior. Because infancy is a period of unusually rapid maturation and sensitivity, a high degree of environmental stimulation is needed for the development of secure conceptual structures and social relationships in later life.

Debates about early childhood development have evolved in the past 25 years as research has begun to document the effectiveness of quality day care programs on the lives of disadvantaged children. In the United States the first wave of studies from the late 1960s to the mid-1970s questioned whether early intervention could have any lasting positive effects. As initial skepticism was overcome, a second wave of studies in the 1980s investigated whether different program models could have different effects on a young child's development. The current focus is on identifying the essentials of effective, small-scale programs and their expansion into national programs.

Socioeconomic Rationale

Efficiency. Early childhood education can increase the return on primary and secondary school investments.² It can also contribute to human capital formation, raising participants' productivity and income levels and reducing public expenditures (by lowering welfare, health, and education costs). In the U.S. Perry Preschool Program, initiated in 1962, a US\$1 investment has yielded US\$7.16 in savings because of lower educational and welfare expenditures and higher productivity among participants (Schweinhart, 1993). Similarly, studies carried out in Asia, the Middle East, and particularly Latin America suggest that early childhood education increases school readiness skills, promotes timely school enrollment, lowers repetition and dropout rates, and improves overall academic skills. For example, evaluation of Brazil's Programa de Alimentação de Pre-escolar (PROAPE) showed that by reducing the extra primary schooling cost associated with repetition, a program of integrated attention to preschool children more than paid for itself. Myers's (1992a) review of 19 longitudinal evaluations examining the effect of early interventions in Latin America reveals that children who participated in early childhood programs experience lower repetition rates in primary education.³ The beneficial impact of early education is particularly pronounced among the traditionally disadvantaged groups (girls, for example, and children with rural, indigenous, and lower-level socioeconomic backgrounds).

Early child development programs can facilitate increased primary school attendance where older siblings have been forced to drop out of school to act as supplementary caregivers for younger children. In a study of school attendance for children age 7 to 14 in Brazil in 1980, Psacharopoulos and Arriagada (1989) found a highly significant negative effect of the number of younger siblings age 0 to 6. Bittencourt and DeCicco (1979) found that girls in a Salvador favela missed more school than boys because they were more often needed at home to help with chores.

² Research accumulated during the 1970s and 1980s showed that attainment of even a few years of schooling is associated with important changes of economic value in individual skills (see, for example Selowsky, 1981). By increasing early abilities, preschool programs increase earnings out of a given level of schooling and the net benefits from additional schooling induced by a higher rate of return to schooling. Investment in education, in particular primary education (associated with early stimulation and sensorimotor readiness), yields a higher rate of return on the money spent than does secondary or higher education (Psacharopoulos, 1985).

³ Of the 19 studies, 10 contain comparative information about enrollment, 14 about school progress (promotion, repetition, dropout), and 14 about school performance.

Early child programs can also serve as vehicles for extending primary health care. Evidence suggests that health- and nutrition-related programs are positively associated with physical growth, basic cognitive abilities, school readiness, and positive classroom behavior. Early child development programs that support families' health and nutrition needs by teaching them how to provide consistent care are helping children avoid sickness and malnutrition as well as develop the readiness to participate in school and the community. For example, a ten-year study in Mexico has demonstrated the negative effect of severe malnutrition on school readiness and of lack of home stimulation on language development (Chavez and Martinez, 1981). Furthermore, Glewwe and Jacoby (1993), in their analysis of the Ghana Living Standards Survey found evidence that delayed primary school enrollment is a consequence of nutritional deficiencies in early childhood. The authors argue that early childhood nutrition interventions can lead to substantial increases in lifetime wealth. Because a child's physical growth can be influenced not only by food intake but also by how well the child is developing socially and psychologically, early child programs that emphasize developmental aspects along with health and nutrition interventions can benefit a child's physical growth and basic cognitive abilities (Zeitlin, Ghassemi and Mansour, 1990).

Early child development programs can also result in cost savings on health expenditures. On average, an estimated 70 to 85 percent of the developing world's total health spending, public and private, goes for curative care. Between 10 and 29 percent is spent on preventive care and the remaining on community services. Within the curative sector, hospitals often account for more than 80 percent of the cost. Yet it is well known that preventive and community services are far more effective in reducing morbidity and mortality. Through the education of parents and early care of children, health care costs can be cut by preventive measures that reduce disease and accidents, thereby avoiding more expensive treatments.

Early child development can also support health and nutrition initiatives. For example, in the Colombia Community Child Care and Nutrition project and the Bolivia Integrated Child Development projects, children participating are required to complete their immunization within six months of entry to project day care centers. The program also can facilitate growth monitoring and provision of food supplementation and micronutrients. When linked with existing governmental public health programs such as mass immunization, early child development services provide an effective way to augment these programs.

Social equity. There is ample evidence that investing in human capital, especially in early development, also attacks some of the most entrenched causes of poverty. A large part of cognitive achievement differentials between lower socioeconomic and higher-income groups can be attributed to the malnutrition, lack of sanitation, and low levels of psychological stimulation common among poor children. All of these factors can be positively affected by education. Early child development interventions can help reduce societal inequalities rooted in poverty by helping to provide young children from disadvantaged backgrounds with a more equitable start in life and a foundation for further schooling. This is especially important for those living in rural and urban marginal areas, where education and health and sanitation services are either remote or do not exist.

But what is important to stress here is that the advantages of early childhood interventions are especially apparent for girls. Discrimination in education begins early in some cultures — female primary enrollment rates, for example, are less than 50 percent of those of boys in many African countries. Strategies to improve girls' participation include attention to their readiness for primary school. Early childhood programs can be an important aid in helping to overcome discriminatory barriers and gender inequalities that already exist at the time of first entry into school.

