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Learning Through Play (LTP) Project Final Mentoring Report

Submitted to The Hincks-Dellcrest Centre

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Ethiopia**

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1. Introduction

1.1. Background to the Project

The Hincks-Dellcrest Centre (HDC), the LTP project holder, with its partners initiated and designed Learning Through Play (LTP) project after assessing the needs of the communities in Ethiopia just 3 years ago. The Hincks-Dellcrest Centre (HDC) has been contributing to the exceptional work done internationally on the health of young children focusing on mental health. Using its rich experience in child development the HDC has been following up on the LTP project over the last 3 years. Taking into account its long-years' experience in early childhood care and development and its good reputation in Ethiopia the HDC selected Christian Children's Fund of Canada (CCFC) to play mentoring role for the LTP project. Accordingly, CCFC Ethiopia country office assigned one mentor who involved in the mentoring of the project.

Learning Through Play (LTP) project aims at improving the health and wellbeing of young children and their long-term social, emotional and mental development by educating parents - mothers and fathers and caregivers on the development of healthy children (birth to age 6 years old), including all aspects of child development (cognitive, linguistic, social, emotional, and physical development).

The objectives of the LTP project were: (a) to provide parents with training and orientation on the healthy growth and development of young children (birth to 6 years), focussing on the physical, intellectual, linguistic, and socio-emotional aspects of development; (b) to teach parents play activities that enhance child development; and (c) to promote attachment through active parental involvement in their child's development.

The LTP project was a three years project (June 1, 2010- May 31, 2013) that has been implemented in three areas in Ethiopia (northern, central and southern part of the country), specifically in:

- Adwa town and 4 surrounding rural kebeles (Bete-yohannes, Maidairo, Mariam-shewito and Rahya) in Tigray Region;
- Adaa District (in six sites), East Shewa Zone of Oromia Region; and
- Jimma town and 4 surrounding District towns including Yebu town in Mana District, Serbo town in Kersa District, Dedo town in Sheki District and Seka town in Seka-cheqorsa District in Oromia Region;

The three implementing partners include 1) Adwa College of Teachers Education in Adwa; 2) Jimma Teachers' College in Jimma; and 3) Ratson: Women, Youth and Children Development Program in Adaa District.

The total budget of the project is \$ 123,000 CAD (\$35,000 CAD each for the three project areas and \$ 18,000 CAD for mentoring and capacity building purposes) with financial support of the Government of Canada through Canadian International Development Agency (CIDA).

1.2.The Rationale of the Project

The project was appropriate and timely which was well designed taking the needs of children in Ethiopia into consideration. It reflected the needs in relation to early child development. Ethiopia is among the most populous countries in Africa. With a total of about 86.6 million people and an average annual population growth rate of 2.6 percent (Statistical Abstract, Central Statistical Agency, 2012) young children (0-6 years of age) are estimated to be 19 million (about 23 % of the total population of the country).

Most young children especially in rural areas and semi-urban areas are deprived of proper play and early stimulation. The psychosocial component, which is critical for proper cognitive, linguistic and overall stimulation and instrument for adapting to new environment situation, is largely ignored. Lack of adequate care and protection for children starting at earlier age contributes to high malnutrition and overall poor physical and mental development. As we look at the demographic fact of the country and existing problems related to early childhood care and development, it is apparent that LTP project was of critical important for the development of the current and the next generation of the country.

2. Description of Results and Activities

2.1. Project Results

The following qualitative results has been captured through series of focus group discussions held with parents, caregivers, children, LTP field workers (KG and primary school teachers, health extension workers) and concerned government bodies.

