

Evaluation of Healing and Education through Art (HEART) ECD Pilot Project

2010July-2011August



Setogurans National Development Services, Lalitpur

Introduction

Background

Performances of an adult depend upon the inputs he/she has obtained in early years of life. The foundation of life skills such as problem solving, decision making, managing pains and pleasure, enhancing the quality of independency and social adjustment is set in the early stages of an individual life. The quality of early care and development practices in one's life also helps him/her to uncover their potentiality and develop to be a good human. It is essential to provide quality ECD services to each individual child.

Children learn from their environment. They start learning immediately at birth. With the foundation of learning experiences children's mental, social, physical and emotional development occurs in a balanced manner. They learn what they hear, see, experience and innovate. Learning is highly affected by inherited endowment and available environment. Children learn through various kind of games/plays and activities.

Art and creativity is one of the important approaches of learning. A child is full of creative potentials which can be flourished by providing them due opportunity which sufficient supports and feedbacks. ECD centers primarily are established to address children's need of development in the early stages of their life. It provides opportunity to express children's feelings and potentials. Children express their emotions in different ways, which make them free of mental physical problem. Children have strong desire to take initiatives but if the adult interferes needlessly or criticizes them unconstructively they feel guilty and inadequate.

ECD centers help Children learn to understand social relationships. ECD centers also provide them with opportunities for constructive games and which help them to share joy, pain, and, also to cope with victories and disappointments. The question of abuse, discrimination, threats, conflict is highly mental and physical hazards in the early life of children.

Status of children

Population of children in Nepal covers 18% of its total population. Children under 5 years of age cover 15% of total population. Government of Nepal envisaged one year ECD program for four years of age children. About 30 % of four year's age children are not receiving institutional ECD program. There is challenge in access, participation, equity and quality in ECD services for socially exclusive children. The internal as well as external environment for early year's children is of major concern for ECD promoters. Domestic and well as political environment of nation has affected children in their development and educational achievement. According to National coalition for children as 'Zone of Peace' records around 500 children had lost their life, more than 500 injured, around 8000 had lost their parents and many children are psychologically traumatized. It also notes that 3,705 schools were affected and 40000 were internally displaced. 14 year's political instability and unstable government deficiently affected children and family in the course of daily living. Apart from this situation, it needs to explore the difficulties in upbringing of children in hazardous situation. How they are coping with the daily problems? How far the children's difficulties are addressed in the program? Who are taking initiation in understanding children's sufferings under poverty and conflict situation? Are ECD centers proving opportunities in improving their creativity and arts? In this regard a pilot project on "Expressing feeling through Art" in ECD was implemented in conflict affected community of two Baglung and Kapilbastu District to receive the answers of sensitive queries.

Baglung is one of the conflict affected district lies in between Parabat, Pyuthan, Gulmi, , Myagdi, Rolpa and Rukum. There are people who are affected directly by armed conflict. Likewise Kapilwastu lies in between Rupandehi, Dang, Gulmi, Arghakhchi Lumbini and Bihar- the north part of India . Seto Gurans has been working in the field of "Quality Opportunities for ECD" program in collaboration/partnership with DEO, and SC since 2004 in Baglung. At present, there are 304 ECDs in Baglung district, out of which Seto Gurans has provided support for quality ECD opportunities to 107 centers (31 VDCs and 1 Municipality) under this project. In 2010 Setogurans supported 38% children (from 3 to 5 years' age) got access to ECD centers in 5 focused VDCs. That is to say even now 62% of the children are out of the reach from the services. The gross enrollment of 3-, 4 years' age children is 58.7(b-55.8,G-58.7) in which Dalit children are 1885 out of 8888 (4549-boys 4339 girls).

There are altogether 484 centers established with support of DEO in Kaipilbastu district. Setogurans Child development and Sunsine community Development service are working in support of ECD centers which are established by DOE Kapilbastu. Out of which 19 ECD centers supported by Sunsine Community Development Organization in three conflict affected VDCs(Udyapur, Manpur and Thunia). According to Flash report 2010/11 the gross enrollment of 3-4 years age children is 68.5 % in 2010/11 (Flash, 2010/2011). The data shows 32% of children are still out of ECD service.

