Early Child Development: Lessons from Non-formal Programs

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Introduction

Every field of endeavor has peak moments of discovery and opportunity when past knowledge converges with new insights. In recent years, there has been an explosion of research in neurobiological, behavioral, and social sciences which has led to major advances in understanding the conditions that influence the well-being of children.

We now know that early life experiences shape the development of the brain and that individuals’ behaviors, capabilities, emotions, and essential social skills develop during the earliest years of life. The nature of early human development has been summarized well by Shonkoff and Phillips (2000) as follows:

1. Human development is shaped by a dynamic and continuous interaction between biology and experience.
2. Culture influences every aspect of human development and is reflected in childrearing beliefs and practices designed to promote healthy adaptation.
3. The growth of self-regulation is a cornerstone of early childhood development that cuts across all domains of behavior.
4. Children are active participants in their own development, reflecting the intrinsic human drive to explore and master one's environment.
5. Human relationships, and the effects of relationships on relationships, are the building blocks of healthy development.
6. The broad range of individual differences among young children often makes it difficult to distinguish normal variations and maturational delays from transient disorders and persistent impairments.
7. The development of children unfolds along individual pathways whose trajectories are characterized by continuities and discontinuities, as well as by a series of significant transitions.
8. Human development is shaped by the ongoing interplay among sources of vulnerability and sources of resilience.
9. The timing of early experience can matter, but, more often than not, the developing child remains vulnerable to risks and open to protective influences throughout the early years of life and into adulthood.
10. The course of development can be altered in early childhood by effective interventions that change the balance between risk and protection, thereby shifting the odds in favor of more adaptive outcomes.
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The Science of Early Child Development

Early interventions in the preschool years can reduce the developmental gap between poor and more affluent children so that poor children enter primary school more equally ready to learn as their more affluent peers.

The rapid development of the brain during the preschool years is crucial and depends on a child's environment. Nutrition, care, and nurturing directly affect the wiring of brain pathways during this period. When a newborn child has been cared for properly, she will be more ready to enter school on time and to learn.

Science also increasingly shows that the development of the brain in the early years affects individuals' physical and mental health (their competence and coping skills) and their behavior throughout life.

Rethinking the Brain

Only 15 years ago, neuroscientists assumed that by the time babies are born, the structure of the brain is genetically determined. They did not recognize that the experiences in the early years have such a decisive impact on the architecture of the brain or on the nature and extent of adults' capacities. Today, brain researchers are providing evidence that the early years from conception to age 6, and particularly the first 3 years, set the base for the development of lifetime skills and abilities. Shore (1997) summarizes the "new thinking" about the brain as follows:

"Old Thinking"  
How a brain develops depends on the genes you were born with.

The experiences you have before age 3 have a limited impact on later development.

A secure relationship with a primary caregiver creates a favorable context for early development and learning.

Brain development is linear: the brain's capacity to learn and change grows steadily as an infant progresses toward adulthood.

A toddler's brain is much less active than the brain of a college student.

"New Thinking"  
How a brain develops hinges on a complex interplay between the genes you are born with and the experiences you have.

Early experiences have a decisive impact on the architecture of the brain and on the nature and extent of adult capacities.

Early interactions don't just create the context; they directly affect the way the brain is "wired."

Brain development is nonlinear: there are prime times for acquiring different kinds of knowledge and skills.

By the time children reach age 3, their brains are twice as active as those of adults. Activity levels drop during adolescence.

In addition to the breakthroughs in neuroscience, social science researchers have generated substantial knowledge on the effects of early interventions on later school performance, life skills, and productivity. The efficacy of early interventions has been demonstrated and replicated.
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in diverse communities worldwide. Children from families with the least formal education appear to derive the greatest cognitive benefits from early interventions. Moreover, the effect of early interventions appears to be long-lasting. The development of the brain during infancy and childhood follows a "bottom-up" pattern. The most regulatory, bottom, regions of the brain develop first, and the adjacent higher and more complex regions follow in sequence.

This sequential development of the brain, and the sequential development of function, is guided by experience. The brain develops and modifies itself in response to experience. Neurons and neuronal connections (synapses) change in an activity-dependent fashion. To develop normally, each region requires specific kinds of experience targeted to the region's specific function (e.g., visual input, for organizing the visual system). These periods of development are called critical or sensitive periods.

Social and Emotional Competence

By the time children enter school, their early development will determine whether they will succeed in school, as well as later in life. The extent of their learning in school depends largely on the social and emotional competence they have developed in their first few years. A child who is ready for school will exhibit a combination of characteristics such as being socially and emotionally healthy, confident, and friendly; having good peer relationships; tackling challenging tasks and persisting at them; having good language development and communicating well; and listening to instructions and being attentive. In a recent survey (Cox, Rimm-Kaufman, and Pianta 2000), up to 46% of kindergarten teachers reported that one-half or more of their class had specific problems in transitioning to school.

<table>
<thead>
<tr>
<th>Student problems reported</th>
<th>Percent of teachers reporting problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty following directions</td>
<td>46</td>
</tr>
<tr>
<td>Lack of academic skills</td>
<td>36</td>
</tr>
<tr>
<td>Disorganized home environment</td>
<td>35</td>
</tr>
<tr>
<td>Difficulty working independently</td>
<td>34</td>
</tr>
<tr>
<td>Lack of any formal preschool experience</td>
<td>31</td>
</tr>
<tr>
<td>Difficulty working as part of a group</td>
<td>30</td>
</tr>
<tr>
<td>Problems with social skills</td>
<td>20</td>
</tr>
<tr>
<td>Immaturity</td>
<td>20</td>
</tr>
<tr>
<td>Difficulty communicating/language problems</td>
<td>14</td>
</tr>
</tbody>
</table>


Linking Science With Policies and Programs

Social science studies of early child development (ECD) interventions in the U.S.A (e.g., Infant Health and Development Program, Abecedarian project, Perry Preschool Project, and Head Start) and developing countries show that children who participate in ECD programs have lower grade-repetition and dropout rates in school, better school performance, and a higher probability of progressing to higher levels of education. Being well educated is the best predictor of “success”
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as an adult. Education can be a great equalizer, but only if all children get an equal chance to take advantage of it.

