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Investing in Early Childhood: **Building Human Capital along the Life Course**



EASTERN AFRICA REGIONAL EARLY CHILDHOOD CONFERENCE

11TH – 14TH MARCH 2024 | JULIUS NYERERE INTERNATIONAL CONFERENCE CENTRE

10TH MARCH 2024: SIDE SESSIONS AND LEARNING EVENTS

15TH MARCH 2024: SIDE SESSIONS AND LEARNING EVENTS

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A Welcome Message from Secretary General of the East African Community

It is with great pleasure that I welcome you to the East African Community and to this pivotal Eastern Africa Regional Early Childhood Conference scheduled from 10th to 14th March 2024 in Dar es Salaam, United Republic of Tanzania under the theme "***Investing in Early Childhood: Building Human Capital Along the Life Course.***"

I thank the United Republic of Tanzania for hosting this important conference and all Partners especially the African Early Childhood Network, UNICEF, WHO and the Ministry of Community Development, Gender and Children, United Republic of Tanzania for their efforts in contributing towards the successful organization of the conference.

As the EAC, we recognize that Early Childhood Development (ECD) is not just a social or educational issue but a critical economic investment. Research shows that for every \$1 spent on early childhood development interventions, the return on investment can be as high as \$13. This is an investment with great returns for our future; for the productivity of our children and in building a strong foundation for the region.

EAC Partner States, as mandated by Article 120(c) of the Treaty for the Establishment of the East African Community have committed to cooperate closely in the field of social welfare, with a particular focus on children. This cooperation aims to enhance children's well-being through various means such as provision of quality healthcare, education, and social protection. To that end, the EAC has developed a child policy that provides a functional regional framework to facilitate the development, coordination, and strengthening of partner states towards realising children's rights and well-being.

Therefore, I commend the Partner States for the focused implementation and the various initiatives to respond to the needs of children in their most formative years. Partner States, as they will be presenting throughout the conference, have instituted various programmes on maternal and childcare, immunization, nutrition, support and protection.

The EAC has further made significant strides in promoting the life and well-being of children and young people. The 4th meeting of the Sectoral Council on Gender, Youth, Children, Social Protection, and Community Development, held in May 2018, developed and adopted the Minimum Standards for Comprehensive Services for Children and Young People in the East Africa Community (MSCS). This initiative, spurred by the EAC Child Policy, establishes an integrated approach to providing quality education, health and social protection and aims to ensure the well-being of our region's children and young people.

As we move forward, it is imperative that we strengthen partnerships and collaboration to increase investment in ECD as guided by regional and continental mechanisms such as the EAC Child Policy, The African Charter on the Rights and Welfare of the Child and the United Nations Convention on the Rights of the Child which all emphasize the importance of early childhood education, health and welfare as a key pillar for development.

The time for action is now. We must prioritize early childhood development to ensure that no child is left behind and that every child's potential is nurtured. Let us use this conference to share knowledge, build consensus, and showcase innovative programs. Together, we can build a brighter future for our children and for the East African Community.

I wish you all a very productive conference.

A Welcome Message from the Minister of Community Development, Gender, Women, and Special Groups: Dr. Dorothy Gwajima,



It is with great pleasure and warmth that I extend a heartfelt welcome to all the distinguished international delegates attending the EAR-ECD Conference. As the Minister of the Ministry of Community Development, Gender, Women, and Special Groups, entrusted with the crucial responsibility for Early Childhood Development (ECD), I am honoured to host such a diverse and esteemed gathering. Your presence adds immense value to the discourse on ECD, providing a unique opportunity to exchange insights, share best practices, and collectively contribute to the holistic development of our youngest citizens. The challenges

and triumphs in the realm of Early Childhood Development know no borders, and your collective wisdom and experiences will undoubtedly enrich our shared commitment to creating a brighter and more equitable future for every child. I look forward to engaging discussions, collaborative endeavours, and the forging of lasting partnerships during this significant conference.

Message from the Board Chair African Early Childhood Network: Prof Mary Getui



On behalf of the African Early Childhood Network (AfECN), I extend our heartfelt appreciation to the United Republic of Tanzania for graciously hosting the Eastern Africa Regional Early Childhood Conference. It is with great pleasure that I welcome all delegates to this significant event, marking the third international conference on Early Childhood Development organized by AfECN and our partners.

This conference presents an invaluable opportunity for engaging in insightful discussions across various formats, including plenary sessions, parallel and roundtable discussions, as well as side sessions and learning events. Through these interactions, we aim to distill concrete action points that will drive forward the Early Childhood Development agenda in our region. It is our hope that this gathering will catalyze increased investments in ECD by the governments represented here.

This conference brings together a diverse assembly of over 1,000 early childhood stakeholders, including policymakers, civil society organizations, academia, practitioners and development partners. It offers a platform for delegates to connect and collaborate, sharing knowledge and experiences to advance the early childhood agenda across this region. Additionally, over the next four days, attendees will have the opportunity to explore a range of knowledge products, teaching materials, and model ECE classrooms showcased by more than 23 exhibitors in the lobby area.

May I take this early opportunity to thank all our partners for their generous support in making this conference a success. It is my singular honor to welcome you all to the Eastern Africa Regional Early Childhood Conference. We wish you fruitful deliberations and may you find both inspiration and enjoyment throughout your stay.

**Message from the Board Chair of the Tanzania Early Childhood Development Network (TECDEN):
Mohammed Nkinde**



Your Excellency Dr. Samia Suluhu Hassan, President of the United Republic of Tanzania, ECD community from all East African Countries, invited guests from all over the world, our beloved children, ladies and gentlemen all protocol observed.

Welcome to Tanzania, the country hosting this big conference organized by Africa Early Childhood Network (AfCEN) and coordinated by TECDEN in the country. It is our ambition to use this conference as a learning platform as well as strengthen our regional partnerships and collaboration. Let us us the organized learning platform to share our experiences so that we co-create and adopt ECD best practices in the regions. Take your time to learn about

National Multisectoral Early Childhood Program and the role of civil society organizations in working collaboratively with government of Tanzania in promoting Early Childhood Agenda.

Once again, you all welcome.

Karibu Tanzania

Message from the President and CEO of the Conrad N. Hilton Foundation: Peter Laugharn



Greetings to you all! It is my great pleasure to be at the 2024 East Africa Regional Conference on Early Childhood Development.

I would like to thank the United Republic of Tanzania for hosting this important conference and the commitment and leadership it has shown towards its youngest citizens cannot go unrecognized. We are delighted to see Dar es Salaam as the place to be for champions of young children! I have no doubt that we are going to be stimulated, inspired and motivated for action during and after this important conference. I would also like to appreciate the leadership of both the African Early Childhood Network (AfECN) and the Tanzania Early Childhood Development Network (TECDEN).

This conference is taking place at an important moment in time, when young children and their families throughout this region are affected by multiple adversities that require us to work differently – breaking down silos and forging new partnerships and alliances. At the same time, we can also be hopeful given the promising examples of change that exist and given all of the community and cultural assets that are part of the ecosystem that shapes early child development.

The Conrad N. Hilton Foundation has supported early childhood programming in East and Southern Africa region, for over a decade. We have been taught many things by our partners and we remain committed to continue learning how better we can engage and support the ECD agenda in the region. I am glad to see that this conference will showcase efforts that will lead to systemic change – such as having the right policy framework and data in place and robust governance measures. We recognize that financing remains a critical aspect of the system – without it, scale and sustainability cannot be achieved, and the children and families most in need of support will continue to miss out. More momentum is therefore needed to secure public and private financing for early childhood and the conference features a number of sessions focused on financing. No one entity can do this alone; we need a whole of government approach, and we need all actors – including civil society, donors, multilateral agencies, academics, and other champions - pulling in the same direction together.

I know that we have much to learn from one another this week and thereafter. I wish us all renewed energy, commitment and resolve to do all we can to ensure that more young children in Eastern Africa are on track for healthy growth and development.

Asante sana! Thank you!

Message from UNICEF Regional Director: Ms. Etleva Kadilli



Every child deserves the best start in life. This includes the right to good nutrition, responsive care, early learning, health, and a safe environment. These rights equip children with the opportunity to grow and flourish to their full potential. As children thrive, so do entire communities, paving the way for a more sustainable and peaceful future.

Over the past two decades, we've seen hope woven into the lives of young children in Eastern Africa. Mortality rates of children under five have dropped by almost half, and stunting - a silent thief of growth - has receded, albeit not as rapidly. These commendable achievements demonstrate that positive change for child survival, growth, and development in early life is not only possible but is already happening. However, in Sub-Saharan Africa, 66% of children under the age of five are at risk of poor developmental outcomes. They are not thriving during the crucial first 1,000 days, a period when the foundations for lifelong physical growth and mental development are laid. This means that we are not sufficiently investing in Africa's human capital.

The ECD conference brings together a diverse group of stakeholders: government officials, civil society representatives, academia, and the media, providing us with a unique opportunity to join in coordinated efforts and support children to develop to their full potential. Governments in Eastern Africa have pledged their commitment to the early childhood development targets in the Sustainable Development Goals. Now, it's time to turn that pledge into action. Now, it's time to prioritize early childhood development, invest more, extend our reach, and empower parents to provide responsive care. It is time to review our ECD policies and adjust them to meet the emerging needs of young children and their families. Policies such as paid parental leave, affordable childcare, and free and universal preschool services should be a reality for the most deprived families. The effective ECD interventions, such as Care for Child Development, Caring for Caregivers, Early Screening for Developmental Delays, and Care for Children with Developmental Difficulties, as well as Child Grants, should be mainstreamed across health, nutrition, and other social services. Innovative solutions, such as helping young entrepreneurs to provide services to young children, accelerated school readiness programs, or digital solutions to support parenting should fill the gaps in service provision. In the AU Year of Education, it is an opportune time to acknowledge that Early Childhood Education is key for foundational skills for our children, giving them the tools required to become agents of their learning and development and contributing to the prosperity of societies.

It's an opportunity for us to join hands in a united effort to advance policies and actions that support early childhood development. This call to action is for the benefit of our children, their families and caregivers, and the entire fabric of our society. UNICEF remains at the forefront of the call for action and commits its resources and convening power to support this agenda.

EASTERN AFRICA REGIONAL EARLY CHILDHOOD CONFERENCE

10th to 15th of March 2024 | Dar es Salaam, Tanzania

SCHEDULE

	Sunday 10 th Mar	Monday 11 th Mar	Tuesday 12 th Mar	Wednesday 13 th Mar	Thursday 14 th Mar	Friday 15 th Mar
7:00 – 8:30	REGISTRATION					
8:30 – 8:45	Learning Events/ Side Sessions	Opening Ceremony	Performing Artists	Performing Artists	Performing Artists	Learning Events/ Side Sessions
8:45 – 10:15			Session 3 Children and Families &	Session 5: Financing	Session 7 Scaling up Services	Learning Events/ Side Sessions
10:15 – 10:30			Keynote KENYA	Keynote UGANDA	Keynote EAC	
10:30 – 11:00	HEALTH BREAK					
11:00 – 12:30	Learning Events/ Side Sessions		Session 4: Children in Crisis	Session 6: Monitoring Progress	Keynote VLF	Learning Events/ Side Sessions
12:30 – 12:45					Session 8 ECD Workforce Development	
12:45 – 14:00	EXHIBITIONS AND LUNCH BREAK					
14:00 – 15:00	Learning Events/ Side Sessions	Conference Overview	Deep Dive Sessions	Deep Dive Sessions	Session 9	Learning Events/ Side Sessions
		Session 1 High level Ministerial Panel			Partnership and Co-ordination	
15:00 – 15:30	HEALTH BREAK					
15:30 – 16:30		Session 2 CARMMA Panel NAPs	Deep Dive Sessions	Deep Dive Sessions	Advocacy Session: Closing Session Call to Action	
16:30 – 18:30		Briefing for Chairs and Moderators	Learning Events/ Side Sessions	Learning Events/ Side Sessions		
19:00 – 21:00	No - Host Dinner	Dinner by TheirWorld [For Participants who RSVP'd]	No- Host Dinner	Dinner by ECDAN [For Participants who RSVP'd]	No - Host Dinner	

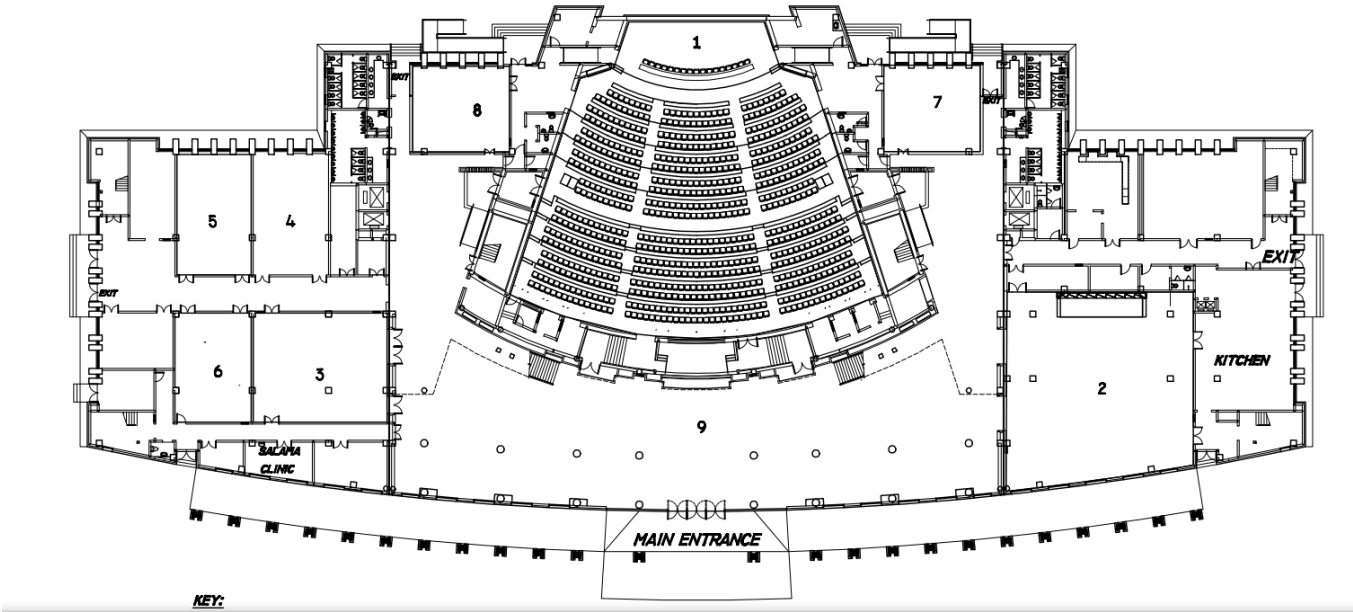
PRE and POST CONFERENCE SIDE EVENTS AND LEARNING SESSIONS

Session Date	Organization Name	Venue	Title
Thur 07 th Full day 08:30-18:30	Aga Khan University, Institute for Human Development	Serena Hotel Dar es Salaam/ Kivukoni 2	Training And Learning Meeting on Inclusivity in Early Childhood Development
Fri 08 th / Full day [08:30-18:30]	Aga Khan University, Institute for Human Development	Serena Hotel Dar es Salaam/ Kivukoni 2	Training And Learning Meeting on Inclusivity in Early Childhood Development
Sat 09 th /Full day [08:30-18:30]	Aga Khan University, Institute for Human Development	Serena Hotel Dar es Salaam/ Kivukoni 2	Training And Learning Meeting on Inclusivity in Early Childhood Development
Sunday 10 th /Half-day Morning -08:30-12:30	Aga Khan University, Institute for Human Development	Serena Hotel Dar es Salaam/ Kivukoni 4	Training And Learning Meeting on Inclusivity in Early Childhood Development
Sunday 10 th /Half-day Morning - 08:30-12:30	NurtureFirst C/O ECDAN	Serena Hotel Dar es Salaam/ Kivukoni 2	Strengthening systems for an improved HBCC workforce
Sunday 10 th Half-day Afternoon - 14:00-18:30	ECOSA- HC Responsive Caregiving Experts Committee	Serena Hotel Dar es Salaam/ Kivukoni 3	Promoting Nurturing Care for Positive Child and Family Development in ECOSA- HC Region
Sunday 10 th /Half-day Afternoon-15:30-16:30	East Africa National Networks	Serena Hotel Dar es Salaam/ Ruvu	
Sunday 10 th /Half-day Afternoon-14:00-18:30	PRB w/ Hilton Foundation	Serena Hotel Dar es Salaam/ Kivukoni 2	The Future of Early Childhood Measurement: A Call to Integrate ECD into Demographic and Health Surveys

Julius Nyerere International Convention Centre (JNICC)

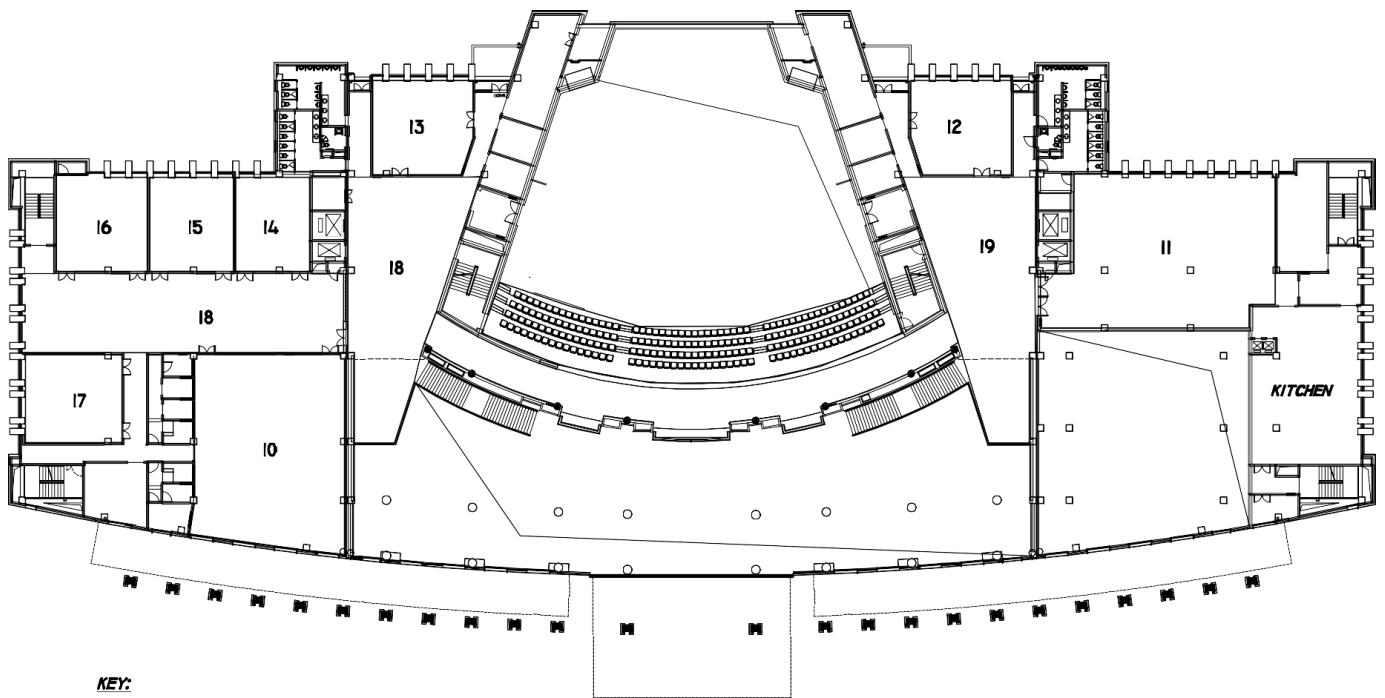
FLOOR PLAN AND LAYOUT

GROUND FLOOR



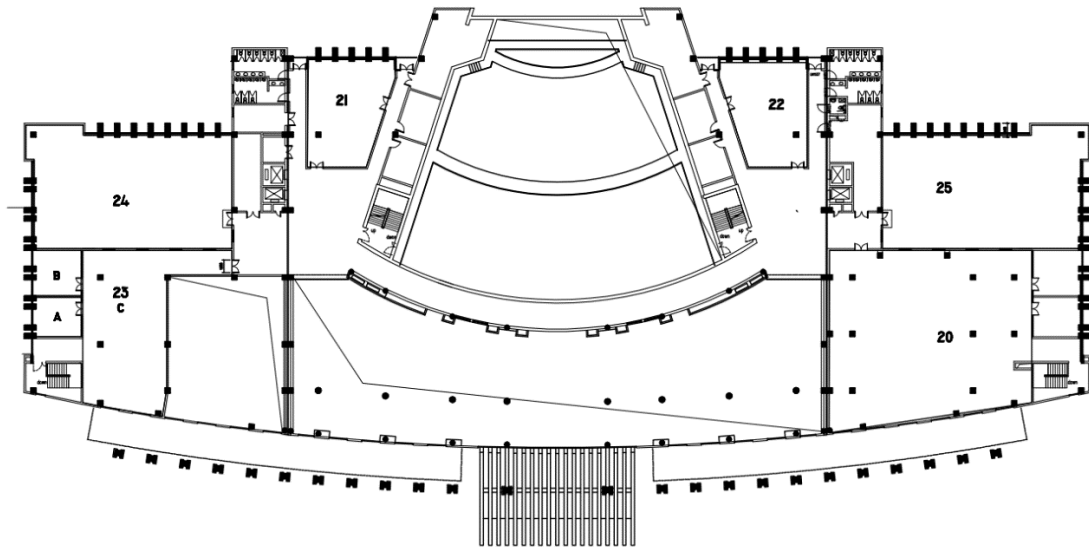
- 1.- SELOUS HALL
- 2. -RUAHA HALL
- 3. -MKOMAZI HALL
- 4. -SAADANI ROOM
- 5. -UDZUNGWA HALL
- 6. -MAFIA ROOM
- 7. -BUTIAMA VIP ROOM
- 8. -MSASANI VIP ROOM
- 9. -VICTORIA LOBBY

FIRST FLOOR



- 10.- MIKUMI HALL
- 11. -MOUNT MERU HALL
- 12. -KITULO HALL
- 13. -OLDUAI GORGE HALL
- 14. -KATAVI ROOM
- 15. – GOMBE ROOM
- 16. - BAGAMOYO ROOM
- 17. - AMBONI ROOM
- 18. – TANGANYIKA LOBBY
- 19. – NYASA LOBBY

SECOND FLOOR



KEY:

20. – MOUNT KILIMANJARO HALL

21. – NGORONGORO HALL

22. – LAITOLI HALL

24. – STONE TOWN TERRACE AREA

25. – PEMBA TERRACE AREA

EASTERN AFRICA REGIONAL EARLY CHILDHOOD CONFERENCE

AGENDA

DAY 1: MARCH 11: MORNING SESSION	
CHAIR: Dr. Seif Abdallah Shekalaghe - Permanent Secretary, Ministry of Community Development, Gender, Women and Special Groups, TANZANIA	
RAPPORTEURS:	
1. Vincent Mpepo – Lecturer, Faculty of Education, OPEN UNIVERSITY OF TANZANIA	
2. Alida Ndayizeye – Early Years Fellow Alum, WORLD BANK, BURUNDI.	
COORDINATOR: Rose Kamasara, Programme Officer, THE AFRICAN EARLY CHILDHOOD NETWORK	
TIME & ACTIVITY	DESCRIPTION
7:00 – 8:30	Arrival and registration of delegates
8:30-9:00	Guest of Honor Arrival and Exhibition visit
9:00-9:10	Guest of Honor Enters the Selous Hall
9:10 – 12:00	National Anthem and East Africa Anthem - Brass Band <ul style="list-style-type: none"> • Prayers - Religious leaders (TEC, CCT & BAKWATA) • Introduction of invited guests – Dr. Seif Abdallah Shekalaghe – Permanent Secretary, Ministry of Community Development, Gender, Women and Special Groups, TANZANIA • Greetings from Dar es Salaam Region- Hon. Albert Chalamila, Regional Commissioner
PLENARY SESSION	
SELOUS HALL	Key Remarks <ul style="list-style-type: none"> • Ms. Mwajuma Rwebangila-Executive Director, TANZANIA EARLY CHILDHOOD DEVELOPMENT NETWORK • Prof. Mary Getui - Board Chair, AFRICAN EARLY CHILDHOOD NETWORK • Ms. Sophia Ashipala - Head of Education Division - Education, Science, Technology and Innovation AFRICA UNION COMMISSION • H. E Amb. Minata Samate Cessouma – Commissioner, Health and Humanitarian Affairs Directorate, AFRICA UNION COMMISSION <ul style="list-style-type: none"> ○ Launch of CARMMA Plus – Health, Humanitarian Affairs and Social Development, AFRICAN UNION COMMISSION

- **Dr. Charles Sagoe – Moses:** Country Representative WHO, TANZANIA
- **Mr. Nathan Belete**-Country Director for Malawi, Tanzania, Zambia & Zimbabwe, WORLD BANK
- **Ms. Etleva Kadilli** - Regional Director, UNICEF ESARO
- **Mr. Peter Laugharn** - President and CEO - CONRAD N. HILTON FOUNDATION
- **Dr. Seif Abdallah Shekalaghe** – Permanent Secretary, Ministry of Community Development, Gender, Women and Special Groups, TANZANIA
 - Launch of National Comprehensive ECD Service Delivery Job Aid for Community Workers

Entertainment:

- Children Performances
- Zuhura The African Lioness

Key Remarks Remarks by Secretary General East African Community

- Welcoming Guest of Honour – **Hon. Dr Dorothy Gwajima** - Minister of Community Development, Gender, Women and Special Groups, TANZANIA
- Opening Speech- Guest of Honor **H.E. President Dr Samia Suluhu Hassan**
- Group Photo – MC

13:00 – 14:00 LUNCH & HEALTH BREAK

DAY 1: MARCH 11, 2024: AFTERNOON SESSION**CHAIR:** Dr. Lynette Okengo, Executive Director, THE AFRICAN EARLY CHILDHOOD NETWORK**RAPORTEURS****1. Dr. Nipael Mrutu** - Assistant Professor, AGA KHAN UNIVERSITY IED**2. Margreth Paul**, Early Years Fellow, WORLD BANK, TANZANIA.**COORDINATOR:** Rose Kamasara, Programme Officer, THE AFRICAN EARLY CHILDHOOD NETWORK**14:00 – 14:10.****CONFERENCE OVERVIEW****14:10 – 15:00****SESSION 1: MINISTERIAL PANEL- PRIORITIZING EARLY CHILDHOOD POLICIES AND PROGRAMMES****PLENARY
SESSION****SELOUS HALL****Session Chair:** Hon. Dr Dorothy Gwajima - Minister of Community Development, Gender, Women and Special Groups, TANZANIA.**Moderator:** Sophia Ashipala - Head of Education Division - Education, Science, Technology and Innovation AFRICA UNION COMMISSION**Panellists:**

- **Hon. Aya Benjamin Warille** - Minister of Gender, Child and Social Service, SOUTH SUDAN
- **Hon. Florence Bore** -Cabinet Secretary for Labour and Social Protection, KENYA
- **Hon. Sarah N. Mateke** - Minister of State for Youth and Children Affairs, UGANDA
- **Hon. Mme Francine Inarukundo** - Permanent Secretary, Ministry of Finance, BURUNDI

15:00 - 15:45**SESSION 2a: LEADERSHIP - EXPERIENCES AND BEST PRACTICES FROM EAC PARTNER STATES ON RMNCAH****PLENARY
SESSION****SELOUS HALL****Session Chair:** Hon Dr Amon Mpanju – Deputy Permanent Secretary, Ministry of Community Development, Gender, Women and Special Groups, TANZANIA.

CARMMA Plus Video – 3 Mins

Moderator: Alleluia Delphine - A Plus Senior Programme Officer, AUC-HHS**Panellists**

- Burundi - Dr. Ananie Ndacayisaba-Director of Programme, Ministry of Public Health and Fight Against AIDS,
- Democratic Republic of Congo - Joseph KALAKA, Ministry of Health,
- Kenya – Dr. Janette Karimi Munyi- Head, Division of Neonatal and Child Health,
- Rwanda – Dr. Aline Uwimana- Division Manager for Maternal and Child Health, Rwanda Biomedical Center (RBC/MOH),
- Tanzania - Dr. Felix Bundala, Assistant Director for Newborn, Child and Adolescent Health, Ministry of Health
- Uganda - Dr. Migadde Deogratias – Senior Medical Officer, Ministry of Health,

15:45 – 16:30**SESSION 2b: NATIONAL NETWORKS PANEL****PLENARY
SESSION****SELOUS HALL****Session Chair:** Serafino Tisa - Director, Ministry of General Education and Instruction, SOUTH SUDAN**Moderator:** Arcard Rutajwaha - Sub-Regional Coordinator, Eastern Africa, THE AFRICAN EARLY CHILDHOOD NETWORK**Panellists:**

- **Mr. Damien Kakule** – Bouclier Pour Enfant de la RDC, DEMOCRATIC REPUBLIC OF CONGO
- **Dr. Franck Bujeje** – Burundi Early Childhood Platform, BURUNDI
- **Mr. Jimmy Obbo** – Acting Chair, ECD Network for the Civil Society in UGANDA
- **Ms. Monique Mukamana** –TMM Program, National Child Development Agency, RWANDA
- **Ms. Mwajuma Kibwana** – Executive Director, Tanzania Early Childhood Development Network, TANZANIA

Dr.Teresa Mwoma – National Coordinator, Early Childhood Development Network for Kenya, KENYA**16:30 – 17:30****HEALTH BREAK****17:00 – 17:05**

Remarks from the Chair and closing

DAY 2, MARCH 12, 2024: MORNING SESSION

CHAIR: Ms. Maggie Biruri – Board Member, THE AFRICAN EARLY CHILDHOOD NETWORK

RAPORTEURS :

1. **Dr. Nipael Mrutu** - Assistant Professor, AGA KHAN UNIVERSITY IED
2. **Anthony Mbithi**, Early Years Fellow, WORLD BANK, KENYA.

COORDINATOR: Ms. Given Daka – Sub-Regional Coordinator, Southern Africa, THE AFRICAN EARLY CHILDHOOD NETWORK

TIME	DESCRIPTION
7:00 – 8:30	Arrival and registration of delegates
8:30 – 8:45	Performing Artists
8:45 - 10:15	<p>SESSION 3: CHILDREN AND FAMILIES</p> <p>Session Chair: Lucy Minayo - Executive Director, NURTUREFIRST</p> <p>Keynote Speakers</p> <ul style="list-style-type: none"> • Investing in Childcare to Build Human Capital Ms. Amanda Devercelli - Global Lead for Early Childhood Development, WORLD BANK • Family Friendly Policies: Good for Children, Women and Economies Dr. Oliver Petrovic - Regional Adviser, Early Childhood Development, UNICEF ESARO <p>My Story: Ms. Wangeci Kihara – Founder, THE MOTHERSHIP VILLAGE</p> <p>Moderator: Dr. Sara Ruto - Programme Officer, ECHIDNA GIVING</p> <p>Panellists</p> <ul style="list-style-type: none"> • Ms. Elizabeth Gitonga – Programme Manager, THE AFRICAN NETWORK FOR EARLY CHILDHOOD DEVELOPMENT (AFECN) • Tulio S. Masanja- Assistant Commissioner for Social Welfare, Ministry of Community Development, Gender, Women and Special Groups, TANZANIA • Prof. Simon Onywere - Research Associate, KENYATTA UNIVERSITY WOMEN’S ECONOMIC EMPOWERMENT HUB (KU-WEE)
10:15 – 10:30	<p>MINISTERIAL KEYNOTE: STRENGTHENING SOCIAL PROTECTION: A LIFECYCLE APPROACH TO SUPPORTING FAMILIES AND CHILDREN - Hon. Florence Bore -Cabinet Secretary for Labour and Social Protection, KENYA</p>
10:30 – 11:00	HEALTH BREAK
11:00 – 12:30	<p>SESSION 4: CHILDREN IN CRISIS</p> <p>Session Chair: Dr. Meseret Zelalem - Chief Program and Research Officer, Addis Ababa ECD Center, ETHIOPIA</p> <p>Keynote Speakers</p> <ul style="list-style-type: none"> • Insights on Emergency preparedness and Response for children in crisis Lieke van de Wiel UNICEF Deputy Regional Director UNICEF ESARO • Children without Parental Care Hon. Anne Musiwa - Special Rapporteur on Children without Parental Care at the AFRICAN COMMITTEE OF EXPERTS ON THE RIGHTS AND WELFARE OF THE CHILD • Children having Children: The Crisis of Teen Pregnancies H.E Betty Murungi – County First Lady and ECD Champion – Smart Start Initiative Siaya, KENYA <p>Moderator: Dr. Evangeline Nderu – Technical Advisor, AFRICAN EARLY CHILDHOOD NETWORK</p> <p>Panellists</p> <ul style="list-style-type: none"> • Mr. Angelus Runji – CEO, Conservation of Nature for Survival Organisation (CONASU), TANZANIA • Dr. George Evans Owino – Programme Manager, AFRICAN EARLY CHILDHOOD NETWORK • Dr. Rongedzayi Fambasayi – Child Protection and Governance Specialist, NORTHWEST UNIVERSITY • Ms. Tricia Young -Director, MOVING MINDS ALLIANCE
12:30 – 12:45	<p>KEYNOTE ADDRESS: PROTECTING CHILDREN IN CRISIS THROUGH JUDICIAL INTERVENTIONS</p> <p>Hon Mr. Justice Hillary Chemitei, Presiding Judge, Milimani Family Division and Judge, HIGH COURT OF KENYA</p>
12:45 – 14:00	EXHIBITION & LUNCH BREAK

DAY 2: MARCH 12, 2024: AFTERNOON SESSION

PARALLEL SESSIONS (1 HOUR)		TIME: 14:00-15:30
SUB-THEME 1: EMPOWERING PARENTS, CAREGIVERS, AND COMMUNITIES		
PARALLEL SESSION TITLE	ROOM	
<p>1.1: Creating home environments that foster positive early childhood outcomes</p> <ol style="list-style-type: none"> Amedius Shengero, University of Dodoma (UDOM): Community Engagement in Early Childhood Development and Care: Experiences from Teachers and Parents in Dodoma region, Tanzania. Esther Ndyetabura, Pact Tanzania: Assessment of Caregiver Parenting Practices Towards Creating a Supportive Home Environment for Child’s Early Development in Tanzania. Meinrad Haule Lembuka, the Open University of Tanzania, Tanzania: Ubuntu as a Collective Community Empowering Tool on Effective Early Childhood in Tanzania – A Case of Mama Mkubwa Model. Roreen Vitumbiko Mzembe, Help a Child Malawi (HAC), Malawi: Improving Knowledge, Attitude and Practices on Parenting Skills for Mothers and Fathers in Malawi Theodat Siboyintore, University of Rwanda, Center for Mental Health: The effect of the Sugira Muryango home visiting interventions on children’s mental health in Rwanda. 	<p>Selous Hall</p> <p>Chair: Alinune Nsemwa, Early Childhood Development Specialist, UNICEF, Tanzania.</p> <p>Rapporteur: Adelphina Pantaleo</p>	
<p>1.2 Community-led interventions to improve capacities and resources for ECD</p> <ol style="list-style-type: none"> Gino Luís Regina, PATH, Mozambique: Assessing enhanced community-based rehabilitation (ECBR) of children with delays and disabilities (CWDD) in Mozambique Hawa Juma Selemani, Ministry of Education Science and Technology, Tanzania: Community participation for child development in addressing vulnerabilities. Joshua Jeong, Emory University: Home visiting or community group sessions? Stakeholders’ perceptions about the optimal approach for delivering a parenting program in Western Kenya. Rachel Akrofie, Lively Minds, Ghana, and Uganda: How Lively Minds has empowered over marginalised 100,000 rural parents in 2500 communities in Ghana and Uganda to become pre-primary providers. Susan Nyamanya, Aga Khan University- Institute for Human Development, Kenya: Bridging the Gaps: Developing a Gender and ECD Course to Enhance Male Caregiver and Frontline Worker Engagement in Early Years 	<p>Ruaha Hall</p> <p>Shekufeh Zonji, Technical Lead, Early Childhood Development Action Network (ECDAN)</p> <p>Rapporteur: Alfonse Simon Ngwenya</p>	
<p>1.3 Quality inclusive early childhood care and development (IECD),</p> <ol style="list-style-type: none"> Alecia Samuels, University of Pretoria, Africa Region: Building an inclusive early childhood development system for young children with disabilities and their families in Africa. Amira Nafiseh, Regina Amondi, Indiana University School of Medicine, Indiana, USA and AMPATH, Eldoret, Kenya: Outcomes and Next Steps for Pepea: A Behavioral Training Intervention for Families of Children with Autism in Western Kenya Bankundiye Gisele, Humanity & Inclusion, Rwanda: Nurturing care to children with developmental delays and disability in Rwanda Daniela Gissara, Perkins School for the Blind, Global: Learning through Play and Learning to Play: An Approach for All Children Immaculee Kayitare, Umurungi Yvonne, Frank Muhwezi, and Emmanuel Nsengiyumva, Catholic Relief Services, Rwanda: Collaborating with community and local authorities in establishing and delivering Integrated ECD services 	<p>Mt. Kilimanjaro 1 Hall</p> <p>Chair: Dr. Sileshi Yitbarek, General Manager, ELIXIR Research and Consultancy PLC</p> <p>Rapporteur: Evelyn Ainomugisha</p>	

