



Early Childhood Development in India
UNICEF India Country Office
Guidance and Resources
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Introduction

ICO has identified early childhood development (ECD) as a beam that cut across all programmes. The UNICEF India April 2019 CMT approved to CO's strategy and priority actions for 2019.

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[my.sharepoint.com/:b:/g/personal/gasingh_unicef_org/EQ5JCnVIFhpFox8vi_uw0FwBMAE2ncs8GXXd8tIQwIJBwg?e=RDfUn4](https://unicef-my.sharepoint.com/:b:/g/personal/gasingh_unicef_org/EQ5JCnVIFhpFox8vi_uw0FwBMAE2ncs8GXXd8tIQwIJBwg?e=RDfUn4)

This strategy is based on the UNICEF'S PROGRAMME GUIDANCE FOR EARLY CHILDHOOD DEVELOPMENT by UNICEF Programme Division 2017, a MUST-READ for all Unicef staff working on ECD:

[https://www.unicef.org/sites/default/files/2018-](https://www.unicef.org/sites/default/files/2018-12/UNICEF%20Programme%20Guidance%20for%20Early%20Childhood%20Development%202017.pdf)

[12/UNICEF%20Programme%20Guidance%20for%20Early%20Childhood%20Development%202017.pdf](https://www.unicef.org/sites/default/files/2018-12/UNICEF%20Programme%20Guidance%20for%20Early%20Childhood%20Development%202017.pdf)

The goal of the ECD strategy is that all young children (0-6 years), especially the most vulnerable, achieve their developmental potential from conception to age of school entry. This is enabled by two factors:

1. Equitable access to essential quality health, nutrition, WASH, protection and early learning services that address their developmental needs;
2. Parents and caregivers are supported and engaged in nurturing care and positive parenting with their young children.

To reach their full potential, every child must have access to five inter-related and indivisible components of ECD – Good health, adequate nutrition for the mother and child, security and safety, responsive caregiving and early learning. The present document provides FOs with guide on strategic components of ECD strategy, sector specific interventions and convergent ECD tools, guides, materials. The ICO guidance on ECD is guided by the Nurturing Care Framework which was developed by WHO, UNICEF, World Bank, PMNCH and ECDAN.

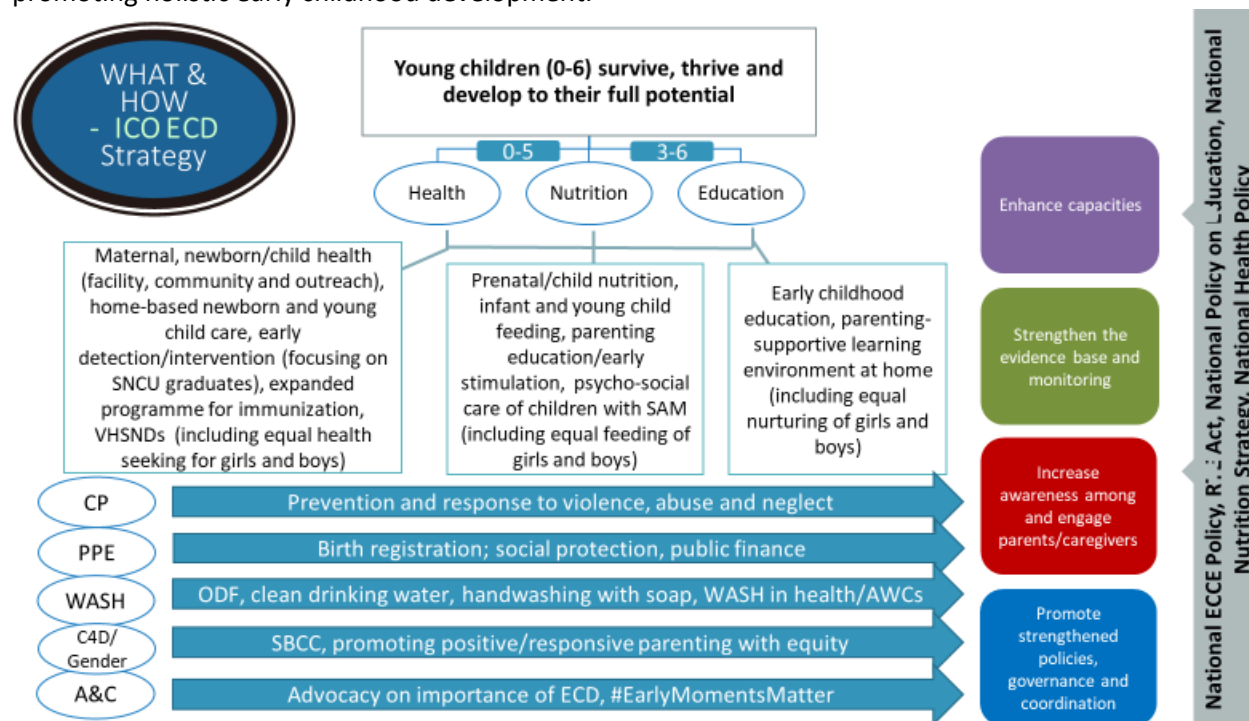
The ICO ECD strategy is guided by theory of change is that *if*:

- (i) there is political will and the effective implementation of a robust legislative and policy framework on ECD, with adequate human and financial resources, accountability and monitoring;
- (ii) there is inter-ministerial/-departmental coordination and convergence, particularly amongst the Ministry of Women and Child Development, Ministry of Human Resource Development, Ministry of Health and Family Welfare, and Ministry of Social Justice and Empowerment;
- (iii) there are reliable and accurate data and evidence to inform policies and programmes;
- (iv) frontline workers and functionaries in the areas of health, nutrition education and protection are equipped with knowledge, capacity and skills in relation to ECD;
- (v) parents (both mothers and fathers) and caregivers are aware of the importance of ECD and provided with the knowledge and skills to care for, protect and promote the psychosocial development of their children;
- (vi) society is more equitable, promoting non-discrimination and the elimination of harmful social norms;

- (vii) health, nutrition, education and protection services are available and utilized by children, mothers, fathers and caregivers

Then, pregnant women and children will be healthy, children will receive quality early childhood care and education and children will be safe and protected, which will contribute towards ensuring young children survive, thrive and develop to their fullest potential.