The pilot project implementation VDCs are in remote conflict affected community, where the people do not have enough educational and economic resource. ECD center needs support for the basic standard mentioned in National minimum standard. The children are facing awkward situations for emotional, physical social and cognitive development. The environment has badly affected the qualitative learning process.).

In this regard Setogurans National Child Development Services has supported the pilot implementer partner organization in building capacity, bringing awareness and coordination with stakeholders in "Expressing feeling through Art " , based on "Healing and education through Art/Art Therapy" concept in Baglung and Kapilbastu districts.The project period

The objectives of pilot project are as following

1. To identify ability of targeted children to express their feelings and views through drawing and painting
2. To find out art components in ECD centers environment as a means of expressing feelings and views of children.
3. To know the ability of understanding child's emotions among ECD centers, parents and concerned stakeholders.

The purpose of pilot project assessment/evaluation is to identify the **Relevancy,** **Effectiveness** and **Efficiency** of HEART pilot project in conflict affected children in ECD,center. Art activities in expressing children's feelings, thinking, perception etc and how ECD centers, parents and stakeholders have addressed the need of holistic development of child in the target area of the ECD centers of districts. More specifically the objectives of assessment seeks answers of following questions.

1. Relevance: Was the project a good idea given the situation needing improvement?
2. Effectiveness: Have the planned purpose, objectives, outputs and activities been achieved? Why and why not?
3. Efficiency: Were inputs used in the best possible way to achieve outcomes? Why or why not?

Project Evaluation Questions

1. How and to what extent the emotional competence of children was progressed?
2. How do parents, MC and stakeholders perceive children's emotional development through Art activities?
3. How was the ECD environment able to develop the emotional competence of the target children?
4. How far Art therapy approach is appropriate ECD?

CHAPTER II

METHODS AND PROCEDURES

The assessment of the pilot project will be done in two districts of western region of Nepal. Assessment has been designed on the bases of relevancy, effectiveness and efficiency of HEART Project Monitoring and Evaluation framework. The methods and tools of the study will be developed for different target samples. The communities and ECD center will be selected from among good satisfactory and weak Implementers from Baglung and Kailbastu districts. The sample for assessment/Evaluation is given as following:

Table 1.

Assessment /Evaluation Sample

S n	Districts	VDCs	Total No. of ECD centers (30%)	Facilitat ors(30%)	Childre n(25%)	Adults (Parents/MC,DOE,DEO/RP Doctor, Psychologist (33%))						
						P	MC	DE O	Dr.	ECD Exper t,Trai ners	Artist	Psyc holo gist
1	Baglung	Ghimgithe, Gwalichaur , Jaljala	2 4	2 -	3x8 3x8 3x8	4 4 -	3 3	2		3		
2	Kapilbastu	Udayapur, Manpur, Thuniyan	1 1	1 1	- 6 6	4 4	3 3	2		3		
3	Kathmand u							1	3	6	2	2
	Total				82	25	12	5	2	12	4	2

Sampling procedure

The sample will be selected through stratified sampling of ECD center, children, and case studies.

Criteria for selection sample

1. Inclusion –Gender, Ethnicity, Dalit
2. Community and School based
3. Conflict /Violence affected
4. Terai and Hill community
5. DEO and NGO partnership
6. HEART project intervention

Tools

1. Interview
2. Focus group Discussion
3. Observation
4. Assessment
5. Document Review
6. Case study

Project Evaluation Team

A. Advisory team

ECD experts-2
Psychologist-1
Clinical Counsellor-1
Pediatric Doctor-1
INGOs Education PM-
INGOs thematic-1
DOE ECD expert-1
Artist-1
NGO representative-1