<p>1.4: Building school readiness: Play as a tool for learning at home and at school,</p> <ol style="list-style-type: none"> 1. Abigail Sellman, ideas42, South Africa: Using behavioural design to support South African caregivers to engage in play. 2. Catherine Bateta, Save the Children, Rwanda: Championing Play through parents’/caregivers’ empowerment. 3. Dieudonné Uwizeye, University of Rwanda, Center for Mental Health, Rwanda: Long-term spillover effects of household coaching in playful parenting on siblings of treated children: A mixed methods study 4. Fortidas Bakuza, Aga Khan University, Tanzania: Early Childhood Development in changing time: Resilience and coping with changes. 5. Lungile Mdluli Mpho Papale, UNICEF and National Department of Basic Education South Africa: The importance of play in early learning: Knowledge, Attitudes and Practices of parents and caregivers with children birth to six years. 	<p>Mt. Meru Hall</p> <p>Chair: Dr. Evangeline Nderu, Technical Advisor, African Early Childhood Network</p> <p>Rapporteur: Vincent Mpepo</p>
<p>1.5: Interventions targeting teenage mothers,</p> <ol style="list-style-type: none"> 1. Abella Atieno Owuor, Kisumu Medical and Education Trust (KMET), Kenya: What Adolescent Mothers Need: A Survey by KMET in collaboration with the County Government of Homa Bay 2. Manoah K. William, BRAC International, Tanzania: Building Capacity of Young Women as Professional Childcare Micro-entrepreneurs: The experience from BRAC Childcare Microenterprise Initiative in Tanzania 3. Mike Mwenda, Self-Help Group, Regional Psychosocial Support Initiative (REPSSI), Zambia; Breaking the Cycle of Poverty for Adolescent and Young Mothers (AYM’s) through Economic Strengthening 4. Revocatus Joseph Sono, Amani Girls Organization, Tanzania: iCare – Empower Her, Nurture the Future. 5. Victoria Mulinda, Regional Psychosocial Support Initiative (REPSSI), Zambia: Promoting Mental Health and Psychosocial Wellbeing of Adolescent and Young Mothers (AYM’s). 	<p>Mikumi Hall</p> <p>Chair: Alisa Currimjee, Co-lead, Early Years Fellowship, World Bank</p> <p>Rapporteurs: Kisyeri Nyagoryo Newland</p>
<p>1.6: Innovative models for delivering parenting education (SBCC),</p> <ol style="list-style-type: none"> 1. Edwick Mapalala & Kelvin Ngoma, Regional Psychosocial Support Initiative, REPSSI; Marguerite Marlow and Mark Tomlinson, Stellenbosch University, Tanzania & Zambia: Using WhatsApp support groups to promote responsive caregiving, caregiver mental health and child development in Tanzania and Zambia. 2. Elizabeth Maginga Thobias, WeCare Foundation, Tanzania: Early Childhood development training to pregnant women in Mbeya city through social network (WhatsApp Group) 3. Italo Lopez Garcia, Center of Economic and Social Research, University of Southern California, Kenya (Kisumu, Homa Bay and Vihiga counties): The Msingi Bora group-based parenting intervention in rural Kenya 4. Sofia Costa, Feeding the Change, Mozambique: Evidence-Based Development of Early Childhood Development (ECD) Materials for Caregivers 	<p>Bagamoyo Hall</p> <p>Chair: Mr. Tobias Aulo, Programs Manager, ADS Nyanza, Kenya</p> <p>Rapporteur: Nhandi Washington</p>
<p>1.7: Empowering families for quality childcare and early learning,</p> <ol style="list-style-type: none"> 1. Awet Araya, UNICEF Tanzania: Connecting Facts with Emotions: Responsible Parenting and Family Care 2. Bet Caeyers, Thrive, Tanzania: Study design and baseline findings of the Kizazi Kijacho Randomized Controlled Trial of a parenting intervention and an Unconditional Cash Transfer program in Tanzania. 3. Catherine MacLeod, ideas42, Madagascar and Rwanda: Enhancing early childhood development through behavioural designs for cash transfers. 4. Fidelis Muthoni, Catholic Relief Services, Kenya: Family preservation and sustainable reintegration through positive parenting 	<p>Saadani Hall</p> <p>Chair: Lucy Minayo, Director, NurtureFirst</p> <p>Rapporteur: Peter Sawa</p>

5. Pambas Tandika Basil , University of Dodoma, Tanzania: The Home Environment in Selected Rural Community in Morogoro Region and its Contribution in Addressing Learning Poverty among Young Children in Tanzania	
1.8: Overcoming barriers to holistic ECD service provision, <ol style="list-style-type: none"> 1. Ignas Lukanga, Pact Tanzania, Tanzania: Early Childhood Development Services Landscape in Tabora and Mbeya, Tanzania. Identifying Opportunities and Overcoming Barriers. 2. Mary Ann Etling, Eren Oyungu, Carolyne Jerop, Amira Nafiseh, Grace White, Violet Amondi, Mercy Jelagat, Regina Amondi, Anita Jerop, Phylis Kiplimo, Roselyn Ombitsa, Megan S. McHenry, Academic Model Providing Access to Healthcare (AMPATH), Eldoret, Kenya: The impact of a narrative film intervention in addressing stigma-related to disability in Western Kenya 3. Nelson Agapith Choaji, Lindi Women Paralegal Aid Centre (LIWOPAC), Tanzania: Availability of enough food and proper nutrition to nursery pupils in public school Lindi Region. 4. Pamela Wadende, Kisii University, Kenya, Ethiopia: Teachers in the Home: Strategies Children Use to Support School-readiness skills in their younger siblings in Kenya and Ethiopia 5. Ruth Mathys, Grow Great Campaign, South Africa: Insights from Flourish: a national network of community-based antenatal and postnatal classes in South Africa. 	Udzungwa Room Chair: Deman Yusuf , Lecturer, Institute of Social Work, Tanzania Rapporteur: Caleb Ongweku Chitechi
1.10 Community-driven systems change to improve ECD, <ol style="list-style-type: none"> 1. Carolyne Ng'eny and Dua Kazimoto, Firelight Foundation, Malawi, and Zambia: Community-driven systems change – a transformative and sustainable approach to improving early childhood development in eastern and southern Africa. 2. Jonathan Mungandi and Eric Njekwa, Maranatha Grassroots Institute, Zambia: Creating stronger community systems to support ECD over the long-term: A case study of community-driven systems change for ECD in Zambia 3. Kenneth Mumma, Davie Mphepo and Gift Phedulo, Children of Hope Organization, Malawi: Communities coming together to raise their children: A case study of community-driven systems change for ECD in Malawi 	Kitulo Hall Chair: Carolyne Ng'eny , Program Officer, Firelight Foundation. Rapporteur: Isaac Oyiaga

TEA BREAK
15:00 - 15:30

PARALLEL SESSIONS CONTINUED		TIME: 15:00-16:30
(1 HOUR)		
SUB-THEME 1: EMPOWERING PARENTS, CAREGIVERS, AND COMMUNITIES		
SESSION TITLE	ROOM	
1.9: The role of men in the lives of young children, <ol style="list-style-type: none"> 1. Chilekwa Chisanga, Regional Psychosocial Support Initiative (REPSSI), Zambia: Fostering Male Caregiver Involvement in Childcare Through Enhancing Household Mental Health and Psychosocial (MHPSS) Environment 2. Damas Joachim, Tanzania Home Economics Organization (TAHEA MWANZA), Tanzania: Designing a fatherhood intervention together with fathers in Mwanza, Tanzania. 3. Frederick Nyaga, Men Engage, Kenya Network (MENKEN): Harnessing Fatherhood for positive impact on young children. 4. Grace Umulisa and Gabriela Phend, Boston College, Research Program on Children and Adversity, Rwanda: A Longitudinal study of the effects of an early life parenting and family violence prevention intervention in Rwanda 5. Sebastian Kitiku and Jacqueline Namfua, Ministry of Community Development, Gender, Women and Special Groups, and UNICEF Tanzania: Gender-Transformative Parenting: Challenging Gender Norms and Inequalities for all Children to Thrive in Tanzania 	Kitulo Hall Chair: Beatrice Ogutu , Director, ICS - SP Africa Rapporteur: Omwa Judith Aluoch	

SUB-THEME 2: SYSTEMS STRENGTHENING	ROOM
<p>2.1: Assessing integration and delivery of ECD services in multiple settings</p> <ol style="list-style-type: none"> 1. Debjeet Sen, PATH, Ethiopia: Assessing early childhood development (ECD) integration into primary health care in Addis Ababa, Ethiopia. 2. Given Hapunda, FHI 360, Rwanda and Zambia: Supporting workforce to implement & scale playful parenting. 3. Julius Rosenhan, D-tree, Zanzibar, Tanzania: Measuring the effect of a community health worker program delivering ECD-services on nurturing care targeting children and caregivers in Zanzibar. 4. Neema Lazaro, Doctors with Africa bMM, Tanzania: A necessary interplay: the health system as a privileged entry point for the delivery of ECD interventions. 	<p>Selous</p> <p>Chair: , Private Sector Specialist, Women, Business and the Law, World Bank Group</p> <p>Rapporteur: Adelphina Pantaleo</p>
<p>2.2: Building a resilient ECD workforce,</p> <ol style="list-style-type: none"> 1. Júlio Mutemba, REPSSI (Regional Psychosocial Support Initiative), Mozambique: Endline study result of project for strengthening caregivers' mental health and responsive caregiving skills to improve early childhood development in Mozambique. mental health and responsive caregiving capacities of caregivers for improved ECD in Mozambique. 2. Marinda Neethling, North-West University, South Africa: Professionalising ECCE in South Africa is not child's play! Determining skills gaps and implications for future sector development. 3. Martin Galevski, Alum Early Years Fellow, North Macedonia, World Bank: Measurement: The missing puzzle piece in early childhood education in North Macedonia (insights from MELQO). 4. Moises Mabunda, Three Stones International, Rwanda; Mozambique: Lessons learnt from implementing a Gender-Responsive Play-based teacher training in Early Childhood Education in Rwanda and Mozambique. 	<p>Ruaha Hall</p> <p>Chair: Dr. Samuel Asare, Senior Research Manager, Education Sub Saharan Africa</p> <p>Rapporteur: Alfonce Simon Ngwenya</p>
<p>2.3: ECD interventions focusing on experiences from the field,</p> <ol style="list-style-type: none"> 1. Antony Mbithi, Tanzina Quddus Dina, and Gael Bidzogo Ekobono, Early Years Fellows, Kenya, Bangladesh, and Cameroon World Bank: Guidance Note on Home Based Childcare (HBC) for Low-income Communities 2. Charity Munyi, World vision Kenya, Kenya: Preparing Early grade learners for transition to primary school. 3. Jemal Abdulkadir Kelilo, Save the Children, Ethiopia: Facilitating Children's Learning in an Emergency Context- Ethiopia 4. Maggie Kuchonde, University of Malawi, Malawi: Community involvement in improving literacy skills 	<p>Mt. Kilimanjaro 1 Hall</p> <p>Chair: Godfrey Siu, Child Health and Development Center, Makerere University, Uganda</p> <p>Rapporteur: Evelyn Ainomugisha</p>
<p>2.4: Strengthening policy and systems for delivering ECD,</p> <ol style="list-style-type: none"> 1. Catherine N. Githae, Men Engage Kenya Network (MENKEN) – Male Engagement as a key advocacy ingredient. 2. Farida Athumani Katunzi, Ifakara Health Institute, Tanzania: Integration of ECD/Nurturing Care Components into Sector Policies and Services Guidelines. 3. Frank Samson, Children in Crossfire, Tanzania: Tanzania: Catalysing ECD Policy to Practice in Tanzania 4. Nevine El Nahass, Magreth Mziray, and Ayah Jarrah, Early Years Fellows, World Bank, Egypt, Jordan, and Tanzania: Redefining early childhood education environments: Guidance note on designing and implementing flexible spaces in Low- and Middle-Income Countries (LMICs). 5. Josephine Ferla, Save the Children, Global including Africa region (Tanzania, Kenya, Uganda etc): 10 Years of Building Brains Implementation: An Evidence Synthesis of Uptake and Impact to Date 	<p>Mt. Meru Hall</p> <p>Chair: Melissa Kelly, Co-lead, Early Years Fellowship, World Bank</p> <p>Rapporteur: Joseph Masunga Mhuli</p>

<p>2.5: Ensuring nurturing care for all: How collecting systems-level indicators contributes to change in East Africa</p> <ol style="list-style-type: none"> 1. Ester Elisaria, and Ms. Farida Katunzi, Strengthening Early Childhood Development/Nurturing Care Systems Monitoring and Evaluation (M&E) in Tanzania: Assessment of the barriers and opportunities for ECDE System Performance Strengthening in Tanzania. 2. Francisco Mbofana, Early Childhood Development Systems in Mozambique: Findings on key ECD indicators 3. Teresa Mwoma, Early Childhood Development Network for Kenya (ECDNeK), Kenya Strengthening ECD Systems in Kenya: A Collaborative Research Approach 	<p>Mikumi Hall</p> <p>Chair: Laura Meyer, Researcher, Mathematica</p> <p>Rapporteur: Caleb Ongweku Chitechi</p>
<p>SUB-THEME 3: SCALING UP AND INNOVATING</p>	
<p>3.1: Championing holistic and inclusive ECCE using play-based approaches</p> <ol style="list-style-type: none"> 1. Marc Aguirre, Hope Worldwide South Africa, South Africa: Comparing Digital vs Face-to-face Efficacy of Delivery Models in ECD Parenting programmes: The Caregiver Learning through Play (CLTP) programme example in South Africa 2. Munmun Chowdhury, Ahmed Chowdhury, BRAC International, Uganda: BRAC Green Play Lab Concept: Lessons in Fostering Climate-Adaptive Early Childhood Development. 3. Rose Opiyo, Masinde Muliro University of Science and Technology, Kenya: Inclusive Home-Based Early Learning Project in Marginalized communities in Kenya is Ready for Scale: What evidence Exists? 4. Anil Khamis, Aga Khan University, Insitutute for Human Development, Kenya: “Socio-Emotional Learning – A Response to Adversity” 	<p>Saadani Hall</p> <p>Chair: Joy Nafungo, Senior Program Officer - Knowledge and Innovation Exchange (KIX) International Development Research Centre (IDRC).</p> <p>Rapporteur: Kisyeri Nyagoryo</p>
<p>3.2: ECD service delivery in the era of AI, digital tech, and media,</p> <ol style="list-style-type: none"> 1. Aminah Birungi, Muni University, Uganda: Digital Storytelling and creativity in Visual Arts Development among preschool children in Katabi Town Council Wakiso District 2. Chiku Lweno, Children in Crossfire Tanzania, Tanzania: Innovative media partnership to scale ECD Policy implementation in Tanzania. 3. Janine Händel, CEO, Roger Federer Foundation, Six Southern African Countries: – Early Learning Kiosk. 4. John Matiko, Machonchoryo, UNICEF Tanzania: Mama na Mwana Digital Client Feedback Mechanism - Experiences from Implementation Across 5 Regions in Tanzania. 5. Remes, Mhaluka Makombe, Kezakubi, Kayanda R1, Murray J1, Kisila V2, Haonga T2 Disseminating evidence-based ECD audiovisual content through a WhatsApp chatbot to reach new parents/caregivers and improve ECD knowledge and practices 	<p>Mkomazi Hall</p> <p>Chair: Ms. Ruth Muendo, Impact Manager, Food for Education</p> <p>Rapporteur: Nhandi Washington</p>
<p>3.3: Innovative ideas to improve access to quality ECD services,</p> <ol style="list-style-type: none"> 1. Daniel Baheta, Chief of Education, UNICEF, Improving Equitable Access and Quality Early Learning in Remote and Marginalised Communities: Lessons from Satellite and INSET Model in Tanzania. 2. Gloria Nkosi, HOPE worldwide SA, South Africa: Strengthening Early Childhood Development (ECD) Centers in South Africa: A National Network & Partnership Approach 3. Karungari Wachira, Tiny Totos, Kenya and Ethiopia: Lessons from scaling a proven Kenyan market based childcare franchise into an Ethiopian market. 4. Lucy Haule, D-tree, Zanzibar, Tanzania: Improving the quality of community health volunteers delivering early childhood development services in Zanzibar. 5. Rachel Akrofie and Alison Naftalin, Kidogo, Lively Minds and Smart Start, Ghana, Kenya, South Africa, Uganda: Learnings from three innovations revolutionising ECD in Kenya, South Africa & Uganda 	<p>Amboni Hall</p> <p>Chair: Dr. Margaret Nampijja, Research Scientist, African Population and Health Research Center</p> <p>Rapporteur: Peter Sawa</p>
<p>3.4: Sustainability in ECCE: Taking impactful ECCE interventions to scale</p> <ol style="list-style-type: none"> 1. Daniel Acheru Rabok, Aga Khan University, Institute for Human Development, Kenya: Enhancing ECD in ASAL areas of Kenya. 2. Elizabeth Gupta, BRAC Enterprise Tanzania Limited (BETL) Tanzania: Can low-cost high quality ECD service work at Scale? 3. Emmanuel, Karamage, RWAMREC, Rwanda: Lessons from scaling-up the Bandebereho program engage fathers in caregiving and family violence prevention through the Rwandan health system. 4. Ester Elisaria, Thrive, Tanzania: Using evidence and co-design to develop effective scalable and sustainable ECD model(s) in Tanzania. 	<p>Udzungwa Room</p> <p>Chair: Dr. Ignasia Mligo, Senior Lecturer, Early Childhood, University of Dodoma, Tanzania</p> <p>Rapporteur: Caleb Ongweku Chitechi</p>

5. Laxmi Bhawani , UNICEF Zanzibar, United Republic of Tanzania: Integrated, sustainable ECD operational Model through Continuum of Care for holistic development of children of Zanzibar.	
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SIDE EVENTS/LEARNING SESSIONS (FOR PRE-REGISTERED PARTICIPANTS)

TIME: 14:00-18:30 (4 HOURS 30 MINUTES)	
The Role of the Health Sector in Supporting ECD; Building Human Capital Along the Life Course	Mkomazi Hall
WHO & UNICEF	
Creative Arts Workshop	Olduvai Hall
CREATE 2023	
TIME: 16:30-18:30 (2 HOUR)	
Understanding caregiver protective factors and child well-being amongst families in Kenya: Results from the Year Five Household Survey Report Changing the Way We Care, Kenya	Udzungwa Room
CATHOLIC RELIEF SERVICES	
Innovative Financing Initiatives for Early Childhood in Eastern Africa	Bagamoyo Hall
THE EDUCATION OUTCOMES FUND	
Using Dual Generation Approaches for Early Childhood Education and Development in Refugee Contexts	Kitulo Hall
GLOBAL SCHOOLS FORUM AND INNOVATIONS FOR POVERTY ACTION	
Nurturing Care Framework: Adapting To Contextual Realities & Environmental Influencers	Saadani Room
EPISCOPAL RELIEF & DEVELOPMENT	
Increasing access to early childhood services through leveraging digital technologies at the community level	Ruaha Hall
D-TREE	
Tashkent Declaration and its Follow-up in Eastern Africa Region	Mikumi Hall
UNESCO	
Male Engagement	Mt. Meru Hall
MEN ENGAGE KENYA NETWORK	
NAPS Joint session	Selous Hall
AFRICAN EARLY CHILDHOOD NETWORK	

~ END OF DAY 2 ~

DAY 3: MARCH 13, 2024: MORNING SESSION

CHAIR: Ms. Erinna Dia - Associate Director for Early Childhood Development (ECD), UNICEF – HQ

RAPORTEURS:

1. **Vincent Mpepo** – Lecturer, Faculty of Education, OPEN UNIVERSITY OF TANZANIA
2. **Tewodros Tesemma**, Early Years Fellow Alum, WORLD BANK, ETHIOPIA

COORDINATOR: Ms. Elizabeth Gitonga - Programme Manager, AFRICAN EARLY CHILDHOOD NETWORK

TIME	DESCRIPTION
7:00 – 8:30	Arrival and registration of delegates
8:30 – 8:45	Performing Artists
8:45 - 10:15	<p>SESSION 5: FINANCING OF EARLY CHILDHOOD PROGRAMMES Session Chair: Rogers Golooba - Ministry of Gender Labour and Social Development, UGANDA</p> <p>PLENARY SESSION SELOUS HALL</p> <p>Keynote Speakers Domestic financing in support of ECD in Eastern Africa: The situation & recommendations for moving forward. <p align="right">Bob Muchabaiwa - Social Policy Specialist, UNICEF ESARO</p> Private financing in support of ECD in Eastern Africa: What models are there and what makes sense in which contexts? <p align="right">Reza Fazel - Associate Partner, OPEN CAPITAL</p> Moderator: Maniza Ntekim - Senior Programme Officer, CONRAD N. HILTON FOUNDATION</p> <p>Panellists</p> <ul style="list-style-type: none"> • Elaine Wacuka Hurt - Director of Partnerships, KIDOGO EARLY YEARS • Francine Inarukundo - Permanent Secretary, Ministry of Finance and Economic Planning, BURUNDI • Suleiman Yakubu - Development Specialist, THE POWER OF NUTRITION • Dr Tola Berisso Geda - Distinguished Scholar and Educationist, THE OROMIA EDUCATION BUREAU, ETHIOPIA
10:15 – 10:30	<p>MINISTERIAL KEYNOTE: MOBILIZING RESOURCES FOR SUSTAINABLE EARLY CHILDHOOD DEVELOPMENT Hon. Sarah Nyirabashitsi Mateke - Minister of State for Youth and Children Affairs, UGANDA</p>
10:30 – 11:00	TEA BREAK
11:00 – 12:30	<p>SESSION 6: MONITORING PROGRESS Session Chair: Dr. Janette Karimi, Head, Division of Newborn and Child Health, Ministry of Health, KENYA</p> <p>PLENARY SESSION SELOUS HALL</p> <p>Keynote Speakers Overview of the Current ECD monitoring Landscape <p align="right">Oliver Petrovic – Regional Advisor Early Childhood Development, UNICEF ESARO</p> Moderator: Peter Oola - Senior Programme Officer, ELMA PHILANTHROPIES</p> <p>Panellists</p> <ul style="list-style-type: none"> • Hassan Omary Muhomi – Tanzania ECD Dashboard and experience in the use of ECDI2030 • Monique Mukamana – Senior Programme Manager, National Child Development Agency, Rwanda • Sonja Giese – Founding Executive Director, DATADRIVE2030, South Africa • Timothy Opobo – Executive Director, AfriChild, Makerere University, Uganda
12:30 – 12:45	<p>KEYNOTE: STRENGTHENING ECD MONITORING FOR INFORMED DECISION-MAKING AND ACCOUNTABILITY Hon. Poloko N. Ntshwarang – Special Rapporteur on Education, AFRICAN COMMITTEE OF EXPERTS ON THE RIGHTS AND WELFARE OF THE CHILD</p>
12:45 – 14:00	EXHIBITION & HEALTH BREAK

DAY 3: MARCH 13, 2024: AFTERNOON SESSION

PARALLEL SESSIONS, SIDE EVENTS AND LEARNING SESSIONS

TIME:

14:00-15:00

SUB-THEME 4: GOVERNANCE & FINANCING OF ECD

PARALLEL SESSION TITLE	ROOM
<p>4.1: Funding and cost-tracking of ECD programmes,</p> <ol style="list-style-type: none"> 1. Emmanuel Maliti, Oxford Policy Management - Thrive Programme, Tanzania: Investigating how to strengthen planning and tracking of public expenditure on early childhood development (ECD) in Tanzania 2. Gloria Nkosi, Hope Worldwide South Africa, South Africa: Cost & Organizational Considerations for the Scaling of ECD Parenting Programs: The Caregiver Learning Through Play (CLTP) example in South Africa. 3. Nidhi Joshi, UNICEF, Rwanda: Business Case for employer-supported childcare 4. Patience Nelson Kawamala, Institute Social Work, Tanzania: Financing the National Multisectoral ECD Program in Tanzania: A Collaborative Approach 	<p>Selous Hall</p> <p>Chair: Dr. Jumanne Said Gomera, Lecturer, Institute of Social Work Tanzania.</p> <p>Rapporteur: Evelyn Ainomugisha</p>
<p>4.2 The investment case for ECD in Eastern Africa,</p> <ol style="list-style-type: none"> 1. Frank Samson, Children in Crossfire Tanzania, Tanzania: Resourcing National ECD Programme implementation 2. Katie Bullman, Genesis Analytics (with UNICEF and the government of Burundi), Burundi: The Value of Cost-Benefit Analyses in Advocating for Enhanced Investment in Early Childhood Development How learnings from award-winning research in Burundi can be leveraged. 3. Nada Elattar and Safina Mutumba, UNICEF Uganda, Uganda: Investing in the Future: A Cost-Benefit Analysis of Pre-Primary Education in Uganda 4. Nolasque Ndikumana, UNICEF, Burundi: Cost-Benefit Analysis for Investment in Early Childhood Development in Burundi. 	<p>Ruaha Hall</p> <p>Chair: Dr. Andrew Riechi, Senior Lecturer, Economics of Education, The University of Nairobi</p> <p>Rapporteur: Omwa Judith</p>
<p>4.3 Governance mechanisms,</p> <ol style="list-style-type: none"> 1. Sebastian Kitiku and Alinune Nsemwa, UNICEF, Ministry of Community Development, Gender, Women and Special Group Tanzania: Enhancing Multisectoral ECD Coordination Mechanism: Experience of the Development, Implementation and Monitoring of the National Multisectoral ECD Programme in Tanzania. 2. Lazaro Ernest, Tanzania Early Childhood Development Network (TECDEN), Tanzania: The role of the Civil Society Organizations in implementation of ECD agenda in Tanzania (National and sub-national level) 3. Nancy Juma, KMET, Kenya: Integration of Nurturing Care for ECD through leaderships, coordination, coordination, and Investment in Siaya County. 4. Tess Peacock, Equality Collective, The Republic of South Africa, Making Local Government Work for ECD: South Africa: A Collaborative ECD Advocacy Campaign for holistic, quality, inclusive, and well-funded ECD Services in South Africa 	<p>Mt. Kilimanjaro Hall</p> <p>Chair: Ms. Erinna Dia, Associate Director for Early Childhood Development (ECD), UNICEF – HQ</p> <p>Rapporteur: Caleb Ongweku Chitechi</p>

**TEA BREAK
15:00 - 15:30**

SUB-THEME 5: MONITORING PROGRESS FOCUSING ON DATA/EVIDENCE GENERATION, DISSEMINATION, AND UTILIZATION	15:30-16:30
PARALLEL SESSION TITLE	ROOM
<p>5.1: Exploring and evaluating successful early learning models in the classroom and at home</p> <ol style="list-style-type: none"> Ignasia Mligo, The Dodoma University, Tanzania: Assessment of the Pre-primary Children Readiness for School in Dodoma Region, Tanzania. Isália Gabriel Licença Mate, Education Faculty, Eduardo Mondlane University, Mozambique: Educational practices in childhood to promote gender equality and equity: An analysis in four Children's Centers in Maputo City. Martha Jacob Kabate, The Open University of Tanzania, Tanzania: What works best direct or indirect instruction strategies in enhancing letter name knowledge among preprimary children through environmental print in Tanzania. Rose Chikopela, Chalimbana University, Zambia: Responding to learning needs to early childhood education school children via teacher training. Sonja Giese, DataDrive2030, South Africa: Why do some children do so much better than their peers, despite facing very similar challenges? Lessons from the Positive Deviance Initiative. 	<p>Mt. Meru Hall</p> <p>Chair: Dr. Samuel Asare, Senior Research Manager, Education Sub Saharan Africa</p> <p>Rapporteur: Peter Sawa</p>
<p>5.2 Macro- and micro-level measurements of Quality ECD services</p> <ol style="list-style-type: none"> Alena Sakhonchik, World Bank: Findings from Women, Business, and the Law 2024 Childcare Indicator Hassan Omary and Alinune Nsemwa, Department of Computer Science and Engineering University of Dar es Salaam and ECD Specialist, UNICEF Tanzania: National ECD Dashboard – Strengthening National and subnational ECD data availability and usage in Tanzania. Juliet McCann, Emory Rollins School of Public Health, Kenya: Reliability and validity of the Global Scales for Early Development (GSED) tool for use with young children in Western Kenya 	<p>Mikumi Hall</p> <p>Chair: Yoshi Kaga</p> <p>Rapporteur: Nhandi Washington</p>
<p>5.3 Programming for children with developmental delays in vulnerable environments</p> <ol style="list-style-type: none"> Bankundiye Gisele, Humanity & Inclusion, Rwanda, and Uganda: ECD measurement to identify most vulnerable children. Caroline Nerima, AfriChild, Uganda: Uganda Functional Limitations among Child refugees with Developmental Disabilities and Barriers to Early Childhood Intervention in a Ugandan Refugee settlement. Charles Odol, Sightsavers, Kenya: Impact of a disability-inclusive early childhood education and development initiative on children's early learning and development in Kenya. Esther Jebor Chongwe, Aga Khan University, Institute for Human Development, Kenya: Interconnection between individual, household, environmental and system level factors in defining risk and resilience for children living in arid and semi-arid (ASAL) areas in Kenya. 	<p>Amboni Hall</p> <p>Chair: Prof Alecia Samuels, Associate Professor: Centre for Augmentative and Alternative Communication Faculty of Humanities, University of Pretoria</p> <p>Rapporteur: Kisyeri Nyagoryon Newland</p>
<p>5.4 Making a difference for children in refugee settings.</p> <ol style="list-style-type: none"> Firminus Mugumya, The AfriChild Centre, Uganda: Strengthening research and evaluation capacity for evidence driven policies and programs to improve refugee child wellbeing in Africa settlement. Joseph Kabanda, BRAC, Uganda: BRAC's Two-Generation Model of Holistic Child and Family Development in Ugandan Refugee Context Obed Kambasu, Innovations for Poverty Action (IPA), Uganda: Two-generation ECD programming in refugee settings in Uganda. Tina Asnake Belaynehe and Estela Armijo Martinez, Early Years Fellows, Ethiopia and El Salvador, World Bank, Global: Effects of Early Childhood Development (ECD) programs on the socio-emotional well-being of children and caregivers in refugee and forced displacement settings. 	<p>Udzungwa Room</p> <p>Chair: Fredrick Nyaga, National Founder and Chairperson at the Men Engage Kenya Network</p> <p>Rapporteur: Joseph Masunga Mhuli</p>
<p>ROUNDTABLES DISCUSSIONS</p>	<p>15:30 – 16:30</p>
<p>Roundtable 1: Empowering parents, caregivers, and communities 1</p>	<p>Selous Hall</p>

<ol style="list-style-type: none"> 1. Boitumelo Monoketsi, Early Childhood Development Corporation, South Africa: Empowering Parents, Caregivers, and Communities 2. Charles Kemboi, ChildFund Kenya, Kenya: A Strengthened Partnership for Nurturing Care (2018–2021) in Kenya 3. Fadhili Mtanga, Health & Insurance Management Services Organization, Tanzania: Fostering Community Awareness of ECD 4. Girles Shaban, Girl Effect, Tanzania: Formative qualitative research to inform the potential design of responsive caregiving intervention to improve early child development in Arusha, Tanzania 5. Raquel Vareda, Feeding the Change, Mozambique: Exploring early childhood development (ECD) and stimulation (ECS) knowledge and practices in Mozambican rural communities. 6. Rayanatou Laouali, Pia Sosa, and Manzuma Bazmamadova, Early Years Fellows, Niger, Colombia, Tajikistan, World Bank Global: Promoting quality parenting programs: A Guidance Note. 7. Roreen Vitumbiko Mzembe, Help a Child Malawi (HAC), Malawi: Improving Knowledge, Attitude and Practices on Parenting Skills for Mothers and Fathers in Malawi 8. Teresa Mwoma, Early Childhood Development Network for Kenya (ECDNeK), Kenya: Empowering Communities for Inclusive Early Childhood Development in Kenya 	<p>Chair: Ms. Amina Birungi, Assistant Lecturer, Muni University, Uganda</p> <p>Rapporteur: Isaac Oyiaga</p>
<p>Roundtable 2: Empowering parents, caregivers, and communities 2</p> <ol style="list-style-type: none"> 1. Daniel Lupiya Mpolomoka, UNICAF University Zambia, Zambia: Health Concerns in Early Childhood Education Centres: Scenarios in selected Urban and Rural Community and Private Schools in Zambia. 2. Efua Irene Amenyah Sarr, Université Gaston Berger, Senegal: Teachers’ profile and roles in supporting Early Children’s in Schooling. 3. Eunice Njoroge, Aga Khan University, Institute for Human Development, Kenya: Engaging Fathers: Adaptation and Programme Experience of Implementing SMS4baba mHealth Intervention in Kenya’s Urban Informal Settlements. A Pilot Feasibility Mixed Methods Study. 4. Hawa Juma Selemani, Ministry of Education Science and Technology, Tanzania: Assessment for Childrens’ Learning Outcome. 5. Jayne Kariuki – Njuguna, UNICEF Kenya: Evidence Informed National SBC Strategy and integrated package for ECD. 6. Schjolastica Olomi, BRAC Maendeleo Tanzania, Tanzania: Mobilising low-income communities to support and sustain Early Childhood Development Centres - BRAC Experience from Tanzania. 7. Winnie Biira, Children on the Edge Africa, Uganda: A model of sustainable Early Childhood Education in Kyaka II refugee settlement, Uganda. 8. Yuri Kim, Harvard. T.H. Chan School of Public Health, Kenya: Barriers and Facilitators to Male Caregivers’ Engagement in the Moments that Matter Parenting Program in Western Kenya 	<p>Ruaha Hall</p> <p>Chair: Dr. Rose Chikopela, Head of Department,</p> <p>Rapporteur: Omwa Judith Aluoch</p>
<p>Roundtable 3: Empowering parents, caregivers, and communities 3</p> <ol style="list-style-type: none"> 1. Tobias Aulo, ADS- Nyanza Episcopal Relief & Development, Kenya: Bridging Religion and Science to Improve Responsive Caregiving. 2. Girles Shaban, Girl Effect, Tanzania: What do we Know? Key learnings from Adolescent and Young Parents in Meru district. A Responsive Caregiving Qualitative study. 3. Mike Mwenda, Regional Psychosocial Support Initiative (REPSSI), Zambia: Self-Help Group; Breaking the Cycle of Poverty for Adolescent and Young Mothers (AYM’s) through Economic Strengthening. 4. Rita Moses Mbeba, Girl Effect, Tanzania: A qualitative study to understand approaches for empowering adolescent and young parents (15-29 years) on responsive caregiving practices in Arusha region, Tanzania. 5. Rita Moses Mbeba, Girl Effect, Tanzania: An exploratory qualitative study on impediments for adolescents and young parents to practise responsive caregiving in Arusha, Tanzania. 6. Rita Moses Mbeba, Girl Effect, Tanzania: Assessing adolescent girls and young caregivers’ drivers for uptake of children’s routine immunisation in Tanzania. 	<p>Kilimanjaro Hall 1</p> <p>Chair: Mrs. Maggie Kuchonde, Lecturer in Early Childhood Development, University of Malawi</p> <p>Rapporteur: Peter Sawa</p>
<p>Roundtable 4: Systems Strengthening</p>	<p>Mt. Meru Hall</p>

<ol style="list-style-type: none"> 1. Abdoulie FR JADAMA, University of the Gambia (UTG), The Gambia: Scaling up learning through play approaches in early childhood education in the Gambia: Baseline survey findings. 2. Charles Boniface Fungo, Catholic Relief Services – CRS, Tanzania, Kenya & Mozambique: Faith-Based Systems Advocacy for Nurturing Care for Early Childhood Development Works: Evidence from Kenya, Tanzania, and Mozambique. 3. Daphne Mugizi, UNICEF, Uganda: Expanding access to quality ECCE 4. Heri Ayubu, Children in Crossfire Tanzania (CiC), Tanzania: Quality improvement of Pre-Primary Education at scale. 5. Jean Marie Vianney Havugimana, FXB Rwanda, Rwanda: Play Collaborative Approach: An implementation strategy to scale an evidence-based early childhood development (ECD) intervention using government-led child protection volunteers. 6. Rebecca Hickman, SmartStart, South Africa: The role of systems thinking in unlocking a pipeline of new early learning programmes. 7. Susan Wamithi, Kenya Paediatric Association, Kenya: Dissemination of the WHO/UNICEF Nurturing Care Practice Guide for managers and frontline health care workers. 8. Svetlana Karuskina-Drivdale, PATH, Mozambique (but with implications for East Africa): Assessing mental health integration into antenatal and postnatal care (ANC/PNC) in Mozambique. 9. Teresa Mwoma, ECD Network for Kenya, Kenya: Strengthening ECD Systems in Kenya: Study Findings from Baseline Survey. 	<p>Chair: Mary-Anne Schreiner, UNICEF Tanzania</p> <p>Rapporteur: Caleb Ongweku Chitechi</p>
<p>Roundtable 5: Scaling up and innovating.</p> <ol style="list-style-type: none"> 1. Akwang Beatrice, Ministry of Education and Sports, Uganda: Stimulating Environment and Number Concept Development in Lira District, Uganda Development in Lira District 2. Beatrice Nyakwaka Ogutu, Investing in Children and their Societies (ICS SP), Kenya: Combining parenting education, nutrition counseling, child protection and cash transfer to improve outcomes for children 0-3 Years in Kilifi, Kenya. 3. Hamis Mugendawala, National Planning Authority of Uganda, Uganda: Policy Conflicts, and Innovations in delivery of Early Childhood Education and Development (ECED) in Uganda: The Double Jeopardy. 4. Joseph Kabanda, BRAC Uganda, Uganda: BRAC's Two-Generation Model of Holistic Child and Family Development in Ugandan Refugee Context. 5. Marc Aguirre, Hope Worldwide South Africa, South Africa: Implementing Corporate Marketing and Communications Strategies to Amplify and Scale Community Advocacy & Reach for ECD Parenting Programs: The Caregiver Learning through Play (CLTP) Example in South Africa. 6. Monica Balinako, Kyambogo University, Uganda: Instructional Media Use and Students' Participation In E-Learning: A Case of ECD Department, Kyambogo University, Uganda. 7. Wilberforce Emmanuel Meena, Haki Elimu, Tanzania: Pre-Primary teachers strive to support pupils learning: using action learning model for teachers professional development in Tanzania. 	<p>Mikumi Hall</p> <p>Chair: Agnes Ngonyo</p> <p>Rapporteur: Evelyn Ainomugisha</p>
<p>Roundtable 6: Financing</p> <ol style="list-style-type: none"> 1. Catherine Bateta, Save the Children, Rwanda: Empowering Entrepreneurial Refugee Mothers in Rwanda Through ECD/Daycares. 2. Emmanuel Munyemana, UNICEF, Rwanda: An Investment Case for the Future of Early Childhood Development in Rwanda. 3. Gilbert Munyemana, Government and Genesis Analytics, Rwanda: For the Future: An Investment Case for Early Childhood Development in Rwanda. 4. Katie Bullman, Genesis Analytics, Tanzania: Building the Foundations: An Investment Case for Early Childhood Development in Mainland Tanzania. 5. Moses Emanuel Mnzava, HakiElimu, Tanzania: The Political Economy of Early Childhood Development in Tanzania Mainland: Status, Practices, Challenges, and Opportunities. 6. Naison Bhunhu, ZINECDA, Southern Africa: ECD Financing in Southern Africa 	<p>Amboni Hall</p> <p>Chair: Naison Bhunhu, National Coordinator, Zimbabwe Network of Early Childhood Actors (ZINECDA)</p> <p>Rapporteur: Alfonse Simon Ngwenya</p>
<p>Roundtable 7: Governance and leadership</p> <ol style="list-style-type: none"> 1. Abella Atieno Owuor, Kisumu Medical and Education Trust (KMET), Kenya: A Coordinated Nurturing Care for Early Childhood Development (NCfECD). 	<p>Udungwa Hall</p> <p>Chair: Bruno Ghumpi, Advocacy Manager,</p>