Based on this theory of change, UNICEF's efforts focus on delivery of health, nutrition, WASH, early learning, early screening/intervention and special needs and parental/family support, towards promoting holistic early childhood development.



ICO prioritizes on delivery ECD interventions through the existing platforms - home, community, AWC, health facilities. This is complemented advocacy and programme actions to support policy and evidence generation to increase access and coverage of child and gender sensitive social protection programmes and convergent social and behavior change on responsive parenting to influence gender and social norms and household level care practices.

This Section provides information on key resources available for ECD programming.

General

Resources	Link to Resources
<p>1. Early childhood development coming of age: science through the life course:</p> <p>Paper highlights the urgent need to increase multisectoral coverage of quality programming that incorporates health, nutrition, security and safety, responsive caregiving, and early learning.</p>	<p>https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)31389-7/fulltext</p>
<p>2. Nurturing care: promoting early childhood development:</p> <p>Paper – provides comprehensive updated analysis of early childhood development interventions across the five sectors of health, nutrition, education, child protection, and social protection. The paper concludes that to make interventions successful, smart, and sustainable, they need to be implemented as multi-sectoral intervention packages anchored in nurturing care.</p>	<p>https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)31390-3/fulltext</p>
<p>3. Investing in the foundation of sustainable development: pathways to scale up for early childhood development:</p> <p>Paper highlights that the burden of poor development is higher than estimated, taking into account additional risk factors. National programmes are needed. Greater political prioritisation is core to scale-up, as are policies that afford families time and financial resources to provide nurturing care for young children. Effective and feasible programmes to support early child development are now available. All sectors, particularly education, and social and child protection, must play a role to meet the holistic needs of young children. However, health provides a critical starting point for scaling up, given its reach to pregnant women, families, and young children.</p>	<p>https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)31698-1/fulltext</p>

<p>4. Global research priorities to accelerate early child development in the sustainable development era:</p> <p>Between February and November 2015, the authors conducted a priority-setting exercise to set research priorities for ECD to 2025. Using the Child Health and Nutrition Research Initiative (CHNRI) methodology, the authors adapted a set of five criteria—answerability, effectiveness, feasibility, impact, and effect on equity—against which an expert group scored research investment priorities.</p>	<p>https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(16)30218-2/fulltext</p>
<p>5. Risk of poor development in young children in low-income and middle-income countries: an estimation and analysis at the global, regional, and country level used country-level prevalence of stunting in children younger than 5 years:</p> <p>Using the 2006 WHO Growth Standards and poverty ratios from the World Bank, the paper compares estimated number of children who were either stunted or lived in extreme poverty for 141 low-income and middle-income countries in 2004 and 2010.</p>	<p>https://www.thelancet.com/journals/langlo/article/PIIS2214-109X(16)30266-2/fulltext</p>
<p>6. Nurturing care Framework:</p> <p>The Framework describes how a whole-of government and a whole-of-society approach can promote nurturing care for young children. It outlines guiding principles, strategic actions, and ways of monitoring progress.</p>	<p>https://apps.who.int/iris/bitstream/handle/10665/272603/9789241514064-eng.pdf</p>
<p>7. Early Moments Matter for every child:</p> <p>UNICEF’s global advocacy report on early childhood development. The document outlines the reasons why government and partners should invest in early childhood development and make it a priority in their economic and political agendas.</p>	<p>https://www.unicef.org/media/files/UNICEF_Early_Moments_Matter_for_Every_Child_report.pdf</p>

<p>8. Care for Child Development Package:</p> <p>Consists of training materials for health workers and supports families to solve common problems in providing good care for young children.</p>	<p>https://www.unicef.org/earlychildhood/index_68195.html</p>
<p>More useful documents on ECD can be found at UNICEF's global website on ECD: https://www.unicef.org/early-childhood-development , including:</p> <p>9. Policy and investment determine children's future, UNICEF fights for the best ones <i>Read the UNICEF's six-point call to action for governments and businesses</i></p> <hr/> <p>10. <i>A guide for health workers and other counselors as they help families build stronger relationships with their children and solve problems in caring for their children at home.</i> <i>Care for child development</i></p> <hr/> <p>11. Read the brief on strengthening learning through play in early childhood education programmes <i>Learning through Play</i></p> <hr/> <p>12. Read UNICEF Senior Advisor on Early Childhood Development Pia Britto's blog post <i>Why Early Childhood Development is the foundation for sustainable development</i></p> <hr/> <p>13. Read about the situation of children around the world, in numbers <i>UNICEF Data has global information about children and early development</i></p> <hr/> <p>UNICEF Early Childhood Development programme</p> <p>14. Early Childhood Development programme guidance</p> <p>15. Early Childhood Development in the UNICEF Strategic Plan 2018-2021</p>	

Health

The ECD activity (activity 5 of output 101 under RCH RWP) covers support to **Home Based Young Child Care programme (HBYC)** of Government of India. While Health leads the activity, it is jointly supported by Nutrition and C4D. The UNICEF strategy for roll out of HBYC at the state and district levels will be on the principle of providing **technical and gap filling support** at state and district level (aspirational & priority districts) with a **full-fledged oversight** on the roll out of HBYC.

