

Terms of Reference for a study on **“Early Childhood Development”**

Background

A good start to life is the foundation for children’s rights. There is a well-established body of evidence that choices made and actions taken by parents and society in the earliest years of childhood have a powerful and long-lasting influence on the later progress of individual children, and on the wider progress of nations. Quality care and protection in these years are key to avoiding death, disease, stunted growth, trauma, malnutrition and developmental delays while ensuring healthy growth, self-esteem and the ability to learn. These in turn are central to school readiness, further learning, the effectiveness of school based programmes and to the future ability of children to contribute as parents, economic actors and citizens. Investing in young children will bring long term social change and sustained realization of children's rights.

Over the past four years UNICEF’s cooperation with the Government of the Russian Federation in the area of early childhood care and development programme was concentrated on support and promotion of breastfeeding, prevention of micronutrient deficiencies and recently on prevention of mother-to-child transmission of HIV. These components if classified in accordance with UNICEF child-rights based approach can be considered as “good start to life” basics in nutritional and psycho-emotional context. However, being all integral parts of ECD programme, they do not cover the whole spectrum of cultural, institutional and inter-sectoral issues related to early childhood development, which as an integrated concept is totally new for the Russian Federation.

Introduction of ECD five major components (i.e. i) health; ii) nutrition; iii) water and environmental sanitation; iv) early stimulation and learning and v) child protection) with a focus on the child and the mother in an integrated manner will require comprehensive assessment/analysis of national realities, opportunities, commitment, capacities and resources in order to formulate the realistic, targeted and applicable strategies to develop national ECD policies.

As the survival, growth and development of young children depend on three main factors such as a/ the quality of family care, b/ effective access by families to good quality basic services, and c/ the supportive community and policy environment it is essential to analyze all these three areas and by doing this assess the country’s prospects to implement UNICEF’s medium term targets (2002 – 2005) in the area of ECD.

Objectives of the study:

- (i) To assess, through participatory techniques and selective sample surveys, the current levels of knowledge (including screening the attitudes) and the practical adoption among **family care givers** of

key practices for the care of young children and pregnant women, including: infant and child feeding; psychosocial care, stimulation and early learning; home health and hygiene practices; prevention and appropriate treatment of common illnesses; prevention of discrimination, neglect, abuse and violence against both children and women.

- (ii) To assess the access to and quality of nutrition, child and maternal health (including immunisation), early learning and pre-school preparedness, water, sanitation and hygiene related **services and commodities** provided by both governmental and non-governmental sectors;
- (iii) To provide recommendations for the development of **comprehensive and inter-sectoral ECD policies** in the country to ensure the survival, growth, and the social, emotional and cognitive development of all young children, leading to a substantial reduction in mortality, disease burden and prevention of developmental delays

Proposed composition of the study

Chapter 1. Family child care practices (20 pages¹)

This chapter will provide an overview of current care practices, knowledge and attitudes among families as regards the main components of ECD and explore ways for promoting parental education in the country. The analysis in this chapter is supposed to:

- Examine **economic and social conditions** of primary caregivers and households (per capita income in families having children, poverty among families with children, maternity/paternity leaves, sick leave entitlements, state allowances for families with children, other benefits, housing conditions in general and affordability of appropriate housing for young families, access to safe water, sanitation and waste disposal practices, balanced dietary patterns and healthy food, air free from contamination)
- assess the general level of **parental knowledge** about key components of early childhood care and development and to what extent the existing knowledge is transformed into every day care **practice** (including parental roles and obligations as regards child development and child care, common responsibilities of both parents, promotion of positive parent-child relationships, parental knowledge/attitude/practices in provision of food, care, love and affection, interaction and variety of stimulation, socialisation)
- assess the availability, relevance and coverage of existing **parental education programmes** and initiatives
- assess the existing attitudes of families/ parents vis-à-vis adequate **organizational forms/ channels** for receiving new information, knowledge, skills on better parenting issues

¹ The number of pages is indicated for the textual part of the study. Statistical *tables, diagrams* and *pictures* should be part of the Annex.