B. Evaluation Team

Consultant-1

ECD expert-1

Coordinator-1

Researcher-3

Time line

July23-August 29, 2011

Date	Activities	Venue	Duration(Days)	Responsibility
June	Study Design	Lalitpur	3	Coordinator
July	Evaluation Tools development		2	Evaluation Team
July	Meeting with Advisory team and finalization		1	Coordinator, Advisory team E.team
7 th -20 August	Data collection at Field	Baglung, Kapilbastu	15	External Evaluator, Researchers Thematic Researchers
15-25 August	Data analysis	Lalitpur	5	Team
22-28	Report writing	Lalitpur	10	Team
29 th	Consultation Meeting	Lalitpur	1	Advisory team and Experts
30 th	Dissemination	Kathmandu	1	Consultant
	Total		35	

Annex-1

Tools and Samples

Respondents	Analysis	Sample	Tools	Method
ECD center	SPSS	10	Observation checklist	Observation
Children	SPSS	84	Interactive Observation, Checklist Work sheet	Observation Assessment
Parents, MC	Qualitative analysis	27	Probing Questions	FGD
Facilitators	Qualitative analysis	10	Probing question	Interview
DEO, RP,ECD focal person	Qualitative analysis	5	Probing question	Interview
Consultants	Qualitative analysis	20	Questions	FGD
PM, Trainers, Tech persons	Qualitative analysis	5	Probing questions	Interview

Annex-2

Probing Questions for Focus group Discussion with Parents

1. Increase ability of targeted children to express their feelings and views through drawing and painting.

Children

1. How far are children able to express their feelings and views **art activities such as drawing/painting, songs/story/dramatic play and sand,clay/play dough and so on.**
2. .What are the medium of expression most children use in ECD
3. Do all children express their feeling through art in non violence manner?

2. Introduce art components in ECD centers as a means of expressing feelings and views of children.

1. How is the environment of ECD center with respect to relevancy, efficiency and effectiveness?
2. How is the learning areas organized in access of children?
3. What measures are adopted in management of art corner?

S3

3. To improve ability of understanding child's emotions among ECD centers, parents and childcare homes.

Parents FGD

1. What is the perceptions of parents about emotional development art?
2. To what extent guardians support children to express their children's feeling
3. To what extent parents understand children's emotions and benefits of arts ?

• Facilitators

1. How far facilitators are able to say the benefits of art activities?
2. How far are the facilitator able to understand children;s views, feelings expressed **through various art activities ?**
3. What are the perceptions of facilitators on Arts as means for expressing feeling and views?

4. Stakeholders

1. To what extent are the stakeholders aware about the ART Therapy project in terms of relevancy, effectiveness and efficiency?
2. How are the perceptions of stakeholders on this project?
3. Increase ability of targeted children to express their feelings and views through drawing and painting.
4. Improve ability of understanding child's emotions among ECD centers, parents and childcare homes.

Child Observation Check list

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Annex.2

Baseline

Status/Infrastructure of ECD Centers

SN	Districts	ECD Building , Room		Six learning areas		Art /creativity learning area	
		Yes	No	Yes	No	Yes	No
1	Baglung	14	7	10	11	11	-
2	Kapilbastu	1	10	-	11	-	-

.1. Capacity of Facilitators

Almost all facilitators have opportunity of basic training and regular capacity building opportunity from Setogurans, Baglung through ECD in Action package. On the other hand, half of the facilitators did not have any training on ECD in Kapilbastu and half of them also have refresher training. None of the facilitators received training on ART therapy before this project.

Figure.1.