The benefits of early childhood programs for girls are of particular importance because women's schooling is often a better predictor of health and reproductive outcomes than other household-level variables such as family income and husband's occupation. The expansion of female school enrollment seems to offer an attractive policy solution to the reduced pace of improvement in life expectancy, child health, and fertility control in developing countries. Studies from diverse cultures show that girls who

participate in early childhood programs are better prepared for school and more likely to attend and continue in school. Furthermore, because these girls are often successful at school, parents often change their expectations, allowing them to continue their education. And since it is well documented that educated women take better care of their children, early interventions targeted at girls can strengthen the possibilities that they will stay in school longer, which can later result in reduced maternal fertility and reduced infant and child mortality.

Intersecting Needs of Women and Children

Increasing numbers of households headed by women and of working women has created a major need for safe child care. There is substantial female participation in the labor force throughout the developing world in the formal sector. Concurrently, child care needs have increased dramatically. Studies of women's labor force participation and types of jobs taken usually show an inverse relationship between the number of young children at home and the probability that the mother is employed (Landers and Leonard, 1992). There is a vicious circle, particularly in the cities, in which low-paying jobs prevent mothers from purchasing adequate child care, and the absence of adequate child care prevents mothers from seeking more stable, higher-paying employment. This problem is particularly acute in resource-poor households where the effect on families of not working is worst. Provision of subsidized care that meets women's needs could help to break this circle, raising earnings and productivity and benefiting both women and children. Providing day care is important. With care available, women are mobile between the home and the labor market. It is also a prerequisite for women to have an opportunity for additional learning and education. Thus, the availability of child care has the potential to increase the productivity and earning potential of both self-employed women and those engaged in agricultural activities.

Yet many child-centered programs do very little to respond to the needs of working women. These programs often provide services for too few hours a day. For example, the Integrated Child Development Service (ICDS) of India focuses mainly on pregnant women and does not address child care needs. Revisions are being made to extend hours and to cover younger children. Quite different from the ICDS, India's Mobile Creches is a program tailored to meet the needs of working women. The service is located at construction sites to provide day care for female construction workers with small children. In Senegal's Animation Feminine Project, female rural agricultural workers take turns providing care to groups of children. In Nepal a similar program, the Project Entry Point, has been working successfully since 1989.

Child care and development services not only serve as means to improve women's productivity, but can also serve as a direct means to generate income. Adoption of home-based day care models provides direct employment opportunities for substantial numbers of women. Credit schemes have been developed to provide women with access to finances needed in establishing child care as an income-earning activity. Innovative schemes have been designed in Nepal, for example, to extend credit on the basis of group guarantees rather than individual guarantees. The Colombia and Bolivia home day care programs provide credit to women, allowing them to make structural improvements in their homes so they can be used as home day care locations. The credit is made at a favorable rate, and family or community members can be paid to make the improvements. Moreover, in Bolivia the project secures preferential fees to maternal health care in collaborating public and private health centers.

Synergistic Effects of Health, Nutrition, and Stimulation on Early Child Development

Child development cannot be broken up into separate domains. A child's learning capacity depends on an interactive process of health, nutrition, and child-caregiver interaction. The latest research on the relationship between health, nutrition, and stimulation argues convincingly that an adequate food supply is not enough to ensure a child's survival. Growth and development are fostered when all these variables are present within a caring environment. Moreover, children have different needs as they develop through the distinct stages from infancy to toddler to preschool age. The younger the child, the more difficult it is to differentiate the physiological and psychological factors within the environment that

govern health. As the child becomes a toddler, environmental cleanliness, encouragement to eat properly and vigilance for the child's safety are of utmost importance. For example, growth may falter because of inadequate nutrition, but slow growth is also linked to the way young children are fed. Feeding is more than giving children food; it includes the interactive process that accompanies the intake of food. In addition, a caregiver's interaction with a child is critical to a child's later development. Early childhood development programs can be the entry point of giving instruction to caregivers regarding the health, nutrition, and developmental needs of children.

In summary, the rationale for investment in early childhood development programs is undeniable, on the grounds of equity, efficiency, and effectiveness. While there is no single social program that can address all the problems faced by families living in poverty, support for early development programs yields tangible benefits not only for children and parents but also for the community. Individual deficits caused by early malnutrition and inadequate care can ripple throughout society, affecting labor productivity and economic development. Early interventions can help ready children for a productive role in society. Interventions in the early years of childhood offer a rare opportunity to address a number of intersecting concerns. Properly designed and implemented, such programs can have multidimensional benefits, including: (i) enhancing school readiness; (ii) increasing the efficiency of primary school investments and human capital formation; (iii) fostering beneficial social behavior, thus lessening social welfare costs; (iv) stimulating community development; and (v) helping mothers become income earners.

III. What Can be Done?

Financing early child development programs is the joint responsibility of families, communities, and the government. While no single social program can address all the problems confronted by families living in poverty, evidence from both the developed and developing world indicates that early child development programs can be an extremely useful intervention in mitigating many of the complex and persistent problems of poverty. Therefore, given limited resources, investment in early child development services with public funds should target children living in poverty. These children are at high risk of environmental deprivation, malnutrition, and lack of essential basic health care.

We will now turn our attention to determining which early child development programs provide the most reliable outcomes, given the resource constraints of a country. Governments must consider which populations have priority for services, how services should be delivered and resources used, and which needs of children and families should be addressed. Above all, sensitivity to local culture and customs is necessary to ensure the implementation and sustainability of any early childhood program. Political considerations can make it difficult to justify devoting scarce resources to the support of very young children while older children are not adequately provided for. To counter such arguments, it is important to note that directing resources to very young children will result in better-prepared school-age children, thus enhancing school effectiveness and the efficiency of primary school investments.