1. **State level Support** will be provided through:
 - a) Ensuring sufficient budget allocation in State PIP (INR 2 Crore per district) for various components of HBYC (training, communication materials, job aids, MCP cards, ASHA incentives etc.) *[Health, nutrition and C4D as per state context]*
 - b) Training of Trainers
 - I. Facilitating TOT *[Health, Nutrition and C4D - their respective sessions on request from State]*
 - II. Gap filling printing of training module, job aids, communication materials, MCP card for TOT *[Health lead with support from C4D and Nutrition]*
 - c) Integration of HBYC review in child health reviews, along with partners *[Health, Nutrition]*
 - d) HR mapping of UNICEF supported consultants at district and divisional level *[Health lead with inputs for C4D and nutrition]* and jointly defining their roles and responsibilities for HBYC.
 - e) Preparation of field supportive supervision plan and ensure its implementation *[Health, nutrition and C4D for their respective personnel]*
 - f) For the above activities liaison and regular meetings with ASHA resource center, Child health nodal officer, Directorate of Health and Family Welfare, NHM and other partners *[Health or nutrition lead as per state context]*
 - g) Joint participation in the periodical skype conference call called by UNICEF Delhi
 - h) Joint visits to aspirational or priority districts for planning and supervision
2. **At the district level**, UNICEF will support through the following activities. However, if there are more than one district / divisional level consultant assigned to a district/division from either health, nutrition or C4D, then a lead consultant will be identified, and the other consultant will provide necessary support as requested by the lead consultant.
 - a) Ensure preparation of training calendar
 - b) Gap printing support for training module, job aids, communication materials, MCP card etc.
 - c) Quality assurance of training
 - d) Undertake supportive supervision of home visits under HBYC
 - e) Ensure organization of a one-day joint orientation of ASHAs, ANMs and AWWs. This should be done in coordination with BMO and CDPO. This meeting should be utilized for orientation of new MCP card and topic related to ECD.

- f) Ensure that once in two months a review meeting at block level of ASHAs, ANMs and AWWs is held. Ensure its quality preparation and participate in the meeting.
- g) For the above activities liaison and regular meetings with District level ASHA facilitator, Child health nodal officer, CM&HO, DPM, DPO / DSW, Block level officials, and other partners.

3. **The indicators for tracking** would be:

- a) "Percentage of UNICEF supported districts using revised MCP card "
- b) "Percentage of ASHA workers in UNICEF supported aspirational districts trained in HBYC "

The links to resources relating to Health in ECD is given below:

Resource	Link to resource
Resource Materials	https://unicef-my.sharepoint.com/:u:/g/personal/pkhobragade_unicef_org/EfNqj9FskuRAjYU8Haa1AvkBg_IYUooh1Yx6k2a_ZXTDjA?e=x88HFL

Nutrition

Nutrition programme focuses on the first 1,000 days to mainstream nutrition and development interventions into the government flagship programmes of Integrated Child Development Services (ICDS) and the National Health Mission. Prioritizing on infant and young child nutrition inclusive of responsive feeding strategic thrust is on:

1. Support to National and state Governments to improve coverage, continuity, intensity and quality of ECD services inclusive of early stimulation through responsive feeding and psycho-social stimulation and care of children with severe acute malnutrition.
2. Utilizing the potential of Jan Andolan that has identified building bodies, brains and minds as a rallying point to build capacity of government systems to raise awareness and build the capacity of caregivers on providing nurturing care to improve nutrition and development outcomes of children.

Harnessing the potential of POSHAN Abhiyaan priority will be on improving the quality of Community-based Events/mothers' meeting and home visits by the anganwadi workers and ASHAs (under HBYC) and integration of components of stimulation and responsive feeding into the existing interventions. Geographically focus will be on 39 aspirational districts covered under the HBYC programme. A Brief description of the resources is below.

Resources	Link to Resources
<p>16. Sensory Stimulation & Structured Play Therapy Activities: Activity Guide:</p> <p>This manual is primarily meant for health workers working at Severe Acute Malnutrition Treatment Units. This will help them to support families of children with SAM to facilitate their child's mental, social, physical, language, social and emotional development.</p>	<p>https://unicef-my.sharepoint.com/:b:/g/personal/gasingh_unicef_org/EXo3du_zwdpDqjhqliqjOclBoAeUYGEaehYtHgjaHjBl3g?e=AZgcVs</p>
<p>17. Jan Andolan guidelines and PowerPoint and other materials</p>	<p>https://icds-wcd.nic.in/nnm/NNM-Web-Contents/LEFT-MENU/Guidelines/JanAndolanGuidelines-English.pdf</p> <p>https://icds-wcd.nic.in/nnm/NNM-Web-Contents/LEFT-MENU/Review-Meetings/EC_30-05-2018/POSHAN_Abhiyaan-JanAndolanGuidelines.pdf</p> <p>https://drive.google.com/drive/folders/1qCy95ASz6hFfr25Tzu_ygGU8SkLzqGF5</p>

Water, Sanitation and Hygiene (WASH)

The WASH component of ECD can be broadly categorized under three categories, namely WASH in health facilities, WASH in Schools and Community Sanitation. Some key initiatives under WASH relevant for this reference document includes:

1. **Swachh Bharat Mission (SBM):** Launched in 2014, the *Swachh Bharat Mission* (SBM) or the Clean India Mission, is the world's largest sanitation and behaviour change programme. In rural areas, the Mission is known as the Swachh Bharat Mission-Grameen (SBM-G) and aims to eliminate open defecation in rural India by 2nd October 2019, the 150th birth anniversary of Mahatma Gandhi.
2. **Kayakalp Scheme:** The objectives of the "Kayakalp" Scheme are a) to promote cleanliness, hygiene and infection control practices in public healthcare facilities, through incentivising and recognising public healthcare facilities that show exemplary performance in adhering to standard protocols of cleanliness and infection control; b) to inculcate a culture of ongoing assessment and peer review of performance related to hygiene, cleanliness and sanitation; c) to create and share sustainable practices
3. **Swachh Swasth Sarvatra:** The objective of the 'Swachh Swasth Sarvatra' initiative is to build on and leverage achievements of two complementary programmes – Swachh Bharat Mission (SBM) and Kayakalp – of the Ministry of Drinking Water and Sanitation and Ministry of Health and Family Welfare, respectively. Under this initiative, community health centres in ODF blocks of the country will be allocated INR One million under National Health Mission (NHM) to focus on sanitation and hygiene and Primary Health Centre (PHCs) in each district is awarded for meeting quality standards including sanitation and hygiene.
4. **Swachh Vidyalaya Puraskar:** It is an Initiative to recognize, inspire, and celebrate excellence in sanitation and hygiene practice in Schools. The participation in the award and performance assessment is done through mobile app and website-based application and accordingly the schools are rated from V to I STAR based on the: 6 key essential components of the SBSV package.
5. **Swachh Pakhwada:** Annual fortnightly meeting activity where ministries converge on sanitation related activities, in support of the Swachh Bharat Mission and review the trends and progress on SBM.
6. **Community Approaches to Sanitation (CAS):** The Swachh Bharat Mission is built upon scaling-up a behavior change approach called CAS. When SBM was first initiated, CAS modules were developed by UNICEF in support of the Department of Drinking Water and Sanitation and were rolled out in Trainers of Trainers workshops for subsequent scale-up.

The key resources for State Offices reference and use include:

Resources	Link to resources
WASH in Health Facilities	

1. This manual focuses on the key components of water, sanitation, and hygiene (WASH), which are the important determinants of health and well-being. It is designed for the frontline workers (anganwadi workers, ASHA/USHA etc.)	https://drive.google.com/open?id=1KaNGs-6ZeDhvwNsb3Ea-LfH2BSgqW8b
2. The guidelines issued under the joint initiative of 'Swachh Swasth Sarvatra'	http://tripuranrh.m.gov.in/QA/Guideline/SwachhtaGuidelinesforPublicHealthFacilitie
3. National guidelines for Clean Hospitals developed under KAYAKALP.	https://mohfw.gov.in/sites/default/files/7660257301436254417_0.pdf
Wash in Schools	
4. Swachh Bharat Swachh Vidyalaya Guidelines comprises of key Essentials of WASH in Schools like – water, sanitation, handwashing with soap, operations and maintenance, behavior change activities, and capacity building. It also explains about the norms for – sanitation facility, daily handwashing with soap before mid-day meal, drinking water along with the teacher, student's role, and capacity building	https://drive.google.com/file/d/10KebnEEem93-Q4MoLWfZw6-XO86SH8Ncg/view?usp=sharing
5. Swachh Vidyalaya Puraskar guidelines	http://mhrd.gov.in/sites/upload_files/mhrd/files/upload_document/Svp.pdf ; http://mhrd.gov.in/sites/upload_files/mhrd/files/upload_document/Swachh_Vidyalay_Puraskar_Guidelines.pdf
6. The Menstrual Hygiene Management Guideline is issued by the Ministry of Drinking Water and Sanitation to support all adolescent girls and women. It outlines what needs to be done by state governments, district administrations, engineers and technical experts in line departments; and school head teachers and teachers.	http://unicef.in/CkEditor/ck_Uploaded_Images/img_1507.pdf
7. Guidelines for implementation of “kayakalp” initiative are given in the link.	http://qi.nhsrindia.org/sites/default/files/Implementation%20Guidebook%20for%20Kayakalp%20final%20version.pdf
8. A guiding chapter by WHO on treatment of menstrual waste management system and incineration	https://drive.google.com/open?id=1ICWOzWykUuwDipxBvHcsa7Fzg_tXJ3ED
9. This synthesis report from South-East Asia and Pacific region provides a concise overview of the experiences of girls and women related to MHM	https://drive.google.com/open?id=1XoGWCs9TfTKstatiaPT8ItLfc-EK1KWD
10. Good Practice Guidance Note: provides an overview of good practices that contribute to ensuring an MHM-supportive environment; whether at school, at work, in the household	https://drive.google.com/file/d/1hAmE88jNfjNEitkya_S00XKHczCjAlVs/view

and the community, or during a humanitarian emergency.	
11. This compendium documents the successes, challenges, and lessons learned during the planning and Implementation of MHM in schools globally	https://drive.google.com/open?id=1F9ML80SOuvzEvuLxushkq1Wsf7sYZXDG
12. A documentation of the approaches taken up in the state of Rajasthan for the WASH in Schools, with key lessons	https://drive.google.com/file/d/1FcsZ1GeT9xcPV4rRB42nNlxMklplgBm2/view?usp=sharing
Community Sanitation	
13. Steps for emptying a twin-pit toilet and how to use waste as compost/fertilizer	https://drive.google.com/file/d/1EZ8K8rkOoLZZqCz1x1uhUKoG_B_F-Oj/view
14. The summary report to the Financial and Economic Impact of SBM mission in India. The report assessed the economic impact of sanitation coverage for 10,068 households across 12 states with the greatest ratios of open defecation practice. The study divided findings by economic quintiles to highlight how economic and societal costs were disproportionately shouldered by the poorest populations. It also found that, on average, households living in ODF villages saved approximately INR 50,000 every year and that the total benefits exceeded costs by 4.7 times for said households.	https://mdws.gov.in/sites/default/files/UNICEF_Economic_impact_study.pdf
15. Swachh Pakhwada documents	https://drive.google.com/open?id=1dWgF_ihjkv6lMobiOgmo7ANFYNNrfI7k
16. Community Approaches to Sanitation (CAS) Modules	<ul style="list-style-type: none"> i) Module 1 for senior managers: https://drive.google.com/open?id=1cmO_Svuy2t-63uWUR3LqGwZuYl7o9At5 ii) Module 2 for mid-level managers: https://drive.google.com/open?id=1xGQM_XZ48AyISE2Ymvv1NJFRxu6tRWsU4 iii) Module 3 for master trainers: https://drive.google.com/open?id=1yys2wzHk5ycsFOoS8XqdiawASJvbZCUO iv) Module 4 and guidebook for facilitators: https://drive.google.com/open?id=1yXICxd_e8agrd764CRJs86ce6ZTF8osx9 v) Module 5 for community facilitator: https://drive.google.com/open?id=1EsVzo_tQZ5rTlxvBmdG1EPI4pvE01mRb