The Level of Facilitators' Knowledge and Skills

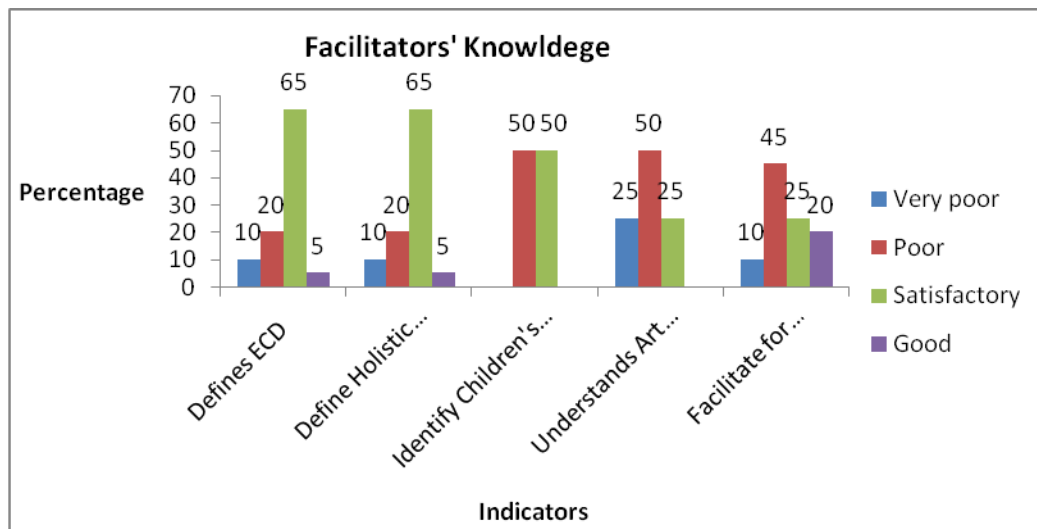


Figure 1 comprises the status of facilitators' knowledge and skills on ECD practices. Facilitators' ECD knowledge has been stated in terms of five indicators mentioned in the figure above. The facilitators performed their level of ECD knowledge and skills by defining ECD and holistic development of children. The performances of facilitators in these two indicators (Define ECD and Define holistic development of child) remained the same. Only 5% of the facilitators were good, 10% was very good, 20 and 65 percentages of them were poor and satisfactory respectively. 50% of the facilitators were satisfactory and poor in performing their knowledge in identifying children's need and problems in the ECD centers. Similarly, 50% of the facilitators poorly performed in understanding art and 25% of them were satisfactory and very poor in the same. The figure above gives the impression that knowledge performance of facilitators remained mostly poor and satisfactory in almost all the indicators of knowledge and skills.

Figure 2.

Status of Attitudes and Skills of Facilitators

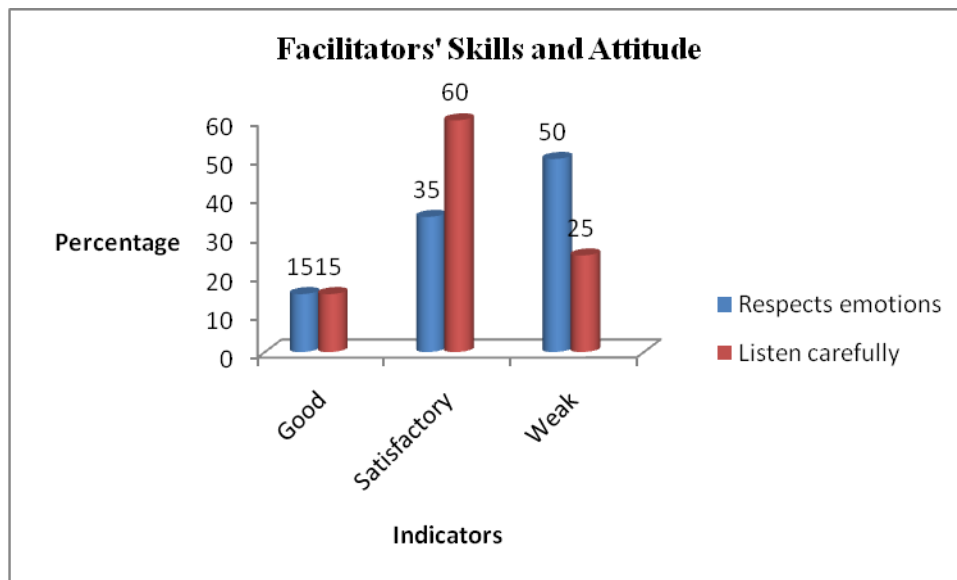
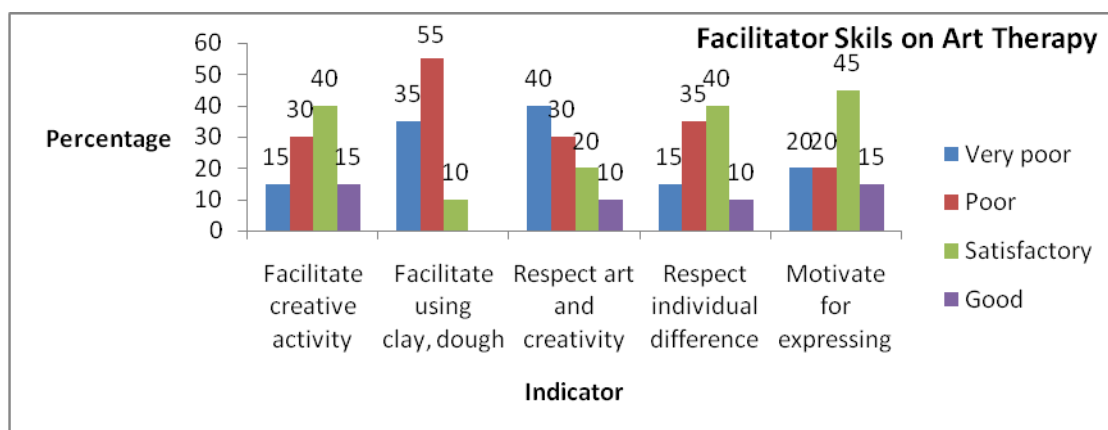