World Bank Experience with Early Child Development

The position within the Bank with respect to early child care and development is changing. At the end of the 1970s, studies commissioned by the Bank recommended the implementation of policies designed to assist poor children by working directly with their families (Grawe, 1979) and by stressing educational support to the family unit (Smilansky, 1979). Because of these studies very few Bank projects have addressed this issue.

However, evidence accumulated since 1985 no longer supports these assertions. Longer-term effects of quality preschool programs have been identified. Furthermore, the measure of program effects has expanded from an almost exclusive focus on IQ to other indicators, including educational performance and social behavior of children. Moreover, many less expensive non-formal alternatives to the formal traditional preschools criticized by Smilansky have been found to be very effective at reaching targeted populations. Many of these nonformal programs are set in centers, either outside the home or within

homes, mainly in urban and peri-urban areas, and they involve the training and support of families (Myers, 1992b).

Since 1985 the number of free-standing projects has increased markedly. These activities are located within Social Sector, Nutrition, Health and Education Loans. Loans made for early child development were packaged through several program options: (i) parental education focusing on the well-being of children age 0 to 3 as in the 1993 Mexico Initial Education Project and 1990 India Integrated Child Development Project; (ii) home day care or center-based day care providing direct services to children age 1 to 6, as in the 1993 Bolivia Integrated Child Development Project and the 1990 Colombia Community Child Care and Nutrition Project; (iii) nonformal or formal preschool as in the 1992 Chile Primary Education Improvement Project, the 1992 Ecuador First Social Development Project, the 1990 Venezuela Social Development Project, and the 1991 El Salvador Social Rehabilitation Project; and (iv) social communications, as in the 1993 Nigeria Development Communications Project.

By 1993 a number of Bank country education strategy papers recognized the importance of early child interventions and included early child development programs as inputs into effective primary schooling. These papers include: "Education and Sub-Saharan Africa" (World Bank, 1988); "Child Care in Metropolitan Brazil" (World Bank, 1990); "Mexico's Initial Education Strategy" (World Bank, 1992); "Indonesia's Education Strategy" in the Country Economic Memorandum (World Bank, 1993); and "ESP's Education Overview" paper (forthcoming).

The Essential Package for the Well Child

Research indicates that the most effective early child development programs seem to be those that include proper nutrition, health care, and psychosocial stimulation and interaction between the child and the caregiver. Psychosocial stimulation would include socio-emotional development, self-concept, and self-esteem; motor skills development; and language skills. These plus health, nutrition, and child-caretaker interaction, have a synergistic effect on a child's growth and development from birth onward.

The inputs required to meet a child's basic needs at different ages are summarized in Table 1. It is possible to establish early child development program activities appropriate to stages or levels of a child's development because human development follows a general set pattern, notwithstanding the fact that the process will vary from individual to individual and culture to culture. These stages correspond to certain age groupings: the prenatal period; infancy (birth to 1 year, which encompasses weaning, learning to walk, and early language development); the toddler and posttoddler period (1 to 3 years, during which a child's coordination, language, ability to think, and social skills advance rapidly); the preschool period (3 to 6 years, when coordination is relatively well developed and when cognitive development and development of preliteracy skills occur rapidly, along with greater attention to relationships with peers); and the period of accommodation to school and the world at large (6 to 8 years).

The content of a developmental curriculum would vary based on the developmental differences of the three age groups:

- <u>Infants (birth to 1 year)</u>. This would include: (i) interaction with caregivers (talking to the child, active feeding, touching, showing affection); and (ii) provision of objects to play with (look at, hear, smell, and taste).
- <u>Toddlers (1 to 3 years)</u>. This would include: (i) the opportunity to actively explore a safe environment, play with objects and games;⁴ (ii) interaction with other children and with adults

⁴ These objects do not have to be toys or other special purchased equipment. Suitable objects can be things found in the local environment such as pots, pans, cooking utensils, and containers that children can use in a variety of ways to learn about relationship and problem solving.

to socialize (learning cooperation, helping and sharing). Adults need to read and engage in conversation with the child; and (iii) developing gross motor skills in a place where children can safely play actively (running, jumping, climbing, playing with balls).

• Preschoolers (3 to 6 years). This would include: (i) engaging in simple problem solving tasks; (ii) developing self-care skills (dressing, feeding) and social skills (interacting with other children and with adults); and (iii) telling stories, associating the written with the spoken language, and drawing and making their own pictures.

Table 1: Basic Needs and Required Inputs

Age	Basic needs	Inputs		
Birth - 1 year	 Protection from physical danger Adequate nutrition Adequate health care Attachment with an adult Motor and sensory stimulation Appropriate language stimulation 	 Safe shelter Food and micronutrients Basic health care (immunization, ORT, hygiene) Age-appropriate developmental curriculum 		
1-3 years	In addition to the above: Support in acquiring motor, language, and thinking skills Develop independence Learn self control Play	 Safe shelter Food and micronutrients Basic health care (in addition to the above, deworming) Age-appropriate developmental curriculum 		
3-6 years	In addition to the above: Opportunity to develop fine motor skills Expand language skills through talking, reading, singing Learn cooperation, helping, and sharing Experiment with prewriting and prereading skills	 Safe shelter Food and micronutrients Basic health care (in addition to above-mentioned deworming) Age-appropriate developmental curriculum* 		

Source: Based on Donohue-Colletta (1992).

Note: * The content of developmental curriculum would vary based on the developmental differences of the three age groups as discussed in the earlier section.