<i>Description/Categories</i>	<i>Before project intervention</i>	<i>After project intervention</i>
Knowledge of parents/care givers on:		
a)Early years and the brain development	Infants or young children were considered as “animal” with instinctive behavior, who cannot realize things and who don’t feel as adults. Most used to believe that young children need only food and cloth, and medication for their illness.	Parents understood that early age is the most crucial time for child development. They realized that a child feels, senses, communicates and understands starting at birth even as early as while she is in her mother’s womb and care and stimulation should start earlier. They understood that proper child care during early ages is foundation for their development through their lifespan. Parents are

	<p>There was very low awareness on the importance of early stimulation and brain development</p> <p>It was believed that brain develops as a child is learning in formal schools (primary school to universities)</p>	<p>aware of the contribution of prenatal care for healthy growth of a child</p> <p>They learnt about brain development and realized what need to be done to enhance brain development especially at earlier age (0-3 years) of a child (play, touch, carrying a child in a proper way, eye-to-eye contact, and smiling, love and proper nutrition).</p>
b) Attachment	<p>The parents' follows simply naturally given attachment focusing on providing what young children want to eat or drink. And carrying infants on their back. Giving adequate time to build relationship is often missing</p>	<p>There is awareness among the parents on the importance of establishing intimacy and close relationships for emotional health of their children and to enable their children feel secure.</p>
c) Child development (sense of self, physical, relationship, understanding and communication)	<p>Young children were not allowed run, jump, and move or speak freely. Parents fear that a child may fall down and injured if they run or jump. Infants are confined in a room or often covered and were not allowed to get adequate sun light (parents fear that 'evil eye' may attach an infant). Most parents prefer their children to be calm and be deserved (the sign of being disciplined) – not to speak freely in the sight of adults or elders.</p>	<p>Parents gained knowledge on how they need to support their children to develop sense of self (welcoming them, holding them appropriately and closely and meeting their needs)</p> <p>They understood that children should be encouraged and assisted to use their eyes, ears, mouth; move their body: head, hands, fingers, feet, toes...; walk, run, jump, etc. for physical development.</p> <p>Parents realized the importance of playing with their children to build relationship; and show things around them and guide them to explore and understand their</p>

		<p>environment; and encouraging and helping them to speak/communicate. They understood the need to communicate them verbally using word of encouragement, through facial expressions and touching to enhance their language development.</p> <p>Parents and caregivers realized how to care for their children, provide love, give due attention to infant's communication (crying) and respond promptly, and understood how to assist infants to play, walk, climb and other physical exercise.</p> <p>They understood the importance of LTP calendar and how to use the calendar and how to provide age-appropriate care and support to their children</p> <p>They realized the importance of preventive health aspect (sanitation, hygiene and immunization) and good nutrition for healthy child development.</p>
d) Play	<p>There was misconception on the meaning and purpose of play among the communities and awareness on the importance of play was extremely low. Play was considered as wasteful and the habits that may lead to laziness. Five (5) – six (6) years of age children are often given tasks (looking after small ruminants/sheep or goats, assisting their mothers in fetching water,</p>	<p>Parents understood what play mean and the importance of play for a child physical (fine and motor muscles) development, learning their environment, refreshing their thoughts, mental/cognitive development and social interaction. They understood that play as a right for children</p>

	collecting firewood, cleaning house, caring for their younger siblings....)	They learnt how to facilitate play and how to produce playing materials using locally available materials (clay, wood, crop residues, cotton, paper and cloth).
e) Guiding behavior	<p>There has been very low awareness on child right and violation of their rights (child labor, verbal harassment, physical punishment, deprived of early education...)</p> <p>There was no experience (habit) of providing systematic guide to young children or shaping their behavior</p>	Parents understood harmful traditional practices that have negative impact on the lives of children.
f) Parenting	<p>The parents use the traditional and more of authoritarian parenting styles—(abusive and harsh way of upbringing)</p> <p>Supporting emotional growth is almost lacking</p> <p>The role of fathers in caring for their young children is limited.</p>	<p>They understood the responsibilities parents and caregivers in upbringing their children properly.</p> <p>They realized that emotional support for children is equally important to other supports (nutrition, clothing, shelter...)</p> <p>Parents learnt the need to bear equal responsibilities among mothers and fathers for child care and support.</p>
g) Family Dynamic	The understanding of parents on the role and contribution of each family member is low. Credit goes to the head of a family (father). The relationship among the family members is often unfriendly. The best food is given to the husband and in most families parent (father) should have meal first. Children are given the leftover food from the meal of their parents.	There is awareness among parents on mutual understanding respect, love, support, collaboration and sharing responsibilities among family members and the contribution of each family member for healthy and peaceful family, and for being exemplary/role model for young children.
Practices		
i) Early years and the brain development	Attention was not given to early years especially on	Parents started providing proper child care starting at early ages: early stimulation (love, touch,