- assess the existing capacities and potential of governmental educational, health care and social protection agencies (ministries of education, health, social development, subordinate institutions, family support centres, other) to develop and introduce **training/informational materials for parents** and service providers on good care and nutritional practices, as well as early learning

Chapter 2. Family, mother and child care services (20 pages)

This chapter will assess the current situation in provision of family and child health care and education services and commodities (including basic medicines, micronutrient supplements and iodized salt). These services should be analyzed in terms of their availability, accessibility, affordability, relevancy and resulting coverage, with special attention to be paid to the following areas:

- health status of **pregnant women and newborns** (prenatal diagnostic and care, maternity services, care for women delivery and lactation, access to and coverage by relevant health care services in urban and rural areas)
- **health status of young children** (including access to and coverage by relevant health care services in urban and rural areas)
- **early detection** and interventions to prevent impairments and disabilities
- supply of and demand for **iodized salt**
- available forms of **pre-primary care and early education** services (kindergartens, family-based small groups, art and sport schools, other day care and developmental opportunities) for young children offered by the public and private sectors incorporating key elements of learning and healthy development (pre-primary age group, enrolment, access to and coverage by relevant services in urban and rural areas, home-based education, national targets/standards on cognitive and social skills of young children, programs/content of pre-primary education, preparedness for primary school, family involvement)

This chapter should also:

- explore possible **linkages and integration** in designing and providing **basic services** for young children across sectors (health, education and social protection), especially at the local level
- assess the existing **potential of non-governmental** organizations to cooperate with and complement the governmental sector in social services provision

Chapter 3. ECD national policy (15 pages)

The focus of this chapter will be on:

- reviewing **existing national policies** for ECD (both at the federal and local levels), covering the five key elements of ECD as they are currently fixed as the responsibilities of respective health, education and social welfare systems; the analysis should cover appropriate legislation, normative documentation and regulations, institutional infrastructure, operational standards and protocols
- reviewing existing **sets of ECD indicators** and disaggregated data collected for the monitoring of key elements of young child survival, growth and development and propose measures for strengthening this system, especially in the areas where the instruments available are still weak or not adequate (e.g. for the assessment of psycho-social and cognitive development)
- systematising and analysing the information on national and local **budget expenditures** on priority programmes for the survival, development and protection of young children in the last ten years
- assessing the general attitudes and/or **preparedness** of federal/regional authorities to ECD integrated approaches and the level of their **commitment** to promote such approaches, that would mean giving them appropriate priority and **allocating resources** (financial, administrative and human)

Proposed methodology²:

- analysis of regulatory documentation, methodologies and practices available nationally and locally (and comparison, where appropriate, with existing international standards)
- focus groups discussions / documented interviews with care providers, administrators, parents, NGO activists
- participatory research / KAP survey among parents

Final product requirements:

The results of the study should be submitted to UNICEF in the form of a comprehensive document including the narrative/analytical part (approximately 55 pages) and statistical illustrations/annexes presenting the documented results of sociological survey(s) and interviews. Detailed description of the methodologies and sources of information/data used in the study is required. The document should be submitted in the hard copy and in electronic form (Word), with statistical annexes presented in Excel format.

Time schedule:

- inventorying available resources³ / identifying the gaps in required information / preparing a refined version of the study outline (2 weeks)

² Minimum scale and scope of sample surveys (KAP, focus groups discussions, other forms of sociological field research) will be discussed and agreed upon with the selected contractor.

- in-depth analysis of identified documentation / sources and preparation of the KAP survey design (2 weeks)
- preparation of the first draft (2 weeks)
- preparation of the final draft (2 weeks)

Therefore, the study is supposed to be completed within 8 weeks since the beginning of the contract with UNICEF. At the end of each stage (two-week period) working discussions with UNICEF are held in order to assure that the work is progressing in the agreed direction and necessary amendments/additions are incorporated into the text in proper time.

³ Including official data and expert estimates available through various thematic studies.