Approaches in Program Design

Several approaches can be used to deliver early child development interventions. In this paper the nonformal approaches are emphasized because of their affordability and greater flexibility. These approaches can have different immediate objectives and can target different audiences and participants while still being designed to aid early child development. The majority of early child development programs and projects outside and within the Bank all follow one or more of the following approaches (Table 2):

• Delivering services to children. This approach, which is usually center-based but can also be home-based, focuses on attending to the immediate needs of children. Examples include Bolivia's Integrated Child Development Project, Colombia's Child Care and Nutrition Project, and India's Integrated Child Development Project.

- Training caregivers and educating parents. This approach informs parents and caregivers of methods that aim to improve the quality of care and interaction the child receives, thereby enriching the child's environment and development. Examples include Mexico's Initial Education Project, and Chile's Parent and Children Program.
- Promoting community development and assisting women in development objectives. This strategy stresses community initiative, organization, and participation to create a basis for political and social change to improve conditions that adversely affect child development. Colombia's PROMESA project is one example. Usually, extensive involvement and assistance from nongovernmental organizations helps sustain such initiatives by engaging the community in active participation and ensuring sensitivity to local cultural needs. In addition, helping mothers provide safe and affordable care for their children can offer women the opportunity to pursue work outside the home. Also, mothers can gain income-generating opportunities by establishing child care facilities for the community in their homes. The Colombia Community Child Care and Nutrition Project and the Bolivia Integrated Child Development Project are examples.
- Strengthening institutional resources and capacities. This approach strengthens the institutions responsible for implementing early childhood programs. Kenya's Early Education Centers exemplify this approach. In addition, Bank projects in Bolivia, Mexico, and Nigeria have a secondary objective of strengthening institutional capacity for the implementation of early child development interventions.
- Strengthening public awareness and demand. This approach focuses on the production and dissemination of information necessary to create awareness of, and demand for, early childhood services from parents, community leaders, and policymakers. Nigeria's Development Communications Project is one example.

Two additional important factors influence and facilitate the successful implementation of early child development services. These are: (i) the development of national child care and family policies; and (ii) a legal framework supportive of increasing awareness of rights and legal resources for women and children. Family policies supportive of women and children can include providing parents with increased time and resources to meet their childrearing and child care responsibilities. Supportive legal frameworks include better monitoring and enforcement of labor legislation and regulations to protect both working children and working women with infants and young children. Establishing mechanisms to implement ILO conventions for working mothers with young children would, for example, go far toward helping to develop supportive family policies and strengthen legal protection for women and children.⁵

⁵ Protection of maternity and reproduction are covered in the Maternity Protection Convention no. 103 and no. 95. The convention allows time for rest during the last week of pregnancy, care for the newborn, and a continuous source of income and employment security after the delivery. Convention no. 156 covers equal opportunities and equal treatment for men and women workers with family responsibilities, including changes in the arrangement of working time, parental leave, leave to care for a sick child, and childcare services.

Table 2: Early Childhood Care and Development - Program Strategies*

Program Approach	Participants and Beneficiaries	Objectives	Models and Examples
1. Deliver a service	• The child: 0-2 years and 3-6 years	 Survival Comprehensive development Socialization Improvement of child care 	 Home day care (Colombia, Bolivia) Integrated child development centers (India, Brazil) "Add-on" centers (Ghana, Senegal) Preschools (formal or nonformal) (Peru)
2. Educate caregivers	Parents, familySibling(s)Public	 Create awareness Change attitudes Improve or change practices 	 Home visiting (Indonesia, Peru) Parental education (China) Child-to-child programs (Jamaica, Chile)
3. Promote community development	CommunityLeadersPromoters	Create awarenessMobilize for actionChange conditions	 Technical mobilization (Malaysia) Social mobilization (Thailand)
4. Strengthen national resources and capabilities	 Program personnel professionals, paraprofessionals 	 Create awareness Improve skills Increase material 	 Training (Kenya) Experimental demonstration projects Strengthening infrastructure (Nigeria)
5. Strengthen public awareness and demand	PolicymakersPublicProfessionals	 Create awareness Build political will Increase demand Change attitudes 	 Social marketing (Jamaica) Ethos creation Knowledge dissemination (Nigeria)
6. Develop supportive legal frameworks	 Working women with young children Working children 	 Increase awareness of rights and legal resources Increase use of ILO legislation Increase monitoring and compliance of international conventions 	 Workplace (Brazil) Day care facilities Protective environmental standards (India) Maternal leave and benefits (Colombia) Support breastfeeding for working mothers
7. Develop national child care and family policies	Families with young children	Encourage family-sensitive employment practices	 Innovative joint public/private arrangements (India, Colombia) Tax incentives for formal, quasiformal private, enterprises

Source: Consultative Group on Early Childhood Care & Development (1992).

Note: Annex 3 contains description of some of these projects.

IV. Policy and Program Issues

It is difficult to balance the desire for integration with the need for simplicity in program design. Yet there is a need to broaden the interface between programs of early childhood development and primary schooling, adult education, women issues, health care and nutrition, and community development. Integration should not be forced on the different sectors. The goal is to respond to the needs of the child in an integrated way, but not necessarily by achieving the integration of delivery systems. Thus the emphasis needs to be on the convergence of programs on the child and he family. One way this integration can be reached is through a convergence of services on the child, achieved over time by adding components to existing sectoral programs of nutrition, health care, or education.