A recent study in Brazil (Barros and Mendonça 1999) shows that preschool attendance has positive effects on future earnings. Preschool attendance indirectly increases children's level of schooling and directly increases their future income as adults. Importantly, the positive effects of preschool are greater for children whose parents have less education (i.e., are illiterate).

Increase in Future Earning Capacity for Children Whose Parents Have 4 Years of Education.

Source: Barros and Mendonça (1999).
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Increase in Future Earning Capacity for Children Whose Parents Are Illiterate.

Source: Barros and Mendonça (1999).

The policy implications of these findings are significant. A country can "do everything right" in terms of its macroeconomics, governance, regulation, etc., but if it ignores its very young children, its labor force 20 years hence may include many workers who are far less productive than they could have been. Productive individuals who are integrated into the labor market contribute to a country’s economic growth and decrease social costs, in having less criminal affinities and lower fertility rates and being better integrated overall into society (than "nonproductive" individuals). The gain for a society reaches far beyond an individual’s achievements in school and the cost savings for the education sector.

The evidence that early interventions are effective in improving the life chances of children at risk is more than sufficient. A major challenge now, for all countries, is to take ECD programs to scale. Several considerations are worth noting in this regard:

- Large-scale ECD programs depend on supportive institutional frameworks and local capacity. ECD programs often consist of thousands of small locally managed projects, each serving 15-20 children. To succeed, these small projects depend on support from parents, communities, health clinics, nongovernmental organizations (NGOs), and other local institutions. As part of broader national programs, they will also need support from societal institutions—for training, information sharing, quality control, and evaluation.

- Policies, by themselves, may not produce expected results. Policies may be well designed technically, but producing results largely depends on the empowerment of institutions (formal, non-formal, national, local, private, and public) and people (parents, caregivers, teachers) to implement policies and programs in ways that reach the intended beneficiaries.

The success of taking ECD programs to scale also depends on political will and coordinated and combined efforts to give children a better chance. Knowledge about which policies and programs
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are effective in particular circumstances is still being developed. Operational experience attests to the importance of understanding how the institutions implementing programs actually work and how communities can contribute to a program's success. Understanding who will gain and who is likely to lose is critical when instituting new policies or making policy changes.

Lessons Learned

Based on a review of five community-based programs, Kirpal (forthcoming) identifies the following essential features common to successful ECD programs:

- Child-centered approach
- Parental involvement and family support
- Community ownership
- Cultural and financial sustainability
- Training and capacity building
- Integration within a broader framework of development
- Public-private partnerships.

Kirpal underscores the importance of extensively involving the local community, to create ownership and assure sustainability of programs. She also emphasizes the need to involve communities from the outset and to adopt a partnership approach that allows for the full participation of parents, families, and community members from the beginning. To sustain large-scale programs on a long-term basis, communities need to be responsible for their own programs and need to partner with the public sector that is challenged to provide well-monitored financial support, professional guidance, and an enabling environment.

The lessons distilled from other programs (e.g., Colombia’s Home Day Care program, the U.S. Head Start program), initiated at the community or national level, are similar.

Lessons Learned From National ECD Programs (e.g., the U.S. Head Start program and Colombia's Home Day Care program)

First:
Strong national institutions need to complement, but cannot substitute for, local capacity and commitment. The participation of both formal and non-formal institutions in ECD programs is key to the success of these programs. For example, the national U.S. Head Start program initially suffered from a failure to take local conditions into account during implementation. Conversely, in the early stages of the expansion of the Colombia home-based projects, which had enjoyed strong local support, the Colombia program suffered from lack of quality control, supervision, and capacity for monitoring and evaluation at the national level.

Second:
ECD programs need to be strongly supported nationally to become financially sustainable. Financing may be needed to strengthen the institutions that are vital to a program's success, but it can also weaken them. Federal financial support to local projects in a mixture of block and matching grants strengthens local ownership, but complete reliance on national funds impedes incentives to increase local efforts. Vouchers or other direct-payment mechanisms for procuring food or other supplies from local private providers increase the number of stakeholders, but the use of earmarked taxes (e.g., in Colombia) and the production and
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Distribution of program-specific food supplements constrain the development of political constituencies.

Third: Monitoring and evaluation are important. Rapid expansion of the Head Start program without the benefit of an initial pilot project diminished the overall quality of the program and compromised early evaluation efforts. In Colombia, early program experiences were helpful in identifying inefficiencies in reaching poor neighborhoods in a cost-effective way. Monitoring and evaluation should be a cyclical and interactive process that begins in the initial design phase, and program managers must be prepared to make changes as needed, even in the original design, to respond to local needs and to achieve effective outcomes. Programs developed in a country's capital must be adapted for local communities, and the changes should be documented for future reviews.


The Role of Civil Society

Civil society can have an effective role in translating the scientific evidence on early child development into the development and implementation of policies that will benefit large groups of young children who are being deprived of the most basic needs.

The paradigms for private-public interaction have changed in recent decades. Through their policies and action plans, governments are more willing to partner with the civil society to jointly contribute to the resolution of a country's problems. And experience reveals that the civil society can increase the efficiency of government efforts, especially in the provision of social services. Many individuals and institutions working at the grassroots level are capable and are often better equipped than government to design, develop, and evaluate ECD strategies, projects, and high-quality interventions to benefit children, families, and communities.