<p>implementation through a multi-sectoral lens: Experience of Lake Region Economic Bloc (LREB).</p> <ol style="list-style-type: none"> 2. Beatrice Nyakwaka Ogutu, Investing in Children and their Societies (ICS SP), Kenya: Strengthening Government-led intersectoral workforce to accelerate scaling up of ECD based outcomes in low resource settings. 3. Godfrey Mwesigye, International Rescue Committee, Uganda: Kulea Watoto Advocacy: Championing the two-generation approaches to Early Childhood Development in the refugee setting. 4. Khadija Abdulrahim Karama, Catholic Relief Services, Kenya: County Government Investing in ChildCare. 5. Pamela Josephine Anyango, Ministry of Health, Siaya County, Kenya: Multisectoral approach implementation to enhance nurturing care for early childhood development in Siaya County. 6. Richard Omasete, International Rescue Committee, Uganda, Tanzania, and Ethiopia: System strengthening for continuous professional development in early childhood education (ECE) using learning through play. 7. Susan Greyling, Northwest University (NWU, Potchefstroom Campus), South Africa: Management Training for Foundation Phase teachers who strive towards Principal positions: Case study in the NorthWest Province. 	<p>Tanzania Early Childhood Development Network</p> <p>Rapporteur: Adelphina Pantaleo</p>
<p>Roundtable 8: Monitoring Progress</p> <ol style="list-style-type: none"> 1. Agatha Kafuko, The AfriChild Centre Uganda: Access Challenges and Availability of Early Intervention Services for Children with Developmental Disabilities in a Ugandan Refugee Settlement. 2. Alex Alinaitwe, The Africhild Centre Makerere University, Uganda: Evidence review and synthesis on two generation intervention programming- lessons for Kulea Watoto Project in Uganda. 3. Deborah Rebecca Kyazze, National Curriculum Development Centre, Uganda: Strategies and challenges in advancing early childhood care and education through implementation science, a case of Uganda. 4. Eunice Mueni Williams, University of Cambridge, Sub-Saharan African countries and Tanzania, Kenya, and Uganda: Taking Stock of Research Evidence on Early Childhood Development in Eastern African Countries: Comparative Analysis of both Published and Unpublished Research. 5. Mary-Ann Scheiner, UNICEF, Ministry of Community Development, Gender, Women and Special Groups, Oxford Policy Management THRIVE Project, Tanzania: Situation Analysis of ECD in Tanzania Mainland: Policy and Implementation Gap Analysis. 6. Ngoma Mwimbu; Joke Van Belle; Loy Lin Apiyo; Liliose Mukantagwera, VVOB - education for development, Rwanda, Uganda, Zambia: Scaling and institutionalizing play-based learning in ECE. Lessons from Rwanda, Uganda and Zambia based on the 'ECE Systems Learning through Play Readiness' tool. 	<p>Bagamoyo Hall</p> <p>Chair: Mr. Meinrad Haule Lembuka, Lecturer, The Open University of Tanzania</p> <p>Rapporteur: Catherine N. Githae</p>

SIDE EVENTS/LEARNING SESSIONS (FOR PRE-REGISTERED PARTICIPANTS)

TIME: 16:30-18:30	
Reaching Caregivers of Children 0-3 years with Support to Enable them to Practice Responsive Caregiving and Provide Opportunities for Early Learning: Approaches Using Care for Child Development <p style="text-align: center;">SAVE THE CHILDREN, EGPAF & BUILDING BRAINS</p>	Mkomazi Hall
Responsive Caregiving Experts Committee <p style="text-align: center;">EAST CENTRAL AND SOUTHERN AFRICA - HEALTH COMMUNITY (ECSA-HC)</p>	Kitulo Hall
Strengthening National Networking <p style="text-align: center;">AFRICAN EARLY CHILDHOOD NETWORK</p>	Saadani Room
Systems Thinking as an approach to guide action and advocacy for ECD <p style="text-align: center;">MATHEMATICA (COORDINATING ORGANIZATION)</p>	Mikumi Hall
Networking Session <p style="text-align: center;">WORLD FORUM FOUNDATION</p>	Udzungwa Room
Scaling Responsive Caregiving and Centre-Based Care: Lessons Learnt <p style="text-align: center;">THRIVE</p>	Kilimanjaro Hall
BRAC Play Based Model: Experience in Community Engagement in Developing Low-Cost Materials and Gender Responsive teaching in Tanzania and Uganda <p style="text-align: center;">BRAC International</p>	Ruaha Hall
Approaches to monitoring, evaluation and learning of early childhood innovations. <p style="text-align: center;">GLOBAL SCHOOLS FORUM</p>	Bagamoyo Hall
Awareness and Treatment of Sickle cell <p style="text-align: center;">BURUNDI EARLY CHILDHOOD NETWORK</p>	Saadini Room
ECDAN- Dinner (pre-registration required) <p style="text-align: center;">ECDAN</p>	Marquee

~ END OF DAY 3 ~

DAY 4: MARCH 14, 2024: MORNING SESSION

CHAIR: Ms. Aster Haregot - Board Member, AFRICAN EARLY CHILDHOOD NETWORK

RAPPORTEURS:

1. Dr. Nipael Mrutu - Assistant Professor, AGA KHAN UNIVERSITY IED
2. Tina Asnake, Early Years Fellow, WORLD BANK, ETHIOPIA

COORDINATOR: Dr. George Evans Owino - Programme Manager, AFRICAN EARLY CHILDHOOD NETWORK

TIME	DESCRIPTION
7:00 – 8:30	Arrival and registration of delegates
8:30 – 8:45	Performing Artists
8:45 - 10:15	<p>SESSION 7: SCALING UP SERVICES</p> <p>Session Chair: Sheila Manji -Early Childhood Development Specialist - WORLD HEALTH ORGANIZATION (GENEVA)</p> <p>Keynote Speaker</p> <ul style="list-style-type: none"> • Scaling Up Services Professor Mark Tomlinson, Co-Director of the Institute for Life Course Health Research, STELLENBOSCH UNIVERSITY. <p>Moderator: Teshome Desta Woldehanna, Medical Officer - Reproductive, Maternal, Newborn, Child and Adolescent Health, WORLD HEALTH ORGANIZATION, NAIROBI</p> <p>Panellists</p> <ul style="list-style-type: none"> • Ms. Elizabeth Gupta – General Manager, BRAC ENTERPRISES TANZANIA LIMITED (BETL) • Dr. Elyas Abdi - Director General, Education, State Department for Basic Education, KENYA. • Dr. Janine Händel - Chief Executive Officer, ROGER FEDERER FOUNDATION • Dr. Meseret Zelalem - Chief Program and Research Officer, Addis Ababa ECD Center of Excellence, Innovation & Learning, ETHIOPIA • Ms. Sikudhani Mkama – District Reproductive and Child Health Coordinator, Meru District, Arusha Region, TANZANIA
10:15 – 10:30	<p>KEYNOTE: LEVERAGING PARTNERSHIPS FOR EFFECTIVE SCALING OF EARLY CHILDHOOD DEVELOPMENT SERVICES IN THE EAST AFRICAN COMMUNITY - Dr. Irene Isaka – Director Social Sectors, EAST AFRICAN COMMUNITY</p>
10:30 – 11:00	TEA BREAK
11:00-11:15	<p>KEYNOTE: CARING FOR THE CAREGIVER: Andrea Torres – Director, Programme Support and Learning, VAN LEER FOUNDATION</p>
11:15 – 12:30	<p>SESSION 8: ECD WORKFORCE DEVELOPMENT</p> <p>Session Chair: Dr. Frank Bujeje, Chief Executive Officer, BURUNDI EARLY CHILDHOOD PLATFORM</p> <p>Keynote Speaker</p> <ul style="list-style-type: none"> • Status of the ECD Workforce: Regional Perspectives Ms. Given Daka – Technical Advisor, AFRICAN EARLY CHILDHOOD NETWORK <p>Moderator: Ms. Josephine Ferla – Senior ECCD Specialist, SAVE THE CHILDREN TANZANIA</p> <p>Panellists</p> <ul style="list-style-type: none"> • Mr. Victor George Bwindiki- Assistant Director, Policy Development, Basic Education Section, Ministry of Education, Science and Technology, TANZANIA. • Dr. Amakove Wala – Chief Executive Officer, NYARAI HOMECARE SERVICES • Amina Mwitw - Regional ECD Advisor, East Africa, AGA KHAN FOUNDATION • Dr. Migadde Deogratias - Senior Medical Officer - Reproductive and Child Health Department, Ministry of Health, UGANDA.
12:30 – 12:45	<p>MINISTERIAL KEYNOTE: EMPOWERING THE ECD WORKFORCE: A CORNERSTONE FOR QUALITY EARLY CHILDHOOD DEVELOPMENT SERVICES - Hon. Aya Benjamin Warille, Minister of Gender, Child and Social Service, SOUTH SUDAN.</p>
12:45 – 14:00	EXHIBITION & HEALTH BREAK

DAY 4: MARCH 14, 2024: AFTERNOON SESSION

RAPPORTEURS:

1. **Dr. Daphina Libent** - Senior Lecturer Faculty of Education & Director, Quality Assurance, OPEN UNIVERSITY OF TANZANIA
2. **Alieu K. Bah**, Early Years Fellow, WORLD BANK, GAMBIA.

14:00 – 15:00 SESSION 9: PARTNERSHIP, LEADERSHIP AND COORDINATION

PLENARY SESSION

SELOUS HALL

Session Chair: Mr. Sebastian Kitiku, Director, Ministry of Community Development, Gender, Women and Special Groups, TANZANIA.

Keynote Speakers

- Strengthening systems for ECD: The strategic role of Leadership, Partnerships and Effective Governance.

Ms. Elizabeth Lule – Executive Director, EARLY CHILDHOOD DEVELOPMENT ACTION NETWORK (ECDAN)

Moderator: Ms. Rosemary Mwaisaka, Senior Public Health and Nutrition Advisor, AFRICAN EARLY CHILDHOOD NETWORK

Panellists

- **Dr Caseley Olabode Stephens** - Policy Officer, Education Department of Human Resource Science and Technology, AFRICAN UNION COMMISSION
- **Dr. Jones Kaponda Masiye** - Manager, Non-Communicable Diseases, Food Security and Nutrition. EAST, CENTRAL AND SOUTHERN AFRICA HEALTH COMMUNITY (ECSA-HC)
- **Ms. Kefilwe Rhoba Moalosi** - Project Manager for Nutrition and Food Safety Programme, Directorate of Agriculture, Food Security and Environmental Sustainability, AFRICAN UNION DEVELOPMENT AGENCY (AUDA-NEPAD).
- **Mr. Morris Tayebwa** – Programme Officer, EAST AFRICAN COMMUNITY SECRETARIAT
- **Ms. Priscilla Wanjiru Warui** - Policy and Partnerships Expert, Department of Health and Humanitarian Affairs, AFRICAN UNION COMMISSION.

CLOSING CEREMONY

GOVERNMENT OF TANZANIA

15:30 – 16:30

PLENARY SESSION

SELOUS HALL

- National Anthem and East Africa Anthem - Brass Band
- Prayers - Religious leaders (TEC, CCT & BAKWATA)
- Introduction of key guests - PS- MOCDGWSG
- Greetings from Dar es Salaam Region- Hon. Albert Chalamila, Regional Commissioner
- Meeting deliberations and Call to action – EAC
- Vote of thanks
- Entertainment
- Welcoming the GoH - Minister - MOCDGWSG
- Launch: ECD investment case and comprehensive community health workers job aid
- Closing remarks- Guest of Honor
- Group photo by MC

DAY 5: MARCH 15TH

SIDE EVENTS/LEARNING SESSIONS (FOR PRE-REGISTERED PARTICIPANTS)

DAY 5: MARCH 15, 2024: AFTERNOON SESSION		
Time	Side Events/Learning Sessions (For Pre-Registered Participants)	Room
	SERENA HOTEL	
8:00-18:30	Catalyzing Research, Advocacy, And Engagement (Care) For Childcare Advocacy: Partner Consultation for The Childcare Fund	Kivukoni 2
	ECDAN	
8:30-12:30	The Best Investment: How Do We Move from Evidence to Action in Financing Early Childhood Development in East Africa?	Kivukoni 3
	GENESIS ANALYTICS	
8:30-13:30	Meeting of the regional working group on Early Childhood Development	Kivukoni 1
	EAST AFRICAN COMMUNITY	


~ END OF CONFERENCE ~



OPENING CEREMONY




SPEAKER BIOS AND PROFILES

DAY 1 AFTERNOON



CHAIR	PROFILE
	<p>EXECUTIVE DIRECTOR, AFRICAN EARLY CHILDHOOD NETWORK</p> <p>Lynette Okengo is a founder member and the Executive Director of the Africa Early Childhood Network. She is an early childhood development expert whose professional experience spans policy and strategy development, program design and evaluation as well as advocacy and capacity building. Prior to her work with AfECN, Lynette held positions as Senior Technical Advisor and Consultant for various national and international organizations as well as UN agencies including the World Bank and UNICEF Eastern and Southern Regional Office among others. A major focus of her work across the region has been the design of strategies to enhance the work of governments, parents and teachers in supporting improved child outcomes. A critical aspect of her work also involves coordination of continental ECD advocacy activities as AfECN serves as the co-ordinator of the African Union CESA ECED Cluster. Lynette holds a PhD degree in Early Childhood Studied from Kenyatta University.</p>
	<p>HEAD OF EDUCATION DIVISION, AFRICAN UNION COMMISSION</p> <p>Sophia Ashipala is a skilled communicator who heads the AUC Education division. She has been in the forefront of championing for quality and innovative education and skilling of young people across the globe. As the Head of the Education Division, Ms Ashipala is committed to realising the goals in Agenda 2063 of th Africa We Want through development and harmonization of education policies and programs on the continent, towards achievement of the AU vision, spearheading the revitalization of education systems, developing and managing continental education management Information systems linked to regional and national levels providing information for local and international users and organizing meetings of the relevant Specialized Technical Committee and other political and professional bodies to ensure collective articulation of priorities, ownership and accountability.</p>
	<p>MINISTER OF GENDER, CHILD AND SOCIAL SERVICE. SOUTH SUDAN</p> <p>Hon. Aya Benjamin Libo Warille holds M.Sc. Animal Production- University of Aberdeen -Scotland and B.Sc. Hons Animal Production- University of Juba – South Sudan. She previously worked with Ministry of Animal Resources and Fisheries-Government of South Sudan as Deputy Director of Animal Production, VSF-Suisse as Gender Advisor, Consultant with UNDP on Sustainable livelihoods in Pibor County – South Sudan: Dealing mainly with Livestock component, Livestock Officer (Intern) FAO/OLS in Thiet and Yambio-South Sudan, Teaching Assistant University of Juba in the College of Natural Resources and Environmental studies, Community Health Visitor at Angola Clinic, MSF-France and Community Health Promoter (Displaced Camp) ADRA.</p>
	<p>CABINET SECRETARY, LABOUR AND SOCIAL PROTECTION KENYA</p> <p>Honourable Florence Bore serves as the Cabinet Secretary for Labour and Social Protection, where she plays a pivotal role in shaping policies and programs to enhance the welfare of citizens. With a strong commitment to social justice and equity, Hon. Bore leads initiatives aimed at promoting employment opportunities, ensuring fair labor practices, and providing social assistance to vulnerable populations. Her leadership and advocacy efforts contribute to the advancement of labor rights and social protection policies that uplift communities and foster inclusive growth. Hon. Florence Bore's dedication to serving the needs of the people reflects her deep-rooted commitment to building a more equitable and prosperous society.</p>

<p style="text-align: center;">PANELLIST</p> 	<p style="text-align: center;">MINISTER OF STATE FOR YOUTH AND CHILDREN AFFAIRS UGANDA</p> <p>Honourable Nyirabashitsi Sarah Mateke is the currently the Minister of State for Youth and Children Affairs in the Ministry of Gender, Labour and Social Development. She is also the Woman member of Parliament, Kisoro District in the 11th Parliament. She is not strange to the political arena, having previously served in the 9th Parliament in the same capacity. A retired seasoned civil servant, Honourable Sarah worked in Kisoro District for 10 years in administration which thus forms her drive to serve with diligence and objectivity. She is also the current Chairperson of the Board of Trustees of the Metropolitan International University, Kampala and also the Chairperson, board of Directors, Makerere Metropolitan Management Institute, Kampala and other campuses, Kisoro, inclusive.</p>
<p style="text-align: center;">HON. SARAH NYIRABASHITSI MATEKE</p>	<p style="text-align: center;">PANELLIST</p> 
<p style="text-align: center;">HON. MME FRANCINE INARUKUNDO</p>	<p style="text-align: center;">PERMANENT SECRETARY, MINISTRY OF FINANCE BURUNDI</p> <p>Ms. Francine Inarukundo is the Permanent Secretary in the Ministry of Finance, Budget and Economic Planning in Burundi. She has been instrumental in spearheading investments to improve human capital especially in the early years at national and sub national levels. Previously, she held several senior positions within the Government of Burundi including a senior official with the Burundi Revenue Authority and at the Senate of Burundi as part of staff at the Finance Commission. She is a distinguished and results driven public service official.</p>

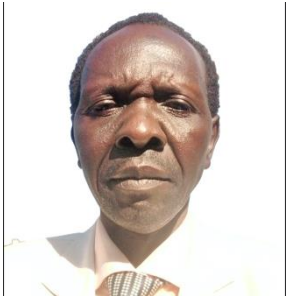

SESSION 2 (a)

<p style="text-align: center;">CHAIR</p> 	<p style="text-align: center;">DEPUTY PERMANENT SECRETARY, MINISTRY OF COMMUNITY DEVELOPMENT, GENDER, WOMEN AND SPECIAL GROUPS</p> <p>Amon Anastaz Mpanju serves as the Deputy Permanent Secretary, bringing his expertise to administrative and leadership roles within the government of Tanzania. With a background in entrepreneurship and a dedication to social impact, Mpanju leverages his skills to drive initiatives that foster development and progress in the country. His strategic vision and commitment to public service have earned him recognition as a valuable asset within the government, where he works tirelessly to implement policies that enhance the lives of Tanzanians. Mpanju's leadership exemplifies a blend of innovation, integrity, and a deep-rooted desire to contribute to the betterment of his nation.</p>
<p style="text-align: center;">HON DR. AMON MPANJU</p>	<p style="text-align: center;">SENIOR PROGRAMME OFFICER-HHS AFRICAN UNION COMMISSION</p> <p>Princess Alleluia Delphine is a highly qualified professional with a Master of Sciences in Global Health Delivery and a Bachelor's degree in Agricultural Economics and Agribusiness. She has also acquired two specialized certifications, one from HarvardX in Early Childhood Development and another from Tufts University in Pandemic Preparedness and Response through a One Health Lens. With over ten years of diverse experience, Princess Alleluia has made significant contributions to various organizations, including the United Nations International Children's Fund (UNICEF), Partners In Health (PIH) Rwanda, Clinton Health Access Initiative (CHAI), Family Health International 360 (FHI360), and Africa Early Childhood Network (AfECN). Currently, Princess Alleluia serves as the CARMMA Plus Senior Programme Officer within the Health, Humanitarian Affairs, and Social Development Department of the African Union Commission, where she leads the implementation of the Re-Strengthened Campaign on Accelerated Maternal Mortality in Africa 2021-2030 (CARMMA Plus), demonstrating her commitment to improving maternal health outcomes across the continent.</p>
<p style="text-align: center;">MODERATOR</p> 	
<p style="text-align: center;">ALLELUIA DELPHINE CARMMA PLUS</p>	



<p style="text-align: center;">PANELLIST</p>  <p style="text-align: center;">DR. ALINE UWIMANA</p>	<p>DIVISION MANAGER FOR MATERNAL AND CHILD HEALTH, RWANDA BIOMEDICAL CENTER (RBC/MOH) RWANDA</p> <p>Dr. Aline Uwimana is the Division Manager for Maternal and Child Health at the Rwanda Biomedical Center (RBC), part of the Ministry of Health (MOH) in Rwanda. With a focus on improving healthcare outcomes for mothers and children, she leads initiatives to enhance access to quality services nationwide. Dr. Uwimana's expertise in public health and clinical practice, coupled with her advocacy efforts, drives progress in reducing maternal and child mortality rates. Through collaboration with diverse stakeholders, she champions evidence-based strategies to ensure that every mother and child in Rwanda receives the care they need to thrive.</p>
<p style="text-align: center;">PANELLIST</p>  <p style="text-align: center;">DR. ANANIE NDACAYISABA</p>	<p>DIRECTOR OF PROGRAMME, MINISTRY OF PUBLIC HEALTH AND FIGHT AGAINST AIDS BURUNDI</p> <p>Dr. Ananie Ndacayisaba serves as the Director of Programs at the Ministry of Public Health and Fight Against AIDS. With a steadfast commitment to public health and combating the spread of HIV/AIDS, Dr. Ndacayisaba leads initiatives to develop and implement comprehensive healthcare programs. His expertise in health policy and program management drives efforts to improve access to healthcare services and reduce the prevalence of infectious diseases. Through strategic leadership and collaboration with stakeholders, Dr. Ndacayisaba plays a vital role in advancing the nation's health agenda and ensuring the well-being of its citizens.</p>
<p style="text-align: center;">PANELLIST</p>  <p style="text-align: center;">DR JANETTE KARIMI MUNYI</p>	<p>HEAD, DIVISION OF NEONATAL AND CHILD HEALTH KENYA</p> <p>Dr. Janette Karimi Munyi is the Head of the Division of Neonatal and Child Health, where she demonstrates an unwavering commitment to improving healthcare outcomes for newborns and children. With a wealth of experience and expertise in pediatric care, Dr. Munyi leads initiatives aimed at developing and implementing comprehensive healthcare strategies. Her dedication to evidence-based practices and innovative approaches drives progress in reducing neonatal and child mortality rates. Through her leadership and collaboration with healthcare professionals, Dr. Munyi plays a pivotal role in advancing the field of neonatal and child health, ensuring that every child receives the care they need to thrive.</p>
<p style="text-align: center;">PANELLIST</p>  <p style="text-align: center;">JOSEPH KALAKA</p>	<p>MINISTRY OF HEALTH DEMOCRATIC REPUBLIC OF CONGO. Joseph Kalaka is a dedicated healthcare professional serving within the Ministry of Health. With a passion for public health and a commitment to improving healthcare systems, Joseph works diligently to address healthcare challenges and promote wellness within communities. Drawing on his expertise in health policy and program management, he collaborates with colleagues and stakeholders to develop and implement initiatives that enhance access to quality healthcare services. Joseph's unwavering dedication to advancing public health initiatives makes him an invaluable asset to the Ministry of Health and the communities it serves.</p>

<p style="text-align: center;">PANELLIST</p> 	<p>SENIOR MEDICAL OFFICER, MINISTRY OF HEALTH UGANDA</p> <p>Dr. Migadde Deogratias is a Public Health specialist working in the Reproductive and Child Health Department, currently coordinating Newborn and Child Health at the Ministry of Health. Passionate about improving maternal and child well-being through evidence-based interventions. Experienced in program management, advocacy, and community engagement to ensure equitable access to healthcare services. Committed to fostering collaborations and implementing policies that prioritize the survival and development of children within the country.</p>
<p style="text-align: center;">DR. MIGADDE DEOGRATIAS</p>	
<p style="text-align: center;">PANELLIST</p> 	<p>COORDINATOR, NEWBORN AND CHILD HEALTH, TANZANIA</p> <p>Naomi Chamhene serves as the Coordinator for Newborn and Child Health, demonstrating a steadfast commitment to improving healthcare outcomes for the most vulnerable members of society. With a wealth of experience and expertise in maternal and child health, Naomi leads initiatives aimed at developing and implementing comprehensive healthcare strategies. Her dedication to evidence-based practices and innovative approaches drives progress in reducing newborn and child mortality rates. Through her leadership and collaboration with healthcare professionals, Naomi plays a pivotal role in advancing the field of newborn and child health, ensuring that every child receives the care they need to thrive.</p>
<p style="text-align: center;">NAOMI CHAMHENE</p>	


SESSION 2 (b)

<p style="text-align: center;">PROFILE</p>	
<p style="text-align: center;">CHAIR</p> 	<p>DIRECTOR, MINISTRY OF GENERAL EDUCATION AND INSTRUCTION, SOUTH SUDAN</p>
<p style="text-align: center;">SERAFINO TISA</p>	
<p style="text-align: center;">MODERATOR:</p> 	<p>REGIONAL CO-ORDINATOR, THE AFRICAN EARLY CHILDHOOD NETWORK</p> <p>Rutajwaha, Arcard William an ECD consultant, has more than 20 years of experience in Early Childhood Development. Consulted with UNICEF Tanzania country office, coordinating the development of the satellites pre-primary program; building ECD capacity for paraprofessional and pre-primary teachers and sensitizing communities to build pre-primary schools in distant hard to reach communities. Coordinated Tanzania ECD network; has participated in ECD researches and evaluations of ECD programs with different organizations. Rutajwaha, is a consultant with AfECN for the last 6 years and has been instrumental in partnership building and formation of National ECD Networks in the region. He is organized and creative with partnership building skills, highly committed and motivated team player. He is an ECD Global Leader for Africa; holds a Graduate Diploma in International Child and Youth Care for Development from University of Victoria Canada,</p>

<p>ARCARD RUTAJWAHA</p>	<p>and a Certificate in Brain Story Certification by Alberta Family Wellness Initiative. He is fluent in English and Swahili.</p>
<p>PANELLIST</p> 	<p>NATIONAL COORDINATOR, BOUCLIER POUR ENFANT DE LA RDC DEMOCRATIC REPUBLIC OF CONGO</p> <p>Damien is a civil society actor and driving force in ECD. He is the national coordinator of the 'Bouclier pour enfant de la RDC'. Damien is a teacher and shepherd of a prayer group called "Fraternité des Foyers Chrétiens" (Fraternity of Christian Homes). He has taught at several schools in Uvira in South Kivu including serving as an educational agent at SOS-KINDERDOF DRC. The main area of intervention is in the protection of children along with human rights and gender-based violence. Damien holds a bachelor's degree in history and social sciences at the University of São Paulo. S.P/Bukavu -SuD-KiVU. Damien is married.</p>
<p>DAMIEN KAKULE</p>	
<p>PANELLIST</p> 	<p>NATIONAL COORDINATOR, ECD NETWORK OF KENYA</p> <p>Dr. Teresa Mwoma is a distinguished scholar and advocate with a focus on early childhood development, childcare dynamics, and support for orphans and vulnerable children. Holding a Ph.D. in Early Childhood Studies from Kenyatta University, Kenya, her research emphasizes the critical role of paternal involvement in children's education. Dr. Mwoma serves as the Founder and National Coordinator of ECDNeK and is the Executive Director of the African Council for Distance Education (ACDE) since October 2020. In her role at Kenyatta University, she is a Senior Lecturer, contributing to the training and supervision of graduate students. Engaging in high-profile studies funded by organizations like the Bill and Melinda Gates Foundation, the British Council, the Conrad Hilton Foundation, GCRF and UNESCO. Dr. Mwoma is recognized for her expertise in addressing global challenges related to childcare, education, and healthcare. Actively involved in policy development in Kenya, she played a key role in shaping the Kenya National Pre-primary Education policy and the Kenya Prisons Childcare policy. Dr. Mwoma's multifaceted career and personal commitments reflect a dedicated pursuit of excellence and a profound impact on society's most vulnerable populations. Dr. Mwoma has a robust family foundation as a married individual seamlessly intertwining personal and professional commitments.</p>
<p>DR. TERESA MWOMA</p>	
<p>PANELLIST</p> 	<p>CHIEF EXECUTIVE OFFICER, BURUNDI EARLY CHILDHOOD PLATFORM (BECP) BURUNDI</p> <p>Franck is the CEO of BECP (Burundi Early Childhood Platform); Vice-president of Early Years Thematic Group in Burundi; Clinical Doctor in the Gynecology and Obstetrics department at Prince Regent Charles Hospital in Bujumbura; a Secretary General of the HPRC medical council, He is a Chairman of BCRF (Burundi Child Rights Forum) and Chairman of ANAB (National Association of Basketball Referees) and international basketball referee. He brings in his experience working with children in Burundi.</p>
<p>FRANCK BUJEJE</p>	
<p>PANELLIST</p> 	<p>ACTING CHAIR UGANDA NETWORK</p> <p>Jimmy Obbo is a Project Director - Play fulfuture project plan -International Uganda that work in promoting Learning through play for children 3-6years in Uganda, Jimmy is the interim chair of the ECD Network for the Civil society in Uganda, He worked for National Early Childhood Development secretariat in the Ministry of Gender, Labour and Social Development as national programme coordinator overseeing the roll out of the NIECD Policy in the country.</p>
<p>JIMMY OBBO</p>	

<p style="text-align: center;">PANELLIST</p> 	<p>ACTING SENIOR PROGRAM MANAGER/TMM PROGRAM, NCDA</p> <p>Mrs. Monique Mukamana is a Rwandan and she is currently Acting as the Senior Program Manager of Tubarerere Mu Muryango (TMM) Program: Let's raise children into families Program at National Child Development Agency. Mukamana, has more than 10 years of technical, managerial, and strategic experience in child protection. She is a social work by professional. She holds a bachelor degree in social worker from National University of Rwanda and undergoing diploma in Social Justice at Institute of Legal Practice and Development (ILPD). She has experience in providing high quality care and support to orphans and vulnerable groups and their families with a consistent track record of working successfully with children and their families all within a variety of settings. She has an understanding of Policies and Strategies on early Child Development and child Protection. She has an extensive knowledge of social work principles, techniques and practices and their application to complex cases group work, and community issues.</p>
<p style="text-align: center;">MONIQUE MUKAMANA</p>	<p>NATIONAL COORDINATOR TANZANIA EARLY CHILDHOOD DEVELOPMENT NETWORK (TECDEN)</p> <p>Mwajuma Davina Rwebangila (M.A. Development Studies) is an Executive Director for Tanzania Early Childhood Development Network (TECDEN) since January, 2021. For the past 18 years she has worked for different programs including HIV/AIDS, Youth and women empowerment, accountability and early childhood development. With the current position, Mwajuma provides strategic leadership and technical guidance to Tanzania ECD Network to ensure programs aligns to the network's objectives while ensuring strategic linkages and partnership are forged within and outside Africa region. For past 3 years Mwajuma has led TECDEN's coordination of ECD non-state-actors to work collaboratively with the government of Tanzania in promotion of ECD agenda in the country including development, launch and implementation of the National Multi-sectoral ECD Program (NM-ECDP) at both national and sub-national level. Mwajuma is a Global Leader for Young Children under mentorship of World Forum Foundation. She is fluent in Swahili and English languages.</p>
<p style="text-align: center;">PANELLIST</p> 	
<p style="text-align: center;">MWAJUMA DAVINA RWEBANGILA</p>	

SESSION 3

PRESENTER	PROFILE
	<p>Maggie Kamau-Biruri is an international development specialist with more than 15 years of experience. She currently serves as the Director of Partnerships at the YALI Regional Leadership Center for East Africa, working with Deloitte.</p> <p>Before joining Deloitte, Ms. Kamau-Biruri worked as Senior Resource Mobilization Officer at the Alliance for a Green Revolution in Africa (AGRA), where she raised more than \$50 million from private foundations, donor governments and the private sector. Prior to her service at AGRA, she worked as the Africa Regional Director for the International Child Resource Institute. As Regional Director, Ms. Kamau-Biruri led the design and development of programs in the areas of child protection, economic opportunity for youth and women, and early childhood education. Maggie began her work in the sector in the San Francisco Bay Area where she was an active speaker, advisor and thought leader in the vibrant international development community.</p>
<p style="text-align: center;">Maggie Biruri</p>	

	<p>Ms. Kamau-Biruri serves on several international nonprofit Boards including Thriive Inc., and Harambee Arts. She holds a Master in Public Administration from California State University.</p>
<p style="text-align: center;">CHAIR</p> 	<p>EXECUTIVE DIRECTOR, NURTUREFIRST</p> <p>Lucy Minayo is an African educated feminist who is currently serving as the Executive Director of NurtureFirst a global funder and capacity builder established in 2022 to build systems that support home based childcare providers. The Initiative is hosted by the Early Childhood Development Action Network (ECDAN) in partnership with the Global Development Incubator. Under her leadership, NurtureFirst has established itself as a thought leader on building systems for home based childcare providers that recognize the service as a public good and a human right. NurtureFirst is working closely with sub-national governments, local partners and families to strengthen the ecosystem that supports children aged 0-3 and is supporting the implementation of learning interventions that are aimed at shifting the system towards recognising providers, ensuring services are affordable and providers are earning a living wage, improving nutrition of children and supporting the agency and representation of providers. Before joining NurtureFirst, Lucy led the implementation of global health, governance, and human rights programmes in international NGOs such as Hivos, the Center for Reproductive Rights, Ipas. Lucy also served as an investigator at the African Union Commission of Inquiry in South Sudan. She is skilled in strategy formulation and implementation, coalition building, programme management and organizational development. She is based in Nairobi.</p>
<p style="text-align: center;">LUCY MINAYO</p>	
<p style="text-align: center;">KEYNOTE PRESENTER</p> 	<p>GLOBAL LEAD FOR EARLY CHILDHOOD DEVELOPMENT, WORLD BANK</p> <p>Amanda Devercelli is the World Bank’s Global Lead for Early Childhood Development (ECD) and leads the World Bank’s Invest in Childcare initiative. Ms Devercelli has been with the World Bank for nearly 15 years and has worked across a range of countries, including Kenya, Jordan, Morocco, Senegal and Uzbekistan. In 2012 she launched the World Bank’s Early Learning Partnership, a \$170m fund that has generated more than \$4bn in funding to scale up high-quality ECD services worldwide, with an increasing emphasis on childcare. Before joining the Bank, she worked with community-based schools in Kenya and Peru and in several civil-society organisations advocating for better international development assistance. She has a master’s degree in education from Harvard and was a Reynolds Foundation fellow for social entrepreneurship at the Harvard Kennedy School of Government.</p>
<p style="text-align: center;">AMANDA E. DEVERCELLI</p>	
<p style="text-align: center;">KEYNOTE PRESENTER</p> 	<p>REGIONAL ADVISER, ECD UNICEF ESARO</p> <p>Oliver’s professional journey commenced with UNICEF in 1992, reflecting his steadfast commitment to global welfare. His extensive experience spans Europe, Africa, and UNICEF’s headquarters, where he has held leadership roles in critical areas such as Early Childhood Development (ECD), Health, Nutrition, Monitoring, Evaluation, and Research. Notably, his collaboration with the global MICS team led to the integration of the ECD module into MICS, a pivotal tool for evidence based ECD programming. In Africa since 2013, Oliver focuses on bolstering social services and community-based systems to reach vulnerable families and children. As UNICEF’s Regional Adviser for ECD in Eastern and Southern Africa, he spearheads efforts to establish robust foundations for every child, fostering human capital and sustainable growth. With a Medical Degree from the University of Belgrade and a Master’s in Public Health from the European School of Public Health, Oliver combines expertise with compassion in his mission for a more peaceful future.</p>
<p style="text-align: center;">Dr. OLIVER PETROVIC</p>	
<p style="text-align: center;">MY STORY</p>	<p>FOUNDER, THE MOTHERSHIP VILLAGE</p>



MS. WANGECI KIHARA

Wangeci Kihara, a devoted wife and loving mother of two, embarked on a mission to empower and support fellow moms in Kenya. Her personal journey through the ups and downs of motherhood inspired her to take action. She became a Certified Lactation Counselor and Child Nutrition Specialist. Later, she founded The Mothership Village, a maternal and pediatric care center with a mission to improve health outcomes for women and their children during pregnancy and early childhood. The center offers educational programs and brings together health professionals to empower mothers and provide essential services. Recently, they hosted a baby shower where they offered ultrasounds and medical services to over 500 women. Additionally, Wangeci Kihara is passionate about food. As a food enthusiast, she loves all things related to cooking, eating, and entertaining. Her childhood memories include receiving a small jiko (a ceramic charcoal-powered stove) from her mother, complete with miniature utensils—a delightful introduction to the world of culinary exploration. Wangeci’s dedication to child nutrition and maternal health exemplifies her commitment to making a positive impact in her community.

MODERATOR



DR. SARA RUTO

PROGRAMME OFFICER, ECHIDNA GIVING

Sara is a Program Officer at Echidna Giving based in Nairobi. She is the immediate former Chief Administrative Secretary in the Ministry of Education, Kenya, where she deputized the minister. She previously served as the Chief Executive Officer of the People’s Action for Learning (PAL) network; a network of civil society organizations that conduct citizen led assessments and actions to improve learning outcomes in Africa, Asia and the Americas. Prior to that, she had initiated the Uwezo learning assessments of literacy and numeracy in Kenya, before coordinating the Uwezo East Africa learning initiative. She is the Chairperson of the Kisii University Council and a board member of UNESCO’s International Institute of Educational Planning, PAL Network and Zizi Afrique Foundation.

PANELLIST



ELIZABETH GITONGA

PROGRAMME MANAGER, AFRICAN EARLY CHILDHOOD NETWORK

Elizabeth Gitonga is an educationist with over 30 years’ experience in the field of education. Her biggest milestone as an educationist has been pioneering the homeschool movement in Kenya and educated her 3 children at home from preschool all the way through to high school. As testimony to the success of their home school, 2 of their 3 children are university graduates and now work and serve honourably in society, and their 3rd born is currently pursuing undergraduate studies. Elizabeth has developed curriculum for in-service teacher training that has supported numerous homeschool parents across Africa. To advance parental engagement in education through homeschooling, Elizabeth serves as a board member of the East Africa Christian Home Educators, the Africa Home Education Exchange, and the Global Home Education Exchange. She has been involved in home education advocacy and supported the establishment of several homeschool support groups. Elizabeth works at the Africa early Childhood Network as a programme Manager in charge of AfECN’s work in Foundational learning and Children in Crisis. In addition, she supports the strengthening of national and regional ECD networks for effective advocacy for the young children in the region. Elizabeth holds a bachelor’s degree in education and a master’s degree in education psychology from Kenyatta University. She and her husband live in Nairobi, Kenya.

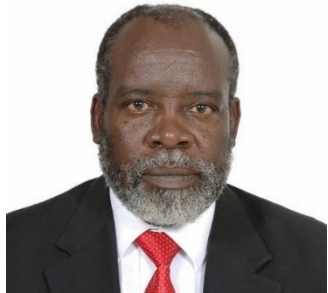
PANELLIST



DR. NANDERA MHANDO

COMMISSIONER FOR SOCIAL WELFARE MINISTRY OF COMMUNITY DEVELOPMENT, GENDER, WOMEN AND SPECIAL GROUPS TANZANIA

Dr. Nandera Mhando serves as the Commissioner for Social Welfare, demonstrating a deep commitment to enhancing the well-being of communities. With a background in social work and public health, Dr. Mhando brings a wealth of expertise to her role. Her career spans various sectors, including healthcare, education, and social services, where she has championed initiatives to address the needs of vulnerable populations. As Commissioner, she oversees policies and programs aimed at promoting social inclusion, supporting families, and safeguarding the rights of individuals. Dr. Mhando’s leadership exemplifies dedication to creating a more equitable

	society where everyone has access to essential services and opportunities for a better quality of life.
<p>PANELLIST</p> 	<p>ASSOCIATE PROFESSOR – DEPT OF SPATIAL & ENVIRONMENTAL PLANNING KENYATTA UNIVERSITY</p> <p>Simon Onywere, an Associate Professor at Kenyatta University (KU), balances academic roles with impactful research and community engagement. He leads a Gates Foundation-funded study on preschool interventions' effects on child learning and women's economic empowerment in Tharaka Nithi County. Onywere contributed to assessing socio-economic impacts of rising water levels in lakes and dams, serving on a Government Multi-Agency Technical Committee. As the ESRI GIS Education Users Ambassador in Africa since 2018, he promotes GIS use in education and championed ESRI's 100 African Universities Programme in 2014. Onywere specializes in Integrated Environmental Management, developing participatory catchment management plans for communities. He led disaster risk management studies and training across East Africa, including IGAD states. Currently, he chairs KU's Global Tourism Resilience and Crisis Management Centre (GTRCMC - EA) board and actively contributes to the ECDE Network in Kenya.</p>
PROF. SIMON ONYWERE	

SESSION 4

PRESENTER	PROFILE
<p>CHAIR</p> 	<p>CHIEF PROGRAM AND RESEARCH OFFICER ADDIS ABABA ECD CENTER OF EXCELLENCE, INNOVATION & LEARNING (CoE)</p> <p>Dr. Meseret Zelalem MD, Pediatrician Maternal, child and Adolescent Health Lead Executive Officer and now transitioning to Addis Ababa ECD Center of Excellence, Innovation and Learning as Deputy CEO, Chief Program and Research Officer. She graduated from Gondar university (UoG) and started her Professional career as a lecturer and joined the Pediatrics and child health residency and later worked as an Assistant professor of pediatrics and child health at UoG College of Medicine and Health Sciences. Later, appointed as a medical director for Gondar University comprehensive specialized Hospital for two years with 16 years' experience, Dr. Meseret brings innovative solutions to Maternal, Child Health, Adolescent and Nutrition programs at Federal Ministry of Health. Dr. Meseret is currently serving as a Lead executive officer for Maternal, Child and Adolescent Health at Federal Ministry of Health.</p>
DR. MESERET ZELELEM	

KEYNOTE PRESENTER I**LIEKE VAN DE WIEL****DEPUTY REGIONAL DIRECTOR, UNICEF ESARO**

Lieke van de Wiel is the UNICEF Deputy Regional Director for Eastern and Southern Africa since 15 February 2021. As Deputy Regional Director, Ms. van de Wiel leads a team of regional technical advisors in support of the programme development, formulation and implementation in 21 country offices in the Eastern and Southern Africa Region. She provides guidance, oversight, and country specific advice on programme and policy issues, as well as on operational issues, ensuring high-quality support to UNICEF programmes at the country level. Prior to her current assignment, Ms. van de Wiel was the Chief of Programme and Planning in the UNICEF Regional Office for the Middle East and North Africa Regional Office. Ms. van de Wiel also served as Deputy Representative in the UNICEF Country Offices in Syria and Turkey. Ms. van de Wiel has also served in various other positions and field locations with UNICEF in Nepal, Yemen, Mexico and New York, in areas such as Education, Child Protection and Humanitarian Policy. Before joining UNICEF Ms. van de Wiel worked with WHO in their South Eastern Regional Office based in New Delhi on emergency and humanitarian action. She has also carried out assignments with the European Commission's department of Civil Protection and Humanitarian Aid Operation (ECHO) in Belgium, as well as with NGOs in her home country.