This section presents some issues and lessons learned from international experience on pilot and larger scale projects,⁶ and from country-level policies and programs on child care and development focusing on nonformal approaches.⁷ The review serves as a starting point to assess issues in designing early child development programs and how to address them. The review points to the following as key elements in any early child development strategy:

- Policy formation
- Targeting at-risk populations
- Family and community participation
- Cost and financing
- Organization and management
- Quality interventions
- Training and supervision
- Monitoring and evaluation

Policy Formulation

For a program on early child development to be successful and sustainable, it needs to be embedded in an overall policy (or set of programs) that focuses on human capital formation in general and the development of the child in particular. To date, only a few developing countries have a policy on early child education, let alone a policy on child care and development. For example, in Peru the education reform of 1973 made the Ministry of Education responsible for the education of children from 0 to 5 years. The ministry responded by establishing preschools, experimenting with programs on parent education, and supporting occasional local initiatives involving center-based child care using community volunteers. In India, since 1975 a national policy for children has led to the establishment of the National Children's Board whose main functions are to provide a focus for education and welfare and to improve coordination of all essential services. As noted in the previous section, the implementation of the ILO convention on working mothers would help create an enabling environment for the formation of policies for children.

The exact scope and content of a policy would vary, depending on needs and resources of a country. Some basic elements of a policy would include:

⁶ The review is based on reports prepared by multilateral organization (UNICEF, UNESCO) and NGOs (Bernard Van Leer Foundation, Aga Khan Foundation, Save the Children).

⁷ Two recent publications provided multi-country comparisons. One, edited by Patricia Olmstead and David Weikart (1989), presents fourteen national profiles. These profiles are the first step in phase one of an ambitious project aimed at assessing the quality of children's experiences in different national settings and the effects of those experiences on child development. A second, edited by Moncrieff (1993), provides a comprehensive overview of policies and programs in twenty nine countries in Africa, Asia, Latin America, Oceania, Europe, and North America.

- emphasis on children in economically disadvantaged populations;
- provision of integrated services for the development of the whole child, including health care, nutrition, and psychosocial stimulation; and
- the role of early childhood services as vehicles for social development.

It is easy to underestimate the implications of setting a policy focused on the whole child. Such a commitment might require reassessing national priorities, which countries find difficult to do. However, mere adaptation of a policy by itself without translating it into practical time-bound programs will not achieve much. It is essential is to find out whether there is enough political will to address children's growth and development.

Targeting At-risk Subpopulations

Early child development programs should aim at reaching the largest possible number of children who are at risk. Children living in poverty and in communities with the highest prevalence of malnutrition are at risk for delayed or debilitated mental, social, and emotional development. While children 3 to 6 years old should be targeted for school readiness, the effects of proper nutrition, health care, and psychosocial stimulation are most critical at earlier ages, even under 2 years of age. Therefore interventions for children younger than 2 years of age are essential.

The targeting mechanisms that Bolivia's Integrated Child Development Project uses include: (i) a selection of urban and periurban neighborhoods for program sites based on poverty mapping; and (ii) child-specific selection criteria within these neighborhoods (children who are malnourished, with single parents or parents employed but without child care, and from high-parity families). This targeting mechanism depends on the availability of census or socioeconomic development data such as availability of clean water, sanitation, and electricity. Nutritional surveillance can also be used as a mechanism to identify communities at risk of malnutrition. Targeting all children in these communities might be more efficient than targeting individuals or families at risk.

Mexico's Initial Education Project targeted disadvantaged populations in ten of the poorest states according to a poverty index based on the following proxies: (i) population of children age 0 to 3 years; (ii) indigenous population; (iii) primary education completion; (iv) preschool coverage; and (v) marginality indicators computed by the National Population Council. All proxies were homogenized by converting them to a scale of 0 to 100 (the higher the index, the greater the level of marginality). A composite index was then computed from a weighted average of the five indicators.

For targeting to be successful, it is extremely important to state the program aims clearly from the outset. They must tell participants and beneficiaries how and what a program will (and will not) contribute to the community. Selecting appropriate indicators to evaluate the implementation, sustainability, and impact of programs is essential.

Family and Community Participation

Experiences suggest that family and community participation increase the chances of program impact and sustainability. Moreover, mobilization of local support and effective use of both nonprofessional and professional personnel are crucial to sustainable programs. For successful mobilization it is important that the community understand the need for the program, whether it be food supplementation or child stimulation. Most parents even in the poorest communities are willing to provide whatever resources they can spare to support programs for their children, especially when those programs meet a need they recognize and value. The pilot project of community homes in Colombia is a good example of effective community participation. However, the program lost some of the initial community support as government expanded the successful pilot program nationwide, partly because parents and communities started to view the program as an initiative introduced from outside. This experience underscores the need for community involvement and the development of a strong sense of ownership.

Even though community participation is essential, there are limitations. It is difficult to sustain a community's interest and enthusiasm over time without proper incentives. Moreover, local monitoring units need to be accountable. Setting up mothers' cooperatives, in which mothers take turns caring for children, can be sustainable depending on the opportunity costs of the women's time. For example, this procedure was feasible in Nepal's Project Entry Point where there was no alternative option for safe child care. However, the strategy was not successful in Bangkok, where turnover of the home centers was high. There, mothers left as soon as they were offered a better-paying job.

Cost and Financing

How much do early child care and development programs cost? While some studies from developed countries indicate the cost per child of services, such information is mostly lacking for developing countries. Furthermore, there is a lack of data on the cost in relation to the benefits to the child, mother, and community and on the cost of different child service inputs in generating a desired outcome. There are various ways of financing early child development services, but there is a lack of a systematic review on this topic. Moreover, to date, there is also a lack of review on ways to sustain programs.

The cost elements of early child development services include buildings, equipment (ranging from audiovisual and music equipment to simple objects to play with), weighing scales, supplies (food), and staff training and salaries. Using homes with minimal rehabilitation has resulted in considerable cost reduction. Any home that can provide a safe space and has minimum sanitation facilities and a kitchen is sufficient. For example, in the Colombia and Bolivia projects, small credits are provided to participating home care mothers to renovate their houses. Supplies (food in particular) are the most costly of all the inputs in the program, accounting for up to 40 percent of total program costs. Food is often provided through the government (for example the Ministry of Agriculture) or through international donors such as the World Food Program. Ensuring a sustainable supply and timely delivery of food supplements to the programs can be logistically difficult and requires close supervision. It is estimated that the cost of neighborhood day care, home-based and with mothers' participation, is one-fifth of the cost per child cost of the more formal integrated child care centers in operation in the past.