The civil society has a vital role to play in articulating communities' needs and interests. It largely consists of individuals or groups of individuals that do not represent political parties or government institutions but, through self-initiative, participate as citizens in identifying and articulating issues of common interest and concern, typically related to children, poverty, human rights, the environment, social issues, cultural heritage, political justice, etc. Formalized groups such as corporations, foundations, associations, NGOs, academic groups, churches, and other social and cultural entities constitute an important part of the civil society.

NGOs are a particularly important component and often have acted as mediators between the civil society and government. The antecedents of the current NGOs arose when the United Nations adopted the concept of nongovernmental organizations to denominate groups that did not represent countries or governments. Experience demonstrates that most NGOs are efficient, respond to issues based on direct participation and experience, deliver knowledge and reliable information in each undertaking, and court smart professionals from different disciplines. The activities of NGOs are heterogeneous and include funding of efforts through donations, implementation of specific projects, and development of academic materials. As noted by Mena and Avendaño (1997), "... NGOs are groups of the civil society that aim to fight poverty in its multiple forms within developing countries; contribute to education for vulnerable groups; sensitize public opinion on society's lacerated issues; influence decision making in political instances; promote the need to respect human rights in their widest sense; protect all types of life..."
and the environment; and give moral and in-kind support to groups in special situations, such as migrants and street children. They tend to have horizontal decision structures, engage in joint actions, and are flexible and promote social changes through participation and innovation"(p. 211)

In the context of ECD programs, the civil society participates in the design, development, operation, and evaluation of programs. It plays a predominant role in providing a variety of non-formal services worldwide (see the figure below).

*The Components and Role of the Civil Society in ECD Programs.*

In coordination with the sector or the official educational institution:

- Assist children ages 0-6 years in a comprehensive way, considering the affective, social, intellectual, and physical dimensions, and organize a center supporting one or more programs.
- Support and/or reinforce existing programs or services.
- Finance programs, and generate organizations to fund services or the training of teachers and volunteers.
- Participate in the implementation of studies, diagnosis and evaluation of non-formal programs.
- Participate as volunteers; disseminate information; and encourage parents, communities, and the public to be more sensitive to the needs of young children.
- Build, donate and refurbish infrastructure and educational materials.
Non-formal ECD Programs in Latin America and the Caribbean

The experience with non-formal ECD programs in Latin America and the Caribbean, described below, highlights effective ways for the civil society to participate in early child development. Non-formal early childhood education is a Latin American contribution to achieving universal education. It transcends the pedagogical sphere to include the social development of communities and the improvement of living conditions. In Latin America and the Caribbean today, early childhood education generally begins at the preschool or kindergarten level, which is considered the first level of the educational system. Yet, estimates indicate that only 30 percent of children between ages 4-6 have access to such programs.

Innovative, non-formal alternatives to the formal provision of services to preschool-aged children have made it possible to extend the reach of services to poor areas and to achieve more equitable distribution of early stimulation programs. Quality early education is an effective way to alleviate poverty in the poorest and most inaccessible areas, increasing children’s chances for social and economic inclusion. It also strengthens the educational role of the family and makes mothers aware of their key role in ensuring good nutrition and timely health care for their children. In addition, the women involved in these programs benefit from an improved socioeconomic status.

Types and Principles of Non-formal Programs

Non-formal ECD activities range from experimental models to nationally accredited programs. Bolivia, Brazil, Chile, Colombia, Cuba, Ecuador, El Salvador, Guatemala, Mexico, Nicaragua, Panama, Paraguay, Peru and Venezuela have each developed different models to suit their populations’ needs. Programs may be administered by a variety of agencies representing different sectors. Compared to formal programs, they are generally more flexible in management and administrative structure and lower in cost.

Non-formal programs utilize various types of curricula and educational materials. Because local volunteers have a large role in operating these programs, most programs reflect the culture, values, childrearing practices, and customs of the local community. Non-formal programs are often considered effective agents of social change, enhancing a parent’s knowledge about children’s early development and community participation.

The principles guiding non-formal ECD programs outlined below are derived from almost three decades of experience with non-formal ECD programs in twenty-two Latin American countries.

### Principles Guiding Non-formal ECD Programs

Non-formal programs are operated in close cooperation with parents and the community. The give-and-take relationship between service providers and service users enables non-formal programs to identify and respond to special needs as they arise.

<table>
<thead>
<tr>
<th>Goals</th>
<th>Practices</th>
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<tbody>
<tr>
<td>To provide all preschool-aged children with equal access to cognitive stimulation, communication, socialization, and basic</td>
<td>• Get government, municipalities, sectors, NGOs, and universities to work together on ECD programs</td>
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<tr>
<td>Early Child Development: Lessons from Non-formal Programs</td>
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<td>health care and nutrition to promote their healthy physical, mental, and social development</td>
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<tr>
<td>To strengthen women’s educational role, both to stimulate the cognitive development of young children and to improve women’s socioeconomic status</td>
<td></td>
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<tr>
<td>• Conduct ongoing training for parents, caregivers, volunteers, communities, educators, and other agents</td>
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<tr>
<td>To encourage parents and communities to work together, both for young children’s education and for other social development programs</td>
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</tr>
<tr>
<td>• Organize ECD program activities in community venues, homes, playgrounds, churches, markets, agricultural areas, hospitals, health centers, community kitchens, schools, and preschool facilities.</td>
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<tr>
<td>To devise ECD programs sufficiently flexible to meet each community’s infrastructure, economic, and cultural needs</td>
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</tr>
<tr>
<td>• Involve community leaders and other volunteers in shaping ECD programs, to guarantee respect for cultural values and local customs</td>
<td></td>
</tr>
<tr>
<td>To improve the efficacy of ECD programs</td>
<td></td>
</tr>
<tr>
<td>• Conduct follow-up studies and assessments of non-formal ECD programs and volunteer teaching and childcare</td>
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</table>
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Two programs, in Peru and Jamaica, illustrate how these principles are being applied in non-formal community-based programs involving the civil society.