Ms. van de Wiel is a national of the Netherlands and holds two Masters' degrees in Public Administration and Sociology from the University of Leiden. She also holds a certificate from London School of Economics on International Relations as well as a certificate in Education from the Ibero- American University in Mexico.

KEYNOTE PRESENTER II**HON. ANNE MUSIWA****SPECIAL RAPPORTEUR FOR CHILDREN WITHOUT PARENTAL CARE, AFRICAN UNION COMMISSION COMMITTEE OF EXPERTS ON THE RIGHTS AND WELFARE OF THE CHILD**

Anne Musiwa is the Special Rapporteur for Children Without Parental Care in the Africa Union and is a Member of the African Union Commission within the Committee of Experts on the Rights and Welfare of the Child where she has held positions in the Bureau as Vice Chairperson, Chairperson and currently the Committees' Rapporteur. She is also the country rapporteur for South Sudan, Eritrea, Somalia, Uganda and Seychelles. Her mandate involves advocacy, advisory and resource mobilization towards promotion and protection of children's rights, and she seats in the ordinary sessions of the committee where decisions impacting on African children's wellbeing are made. She has also successfully led in the Continental Study for children without parental care. She has eleven years' experience in child rights governance driving the implementation and domestication of AU and UN Treaties on Child Rights. As a government leader and multi-stakeholder coordinator, she has supported political leadership and parliamentarians on the promotion of child rights as well as advocacy for child friendly laws. Anne is an astute administrator who has had successful missions on investigating child rights violations including advocacy for states to lift up reservations made on ratification of AU ACRWC. She holds a MSc in Forensic Psychiatry.

KEYNOTE PRESENTER III



FIRST LADY - SIAYA COUNTY SMARTSTART INITIATIVE, SIAYA- KENYA

Betty Kaari Murungi is an advocate of the High Court of Kenya. In June 2020, she was appointed as Professor of Practice at the Centre for Gender Studies at SOAS, University of London. She was educated at the University of Nairobi and the Kenya School of Law. She is a past visiting fellow at the Harvard Law School’s Human Rights Program. Currently she serves as First Lady of Siaya County, Kenya. In this role, her work is primarily focused on promoting nurturing care for early childhood development and advocacy for cervical and breast cancer awareness. Murungi served as Vice Chairperson and Commissioner to the Kenya Truth Justice and Reconciliation Commission (2009-2010); as the Africa representative on the Board of Directors of the Trust Fund for Victims at the International Criminal Court (2009-2013); as Senior Transitional Justice Advisor to the Chairperson of the Joint Monitoring and Evaluation Commission (JMEC), South Sudan, President Festus Mogae, former president of Botswana (2016-2018); as a member of the Independent Commission of Inquiry for the Occupied Palestinian Territory appointed by the United Nations Human Rights Council (July 2018- March 2019) and as Chairperson of the United Nations International Commission of Human Rights Experts in Ethiopia- ICHREE (March 2022-December 2022).

HE BETTY KAARI MURUNGI

MODERATOR



TECHNICAL ADVISOR AFRICAN EARLY CHILDHOOD NETWORK

Dr. Evangeline N. Nderu is a highly skilled educator, researcher and programme manager with over 25 years' experience in sub-Saharan Africa. She is an independent consultant working with international development organisations that support ministries of education in developing and implementing policy. Professional achievements include advising the Minister of Education in South Sudan, leading to the delivery of the country’s first Basic Education Act (2012) shortly after independence; and successfully managing Tayari Early Childhood Development programme, a pre-primary pilot implemented in four counties in Kenya. Evangeline specializes in programme management, technical assistance, capacity-building, education in post-conflict settings, education research, and monitoring and evaluation. Dr. Nderu has profound experience working directly with governments, development agencies, and research institutions to improve the quality of life in development contexts. She has presented and published in numerous professional forums on development and education in sub-Saharan Africa. She earned her doctorate in education at the University of Minnesota in the USA.

DR. EVANGELINE NDERU

PANELLIST



CEO CONSERVATION OF NATURE FOR SURVIVAL ORGANISATION - TANZANIA

Angelus Runji possesses International Action Learning MBA with Bachelor of Laws degree and four (4) diplomas in Education, Business Management and Entrepreneurship, Environmental Science and Legal studies. He serves as CEO Conservation of Nature for Survival Organisation (CONASU), an NGOs focus on natural resources protection and livelihoods enhancement in Tanzania. He is the policy analyst with experience on climate change mitigation and adaptation measures linked to different sectors especially health and Agriculture sectors.

ANGELUS RUNJI

PANELLIST



DR. GEORGE OWINO

PROGRAMME MANAGER, AFRICAN EARLY CHILDHOOD NETWORK

Dr. Owino serves as the Programme Manager for Knowledge Generation and Dissemination at the Africa Early Childhood Network (AfECN). In this role, he leads AfECN-initiated studies and collaborates on research projects with partners. His work focuses on improving early childhood development within the context of the nurturing care framework in Kenya. Dr. Owino has contributed to policy reviews and qualitative explorations of emerging issues with policymakers, aiming to enhance the well-being of young children. Dr. Owino previously served as a lecturer in the Department of Sociology at Kenyatta University. His research interests span social determinants of health and illness, ECD, and cultural modelling. He obtained his PhD in public health from the School of Public Health, University of Bielefeld, Germany in 2015. His commitment to advancing early childhood development underscores the importance of nurturing care and research in creating a better future for children in Kenya and beyond.

PANELLIST



DR. RONGEDZAYI FAMBASAYI

RESEARCHER, NORTH-WEST UNIVERSITY

Rongedzayi Fambasayi a passionate champion of children, play and inclusive cities. He is a children’s rights lawyer by training with over 10 years of progressive experience leading multi-country and multi-donor projects. He has a global outlook having previously worked with leading international and pan-African child rights organisations driving law reform, campaigns, and advocacy across Africa. Rongedzayi currently serves as an independent External Expert in the Working Group on Children’s Rights and Climate Change of the African Union’s Committee of Experts on the Rights and Welfare of the Child, leading the continental agenda on mainstreaming a child-rights-based approach to climate action and ensure access to climate-justice.

PANELLIST



TRICIA YOUNG

DIRECTOR , MOVING MINDS ALLIANCE

Tricia brings 15+ years leadership in the international child rights sector. She was formerly the Director of a specialist child participation agency Child to Child; she Co-Chaired the BOND Child Rights Network for six years. As Director of Programmes at the Lumos Foundation, she managed a portfolio of initiatives focusing on strengthening child protection and welfare systems to prevent unnecessary family separation and ensure families receive the support they need to care for their children across diverse contexts. She led the humanitarian response in Ukraine & Moldova. Her experience includes the design and implementation of ECD and early learning programmes for the most vulnerable children in contexts including Sierra Leone and Pakistan and has overseen disability inclusion and inclusive education initiatives. Before moving into international development, Tricia worked in the UK community development and youth sectors and spent her formative professional years focused on issues affecting Black, Asian and Minority Ethnic organizations and communities.

SESSION 5

PRESENTER

PROFILE

MODERATOR:



MANIZA NTEKIM

SENIOR PROGRAMME OFFICER CONRAD N. HILTON FOUNDATION

Maniza Ntekim leads the Early Childhood Development East and Southern Africa initiative. In her role, she oversees a grantmaking portfolio that seeks to improve caregiver well-being and early childhood development outcomes in Kenya, Mozambique and Tanzania. Previously, Ntekim served as regional advisor for UNICEF's Eastern and Southern Africa Regional Office, overseeing the early childhood development programmes of 21 UNICEF Country Offices. Before that, she was senior programme officer at the Open Society Foundations (OSF) where she led on OSF's global ECD advocacy programme, supported ECD systems strengthening in Africa, and represented the private sector and private foundations on the Global Partnership for Education's Country Grants Committee. Ntekim has worked as a policy advisor and advocate for the Children's Investment Fund Foundation, Amnesty International UK, and the Confederation of British Industry, which is the UK's largest employers' federation. She has also worked as a consultant for Save the Children UK, UNESCO, Oxford Policy Management and DfID. Ntekim's relationship with UNICEF began in 2007 when she worked as an education advisor in Rwanda and then in Tanzania. Ntekim holds a master's degree in international politics from the School of Oriental and African Studies at the University of London, and a Bachelor of Arts in philosophy, politics and economics from the University of Oxford.

KEYNOTE PRESENTER

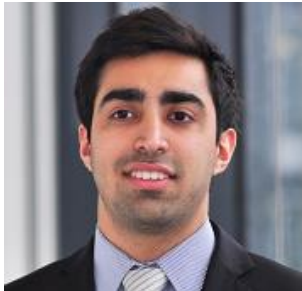


BOB MUCHABAIWA

SOCIAL POLICY SPECIALIST UNICEF ESARO

Dr. Bob Muchabaiwa is currently the Social Policy (Public Finance) Specialist for UNICEF's Eastern and Southern Africa Regional Office (ESARO) based in Nairobi, Kenya with over 22 years' experience working on public financial management and economic governance from a child rights perspective at national, regional and global levels. Bob has produced over a dozen of working papers and research reports on social sector spending including ECD, health, nutrition and education and also about inequality amongst children, tax, debt management, and social accountability. He holds a PhD in Development Studies (Political Economy of Public Spending on children) from the University of Johannesburg, South Africa. Bob oversees UNICEF's work on public finance for children in 21 countries in Eastern and Southern Africa.

KEYNOTE PRESENTER



REZA FAZEL

ASSOCIATE PARTNER, OPEN CAPITAL

Reza is an Associate Partner at Open Capital with significant experience in preparing tailored investment strategies across a range of sectors regionally, particularly for hard-to-reach, last-mile populations. He has specific experience in blended finance, supporting a wide array of partners including investors, development actors, and businesses, to design and implement scalable innovative finance solutions and market-led approaches. He is currently leading Open Capital's work with the Hilton Foundation, which aims to strengthen refugee-focused childcare and education ecosystems in Ethiopia and Uganda, including assessing opportunities to catalyze financing to address critical needs in the ECD sector.

PANELLIST



ELAINE HURT

DIRECTOR OF PARTNERSHIPS KIDOGO EARLY YEARS

Elaine Wacuka Hurt Wears many hats to accomplish dynamic objectives. She is first and foremost a systems thinker and social research practitioner with over 12 years of experience conducting evaluations for sustainability and impact in several countries, including providing inputs for program strategy, identifying program priorities, conducting pre-implementation assessments and feasibility studies and co-designing impact programs with government officials. She was featured for her work to expand a road safety intervention named ZUSHA!, in East Africa, on BBC World Hacks in 2017. Elaine also has 8-years of hands-on donor relations, and fund management, including USAID, Finnish and the Accenture Development Fund. Elaine holds a Master of Science (MSc) in Development Management from the School for International Training and a Bachelor of Science in Foreign Service from Georgetown University. She is currently the Director of Policy and Partnerships at Kidogo Early Years.

Ministry of Gender, Labour, and Social Development



GOLOOBA ROGERS

Golooba Rogers is a seasoned professional dedicated to advancing Early Childhood Development (ECD) within the Ministry of Gender, Labour, and Social Development. He holds a Master's in Development Studies and a Bachelor's in Social Work and Social Administration from UMU and MUK respectively with over 15 years in the ECD field. Rogers has been at the forefront of implementing the National Integrated ECD Policy in Uganda since 2016. His leadership has been crucial in shaping strategic direction for Government, development partners and CSOs contributing significantly to the ECD landscape in Uganda. His active participation in advocacy efforts, representing the Ministry at strategic levels to secure increased ECD prioritization underscores his commitment to driving tangible change. His expertise extends to the coordination of donor, conducting rigorous ECD performance reviews, and providing valuable inputs to National ECD policies and programs. With a skill set encompassing community mobilization, project management, measurements and adept donor relations, Rogers is a catalyst for positive transformation. A perpetual learner, Rogers is a member to several regional and global ECD associations, including the Africa Early Childhood Network. He stands as an unwavering advocate for the rights and holistic development of every child, embodying the highest standards of professionalism in his field.

PANELLIST



SULEIMAN YAKUBU

DEVELOPMENT SPECIALIST , THE POWER OF NUTRITION


Suleiman Yakubu is a development specialist with over 12 years of experience designing and implementing Maternal, Adolescent & Child Health and Nutrition programs, Early Childhood development through Innovative financing mechanisms and Public-Private sector Engagements. He currently serves as the Monitoring, Evaluation and Programme Lead at the Power of Nutrition based in London, UK. Suleiman holds a Master's degree in Health Economics, Policy & Management from the London School of Economics & Political Science, UK and a graduate of the Senior Executive Programme in Global Health Innovation Management (SEP-GHIM) from the IESE Business School, Barcelona, Spain.

PANELLIST




PERMANENT SECRETARY, MINISTRY OF FINANCE AND ECONOMIC PLANNING BURUNDI

Ms. Francine Inarukundo is the Permanent Secretary in the Ministry of Finance, Budget and Economic Planning in Burundi. She has been instrumental in spearheading investments to improve human capital especially in the early years at national and sub national levels. Previously, she held several senior positions within the Government of Burundi including a senior official with the Burundi Revenue Authority and at the

FRANCINE INARUKUNDO	Senate of Burundi as part of staff at the Finance Commission. She is a distinguished and results driven public service official.
<p data-bbox="331 253 464 280">PANELLIST</p> 	<p data-bbox="647 253 1495 315">DISTINGUISHED SCHOLAR AND EDUCATIONIST, THE OROMIA EDUCATION BUREAU ETHIOPIA</p> <p data-bbox="647 322 1495 779">Dr Tola Berisso Geda is a distinguished scholar and educationist heading the Oromia Education Bureau in Ethiopia. He also sits on several boards including as Board Chair of the Oromia State University, Board Chair of MELBA Printing and Packaging Company and Board Chair of ECAFCO. Dr Geda led the design and implementation of the programme on pre-primary education that resulted in the construction of 14,700 learning centres within three years with community participation and benefited more than 1.6 million pre-primary school-age children in Oromia. He was also instrumental in the development of the framework to improve the quality of education in the Oromia. Previously, Dr. Geda also held several senior positions in the education sector in Ethiopia including as the Founder President of Arsi University, Academic Vice president of Adama Science and Technology University, Board Chair of Ambo University, Board Chair of Wolayita Sodo University and Board chair of the Oromia Broadcasting</p>
DR TOLA BERISSO GEDA	

SESSION 6

PRESENTER	PROFILE
<p data-bbox="331 981 440 1008">KEYNOTE</p> 	<p data-bbox="647 981 1262 1008">REGIONAL ADVISER, EARLY CHILDHOOD DEVELOPMENT</p> <p data-bbox="647 1014 1477 1234">With an unwavering commitment to the global community, Oliver initiated his professional journey with UNICEF in October 1992. His extensive expertise has been demonstrated in various emergency and developmental settings across Europe, Africa, and at UNICEF headquarters. He has assumed multiple leadership and programmatic roles, specifically in crucial areas such as Early Childhood Development, Health, Nutrition, Monitoring, Evaluation, and Research.</p> <p data-bbox="647 1240 1477 1883">In his capacity as an Early Childhood Development (ECD) specialist at the New York HQ, Oliver worked in partnership with the global MICS team. This collaboration resulted in the development and introduction of the ECD module to MICS, which has since become a globally recognized instrument for strengthening the evidence base to facilitate informed ECD programming. Since 2013, Oliver has been diligently engaged in professional endeavours in Africa, namely in Rwanda, Egypt, and Kenya. His primary objective has been to enhance social services and community-based systems to ensure comprehensive reach to the entire population, with a specific focus on the most vulnerable families and children. Presently, in his role as UNICEF's Regional Adviser for Early Childhood Development, Oliver is responsible for overseeing ECD policies and programmes across 21 countries in Eastern and Southern Africa. He leads UNICEF's efforts and establishes strategic collaborations with governments, developmental organizations, researchers, businesses, and communities. His objective is to create a robust foundation for every child, foster human capital, and support sustainable growth towards a more peaceful future. A native of the Republic of Serbia, Oliver holds a Medical Degree from the University of Belgrade and a Master's degree in Public Health from the European School of Public Health. He is married and has two children.</p>
OLIVER PETROVIC	



HASSAN MUHOMI

University of Dar es salaam

Hassan Muhomi is currently conducting interpretative research in information systems, attempting to understand how technology, organizations, and people can be aligned to strengthen systems for evidence-based decision-making. Since 2011, he has worked on the design, analysis, testing, and implementation of various systems for the University of Dar es Salaam (UDSM-DHIS2 project). He is a member of the DHIS2 community, helping to develop and facilitate the DHIS2 academy for English-speaking African countries. He holds Level 1 and 2 DHIS2 Academies certifications in design and customization, data quality, analysis and use, and system integration. He is also among the consultants who supported the development of the National ECD Dashboard.

PANELLIST



SONJA GIESE

FOUNDING EXECUTIVE DIRECTOR , DATADRIIVE2030 SOUTH AFRICA

Sonja Giese is a social entrepreneur with a diverse career in development spanning over 30 years. She is founding Executive Director of DataDrive2030, a South African based social enterprise that supports the collection and use of high quality data to drive improved child outcomes in the first 6 years of life. Prior to this, Sonja established and led Innovation Edge, an impact first investor focused on solving early childhood challenges through seed capital and strategic support. She has consulted extensively to government, philanthropy and private sector on policy reform and systems change, led large research initiatives and demonstrated her ability to take ideas from source to scale in the various programmes that she has spearheaded. In 2023 Sonja was a recipient of the Khalifa International Award for Early Learning Research for her role in the development of the South African Thrive by Five Index. Sonja is a member of the technical advisory groups for the global Early Childhood Development Action Network and Echidna Giving and is a founding board member of the Bulungula Incubator.

EXECUTIVE DIRECTOR AFRICCHILD CENTRE NATIONAL CHILD DEVELOPMENT AGENCY






TIMOTHY OPOBO




Timothy Opo is the Executive Director of the AfriChild Centre, facilitating collaboration between academics, policymakers, and practitioners to promote innovative research nurture communities of learning, build the next generation of researchers, and contribute to policy and practice on the wellbeing of the African child. He has over 15 years of experience, and expertise in child-focused social research, project management, policy advocacy, and networking with state and non-state actors. He has previously served as the Manager of Child Protection and Advocacy in ChildFund International Uganda, Coordinator of the Global Child Protection in Crisis Network in Uganda (CPCN), and Research, Information and Policy Advocacy Manager with the regional African Network for Prevention and Protection Against Child Abuse and Neglect (ANPPCAN), in both Uganda and Liberia.

He holds a Bachelors degree in Social Work, a Masters degree in Development Studies, and a Post Graduate Diploma in Leadership in Community Development. Currently, he is pursuing a Doctorate degree in Social Work and Social Development. His research interests encompass early childhood education, child/adolescent mental health, violence against children, and child protection systems strengthening.

SESSION 7




PRESENTER	PROFILE
 <p data-bbox="316 676 486 705">Aster Haregot</p>	<p>Aster Haregot is currently an independent international consultant: consulting assignments for international development Partners, working directly with government Ministries and policy makers, including providing advisory support on national ECD policy and strategic development. Assignments also include supporting international development agencies in ECD capacity building and mentoring of staff.</p> <p>Prior to that she was the United Nations Girls' Education Initiative (UNGEI) advisor and the regional ECD advisor for UNICEF Eastern and Southern Africa, Nairobi, Kenya. Ms Haregot is an Educator by profession and has worked for UNICEF from 1985 to 2011. Before being posted to Nairobi, she was in UNICEF HQ, New York and managed the multi country girls' education initiative known as the African Girls' Education Initiative (AGEI). Ms Haregot has advocated, documented best practices, coordinated and initiated capacity building programmes, advocated for the establishment of community based programmes, publications and initiated research studies in Early Childhood Development and Girls' Education in UNICEF and she has vast experience in ECD having been a pioneer of the Early Childhood programme in the Eastern and Southern Africa region. Prior to that she worked for the Head Start programme in the US and the Ministry of Education and Children's Commission in Ethiopia.</p>
<p data-bbox="359 981 443 1010">CHAIR</p>  <p data-bbox="316 1460 480 1489">SHEILA MANJI</p>	<p>EARLY CHILDHOOD DEVELOPMENT SPECIALIST, WORLD HEALTH ORGANISATION -GENEVA</p> <p>Sheila Manji is an early childhood development specialist with the World Health Organization in Geneva, Switzerland. Her experience spans multiple sectors and includes support to governments, communities, UN agencies, philanthropic organizations and civil society organizations to develop contextually appropriate solutions that enable children to thrive. With the World Health Organization, her areas of work include supporting implementation of the Nurturing Care Framework, working with partners to develop advocacy and operational materials that can advance attention to and investment in early childhood development, and strengthening health systems to provide quality care for caregivers and their young children.</p>
<p data-bbox="279 1563 518 1592">KEYNOTE PRESENTER</p>  <p data-bbox="220 1989 576 2018">PROFESSOR MARK TOMLINSON</p>	<p>INSTITUTE FOR LIFE COURSE HEALTH RESEARCH, STELLENBOSCH UNIVERSITY</p> <p>Institute for Life Course Health Research, Department of Global Health, Stellenbosch University, Cape Town, South Africa; and School of Nursing and Midwifery, Queens University, Belfast, UK</p> <p>Professor Mark Tomlinson is the Co-Director of the Institute for Life Course Health Research Stellenbosch University. He is also Professor of Maternal and Child Health in the School of Nursing and Midwifery, Queens University, Belfast, UK. His scholarly work is primarily interested in how to improve early childhood development, child and adolescent mental health, maternal mental health, and developing life course approaches. He was elected as a member of the Academy of Science in South Africa in 2017. He has published over 370 papers in peer-reviewed journals, edited four books and published numerous chapters.</p>

<p style="text-align: center;">MODERATOR</p> 	<p>MEDICAL OFFICER RMNCAH & HEALTHY AGEING, WORLD HEALTH ORGANISATION, NAIROBI</p> <p>Dr Teshome Desta Woldehanna is a Medical Doctor and Specialist in Paediatrics and Child Health with 35 years of medical and public health services in child and adolescent health in Ethiopia, Nigeria and 20 East and Southern African countries. He has previously been a Medical Officer for Child and Adolescent Health for East and Southern Africa in the WHO Regional Office supporting countries in developing and implementing child and adolescent health policies, strategies and plans including ECD. Facilitated the operationalization of the Nurturing Care Framework through a multi-sectoral approach in the African region and supported the integration of nurturing care into policies, strategies & plans.</p> <p>Currently, responsible for Reproductive, Maternal, Newborn, child and Adolescent Health and Healthy Ageing with the Multi-country Assignment Team covering Kenya, Mauritius, Rwanda and Seychelles based in Nairobi, Kenya.</p>
<p style="text-align: center;">DR. TESHOME DESTA WOLDEHANNA</p>	
<p style="text-align: center;">PANELIST</p> 	<p>CHIEF PROGRAM AND RESEARCH OFFICER, ADDIS ABABA ECD CENTER OF EXCELLENCE, INNOVATION & LEARNING</p> <p>Dr. Meseret Zelalem MD, Pediatrician Maternal, child and Adolescent Health Lead Executive Officer and now transitioning to Addis Ababa ECD Center of Excellence, Innovation and Learning as Deputy CEO, Chief Program and Research Officer. She graduated from Gondar university (UoG) and started her Professional career as a lecturer and joined the Pediatrics and child health residency and later worked as an Assistant professor of pediatrics and child health at UoG College of Medicine and Health Sciences. Later, appointed as a medical director for Gondar University comprehensive specialized Hospital for two years With 16 years' experience, Dr. Meseret brings innovative solutions to Maternal, Child Health, Adolescent and Nutrition programs at Federal Ministry of Health. Dr. Meseret is currently serving as a Lead executive officer for Maternal, Child and Adolescent Health at Federal Ministry of Health.</p>
<p style="text-align: center;">DR. MESERET ZELELEM</p>	
<p style="text-align: center;">PANELIST</p> 	<p>DISTRICT REPRODUCTIVE AND CHILD HEALTH COORDINATOR ARUSHA REGION</p> <p>Ms. Sikudhani Mkama is the District Reproductive and Child Health (RCH) Coordinator, Meru District, Arusha region. Sikudhani is a registered nurse working as a district reproductive and child health coordinator overseeing integrated RCH services including ECD services at RCH, paediatric and labour ward.</p>
<p style="text-align: center;">MS. SIKUDHANI MKAMA</p>	
<p style="text-align: center;">PANELIST</p>	

	<p>DIRECTOR GENERAL OF EDUCATION STATE DEPARTMENT FOR BASIC EDUCATION KENYA</p> <p>Dr. Elyas Abdi, is the Director General of Education State Department for Basic Education. His responsibilities include Pre-Primary Education, Primary Education, Secondary Education and Teacher Training Colleges. Before taking on his role as the Director General, Dr. Abdi served as the Director, Projects Coordination and Delivery where he coordinated donor-funded Projects in the State Department for Basic Education. Dr. Abdi served on the Board of Directors of the Global Partnership of Education based in Washington from 2015 to 2020 representing Anglophone Africa Countries. Dr. Abdi has strong experience in Basic Education, having represented the Sector in International and regional forums. He graduated with a Bachelor of Education, Moi University, holds a Master of Education from Kenyatta University and a PhD in Education from the Catholic University of Eastern Africa. Dr. Abdi has key expertise in Education Financing, Project Management, Education Sector Plans, Policies and developing legislation for Education.</p>
<p>DR. ELYAS ABDI</p>	<p>PANELIST</p>  <p>CHIEF EXECUTIVE OFFICER, RODGER FEDERER FOUNDATION</p> <p>Dr. Janine Händel, CEO of the Roger Federer Foundation since 2010, is a strong leader that drives impact. Under her leadership and professional approach, the Foundation has transformed into an ambitious, impact-oriented operation. Her background as a Swiss diplomat focusing on conflict transformation and human rights brings extensive experience in multi-sectoral partnerships. She also was head of philanthropy of a global company. As a board member and philanthropy advisor, she leverages her expertise in strategic grant making and good governance. She believes that things can only change for the better, and has devoted her professional life to humanitarian causes across the world.</p>
<p>DR. JANINE HANDEL</p>	<p>PANELLIST</p>  <p>LEAD, BRAC ENTERPRISES LIMITED -TANZANIA</p> <p>Ms. Gupta leads BRAC Enterprises Tanzania Limited (BETL), pioneering an ECD social enterprise in Dar es Salaam. Previously, as Chief Operating Officer at Delina Oil and Gas Distributors, she drove operational efficiency and expanded into the dry cargo transport market in East Africa. With 15+ years in education across multiple countries, she led initiatives including girls' education in Zambia at Cecily's Fund and strategic planning at VSO Nigeria. Currently, AWCF UK Chairperson, she secured charity status and fundraised for conservation and education in Zimbabwe. Ms. Gupta holds a Master's in Educational Planning, Economics, and International Development from UCL and a BA in Geography from King's College London.</p>
<p>LIZ GUPTA</p>	

SESSION 8

<p>PRESENTER</p>	<p>PROFILE</p>
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<p style="text-align: center;">CHAIR</p>  <p style="text-align: center;">DR. FRANCK BUJEJE</p>	<p>CHIEF EXECUTIVE OFFICER , BURUNDI EARLY CHILDHOOD PLATFORM</p> <p>Dr. Franck Bujeje is CEO of the Burundi Early Childhood Platform (BECP). He is the Vice President of the Early Years Thematic Group. He is a Clinical Doctor in the Gynaecology and Obstetrics Department at Prince Regent Charles Hospital. Dr. Bujeje is also the Secretary General of the Prince Regent Charles Medical Council and Chairman of the Burundi Child Rights Forum (BCRF).</p>
<p style="text-align: center;">MODERATOR</p>  <p style="text-align: center;">JOSEPHINE FERLA</p>	<p>SENIOR ECCD SPECIALIST, SAVE THE CHILDREN -TANZANIA</p> <p>Josephine Ferla works for Save the Children as the Senior ECCD (Early Childhood Care and Development) Specialist for Africa Region based in Dar es Salaam, Tanzania. She has worked as an ECD specialist for the past 13 years, including lead technical roles on ECD programmes with CRS and EGPAF in Tanzania (mainly focused on early learning and early stimulation respectively). Josephine has also worked in other African countries including Zambia and Malawi supporting various ECD interventions. She holds a Masters degree on Childhood and Youth and also BSc - Early Childhood Studies. Josephine's current work under Save the Children involves providing ECCD TA support to Country Offices in the region to design, implement, monitor, and improve the quality of ECCD programs. These initiatives include lead support to ECD programming in humanitarian settings of Ethiopia, as well as quality early learning programming in Rwanda.</p>
<p style="text-align: center;">KEYNOTE SPEAKER</p>  <p style="text-align: center;">GIVEN MWANAKATWE DAKA</p>	<p>TECHNICAL ADVISOR , ARICAN EARLY CHILDHOOD NETWORK</p> <p>Given Daka is an ECD Specialist with 30 years work experience in ECD and Education sectors in Zambia. Through her work with the Dutch Development Cooperation and UNICEF programmes in Zambia, Given advocated for multi-sectoral approach to ECD in Zambia and supported Government's effort in strengthening the ECD policy environment, systems strengthening, capacity building and multisectoral coordination at national and sub-national levels. Given was instrumental in the design & implementation of the LEGO supported Insaka Community Based Integrated ECD programme, implemented by UNICEF Zambia in partnership with Government. Currently with AfECN supporting National ECD networking and coordinating work under the Early Childhood Workforce Initiative. Given is a holder of a Masters degree in Educational Psychology from the University of London.</p>



VICTOR GEORGE BWINDIKI

ASSISTANT DIRECTOR, POLICY DEVELOPMENT BASIC EDUCATION SECTION, MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY TANZANIA.

Victor George Bwindiki is an Assistant Director for Policy Development in Basic Education Section at the Ministry of Education, Science and Technology in Tanzania. For the past 32 he has worked for different positions and in different regions across the country.

From 2022 March to August 2023 worked as a Head of Secondary Education Department at Lushoto District council. With the current position, among other things Victor is provides guidance on preparation of Education policy, curriculum, regulations regarding Pre-Primary Education, Secondary Education, Adult Education and Non Formal education in the Office of Commissioner for Education.

PANELIST



AMINA MWITU

REGIONAL ECD ADVISOR FOR EAST AFRICA , AGA KHAN FOUNDATION

Amina has over 25 years of experience and leadership in Early Childhood Development (ECD) programs. Currently serving as the Regional ECD Advisor for East Africa at the Aga Khan Foundation, her responsibilities include offering strategic and technical leadership and guidance to AKF and its partners on ECD initiatives across Kenya, Uganda, and Tanzania. Prior to joining AKF, Amina was engaged with the Madrasa Early Childhood Programme, where worked as ECD Teacher Trainer, Head of ECD Teacher Training, Assistant Programme Director, and later, Programme Director. Amina holds an MA in Education and International Development from the Institute of Education, University of London, and a BA degree from Kenyatta University.

PANELIST



DR. AMAKOVE WALA



DOMESTIC WORKFORCE IN CHILDCARE SERVICES , KENYA

Dr. Amakove Wala is the CEO of Nyarai Homecare Services, a company operating in the realm of homecare services. She has been instrumental in redefining standards within the homecare industry. Under her strategic leadership, Nyarai Homecare Services has become a beacon of innovation, emphasizing dignity in domestic work, economic inclusion, and human rights for workers at the base of the pyramid. The company, offers a range of services that include screening, recruiting, and outsourcing live-in nannies, house managers. She is also the Chair of the House Managers Agencies' Association which aims to foster a professional environment within the industry, advocating for fair employment practices, training, and development opportunities for house managers and domestic workers.

PANELIST

	<p>SENIOR MEDICAL OFFICER, REPRODUCTIVE AND CHILD HEALTH DEPARTMENT -MINISTRY OF HEALTH UGANDA</p> <p>Dr. Migadde Deogratias is a Public Health specialist working in the Reproductive and Child Health department, currently coordinating Newborn and Child Health at the Ministry of Health. Passionate about improving maternal and child well-being through evidence-based interventions. Experienced in program management, advocacy, and community engagement to ensure equitable access to healthcare services. Committed to fostering collaborations and implementing policies that prioritize the survival and development of children within the country.</p>
<p>DR. MIGADDE DEOGRATIAS</p>	

SESSION 9

PRESENTER	PROFILE
<p>CHAIR:</p>  <p>SEBASTIAN F. KITIKU</p>	<p>Director for Child Rights and development, Ministry of Community Development, Gender, Women and Special Groups.</p> <p>Mr. Kitiku is a qualified Community Development and Social Work Expert, a holder of MSc degree in Community Economic Development. For the past 18 years, he worked as a Coordinator for Capacity Development and Systems strengthening programs for the Public Sector, Private Sector and Civil Society Organizations. He has adequate and remarkable experience on Facilitating Organization Development (FOD), Systems strengthening and coordination of Institutional Capacity strengthening.</p> <p>From 2018 to date, Mr. Kitiku works for the Ministry of Community Development, Gender, Women and Special Groups as Director for Child Rights and development. The main responsibility of the post is to coordinate and oversee the responsive parenting for children and the overall Child Rights and Development and protection children in all forms of Violence, to enable Tanzanian Children grow to thrive to their full potential</p>
<p>MODERATOR:</p> 	<p>SENIOR PUBLIC HEALTH AND NUTRITION ADVISOR, THE AFRICAN EARLY CHILDHOOD NETWORK</p> <p>Rosemary Mwaisaka has broad experience in public health, nutrition and development; policies, programme planning, management, monitoring and evaluation. She has more than 17 years of experience in the field of Public Health, Nutrition and Development through working with the UN and other international organizations. She has previously worked with ECSA HC, which allowed her to provide leadership in establishing regional policies, strategies, guidelines and support capacity development, knowledge generation and dissemination and advocacy efforts on NCDs, food security and nutrition. She has pioneered the ECD agenda in the region by facilitating adoption of global Nurturing Care Framework in 9 ECSA-HC member states through the established Responsive Caregiving Experts' Committee.</p>

ROSEMARY MWAISAKA

KEYNOTE PRESENTER



EXECUTIVE DIRECTOR, EARLY CHILD DEVELOPMENT ACTION NETWORK (ECDAN)

Elizabeth Lule is Executive Director of the Early Child Development Action Network (ECDAN). Before joining ECDAN, she served in senior leadership, management, and technical positions at the World Bank for 18 years. She also worked at the Bill and Melinda Gates Foundation as Director, at Pathfinder International as their Africa Regional Vice President, and as Technical Advisor with USAID in Nigeria. She was also adjunct professor at Georgetown University in Global Health. Elizabeth is very enthusiastic about addressing social inequalities and has been instrumental in establishing and supporting global partnerships, networks, and coalitions to break down silos and improve women and children wellbeing and other development issues. She serves on several Boards of Directors, including Save the Children International and the Africa Institute for Development Policy and has served as a member of several global think tanks, including several UN Inter-Agency Task Teams. She is a graduate of the London School of Political Science and Economics and London School of Hygiene and Tropical Medicine.

ELIZABETH LULE

PANELLIST



POLICY OFFICER, EDUCATION DEPARTMENT OF HUMAN RESOURCE SCIENCE AND TECHNOLOGY - AFRICAN UNION COMMISSION

Dr Caseley Olabode is a highly experienced expert in Education, Gender, Health, Monitoring & Evaluation, Conflict, Grants & Grant Schemes, Advocacy sectors Project Management; Monitoring and Evaluation; and Development personnel who has demonstrated the ability to successfully work in different competitive industries and fast-paced environments. He is dedicated to prioritizing education and skills development at the AU to promote sustainable economic growth, social inclusion, and overall human development, as he believes that educated and skilled individuals are better prepared to overcome poverty, unemployment, and inequality, ultimately contributing to the continent's prosperity and well-being.

DR CASELEY OLABODE STEPHENS

PANELLIST



PROGRAMME OFFICER, EAST AFRICA COMMUNITY SECRETARIAT

Mr. Morris Tayebwa is a Public Health and International Development expert working with the East African Community Secretariat in the Gender and Community Development Department. Mr. Tayebwa coordinates the implementation of the regional policies, programs and strategic frameworks in the areas of Gender, Youth, Children, Persons with Disabilities, Social Protection and Welfare, Community Development and Citizen/Stakeholder engagement.

MORRIS TAYEBWA

PANELLIST



DR. JONES KAPONDA MASIYE

MANAGER, NON-COMMUNICABLE DISEASES, FOOD SECURITY AND NUTRITION- EAST, CENTRAL AND SOUTHERN AFRICA HEALTH COMMUNITY (ECSA-HC)

Dr. Jones Kaponda Masiye, MD, MPH is a public health specialist and currently holds the position of Manager for Non-Communicable Diseases, Food Security, and Nutrition at the East, Central, and Southern Africa Health Community (ECSA-HC). Additionally, he is an esteemed member of the NCDI Lancet Steering Committee and serves on the NCDI Poverty Network's Southern Africa Advisory Committee. Previously, Dr. Masiye served as the Deputy Director of Clinical Services, overseeing clinical practice, and as the Manager for Non-Communicable Diseases and Mental Health at the Ministry of Health in Malawi. He also led the World Diabetes Foundation project aimed at controlling diabetes and hypertension in Malawi. Notably, he co-chaired the NCDI Poverty Lancet Commission for Malawi and held positions as District Health Officer across various districts in Malawi.