Child care can easily absorb one-fourth to one-half of women's salaries in industrialized countries. Who pays? Families together with governments have to identify mechanisms to finance early childhood programs. In developing countries it might have to be heavily subsidized to be at all accessible to families who may be spending almost their entire income on food, housing, and transportation to work. However, shifts in the financing of care toward more use of parents' fees are occurring in a number of countries. For example, participating parents are expected to contribute on a sliding scale according to family income in Colombia's Community Child Care and Nutrition Project. In Bolivia's Integrated Child Development Project all parents pay the same fee, B10 (US\$2.50 in 1993) a month for the first child, but the fees per child are decreased as the number of children enrolled from the same household increases. Some countries have sought innovative solutions. For example, Colombia raises funds to subsidize child care by levying a 3 percent payroll tax on all employers with more than a certain number of employees. The cost is also kept relatively low by using the neighborhood home day care model. Ecuador finances early child programs by earmarking a certain percentage of its export and import taxes. In Thailand loan funds are established in selected rural villages, using funds from the Christian Children's Fund. When loans are paid back, the resources go into a capital fund to be used on a continuing basis for the support of an early childhood development program in the community. In Santa Catarina, Brazil, the governor requested all departments to indicate in their budgets what they had included to benefit children. From this he established an intersectoral budget directed toward children (Myers, 1992b).

Further research needs to be carried out to assess the extra costs associated with different kinds of services for children. In addition, there is a need to compare the cost and benefits of integrated early child development services vis-à-vis other public programs. The extent to which the public pays for the early child services is indicative of the weight the state gives to the importance of the services. The share of cost paid privately is, in part, an indication of the importance accorded by families to the early child

services. In 1981 Selowsky estimated that between 1.4 and 2.2 percent of GNP should be devoted to early child development programs in countries with annual per capita incomes of less than US\$400. For higher per capita GNPs the range is between 0.6 and 1.8 percent.⁸ It should be noted, however, that a specific percentage of GNP allocated to early child development may not be appropriate in all countries. For example, in Africa such allocation would not be affordable.

Operating the Program

Early child development programs have been devised by and are operated under the mandate of a variety of national ministries, including education, welfare, health, labor, social affairs, women's affairs, and agriculture. The rationale for each ministry's involvement differs, and the types of programs each promotes also differ. Government involvement occurs at national, regional, county, or local levels, or at some or all of them.

There are several country examples how to operate these programs. Bolivia, Colombia, and Chile have established a modified centralized administrative system based on a specialized agency with local offices. In India the National Children's Board is the central agency. Its functions are to provide a focus for children's education and welfare and to ensure continuous planning, review, and coordination of all essential services for children. Projects such as the Integrated Child Development Services Project are directed centrally through the Human Resources Ministry and administered by state governments. These arrangements appear to be effective.

Numerous nongovernmental organizations (NGOs) have also actively supported and implemented early child development services in developing countries. While the potential for these groups to expand their services to young children varies, nongovernmental involvement nevertheless has often been a key element in encouraging community participation. The Bank could help to foster collaborations on ECD programs between government and NGOs. Some possibilities include transferring funds directly to NGOs or contracting with them for specific program tasks or for work in particular areas. Additional NGO involvement is needed. For example, they have been useful in assisting regional and local governments develop the managerial capability necessary to undergo the transition toward decentralized administration and management. NGOs can also assist in supervising projects.

Delivery of Quality Interventions

In developing countries, shortages of human and financial resources limit the extent to which child care programs can be used to implement a developmental or educational curriculum. For example, programs in India are oriented mainly toward safekeeping and survival, while early education is an explicit and a proactive policy of programs in Kenya and Zimbabwe. Experts on early child'development such as Osborn and Milbank (1987) suggest that "provided the child receives proper care, has interesting activities and other children to play with, the actual type of preschool experiences matters very little." Yet, child care advocates favor shifting to the more educational approach. Supporters of the educational approach suggest that failure to adopt a specific theoretical viewpoint or curriculum model has been identified as a cause of poor quality education. A successful program in any setting needs to adopt a specific curriculum and theoretical viewpoint to govern the delivery of the service. Once such a decision is made, training of staff can be focused on exact methods, the program can be evaluated based on existing standards, the actual interactions and activities can be judged, and wide application can be undertaken. If programs are general or only a collection of good ideas, quality cannot be maintained and outcomes are not consistent. Adopting a specific valid delivery model is the essential step to an effective program. As of yet, evidence from the developing countries does not allow us to say much about the effect of different approaches. Evidence from the United States and England suggests that the specific

⁸ Selowsky's figures are based on an assumption of a target population of 25 percent of the total population.

curriculum used is not the most important variable as long as the application is consistent and of good quality.

Training and Supervision

Training and supervision are important ingredients to a successful program, no matter what the differences are among developing countries. Training is needed to reorient professionals and nonprofessionals toward an integrated approach to early child development and to provide project implementors with required skills. It is necessary to document local knowledge, attitudes, and practices regarding child care, diets, food habits and beliefs, and children's games. This information will provide resource material on which training manuals can be based. There is also an ongoing debate over relative merits of approaches that run from heavy emphasis in Europe on college-based, pre-service preparation for caregivers to the almost exclusive in-service training found in developing countries. Training of family day care mothers is carried out largely with in-service methodologies. For example, in Bolivia's Integrated Child Development Project, 40 hours of preservice training and 2 weeks of applied experience in day care are used as screening tools to select educators or caregivers. This type of solution is probably most practical in developing countries, where it may be counterproductive to insist on standards that undercut worthwhile initiatives that do not meet prescribed educational prerequisites. Such standards may exclude motivated and qualified paraprofessionals who do not have the formal training.