Peru. In 1965, CARITAS (a Catholic social welfare agency) initiated one of the first non-formal ECD projects in Latin America. Designed to serve farm families in Puno, Peru, the project illuminated the many needs of rural mothers and their young children. To respond to these needs, CARITAS organized in 1968 the first Children’s Houses (Wawa wasis or Wawa utas) in the Quechuan and Aymara communities. The Ministry of Education assigned educators and community volunteers to provide recreational activities and food supplements to children ages 3-6 in these communities. This effort was so successful that Peru decided to expand the program to reach young children outside of school.

Jamaica. Several studies in Jamaica have shown that low-cost ECD educational services delivered in a family’s home by trained community health workers can significantly improve poor children’s cognitive development. In one pilot program, Roving Caregivers, health care workers trained in early child development came to the home for 1 hour of language activity and mental stimulation for toddlers. The activities consisted of games, songs, crayon and paper activities, and playing with homemade toys. Some children also received food supplements. These home visitors were community health aides, most of whom had not completed secondary school. Each volunteer received 8 weeks of training in child development, teaching techniques, and toy-making before visiting the homes. The frequency of ECD home visits has been gradually increased, from monthly to biweekly to weekly.

When assessed, the children, including those who received and did not receive food supplements, showed marked cognitive improvement. The pilot program demonstrated further that:

- Improved skills—in degree and number of areas—are directly related to the frequency of visits
- Combined nutrition and education interventions produce better results than either alone
- Poor mothers can be taught how to promote good development in their children
- Integrating the delivery of early education services into an existing health care delivery program is cost effective.

Peru’s Wawa Wasis and Jamaica’s home visits are just two examples of the many non-formal programs that have sprung up across Latin America and the Caribbean to meet the needs of poor children in all types of communities. Additional examples, described below, convey the experiences of twenty-two countries and demonstrate the many forms that successful ECD programs can take.

Examples of Non-formal Programs Provided by the Government and the Civil Society

1. Home Visiting

Home visiting programs typically operate in densely populated, peri-urban, and scattered semi-rural areas where the majority of mothers work, but not in the formal or non-formal labor market. The programs focus on children ages 0-3 years. An educator is responsible for eight volunteers,
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each of whom serves eight families. Any adult, or child older than 10, is trained to mediate the pedagogical work with the children. The programs provide technical material for educators and volunteer-promoters, as well as guidelines for mothers, organized by topics, age, and activities. The volunteer or educator visits each family regularly, usually once a week, although the frequency of visits varies in some countries. Parents meet biweekly or weekly to discuss their children's development, the games and stimulation activities for the children, and child health, hygiene, and nutrition. The programs usually include a nutritional component to benefit the family and child.

Specific examples—
• PERU: Comprehensive Program for Early Stimulation Based on the Family ("PIETBAF").
• CHILE: Nursery in Home and Nursery in the Physician's Office (JUNJI).
• COLOMBIA: Child to Child, where children ages 10-12 look after younger children ages 2.5-6 to help integrate them into school (CINDE).
• CUBA: Community Circles for children ages 0-2.
• JAMAICA: Roving Caregivers.

2. Parental Care

Care provided through parents is often found in rural and peri-urban areas. A promoter or volunteer community educator serves an average of twenty families through periodic meetings and home visits. The promoter or educator utilizes guidelines and technical documents to train parents how to generate stimulation and health activities and to improve feeding practices. With the support of the media, these programs raise awareness and inform the community. Teachers and supervisors train, evaluate, and coordinate inter-institutional activities involving government, universities, and local communities.

Specific examples—
• MEXICO: Rural and Indigenous Non-scholastic Early Childhood Education (CONAFE).
• CHILE: Labor Family Kindergarten (JUNJI).
• CUBA: Kindergartens.
• COLOMBIA: Programs for Early Stimulation (CINDE), PEFADI, Community Homes of Family Welfare and FAMI (ICBF).
• NICARAGUA: Growing with Love and Joy.
• PERU: Programs for Comprehensive Attention with Group of Mothers (PAIGRUMA).
• VENEZUELA: Program Family.
• HAITI: Mothers and Education of the Parents.

3. Comprehensive Health Care

Modalities of comprehensive health care operate in densely populated rural and peri-urban areas. The modalities include services related to education, health, nutrition, literacy, community development, productivity, improvement of women's conditions, the environment, housing, and agriculture. Community volunteers participate in the education, health, agriculture, productivity, and nutrition activities. A multidisciplinary team of teaching and technical staff provides advice for each service. Educational services meet the needs common in these areas: group education for children ages 3-6 and home-based education for children ages 0-3. Guidelines and material are provided for the different services and for the educational agents in each sector (education, health, agriculture).
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Specific examples—
- CUBA: Municipal Plan of Education and Kindergartens
- VENEZUELA: Centers, Comprehensive Attention to the Children of the Rural Sector, Centers for the Child and the Family.
- COLOMBIA: Atlantic Coast Project (PROMISE).
- MEXICO: Front Earth and Freedom Centers of Child Development of Monterrey.
- BRAZIL: Pastoral of the Child.
- CHILE: Children Attention for Indigenous Communities.