Education

Education is an integral part of ECD. Continuity to primary school, access to quality childcare and preschool, home opportunities to learn and explore, books, toys, play materials, home visits and parenting all figure prominently under ECD. Below are the descriptions of some key documents in relation to education within ECD:

1. **Early Learning Development Standards (ELDS)** – The Early Learning and Development Standards are designed to be used as a reference and resource, to support the professional development of those responsible for the care and education of our youngest citizens. These standards are intended to deepen understanding of how children develop and help in understanding how to respond to their readiness for new interactions, experiences, activities, and challenges.

These standards are meant to complement and coordinate with the ECE curriculum. These could be referred while designating teaching-learning materials, monitoring of children's progress and as inputs for developing training materials for frontline workers.

2. **National ECCE Curriculum (Ministry of Women and Child Development):** To ensure optimal development for all children there is a need to create a planned curriculum framework, encompassing developmentally appropriate knowledge and skills, with flexibility for contextualization and diverse needs of young children. The purpose of this framework is to promote quality and excellence in early childhood education by providing guidelines for practices that would promote optimum learning and development of all young children. Each programme is expected to develop its own curriculum to meet the needs of its children, their families, the specific setting, the linguistic culture and the local community. However, the programmes should be based on the curriculum principles and guidelines laid down in this framework.
3. **National prototype of pre-school education kit:** Given the importance of play and play materials, ICDS has made a provision of Pre-School Education Kit in *anganwadi* centres. In this context, this document has been prepared after reviewing the existing literature on ECE. The national pre-school kit is available on the link
4. **National prototype of activity books for children:** The links below are for prototypes of activity books which can be used as a guide while developing state specific activity books for children 3-4-year-old, 4-5 -year-old and 5-6-year-old children. This includes worksheets which support the development of fine motor, creative, cognitive, emergent literacy and numeracy skills for young children. These activity books cover the progression of concepts and skills that are age and developmentally appropriate.
5. **National prototype for child assessment cards:** Monitoring the progress of every child enrolled at the *anganwadi* provides feedback to the *anganwadi* worker as well as parents on how their child is developing. This progress must be monitored for all domains of development. MWCD developed child assessment cards, to record the progress and identify children who need additional support. MWCD developed child assessment cards for the age groups of 3-4 years, 4 to 5 years and 5-6 years. The *angawadi* worker must assess children's progress on a quarterly basis.

6. **Anganwadi workers ECE training module:** This training module is part of the job training module for Anganwadi Workers and focuses only on the early childhood care and education (ECCE) part of the training. This module is planned for a period of 5 days out of the 26 days allocated for the job training. The purpose of this module is to guide trainers to train *anganwadi* workers so that they can plan and conduct appropriate ECE activities for 3 to 6-year old. It is designed to provide the *anganwadi* worker a basic understanding of the ECCE curriculum and pedagogical approaches to ensure optimal and holistic development of young children so that they are ready to start formal schooling at the age of six years. It also includes a component on psychosocial development of children below the age of 3 years, to help Anganwadi Workers counsel parents/caregivers on early stimulation. It is expected that this training will be followed by periodic refresher or thematic trainings for further knowledge and skill enhancement.
7. **E-learning modules for ECE (MWCD):** Ministry of Women and Child Development with technical support from UNICEF has developed 14 e-learning modules (21 sessions) on Early Childhood education (ECE) to strengthening the pre-school programme. At present the e-learning modules are available in Hindi and are available on the E-ILA portal of POSHAN Abhiyan. In addition, mobile nuggets (2-3 mins videos) have been developed based on the content delivered in these modules. These videos can be shared on social media. The e-learning modules can be used for periodic refresher or thematic trainings for further knowledge and skill enhancement.
8. **Quality standards for ECCE:** The Quality Standards framework identifies the key principles, indicators and exemplary good practices required for assuring quality in Early Childhood Care and Education (ECCE) services. The framework allows programme's to assess quality and identify the possible lacunae that need to be addressed if quality ECCE is to be provided.
9. **ECE Quality Assessment Tool:** The purpose of developing this tool is to support ICDS supervisors in understanding the quality of ECE processes in *anganwadi* centres using a scale and use the evidences for planning demonstration and mentoring activities. The tool was developed by UNICEF Maharashtra with support from CECED, Ambedkar University, to assess the quality of ECE in *anganwadi* setting. This tool has been validated in the field across nine states.
10. **Materials developed by state offices for positive parenting**
 - a. Chhattisgarh state office (Sajag)
 - b. Maharashtra state office (Samvedansheel Palak)
 - c. Rajasthan state office (Sab Rang)

Resource	Link to Resource
1. Early Learning Development Standards (ELDS)	https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_or_g/EbdxiH398EBAoNcU80kNGn0BxKGNA2h_EindM2Tn_Hgtsw?e=ejseMH
2. National ECCE Curriculum (Ministry of Women and Child Development)	https://wcd.nic.in/sites/default/files/national%20ecce%20framework%20final.pdf
3. National prototype of pre-school education kit	https://wcd.nic.in/sites/default/files/Pre-School%20Education%20Kit_1.pdf