Figure 2 consists of the status of attitude and skills of facilitators in terms of their capacity to listen to the children and respect their emotions. According to the figure (no.2) only 15, 35 and 50 percentage of the facilitators could show good, satisfactory and weak performance in the skills and attitude of respecting emotions of children. Similarly, 15, 60 and 50 percentages of facilitators remained good, satisfactory and weak in performing their competencies in terms of listening to the children carefully. The above figure reveals the fact that the percentages of facilitators are weak and satisfactory regarding their competence of understanding children's emotions and also listening to them carefully.

Figure 3. Skills of Facilitators in Art Therapy



The level of understanding and proficiency of facilitators in five indicators of skills are stated in the figure 3. The performances of facilitators in three skills namely facilitating children for creative activity, respecting individual differences of children and motivating children for expression remained satisfactory while the percentages of facilitators performed their competence in the categories of poor and very poor in two skills namely facilitate children in using clay & dough and respect art and creativity. In each of the skills mentioned in the figure above only 10 or 15 percentages of facilitators could show good performance. On the whole the facilitators' competence on art therapy needs to be supplemented with rigorous training and inputs to bring quality in ECD practices in the ECD centers of the target area.

4.2. Perception of Parents

Interview and FGD were used as tools to obtain perception of parents regarding their children's behaviors and performances. The discussion with parents also focused to find out the influence of conflicts upon the behaviors and performances of children. The expressions, understanding and views of parents are presented as follows:

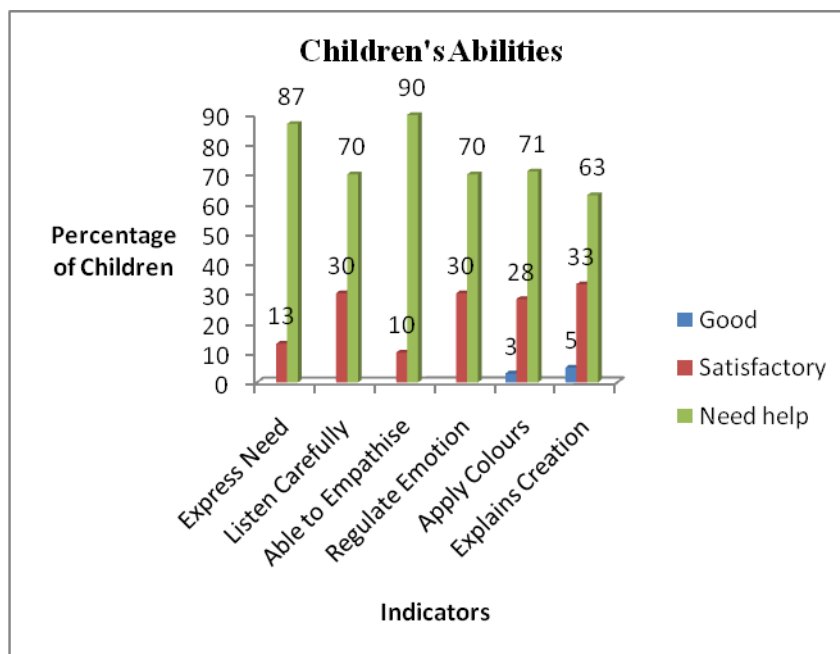
1. Conflicts caused bed wetting, streaming, shouting and frightening among the children. Regarding this a mother stated that, "My child does not like to stay at home. She always intends to hide and run away from any unfamiliar situation exposed to him/her" (Parent- Vingithe, Baglung)
2. The parents also admitted their inability to help their children in coping with the problems as stated above. They asserted that they are unable to identify the real problems of their children and the way they affect their development.
3. Parents also stated that they were unknown to the physical, social, emotional development of children. They expressed that they were not able to help the children in the way they demand due to heavy load of works and complexities in maintaining family.
4. It was asserted that children do not away their elders. They mostly remain in arguing, crying, fighting, etc. The reasons behind such problem noted that parents lack knowledge, skills and awareness in redirecting their children's behaviors and performances in desired way.

5. The prominence of art therapy was largely approved but capacity to deal with children through art therapy was extremely lacking in the ECD centers. Since parents admitted their inability to deal with children as the philosophy of ECD demands, children are mostly deprived of quality learning at their early stage.

4.3. Children's Competence

Children are basically dependent to adults .They need help to thrive and develop their potentials. ECD program plays vital role in ensuring their holistic development and rights at home and community environment. The survey report shows that out of 735children, 413 were girls and 322 were boys were enrolled in the sample ECDs. The children from two districts were observed and assessed on the bases of child observation check list. All together 40 children were observed. They were observed in holistic aspect as well as art/ creativity. Competences of children were observed and assessed in terms of six indicators namely (a) express need, (b) listen carefully, (c) able to empathies, (d) regulate emotions, (e) apply colours and (f) explain creation. The level of their competence in terms of these indicators has been stated in the figure below:

Figure 4. Competence of Children



The above figure (no. 3) states the competence of children in six different skills which are mentioned above. Their performances in the above figure have been rated in terms of 'good', 'satisfactory' and 'need help'. The term 'need help' means that the children could not perform the specified skills even after getting instruction. According to the figure enormous percentages of children under this survey remained in the category of 'need help'. This gives the sense that the children are not competent enough in the basic skills required for their holistic development.

4.4. Findings and conclusion

Based on the discussion, analysis and interpretation following findings have been enumerated:

1. The problems regarding physical, emotional, social and cognitive aspects of children were found to be unidentified and effort to improve for the same remained insufficient.
2. The performances of children in creative art, expression, social adjustment and emotional balance were found considerably poor and need to support them was largely acknowledged.
3. The infrastructure of ECD centers was poorly maintained. The classroom management was lacking the learning areas, educational materials and corners of performing creative art. In some cases, ECD centers under this survey were found to be partially supportive for children but in the case of Kapilbastu the construct and maintenance of ECD centers was not as per the requirement of the ECD implementation guidelines.
4. It was found that parents were unknown to the need of ECD for their children's holistic development and acknowledged their inability to help their children for the same. It was found that parents lacked the sufficient information about ECD practices and their role for all round development of children.
5. The performances to show the competence of facilitators in art therapy were rated as poor. The knowledge and skills for art therapy was remarkably lacking in the part of facilitators.