In addition to initial training, continuing training in the form of supervision is an important determinant of the quality of programs. Bolivia's Integrated Child Development Project has a good detailed supervision plan in its project design. During the four-month start-up phase in each community, a high supervision ratio was built in, with one regional technical staff person (together with an external supervisor from a local NGO or university) to ten home day care centers to carry out regular biweekly training and supervision visits during each center's initial two months. This is reduced to one visit a week for the subsequent two months, and twice a month in the six-month follow-up phase. In the consolidation phase the regional technical staff visits each center at least once every two months and the external supervisor (responsible for a maximum of twenty centers) would carry out, at a minimum, one monthly visit to each center.

Monitoring and Evaluation

Monitoring and evaluation should be critical parts of each project. Typically, program evaluation — if attempted at all — focuses on a description of program development and includes data about the number of participants and the extent of the service and a description of the content of service. Sample design and quality control of project evaluation are the main culprits. Rarely does an evaluation include some type of experimental design or comparison or control groups. The usual pattern is to set up a sample that is inadequate for the purposes of evaluation. Study findings are of little help'for judging the effectiveness of the program or advising policymakers. Poorly designed evaluation schemes do little to substantiate a project's merit. For example, the Colombia project based the sampling design on a comparison of children in the program for less than three months with those in for more than over one year. Because of probable systematic differences in the two groups, familial self-selection for continuation or withdrawal, and the fact that no comparison was made of children that did not participate in the programs, it is impossible to say anything about the effectiveness, let alone the efficiency of the program. In contrast, Bolivia's Integrated Child Development Project establishes at project outset a built-in evaluation scheme.

⁹ In the Bolivia project, household surveys of nonparticipants and participants will be carried out as part of ongoing project activity. An impact evaluation system has been designed to document: (i) how well it targets children, women, and families at high risk; (ii) how participation affects the development and well-being of children, women, and communities; and (iii) the extent to which participation in this project improves the subsequent progress and performance of children in primary school.

Since quality of supervision is the key to success, evaluation instruments need to be designed to measure the qualitative aspects of the intervention. In the Bolivia project, participants and nonparticipants are monitored through semiannual household surveys, including monitoring of health, nutritional status, and child development. Outcome variables for children will be based on anthropometrics, immunization status, psychosocial development (using a development scale adapted for Bolivia), and schooling characteristics, including age at entry, repetition, dropout, performance, and behavior. For participating mothers the outcome variables will be based on assessment of personal health, labor force participation, educational level, childrearing knowledge, and self-esteem. Finally, since the quality of supervision in intervention programs is a key to success and needs standardization, an evaluation instrument is to be designed to capture the qualitative aspects of supervision.

Taking the above considerations into account, and based on the (sometimes limited) available evidence, the following guidelines are judged vital for the implementation of a quality early child development program.

- Design a program that responds to the complete needs of a child's physical and psychosocial development (that is health care, nutrition supplements, and education services). 10
- Target subpopulation groups at risk children living in poverty and in communities with the highest prevalence of malnutrition — to reach the largest possible number of children who are at risk.
- Promote extensive parental and community involvement and encourage communities to develop a strong sense of ownership of the programs. Moreover, communities' interest needs to be sustained over time with proper incentives.
- Employ a quality curriculum that has been validated through research and is appropriate for the age of the child and the culture of the family and society.
- Provide systematic in-service training based on the curriculum selected. In addition to initial training, continuing training through supervision is an important determinant of project quality and success.
- Develop objective evaluation criteria and use appropriate instruments to monitor and evaluate the
 effectiveness of the program. Develop feedback mechanisms to incorporate results of evaluations
 into ongoing programs. Involve parents and the community into this process, making sure that
 criteria are transparent and that the process and outcomes are widely disseminated.

V. What Can the World Bank Do?

There are at least three kinds of action that the Bank can undertake: (i) do more projects on integrated early child development in Bank lending programs; (ii) support sector work and policy dialogue to assess needs of integrated child services in relation to other public programs and enhance public awareness; and (iii) conduct research and evaluate programs. In addition, the Bank should seek to develop and strengthen its partnerships with other international and nongovernmental agencies that have accumulated experience in developing and implementing early childhood interventions. Among UN agencies, UNICEF has been a leader both in early child development operational experience and in promoting the rights of children. The Bank can collaborate with UNICEF to bring people together from various program sectors and formulate an integrated policy towards human resources development, evaluate studies on the cost and financing of early child programs, and provide technical guidance to analyze, monitor and evaluate

These services need to be embedded in an overall policy framework that focuses on human capital formation in general and the development of the child in particular.

integrated early childhood programs. The Bank should also draw on the experiences of bilaterals and NGOs, such as the Bernard van Leer Foundation, Save the Children, and the Christian Children's Fund. Within the Bank, awareness of the pivotal role of early childhood development in human capital formation needs to be increased.

Do More Projects on Integrated Early Child Development

As cost proves to be one of the most serious obstacles to the development and operation of early childhood programs in developing countries, mobilization of new resources together with efficient use of available resources is critical. This kind of project combines efficiency and equity, and cuts across traditional human resource sub-sectors. To date, the Bank has made 14 loans through the human resources sector to such programs, and several more are in various stages of preparation. More needs to be done. One way to do so is through add-on programs. International experience indicates that add-on programs can be an effective approach to introduce an early child development component to sectoral projects in nutrition supplement, education, and maternal and child health care.