	early stimulation and enhancing brain development	carrying infants in a proper way, proper nutrition and follow up on monitoring their growth and development).
ii) Attachment	No adequate time was given to spend time with children and infants were not properly handled	Parents/caregivers established close relationship with their children spending more time with them and providing physical and emotional supports.
iii) Child development (sense of self, physical, relationship, understanding and communication)	<p>Parents used to discipline their children by restricting them not to speak or play freely.</p> <p>Parents often did not give the required support to their young children to explore and understand their world (environment) or communicate.</p> <p>The relationship between parents and children was limited.</p>	<p>Parents use word of encouragement, inviting facial expression, properly, holding their children.</p> <p>They give freedom to and encourage their children to speak/communicate with their parents and their peers.</p> <p>They are assisting their young children to use their eyes, ears, mouth; move their body and make physical exercise.</p> <p>Most of the parents who received training and LTP calendar are properly using the calendar and are providing proper care and support to their children in all areas of development (sense of self, physical, relationship, understanding and communication)</p>
iv) Play	<p>It was uncommon for adults (parents) to play with children.</p> <p>Children especially above 4 years of age were not encouraged to play instead they were given tasks (activities to perform)</p>	<p>Parents are producing playing materials using locally available materials</p> <p>They are encouraging children to play and assisting them to explore their environment through play.</p> <p>Most of parents started playing with their children</p>

v) Guiding behavior	Most of children were deprived of their rights due to prevalence of abuses, child labor, verbal and corporal punishment.	<p>Parents regretted of their past actions (beating their children) while dealing with their kids. They changed their attitude and behavior towards controlling their children to discipline them.</p> <p>They are sending their children to pre-school and are following up on their pre-school activities.</p>
vi) Parenting	<p>Authoritarian parenting styles were commonly practiced.</p> <p>The involvement of fathers in caring for their children was negligible.</p>	<p>Parents started singing with their children, reading for and showing them pictures and surrounding environment to them.</p> <p>Parents/caregivers became more sensitive and responsive to children's needs and provide them with required care and support as much as their resources and time permit.</p> <p>Parents are advising and guiding their children instead of practicing verbal and corporal punishment.</p> <p>Some fathers are bearing more responsibilities in caring for their young children and supporting mothers.</p>
vii) Family Dynamic	Children and wives were considered to be subordinate to husband. Decisions were made by husbands. The relationship among husband, wife and children were not friendly.	<p>Husbands involve their wives in consultations and decision making process regarding their family affairs. Ad they started hearing and considering the voice/ideas of their children.</p> <p>Most parents determined to be a role model for their young children</p>
Key Changes		
Changes in the children	Fear, shyness, feeling insecure and depression were common among children.	<u>Healthy, happy and active children with hope and bright future:</u>