PANELLIST



KEFILWE RHOPA MOALOSI

PROJECT MANAGER, NUTRITION AND FOOD SAFETY PROGRAMME - AFRICAN UNION DEVELOPMENT AGENCY (AUDA-NEPAD).

Ms. Kefilwe Rhoba Moalosi is the Project Manager for Nutrition and Food Safety Programme, under the Directorate of Agriculture, Food Security and Environmental Sustainability and within the African Union Development Agency (AUDA-NEPAD). Her current capacity provides technical advisory support to the implementation of Africa Agenda 2063 including Home Grown School Feeding programme, Africa Food Safety Strategy, Africa Common Position for UN Food Systems with the Regional Economic Communities (RECs) in collaboration with the AU Member States and Development Partners. She also focuses on integrating and mainstreaming nutrition and food safety into agriculture and related development agendas such as CAADP Framework and promote a multisectoral approach for addressing all forms of malnutrition. She is a graduate of the University of Greenwich in England and Cape Peninsula University of Technology in South Africa.

PANELLIST



PRISCILLA WANJIRU WARUI

DEPARTMENT OF HEALTH AND HUMANITARIAN AFFAIRS, AFRICAN UNION COMMISSION

Priscilla Wanjiru Warui, a Kenyan national, is a seasoned Policy and Partnerships Expert with a wealth of experience spanning nine years in program management and partnership development. Her professional journey has been marked by a dedicated focus on diverse sectors including nutrition, food security, gender equality, humanitarian aid, and policy formulation. Currently, Priscilla serves as a Policy and Partnerships Expert at the African Union Commission Department of Health and Humanitarian Affairs. In this role, she remains unwavering in her dedication to driving critical agendas in health, food security, and nutrition through strategic engagement and collaborative leadership.

ABSTRACTS FOR ORAL PARALLEL SESSIONS

Parallel Session 1.1: Creating Home environments that foster positive early childhood outcomes.

Roreen Vitumbiko Mzembe, Help a Child Malawi (HAC), Malawi: *Improving Knowledge, Attitude and Practices on Parenting Skills for Mothers and Fathers in Malawi*

Introduction: Help a Child (HaC) is non-governmental organization and works India, Kenya, Malawi, Rwanda, Burundi, DRC and South Sudan and Uganda. (www.helpachild.org). In its programme HAC focuses on parenting.

Key Objectives: 1. To increase knowledge for mothers and fathers on parenting skills that are positive. 2. To improve the attitude of parents towards the role of parenting. 3. To improve parents' behaviors and practices in raising their children.

Methodology/implementation process: HaC designed a method, The Parenting Challenge. It is an interactive approach where parents come in groups, sharing among parents among themselves on topics like, who a parent and what is his/her roles, Child Nutrition, Supporting Children in Education, Child- Protection, Child Health and many more.

Research was conducted in Malawi and Uganda, together with the University of Utrecht, The Netherlands, using an ethnographic approach for quantitative and qualitative data-collection.

Key findings/results/outcomes/learnings: There is a positive change in parents' knowledge, attitudes, and practices. There is improved harmony, reduced domestic violence and more support in children's education, health and nutrition.

Conclusion: Parents do improve in knowledge, attitude and practices and skills by participating in a parenting programme. This is critical in the first 1000 days of the child's life.

Recommendations: To make headway in Human Capital Development, parents need to be empowered in their role. This is a priority. More research is needed.

Theodat Siboyintore, University of Rwanda, Center for Mental Health: *The effect of the Sugira Muryango home visiting interventions on children's mental health in Rwanda*

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Background: Widespread incidents of violence against children and women are pervasive, impacting children's well-being significantly. The Sugira Muryango Program home visiting interventions (SMP) in Rwanda aims to address this issue, but its specific impacts, especially on children's mental health, remain underexplored.

Objectives: This study aims to assess the impact of Sugira Muryango Program on children's mental health.

Methods: This study adopts a secondary data analysis approach, leveraging data from the original cluster-randomized controlled trial within the SMP, involving 1,506 children (SM=767, UC=739) from 1,049 households. The tools utilized include the IBQ, which measured children's temperament, and the CBCL, which assessed behavioral, emotional, and social problems. The Mann-Whitney U Test was applied to assess differences in scores between the control and treatment groups.

Results: The results indicates that the treatment group (SM) had statistically significant lower scores for depression and delinquency compared to the usual care (UC) group. No significant differences were observed between the groups for other subscales, including Hyperactivity, Social Withdrawal, Obesity, Somatic Complaints, and Aggressive Behavior. Furthermore, results showed no significant differences between the two groups across all subscales of the Infant Behavior Instrument.

Conclusion: The results imply that the Sugira Muryango home-visiting interventions led to improvements in children's mental health, particularly in behaviors related to depression and delinquency.

Recommendation: Family home-visiting interventions, like Sugira Muryango, should be implemented to prevent family violence, promoting Early Childhood Development (ECD), and enhancing the mental health of children.

Keywords: Sugira Muryango program, Behaviour problems, and temperament.

Esther Ndyetabura Pact Tanzania: *Assessment of Caregiver Parenting Practices Towards Creating a Supportive Home Environment for Child's Early Development in Tanzania*

Positive parenting practices promote a child's cognitive and language development which stimulates the child's enthusiasm and interest in learning. However, different psycho-social and economic factors affect the parent-child relationship and the ability to create a positive environment for child development.

Objective: Study assessed parenting practices and factors influencing the supportive home environment for early development among OVC aged 0-3 years in Tabora and Mbeya regions.

Methodology: June-July 2023 baseline data from 950 caregivers enrolled in the ECD project were utilized.

The data assessed four areas: availability of children books, play materials, a safe environment and parent-child interaction. Data analysis involved a negative binomial regression model.

Key Findings: Urban caregivers show higher rates in book availability, play materials, and safe environment. Interaction with the child was high overall. Urban areas had a mean of 3 practiced areas, while rural areas had 2.5 ($p < 0.001$). There is a 19% higher expected count of practiced areas in urban than rural settings (aIRR=1.19, 95% CI 1.06–1.33).

Conclusion: Findings reveal differences in caregiver practices by place of residence, with better practices in urban than rural settings.

Recommendation: As implementors, reflect on scaling up targeted ECD-related interventions, especially in rural settings to enhance parenting skills to holistically meet the early needs of a child.

Amedius Shengero University of Dodoma (UDOM): *Community Engagement in Early Childhood Development and Care: Experiences from Teachers and Parents in Dodoma region, Tanzania*

Introduction: Early childhood education and care (ECEC) refer to the educational programs and services provided to the children from birth to eight years old. In Tanzania, ECEC services for children are delivered in a setting attached to primary schools. The purpose of this study was to investigate the community engagement in early childhood development and care to enhance positive outcomes for children and community well-being. This study was qualitative in nature and employed a case study design to explore the community engagement in early childhood development and care. A total of 86 participants participated in the study from two childcare centers (02) and two (02) pre-primary schools.

Key Findings: The findings indicated that parents/guardians and community at large were less involved in the early childhood development and care due to lack of awareness on their roles to their children. In the visited areas parents were found much engaged in farming and business activities and paid less attention to their children's well-being. Generally, it is important to stress the implementation of ECEC specifically to the rural area. Therefore, Families and other caregivers are the foundation for early childhood development, so they need support.

Recommendation: The study recommended the government in partnerships with non-state actors to raise awareness to parents/guardians and community at large on the importance of their engagement on the development and care of their children.

Meinrad Haule Lembuka, Department of Sociology and Social Work, Open University of Tanzania, *Tanzania: Ubuntu as a Collective Community Empowering Tool on Effective Early Childhood in Tanzania – A Case of Mama Mkubwa Model*

MMM is an indigenous and ecological community based model that was practiced in Tanzania Mainland from pre-colonial era that represents other indigenous models of child care and development in African ecological perspective known as Ubuntu. The article used desk review method to assess the implications of Mama Mkubwa Model whereby mama Mkubwa in Swahili stands for Mother's Elder Sister or trusted elder Woman in the community who is voted to take care of a vulnerable on behalf of the family and community. MM is

person with good integrity, compassion, maturity, tender and passion for children is selected among the extended family members or community to care for a child in voluntary bases. Results have shown that MMM represents other African Ubuntu Models for child development in Africa context that are envisioned to ensure realization of effective child development in African context through integrating local community, cultural values and ecology in addressing the special needs of orphans and vulnerable children (OVC)s. Ubuntu means African humanism or humanness where all individuals in the community are collectively responsible community development through a human eye especially to vulnerable populations including children. Despite the community strength in Ubuntu perspective yet each individual in the community is responsible to contribute in the child welfare under the guidance of African Ubuntu values including compassion, care, integrity, justice, equality, collectiveness, human dignity, cultural diversity, peace and inclusion etc. On the process of embracing Ubuntu values, community holistic and collective embraces child development with an Ubuntu eye to avoid losing Ubuntu (Humanism)) by mistreating a child and vice versa. The model is holistic and collective in nature that functions across various ecological intersections in the society including individuals, family, extended family members, groups, clans, local leaders, customary laws and community at large. MM takes good care of a child on behalf of the parents but the whole community has a close follow up and support for the child's development (socially, psychologically and spiritually). In 2000s, MMM evidently became very strong in Rufiji- Coastal Region, Makete – Njombe, Kagera and Temeke - Dar es Salaam following the influx of OVC resulted from AIDS pandemic.

Conclusion

MMM puts a greater emphasis on strengthening community-based action under the values of communality, cooperation, voluntary, interdependence, ecology, and holistic etc. Moreover, MMM renders opportunities to be integrated with formal childcare systems through creating supportive environment and reduce child abuses.

Parallel Session 1.2: Community-level interventions to improve capacities and resources for ECD

Rachel Akrofie, Lively Minds, Ghana and Uganda: *How Lively Minds has empowered over marginalised 100,000 rural parents in 2500 communities in Ghana and Uganda to become pre-primary providers*

The Ghana Education Service and Mayuge District in Uganda have adopted and scaled the Lively Minds ECD programme. This tackles the mindset barriers and gender norms that are common in rural families and empowers marginalised parents to provide quality ECCE using their own skills and resources. Existing community trainers (kindergarten teachers in Ghana, and VHTs in Uganda), are trained to train 40 Mother per community to run educational play schemes for all the preschoolers in the community, and to provide playful & learning care at home. The programme currently operates in 2900 rural communities and has empowered over 102,000 parents who teach over 220,00 children each year. An RCT showed that 93% of mothers in the programme are illiterate. Yet they improved child learning outcomes by the equivalent of 1 extra year of school, reduced malnutrition and improved socio-emotional skills. And the programme is challenging gender and parenting norms. This presentation will show how utilising parents is an affordable, effective and scalable way to either supplement pre-primary provision, or to provide pre-primary access where none exists.

Joshua Jeong, Emory University: *Home visiting or community group sessions? Stakeholders' perceptions about the optimal approach for delivering a parenting program in Western Kenya*

Background: Parenting interventions are commonly delivered through home visiting and/or community group sessions. Few studies have systematically investigated the relative strengths and tradeoffs of home

visiting versus community group sessions.

Objectives: The objective of this study was to compare stakeholders' perceptions regarding the implementation modality of home visiting versus group sessions as part of the Moments that Matter parenting program that aimed to improve early childhood development (ECD) in Western Kenya.

Methodology: We conducted a qualitative process evaluation in the first quarter of program implementation. We asked stakeholders about the feasibility, acceptability, and effectiveness of the home visiting versus the group session delivery approach of the program model. Key informant interviews were conducted with 20 caregivers, 12 ECD Promoters, 8 Faith Leaders, and 2 program supervisors, along with 2 focus group discussions with ECD Promoters and 2 focus group discussions with Faith Leaders.

Key findings: ECD promoters, faith leaders, and caregivers valued both group sessions and home visiting for different reasons. They valued group sessions for peer learning, social support, and opportunities for children to play with others. On the other hand, home visits were perceived as more convenient, allowed for more personal attention with individual caregivers, and more appropriate for discussing sensitive issues.

Conclusions: Our results highlight the importance of incorporating implementation research into the design of early childhood interventions and soliciting stakeholders' perspective about program implementation strategies.

Recommendations: Optimizing the program delivery model of parenting programs and ensuring that it is fit for the local context will likely maximize program acceptability, implementation quality, and eventual effectiveness on caregiving and ECD outcomes.

Gino Luís Regina, PATH Mozambique: Assessing enhanced community-based rehabilitation (ECBR) of children with delays and disabilities (CWDD) in Mozambique

Introduction/Background: 10% of under-five children in sub-Saharan Africa have delays or disabilities (DDs). In Mozambique, health services identify <1% of CWDD. The majority beginning rehabilitation do not complete it. In May 2019–August 2023, PATH partnered with a community-based disability organization (CBDO) ADEMO to reach 553 under-five CWDD with eCBR in Monapo District, Nampula Province, Mozambique: home visits, CWDD caregiver support groups, building rehabilitation equipment, advocating for medicine availability, and strengthening referrals and specialist outreach.

Objectives/Purpose: Assess eCBR quality and risk factors for DDs.

Methodology/Implementation process: ADEMO databases, project reports, and government physiotherapy registers were reviewed to determine service quality and DD risk factors. 35 CWDD caregivers were interviewed on service quality and caregiving knowledge.

Key findings/Outcomes: Risk factors for DDs were acute malnutrition (45%), severe malaria (22%), and congenital malformations (10%). Through ADEMO efforts, referral pathways were responsive to the local context, anti-epileptic medicines became available in remote facilities, and specialists provided rehabilitative support in rural communities. The number of children entering physiotherapy tripled over a two-year period. 90% of caregivers described improvements in their children's condition; reflected in 38% of children "graduating" from ADEMO's program. All caregivers interviewed mentioned caregiving practices for CWDD learned from ADEMO.

Conclusions: CBDOs can successfully provide eCBR in low-resource settings.

Recommendations: CWDD specialist services are not available in communities. CBDOs should be supported to provide eCBR—including specialist outreach and strengthened referrals.

Hawa Juma Selemani, Ministry of Education Science and Technology, Tanzania: Community participation for child development in addressing vulnerabilities.

This study examined community participation in addressing early childhood vulnerabilities. It examined the roles and challenges of community involvement in promoting children's well-being and development.

Overlapping spheres of influence guided the study through centering the collaboration between schools, families and communities. The study was conducted in Pwani Region with 50 participants and it employed a phenomenological design. Data were collected through interviews, observation, and Focus Group Discussions and thereafter subjected to thematic analysis. Findings found that caregivers, including parents

and teachers play a crucial role in reducing vulnerabilities by adhering to traditional child rearing practices rooted in community customs and values, with emphasis to developing children's imitation, socialization skills, and environmental awareness. Moreover, active engagement in play and learning revealed to support children's memory, cognition, and pre-academic abilities. However, challenges like limited commitment, lack of materials, and insufficient information hindered community participation. It concludes that mutual collaboration is vital in addressing children's vulnerabilities. The study recommends effective collaboration, with proper communication channels and platforms for sharing resources and information. Strategies addressing challenges and enhancing collaboration between parents, teachers, and communities are crucial. It also suggests implementing social-emotional learning programs and personalized interventions. Additionally, the study highlights the importance of early childhood education quality reflecting local values and concerns.

Parallel Session 1.3: Quality Inclusive Early Childhood Care and Development (IECD)

Immaculee Kayitare, Dr. Umurungi Yvonne, Frank Muhwezi, and Emmanuel Nsengiyumva, Catholic Relief Services, Rwanda: Collaborating with community and local authorities in establishing and delivering Integrated ECD services

Background

In the early stages of life, children pass through successive stages of development each of which offers the foundation for the next developmental steps (UNESCO, 2014). Early Childhood Development in Rwanda refers to a comprehensive approach to policies and programs that address growth needs for children from conception, birth to 6 years of age. This requires the active participation of their parents, community, and caregivers for the physical, social, emotional, spiritual, moral, and intellectual development of a child. The Government of Rwanda (GoR) has invested in the integrated ECD services to foster holistic child development and combat acute and chronic malnutrition in children aged 6 years and below. Access of children aged 24-59 months attending organized early learning programs moved from 13% (RDHS 2014/15) to 24% (RDHS 2019/20), while the proportion of children (24-59 months) who are developmentally on track in literacy, numeracy, physical, social-emotional, and learning domains has increased from 63% in 2014/16 to 76% (RDHS 2019/20). The Government of Rwanda intends to scale up children's access to ECD services to 45% by 2024, however nearly one-fourth (24%) of children are at risk of not attaining their developmental potential if no further interventions are made by the Government or other key stakeholders.

The Inclusive Nutrition and Early Childhood Development Program (INECD) locally known as Gikuriro Kuri Bose, is a five-year USAID-funded activity implemented in consortium—with Catholic Relief Services as prime—in ten districts (one third of districts of Rwanda) selected based on high stunting rates and urban specificities. The overall goal of the program is to improve the health, functioning, nutritional status, and wellbeing of women of reproductive age and children under six years of age, with a focus on the 1,000-day window. The program aims to strengthen the inclusion of children and adults with disabilities, improve positive parenting, and enhance child development. CRS through INECD supports various ECD interventions that aligns with the National Strategy for Transformation (NST1), NCDA Strategic plan, and Vision 2050 as well as the Sustainable Development Goals (SDGs) aimed at moving the country's citizens to a higher level of quality of life.

This abstract focuses on the Community Based Early Childhood Development model and how this can be operationalized and leveraged as an important platform in reaching ECD targets. During the conference, CRS will share with the participants on its experience, promising practices and lessons learned in scaling up Community Based ECD services in collaboration with local government and local community. The goal of this intervention is to improve child developmental outcomes through providing quality and integrated ECD services. To increase access to inclusive ECD services for vulnerable populations through expansion of

community based ECD facilities, through ECD settings, children receive age-appropriate stimulation and care in a nurturing environment. Additionally, parents have access to positive parenting education and messaging on good health, WASH, and nutrition practices for their children.

CRS prioritizes community based ECD approaches as an effective and affordable way to expand access to ECD services and to ensure that more children can access services closer to their homes. The community based ECD settings are established through the collaboration of community, local authorities, and INECD. Local authorities identified land or unused buildings, mobilized the community for preliminary works such as terracing, brick making and elevation. INECD provided industrial materials and equipment. Once facilities established, the program provided extensive training, coaching and technical support to volunteer, disseminated learning and teaching materials to ensure effectiveness, efficiency, and quality service delivery, as well as the ECD program's sustainability. The USAID INECD program established 174 community based ECD facilities in 10 districts in the last 2 years with the capacity of receiving 10,260 children. All settings are now providing services to children and their parents.

Daniela Gissara, Perkins School for the Blind, Global: *Learning through Play and Learning to Play: An Approach for All Children*

Like every child, children with visual impairment and complex disabilities can learn through play. However, in order to acquire the same play skills as their peers without disabilities, they first need intentional support to learn to play. To provide a framework for how best to unlock the potential of ALL children, Perkins has expanded the Learning Through Play concept to include support for learning to play.

In 2017, Lego's Learning through Play concept reimagined learning in terms of five skills for holistic development and play that should be joyful, active, meaningful, iterative, and social. Understanding the characteristics of playful experiences through best practices for children with disabilities, means also considering key concepts around Active Learning, Transdisciplinary Play-Based Assessment and Intervention, Early Braille Literacy Pedagogy, and the 5 Big Ideas Perkins has developed over the years supporting early childhood programs around the world. This holistic playful approach must be translated into tangible, sensory learning experiences and focused on providing accessible play spaces, accessible information, communication and emotional support, and available and effective play partners. Once these children learn to play, like any child they thrive and learn through play.

This expansion of the Learning Through Play concept, that includes evidence on appropriate support for and experience of children with disabilities, can yield a truly inclusive approach in every part of the world where children live and learn.

Prof. Alecia Samuels, University of Pretoria, Africa Region: *Building an inclusive early childhood development system for young children with disabilities and their families in Africa*

Despite most African states having ratified the international and regional human rights treaties that protect the rights of children and persons with disabilities, there has been variable progress in translating these into meaningful reforms for young children with disabilities on the continent. A desk review commissioned by the Africa Early Childhood Network (AfECN) in 2022, analysed the evidence-base related to legislative and policy provisions, and services/ programmes for children with disabilities between birth and six years of age across Africa. Global and regional commitments have improved the availability and quality of data on children with disabilities in the Africa region, as well as improved policy and legislation aligned with human rights instruments. Nearly half the countries have an ECD policy, however, do not always make mention or provisions for children with disabilities in these policies. There remains gross under-resourcing and underfunding for provisions for children with disabilities and their families, particularly during the early childhood period. Access to health, nutrition and early learning support remains challenging and support for responsive care is still unavailable to most caregivers. Forty countries did not have a child protection policy or associated legislation, highlighting the inadequacy in this area across the region. Stronger policy

and programmatic alignment with international and regional treaties, better quality data and information systems, and a more robust evidence base is required to develop context-specific and appropriate supportive ECD interventions for young children with disabilities and their families in the region.

Bankundiye Gisele, Humanity & Inclusion, Rwanda: *Nurturing care to children with developmental delays and disability in Rwanda*

Introduction/Background: Humanity & Inclusion (HI) is implementing a project in Rwanda, which follows the nurturing care framework and aims at improving holistic child development. It has a specific target toward children with disability and developmental delays. It is funded by the Belgian and Luxembourg cooperation.

Objectives/purpose: To support children aged 0-6 to improve their development outcomes and children 0-12 to improve their well-being especially children with development delays and with disability.

Methodology/implementation process: The project aims to apply the nurturing care framework by focusing on the five components of the nurturing care which have been recognized as promoting the optimal development of the child.

The project starts by identifying the children with developmental delays and/or disability through the Malawi Development Assessment tool. Then it offers specific and intensive ECD interventions to children with developmental delays and disability and in the same time works on the enabling environment.

Key findings/outcomes: Specific services for children with developmental delay or with disability and their parents usually do not exist.

Conclusions: Services provision targeting those children and parents in need should increase to support their development

Recommendations: Importance of including children with disability and with developmental delays in nurturing care programming and design specific activities to identify them and provide the support they need.

Amira Nafiseh, Regina Amondi, Indiana University School of Medicine, Indiana, USA and AMPATH, Eldoret, Kenya: *Outcomes and Next Steps for Pepea: A Behavioral Training Intervention for Families of Children with Autism in Western Kenya*

Introduction: To address a critical need for autism spectrum disorder (ASD) intervention in low-resourced settings, a culturally-grounded group wellbeing and behavioral training program for caregivers of children with ASD was co-developed and implemented in Kenya.

Objectives: The objectives of this study are to report on outcomes from implementation of the program and next steps for early ASD intervention.

Methodology: This study occurred from October 2022-February 2023 within the Academic Model Providing Access to Healthcare (AMPATH). Baseline and post-intervention quantitative measures evaluated quality of life, parental distress, and child functioning/behavior. Semi-structured interviews were conducted with caregivers to evaluate program acceptability and feasibility, and perceived impact on wellbeing.

Outcomes: Caregivers reported significant improvements in caregiver burden and distress, child externalizing and total behavior problems, and child communication and social skills from pre- to post-intervention. In baseline interviews, caregivers reflected on challenging behaviors, as well as what they hoped to gain from the intervention, including coping and communication skills. In post-intervention interviews, caregivers reported greater understanding of alternate communication techniques, feelings of support, and recommendations for future program iterations.

Conclusions: Caregivers perceived the program as acceptable, feasible and useful, and improvement was found in use of communication strategies and comfort with behavior management.

Recommendations: This study demonstrates acceptability and feasibility of implementation of a group-based behavioral intervention in similar settings.

Parallel Session 1.4: Building school readiness: Play as a tool for learning at home and at school

Catherine Bateta, Save the Children, Rwanda: *Championing Play through parents'/caregivers' empowerment*

Research has shown that caregivers' engagement in nurturing care, play, talking, cuddling, singing, reading, storytelling, and providing positive guidance to their babies and young children is critical for their holistic development. In Rwanda, caregivers are yet to improve their knowledge on early stimulation. They believe interactions with children cannot fully happen until children are able to speak. Men in particular are disengaged with early learning and nurturing activities at home.

Objectives/purpose: The project aimed at enhancing parenting practices, promoting physical, , cognitive development and play abilities of children aged 0-3. A holistic intervention approach was taken through practical parenting sessions, home visits and focused on male parents' engagement

Methodology/implementation process 17 mixed parenting sessions , with home visits for follow-up support whereby facilitators provided follow-up support in-between sessions. Responding to low levels of male-caregiver engagement, behavioral science was applied to a pilot of three male-only sessions. Sessions were made social by using local male champions and community leaders to encourage other men.

Key findings/outcomes: The qualitative study results showed that the combination of sessions and home visits was effective. The project was able to address attendance barriers of shame, embarrassment and timing. Attendance for these sessions increased to 88% from 15%.

Conclusions: Most male participants were positively impacted by the male sessions improving their knowledge and importance of intentional dedicative play with their children.

Recommendations: To ensure sustainability, partnerships with local stakeholders should be strengthened to integrate these interventions into existing systems. Applying a behavioural science approach addressing specific behaviour practices in communities can lead to positive results.

Abigail Sellman, ideas42, South Africa: *Using behavioral design to support South African caregivers to engage in play*

Finding Thabo is a play-based game designed to stimulate children's brains and facilitate caregiver-child engagement. It is distributed in ECD centers across South Africa and a pilot study also showed promising impacts for children's caregivers at home. Nonetheless, behavioral barriers remain that prevent caregivers from regularly engaging with the game, even when they are highly motivated to do so. Using a collaborative behavioral design approach, we unpacked the behavioral barriers preventing caregivers from engaging in, and designed light-touch, low-cost interventions to promote use. The interventions include an animated explainer video and an updated Finding Thabo picture with integrated guidelines and instructions. We are currently running a randomized evaluation of the interventions to test their impact on caregiver behavior. Our presentation will center on the interventions, share behavioral insights about what might prevent caregivers from engaging in play, and provide innovative ideas for how to help caregivers overcome these barriers. In conclusion, behavioral design offers a novel way of thinking about how to promote play and improve early learning outcomes by supporting caregivers to overcome barriers to engagement. In this way, behavioral design can illuminate innovative and effective solutions that may be otherwise overlooked.

Fortidas Bakuza, Aga Khan University, Tanzania: *Early Childhood Development in changing time: Resilience and coping with changes.*

Early Childhood Development is a period of rapid growth physically, socially, and emotionally. It is the period between conception to the first eight years of human development. However, there are environmental

factors that often interfere with parenting and their influence tend to affect early childhood development in all spheres of life. The rural communities in East Africa are experiencing the changes in the traditional ways of life. Traditional farming and animal grazing are affected by change in seasons that have significantly disrupted the ways of living.

The main aim of the study was to qualitatively document perceptions on ECD challenges and sources of risk and resilience for children living in Monduli District, Arusha.

The qualitative field notes especially in Tanzania have indicated some promising findings such as strong and resilient family child rearing practices, adaptability to the climatic and environment changes, parallel leadership (traditional and local government) which are working together smoothly and openness of pastoralist communities to share and learn from others. In this presentation, parents, local leaders, and other stakeholders have shared some good lessons which should be well understood. The climatic change, population growth and urbanization are likely to interfere with traditional child rearing practices. Adapting to new situation is possible without losing the common practices that defines the families and communities. Contextually relevant interventions are important and they should be informed by data both quantitative and qualitative. Communities through their traditional set ups should be involved in addressing the challenges they may be facing for sustainability.

Lungile Mdluli Mpho Papale, UNICEF and National Department of Basic Education South Africa: *The importance of play in early learning: Knowledge, Attitudes and Practices of parents and caregivers with children birth to six years.*

Study title: The importance of play in early learning: Knowledge, Attitudes and Practices of parents and caregivers with children birth to six years.

Lungile Mdluli UNICEF and Mpho Papale the Department of Basic Education (South Africa)

The aim of the study was to understand the knowledge and skills of parents and caregivers to evidently inform play-based learning interventions (parenting programmes) aimed at them.

The study employed a mixed method design which was exploratory. A quantitative and qualitative data collection process was used. A random and convenient sampling method was used to identify 1429 participants, representational of the various living standard measurement indicators.

Parents viewed their responsibilities largely in relation to the child's needs for health, nutrition, protection, self-care and socialisation. A total of 92% parents agreed that it was important to play with your child, as it is fun and promotes bonding. However, a greater portion of parents indicated that children up to the age of two were too young to play, thus the use of technology was commonly used to replace play time. In practice the parent survey indicated that some parents' did not play with their children. In support of literature, there is still a lack of knowledge amongst parents on the link between learning and play and parental engagement. The contextual barriers to the study included a lack of social cohesion, safe spaces for young children to play, lack of time, affordability, literacy levels, mental health issues, and lack of confidence in their parenting. This calls for a scale-up and funding in parenting programmes.

Dieudonné Uwizeye, University of Rwanda, Center for Mental Health, Rwanda: *Long-term spillover effects of household coaching in playful parenting on siblings of treated children: A mixed methods study*

Background: Sugira Muryango (SM) is a family-strengthening intervention implemented in 3 rural districts in Rwanda. Implementers are lay workers trained on the SM curriculum of 12 home visits/topics related mainly to active play with the child and family strengthening. Objective: A follow-up study to investigate the spillover effects of the SM interventions among the siblings of the treated children. Methodology: we utilised a mixed qualitative-quantitative design. The analysis considers families with children between 3 months and three years, the children born after the families were recruited, and those aged 8 to 12, too old to qualify to participate in the study at the longitudinal study time point. Key findings: The effects of SM did spill over to younger and older siblings in SM households. Children experienced more stimulation and caregiver engagement in playful activities, greater father engagement, and better cognitive development, particularly in linguistic and gross motor development. We observed fewer spillover effects on literacy among older

children. Conclusions: Home visiting programs provide a unique opportunity to influence the development of all children in the household. However, caregivers' low literacy levels negatively affect children's support. Recommendations: Further integrate the intervention program within the community to enhance sustainability. Also, provide additional support to caregivers with low literacy levels to enable them to support children significantly in education.

Parallel Session 1.5: Interventions targeting teenage mothers

Abella Atieno Owuor, Kisumu Medical and Education Trust (KMET), Kenya: *What Adolescent Mothers Need: A Survey by KMET in collaboration with the County Government of Homa Bay*

Key Objectives: This paper seeks to understand the types of support adolescent mothers, need to realize their personal & parenting aspirations while exploring the contextual factors that affect the well-being of their children.

Methodology: This was a cross sectional survey using qualitative techniques to collect data on the teen mums lived experiences guided by semi-structured guides for documentation. A purposive sampling method was used and the assessment was open to 100 teen mothers who met the inclusion criteria (being 15-19 years of age and a parent of 0-3 year's child).

Key Findings: 1. 54% dropped out of school due to lack of school fees, shame, fear, social stigma and in some cases harassment by the teachers had the desire to go back to school or join a tertiary institution to learn a trade. 2. 33% admitted to not being able to fully concentrate in class as they were worried about their children back at home, and could not practice exclusive breastfeeding for the child while facing difficulty in balancing school and house chores. 3. Key support was financial support, medical care for themselves and their children, food, support for the baby, beddings, clothes, sanitary towels and information/training/mentorship on how to take care of the baby 4. 69.6% had received SRH education, did not use contraceptives due to misleading information.

Implications of findings for policy and action: Establishment of comprehensive and integrated care programs tailored to the specific needs of teenage mothers, incorporating prenatal education, socio-economic empowerment, parenting workshops, and counselling services.

Mike Mwenda, Self-Help Group, Regional Psychosocial Support Initiative (REPSSI), Zambia; *Breaking the Cycle of Poverty for Adolescent and Young Mothers (AYM's) through Economic Strengthening*

Victoria Mulinda, Regional Psychosocial Support Initiative (REPSSI), Zambia: *Promoting Mental Health and Psychosocial Wellbeing of Adolescent and Young Mothers (AYM's)*

Introduction/Background: Ensuring the mental health and psychosocial wellbeing of adolescent and young mothers is a critical imperative for fostering healthy communities and promoting individual resilience.

REPSSI implements the Happy Mother, Healthy Baby project in partnership with ChildFund in 3 districts, i.e., Chibombo, Chongwe and Mumbwa.

The project is funded by Hilton foundation and is in the second and final year of implementation

Objectives/purpose

- i. Build capacity of ECD workers to provide mental health and psychosocial support (MHPSS) to AYM's
- ii. Enhance mental health and psychosocial wellbeing of AYM's
- iii. Promote infant mental health (IMH) through play-based approaches.

Methodology/implementation process: ECD workers, undergo a structured training on provision MHPSS to AYM's and foster IMH for babies and young children of AYM's. Thereafter they provide MHPSS to AYM's through household visits and groups engagements with AYM's as well as conduct play-based IMH activities. They also make referrals for AYM's to specialized MHPSS institutions.

Key findings/outcomes: Increased capacity of ECD workers to provide MHPSS to AYM's improved mental and psychosocial wellbeing among AYM's Better child-caregiver interactions.

Conclusions: Caregiver mental health and psychosocial wellbeing is critical in ensuring the provision of good quality nurturing care. Acknowledging the challenges that babies and young children encounter and implementing focused interventions are crucial steps in promoting healthy early development. Recommendations: ECD programming needs to integrate MHPSS targeting AYM's to enhance provision of nurturing care.

Revocatus, Joseph Sono, Amani Girls Organization, Tanzania: iCare – Empower Her, Nurture the Future.

Objective: To better understand the opportunities and barriers currently facing adolescent mothers with a focus on school re-entry, AGO undertook a rapid assessment of the situation in the Chamwino District of the Dodoma Region in June 2023. Interviews were undertaken with 38 key informants from across the health, education and community development sectors of the GoT. Discussion groups were undertaken with: a) in-school adolescent mothers; b) out-of-school adolescent mothers; c) adolescent mothers who had re-enrolled but dropped out again. Findings were consistent about the opportunities and barriers experienced by adolescent mothers with regard to provision of childcare for their children, school return, retention and success - and broader situational needs and priorities. Central finding: Currently, a return to formal, traditional, secondary school-based education is very difficult, if not impossible, for most adolescent mothers. Education policy in Tanzania doesn't provide the means for enrollment and ECD provision to teen mothers and their children. Recommendation: There is an urgent need for responsive adolescent mother-centered programming and broader social norm change to support the range of needs expressed by young mothers in order for them to continue their education and fulfill their goals and potential, at the same time respond to ECD needs of their young ones.

Parallel Session 1.6: Innovative models for delivering Parenting Education

Italo Lopez Garcia, Center of Economic and Social Research, University of Southern California, Kenya (Kisumu, Homa Bay and Vihiga counties): *The Msingi Bora group-based parenting intervention in rural Kenya*

Background: Early childhood development (ECD) responsive parenting interventions can effectively improve ECD outcomes in low- and middle-income countries (LMICs), at least in the short-term. However, early impacts tend to fade over time and the few programs that have shown longer-term impacts offered continued support over a period of years. Moreover, very few programs have been scaled to the regional or national level in LMICs.

Objective: We present the short- and medium-term impacts and implementation evaluation of Msingi Bora, an 8-month ECD responsive parenting intervention delivered by CHVs across 60 villages and 1,200 households with young children in rural Kenya.

Methodology: In a multi-arm cluster RCT, each village was assigned to: group-only delivery (16 fortnightly sessions), mixed delivery (12 group sessions + 4 home visits); a comparison group. Surveys at baseline, post-intervention, and two years later measured child cognitive (Bayley III) and socioemotional development, and parental stimulation (HOME Inventory). Key Findings: Both models achieved large short-term impacts on children's cognitive and socioemotional development, as well as parenting behaviors, with larger effects under group-only delivery (0.3-0.5 SDs). After two years, only this arm had sustained impacts on the same outcomes (0.2 SDs). Program success hinged on acceptance of the program content, as well as rigorous CHV training and supervision.

Implications: Findings underscore strong potential for group-based manualized programs using CHVs to maximize scalability. A new study tests its remote mHealth delivery.

Sofia Costa, Feeding the Change, Mozambique: *Evidence-Based Development of Early Childhood Development (ECD) Materials for Caregivers*

Background: In Mozambique, 61% of children under five are at risk of poor development, with rural children facing an even higher risk at 94%. Only 47% of caregivers engage in early stimulation activities at home.
Objective: To develop caregiver training materials tailored to the rural Mozambican population, aimed at fostering ECD practices within rural communities.

Methodology: Drawing from successful models in Kenya, the development process was iterative. In-depth interviews and group meetings with government and stakeholders informed initial adaptation of the materials. A workshop with national, provincial, and district government, academia and other stakeholders refined and validated the final version of the materials.

Outcomes: The tailored development process yielded context-specific materials, ensuring relevance not only to the country but also to individual districts. Caregiver training materials were refined through iterative stakeholder input at the individual, group, and workshop levels, enhancing their context and cultural specificity.

Conclusions: The iterative process resulted in contextually relevant and stakeholder-validated materials, essential for effective implementation, with context and cultural specificity extending to district and community levels.

Recommendations: To ensure effective implementation, the developed materials should be aligned with existing country-level initiatives to maintain coherence and minimize confusion. Facilitators trainings should prioritize practical over theoretical content. Utilizing highly didactic and visual materials in trainings can enhance engagement of the communities, particularly in low-literate rural communities. To alleviate the burden on community health workers, involving community volunteers and offering incentives for motivation can be effective strategies.

Elizabeth Maginga, Thobias, WeCare Foundation, Tanzania: *Early Childhood development training to pregnant women in Mbeya city through Social network (WhatsApp Group)*

Background:

Knowledge of nurturing care components among Pregnant women in Mbeya city is low resulting to children developmental risks like stunting, delayed developmental milestones, and child neglect.

Objective/Purpose of WhatsApp group training: To increase knowledge on nurturing care components from 25% in October 2023 to 85% by December 2023, among pregnant women attending ANC clinic In Mbeya city

Methodology/implementation process: Permission to work with Health facilities to train pregnant on nurturing care components were requested and granted by DED office in Mbeya city. Participants were selected randomly from 3 health facilities in Mbeya

Key findings/outcomes: A total of 220 pregnant women were recruited and enrolled to participate in WhatsApp group ECD training which was named WeCarefoundation Malezi na Makuzi Online platform. Participants were enrolled from three health facilities; Meta hospital (40%), Kiwanja Mpaka hospital (28%) and Agakhan Clinic (32%) all in Mbeya City.

Conclusions: With technology growth and busy economic schedules parents are going more digital and don't have time to wait for physical education in health facilities hence with this platform they can easily receive education at their convenient time.

Recommendations: Though it is limited with challenges like high internet bundles and connectivity but it is flexible in saving time if the government and communication stakeholders can bring flexibility of internet bundle costs during the training sessions to make it more effective and cheap method of ECD training in minimum resource countries.

Edwick Mapalala & Kelvin Ngoma, Regional Psychosocial Support Initiative, REPSI; Marguerite Marlow and Mark Tomlinson, Stellenbosch University, Tanzania & Zambia: Using WhatsApp support groups to promote responsive caregiving, caregiver mental health and child development in Tanzania and Zambia.

Background: We assessed the feasibility and effectiveness of a digital parenting intervention in Tanzania and Zambia. **Methods:** Using a randomised controlled trial, we evaluated the digital parenting intervention for caregivers of children aged 9–32 months with access to a smartphone in their household. The intervention was delivered via facilitated WhatsApp groups over 6 weeks to promote caregiver wellbeing and responsive caregiving through shared reading activities. **Results:** We randomly assigned 494 caregiver–child dyads to the intervention (n = 248) or waitlist control (n = 246) arm. Caregivers in the intervention group reported more responsive caregiving, time reading or looking at books and telling stories. Intervention caregivers reported significantly lower symptoms of depression and anxiety. Child development and parental stress did not differ significantly between groups. **Conclusion:** Digital parenting interventions using WhatsApp can effectively promote responsive caregiving and caregiver mental health in low-resource settings, with great potential for scalability.