4. National prototype of activity books for children	<ol style="list-style-type: none"> 1. https://wcd.nic.in/sites/default/files/Activity%20Book%20for%203-4%20years%20Children_1.pdf 2. https://wcd.nic.in/sites/default/files/Activity%20Book%20for%204-5%20years%20Children_1.pdf 3. https://wcd.nic.in/sites/default/files/Activity%20Book%20for%205-6%20years%20Childrenl_1.pdf
5. National prototype for child assessment cards	https://wcd.nic.in/sites/default/files/CHILD%20ASSESSMENT%20CARD%203-6%20YEAR%20OLDS_0.pdf
6. Anganwadi workers ECE training module	https://wcd.nic.in/sites/default/files/EEC%20Training%20Module%20for%20Anganwadi%20Workers_1.pdf
7. E-learning modules for ECE (MWCD)	<ol style="list-style-type: none"> 1. https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/EZLyeTbjwXFAlh48cGysU9YB5-pKk6HVC0cRjRzncxS74A?e=PitLef 2. https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/EVtPjES0jiJNhKqoHm2jYgIBLTB-0HH6uBEEgi_XBh2UEg?e=LOWOXD
3. Quality standards for ECCE	/www.nipccd-earchive.wcd.nic.in/sites/default/files/PDF/Quality%20Standards%20for%20ECCE.pdf
4. ECE Quality Assessment Tool	https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/EZLyeTbjwXFAlh48cGysU9YB5-pKk6HVC0cRjRzncxS74A?e=PitLef https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/EVtPjES0jiJNhKqoHm2jYgIBLTB-0HH6uBEEgi_XBh2UEg?e=LOWOXD
5. Materials developed by state offices for positive parenting	<ol style="list-style-type: none"> a. Chhattisgarh state office (Sajag): https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/EYiYT9YvOa1PvFd8rVM5jh0B0amLftx4QD9ucHDDGUbQw?e=Lb8USR b. Maharashtra state office (Samvedansheel Palak): https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/ER1vBYTqHmNCuEBrAty9RyIBiw2XmgCh0mmGq-kblfj2ow?e=5LINvs and https://unicef-my.sharepoint.com/personal/sahuja_unicef_org/_layouts/15/onedrive.aspx?id=%2Fpersonal%2Fsahuja%5Funicef%5Forg%2FDocuments%2FSunisha%2FCommunication%20material%20for%20parenting%2FMaharashtra%20Responsive%20caregivi

	<p>ng%5F3%2D6%5FPart%20%2Epdf&parent=%2Fpersonal%2Fsahuja%5FUnicef%5Forg%2FDocuments%2FSunisha%2FCommunication%20material%20for%20parenting&cid=b5472bec-d258-4c2c-8f93-bc7aa31f4db1</p> <p>c. Rajasthan state office (Sab Rang): https://unicef-my.sharepoint.com/:b:/g/personal/sahuja_unicef_org/ERcd8wF8RQtMkhRXQ0f3j4gB0oBgj-G7xKOz_CFVIFyp7Q?e=1S7pCR</p>
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Child Protection

Child Protection is an important component of ECD. Reducing adversities by preventing abuse, neglect and violence; providing non-institutional family care and early intervention for vulnerable children and birth registration address the security and safety dimension of ECD. With respect to child protection, given below are some key explanations and interventions that feature within ECD:

1. **Prevention Violence against Children at Early Childhood stage through Parenting:** There is strong scientific evidence that exposure to any form of violence during early childhood – emotional, sexual, and physical – has a significant negative impact on children’s brain development and compromises children’s development, health and education outcomes¹. This is a stage where a lot of emphasis is given on nutritional and early childhood development activities. It is generally assumed that children in the age group of 0-6 years would not face violence or violent disciplinary methods. However, evidence shows otherwise. A recent formative study sponsored by UNICEF (2019) endorses the fact that often parents and caregivers use violence to discipline children and the study recorded 33 different forms of violent behaviours to which children are exposed. Children are equally affected by witnessing violence in the family – violence on other siblings or domestic violence.
2. **Reasons why parents and caregivers use violence?** Of many, here are some: first are cultural norms surrounding gender roles and parent–child relationships. Second are provoking factors – severe life stress: events with severely threatening long-term implications/long-standing difficulties (e.g. job loss/debt). Third is that parents do not know any other way to control the behavior of children. It is found that children with disabilities are more likely face violence. Lastly, a lack of support systems for parents
3. **Parenting programmes and their efficacy:** Interventions for improving parenting practices and providing family support including positive parenting strategies to work with families/caregivers – by WHO and South Asia Coordinating Group on Action against Violence against Children (SACG), & South Asia Initiative to End Violence Against Children (SAIEVAC) have shown positive results for preventing VAC in early childhood. WHO’s model for Parenting for Lifelong Health has programmes for each age group, including for early childhood. The programme is grounded in collaborative social learning behavioural change techniques. It actively engages parents in building positive parenting skills to improve parent-child relationships and reduce harsh discipline. It uses collaborative, non-didactic methods such as group discussions, illustrated stories of parent-child interaction, role-plays to practice parenting skills, home activities assignments, and collective problem-solving. It reiterates the importance of building a strong, positive relationship with children for both father and mother and having a healthy parent-child and other caregiver interaction every day. This means enabling both parents (and other care givers including older siblings, grandparents) spending quality time with young children playing age-appropriate games, learning language and praising the child. At the same time, it is important to build a support structure for parents at community level, especially for those from economically and socially marginalized communities

¹ Tomoda, A., Sheu, Y., Rabi, K., Suzuki, H., Navalta, C. P., Polcari, A., & Teicher, M.H. (2011). Exposure to parental verbal abuse is associated with increased gray matter volume in superior temporal gyrus. *NeuroImage*, 54: S280-S286.