4. Home-based Care

Home-based care is effective for rural, peri-urban, and semi-urban areas. An average of fifteen children ages 3-5 are cared for together in a family's home. In some countries, home-based care also is utilized for children ages 0-3. One educator or facilitator is responsible for ten or more homes, and two or three mothers (depending on the country) are responsible for each home. The care is oriented toward child development and pregnant and nursing mothers. The mothers receive program or economic support for daily feeding of the children. In Bolivia, each participating home includes a person in charge of cooking. In Colombia and Bolivia, loan programs are available for improving the housing conditions. In Colombia, communities contribute funds to support the payment of mothers' wages, the purchase of food, and the administration of resources (e.g., the selection of beneficiaries and welfare homes). A variation of this modality of care is directed by educators; captures the use of mothers in health centers, maternity units, or medical posts; and involves community agents as well as mothers.

Specific examples—
- COLOMBIA: Welfare Homes, Program of Comprehensive Child Development.
- BOLIVIA: Family Centers.
- BRAZIL: Household Cradles and Community Centers.
- VENEZUELA: Family Program.
- CUBA: Social Program for Family Attention With Support of Primary Education Educators, Kindergartens.
- PERU: Community educational homes and the PAIGRUMA Program.

5. Group Care

Group care modalities are provided in peri-urban, rural, and areas with a high number of indigenous population to allow for the grouping of fifteen or more children ages 4-6 or older. A coordinating trained educator of early childhood or primary education, or a professional of early childhood education, is responsible for eight to ten master mothers, volunteers, or promoters. Each mother, volunteer, or promoter is responsible for fifteen to thirty children who are served in a community venue such as a church, dining room, educational center, market, patio, harvest field, or specially constructed facility. The programs usually have furniture, educational materials, a curriculum, guidelines, and documents for parents, volunteers, and technical personnel. The community participates in the selection of volunteers, preparation of food and materials, implementation of child activities, health services, legal efforts, and other activities.
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The group-care experience incorporates daily activities, an educational environment, and fixed schedules and is often complemented by other services (e.g., health, social well-being, provision of food, and women's support).

Specific examples—
- CHILE: Community Centers of Attention (CEANIM), Kindergarten Open Patio, Community Kindergarten, Labor Kindergarten, Seasonal Garden, Ethnic Kindergarten" (JUNJI); Open Centers (INTEGRATES).
- BRAZIL: Community Centers.
- NICARAGUA: Centers of Non-formal Early Childhood Education (CENPES).
- TRINIDAD AND TOBAGO: Comprehensive Education in the Rural Areas.
- BOLIVIA: Community Centers and Growing and Learning in Family (PAIN).
- PARAGUAY: Mita'roga.
- ARGENTINA: CATHEDRALS (Mendoza).
- DOMINICAN REPUBLIC: CEIBAs.
- HONDURAS: Non-formal Programs for Early Childhood Education.
- GUATEMALA: Fast Preschool.
- EL SALVADOR: I Educate, Program of Comprehensive Attention (PAIN).
- HAITI: Pilot Project of Non-formal Education.
- NICARAGUA: Centers of Non-formal Early Childhood Education (CEPNE).
- PANAMA: Centers of Child and Family Orientation (COIF) and Family and Community Centers (CEFACIE).
- CUBA: Educate Your Child.
- PERU: Non-formal Programs for Early Childhood Education (PRONOEI), National System of Child Houses, Wawa wasis.
- COSTA RICA: Child Day-care Centers of the IMAS.

6. Use of Communications Media

The communications media can be used effectively for non-formal ECD efforts in remote, scattered, rural, and border areas. Such efforts are directed toward children ages 0-6 who do not have access to "population-captured" early childhood education. Programs to train children's adult relatives are transmitted once or twice a week through radio or television stations. Social communicators advise the educators on the programs. Educators or volunteers visit homes every week and advise family members on the pedagogical activities featured in an activity guide for children that is consistent with the content presented in the radio or television programs. A playroom, community center, or other venue is used for weekly or biweekly group meetings of the children and their families to encourage socialization and relevant learning that may not be taking place in the home. At these meetings, an educator demonstrates to parents how to conduct the pedagogical activities.

Specific examples—
- CHILE: Radio Kindergarten, Kindergarten to the Residence (JUNJI).
- MEXICO: Program for Distance Attention of the Children.
- PERU: Capulí, Expansion of the Coverage through the Communications Media. (NUCOL).
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VENEZUELA: The Teacher at Home.

To complement these examples of non-formal ECD programs in Latin America and the Caribbean, several informative annexes are offered at the end of this chapter. They include a summary of the legal strategies used by twenty-one countries to create ECD services and programs (Annex 1) and some examples of ECD programs developed by Governments and the Civil society. (Annex 2).

Conclusion

Non formal ECD programs represent an alternative option to develop communities’ capacity to fight against poverty.

Expanding ECD programs nationally or across Latin America or any other region or continent is a great challenge for everyone involved. ECD programs uniquely depend on a complex network of local, regional, and national institutions for financial, managerial, and implementation support. Typically, programs consist of thousands of micro projects, each of which provides services to fifteen to twenty children. These micro units depend on the participation and contributions of volunteers, parents, and community workers. Groups of ten to twenty micro projects form neighborhood clusters that depend on parent associations for organizational support, which, in turn, depend on a network that includes NGOs and other components of the civil society. These networks depend on city-wide support to procure and distribute food, train caregivers, conduct public information campaigns, and monitor and evaluate programs. Comprehensive, integrated networks that combine the support of local, regional, and national institutions offer the greatest promise for taking effective ECD programs to scale.