Parallel Session 1.7: Empowering Families for Quality Childcare and Early Learning

Fidelis Muthoni Catholic Relief Services, Kenya: Family preservation and sustainable reintegration through positive parenting.

Introduction: Changing The Way We CareSM (CTWWC) is an initiative designed to promote safe, nurturing care for children, including those reunifying from residential care facilities and those at risk of child-family separation. In Kenya, 45,000 children reported to be out of parental care, risk not reaching their developmental potential. Residential care facilities have limitations in providing nurturing care due to their limited staff, staff turnover, limited opportunities for stimulation, increased chances of abuse; compounded by age of entry and duration of stay.

Objective: Families Together is an evidenced-based parenting program designed to improve the well-being of infants, pre-school children, older children and their families through promoting children development, preventing violence against children, and preventing child/caregiver separation.

Implementation: Consists of ten modules delivered at household or group level.

Key findings: 2021 household survey, 76.4% caregivers identified parenting as a helpful support after cash transfers. Alabama Parenting Questionnaire, survey explored caregiver involvement, positive parenting, and corporal punishment: 21% of caregivers were practicing the positive parenting practices showing adoption of desired practices. Of 2,981 enrolled caregivers, 2,166 completed sessions and reported increased parent-child communication, reduced use of harsh discipline: decreasing chances of violence and leading to preventing separation/re-separation of 8,943 children.

Conclusions: Improving parenting skills and enhancing other social services promoted a positive family environment that enhanced reintegration and spurred catch-up and rebound from early challenges.

Recommendations Further research on parenting approaches for elderly, young caregivers, care leavers, and male involvement within care reform.

Prof. Pambas Tandika Basil, University of Dodoma, Tanzania: *The Home Environment in Selected Rural Community in Morogoro Region and its Contribution in Addressing Learning Poverty among Young Children in Tanzania*

Introduction: Active parental and caregiver engagement, especially for children with low academic progress, is vital to the acceleration of development and learning (Shaver & Walls, 1998; USAID, 2017; Westat and Policy Studies Associates, 2001). However, Tanzanian young children rarely have the necessary support from their homes to be fully prepared for learning (Trako, Molina, & Asim, 2019).

Purpose: Thus, this study was designed to determine the quality of the home environment in stimulating children with materials and the type of activities parents engage at home to address learning poverty.

Methodology: The ELOM HLE tool was adopted to capture key features of the child's home learning environment associated with early language and numeracy abilities and cognitive functioning. A total of 40 parents or caregivers (22 female and 18 male) in Kiswahili were involved.

Findings: 55.0% of the parents spent less than one hour a day and 50.0% less than one hour during the weekend interacting with their children. Meanwhile, 43.9% of the responses indicated parents assigned children domestic chores and sold some goods, and 75% had one book at home.

Conclusions: It concludes that addressing learning poverty in rural areas has a long way to go.

Recommendations: It is therefore recommended that the improvement of the home environment by parents would better contribute to the school's initiatives in improving early learners' learning outcomes.

Catherine MacLeod, ideas42, Madagascar and Rwanda: *Enhancing early childhood development through behavioral designs for cash transfers*

Cash transfers are a tool to invest in human capital. Numerous countries, including Madagascar and Rwanda, are implementing cash transfers to support early childhood development. However, best practices for healthy development are influenced by numerous behavioral factors beyond access to services of provision of cash and are dependent on practices and behaviors of caregivers. ideas42 has partnered with the World Bank and the governments of Madagascar and Rwanda to incorporate behavioral designs into programs that support caregivers in using their transfer to support children's development. Designs include reflections, goal-setting, and plan-making activities that support parents in planning and taking action to improve their children's development.

In Madagascar, results from a cluster-randomized trial indicate that households that received behavioral interventions undertook more positive parenting behaviors and their children scored higher on measures of socio-cognitive development than children from households that received cash only. In Rwanda, we learned valuable lessons on how barriers vary, and thus how designs must be adapted, in different contexts.

Results from Madagascar, and subsequent adaptations of key ideas in Rwanda, add to the growing body of evidence that combining cash transfers with parenting programs can enhance their impacts for children.

Taking this work forward, we are working to identify and address challenges to adapt and scale these designs within new programs and contexts.

Bet Caeyers, Thrive, Tanzania: *Study design and baseline findings of the Kizazi Kijacho Randomized Controlled Trial of a parenting intervention and an Unconditional Cash Transfer program in Tanzania.*

Kizazi Kijacho: A Randomised Controlled Trial of Parenting and Unconditional Cash Transfers in Tanzania – Baseline findings, by Bet Caeyers (Chr. Michelsen Institute/Thrive). Introduction/Background. The success of pilot parenting interventions in Low- and Middle-Income Countries critically hinges on an intense level of training, mentoring and supervision of Community Health Workers (CHWs) that is difficult to sustain when transitioning to scale. Moreover, it is not clear whether and when to combine cash transfers with parenting programs to holistically improve child development. Objectives/purpose. We present the baseline findings and study design of the state-of-the-art Kizazi Kijacho research program, aiming to evaluate the relative cost-effectiveness, process quality, affordability and sustainability of (i) a parenting program delivered by CHWs supported by a digital App, (ii) an Unconditional Cash Transfer (UCT) program and (iii) a combination of both programs, from pregnancy until age 2 – the 1st 1000 days. Methodology/implementation process. We are in the process of conducting a Randomised Controlled Trial (RCT), a process evaluation, a costing study and an ECD system analysis. Key findings/outcomes. At baseline, we find that children in the study region are born in an environment with limited opportunities for learning, poor health access, restricted CHW capacity, minimal living conditions and inadequate social protection mechanisms. Conclusions. These baseline results highlight both opportunities and risks for parenting and cash transfer programmes to make a difference to improving ECD. Recommendations. We encourage the government to continue strengthening healthcare and social protection infrastructure and to support CHWs in delivering critical services in children's early life.

Awet Araya UNICEF Tanzania: *Connecting Facts with Emotions: Responsible Parenting and Family Care*

Introduction: UNICEF Tanzania, BBC Media Action and Tanzania's broadcast media platforms designed the "Responsible Parenting and Family Care Programme"

Objectives/Purpose: To inform, engage and empower male and female parents/ primary caregivers of children below 18 to practice positive parenting.

Methodology: Content is disseminated using storytelling, positive role models, and safe spaces for open

conversations around the key message, 'Care, Protect and Communicate'. Mixed-method surveys were used to measure the reach of the programme and an independent impact evaluation analyzed audience feedback from social media pages.

Findings/Outcomes: To strengthen the link between media and communities, 48 listening groups (3,867,844 parents/ primary caregivers and 2,222,567 non-parents) were established comprising male (52%) and female (48%) parents/caregivers leveraging on existing community-based nutrition and parenting listener groups. The impact evaluation indicated that parents and primary caregivers acquired the ability to teach, guide and mentor (99%), provide protection (96%) to their children, and practice responsible parenting (47%). Participants reported more at ease to discuss sensitive issues among their listener groups.

Conclusion: Improved partnership with local broadcast stations increases reach and high-level community engagement for improved positive parenting practices and engaged fathers' in parenting and the prevention of violence against children.

Recommendations: anchor in sound behavior change model, consistent promotion of key messages through multiple channels to increase audiences and feedback loop.

Parallel Session 1.8: Overcoming barriers to holistic ECD service provision

Ruth Mathys, Grow Great Campaign, South Africa: *Insights from Flourish: a national network of community-based antenatal and postnatal classes in South Africa.*

Evidence-based information discussed in Flourish classes addresses nutrition-sensitive and -specific drivers of stunting, including importance of exclusive breastfeeding for six months, responsive caregiving and maternal mental health. Classes are interactively facilitated by Flourish hosts who receive evidence-based training and ongoing coaching support. Since mid-2018, Flourish hosts have reached ~30 000 moms across South Africa, while earning a small income. To understand what stunting-protective behaviour changes moms feel empowered to make after attending Flourish antenatal and postnatal classes, 665 Moms who completed a minimum of six out of 10 Flourish antenatal classes between January and September, 2023 and 228 Moms who completed a minimum of 6 out of 10 postnatal classes in the same time frame, were contacted telephonically to complete an Experience survey in their home language as part of routine monitoring, evaluation and learning data collection. This abstract describes the outcomes of a qualitative analysis of responses to one specific Experience survey question "What do you do differently after attending Flourish?" Only 2% and 1% of antenatal and postnatal moms respectively reported that they do nothing differently after their Flourish classes. The most self-reported stunting-protective behaviour changes described by 67% of antenatal moms were grouped under the theme 'Self-care' and related to improved maternal nutrition and mental and physical wellbeing. The most self-reported stunting-protective behaviour change described by 84% of postnatal moms were grouped under the theme 'Responsive care' and related to the nurturing care, nutritional care and physical care of their baby. The high acceptability of Flourish facilitates multiple stunting-protective behaviour changes. Non-healthcare personal trained and supported to host community-based mom-and-baby groups can effect stunting-protective behaviour change. Investing in community-based universal evidence-based antenatal and postnatal classes are an effective behaviour change tool to support pregnant women and their children against stunting.

Pamela Wadende, Kisii University, Kenya: *Teachers in the Home: Strategies Children Use to Support School-readiness skills in their younger siblings in Kenya and Ethiopia*

Introduction: Extensive research shows that ECE is critical for children's future. However, access to high-quality ECE often depends on parents' socio-economic status. A better understanding of existing and potential learning opportunities in low-income homes is crucial for ameliorating common disadvantages. The African tradition of multi-aged play groups provides children with a wide range of learning experiences,

which could be harnessed to supplement ECE programs and prepare children for school. Objectives: Observe sibling interactions around the home and explore how older children support their younger siblings in acquiring school-readiness skills. Methodology: Observed 16 sibling dyads from Kenya and Ethiopia playing in their typical environment. Data was collected through two 20-minute video recordings per dyad and later transcribed, coded, and analysed thematically. Key findings: Older siblings are effective teachers of their younger brothers, sisters and peers. They used play, scaffolding and modelling along with direct instruction and supervision to teach a wide range of skills. Almost all teaching activities relied on common materials found within the children's environment, such as stones and sticks. Conclusions: Older siblings use a variety of teaching strategies plus commonly available materials for sharing their knowledge with peers. These findings provide a framework for harnessing sibling interactions to strengthen early childhood care and education in low-income areas.

Nelson Agapith Choaji, Lindi Women Paralegal Aid Centre (LIWOPAC), Tanzania: *Availability of enough food and proper nutrition to nursery pupils in public school Lindi Region*

Introduction: The availability of food and nutrition to students in school is crucial. Research indicates that students who are provided with food and nutrition services at school have better health, reduced absence, improved attention, better attendance records, improved health, and enhanced academic success (Lukindo, 2018; Maijo, 2019).

Objectives: The main goal is to improve the availability of good food and nutrition for young children in public schools (02-08 years old). Specifically, this program encourages local governments to allocate budget for food and nutrition for early students.

Methodology: To implement this program, three main strategies are suggested: encourage parents and caregivers to contribute at least Tsh; 20 for every kg of agricultural and business product sold (Sesame, peas, cashews). Advocate for the regional government to allocate at least 20% of education funds.

Key findings: Program will help students overcome temporary and hidden hunger, ensuring they have a good diet and health. To increase knowledge of primary and secondary school students, making children being more attracted and enjoyable to school and their childhood.

Conclusions: Policy and decision-makers will providing national permanency guide that will aid in food and nutrition availability. Additionally, each region can analyses opportunities that will facilitate the availability of food and nutrition.

Recommendations: I recommend that development stakeholders support implementation of program by providing necessary materials including modifying the ideas, allocate budget for advocating program.

Ignas Lukanga, Esther Ndyetabura, Amon Exavery, John Charles, Asheri Barankena, Levina Kikoyo, Pact-Tanzania, Tanzania: *Early Childhood Development Services Landscape in Tabora and Mbeya, Tanzania. Identifying Opportunities and Overcoming Barriers.*

Background: Globally, investment in ECD services provision is still limited. In Sub-Saharan Africa, 51% of children have access to early stimulation and responsive caregiving, while only 35% have access to learning materials at home. In Tanzania, about 3 million under 5 years children are stunted, whereby lack of childhood care is a major factor.

Objective: To identify barriers and highlight existing enabling environments for provision of ECD services to 0-3 OVC.

Methods : June-July 2023 baseline study collected qualitative data from 25 KIIs and 4 FGDs with 35 caregivers. Qualitative data was further transcribed and analysed through thematic analysis to obtain the key themes.

Key findings: Limited caregiver-child interaction, single parenthood, abuse, limited income, long distance to access healthcare services, coordination challenges and limited resources allocated for ECD programs are barriers to comprehensive ECD services provision. However, enabling policies and CCW equipped with ECD knowledge and skills is a cost-effective approach that promotes the accessibility of ECD services.

Conclusion: The study concludes that socio-economic factors are the main barriers towards creating a safe and supportive environment for child development; however, CCWs can play a significant role in addressing

the barriers.

Recommendation: Increased investments in strengthening caregivers' capacity to deliver ECD services to their children through empowered CCW.

Mary Ann Etling, Eren Oyungu, Carolyne Jerop, Amira Nafiseh, Grace White, Violet Amondi, Mercy Jelagat, Regina Amondi, Anita Jerop, Phylis Kiplimo, Roselyn Ombitsa, Megan S. McHenry, Academic Model Providing Access to Healthcare (AMPATH), Eldoret, Kenya: the impact of a narrative film intervention in addressing stigma-related to disability in Western Kenya³ Academic Model Providing Access to Healthcare (AMPATH), Eldoret, Kenya.

⁴ Department of Child Health, College of Health Sciences, Moi University School of Medicine, Eldoret, Kenya.

Objective: This study aims to explore the impact of a narrative film on beliefs and attitude towards disability in western Kenya.

Methods: Six locations were selected for the film intervention in Uasin Gishu County, Kenya. Focus group discussion (FGDs) were conducted before, immediately after, and three months following the film to understand attitudes and experiences toward disability. Constant comparison and triangulation methods were used to identify emerging themes and concepts.

Results: A total of 506 community members attended the film screening and 114 were randomly selected for FGDs. In pre-intervention FGDs, participants attributed the cause of disability to an accident, a curse or witchcraft, occurring from birth, or related to disease. Many participants noted that the community viewed persons with disabilities as overlooked, feared, hated, useless, and burdensome. Treatment of persons with disabilities was described as discriminatory, citing children being hidden, caregiver neglect, and physical and verbal abuse. After the film, many individuals described that they no longer viewed persons with disabilities as “cursed” but rather as blessings, important, and valuable members of the community. Participants described that the family, community, and government have shared roles in bringing their children out, provide educational opportunities, and finding ways to support, protect, and love them. Many participants mentioned a desire to increase awareness or education about disability, provide direct support (i.e. financial, medical, verbal, visiting) to persons with disabilities, and encourage caregivers. In the three-month follow-up FGDs, participants maintained positive beliefs regarding individuals with disabilities. Many participants enacted acts of change, including encouraging individuals with disabilities and their caregivers, visiting the home, and providing direct support. Limited resources, uncertainty, lack of awareness, and fear of being exploited were all challenges to implementing change in their communities.

Conclusion: The use of a narrative film about stigma and discrimination surrounding disability appeared to align with beliefs of community members in western Kenya. Participants expressed an increased desire for family, community, and government support to address ongoing discrimination in their region.

Parallel Session 1.9: The Role of Men in the lives of young Children

Gabriela Phend Boston College, Research Program on Children and Adversity, Rwanda: *A Longitudinal study of the effects of an early life parenting and family violence prevention intervention in Rwanda*

Introduction/Background: Sugira Muryango (SM) is a father-engaged, play-based home visiting based lay-worker delivered intervention to promote early childhood development and prevent violence in Rwanda. We will present results from a four-year follow-up study from the cluster randomized trial (CRT) effectiveness study.

Methodology: The longitudinal study is an exploratory sequential mixed methods study that follows the same families enrolled in the SM (treatment) and UC (control) groups of the 1049 household CRT.

Key findings: Despite the COVID-19 pandemic, caregivers who participate in SM - both male and female - sustained effects in play and other stimulating interactions, warmth and affection, provision of learning materials, parental attitudes towards the child's education, father engagement, harsh discipline, and hygiene practices suggest that the benefits of early intervention with SM are long-lasting.

Conclusions and Recommendations: Findings demonstrate that SM has a long-term positive impact on families and children living in poverty.

Mary-Ann Schreiner, UNICEF Tanzania: *Gender- Transformative Parenting: Challenging Gender Norms and Inequalities for all Children to Thrive in Tanzania*

Introduction: As commitments made in the Tanzania Generation Equality Programme and the National-Multisectoral ECD Programme (NM-ECDP), the government of the United Republic of Tanzania is accelerating ECD progress to scale multisectoral childcare programs.

Objective: To showcase evidence of scalable, ECD models accelerating gender equality as fundamental to child rights.

Methodology: The Parenting for Lifelong Health programme in Tanzania is a parenting solution to promote healthy child development and prevent violence in the home and wider community throughout the life course.

Findings: Evidence from the pilot shows that parents/caregivers increased their knowledge in gender-transformative parenting, benefiting the whole household and communities.

Conclusions: Empowering parents and caregivers with gender-transformative parenting skills is key to transforming imbalanced power structures in families, preventing violence, changing attitudes on social and gender norms and overall approaches to parenting.

Recommendations: Adapt the parenting programme for parents/caregivers of children under 5 years of age to promote positive gender socialization. Engage and promote fathers and men's increased involvement in parenting programmes and childcare. Empower frontline workers and implementing partners to support parents/caregivers to employ gender-transformative parenting approaches.

Damas Joachim, Tanzania Home Economics Organization (TAHEA MWANZA), Tanzania: *Designing a fatherhood intervention together with fathers in Mwanza, Tanzania.*

To describe the process of developing a fatherhood intervention, pilot testing the curriculum, and refining the program strategy based on community feedback. We developed a fatherhood intervention to holistically support fathers' nurturing care and ultimately improve early child development. Our fatherhood curriculum covers topics related to responsive caregiving, early learning, nutrition, parenting stress, couples' relationships, and gender. We pilot tested each session with groups of mothers and fathers across 14 communities in Illemela District in Mwanza, Tanzania. We also conducted focus group discussions with group participants to capture their opinions about the program and recommendations for better engaging and supporting fathers. Overall, both mothers and fathers appreciated the inclusion of fathers in the parenting program. Many fathers reported improved knowledge, skills, and attitudes towards nurturing care. To maximize fathers' attendance, caregivers suggested holding the sessions on weekend afternoons and involving influential individuals in the community as part of the program. Despite overall support for this fatherhood intervention, many caregivers highlighted restrictive gender norms as a potential barrier to men's participation. In this study, we provide an example of how intervention pretesting can be implemented to iteratively adapt the design of a parenting program for fathers. Engaging fathers from the beginning and continuously throughout the design process can inform gender-responsive programmatic decisions and maximize the potential success of a fatherhood intervention.

Frederick Nyaga, Men Engage, Kenya Network (MENKEN): *Harnessing Fatherhood for positive impact on young Children*

Introduction: While there is growing recognition of the integral role that men play in the care of children, too many still hold the belief that women should bear the greater responsibility in reproduction, caregiving and domestic chores. Men are often portrayed as deficient in caregiving. However, research indicates that the unique ways that fathers interact with their children contribute to healthy development from infancy through early adulthood (Heinrich, 2007). Findings from the rapidly growing science of early childhood and early brain

development show the positive, lifelong impact fathers can have by being positively engaged early in their children's lives. Children with involved and engaged fathers tend to have more positive outcomes relative to physical, cognitive, and social emotional health. Fathers not only have the capacity for care giving, but that children benefit directly from fathers' parenting contributions. The beneficial outcomes go beyond childhood. Given the consensus that engaging fathers in the child welfare process results in positive benefits to the children, there is need to identify strategies to increase father and father figure participation with an eye towards promoting positive outcomes for their children (Velazquez, Edwards, Vincent, & Reynolds, 2009). This presentation will offer some reflections on about engaging men in caregiving specifically young children not just by their father, but also their father-figures and other men who are present in the child's social environment. Objective: To highlight different areas to harness fatherhood to impact positively on young children.

Methodology/Implementation Process: MENKEN for over ten years has been implementing different programs to engage men in positive fatherhood. We intend to share the learnings and experiences from the implementation.

Key Findings/Outcomes: Many Fathers are interested in care giving when they know the benefits. However, they face many barriers that need multifaceted approaches to overcome.

Many program have focused on non-caring men who are directly connected to children whereas there is opportunity to engage father-figures such as brothers, cousins, uncles, grandfathers as well as male supervisors or colleagues, religious and community leaders of the parent or caregiver of the child.

Conclusion and Recommendations: People with actively involved father figures during childhood are more likely to have higher levels of success in their careers, a better chance of having a strong, lasting marriage, and an improved ability to handle stress. In order to involve fathers in child welfare processes, practices and policies must be intentional for all parents regardless of relationship status of the parents.

Chilekwa Chisanga, Regional Psychosocial Support Initiative (REPSSI), Zambia: *Fostering Male Caregiver Involvement in Childcare Through Enhancing Household Mental Health and Psychosocial (MHPSS) Environment*

Introduction: The MHPSS wellbeing of mothers is critical in ensuring provision of good quality nurturing care. The involvement of male caregivers in childcare is essential in promoting optimal child development. Negative gender stereotypes continue to perpetuate the lack of male involvement in childcare. This situation consequently affects the mental health and psychosocial wellbeing of female caregivers.

Key Objectives: i. Promote involvement of male caregivers in child rearing. ii. Mobilize male caregivers to support female caregiver's mental health and psychosocial wellbeing. iii. Enhance household MHPSS environment through GBV elimination.

Methodology: Male caregivers are mobilized in groups and sensitized on the benefits of being involved in child care and demystify negative narratives on male caregiving. Additionally, they are sensitized on harmful impact of GBV on the physical and mental wellbeing of female caregiver and children and equipped with steps on practicing positive masculinity to foster a responsive MHPSS environment. Couples are also engaged in dialogues to promote joint parenting.

Key findings: 1. Enhanced caregiver relations. 2. Increased male caregiver involvement in childcare. 3. Enhanced household MHPSS environment

Conclusion: Male caregiver involvement is vital for holistic child development. Male caregivers are vital actors in fostering the MHPSS wellbeing of female caregivers. Dialogue process with men work better in fostering their involvement in childcare

Recommendations: ECD programming should integrate interventions targeting male caregivers

Parallel Session 1.10: Community-driven systems change to improve ECD: A case of three interrelated interventions.

Carolyn Ng'eny and Dua Kazimoto, Firelight Foundation, Malawi and Zambia: *Community-driven systems change – a transformative and sustainable approach to improving early childhood development in eastern and southern Africa*

Firelight is a multi-donor fund that supports catalytic community-based organizations in eastern and southern Africa that work with their communities to realize shared visions of sustainable change and true potential for children and youth. Since 2020, working with 13 community-based organizations (CBO) to mobilize community-driven systems change (CDSC) for early childhood development (ECD) in Malawi and Zambia.

Objectives of the approach include: 1. Strengthening CBO and community capacity in local and global ECD knowledge and practices. 2. Supporting CBOs and communities to take a system thinking approach and strengthening their capacity to engage and collaborate strategically with different stakeholders. 4. Communities understanding key issues facing children in their community, and address underlying root causes. 5. Children experiencing environments and interactions that help them thrive and reach their developmental potential

Key strategies include participatory learning and planning, capacity strengthening and community-led planning, implementation and evaluation of systems change efforts.

A 2023 midline evaluation found considerable success in the implementation of the community driven systems change approach and community-led methods to improve environments and interactions for children.

In conclusion, the approach emphasizes community involvement and ownership, importance of meaningfully partnering with key stakeholders, and working on root causes for sustainable change. Firelight's recommends allowing communities to determine their own vision for their children, not imposing external perspectives and strengthening cultural values and community capacity.

Kenneth Mumma, Davie Mphepo and Gift Phedulo, Children of Hope Organization, Malawi: *Communities coming together to raise their children: A case study of community-driven systems change for ECD in Malawi*

Introduction: Children of Hope Organization (COHO) started in 2017 to bring holistic growth of young children in Mulanje District in Malawi. Our goal is for children to live free from barriers affecting their development.

Purpose: COHO uses community-driven systems change (CDSC) approach in remote parts of Malawi to address issues affecting young children for example inadequate health care, malnutrition, and limited access to ECD centres and services.

Implementation Process: COHO mobilizes community-led action to identify and address the root causes affecting ECD by: training ECD center caregivers, improving access to learning spaces, working with the community to improve learning environment, and improving household livelihoods.

Outcomes: As a result of the community-led approach, stakeholders report decreases in child malnutrition and sickness rates, increased financial independence among mothers, and increased enrolment in ECD centers. There has been a transformative shift in how different stakeholders see their role in supporting ECD e.g. increased awareness and reporting child abuse cases, and improved livelihoods.

A 2023 midline study conducted in partnership with Firelight Foundation provides additional evidence of the effectiveness of the CDSC approach.

Conclusions: Community-driven systems change approach fosters community collaboration and collective action to improve systemic issues for early childhood development in local communities.

Recommendations

1. Involving all relevant stakeholders is crucial for successful implementation and sustainability.

2. Involving community stakeholders in decision making promotes ownership in project activities.
3. Approach leads to sustainable development because it leverages on existing structures and programs.

Jonathan Mungandi and Eric Njekwa, Maranatha Grassroots Institute, Zambia: Creating stronger community systems to support ECD over the long-term: A case study of community-driven systems change for ECD in Zambia

Introduction: Maranatha Grassroots Institute was founded in 2005 to help people help themselves and others. The organization offers skills training for Early Childhood Development offers counselling and other AIDS services. Maranatha runs a community driven system change (CDSC) for ECD initiative in Kaoma district, Zambia.

Purpose: Using the community driven system change approach, Maranatha mobilizes community-led action to improve early childhood development (ECD) outcomes for young children.

Implementation Process. Maranatha works with communities to surface root causes of issues facing young children in their communities. Collaborate with various stakeholders to support vulnerable households with undernourished children, supporting parents with income generation skills, training parents around responsive caregiving, and improve learning environment.

Outcomes: Children are experiencing better environments and outcomes through fewer sicknesses, increased family income security, father involvement and nutritious food intake.

A 2023 midline study conducted in partnership with Firelight Foundation provides additional evidence of the effectiveness of the CDSC approach.

Conclusions: Community-driven systems change approach and the evidence from the 2023 Midline study demonstrate stronger community systems, including collaboration between government, civil society, and community leaders, to support ECD outcomes over the long-term.

Recommendations: 1. Embrace Community Driven Systems Change from the beginning to promote sustainability of interventions. 2. Community Driven Systems Change requires consistency, persistence, flexibility and patience because it is a slow and non-linear process. 3. Involve all relevant stakeholders from start to end so that there's genuine ownership of the program

Parallel Session 2.1: Assessing Integration and Delivery of ECD Services in Multiple Settings

Debjcet Sen, PATH, Ethiopia: *Assessing early childhood development (ECD) integration into primary health care in Addis Ababa, Ethiopia*

Introduction/Background: In 2022–early 2023, as part of PHC reconstruction in six woredas of Ethiopia's Amhara Region, PATH supported government to train facility-level providers to set up play areas in waiting areas, provide developmental monitoring and counseling, and screen for perinatal depression. Health extension workers (HEWs) were trained to conduct mother-baby support groups (MBSGs) for pregnant women and young mothers. Over 700 health providers from 99 facilities were trained.

Objectives/Purpose: Assess feasibility and quality of ECD and MMH integration in post-conflict PHC reconstruction.

Methodology/Implementation process: Routine monitoring data was analyzed, depressive symptoms monitored using Patient Health Questionnaire-9, a survey administered to MBSG participants, and interviews conducted with providers and caregivers.

Key findings/Outcomes: Over 100,000 under-five children were developmentally monitored and 1,310 identified with suspected developmental delays. Half the facilities established play areas. 16,222 women were screened for perinatal depression and 218 confirmed with mild depression and linked to MBSGs. MBSG participation was associated with reduction in mild depression: 44% of women at start to 4% at finish. MBSG participant knowledge on supporting ECD and nutrition increased, with survey scores rising from 31% to 61%. Several facilities and woreda offices added these interventions to performance monitoring and supervision checklists.

Conclusions: ECD and MMH integration in PHC reconstruction is feasible and improves caregiver MMH.

Recommendations: ECD and MMH interventions should always be included into post-emergency PHC reconstruction efforts.

Julius Rosenhan, D-tree, Zanzibar, Tanzania: *Measuring the effect of a community health worker program delivering ECD-services on nurturing care targeting children and caregivers in Zanzibar*

Introduction: In 2019, a baseline household survey in Zanzibar revealed gaps in optimal home environments and early childhood development (ECD). With the introduction of Jamii ni Afya, a community health worker program, ECD-services are delivered to children and caregivers.

Objective: At endline in 2023, the effect of Jamii ni Afya, were assessed to see caregiver knowledge and child health in Zanzibar have improved.

Methodology: In 2023, the endline survey to determine the effect of the community health program on the health and development status of children in Zanzibar was conducted. Assessing 568 randomly sampled households, stratified by exposure to the intervention, generated nationally representative findings.

Key findings: While some areas did not show much improvement (caregiver knowledge), several early childhood indicators improved significantly, like play activities, including reading books, telling stories, and singing songs, as well as the developmental outcomes scores (CREDI) of children aged 18-29 in Zanzibar. The baseline and endline household surveys shed light on the progress of early childhood development in Zanzibar, indicating a contribution of CHWs.

Conclusion: Community health workers are in a good position to deliver ECD-services to caregivers and children, contributing to the agenda of the nurturing care framework and deliver ECD through an integrated primary health care approach.

Recommendation: While more research needs to be conducted and evidence produced, stakeholders should consider integrating ECD-services as part of community health worker programs.

Neema Lazaro, Doctors with Africa CUAMM, Tanzania: *A necessary interplay: the health system as a privileged entry point for the delivery of ECD interventions*

Key objectives: The presentation of Doctors with Africa CUAMM experience in ECD projects in Tanzania intends to show the advantages of combining the provision of health and ECD services. Indeed, using multiple entry points, beyond the education sector, is key to expanding the reach and impact of ECD interventions.

Methodology/implementation process: The interventions included: the clinical management of severe acute malnutrition, training health care workers, community sensitization, ECD corners creation at health facility level and at community level for children not yet schooled.

Key Findings/Results/Outcomes/Learnings Implications of Findings for Policy and Action: The integration of health-ECD efforts showed to be feasible, affordable and effective in terms of improved health outcomes for children, early detection of most vulnerable cases, continuum of care, outreach and community's awareness.

Implications of findings for policy and action: These insights may encourage policymakers to enhance the health-ECD nexus, fostering a multisectorial approach to ECD and integration of services.

Dr. Given Hapunda, FHI 360, Rwanda and Zambia: Supporting workforce to implement & scale playful parenting.

Key objectives. To investigate the success of playful parenting programs in building the capacity of the workforce providing service delivery to caregivers at scale by examining: a) the composition of the workforce, b) their own perspectives on their capacity, c) their motivation, and d) the challenges they face.

Methodology/implementation process. Methods include a standardized knowledge assessment pre and post training, as well as a survey administered via phone 3 months post training to capture their level of comfort and knowledge with playful parenting principles, the support and supervision they receive, and their experiences in service delivery to caregivers. This is coupled with observations of home visits and group sessions using tools like MDAT, as well as in-depth interviews with a sub-sample

of providers.

Key findings/results/outcomes/learnings. Data show that the volunteer workforce face challenges sustaining the program following program closeout in Rwanda and home visit content often focuses on topics outside of play & stimulation. In Zambia, CBVs have struggled with keeping up their load of family visits, and at least half of them is not receiving supervision and oversight on a regular basis. A group session delivery modality currently being rolled out offers possibilities for addressing workload challenges and reaching more families.

Implications of findings for policy and action. Workforce challenges around reaching families via home visits and needs around supervision raise important questions for system actors on what it takes to sustain and scale playful parenting.

Parallel Session 2.2: Building a resilient ECD workforce

Alida Ndayizeye, World Bank, Burundi, Ethiopia, Morocco, North Macedonia, and Brazil: *Supporting governments to promote human capital formation: learning from Early Years Fellows in 5 countries.*

Strengthening human capital in countries requires significant investments in the field of early childhood, which represents the foundation on which the future of the country will be built. Burundi currently has more than 12 million inhabitants and this number could reach 20 million by 2050. Young children (under the age of eight) represent more than a quarter of this population, or 2.4 million. Investments targeting this age group could change the situation and get the country out of the vicious circle of poverty. Act early and effectively through the implementation of interventions and programs in nutrition, health, stimulation and early childhood care is the key to successfully increasing human capital.

Moises Mabunda, Nelson Mutsando², Christian Ukundineza³, Henrietta Teh⁴, Ilse Flink¹, Christina Avildsen¹ & Renee Perez Right to Play Rwanda, Three Stones International, Rwanda; Right to Play Mozambique, Right to Play Global and Cambridge Education: *Lessons learnt from implementing a Gender-Responsive Play-based teacher training in Early Childhood Education in Rwanda and Mozambique*

Introduction: In Rwanda and Mozambique, few children have access to quality Early Childhood Education (ECE) and teachers lack the skills to adequately prepare children for primary school.

Purpose: The GREAT-ECE project aimed to generate evidence on the effects of a gender-responsive play-based training for pre-primary teachers on child and classroom outcomes in Rwanda and Mozambique. Methodology: Action research cycles were applied to adapt an existing primary teacher training for use in ECE. Training effects were assessed with a Randomized Trial using the International Development and Early Learning Assessment (IDELA) complemented with Focus Group Discussions with teachers and in-depth interviews with school leaders from intervention schools. IDELA results from a total of N=455 children in Rwanda and N=361 in Mozambique were assessed longitudinally using a Difference in Difference analysis. Key findings/outcomes: In Mozambique, the training led to sharp improvements in IDELA child and classroom outcomes, except for motor development. In Rwanda, control and intervention schools showed similar progress and no effects were found on any of the IDELA outcomes. In both countries, qualitative findings showed that teachers benefitted from the training in multiple ways and that parental engagement in child learning had improved. Conclusions & recommendations: Findings show that context strongly determines teacher training effects and that this needs to be factored in when planning for and scaling teacher professional development in Rwanda and Mozambique. In particular, classroom characteristics like teacher to student ratio, level of parent engagement, access to resources, and prior access to training are important factors to consider.

Júlio Mutemba, REPSI (Regional Psychosocial Support Initiative), Mozambique: *Endline study result of project for strengthening caregivers' mental health and responsive caregiving skills to improve early*

childhood development in Mozambique. mental health and responsive caregiving capacities of caregivers for improved ECD in Mozambique.

REPSSI, in collaboration with local partners and supported by the Hilton Foundation, implemented an intervention aimed at improving the capacity of mothers and other caregivers to provide responsive and nurturing caregiving to children aged 0 to 5 years in Mozambique for improved ECD.

This study has considered the levels of psychosocial wellbeing (including resilience, mental health, and self-esteem), SRHR access, parental stress levels, safety, and experiences of IPV of mothers in this project at a baseline and endline level.

In this research, we used the collection and quantitative analysis of data with a total of 278 baseline and endline responses from females in Gaza province (92, 33%) and Sofala province (186, 67%).

Differences between respondents from Gaza and Sofala are also highlighted in this research. The results of this study show significant improvements in mother's psychosocial wellbeing. Overall, 62% of respondents showed an increase in resilience enablers, 47% showed a decrease in depression, and 49% showed an increase in self-esteem scores from baseline to endline. Levels of parental stress also decreased significantly with more than half of the mothers (54%) showing decreased parental stress after the intervention compared to before.

The overall score of the project was positive with a percentage of 83% and with this result the conclusions of this study can be used to improve the next intervention model of the project.

Marinda Neethling, North-West University, South Africa: *Professionalising ECCE in South Africa is not child's play! Determining skills gaps and implications for future sector development*

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Conclusions & recommendations: This study shows that context strongly determines teacher training effects. In particular, classroom characteristics like teacher to student ratio, level of parent engagement, access to resources, and prior access to training are important factors to consider when planning for teacher professional development.

Parallel Session 2.3: ECD interventions focusing on experiences from the field

Jemal Abdulkadir Kelilo, Save the Children, Ethiopia: *Facilitating Children's Learning in an Emergency Context- Ethiopia*

In Ethiopia, millions of children excluded from education because of conflict and drought. In response, USAID/LEGO Foundation Childhood Development Activity (CDA) provides opportunities for preschool aged young children to participate in quality play-based programming that increases overall wellbeing, improves learning outcomes and holistic development skills. Consistent with this, the article shares CDA's experience of enhancing emergency affected children's readiness for primary school.

Jointly with government, partners, and the community, the Activity recruited facilitators, most of which IDPs themselves, and trained them to create stimulating and stress-sensitive learning environments. Working with facilitators, District education offices, IDP committees, and the community at large, the Activity enrolled 13,052 children in an 8-week accelerated school readiness (ASR) play-based learning program across five conflict and drought affected regions. Providing stationery materials, high Energy biscuit, and other child-friendly services in all the 239 temporary learning centers helped to ensure children's maximum benefit from quality play-based instruction. To increase children's access to early learning at home, the Activity implemented Emergent Literacy and Math (ELM) and positive parenting through monthly sessions to 2,520 parents who in-turn reached 2,618 preschool-children.

As a result, 12,500 preschoolers (aged 6+ years) completed the ASR program with 10,700 (85.6%) transitioning to primary school. The Activity ensured timely implementation, quality, and sustainability through collaboration with stakeholders.

Strategic engagement with government coupled with effective community mobilization establishes the conditions for the successful implementation of ECD programs in emergency contexts.

Charity Munyi, World vision Kenya, Kenya: *Preparing Early grade learners for transition to primary school*

Introduction: World Vision's aspiration for all children is for them to be "educated for life," from birth all the way through and beyond adolescence. The *Learning Roots* programme is designed to meet the development and learning needs of children, from ages three through six, preparing them for a successful transition to primary school. All components of *Learning Roots* offer support for the most vulnerable children with special attention given to inclusion.

As young children actively develop, a continuum of actors—including parents, caregivers, teachers, schools, community members, and policy makers—hold influence. Therefore, our interventions are underpinned by a view of the complete environment of the child, to include and empower family, community and society, and strengthen these systems to establish the strongest foundation for their children's futures.

Methodology: Engages parents and caregivers, who are children's first educators and protectors, by: Raising their awareness on the importance of development in the early years, enhancing their competencies to support the social and emotional development of their young children, as well as early reading and numeracy skills through play, empowering them to be involved in community-based efforts to ensure better local services for learning

Strengthens local Early Childhood Development centres by: Training teachers on effective nurturing and inclusive practices for child development; Enhancing professional development systems that support teachers' continuous learning and improvement in play-based learning practices; Creating safe, play-based, stimulating environments with age- and context-appropriate activities and materials.