4. **Support for parents:** Following are a few ways to support parents:
- Parenting programmes promoting positive parenting using culturally sensitive methods
 - Awareness generation on effect of exposure to violence (direct and indirect) on children's growth and development through SBCC
 - Sensitization on risks and possibilities of different forms of violence for children in early childhood including sexual abuse
 - Help in developing basket of activities for parents (and caregivers) to engage with children which would also help them to establish clear limits, house rules and appropriate forms of supervision
 - Importance of child-led play and praise to develop nurturing relationships
 - Help parents in alternative ways of dealing with children having challenging behaviours (like tantrums)
 - Develop and strengthen community-based mechanisms for parents (AWCs/crèche or day-care for working parents)
 - Strengthen social protection schemes for poor and marginalized families
 - Ensure availability of early childhood care services for nutrition, health and ECCE

Resources	Link to Resources
1. A manual for AWWs on Activity-Based Awareness & Learning for Pre-Schoolers & Children with Developmental Disabilities developed by National Institute of Mental Health & Neurosciences (NIMHANS).	https://unicef-my.sharepoint.com/:b:/g/personal/gasingh_unicef_org/Ec8vh-7_Rb9HhQXOt7gUzU4Bh_rqsBu05KnVwFLE5jUnJQ?e=7gpTMg
2. My safety book – a resource book on personal safety education for pre-school children developed by Arpan. This can be used by AWWs, pre-school teachers and parents.	https://www.arpan.org.in/wp-content/uploads/2018/08/My-Safety-Book.pdf
3. A manual on Parenting for Lifelong Health for young children.	https://www.who.int/violence_injury_prevention/violence/child/PLH-for-Young-Children-Facilitator-manual-English.pdf

Communication Advocacy and Partnerships

Communication and advocacy are important implementing strategies through which key messages in relation to ECD can put into public domain. CAP is using many strategies, from Parenting Masterclasses, challenges to screening videos to engage the public in discussion around ECD

Resources	Link to Resources
Final dubbed Hindi Mini Parenting Masterclasses	
1. 7 things you need to know about parenting	https://www.youtube.com/watch?v=NblCrG5s4IU
2. Building Brain Through Play:	https://www.youtube.com/watch?v=IseleZE83UM
3. Baby Talk	https://www.youtube.com/watch?v=be20xtqLGFU
4. Breastfeeding	https://www.youtube.com/watch?v=9IBSrijMpZVo
5. Music for a baby's brain development	https://www.youtube.com/watch?v=-CQ39enyyFc
Challenges	
6. Possible challenges relating to Parenting	https://innovate.mygov.in/unicef/
Sachin videos on Parenting	
7. Being the best possible parent	https://drive.google.com/file/d/17oQmfldBjZBYKHoRcHnTOYn09zze1bfU/view
8. Facts every Parent should know	https://drive.google.com/file/d/1kpjhXEhhfibMyoqeaM_Fw9yfSApmjpVy/view

Communication for Development

Communication for Development makes up a crucial part of ECD. Social Behavior Change Communication (SBCC) and promoting positive and responsive parenting with equity increases awareness and constructively engages parents and caregivers. C4D will contribute to ECD by converging SBCC on responsive parenting, influencing gender and social norms and promoting behaviors linked to services. The ECD Strategy has a critical piece on “responsive parenting (RP)” which is purely a cross-sectoral effort. This component will be led by C4D but with close collaboration and support of all programmes. The following is a detailed note on C4D tools and materials for ECD:

1. Standard for ECD Parenting Programmes:

This global UNICEF publication aims to guide practitioners interested in early childhood development through a set of recommended standards for parenting programmes. This document was created in response to the demand from programme implementers and constructed as part of the broader Early Childhood Development (ECD) global agenda to strengthen parenting as families strive to do the best for their children, also in humanitarian crises. The document builds upon several bodies of evidence and published systematic review studies on parenting including A Systematic Review of Parenting Programmes for Young Children in Low and Middle-Income Countries and the ECD series From Science to Scale published by The Lancet in October 2016. This document identifies the five domains that should be the focus of parenting programmes - physical caregiving, stimulation practices, support and responsiveness, structure and socialization

2. ROSA Webinar on Transforming Parenting under Global Programmes:

This is the slide deck from the ROSA Webinar on Transforming Parenting. It includes understanding the role of C4D in the global ECD strategic framework, the domains of parenting & characteristics & considerations for effective parenting programmes, highlights of systematic research on parenting programmes, global standards for parenting programmes and some global examples of C4D in responsive parenting.

3. Systematic Review of Parenting Programmes:

This global guidance document is based on a research of Early Childhood Development parenting programmes, in low and middle-income countries. It addresses the knowledge gap and provides evidence for better programming for children and families. It identifies what works and what is necessary to strengthen parenting programmes.

Resources	Link to resources
1. Standard for ECD Parenting Programmes: Practitioner's Guide	https://unicef-my.sharepoint.com/:b:/g/personal/amalhotra_unicef_org/EbWlqkD4gUJPpvnvIWS1UZsBY8shddMkFvJOLMw8TVmIFg?e=S6C7km
2. ROSA Webinar on Transforming Parenting under Global Programmes: ppt	https://unicef-my.sharepoint.com/:p:/g/personal/amalhotra_unicef_org/EQwie5tmEYFDskTGU9_z834BtoUqHQPUWGc8rvQclHb0g?e=POaFif