The civil society clearly has an important role to play in early child development. It is a component of the comprehensive networks needed to support and sustain ECD programs in specific communities and an integral part of the combined efforts of local, regional, and national institutions.
REFERENCES


Reports and Publications on Civil Society experiences in Argentina, Bolivia, Brazil, Colombia, Dominican Republic, Mexico, Honduras, Paraguay, Peru and Venezuela. 1999-2000.
### Annex 1.
Legal Strategies for Creating ECD Services and Programs in Latin America and the Caribbean

<table>
<thead>
<tr>
<th>Country</th>
<th>Document and Texts</th>
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| **ARGENTINA** | *Federal Law of Education 1993*
| | Title III, Chapter I, Article 10. States that "...the structure of the educational system will be implemented in a gradual and progressive way, and will be made up of:
| | a. Initial Education, including kindergarten for children from 3 to 5 years of age, the last year being compulsory. The provinces and the municipalities of the city of Buenos Aires will establish, when necessary, services of Maternal Garden for children under 3 and will provide support for community institutions so that these provide assistance to families requiring it...."
| **BOLIVIA** | *Political Constitution of the State, Reform Law*
| | Title V, Article 169. Recognizes the preschool level as the first level of the educational system. *Educational Reform Law*
| | Chapter V, Article 1. Conceives the Preschool Level as an educational system promoting the integral development of the child in close linkage with the family. It has two cycles: a first cycle from 0 to 4 years, whose responsibility is in the family and the community; and a second cycle for the one offering service. *National Code of the Child*
| | Articles 15 and 20. Determines the right of the child to education from birth, as well as the supply of services of preschool education through day-care centers and schools within the framework of the educational system.
| **BRAZIL** | *The Federal Constitution of Brazil, 1998*
| | The Social Rights Chapter, Article 7. Determines free care for children and dependents from birth until 6 years of age, at kindergartens and preschools. The Education Chapter, Article 208. Determines that "the duty of the State toward education should be fulfilled ensuring care to children from 0 to 6 years of age in gardens and preschools."
| | *Law of Directives and Guidelines for National Education (LDB), Law 9,394 of 1996*
| | Article 21. Determines that the educational system consists of:
| | I - Basic Education, made up of child, elementary, and secondary education; andII - Post-Secondary Education.
| | Article 30. Establishes that children’s education should be offered in: I - Kindergartens or Nurseries, or equivalent entities, for children under 3; and II - Preschools, for children from 4 to 6.
| **CHILE** | *1990 New Constitutional Organic Educational Law*
| | The Ministry of Education specifies that the educational system is organized at a preschool level, assisting children under 6 years of age, through different institutions and private networks. Preschool education systematically aims to achieve the integral development of children between 0 and 6 and give support to the family and the community in their educational mission. *Law 17.301* Created JUNJI, a normative and executive institution specializing in small children.
# Early Child Development: Lessons from Non-formal Programs

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<tr>
<td>COLOMBIA</td>
<td>Establishes and ratifies the preschool level as the first level in formal education.</td>
<td>Governs the preschool education level. Provides for equity, equal opportunities, and integrated principles, participation, and technique.</td>
<td>Mandates at least one grade of preschool. Grade Zero of basic education starts at age 5. Preschool education comprises [*correct word?] from 3 to 5 and allows enrollment of children younger than 3. Includes emphasis on the child as the center of the educational process, use of the social reality surrounding children as the educational environment, use of community resources, use of games as tools for learning.</td>
<td>Infants and children until entrance to first grade. Based on a 1982-93 research study by the Central Institute of Pedagogic Sciences, which demonstrated the benefits of the non-formal education model, the “Educate Your Child” program was created with the following features: integral development, key participation of the family and community, and intersectorial involvement.</td>
<td>Chapter II, Article 23. Stipulates that the level of Initial Education is the first Educational Level and is provided before Basic Education and is coordinated with the family and community. Initial Education is directed to infants and children until age 6 years. The last year of Initial Education, beginning at age 5, is compulsory and is offered by the state free of charge.</td>
<td>The government inserted the preschool level into the first mandatory level within the ten basic education levels. The government made the commitment to provide attention and integral care to children younger than 6 and for indigenous groups and to implement a policy on initial education and school readiness. The Ministry of Social Well-Being and the National Institute for the Child and the Family (a private institution giving integral attention to 4-year-old children), and the Ministry of Education have been addressing the needs of children 4 years old or more.</td>
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<th>Country</th>
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<tr>
<td><strong>EL SALVADOR</strong></td>
<td>General Law of Education. Decree 917. Ministry of Education (1994-99)</td>
<td>Article 16. Establishes that Initial Education begins from birth to 4 years of age and benefits children's socioaffective, psychomotor, sensoriperceptive, language, and skill development through adequate early stimulation. Stipulates that Initial Education centers actions on the family, the community and that the Ministry of Education will govern the programs developed by public and private institutions.</td>
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<td><strong>GUATEMALA</strong></td>
<td>National Education Law (of constitutional character)</td>
<td>Article 74. Establishes that inhabitants have the right and obligation to receive initial, elementary, and basic education within the limits of age set by the Law. Article 29. Shapes the school education subsystem with levels, cycles, grades, and the following stages: 1st Level: Initial Education, 2nd Level: Pre-primary Education.</td>
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<td><strong>HAITI</strong></td>
<td>Organic Law of Education. 1982, Article 17</td>
<td>Establishes initial education as a category within the education process. Chapter II. States certain objectives and modalities of operation for the preschool system, as lasting for 2 years and serving children from 4 to 6 years of age.</td>
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<td><strong>HONDURAS</strong></td>
<td>1992 National Plan of Action of Education for All</td>
<td>A response to the country’s commitment to the Jomtien declaration (EFA). Establishes early childhood attention as an area of action and as a project for family education and infant development in rural areas. Contemplates the policies implemented for achieving a greater coverage of attention for children 0-7 years of age, through the organization and launching of integral formal and non-formal programs of basic attention in health and nutrition.</td>
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<td><strong>MEXICO</strong></td>
<td>1993, the General Education Law</td>
<td>Establishes that Initial Education is part of the National Educational System. Points out its purposes, regulates the pedagogical requirements of plans and curricula in general, and authorizes federal, state, and municipal authorities to deliver this service in two modalities, formal and non-formal. 1990 By provision of the Secretary of Public Education, Initial Education is separated from Preschool Education. Public Education Secretariat, Basic Education Sub-secretariat, Unit for Initial Education, Initial Education Program States that &quot;the purpose of initial education is to contribute to the children’s competent formation and equilibrated development, from birth to 4. Initial education is a component of the Basic Education, which is a priority.&quot; Modalities of Attention Scholastic: at Infant Development Centers (CENDI). Multidisciplinary nonscholastic programs: Encourage parents’ and community participation (since 1981). For parents in marginal rural and urban areas, provides training in intellectual, social, psychomotor, hygiene, food, and environment areas.</td>
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3 The 2000 Assessment on Education for All: Honduras’ report for the Dakar, Senegal, meeting April 2000 (pp. 5-6).
### Early Child Development: Lessons from Non-formal Programs