	<p>Children were afraid of speaking in the sight of adults (parents)</p> <p>Some children were very slow to interact with others.</p> <p>They were afraid of telling what they did and tried to lie to cover their mistakes.</p> <p>They were not interested to learn as teaching-learning methodology was not attractive (play was missing).</p>	<p><u>Freedom</u>: Now children are free to express their feelings, their vision (what they want to be in future).</p> <p><u>Communication</u>: They improved communicating with others. They are able to communicate easily and freely with their parents and their peers</p> <p><u>Social interaction</u>: They are easily interacting and playing with other children (they improved relationship with others as they interact with their peers while playing).</p> <p><u>Emotional health</u>: Children express sense of joy and happy emotions. They are happy and free of worries.</p> <p><u>Exploring their environment through play</u>: Children are eager to know new things by asking us different questions and observing different objects and using playing materials.</p> <p><u>Self-esteem</u>: They feel good about themselves, secure and built self-confidence. They are proud of us (parents) and confident because we are showing them love and advice instead of beating them. They have confident and feel secure</p> <p><u>Good character</u>: They are being honest. They don't afraid to tell us what wrong things they did because we stopped beating them. Now, it is easy for us to advise and direct them.</p> <p><u>Improved school performance</u>: Children attending pre-schools and KG where LTP is being</p>
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		<p>practices showed better academic performance.</p> <p><u>Physical health:</u> They have better physical health status. They became physically and mentally active.</p>
Change in the parents	<p>Aggressive/authoritative behavior</p> <p>Often quarrelling with their children</p> <p>Often living in stressful situation</p>	<p><i>Equipped with appropriate parenting skill and being responsible parents:</i></p> <p>Parents are establishing healthy and strong bonding (with their children).</p> <p>They avoided harsh actions that may harm children both psychologically and physically.</p> <p>They are taking part in promoting child protection (protecting them from abuse and enhance their right to play, learn and get health services and nutrition).</p> <p>Parents who received LTP training are sharing their knowledge to their neighbors.</p> <p><u>Improved communication with children:</u> They are assisting infants to talk/communicate and patiently responding to the questions and requests of their children. They are using word of appreciation and avoiding word of discouragement while communicating with their children.</p> <p><u>Increased Attachment:</u> They are also happier than before as they strengthened their attachment with their children.</p>

Changes in family's life		<p><i>Peaceful, respectful and happy family:</i></p> <p>Better communication style and understanding and <u>cooperation</u> between husband and wife, and between children and parents.</p> <p>They are living in <u>peace</u> with their neighbors and others, and their relationship is strengthened as they are advising their neighbors on how to deal with their children.</p> <p>They are being <u>happier</u> families.</p>



Children attending pre-school

2.2. Project Achievements (Activities)

Over the last three years (June 2010- May 2013) the project achieved the following key activities by respective partners that contributed to the realization of above project results:-

Adwa College of Teachers Education:

- The project reached 8,578 (5335 females and 3243 males) direct beneficiaries: parents, KG and primary school teachers and other community members (who received training and orientation on LTP and 126, 422 indirect beneficiaries.
- A total of 41 master trainers received training and they have been, in turn, providing training to field workers and parents.
- LTP manual and calendar has been translated into local language (Tigrigna language) for reference purpose during trainings.
- The project provided training of trainers (ToT) on Learning Through Play to 31 participants (15 from community representatives and 16 from different government sector offices).
- There are 24 trainers who are actively providing training to parents, KG teachers, primary school (1-2 grades) teachers, health workers and staff of social affairs offices and education offices.
- 69 (22 males and 47 females) focal persons were trained on LTP. The focal persons are serving the project as facilitators of the trainings being provided to parents.
- 68 (46 males and 22 females) individuals from local administration office, Women, Children and Youth Office, Social Affairs Office, Education Office, Health Office, Adwa Collage of Teachers Education Department Heads & Instructors and community representatives and health workers received LTP training.
- 726 Adwa Collage of Teachers Education graduate students received training on LTP. They are expected to introduce and promote LTP in the schools they are going to teach and in the communities they live.
- 1,955 female pre-school teachers received training on LTP while they were attending courses at the college. As the pre-school teachers are signed in different parts of the region they are expected to practice and promote LTP in their respective schools and communities.
- 195 people (parents/community members, local administers, health extension workers, social workers, women affairs, directors, vice directors and teachers of Grade 1 & 2) received training on the production and utilization of playing materials by Adwa College of Teachers' Education who have rich experience in the activities related to pedagogical center development.

- Experience sharing was held for the staff of Adwa Inclusive Kindergarten (IKG). They visited one of Orphan Institution/schools. The purpose of the visit was to gain experience and share LTP that would benefit the orphans attending the school.
- Adwa LTP project won the interest of Tigray regional Education Bureau and the Bureau and Adawa College of Teachers Education agreed to include LTP as one of the courses in the training to be provided to pre-school teachers.
- The project established effective mechanism of disseminating LTP messages (information) to the parents and caregivers through KGs/pre-schools and primary schools and health extension workers.
- Songs, dramas and pictorial training materials have been produced to effectively increase awareness of the community on LTP.