Works to strengthen county and national government ECD service delivery systems by: Fostering links and partnerships between the formal sector and the community; Supporting the design and implementation of policies that enable quality pre-primary education; Promoting the integration of services to provide holistic support for children in the early years.

Key Findings: After participating in the preschool program for 1 year, there was significant positive improvement in children's acquisition of age-appropriate development competences including fine and gross motor skills, social-emotional, cognitive and language skills as follows: Increased preschool learner's enrollment to 29,716; Increase in community led school feeding initiatives by 62% from 2%; 5.4 % of preschool age children meet their developmental milestones; 48.1% of households with a positive perception of inclusive education; 113 pre-school classrooms constructed by county governments; 978 teachers employed by county governments; 478 school management committees formed and trained on their roles & responsibilities; 298 out of 488 preschools have savings and transformation groups for

economic empowerment and 804 teachers trained on learning roots & inclusion to complement the competence-based curriculum.

Notably, the duration of parents' and caregivers' engagement and interaction with children significantly improved as well as their involvement in the education of their children since they are now involved in monthly meeting for develop teaching and learning materials using local resources.

Moreover, gains from the implementation of the model include community led school feeding initiatives, mobilization of funds to support construction of learning spaces for children, development of teaching & learning materials, increase in enrollment of children since learning is through play making it more interactive and interesting ,economic empowerment of preschool parents through enrollment in Savings for transformation groups and trained school management committees who are able to resource mobilize to improve the learning environment for their children.

Implications of findings for policy and action: *Learning Roots* interventions are geared towards ensuring complete transformation of the learning environment of the child, to include and empower family, community and society, and strengthen these systems to establish the strongest foundation for their children's futures. It is an evidence-based model where all its components offer support for the most vulnerable children with special attention to inclusion, preparing them for a successful transition to primary school.

World Vision partners with over 12 county governments in Kenya to support implementation, monitoring and supervision of the model's integration into the approved Curriculum. The county government department of education prioritizes capacity building of school management committees on their roles and responsibilities ensuring sustainable development of preschools. For sustainability, counties where WV is implementing the model have ensured that all teachers employed by the county government embrace the implementation of learning roots in all preschools.

Maggie Kuchonde, University of Malawi, Malawi: *Community involvement in improving literacy skills*

Introduction/Background: Improving early grade reading is a global agenda seen through Sustainable Development Goal (SDG) 4.6. However, this remains a challenge in Africa, including Malawi where 0.2% of grade 2 learners qualified as readers (USAID, 2010). This situation is aggravated by many factors including poor early learning opportunities and less parental involvement in literacy activities. This paper presents findings of a case-study conducted in Dedza district, Malawi that explored use of local literacy materials in Community Childcare Centers (CBCCs).

Objectives/purpose: The study aimed at improving early literacy skills amongst preschoolers by empowering parents, caregivers and communities to participate in developing local literacy materials.

Methodology: The study employed a mixed methodology and purposefully sampled Dedza district where 49% of children aged 5 were classified as illiterate (Population and Housing Census, 2008). Participants were selected by snowballing. Data were collected using checklist, interview and questionnaires and analyzed by themes and descriptive statistics.

Key findings/outcomes: The study found that; local literacy materials found at home were less frequently used in CBCCs; communities were not empowered to develop these materials and support book reading practices at home.

Conclusions: Early literacy programs that empower communities and value local literacy resources create opportunities among children to develop emergent literacies for formal reading.

Recommendations: The study calls for: inclusion of home literacy practices into CBCC curriculum; capacity building for caregivers and parents to develop quality and sustainable local literacy materials.

Antony Mbithi, Gael Bidzogo Ekobono, and Tanzina Quddus Dina, Early Years Fellows, World Bank: *Guidance Note on Home Based Childcare (HBC) for Low-income Communities*

Background: Over 40% of children below primary school entry age worldwide lack access to childcare. In low and lower-middle-income countries (LMICs), HBC is a viable childcare option for low-income families, providing a more affordable, flexible, and culturally appropriate solution. It includes both registered and unregistered services typically provided in caregivers' homes. HBC often remains unrecognized and unsupported, which compromises the quality of care and can put children's safety at risk. Objective: This guidance note seeks to address these challenges by offering strategies aimed at enhancing the quality, affordability, and sustainability of HBC services. Methodology: A review of existing literature on HBC models, an in-depth analysis of HBC implementations in Bangladesh, Kenya, and Colombia, and Key Informant Interviews. Key findings: Government support is critical to formalize HBCs and provide quality assurance. Community engagement can create a resilient support system for children and providers. HBCs need diverse funding sources to withstand shocks. Recommendations: HBC is a public good that should be part of national policies, programs, and financing. HBC providers need support systems and enabling environments. Conclusions: Sustainable support, financing, and an enabling environment are essential for HBC providers. Professional development and nutritional support for children can strengthen practitioner competencies, enhance child development outcomes, and increase female labor force participation and productivity. Further research is needed to identify context specific financing models to improve quality affordable services.

Parallel Session 2.4: Strengthening Policy & Systems for Delivering ECD

Frank Samson, Children in Crossfire, Tanzania: Tanzania: *Catalysing ECD Policy to Practice in Tanzania*

Introduction: Globally, implementing Policy to Practice is challenging especially multisectoral contexts like ECD. Mtoto Kwanza Project conceptualised to catalyse implementation of Tanzania's National Multisectoral ECD Programme (NMECDP).

Objectives: To demonstrate a Project catalysing Programme roll-out, and optimising the role of civil society and local voices to influence implementation.

Implementation: Project strategically aligned to support NMECDP institutional framework. ECD national network (TECDEN) spearheading non-state engagement with NMECDP processes. Public-private collaboration mirrored sub-nationally via network of local CSOs in all 26 regions. Network of journalists specializing in ECD reporting from all 26 regions.

Key findings: 1. Multisectoral and multistakeholder engagement facilitated set-up of NMECDP institutional framework. 2. Landmark ECD Coordination Guideline facilitates improved multisectoral coordination, monitoring and implementation. 3. NMECDP launched across all 26 mainland regions and dissemination to all 180 councils. 4. TECDEN provides focal point for channeling various initiatives to support NMECDP delivery. 5. Civil society engagement supports resource mobilisation and integrated ECD approach. 6. Local voices amplified through strategic media approach

Conclusion: Strategic value of a strong ECD national network for impactful engagement of civil society. Strategic engagement of media promotes local voices. Legitimacy of positioning a Project to catalyse a Programme.

Recommendations: 1. Conceptualise for scale from the outset of Programme initiatives, including mutually reinforcing national and subnational approaches. 2. Strategically invest in capacity and positioning of civil society actors to collaborate with Government, to leverage resources and promote multisectoral approach. 3. Projects to be agile and adaptive to capitalise on windows of opportunity and respond to shifting nuances of a dynamic political economy underlying multisectoral ECD

Catherine N. Githae, Men Engage Kenya Network (MENKEN) – *Male Engagement as a key advocacy ingredient*

Introduction: Legal reforms on ECD have been emphasized over the years mostly from an education and childcare standpoint. This has had a negative impact on the progress of the various reform has fueled a wider implementation gap in the existing policy framework in most countries. According to Women,

Business and the Law 2024 Report by Washington, DC: World Bank, most countries score poorly for childcare laws. Women spend an average of 2.4 more hours a day on unpaid care work than men much of it on the care of children. Expanding access to childcare tends to increase women's participation in the labor force by about 1 percentage point initially and the effect more than doubles within five years. Today, only 78 out of the 190 economies provide some financial or tax support for parents with young children. Only 62 economies have quality standards governing childcare services, without which women might think twice about going to work while they have children in their care. This data presents ready ECD policy reform backing from the standpoint of increased male engagement in parenting that would otherwise not be in the mainstream reform agenda. There is therefore a need for an examination of the interconnectedness of various development issues such as male engagement, triple threat, paternity leave that present unconventional opportunities for ECD policy reforms. This presentation will thus highlight emerging opportunities where male engagement can be utilized to catalyze policy advocacy efforts on ECD. Objective: To highlight new areas where male engagement can augment ECD policy advocacy.

Methodology/Implementation Process: Lessons from the protection against Domestic Violence Act in Kenya reforms and paternity leave reflections. Key Findings/Outcomes: Male engagement presents numerous opportunities for the ECD agenda. The gender gap for women in the workplace and paternity leave reforms are among policy reform agenda that have male engagement at the heart of not just the problem but also the solution. Such development agenda present new policy advocacy areas for ECD country level but also at the regional level. Conclusion and Recommendations: Equal opportunity reforms in business and the law are an opportunity where male engagement can contribute to accelerated progress toward ECD. Policy makers and implementers need to collaborate to tap every opportunity that male engagement door opens until Early Childhood Development (ECD) become a priority policy area in every development area.

Farida Athumani Katunzi, Ifakara Health Institute, Tanzania: *Integration of ECD/Nurturing Care Components into Sector Policies and Services Guidelines.*

Globally, there has been a push to include principles of Early Childhood Development (ECD) in policy frameworks and guidelines, ensuring that the needs of young children are accounted for in government plans. In Tanzania, the National Multisectoral Early Childhood Development Program (NM-ECDP) shows progress, yet gaps persist in ministries' ECD policies. These policies often overlook crucial aspects of child care such as health, nutrition, protection, and early learning. Our study evaluated Tanzanian government policies related to ECD and the Nurturing Care Framework (NCF), using the Government e-respiratory website. A total of 57 national policies were reviewed, including 7 national policies, 5 National Strategy plans, 4 Action plans, and 41 service guidelines, meeting inclusion criteria in both Swahili and English. Additionally, qualitative in-depth interviews were conducted with stakeholders at national, regional, council, and community levels. Data analysis focused on NCF components, revealing neglect of responsive caregiving, early learning, and safety/security, especially for children aged 0–3 and marginalized groups. Tanzania lacks a comprehensive nurturing care policy, leading to uncertainty regarding its oversight ministry. Policy discussions must include regional and council levels, advocating for comprehensive policies covering all components and vulnerable groups. This highlights the urgent need for cohesive, inclusive ECD policymaking and implementation in Tanzania.

Nevine El Nahass, Magreth Mziray, and Ayah Jarrah, Early Years Fellows, World Bank, Egypt, Jordan and Tanzania: Redefining early childhood education environments: Guidance note on designing and implementing flexible spaces in Low- and Middle-Income Countries (LMICs).

Background: Quality early learning environments stimulate playful learning and support responsive educator and peer interactions. Flexible spaces refer to indoor and outdoor learning spaces that are adaptable or responsive. These spaces can be arranged according to different teaching and learning pedagogies and

designed to allow various teaching methods including child-centered and educator-directed learning. Investments in flexible learning spaces provide low-resource countries with cost-effective ways to enhance the pedagogical practices and children's learning. Objective: The guidance note provides practical strategies in designing flexible spaces within ECE settings, particularly in LMICs. Methodology: A review of existing literature on flexible spaces, an in-depth analysis of early learning implementation in Egypt, Jordan and Tanzania, and Key Informant Interviews. Key findings: Within structural quality, flexible spaces can improve adaptability of the learning space for large and small group activities, eating and naptime, as well as learning material design and storage for children's accessibility. Flexible spaces can strengthen process quality by improving interactions between educators and children and pedagogically intentional use of materials for age-appropriate activities throughout the daily routine. Recommendations: The guidance note provides steps to assess an early learning setting to identify options to make spaces more flexible; how to train educators and involve parents/community members in materials creation and set up; and how to monitor quality through observation and coaching.

Parallel Session 2.5: Strengthening Policy & Systems for Delivering ECD

Dr. Teresa Mwoma, Benard Ochuka and Benter Owino, Early Childhood Development Network for Kenya (ECDNeK), Kenya Strengthening ECD Systems in Kenya: A Collaborative Research Approach

Introduction: The Early Childhood Development Network for Kenya, in partnership with Mathematica, has been implementing an ECD Systems Monitoring and Evaluation project since 2022. This was a Conrad and Hilton funded initiative. The aim was to assess progress of systems-level components of the Hilton's 2020-2025 strategy (S25). Objective: To develop an actionable ECD systems measurement framework and facilitate collection of monitoring and evaluation data on ECD systems progress related to policy, governance, multi-sectoral coordination and financing. Methodology: A mixed-methods approach was utilized, involving analysis of secondary quantitative data targeting the 47 counties with primary qualitative insights gathered through KIIs and FGDs conducted in four representative counties. Findings: Kenya developed/reviewed four ECD policies. Ten counties collect nurturing care data. 37,077 teachers in 20 counties were trained on qualifications and CBC implementation. 18,093 health workers in 19 counties were trained on ECD. Only 47% of counties had costed ECD activities for three target departments. Department of health budgeting lacks specific allocations for children below five. Conclusion: Advocating for an enhanced governance commitment, comprehensive national policy reforms, strengthened multi-sectoral coordination, and a structured financing mechanism with ring fenced funds for ECD is imperative to systematically prioritize ECD at both national and county levels. Recommendation: County Governments must enhance support for nurturing-care by prioritizing preprimary teacher and healthcare worker training, and allocate resources accordingly

Santos Alfredo and Dr. Francisco Mbofana, Early Childhood Development Systems in Mozambique: *Findings on key ECD indicators*

The key objectives of this presentation is to present qualitative and quantitative data that assesses the current status and recent progress on measures of ECD systems performance in Mozambique. The study, which also included partners in Kenya and Tanzania, used a mixed methods approach. Each study included three main components (1) document review; (2) collection of quantitative data from government sources; and (3) qualitative data collection. We find that Kenya, Mozambique, and Tanzania are making incremental progress in integrating nurturing care components into policies and increasing funding streams that support ECD. However, coordination among the sectors responsible for ECD activities and subnational governance of these activities, as well as fragmented, unstable financing are gaps that may prevent these changes from reaching the community level. Improved coordination among the sectors responsible for ECD activities and

subnational governance of these activities are critical to ensuring that nurturing care reaches all children 0-3 years of age.

Dr. Ester Elisaria, and Ms. Farida Katunzi, Strengthening Early Childhood Development/Nurturing Care Systems Monitoring and Evaluation (M&E) in Tanzania: Assessment of the barriers and opportunities for ECDE System Performance Strengthening in Tanzania.

Parallel Session 3.1: Championing holistic and inclusive ECCE using Play based ECD approaches

Rose Opiyo, Masinde Muliro University of Science and Technology, Kenya: *Inclusive Home-Based Early Learning Project in Marginalized communities in Kenya is Ready for Scale: What evidence Exists?*

Grace Matlhape, SmartStart, South Africa: *Investing in home and community-based early learning programmes as a strategy for quality access.*

Introduction: In South Africa, the early learning access gap for 3–5-year-olds amounts to 1.3 million children, and poor children constitute about two-thirds. The government’s goal is to achieve universal access to early childhood development (ECD) by 2030.

Objectives: To examine and demonstrate the crucial role of home and community-based (HCB) early learning programmes (ELPs) in achieving population-level quality access.

Methodology/implementation: Since 2015, SmartStart has rapidly scaled up HCB ELPs. Using a social franchise model, practitioners are trained and licensed to deliver an evidence-based programme for 3–5 year-olds supported by Coaches. The model is based on a literature review on the ingredients of quality in ELPs. A child outcomes evaluation was conducted in 2018.

Findings/outcomes: The components of quality found to mediate child outcomes – such as nurture, routines and dosage – can be supported effectively in HCB settings. These settings more effectively leverage existing community assets. Through an asset-based approach that focuses on HCB settings, SmartStart has grown to over 9000 ELPs reaching 75,000 children in low-income communities.

An evaluation of SmartStart child outcomes using the Early Learning Outcomes Measure, found that, over eight months, the proportion of children ‘Achieving the Standard’ increased from 32% of children to 62%.

Conclusion: Equitable access to quality ELPs in low-income communities is most quickly achieved through expansion in HCB settings.

Recommendations: Reforms towards more inclusive regulatory and funding regimes are needed to support HCB ELPs; alongside support for at-scale delivery systems that maximise community assets.

Marc Aguirre, Hope Worldwide South Africa, South Africa: *Comparing Digital vs Face-to-face Efficacy of Delivery Models in ECD Parenting programmes: The Caregiver Learning through Play (CLTP) programme example in South Africa*

Munmun Chowdhury, Ahmed Chowdhury, BRAC International, Uganda: *BRAC Green Play Lab Concept: Lessons in Fostering Climate-Adaptive Early Childhood Development*

The BRAC Green Play Lab initiative, originating in Bangladesh and expanded to Sierra Leone, the Philippines, and Uganda, represents a significant advancement in promoting climate-friendly early childhood development. The primary objective of this initiative is to cultivate climate-friendly awareness and sustainable practices for enduring environmental sustainability within play labs and the community.

Methodologically, the Green Play Labs initiative implies co-creation workshops involving parents, grandparents, and children play a central role in fostering empathy and community ownership. The workshop includes design exercises for indoor and outdoor play lab setups as well. Also, this initiative refers to environmental curriculum integration, recycled and culturally relevant play materials, and hands-on gardening activities. Continuous monitoring and stakeholder collaboration are emphasized for sustained impact.

Key findings demonstrate active community involvement in designing green spaces, planting trees, and

establishing gardens to support school feeding programs. This initiative fosters a sense of ownership and commitment to sustainability among community members while enriching children's connection with nature through educational integration and hands-on activities.

In conclusion, an essential aspect of the Green Play Lab initiative is centered on instilling love, respect, and empathy for the environment among early childhood children. Also, it showcases its potential for promoting climate-resilient early childhood development globally. Grounded in community engagement and co-creation, the initiative fosters sustainable practices and environmental awareness, empowering communities to address climate challenges while nurturing children's holistic development. Ongoing monitoring and collaboration are crucial for ensuring lasting environmental sustainability and maximizing impact.

Parallel Session 3.2: ECD Service Delivery in the era of AI, Digital Tech and Media

Chiku Lweno, Children in Crossfire Tanzania, Tanzania: *Innovative media partnership to scale ECD Policy implementation in Tanzania*

Background: The launch of Tanzania's National Multisectoral ECD Programme (NMECDP) called for pioneering collaboration between the Government, Non-Governmental Organisations, and the Media to harness the transformative potential of the NMECDP.

Objectives: To demonstrate the unique potential of strategically engaging media to catalyse demand and improve access to ECD services nationwide.

Implementation process: Selected 'ECD champion journalists' from all 26 Tanzania mainland regions, received training in the Science of ECD and mentorship in quality journalism. This improved reporting on all ECD components related to NMECDP implementation. Quarterly live shows airing topical ECD discussions on community radios nationwide. Stories assessed for quality against a rigorous rubric tailored to different media formats, and placing emphasis on local calls to action.

Outcomes: ECD champion journalists reported >1,500 media stories in two years from across all regions and spanning all nurturing care components. 75% of stories met high quality standards. Listener engagement in live community radio shows was high, and increased action taken locally to improve ECD services.

Conclusion: The strategic engagement of media, especially community radio and online blogs, can effectively catalyse policy-to-practice and national-to-local transitions for quality ECD services. Platforms for promoting local voices create higher demand and better accountability that uniquely supports local implementation of ECD policy nationwide.

Recommendations

- Media should be considered an important stakeholder in emerging ECD national discourse.
- Media engagement to support ECD policy-to-practice should consider - optimising the scale of media coverage, the type of media with highest penetration in the target community, and rigour invested in quality reporting.
- To optimise impactful ECD media, focus reporting on community actions and system asks across governance, workforce, and financing.

John Matiko Machonchoryo, UNICEF Tanzania: *Mama na Mwana Digital Client Feedback Mechanism - Experiences from Implementation Across 5 Regions in Tanzania.*

Aminah Birungi, Muni University, Uganda: *Digital Storytelling and creativity in Visual Arts Development among preschool children in Katabi Town Council Wakiso District*

Dr. Janine Händel, CEO, Roger Federer Foundation, Six Southern African Countries: – Early Learning Kiosk

Parallel Session 3.3: Innovative ideas to improve access to quality ECD

Alison Naftalin, Kidogo, Lively Minds and Smart Start, Ghana, Kenya, South Africa, Uganda: Learnings from three innovations revolutionising ECD in Kenya, South Africa & Uganda

The Ghana Education Service and Mayuge District in Uganda have adopted and scaled the Lively Minds ECD programme. This tackles the mindset barriers and gender norms that are common in rural families and empowers marginalised parents to provide quality ECCE using their own skills and resources. Existing community trainers (kindergarten teachers in Ghana, and VHTs in Uganda), are trained to train 40 Mother per community to run educational play schemes for all the preschoolers in the community, and to provide playful & learning care at home. The programme currently operates in 2900 rural communities, and has empowered over 102,000 parents who teach over 220,00 children each year. An RCT showed that 93% of mothers in the programme are illiterate. Yet they improved child learning outcomes by the equivalent of 1 extra year of school, reduced malnutrition and improved socio-emotional skills. And the programme is challenging gender and parenting norms. This presentation will show how utilising parents is an affordable, effective and scalable way to either supplement pre-primary provision, or to provide pre-primary access where none exists.

Gloria Nkosi, HOPE worldwide SA, South Africa: *Strengthening Early Childhood Development (ECD) Centers in South Africa: A National Network & Partnership Approach*

Lucy Haule, D-tree, Zanzibar, Tanzania: *Improving the quality of community health volunteers delivering early childhood development services in Zanzibar*

Karungari Wachira, Tiny Totos, Kenya and Ethiopia: *Lessons from scaling a proven Kenyan market based childcare franchise into an Ethiopian market.*

Parallel Session 3.4: Sustainability in ECCE: Taking impactful ECCE interventions to scale

Ester Elisaria, Thrive, Tanzania: *Using evidence and co-design to develop effective scalable and sustainable ECD model(s) in Tanzania*

Elizabeth Gupta, BRAC Enterprise Tanzania Limited (BETL) Tanzania: *Can low-cost high quality ECD service work at Scale?*

This study explores the feasibility of implementing low-cost, high-quality ECD services at scale in Tanzania. The research is guided by two key objectives: understanding the barriers hindering the scaling-up process and assessing the benefits of standardized ECD provision on a larger scale. Implemented by BETL the study prototypes two distinct models for large-scale and sustainable ECD services in Dar es Salaam. The pilot phase commenced in 2020, with a subsequent phase launched in 2024. Preliminary findings reveal both challenges and benefits associated with scaling up these models. In comparison to independent informal owner-operator service providers, the study raises critical questions about the commercial viability of operating at scale. Challenges include the high costs associated with meeting regulatory standards, ensuring quality, acquiring resources, and developing a standardized delivery teaching methods. Additionally, competing with grant-funded models poses a significant obstacle, complicating the implementation of commercially viable models. However, the study underscores the benefits of standardized care, such as safeguarding practices, quality assurance, a focus on play-based learning, and enhanced educational resources. These findings have direct implications for policy and action, highlighting the need to address regulatory hurdles, develop commercially viable models, and emphasize the advantages of standardized ECD care in low-income communities. The study ultimately contributes valuable insights for shaping effective policies and actions to enhance the scalability of low-cost, high-quality ECD services in Tanzania.

Laxmi Bhawani, UNICEF Zanzibar, United Republic of Tanzania: *Integrated, sustainable ECD operational Model through Continuum of Care for holistic development of children of Zanzibar*

Nevine El Nahass, Magreth Mziray, and Ayah Jarrah, Early Years Fellows, World Bank, Egypt, Jordan and Tanzania: *Redefining early childhood education environments: Guidance note on designing and implementing flexible spaces in Low- and Middle-Income Countries (LMICs)*

Emmanuel, Karamagel, RWAMREC, Rwanda: *Lessons from scaling-up the Bandebereho program engage fathers in caregiving and family violence prevention through the Rwandan health system*

Parallel Session 4.1: Funding and cost-tracking of ECD programmes

Gloria Nkosi, Hope Worldwide South Africa, South Africa: *Cost & Organizational Considerations for the Scaling of ECD Parenting Programs: The Caregiver Learning Through Play (CLTP) example in South Africa.*

Nid Patience Nelson Kawamala, Institute Social Work, Tanzania: *Financing the National Multisectoral ECD Program in Tanzania: A Collaborative Approach* **hi Joshi, UNICEF, Rwanda:** *Business Case for employer-supported childcare*

Emmanuel Maliti, Oxford Policy Management - Thrive Programme, Tanzania: *Investigating how to strengthen planning and tracking of public expenditure on early childhood development (ECD) in Tanzania*

Introduction: This study is part of a wider THRIVE research programme aiming at improving childhood health, nutrition, education and well-being. It contributes to the second objective of THRIVE, namely, increasing government capacity to deliver ECD policies/programmes at scale.

Objectives: To explore how public expenditure on ECD are planned and tracked and supporting the Government to track such expenditures in the future, potentially using AI and machine learning.

Methodology: Data collection involving 1) interviews 2) documentation reviews 3) data from PFM systems.

Mixed methods for data analysis i) qualitative review of ECD budget cycle; ii) estimating ECD budget allocations using budget books (top down) and data from PFM systems (bottom up).

Key findings: ECD expenditures are centrally (e.g., vaccines procurement), decentralized (e.g., capitation grants), and locally financed (e.g., LGAs own resources). For FY 2023/24, we have, for example, identified 37 health projects whose spending includes ECD priority areas. Through apportionment, these projects have a total budget of TShs 125 billion out of the TShs 192 billion. Through bottom-up methods this will be refined further. Planning and budgeting for LGAs starts at lowest govt level (e.g. village), at this stage, ECD priorities can be budgeted if they align with community priorities. The ECD is further strengthened by central government directives to LGAs e.g., the TShs 1,000 per child for nutrition from LGAs own resources.

Lessons Learned: 1) Difficulty disaggregating ECD expenditure 2) PFM IT data offer opportunities to analyse ECD 3) ECD can learn from nutrition successes, notably that nutrition is explicitly prioritized in LGAs budgets).

Parallel Session 4.2: The investment case for ECD & ECE in Eastern Africa

Nada Elattar, UNICEF Uganda, Uganda: *Investing in the Future: A Cost-Benefit Analysis of Pre-Primary Education in Uganda*

This study presents an analysis of the costs and benefits of investing in one year of pre-primary education (for five to six-year-olds). A detailed economic evaluation of a scale-up of one year of quality, centre-based pre-primary education has been undertaken. The research serves not only to investigate the value of quality and inclusive pre-primary education but also to offer guidance on efficient financing of the sector by the Ministry of Education and Sports (MoES), Ministry of Finance, Planning and Economic Development (MoFPED), development partners (DPs), as well as other key stakeholders in the sector.

A cost-benefit analysis of three different scale-up scenarios of pre-primary education was developed. The scenarios model moving from the baseline coverage rate of pre-primary education to a target coverage rate of near-universal (90%) levels across three scale-ups: (i) Scenario A – hitting target rates in 2030 and maintained to 2063; (ii) Scenario B - hitting target rates in 2040 and maintained to 2063; and (iii) Scenario C – hitting target rates in 2063. The study leverages the global evidence and the ECE Accelerator to form the framework of the cost-benefit analysis.

Ultimately, scaling up pre-primary education will have strong social and economic returns in Uganda. Given Uganda's current fiscal position, financing this scale-up will require multiple, coordinated strategies.

Katie Bullman, Genesis Analytics (with UNICEF and the government of Burundi), Burundi: *The Value of Cost-Benefit Analyses in Advocating for Enhanced Investment in Early Childhood Development How learnings from award-winning research in Burundi can be leveraged*

Nolasque Ndikumana, UNICEF, Burundi: *Cost-Benefit Analysis for Investment in Early Childhood Development in Burundi.*

Frank Samson, Children in Crossfire Tanzania, Tanzania: *Resourcing National ECD Programme implementation*

Parallel Session 4.3: Governance

Alinune Nsemwa, UNICEF, Ministry of Community Development, Gender, Women and Special Group Tanzania: *Enhancing Multisectoral ECD Coordination Mechanism: Experience of the Development, Implementation and Monitoring of the National Multisectoral ECD Programme in Tanzania.*

Introduction: The Tanzanian Government with multiple stakeholders developed the National Multi-sectoral Early Childhood Development Programme 2021/22-2025/26 (NM-ECDP) focused on addressing the holistic developmental needs of children aged 0 – 8 years. Key objectives: Through coordinated investment across the five components of Nurturing Care, the NM-ECDP directly invests in Tanzania's human development capital, accelerating ECD gains by enhancing the multi-sectoral approach. Methodology/ Implementation process: A unique coordination and accountability framework interlinks and integrates relevant actions, forums and structures to maximize provision of services and increase access to reach all children irrespective of their status. Key findings /learnings: -Progress on the coordination mechanism at the national and subnational levels increased support of access to ECD services at different levels -Clear coordination mechanism has increased collaboration among ECD stakeholders (Both government and non-state actors) in supporting holistic child development. Conclusions: Enhanced multisectoral coordination improves efficiency of nurturing care services ensuring all children in Tanzania are developmentary on track to reach their full potential. Recommendations: Utilize an ECD Investment Case for continued advocacy and planning; Identify and document ECD models for scale-up and sustainable implementation; Utilize evidence-base for targeted intervention and planning.

Nancy Juma, KMET, Kenya: *Integration of Nurturing Care for ECD through leaderships, coordination, coordination and Investment in Siaya County.*

Objective: This paper gives an in-depth understanding on the whole of government approach to nurturing care implementation by the County Government of Siaya dubbed Smart Start Siaya.

Implementation Process:County-led: Facilitated a high-level formal coordination- An oversight committee comprising four County Executive Committee Members formerly appointed by the Governor and a Multi-Sectoral Team (MST). The MST comprises technical officers from national, county line ministries, and nongovernmental partners led by an appointed chairperson.

Capacity building: Training of sector leaders on the Science of Early Childhood Development to enhance knowledge and incorporate NCFECD into sector plans.

Champions Identification - central feature of the model is government leadership evidenced by the Governor's personal engagement and that of the First Lady as the County nurturing care for early childhood development (NCFECD) Patron

Co-creation and co-designing: Regular meetings held to highlight sectoral areas of adoption and their operationalization leading to Smart Start Siaya

Outcomes: 1. Appointment of NCFECD Departmental Focal persons fast-tracking development and operationalization of relevant policies to include coordination of sector activities.

2. Improved capacity of MST to integrate NCFECD into the County Integrated Development Plan to inform

budgetary allocations for implementation. 3. Generated learning promoting Scale up to other counties within Lake Region Economic Bloc (LREB) 4. Policy and Legal frameworks embedding NCfECD developed in various County departments. 5. Play spaces in 80% of Public Health Facilities to track development milestones for all children. 6. Employment of 604 ECD instructors under Permanent and Pensionable Terms Recommendation:

Build on current achievements and lessons for wider replication and sustainability.

Lazaro Ernest, Tanzania Early Childhood Development Network (TECDEN), Tanzania: *The role of the Civil Society Organizations in implementation of ECD agenda in Tanzania (National and sub-national level)*

Moving from Policy to Practice is a recurrent challenge in most of the programs, especially in multisectoral agenda like ECD. In December 2021 Tanzania launched its National Multisectoral ECD Programme 2021/22-2025/26 (NMECDP), a programme aiming to ensure all young children develop to their full potential. Tanzania Early Childhood Development Program (TECDEN) through its structure is implementing Mtoto Kwanza project in consortium with Children in Crossfire, and Union of Tanzania Press Clubs, catalyzing the NMECDP implementation.

Methodological Approach: TECDEN structure has the Regional Coordinating Unit (RCU) across all 26 regions of Tanzania mainland coordinating other ECD non-state actors at regional level. The same RCUs are implementing Mtoto Kwanza project partnering regional and local governments in coordinating NMECDP implementation locally.

Key Findings and Discussion: The CSOs has demonstrated a good capacity of working collaboratively with the government in the implementation of ECD program as sub-national level. CSOs has supported NMECDP dissemination at across all 26 regions of the Tanzania mainland an more than 90 councils reaching more than 1,600 local government officials and >300 other CSOs participated. As per NMECDP coordination framework, four cycles of quarterly review meetings have been convened across the ten regions.

Conclusions and Recommendations: Tanzania is making progress in ECD programme implementation, through the leverage and institutional support of TECDEN, and forming government and civil society partnerships around ECD policy implementation locally.

Tess Peacock, Equality Collective, The Republic of South Africa, Making Local Government Work for ECD: *South Africa: A Collaborative ECD Advocacy Campaign for holistic, quality, inclusive, and well funded ECD Services in South Africa.*

Parallel Session 5.1: Exploring and evaluating successful early learning models in the classroom and at home

Martha Jacob Kabate, The Open University of Tanzania, Tanzania: *What works best direct or indirect instruction strategies in enhancing letter name knowledge among preprimary children through environmental print in Tanzania.*

In Tanzania, as in numerous other developing countries, the education sector is afflicted by children with low reading skills. Moreover, Letter Name Knowledge (LNK) is a critical emergent literacy skill indicator for later reading abilities. Little is known about the effects of instructional strategy on environmental print to enhance LNK. This study examined direct and indirect environmental print teaching to enhance LNK. Sociocultural and constructivist perspectives underpinned the study. An eight-week intervention study was conducted. It was a quasi-randomized experiment. The study was conducted in Shinyanga District Council, Shinyanga region in Tanzania. The research involved public pre-primary children who were grouped into direct (n=162) or indirect (n=131) and their teachers (6). The findings revealed that direct or indirect instruction on environmental print enhances LNK in public pre-primary classes. Therefore, pre-primary teachers should use direct or indirect instruction on environmental print to enhance LNK for children's reading achievement—early reading achievement in children builds good human capital along the life course. The study recommends that the MEST foster seminars and workshops for educators to strengthen

emergent literacy skills and instructional methodologies and that Heads of Schools provide and promote environmental print. Further research is needed on how instructional strategies on digital learning tools improve LNK in public pre-primary classes.

Keywords: Letter Name Knowledge, Direct Instruction, Indirect Instruction, Environmental Print

Ignasia Mligo, The Dodoma University, Tanzania: *Assessment of the Pre-primary Children Readiness for School in Dodoma Region, Tanzania.*

This paper has drawn findings from the main study which conducted as Baseline. The assessment aimed at establishing children's readiness for pre-primary schools. A mixed method approach applying both qualitative and quantitative has been used in this baseline assessment. A total of 315 pre-primary children randomly selected from all eight districts in Dodoma region participated in the study. Children's readiness for school was assessed based on their development and emergent skills at pre-primary education classes. The International Development and Early Learning Assessment tool was used in this assessment. BEQI tool was used to assess learning environment while NECTA tool was used to assess 3R's among transitioning pupils. Data was analyzed by computing the average scores for each sub and main domain assessed. Cross-tabulation was used to compare performance between districts under study. The findings indicated that on average performance in four major domains measured on school readiness was 60%. Highest score being on Gross and Fine Motor Development (84%) followed by Emergent Numeracy (66%), and Emergent Literacy and Language (60%) Least score was on the Social Emotional Development (56%). Based on the findings it is concluded that children in the study areas are ready for primary schooling. The study recommends the need for partnership between the government and the practitioners, clear policies regarding pre-primary classes, qualified teachers' and availability of teaching and learning materials and conducive learning environment.

Sonja Giese, DataDrive2030, South Africa: *Why do some children do so much better than their peers, despite facing very similar challenges? Lessons from the Positive Deviance Initiative.*

Nationally representative data on preschool children in South Africa show a striking socioeconomic gradient in learning outcomes, with 3 out of 10 children in the poorest households on track, compared to 8 out of 10 in wealthier households. However, the data also highlight considerable variation in performance between individuals within the same income group. The DataDrive2030 Positive Deviance Initiative sought to understand the factors associated with young children attending low fee Early Learning Programmes (ELPs) who significantly outperform their peers. Using this "positive deviance" (PD) lens, the project aimed to identify shiftable behaviours in ELPs that have the potential to significantly impact early learning outcomes on a large scale. Phase 1 involved quantitative analyses drawing on data from approximately 12,000 child assessments, to uncover factors associated with positive deviance in ECD outcomes at the individual child, ELP, and ward levels. In Phase 2, quantitative findings were further explored through a qualitative ethnographic study involving 14 PD facilities. Key findings clustered around three themes: community embeddedness, leadership and organisational culture and pedagogical practices, with a core set of associated behaviours. In Phase 3 (currently in progress), the study team is working with behaviour change experts and early learning practitioners to help translate these insights into practical strategies that seek to replicate some of the conditions observed in PD sites.

Rose Chikopela, Chalimbana University, Zambia: Responding to learning needs to early childhood education school children via teacher training

Introduction: Chalimbana University started training teachers in Bachelor of Early Childhood Education (ECE) in 2016 in order to equip early childhood providers with knowledge, values and skills that are necessary for

managing children in ECE.

Objective: To evaluate the extent to which the Bachelor of Early Childhood Education programme and outcomes have been achieved.

Methodology: This was a mixed methods research, targeting all ECE graduates from Chalimbana University from 2019 to 2021 in total 209 who are practicing ECE in schools, various places of work and Chalimbana ECE centre. The accessible sample comprised 180 participants, 136 were successfully interviewed, their responses coded, entered and analysed. Interview guide, observation checklist and questionnaire were used to collect data which was analysed using SPSS and themes.

Key Findings: Majority of teachers were able to mention activities they learnt that support the development of social competence, self-concept, self-expression, interpersonal skills, knowledge of God, respect for human and national values transferable to ECE children. Most teachers and learners experience challenges in accessing teaching and learning materials; and using activities that promote self-awareness, social competence and self-concept. Teachers were unable to handle Learners with Special Education Needs (LSEs) enrolled in ECE centres as the ECE curriculum lacked such content.

Conclusions: The programme was found to be effective, relevant and sustainable as the evidence shows most teachers were able to teach the children effectively using appropriate methodologies.

Recommendations

The University should: (a) enhance ECE curriculum for LSEs; (b) establish an assessment center to enable early identification, assessment and intervention.

Isália Gabriel Licença Mate, Education Faculty, Eduardo Mondlane University, Mozambique: *Educational practices in childhood to promote gender equality and equity: An analysis in four Children's Centers in Maputo City.*

Parallel Session 5.2: Macro and Micro Level Measurements of Quality of ECD Services

Juliet McCann, Emory Rollins School of Public Health, Kenya: *Reliability and validity of the Global Scales for Early Development (GSED) tool for use with young children in Western Kenya*

Background: World Health Organization launched the GSED in February 2023 as a global measure for monitor the development of children up to 36 months of age.

Key objectives: To assess the reliability and validity of the GSED as a measure for overall early child development (ECD) in a sample of children aged 0-24 months in rural Western Kenya. To date, there has been no validation of the GSED in Kenya

Methodology: In November 2023, we administered the GSED to 642 children under 24 months of age as part of a baseline evaluation for a parenting intervention in Busia and Homabay counties in Western Kenya. We examined the internal consistency, test-retest reliability, and convergent validity of the GSED in terms of its associations with theoretically-related characteristics (e.g., parenting practices). In a subsample of 113 children, we revisited children and reassessed ECD using the Bayley Scales of Infant and Toddler Development-3rd edition (Bayley-III). We examined criterion validity by comparing GSED and Bayley-III scores.

Findings: Child development, as measured using the GSED, was significantly associated with parenting variables (e.g. primary caregiver stimulation, primary caregiver responsivity, and learning materials), as well as child development outcomes using the Bayley's (e.g. cognitive development, receptive language, fine motor, gross motor, and behavioral development).