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<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Description</th>
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<tr>
<td>NICARAGUA</td>
<td>1979</td>
<td>The Ministry of Education creates the Preschool department and states that the preschool period covers 0 to 6 years of age, with age 3 to 6 covered and supported by the same ministry.</td>
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<td>PANAMA</td>
<td>1995</td>
<td>The regular subsystem comprises formal education, organized in three levels. The first level is basic education until 11 years of age and includes preschool education for 2 years for children ages 4 and 5. <strong>Article 35.</strong> States that the executive branch can extend the length of the first level of education. <strong>Article 64.</strong> States that initial education will provide integral attention from birth to age 5 years. Recommends that private companies and governmental institutions establish initial education centers under the guidance of the Ministers of Education and Health.</td>
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<td>PARAGUAY</td>
<td></td>
<td>States that basic education is compulsory and will be free of charge at public schools. <strong>Resolution No. 15/93 of the Ministry of Education and Religion</strong> Establishes standards for basic school education in three cycles for boys and girls from 6 to 14 years of age. In accordance with these standards, initial education takes shape as the first level of the national educational system, addressing infants and children from 0 to 5 years of age. Initial education is not compulsory. The Division of Initial Education promotes integral education of children under 6 developed in two modalities: in-school and nonscholastic.</td>
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<tr>
<td>PERU</td>
<td></td>
<td>The latest <strong>National Political Constitution, 1993</strong> Mandates Initial, Elementary, and Secondary Education. Since 1996, the Ministry of Education has provided services for children ages 0 to 3 years, together with the Ministry of Women’s Empowerment and Human Development (PROMUDEH) and the Ministry of the Presidency. The Ministry of Education gave priority to the establishment of scholastic and nonscholastic programs for children younger than age 5, to universalize the services in 4 years and to guarantee articulation between initial and basic education. Until year [<strong>Since?</strong>] 2000, the community-based care homes, or <em>Wawa wasis</em>, have provided services for children ages 0 to 2 years, as well as community-based play homes, nurseries, nonscholastic programs for early intervention in children ages 0 to 5, and other modalities of attention that involve the participation of families, communities, and the civil society.</td>
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<tr>
<td>TRINIDAD AND TOBAGO</td>
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<td>The preschool education should serve as the basis for establishing a cooperative model of services of care and education. Proposals should promote the integral development of the child (health, protection, and nutritional services) and create ties between home and school, school-feeding and agricultural production, and public and private sectors.</td>
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<tr>
<td>URUGUAY</td>
<td></td>
<td>The <strong>Constitution and the National Education Legal Administrative Norm of the Ministry of Education</strong> Mandates free Initial Education for all children ages 5 and 6, and their access to three levels of the basic cycle of secondary education. <strong>The Educational Reform</strong> Appeals for universal initial education. <strong>Law 16.802, Day Care Law</strong> The Ministry of Education and Culture assumes quality control for private-sector services for this age group 5 to 6. A public organization, the National Institute of the Young, also has a social and educational agenda and is a leader in developing infant and teenage policies in the country.</td>
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5 The 2000 Assessment on Education for All: Peru’s report for the Dakar, Senegal, meeting, April 2000.

Article 103. States that education is a human right and a fundamental social duty. Education is mandatory at all levels, from maternity to the diversified middle level. Conceives initial education to guarantee the integral development of infants and children from ages 0 to 6.

Articles 391 and 321. Sets forth rules on integral attention to workers’ children. Mandates attention to all their children younger than age 6 through diverse modalities of attention and with the participation of the family and the civil society.

Annex 2.