Jimma Teachers' College

- A total of 46,870 children are benefiting from the project through 5890 parents/caregivers, 26 Health Extension Workers (HEWs) and 730 kindergarten and primary school teachers who received training and orientation on LTP.
- The project trained a total of 189 potential trainers (43 “zero” class /pre-school teachers, 30 KG teachers, 26 Health Extension Workers (HEWs), 5 social workers and 15 supervisors of guardians of orphan children affected by HIV/AIDs, 50 other community members) who can provide training for parents on LTP.
- 350 copies of LTP manuals have been printed and disseminated to field workers, trainers and other responsible government bodies and community members. The LTP manuals are used to deliver training to the parents & caregivers.
- 30 participants from the college departments and government sector offices have received LTP training.
- About 1,800 copies of calendars (900 copies for 0-3 year's children and 900 copies for 4-6 years children) have been translated into local language, printed and distributed to trained parents. Parents are following up on the development of their children using the calendars.
- A total of 5,890 parents/caregivers received training and orientation on LTP through organizing different training session, coffee ceremonies and other awareness raising activities using Health Extension Workers and trainers from the community and the college.
- Evaluation/assessment on the knowledge and practices of LTP among the trained parents has been undertaken by the LTP team and field workers.

Ratson: Women, Youth and Children Development Program

- The project reached about more than 8,000 parents through LTP awareness raising activities using Community Conversation (CC), organizing coffee ceremonies, community conference and dissemination of information through community mini media and involvement of girls clubs in creating awareness.
- 12 master trainers and 21 individuals selected from the community received TOT and LTP manual translated into Amharic language.
- 206 parent leaders both from rural and urban areas received training on LTP. Parent leaders are actively involved in mobilizing the community for Community Conversation and awareness creating activities.
- 310 copies of the calendars has been translated into local languages in Amharic and Ormoffa and distributed to trained individuals (parents).

Christian Children's Fund of Canada:

- Undertook regular mentoring of the project: providing guidance and on-the-spot technical support; reviewing financial and programmatic documents of each implementing partner.



A group photo with FGD participants

- Organized training on Project Planning, M & E and Early Childhood Care & Development and Mainstreaming LTP in Key Development Programs for 12 key LTP project staff and master trainers.
- Organized experience sharing tour among the staff and master trainers of LTP project
- Organized national LTP conference for 36 participants from concerned government ministries (Ministry of Education, Ministry of Health, Tigray Education Bureau, and Ministry of Women, Children and Youth Affairs) and participants from CIDA and child-focused international organizations (Plan International, ChildFund and Right To Play) and experienced academicians (Addis Ababa University) that helped them to share the achievements or successes, results, challenges and best/good practices , and influence the country's early childhood care and education policy and to scale up and introduce or replicate LTP practices in other parts of the country



Some of LTP conference participants





Displays at LTP conference

What parents said about LTP Project

“ We have been growing up under pressure/control from our parents and communities that crippled our brain not to be creative. This made us poor and to be remain in extreme poverty. But now we should help our children to have sharp and well developed brain that can overcome poverty.” –Ratson/Adaa.

“ I realized that LTP is also important for children above 6 years old. Please give us a guideline to apply it for older children as well.”- Jimma.

“Where was such wonderful project (LTP)? Why it was not introduced earlier during our childhood?”- An adult from Adwa.

“Parents have been using my name (police) to frighten children. That was the way they thought good to discipline their children. I have been also yelling at children. Now, we stopped such practice. I realized that LTP is the foundation for peace and stability within our community. Because it teaches us about love, affections, and parenting that can shape the

mind and behavior of our children and all of us towards peace.” - Elias Weld-Tinsaye (a police in Adawa).

3. Local Context (Challenges and Opportunities)

3.1.The challenges:

The concept of “play” was misunderstood in the communities- it was considered as merely fun and wasting time in unproductive way. This has created less attention to the project by the community especially during the first year of the project (before undertaking awareness raising activities). There is misconception regarding “play” not only among illiterate ones but among literate people.

It was after undertaking training on LTP that the communities have been interested in the project. It has been emphasized that Learning Through Play is not merely about play as it encompasses all basic early child development aspects.