3. Systematic Review of Parenting Programmes: Global Guidance	https://unicef-my.sharepoint.com/:b:/g/personal/amalhotra_unicef_org/ERTgv94ECIFHjzxvx8IOIb0BNYAsRMXEDjbvaWtreQjAw?e=3Vh1dB
4. Influencing Parenting: This is a 'work in progress' note on the strategies C4D will use to influence responsive parenting. This is presented to the ECD working group and will be finalized within the group. A ppt on this note is being developed.	https://unicef-my.sharepoint.com/:w:/g/personal/amalhotra_unicef_org/ERwBjwn18aVFjZzTvV4aMnMBvAGvK_grxUN8wlieeGN61g?e=uN0erk
5. Developing a Parenting Strategy: This is a presentation made by C4D at the Education network meeting. Gives the thinking for the development of a strategy on responsive parenting.	https://unicef-my.sharepoint.com/:p:/g/personal/amalhotra_unicef_org/ES6One4_FMp-zu6ayo6GoB6C2IRp_XZ3HFILVzu_M6mQ?e=ugBsH0
6. Key messages on responsive parenting: Work in progress document that puts together all the messages that cover ECD areas	https://unicef-my.sharepoint.com/:w:/g/personal/amalhotra_unicef_org/ETbvYu7J5MdNhgZSnVqSzNoBYaZhA8i1M2XAali6yyVI_A?e=laLuuT
7. Mother and Child Protection (MCP) Card	https://unicef-my.sharepoint.com/:b:/g/personal/amalhotra_unicef_org/EeAV_iN2eWJOpcW3SRJqY2kBP8Xdw_k8gx5SI5HEZRjwEzQ?e=cCTIIE
8. MCP Card Guide Book (Draft	https://unicef-my.sharepoint.com/:b:/g/personal/amalhotra_unicef_org/ESpsyyY3o4IMvol12YA3l38BeDjGWOu4Korm9e7_nqkLRw?e=flrQGg
9. MCP Card Training Materials: Draft ppt	https://unicef-my.sharepoint.com/:p:/g/personal/amalhotra_unicef_org/EV6R4_iElm5LhmHimZakN5kBdF2cWp6-Xlwwb4Jhi-UE-Q?e=notS6N
10. Positive Parenting Cards (Rajasthan)	https://unicef-my.sharepoint.com/:f:/g/personal/amalhotra_unicef_org/EnHmgirPwV1Ov17UjFwkXZoBQmyeOXMrMcBxmhsCpdUp7w?e=hh3dvL
11. Jan Andolan Materials	https://drive.google.com/drive/folders/1qCy95ASz6hFfr25Tzu_ygGU8SkLzqGF5

Social Policy, Monitoring and Evaluation

1. **Public Finance for Children:** It is critical for budgets at the Union and state levels to allocate sufficient funds for early childhood development (ECD). Evidence generated for 16 major states of India (where Unicef works) reveals public spending needs to be increase for 0-6 years age group. It is seen that a higher share of child related public spending goes to 6-14-year-old followed by 14-18-year-old. The 0-6 age group receives relatively lower share of Total Child Expenditure (TCE) and states like West Bengal, Rajasthan, Chhattisgarh, Maharashtra and Andhra Pradesh spend below 5 percent of TCE on this group despite their population share (within children of 0-18 age group) being much higher (nearly 28 percent). Given the fact that the returns on investments (RoI) is highest for the children in this age-group (at 13 percent) and the first 1000 days of child are critical for overall development (both physical and cognitive) of the child, this age group deserve a higher level of attention.

Table: Age-group wise population versus relative spending

AGE	0-6 years		6-14 years		14-18 years		Multiple age group
States	Population (percent)	Expenditure (percent)	Population (percent)	Expenditure (percent)	Population (percent)	Expenditure (percent)	Expenditure (percent)
Kerala	30	7	43	44	27	46	2
Tamil Nadu	29	11	43	41	28	39	9
Telangana	27	10	44	39	29	35	16
Karnataka	30	11	42	44	28	26	19
Maharashtra	30	5	43	48	28	38	8
Andhra Pradesh	27	5	44	43	29	38	14
Odisha	29	16	44	49	27	33	1
Assam	31	10	44	56	25	31	3
Chhattisgarh	30	5	44	59	26	33	3
Gujarat	30	10	43	59	27	23	8
West Bengal	28	5	43	39	29	43	13
Rajasthan	30	4	44	48	26	46	1
Madhya Pradesh	30	11	44	43	26	34	12
Bihar	32	11	47	69	21	17	4
Uttar Pradesh	28	11	45	74	27	13	1
Jharkhand	31	13	45	65	24	15	6

(Source: Public Expenditure on Children in India; CBPS supported by UNICEF, 2019)

Guidance:

- a) share evidence with the departments of WCD and Finance and Planning in the states and build understanding on the need for higher allocations for 0-6 as well as gap in both allocation and implementation;
- b) participate in pre-budget consultations with Finance Departments and WCD and provide evidences and policy options to increase allocation;
- c) work closely with a technical partner to support child budget statement and more in-depth analysis (PER and funds with special focus on funds going to ECD,
- d) take up the issue with Department of Panchayati Raj to advocate all Gram Panchayats to earmark a minimum level of GPDP budget for ECD activities at GP level (refer programme guidance from health, nutrition, education, child protection and WASH for details of activities).

2. Decentralised Planning and Child friendly Governance:

At the state level, the Field Offices need to work closely with the Department of Panchayati Raj and take the opportunity to advocate for ECD, the importance of first 1000 days, and seek an advisory to integrate ECD as a priority in the preparation of the Gram Panchayat Development Plans (GPDP). The FOs may also identify and seek opportunity for presentation on ECD during the state level meetings of Department of PR with the District Collectors and CEOs of the Zilla Parishad and advocate the importance of GPDPs covering early childhood nutrition, care, registration of pregnant women, the importance of health of adolescent girls and delaying age of marriage, etc.

At the district level, the Field Offices may also work closely in an aspirational district to demonstrate at least one model block with model GPDPs that integrate concerns on ECD as part of the planning, budgeting and involve village health and nutrition committees (VHSNC) to review the status of health of mothers and children through Anganwadis and special Gram Sabhas. A suitable technical partner may be chosen to support District Administration create a network of stakeholders (NGOs, academic institutions, SHG committees, VHSNC, officials) to lead the initiative.