Examples of Programs of ECD developed by the Government and the Civil society in Latin America

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<tr>
<th>Country</th>
<th>Civil Society Program</th>
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<tr>
<td>ARGENTINA</td>
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• PROMIN: Transforms services provided to children in infant dining rooms with integral attention. Works in various provinces in association with one project in a sector.  
• Aequitas de Plata Foundation: Works with children ages 3-5 years. Prepares personnel for community work and develops other activities directly with communities.  
• Community maternal day-care centers coordination agency. Provides maternal day care, community kindergartens, infant dining rooms, and foster homes for children ages 6-14 years. Provides nutrition, educational, recreational, and health services for 2,500 children ages 0-5 years. Works with mothers and the community. |
| BOLIVIA   |  
• AYNI: NGO, Integral Association for the Childhood, coordinates inter-institutionally (10 programs), efforts supporting the childhood to optimize resources, actions and obtain greater impact. Trains non-professional staff and enables them to work with children and parents. |
| BRASIL    |  
• Pastoral da Criança: Assists more than 2 million children through comprehensive programs which, in some cases, include delivery of food, health services, and initial education.  
• Comunidad Solidaria: Works to alleviate poverty and mobilize populations in municipalities. Includes a specific program focused on young children.  
• Brazelton Foundation: An academic institution that focuses on the prevention of development and behavioral problems and the relationship between mother-child and breastfeeding stimulation. Organizes educational activities, offers technical assistance, conducts research studies, and promotes and supports infant care services. |
| CHILE     |  
• Temuco Catholic University: Trains initial education teachers to work with indigenous communities.  
• Center for Studies and Attention to the Child and the Woman (CEANIM): Trains women, educational leaders, mothers, and |

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6 The 2000 Assessment on Education for All: Uruguay’s report for the Dakar, Senegal, meeting, April 2000.  
### Early Child Development: Lessons from Non-formal Programs

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<tr>
<th>Country</th>
<th>Programs and Organizations</th>
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| **COLOMBIA**             | • CINDE: Works at national and international levels. Has more than 20 years of experience in development, implementation, research, and evaluation of programs and in training of staff for development of social programs.  
  • Foundation for the Development of the Child, Family, and Community: A community organization that works with the support of the University of the North in Barranquilla City. Attends children ages 0-3 years, providing health, nutrition, and integral development services within community homes. With the participation of the family and the community and with government support, provides integral services for children ages 3-7 years. Conducts research activities and provides technical advice and training within the country and abroad. |
| **COSTA RICA**           | • Private Institutions’ Union for the Attention to the Family (UNIPRIN): A network of institutions supporting improvement of the quality of services provided by social institutions that protect children, teenagers, and their families. Primary activities are training, research, and promotion of legislation for children and families at social risk. |
| **DOMINICAN REPUBLIC**   | • Santo Domingo’s Central Bank: Since 1999, has provided focused, integrated programs for workers' children ages 0-2 years.  
  • Santillana and Susaeta editorials are funding teachers’ training nationwide with the participation of international specialists.  
  • The National Institute of Initial Education: Promotes the organization of events for discussion, training, and sharing of experiences with among sponsors that fund non-formal programs. |
| **ECUADOR**              | • Various public entities, churches, and NGOs are committed to activities that promote attention to, and education of, children younger than age 6, with the support of the Infant Rescue Operation Program and the Infant Development Programs (PDI).  
  • The Ecuadorian Forum of Organizations For and With Children and Teenagers: More than 100 social organizations working for children and teenagers. |
| **EL SALVADOR**          | • FUSAL: Performed a research study of childrearing practices.  
  • SAVE THE CHILDREN – UCA University [**provide full name of university]: Developed programs for children ages 0-4.  
  • Santillana Editorials Participates in bringing together NGOs and institutions working in early child development. |
<p>| <strong>HONDURAS</strong>             | • Children’s Christian Fund (CCF): Develops actions with volunteers called “Guide Mothers” who train themselves in early stimulation to work with their families and children from other families in the community. |
| <strong>MEXICO</strong>               | • “Tierra y Libertad” Infant Integral Development Center (CEDIN), Monterrey: Develops formal and non-formal programs for low-income populations. Has a coverage of 4,500 children. Each center provides nutritional, psychological, pedagogical, health, and recreational services through multidisciplinary teams, families, and communities. The center evaluates each child and family and follows their developmental progress. |</p>
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<td>Early Child Development: Lessons from Non-formal Programs</td>
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<td>achievements. Received the 1999 and 2000 State Educational Quality Award and the 2000 National Quality Award.</td>
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<td>• Nuevo Leon State University, Distance Education Department, Monterrey: Conducts a program to increase coverage in urban, marginal populations through radio programs and family working units. Developed as part of a larger multinational project, this effort is partially supported by of the Ministries of Education in Colombia and Peru and the “Junta Nacional de Jardines Infantiles” in Chile.</td>
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<td>• Other NGOs: COMEXANI, Our Children I.A.P, EDUCA.</td>
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<td>PARAGUAY</td>
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<td>• Pastoral de Crianza or Pastoral Social: Began 5 years ago to engage other NGOs and education and health institutions in assisting children in poverty through a family and community approach of integral attention. Works at the national level and intends to contribute to national policies to guarantee integral attention for children ages 0-5 years through the participation of families and communities.</td>
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<td>PERU</td>
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<td>• The Catholic University of Peru, Lima: Develops training projects for teachers of initial education using distance education as the key strategy.</td>
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<td>• Pro Initial and Basic Education Association. NGO developing research studies and provides advise to Educational Centers, Parents Associations, Academic Institutions, to improve the quality of services.</td>
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<td>• Fe y Alegria: A Catholic NGO that develops national programs for poor families in rural areas.</td>
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<td>VENEZUELA</td>
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<td>• Fe y Alegria: A Catholic NGO that develops national programs for poor families.</td>
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<td>• Center for Research on Integral Human Development Through the Community (CEDIHAC): Promotes social change, integral attention to families and children from conception to 3 years of age, educational programs, health and nutrition services, and research. Focuses on low-income families in Venezuela and extends training internationally. Received an award from the U.S. White House during President Clinton’s administration.</td>
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<td>• Community learning centers (CECODAP): Promotes, supports, and develops actions on the rights of children. Guarantees and finds spaces for children’s participation and develops educational programs for government officials, families, communities, and communication media.</td>
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