Introducing early child development interventions within the health care and nutrition supplement sectors can be implemented through, for example, incorporating psychosocial development information into training and maternal and child health care components. Health education programs, especially when delivered through mass media, should stress the young child's need for cognitive stimulation and affective care. Programs that bring parents and caregivers together to provide nutritional supplementation, growth monitoring, and nutrition education can usually provide an entry point for delivering early education interventions. Home visits, intended to monitor nutrition and health status, can also provide opportunities to talk with parents about the mental and social development of their children and expose parents to age-appropriate development activities.

In the education sector, primary projects can support child-to-child components in which children at school learn to care for their younger siblings. The Jamaican Child-to-Child Program, targeted at children 9 to 12 years old, has demonstrated that parents also benefit from the information about health, nutrition, and cognitive development brought home by their children. This intervention has a multigenerational impact as it influences the targeted children, their siblings, and their parents. It also is intended to influence the behavior of these children once they themselves become parents. In addition, the content of adult education and literacy programs should incorporate information about the needs of young children.

The Bank can also strengthen its support of communications strategies to deepen public awareness of early child development. There is wide recognition throughout the Bank of the critical role of communications in such social sector programs as child survival, family planning, safe motherhood, and improved water quality and sanitation. Now more resources are needed to disseminate information about child development.

Support Sector Work and Policy Dialogue

Sector work should focus on: (i) a child's needs in terms of nutrition, health care, and schooling, using such indicators as anthropometric measures, infant and child mortality and morbidity data, immunization coverage, primary school enrollment, age of enrollment, dropout and repetition rates, completion rates, and male-female differentials; (ii) a review of existing and proposed child-oriented policies, programs, and projects to assess their synergies and complementarities and to formulate policies that foster the integrated approach to child developments; and finally (iii) the identification of gaps that can be addressed by additional or adapted policies (including changes in the legal framework, where needed) and by Bank-funded projects. In addition, the Bank should assist governments to develop national child and family policies. Along with informing the public, special attention should be directed toward informing policymakers at national and regional levels and disadvantaged communities where children are at risk. The mass media can also deliver developmental curriculum to children and their

families. Mexico's Initial Education Project and Nigeria's Development Communications Project are two examples in the Bank's lending portfolio that channel information through mass media.

Fund Research and Evaluation

The Bank's own capacity to fund this activity needs to be strengthened. Within the Bank, information from staff from different programs and sectors should be solicited in order to formulate policy and identify technical assistance to analyze, design, monitor, and evaluate integrated early childhood programs. In addition, the following topics need urgent attention:

- Assessment of the marginal social costs of different kinds of services for children. To do this, longitudinal studies are needed at various locations in developing countries. Such studies could be based on existing Bank projects. However, the evaluation would need to extend beyond the project loan cycle of five or seven years. It would also be necessary for the evaluation to set up comparison groups to control for a range of nonproject variables.
- Creation, validation, and establishment of instruments to measure children's integral development in contexts appropriate to developing countries, that is, beyond those currently available, which are mostly limited to children's health care and nutritional status. In Latin America and the Caribbean, work has already started on developing instruments to measure children's integral development. A child development scale designed by Nelson Ortiz at UNICEF in Colombia has been applied in selected settings in Colombia and has been tested and adapted to Bolivia's Integrated Child Development Project. A child school readiness scale needs to be developed to help assess the strength of early child development programs and readiness of young children to enter the formal school system.
- Evaluation of various financing schemes currently used in developed and developing countries and assess their sustainability.
- Conduct of social communications research to identify what motivates parents and communities into demanding, participating in, and paying for early child services.

VI. Conclusion

Early child development programs promote the physiological and intellectual development of young children, helping to ready them for further schooling and a productive role in society. During the past two decades, nonformal early childhood interventions have been proved cost-effective and sustainable. The beneficial impact of these programs is particularly pronounced among traditionally disadvantaged groups (girls, for example, and children with rural, indigenous, and lower socioeconomic backgrounds).

Investments in such programs can help modify the effects of developmental deprivation. Evidence from the developed and developing world indicates that some interventions can: (i) increase the efficiency of primary and secondary education; (ii) contribute to future productivity and income; and (iii) reduce costs of health and other public services. Indirect benefits from early childhood interventions can include reduction of gender inequities, increased female participation in the labor force, and increased community development efforts.

As a part of its strategy of poverty alleviation, the Bank faces the challenge to assist governments in expanding and sustaining programs of various kinds to improve the development of children. The Bank has substantial experience in the development and support of early child programs and interventions, and additional support is currently being planned. The Bank can increase its focus on such efforts. It can begin encouraging an add-on approach to existing programs while also promoting the development of integrated, multisectoral programs. Lending to support the needs of young children should be sharpened. There should also be an expansion of sector work focusing on the needs of young children. More

research and evaluation needs to be undertaken, especially in costs and financing and the development of monitoring and evaluating instruments.

International experiences indicate that early child development projects require intensive training and supervision to ensure program quality and effectiveness. Experience also suggests that family and community participation increase the chances of program impact and sustainability. Programs need to be flexible and adjusted to local conditions and distinct cultural needs. Active participation of NGOs and community groups, from the design stage through program implementation and evaluation, is a crucial way to ensure cultural relevance and appropriateness. Finally, programs should try to reach the largest possible number of children at risk while taking into account implementation capacity and ensuring program quality.

An emerging strategy in programming for early child development services thus involves a deliberate, focused, phased approach. It requires not only political commitment and resources, but also flexibility, continuous leadership, and supervision capable of fitting programs to existing environmental, organizational, and material needs within available resources. Much more can be done by the Bank to promote the interventions, especially integrated multisectoral early child development programs. The opportunity is there for the Bank to help countries use early child development programs to improve the well-being and working capacity of their populations and the likely contribution of the new generations to societal development.

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