The other most important factor that has been challenging was deep-rooted harmful traditional beliefs and practices that affect the lives of children and mothers. It is believed, in the community, that children should be disciplined using various harmful practices including verbal and physical punishments and penalties which have severe psychological and physical damages to children. The existing food taboos that restrict pregnant women and children not to eat some food items that are white in color such as milk, potato, banana, and some vegetables has contribution to the prevalence of malnutrition among children and women. There is workload on women and the responsibility of caring for children is given to mothers. The involvement of fathers in caring for young children is very limited.

The Opportunities:

Since recently Government of Ethiopia has given attention to early childhood care and education. The National Policy Framework and Strategic Operational Plan and Guidelines for Early Childhood Care and Education (ECCE) issued in 2010 by the Government of Ethiopia can be used as a springboard and guideline for implementing ECCE program in the country. There has been an opportunity working on LTP not only with Ministry of Education but also with the Ministry of Health and Ministry of Women, Children and Youth Affairs.

4. Beneficiaries

The primary project beneficiaries are children (0-6 years of age) through their parents or caregivers. Although the number of mothers was high; fathers were also attended LTP trainings and awareness raising activities using community conversations, coffee ceremonies and community mini-media. The project increased awareness, knowledge and skills of parents and caregivers on parenting and early stimulation (play: creating conducive and safe environment for children to play, facilitating play, touch, eye to eye contact, brain development, LTP calendar and how to use the calendar. The project was inclusive in its approach and benefited children with special needs who have been attending Inclusive Kindergarten (IKG) in Adwa, and guardians of orphan children affected by HIV/AIDs in Jimma.

The project beneficiaries also included KG and pre-school teachers, education supervisors; staff of Education Offices, Colleges, Health Offices, Women, Child and Youth Affirms Offices, Local Administrative Offices, Health Extension Workers and other community members who have been trained and providing training and orientation to parents, taking part in coordinating and following up of the project activities.

The total number originally estimated number of project beneficiaries was 50,000 people. However, the project has been able reach 63,448 direct beneficiaries at the end of the project life including young children, their siblings and parents/caregivers, and other members of the communities in the project operational areas.



LTP training participants



Children in Inclusive Kindergarten at Adwa

5. Lessons Learned

It was learnt that involving fathers and local elders and community leaders in LTP training contributed a lot to positively influence families and communities and increased the involvement of husbands in caring for their children.

It was observed that using drama and pictorial training materials and audio visual educational materials while providing LTP training to parents who cannot read & write has been more effective than lecturing.

Undertaking continuous awareness raising on gender equality among the community was found to be effective in breaking cultural barriers and encouraging equal sharing of responsibilities of caring for young children among father and mother in a family.

6. The Multiplier Effects

The project has brought change in pre-school and primary school communities. KG and pre-school teachers and “O” class teachers in primary schools are practicing LTP that increased pre-school and primary school enrolment and school performance of children.

7. Sustainability of the Project

Technical Sustainability:

The project has already trained master trainers, KG and pre-school teachers, health extension workers and other field workers who have been providing training and orientation to parents and caregivers on LTP. These trained individuals are resource persons in the community who can transfer their knowledge/disseminate LTP to other communities.





Some of trained master trainers and field workers

Financial Sustainability:

Efforts are being made to leverage resources from private sector and interested potential donors to expand/replicate LTP in other part of the country. The already produced LTP manuals and calendar can be used as a resource to undertake trainings.

System:

The three implementing partners has been closely working with concerned government offices (District Administration; Women, Children and Youth Affairs Offices; Education Offices and Health, Government KGs/pre-schools and primary schools) and private KGs. This enabled them to create ownership feeling and active participation in the project planning, implementation and monitoring among the stakeholders. There is high acceptance of the project among the communities. Thus the project staff can make use of this opportunity to expand the project activities. The interest of respective regional Education Bureaus and the commitment of all stakeholders including Deans of the Colleges, and instructors/teachers, LTP staff and field workers in Adwa and Jimma and staff of Ratson are among some indicators to ensure sustainability of project results.