Conclusions: Overall, the GSED Long Form is a valid tool for assessing overall early child development among children <2 years in Western Kenya

Momar Talla Cisse, World Bank, Senegal: *A Guide to Select Appropriate ECE Quality Tools*

Alinune Nsemwa, UNICEF, Tanzania: *National ECD Dashboard: Strengthening National and subnational ECD data availability and usage in Tanzania*

Background: Growing priority for the Government of Tanzania is to strengthen national and subnational ECD data availability to galvanize implementation of the National Multisectoral ECD Programme (NM-ECDP). For this purpose, the Government of Tanzania with support from UNICEF and the University of Dar es Salaam, developed the National ECD dashboard. Objective: To strengthen ECD data collection, analysis, and use, for visualization of performance of key selected nurturing care ECD indicators. Methodology/implementation process: The development of the ECD Dashboard involved stakeholders' consultations to select credible data elements and indicators, development of data collection tools, systems interoperability setup, pretesting, orientation and roll out. Key findings/outcome: Availability of an efficient, user-friendly ECD dashboard for stakeholders to access and visualize key ECD indicators. Conclusions: The dashboard provides end users with various analytical functions to measure the implementation performance of the NM-ECDP common results framework/ Action Plan. Information generated will guide decision-making at various levels. Recommendations: Key Ministries and ECD Partners to ensure that ECD data are updated regularly, quality checked and utilized for the aim of improving the holistic development of Tanzania's young children.

Alena Sakhonchik, World Bank: Findings from Women, Business and the Law 2024 Childcare Indicator

Parallel Session 5.3: Programming for Children with developmental delays in vulnerable environments

Charles Odol, Sightsavers, Kenya: *Impact of a disability-inclusive early childhood education and development initiative on children's early learning and development in Kenya.*

Caroline Nerima, AfriChild, Uganda: *Uganda Functional Limitations among Child refugees with Developmental Disabilities and Barriers to Early Childhood Intervention in a Ugandan Refugee settlement*
Introduction: Childhood developmental disabilities are associated with functional limitations and reduced social participation. Access to early intervention and rehabilitation services remain challenging. Objective: Describe functional limitations and barriers to access to early intervention services among refugee children. Methods: Mixed methods study was conducted in Kyaka II refugee settlement among children under 6 years with developmental disabilities. MDAT was used to assess development. Limitations in learning, communication, general tasks, mobility, self-care and education were determined using the WHO ICF-CY framework for activities and participation. Key Informant interviews were conducted to understand available services for early intervention and barriers to access. Data was collected on sociodemographics, medical and perinatal history. Functional limitations were categorized on severity and presented as percentages. Staff Implementing early childhood education, health care, rehabilitation and child protection were interviewed. Reflexive thematic analysis was applied to describe barriers to access and identified themes organized using the socio-ecological model. Key findings: 51 children were evaluated, 88.2% were from DRC, Mean age- 4 years, 49% had severe malnutrition and 50% had cerebral palsy. Children had complete difficulty in undertaking simple tasks (46.7%), directing attention (23.8%), self-care (46.5%), maintaining posture (48%) and communication (57%). Main barriers preventing to access were inadequate specialized human resource for early identification, rehabilitation and ECD. Conclusion: Young child refugees with developmental disabilities in refugee settings face significant limitations of function and yet intervention services do not effectively respond to their needs. Recommendation: There is need for holistic and sustainable early childhood interventions for children with developmental disabilities in refugee settings.

Josephine Ferla, Save the Children, Global including Africa region (Tanzania, Kenya, Uganda etc): *10 Years of Building Brains Implementation: An Evidence Synthesis of Uptake and Impact to Date*

Ten (10) Years of building Brains Implementation: An Evidence Synthesis of Uptake and Impact to Date
Josephine Ferla, Save the Children US

Introduction Building Brains (BB) equips mothers, fathers and other caregivers with the skills and confidence to engage babies and young children from birth to three years of age, including those with disabilities and living in adversity, in the safe, playful and responsive interactions that are essential for healthy brains and

holistic development.

Objectives To share an overall impact, uptake and scope of the intervention to date, and inform future innovation and expansion of BB programs.

Methodology A stock of 10 years of evidence on Building Brains a Save the Children Common approach targeting 0-3 years in responsive caregiving and early learning drawn from Save the Children's data management systems, a 2023 survey of ECCD programs, 11 impact evaluations conducted in 9 different countries and a qualitative study of BB use in humanitarian settings, accompanied by one-on-one consultations with Save the Children ECCD experts.

Key findings BB was found to be more effective in improving caregiver nurturing care practices and similarly effective in improving children's developmental status. In addition, potential for scalability and sustainability.

Conclusions The findings support the program's potential for scalability and favorable cost-effectiveness when compared with other existing parenting interventions. By utilizing these results to inform adjustments and guide implementation at scale, we can enhance future program improvements and maximize its reach, effectiveness and impact.

Recommendations Building Brains can produce lasting impacts in some of the most deprived communities at low cost; its flexible model facilitates implementation in both humanitarian and development settings and integration into any sector to operationalize the Nurturing Care Framework.

Bankundiye Gisele, Humanity & Inclusion, Rwanda and Uganda: *ECD measurement to identify most vulnerable children*

Parallel Session 5.4: Making a difference for Children in refugee settings

Firminus Mugumya, The AfriChild Centre, Uganda: *Strengthening research and evaluation capacity for evidence driven policies and programs to improve refugee child wellbeing in Africa settlement.*

Introduction/Background: The extant landscape of Early Childhood Development programmes (ECD) aimed at refugees is sporadic and lacking coherence, underscored by a dearth of evidence on the effective and scalable models. We developed an innovative research project that builds on the resources of refugees in Nakivaale Refugee Settlement in Uganda to co-design and implement an integrated ECD model.

Methodology: The action/practice-based research project has three distinct phases namely: formative research phase, co-design, and evaluation phase, all of which are adopting highly participatory and empowering methods. Sequenced and iterative mixed methods are applied, focusing on capacity building for refugee researchers, caregivers and the entire refugee and host community.

Findings (Preliminary): The on-going formative research phase demonstrates the resourcefulness and capacity of refugees in addressing needs of children in their early years. Initial community engagement underscores the primacy of livelihood programming as a cornerstone for establishing sustainable ECD interventions.

Conclusion (preliminary): Engagement of targeted populations in conceptualization and execution of research yields outcomes with immediate practical significance. Continuous refugee and host community engagement on ECD emerges to be an indispensable strategy for promising ECD outcomes for refugee children and their caregivers.

Recommendation: There is need to promote innovative practice-based Research/community engagement in building capacity for refugees to initiate and sustain effective and sustainable ECD interventions.

Obed Kambasu, Innovations for Poverty Action (IPA), Uganda: *Two-generation ECD programming in refugee settings in Uganda*

Key objectives: 1. To gain insights into the current concerns, challenges, interests, and priorities of key stakeholders who develop and administer interventions and policies that aim to improve the lives of young

children affected by displacement and their parents. 2. Among these stakeholders, assess the relevance of two-generation theory, which emphasizes simultaneously addressing the needs of children and their caregivers, and, based upon that feedback, co-create a two-generation policy, practice, and research agenda for Uganda.

Methodology/Implementation Process: IPA conducted 27 in-depth interviews with policymakers, non-governmental organizations, refugee-led organizations and researchers in emergency settings in Uganda. We also hosted three workshops with policymakers and implementing organizations.

Key Findings/Outcomes: Two-generation theory is a relevant framework for policymakers and implementers in Uganda, with particular importance for populations affected by forced displacement. Stakeholders emphasized that issues faced by parents significantly impact their young children and that it is important to incorporate the two-generation approach in policy and programming. The interconnected challenges of poverty emerged as a central concern affecting both children and parents, with specific consequences on child education, nutrition, psychosocial well-being, and health. While the framework was relevant, some stakeholders did not have pre-existing knowledge of the theory.

Implications of Findings for Policy and Action:

We are currently developing a co-created policy, practice, and research agenda focused on the context of forced displacement in Uganda to motivate and inform future policy and practice in this area. We identified several organizations applying a two-generation approach to their programming and over 20 ongoing policy processes that could potentially incorporate two-generation and socio-ecological models.

Joseph Kabanda, BRAC, Uganda: *BRAC's Two-Generation Model of Holistic Child and Family Development in Ugandan Refugee Context*

Introduction: BRAC Uganda's innovative approach combines Humanitarian Play Labs (HPLs) with the Ultra Poor Graduation (UPG) model to cater to the holistic needs of children and parents in challenging humanitarian contexts. By creating child-friendly environments and empowering parents, especially women, through livelihood support, it aims to foster holistic development.

Objectives:

1. Establish conducive learning environments for children in humanitarian settings.
2. Promote nurturing care for holistic child development.
3. Empower parents through comprehensive interventions.
4. Advance Early Childhood Development (ECD) and Graduation fields in humanitarian settings.

Methodology: The approach involves implementing a play-based curriculum, UPG components, providing play spaces and materials, training play leaders, community engagement, advocacy, and research.

Key Findings: Early results show the effectiveness of two-generational programming in enhancing parental involvement and supporting forcibly displaced children's development. Over 4,700 children aged 3-5 benefit, along with 700 families, integrating social protection, livelihood promotion, financial inclusion, and social empowerment.

Conclusion: The dual-generational approach fills a critical gap in quality care in humanitarian settings, showcasing a comprehensive strategy for caregivers and children's development. Despite challenges, it demonstrates promising results, emphasizing the need for sustained support for scalability.

Recommendations: Scale dual-generational interventions, enhance collaboration, address nutritional needs, ensure equitable access, secure sustainable funding, integrate cultural sensitivity, and provide mental health support.

Tina Asnake Belaynehe, World Bank, Uganda, South Sudan, Sudan, Global: *Effects of Early Childhood Development (ECD) programs on the socio-emotional well-being of children and caregivers in refugee and forced displacement settings*

Early childhood is a crucial period during which children learn the necessary skills to succeed in life.

Socioemotional wellbeing of children and their caregivers not only supports this learning, but also ensures strong health and nurturing relationships, among other long-term benefits. Forcibly displaced children face

significant and multifaceted trauma and stress, which can have lasting deleterious effects. It is thus crucial that interventions for refugee children can support and nurture children's socioemotional wellbeing. This paper presents a review of the evidence of early childhood development (ECD) interventions' effectiveness in supporting the socioemotional wellbeing of forcibly displaced children and their caregivers. A literature review and interviews with experts informed the following findings and recommendations. First, parents' mental health is highly correlated with their ability to care for their children, so ECD interventions must target both the caregivers and the child. Next, ECD interventions, even those implemented amidst challenges, have demonstrated promising outcomes in caregiver and child wellbeing and fill important gaps to build school readiness and developmental foundations, so interventions' spaces, content, and materials must be well-designed, child-friendly, culturally sensitive, and trauma-informed. Many low-cost modalities with various in-person and remote approaches facilitated by a trained and empowered workforce have proven to be scalable, making them an attractive solution for policymakers. Finally, sustainable funding to retain the realized impacts is a common challenge across interventions, so it is crucial to continue generating evidence and advocating for increased investments towards the early years in fragile settings.

ABSTRACTS FOR ROUNDTABLE DISCUSSIONS

Roundtable Discussion 1: Empowering parents, caregivers, and communities 1

Mr Fadhili Mtanga, Health & Insurance Management Services Organization, Tanzania: *Fostering Community Awareness of ECD*

Introduction/Background: In Tanzania, children face obstacles in accessing quality healthcare, nutrition, education and responsive caregiving, especially in underserved areas. Poverty, poor infrastructure and cultural norms exacerbate these challenges, hindering optimal ECD outcomes. By equipping communities with essential knowledge and resources, it is feasible to involve caregivers, parents, educators, and local leaders in establishing nurturing environments where young children can flourish.

Objective/Purpose: To empower communities with essential knowledge to enhance optimal ECD in contributing to the overall well-being of children.

Methodology: A multifaceted approach integrating community engagement through CHWs and events. Established collaborative partnerships with local leaders and healthcare providers to create spaces for sharing experiences and best practices to foster senses of collective responsibility.

Key findings/results/outcomes/learnings: The approach encourages active participation in ECD within communities. Families allocated resources to prioritize child health/nutrition. Communities through village governments allocated funds to support children's health through access to medical care.

Conclusion: When empowered with knowledge and resources, communities can establish sustainable environments for children to thrive.

Recommendation: To ensure a lasting impact on child well-being in the country, ECD interventions should prioritize sustaining community knowledge, adopting a household-focused approach, and enhancing access to quality healthcare.

Dr. Raquel Vareda, Feeding the Change, Mozambique: *Exploring early childhood development (ECD) and stimulation (ECS) knowledge and practices in Mozambican rural communities.*

Background: Caregivers play a critical role in providing all dimensions of nurturing and effective interactions, stimulation, and responsive caregiving, but still over 40% of children under 4 years old in sub-Saharan Africa fail to meet basic cognitive or socioemotional milestones.

Objectives: Exploring primary caregivers' attitudes and knowledge levels related to ECD, ECS practices and violent discipline against children.

Methodology: Exploratory qualitative study using saturation sampling. Caregivers of children aged under three years were recruited to 14 focus group discussions, 8 in-depth interviews, and 13 observations of child-caregiver interactions. Findings were analysed using a deductive-inductive exploratory thematic approach.

Key findings: Mothers are the primary caregivers, and help from others is uncommon, limiting available time to care, communicate and stimulate children. Communities are not familiar with the concept of ECD and its importance, or with ECS practices. Additionally, gender stereotypes limited the type of playing activities and type of toys used even at such a young age. Almost all caregivers make use of some sort of punishment as a tool of discipline and education.

Conclusions/Recommendations: There's need for broader community engagement to promote ECD and ECS practices in Mozambique. Nonetheless, there is an evident openness among caregivers to adopt new practices, provided they are supported with appropriate resources and knowledge.

Mr. Charles Kemboi ChildFund Kenya, Kenya: *A Strengthened Partnership for Nurturing Care (2018–2021) in Kenya*

Child Fund works to connect children living in poverty with what they need to achieve their potential. Through funding from the Conrad N. Hilton Foundation, we implemented "A Strengthened Partnership for

Nurturing Care” in Kenya and Zambia to address the needs of young children and their caregivers affected by HIV. The project’s objectives included improving nurturing care services and promoting health-seeking behaviours. Both qualitative and quantitative data were collected. Quantitative data included caregiver-only assessments (Household surveys, RISE Tools), ECD center surveys, and knowledge, attitudes, and practice (KAP) questionnaires. Qualitative data included focus group discussions and key informant interviews. At project close, 51% of caregivers reported that their child had fruits or vegetables daily, an increase from 44% at baseline. Additionally, nearly all children (89.1%) were completely up to date on all immunisations at project close as compared to only 66.7% of children at baseline. Furthermore, most caregivers (91.1%) reported that children under 5 had access to play materials; an increase from 79.2% at baseline. Despite the promising findings, further sensitization is needed in children’s literacy and appropriate discipline. At project close, approximately one-quarter of caregivers did not read to their child and many caregivers physically disciplined their children instead of using more positive parenting practices. A future area for programming and research could be adopting new strategies to support adolescent caregivers.

Ms. Rayanatou Laouali, World Bank, Niger, Colombia, Tajikistan, Chile, Global: *Promoting quality parenting programs: A Guidance Note.*

Background: Evidence-based parenting programs are interventions aimed at improving behaviors, parental practices, skills, and knowledge to promote healthy child development, through support and education from professionals or paraprofessionals working directly with the child’s caregiver.

Objective: The objective of this guidance note is to provide digestible information about parenting programs to inform World Bank staff and government partners on how to effectively design and implement parenting programs.

Methodology: A review of existing literature and screening for reports published in the year 2000s; consultations with World Bank staff and ECD experts.

Key findings/Recommendations: While there is not enough evidence on parenting programs at scale, there are emerging promising practices common across the research. World Bank staff and government partners should consider a quality framework made up of structural and process quality elements based on these promising practices. These elements comprise considerations on the context, content, delivery modality, dosage, the workforce, enabling environment, and monitoring and evaluation of parenting programs. The recommended minimum standards take an assets-based approach and build on existing services to engage parents in hands on practice while supporting the workforce to deliver activities.

Conclusion: While parenting programs have become more prevalent across education, social protection, health, and child protection sectors, more research is needed on the implementation science of evidence-based parenting programs from different contexts to optimize programs, ensure positive implementation outcomes and support parents and children at scale.

Dr. Teresa Mwoma, Early Childhood Development Network for Kenya (ECDNeK), Kenya: *Empowering Communities for Inclusive Early Childhood Development in Kenya*

Introduction: The "Malezi Bora ya Awali" project aimed to improve access to quality early childhood development for children aged 0-5 years as they transitioned to school.

Objectives: 1. To improve awareness among caregivers, preschool teachers and health workers in support of children’s holistic development. 2. To increase community engagement in implementing child-centred ECD models in target counties 3. To engage ECD stakeholders in policy dialogue, adoption of best practices in ECD/E to create enabling environments for young children to develop holistically.

Methodology: The project utilized a Community Health Strategy (CHS) approach in implementing the following actions; capacity-building which involved: sensitization, education, mentorship, coaching, partnerships, and collaborations, hence strengthening linkages from County to Community levels.

Findings: 1. Implementing interventions through the Community Health Strategy (CHS) model contributed to project sustainability. 2. County-level project inception strengthened linkages and enhanced

implementation. 3. Aligning project interventions with County Integrated Development Plans (CIDPs) ensured smooth implementation and sustainability. 4. Media engagement expanded grassroots project reach, benefiting more stakeholders. 5. Collaborating with partners in target areas increased the project's impact and scale.

Conclusion: Malezi Bora project enhanced nurturing care awareness, leading to improved child-health outcomes and increased demand for essential services. Recommendation: Advocating for the prioritization of Early Childhood Development (ECD) within the County.

Ms. Boitumelo Monoketsi, Early Childhood Development Corporation, South Africa: *Empowering Parents, Caregivers, and Communities*

Ms. Roreen Vitumbiko Mzembe, Help a Child Malawi (HAC), Malawi: *Improving Knowledge, Attitude and Practices on Parenting Skills for Mothers and Fathers in Malawi*

Introduction: Help a Child (HaC) is non-governmental organization and works India, Kenya, Malawi, Rwanda, Burundi, DRC and South Sudan and Uganda. (www.helpachild.org). In its programme HAC focuses on parenting.

Key Objectives: 1. To increase knowledge for mothers and fathers on parenting skills that are positive. 2. To improve the attitude of parents towards the role of parenting 3. To improve parents' behaviors and practices in raising their children

Methodology/implementation process: HaC designed a method, The Parenting Challenge. It is an interactive approach where parents come in groups, sharing among parents among themselves on topics like, who a parent and what is his/her roles, Child Nutrition, Supporting Children in Education, Child-Protection, Child Health and many more. Research was conducted in Malawi and Uganda, together with the University of Utrecht, The Netherlands, using an ethnographic approach for quantitative and qualitative data-collection.

Key findings/results/outcomes/learnings: There is a positive change in parents' knowledge, attitudes, and practices. There is improved harmony, reduced domestic violence and more support in children's education, health and nutrition.

Conclusion: Parents do improve in knowledge, attitude and practices and skills by participating in a parenting programme. This is critical in the first 1000 days of the child's life.

Recommendations: To make headway in Human Capital Development, parents need to be empowered in their role. This is a priority. More research is needed.

Mr. Girles Shaban, Girl Effect, Tanzania: *Formative qualitative research to inform the potential design of responsive caregiving intervention to improve early child development in Arusha, Tanzania*

Roundtable Discussion 2: Empowering parents, caregivers and communities 2

Prof Efua Irene Amenyah Sarr, Université Gaston Berger, Senegal: *Teachers' profile and roles in supporting Early Children's in Schooling.*

Introduction: Social-emotional Learning and Character Development (SELCD) are vital for holistic child growth, enabling resilience, empathy, and ethical decision-making. These skills are essential for navigating life's challenges and forming meaningful relationships. Integrating SELCD into early learning frameworks equips children with tools for lifelong success.

Objectives/Purpose: Our primary objective is to empower parents, educators, and care workers with SELCD skills to model positive traits for children. We aim to support institutions in fostering environments conducive to nurturing positive development in children.

Methodology/Implementation Process: This study engaged 9 private daycare centers, 5 public primary schools, and 1 private primary school, along with 30 parents and 21 educators in Dar es Salaam. Training workshops focused on SELCD for parents, educators, and care workers.

Key Findings/Outcomes: Children displayed concerning behaviors influenced by caregivers and teachers,

including abusive language and bullying. Positive impacts were observed when children interacted with adults modeling positive character traits, leading to increased kindness and empathy.

Conclusions: In the 21st century, SELCD skills are crucial for children's holistic growth. Leveraging government support and advocating for capacity strengthening among educators and care workers can promote comprehensive early childhood development in Tanzania.

Recommendations: Development partners should allocate funding for SELCD research and program implementation. Civil Society Organizations can create awareness and advocate for broader interventions in SELCD, ensuring children's holistic growth and readiness for the future.

Ms Hawa Juma Selemani Ministry of Education Science and Technology, Tanzania: *Assessment For Childrens' Learning Outcome.*

The assessment of students' learning outcomes plays a pivotal role in ensuring the effectiveness of teaching and learning processes. The Ministry of Education, Science, and Technology has developed a Periodic Assessment for learning outcomes using play-based stimuli for early learning (PALPS). These Tools covers the main domains for development including physical, social and cognitive development holistically. This abstract outline a comprehensive examination of assessment strategies aimed at fostering a deeper understanding of students' academic achievements and competencies. The implementation early learning should be in line with the participatory assessment of the child's performance across all domains. PALPS is aimed at enabling parents and teachers identifying content that will allow them to measure learning outcomes, focus on the emerging literacy and numeracy skills by identifying emerging indicators and setting individual performance levels. It is from this view that necessitates a need to develop a National Guide to facilitate the assessment of the learning outcomes of the child in all domains based on the proposed indicators and to determine appropriate intervention. PALPS will help parents/guardian, pre-primary school teachers and other stakeholders at the workplace to use appropriate tools to monitor and evaluate a child's development and to solve learning challenges. Assessment will be done in the areas of Communication, Health Care, Environmental Care, Applying Mathematical Concepts and Completing Artistic Skills. Other areas include Interaction Skills, Communication skills, listening skills, Speech skills, Early reading skills, writing skills, Health Care Skills, Environmental Care Skills, Proficiency in Creating Artistic Skills and Proficiency in Applying Mathematical Concepts. The School Quality Assurance Team will compile a monitoring and evaluation report and send / distribute it to various stakeholders.

Dr. Daniel Lupiya Mpolomoka, UNICAF University Zambia, Zambia: *Health Concerns in Early Childhood Education Centres: Scenarios in selected Urban and Rural Community and Private Schools in Zambia.*

Purpose: Health, safety and nutrition in early childhood education (ECE) are of utmost importance and concern when it comes to providing quality education. They support the holistic development of early childhood learners.

Objectives: 1. To describe types of health concerns in ECE centers. 2. To establish the effects of health concerns on ECE learners. 3. To determine possible solutions to health concerns in ECE centers.

Methodology: A qualitative research, employing a descriptive approach was conducted at four schools conveniently sampled, comprising 24 participants. An interview guide and questionnaire were used to collect data, analysed descriptively and thematically.

Key Findings: findings revealed various types of food that ECE learners carry for their breakfast and lunch. Participants were aware of the health concerns among ECE learners that disrupted their academic welfare, led to their hospitalization some times and truancy. Health concerns in ECE included: food allergies, asthma and respiratory issues, mental health and emotional wellbeing, physical injuries and accidents, health eating and environmental safety. Effects of health concerns in ECE include absenteeism, emotional and social challenges, lack of support and accommodation, impaired physical engagements and educational inequalities.

Implications for policy and action: the study promotes SDGs 1, 2, 3 and 6; urges school policy on promoting the health of learners; call government and schools to conduct mass education on nutrition for ECE

learners.

Ms. Schjolastica Olomi, BRAC Maendeleo Tanzania, Tanzania: *Mobilising low-income communities to support and sustain Early Childhood Development Centres - BRAC Experience from Tanzania.*

Ms. Winnie Biira, Children on the Edge Africa, Uganda: *A model of sustainable Early Childhood Education in Kyaka II refugee settlement, Uganda.*

Ms. Jayne Kariuki – Njuguna, UNICEF Kenya: *Evidence Informed National SBC Strategy and integrated package for ECD.*

Ms Eunice Njoroge Aga Khan University, Institute for Human Development, Kenya: *Engaging Fathers: Adaptation and Programme Experience of Implementing SMS4baba mHealth Intervention in Kenya's Urban Informal Settlements. A Pilot Feasibility Mixed Methods Study.*

Objective: To promote father-infant attachment, enhance the relationship with the baby's mother, encourage self-care for fathers, and integrate components for couple relationships.

Methodology/implementation process: This was a mixed-methods study where qualitative data were collected through focus-group discussions with fathers and quantitative data were also collected. Seventy-two fathers were recruited to receive texts three times weekly.

Key findings/results/outcomes/learnings: Feedback from fathers who completed the program revealed substantial engagement, with high levels of involvement through reading, sharing the text messages, and endorsement of the message content. Participants cited instances of modifying their parenting and spousal support behaviors, involving a retreating from traditional gendered parenting norms. There was a notable rise in fathers' participation in childcare, strengthened emotional bonds with their infants, and an enhanced level of support for their partners.

Implications of findings for policy and action: The study's findings underscore the potential of digital interventions, specifically text messaging channels, in effectively reaching and engaging fathers, especially in low-resource settings like urban informal settlements. There is a need for tailored father-specific interventions and recognition of fathers' role in promoting family wellbeing during the perinatal period.

Ms. Yuri Kim, Harvard. T.H. Chan School of Public Health, Kenya: *Barriers and Facilitators to Male Caregivers' Engagement in the Moments that Matter Parenting Program in Western Kenya*

Introduction/Background: Parenting programs are primarily focused on female caregivers. Fathers' engagement in parenting programs has been largely overlooked.

Objectives/Purpose: To investigate how the Moments that Matter (MTM) parenting program is currently impacting male caregivers; and explore opportunities for increasing male caregivers' program participation.

Methodology/Implementation Process: A qualitative process evaluation was conducted after the first few months of program implementation to assess initial fidelity, quality, and impacts of the parenting program. Within this broader process evaluation, we specifically explored male caregivers' program engagement, stakeholders' perceptions about the barriers and facilitators to men's participation, and recommendations for making MTM more inclusive of male caregivers. We conducted interviews with female and male caregivers as well as interviews and focus group discussions with program delivery agents (i.e., ECD promoters and faith leaders).

Key Findings/Outcomes: Overall, relatively few male caregivers participated in the program. Most stakeholders explained that parenting was primarily a maternal responsibility with consistent references to restrictive gender norms. They also explained that fathers prioritized income-generating opportunities rather than learning about parenting and ECD.

Conclusions: Although relatively few fathers are actively participating in MTM, multiple stakeholders still shared positive examples of how the program is improving fathers' caregiving. Recommendations for increasing male caregivers' engagement included providing incentives and organizing some peer group

sessions for men themselves.

Recommendations: Gender-responsive program adaptations are required to equitably and fully engage both female and male caregivers in parenting programs.

Roundtable Discussion 3: Empowering parents, caregivers, and communities

Mrs. Rita Moses Mbeba, Girl Effect, Tanzania: *A qualitative study to understand approaches for empowering adolescent and young parents (15-29 years) on responsive caregiving practices in Arusha region, Tanzania.*

Introduction/Background: Girl Effect's Mzazi Hodari program contributes to improved health and well-being of adolescents and young adults aged 15-29 and improves their capacity to provide nurturing care to their children. The aim of the study was to understand approaches that empower adolescents and young parents in practicing responsive caregiving.

Objectives/Purpose: To explore key social actors influencing responsive caregiving practice among adolescents and young parents with children under 3 years.

Methodology/Implementation Process: A qualitative study design was used to collect and analyze data. Semi-structured interviews with government and community stakeholders were conducted. A total of 70 KIIs were administered, and 14 FGDs were held. The insights were audio-recorded, transcribed, thematically analyzed, and interpreted.

Key Findings/Outcomes: Grandparent and mother-in-laws: These actors are paramount to be targeted when designing interventions. They are trusted by young mothers in raising children.

Male engagement: Parental caregiving was viewed as a female responsibility due to the culture thus, improving male engagement is vital.

Influential and traditional leaders: It was suggested that influential and community leaders are the most effective means of communication since they are reliable and trusted.

Peer-to-peer education: Peers' influence on each other is remarkable in transforming community behaviors.

Conclusions: Findings provide a set of approaches that contribute to increased responsive caregiving practice among adolescents and young parents.

Recommendations: Knowledge, engagement, and practice initiatives should target social actors who are influential and trusted by communities.

Ms. Elisa Waidelich, Episcopal Relief & Development, Kenya: *Bridging Religion and Science to Improve Responsive Caregiving.*

Objectives: Share evidence from Episcopal Relief & Development's Moments That Matter © (MTM) Program to: 1) Demonstrate faith leaders' central role in translating ECD science and catalyzing normative and behavior change. 2) Explore MTM's evidence-based strategies to mobilize and equip faith leaders as nurturing care champions.

Methodology: MTM's multi-generational social behavior change approach works within trusted faith networks to mobilize faith leaders and ECD promoters to foster responsive caregiving. Through home visits and support groups, caregivers learn about ECD and integrate new parenting practices.

Key Outcomes: 2021 impact evaluation concluded that MTM improved primary caregivers' responsive care and early learning practices, increased use of positive discipline, reduced parenting stress and strengthened livelihoods. External evaluations have found that the majority of MTM-trained faith leaders report positive changes in their own caregiving practices.

Conclusions: MTM has mobilized 1,300+ faith leaders to encourage and support caregivers and ensure sustainable, community-driven change in nurturing care. Faith leaders champion nurturing care through sermons and counseling, elevating ECD science through scripture and tackling sensitive cultural norms.

Recommendations: Maximize faith leaders' impact, exploring pathways to scale through interfaith networks and faith systems. To ensure ownership, contextualization, and ease of use, co-create materials with faith leaders. Test and adapt materials for Hindu and Muslim faith communities. Work with faith leaders to influence national-level policy and budgets through strategic advocacy.

Mr. Girles Shaban, Girl Effect, Tanzania: *What do we Know? Key learnings from Adolescent and Young Parents in Meru district. A Responsive Caregiving Qualitative study.*

Mr. Mike Mwenda Regional Psychosocial Support Initiative (Repssi), Zambia: *Self-Help Group; Breaking the Cycle of Poverty for Adolescent and Young Mothers (AYM's) through Economic Strengthening.*

Mrs. Rita Moses Mbeba, Girl Effect, Tanzania: *An exploratory qualitative study on impediments for adolescents and young parents to practise responsive caregiving in Arusha, Tanzania.*

Introduction/Background: Girl Effect's Mzazi Hodari program contributes to improved health and well-being of adolescents and young adults aged 15-29 and improves their capacity to provide nurturing care for their children. The aim of the study was to understand the local context for designing appropriate approaches.

Objectives/Purpose: This study aimed to examine the barriers to responsive caregiving practice among adolescents and young parents (15-29 years) with children under 3 years in Arusha, Tanzania.

Methodology/Implementation Process: This was an exploratory qualitative research study where participants were purposely selected and divided into a manageable 8 participants per group. A total of 14 FGDs were conducted. Data was transcribed and analyzed using inductive thematic analysis and interpreted.

Key Findings/ Outcomes: Caregiving is viewed as a 'female' endeavor; it is believed that women will take care of children. For example, Maasai men are not actively encouraged by social norms to take an active role in caregiving activities. Cultural beliefs that do not support responsive caregiving activities; For example, when a child cries constantly, it is concluded that the child is charmed.

Insufficient responsive caregiving knowledge and skills: Adolescents and young parents lack knowledge of responsive caregiving. ECD was perceived to involve nutrition and health.

Conclusions: Findings provide important insights and solutions to support interventions designing for improving responsive caregiving practices among adolescents and young parents.

Recommendations: Responsive caregiving is not a single-arm intervention, the study recommends a triangulation approach.

Mrs Rita Moses Mbeba, Girl Effect, Tanzania: *Assessing adolescent girls and young caregivers' drivers for uptake of children's routine immunisation in Tanzania*

Roundtable Discussion 4: Systems Strengthening

Mr. Charles Boniface Fungo, Catholic Relief Services – CRS, Tanzania, Kenya & Mozambique: *Faith-Based Systems Advocacy for Nurturing Care for Early Childhood Development Works: Evidence from Kenya, Tanzania, and Mozambique.*

Investing in early childhood development (ECD) is a strategic approach to eradicating extreme poverty, fostering shared prosperity, and building essential human capital for economic diversity and growth. However, numerous children face developmental setbacks due to inadequate nutrition, limited early stimulation, learning opportunities, and exposure to stress. Meanwhile, 85% of individuals globally identify with a religious faith, creating a substantial platform for positive change. Religious leaders and communities, as formidable institutions, transcend barriers of race, class, and nationality. This initiative aims to enhance the capacity of Diocesan-level Caritas and faith-networks in Tanzania, Kenya, and Mozambique to deliver quality ECD services for caregivers of children aged 0-3. Catholic Relief Services (CRS), supported by the Conrad N. Hilton Foundation, leverages the potential of faith systems and leaders in Kenya, Tanzania, and Mozambique. Collaboratively, CRS and its partners empower faith leaders through capacity-building training, integrating ECD into their practices, and providing ongoing support. In Tanzania and Mozambique, faith leaders reached over 15,000 caregivers and advocated for ECD to more than 15 million congregants. In Kenya, faith networks actively contributed to shaping early childhood development

legislation. This paper underscores the transformative impact of equipping religious leaders with evidence-based messages, aligning with their beliefs, supported by denominational leadership, and allocating resources. Such initiatives could yield substantial and sustainable improvements in ECD outcomes on local, regional, and global scales.

Ms. Rebecca Hickman, SmartStart, South Africa: *The role of systems thinking in unlocking a pipeline of new early learning programmes.*

Dr. Teresa Mwoma, ECD Network for Kenya, Kenya: *Strengthening ECD Systems in Kenya: Study Findings from Baseline Survey.*

Introduction: The Early Childhood Development Network for Kenya, in partnership with Mathematica, has been implementing an ECD Systems Monitoring and Evaluation project since 2022. This was a Conrad and Hilton funded initiative. The aim was to assess progress of systems-level components of the Hilton's 2020-2025 strategy (S25).

Objective: To develop an actionable ECD systems measurement framework and facilitate collection of monitoring and evaluation data on ECD systems progress related to policy, governance, multi-sectoral coordination and financing.

Methodology: A mixed-methods approach was utilized, involving analysis of secondary quantitative data targeting the 47 counties with primary qualitative insights gathered through KIIs and FGDs conducted in four representative counties.

Findings: Kenya developed/reviewed four ECD policies. Ten counties collect nurturing care data. 37,077 teachers in 20 counties were trained on qualifications and CBC implementation. 18,093 health workers in 19 counties were trained on ECD. Only 47% of counties had costed ECD activities for three target departments. Department of health budgeting lacks specific allocations for children below five.

Conclusion: Advocating for an enhanced governance commitment, comprehensive national policy reforms, strengthened multi-sectoral coordination, and a structured financing mechanism with ring fenced funds for ECD is imperative to systematically prioritize ECD at both national and county levels. **Recommendation:** County Governments must enhance support for nurturing-care by prioritizing preprimary teacher and healthcare worker training, and allocate resources accordingly.

Mr. Abdoulie FR JADAMA, University of the Gambia (UTG) The Gambia: *Scaling up learning through play approaches in early childhood education in the Gambia: Baseline survey findings.*

Mr. Heri Ayubu, Children in Crossfire Tanzania (CiC), Tanzania: *Quality improvement of Pre-Primary Education at scale.*

Introduction: Tanzania's commendable inclusion of Pre-Primary Education (PPE) into fee-free basic education led to an enrolment surge and subsequent quality challenges. Children in Crossfire pioneered a scalable, curriculum-aligned PPE model, leveraging locally available resources and peer-led communities of practice, while uniquely placing emphasis on the quality assurance (QA) role of Ward Education Officers (WEOs) within the government framework.

Purpose: Demonstrate a replicable approach to systems strengthening in PPE by supporting WEOs to effectively perform their mandated QA role, in complement to investments in teacher-led and whole school strategies.

Implementation: A 'hub-and-spoke' model across Dodoma Region's >200 administrative wards and nearly 800 public primary schools. One 'hub' school together with designated PPE Teacher in each ward serve as quality champion, extending effective practices to [13-5] 'spoke' schools. WEOs are equipped with QA tools and technical capacity to oversee this diffusion process. At present programme has uniquely achieved full regional scale.

Outcomes: Evaluations using IDELA and BEQI standard tools point to improved teacher practice, better learning environment, improved school management, and gains across various measures of early learning for children.

Conclusion: The findings highlight the significant impact of empowering WEOs to effectively deliver their QA role in the PPE setting. Importantly, PPE quality improvements can be achieved at scale and within the prevailing under-resourced and overcrowded context of public PPE classes.

Recommendations: Alongside prioritising well-established teacher and school strategies, sustained investment is required in ECE-focused professional development of WEOs, as pivotal agents in the education QA framework. This approach should be integrated into education policies and resource allocation strategies, ensuring scalable and sustainable improvement in delivery of the PPE curriculum.

Mr. Jean Marie Vianney Havugimana, FXB Rwanda, Rwanda: *Play Collaborative Approach: An implementation strategy to scale an evidence-based early childhood development (ECD) intervention using government-led child protection volunteers.*

Key objectives: The PLAY Collaborative, a multi-level implementation strategy, tested the scale-up of a family strengthening intervention in Rwanda, Sugira Muryango (SM), which uses a father-engaged, home-visiting model to promote ECD and prevent violence for extremely impoverished families.

Methodology: An embedded implementation and effectiveness trial tested SM effectiveness at scale.

Key findings: Results showed that 2,284 government child protection volunteers helped over 18,000 caregivers build more nurturing, enriching, safer, and child development-conducive home environments. Dissemination and implementation findings rated SM as adoptable, acceptable, feasible, and appropriate and child protection volunteers and caregivers reported high satisfaction with SM.

Conclusion: The PLAY Collaborative was proved to be an effective implementation strategy as a result of its multi-level stakeholder engagement, iterative process of problem solving, core team of local experts, and holistic supervision approach that enabled non-specialists to deliver Sugira Muryango Interventions with quality.

Recommendation: The PLAY Collaborative created strong government buy-in and given its impact there is a need to nationwide scale up in collaboration with NCD and other Government institutions including Ministries. and there is a collaboration with NCD to harmonize content for all IZUs capacity building for nationwide scale using SM approach.

Dr. Svetlana Karuskina-Drivdale, PATH, Mozambique (but with implications for East Africa): *Assessing mental health integration into antenatal and postnatal care (ANC/PNC) in Mozambique.*

Introduction/Background: One in five women in low-resource settings experiences perinatal depression (PD), with deleterious impacts on self-care, adherence to health services, and child health and development. Depressed women are rarely identified and supported through PHC. In August 2022–June 2023, the Mozambique Ministry of Health with PATH refined a protocol to manage PD at antenatal care (ANC) and postnatal care (PNC). 58 nurses at five facilities in Maputo Province were trained to screen women using Patient Health Questionnaire 2, followed by initial counseling and referral to mental health providers.

Objectives/Purpose: Assess a protocol to manage PD at ANC and PNC.

Methodology/Implementation process: Provider performance at baseline and endline was evaluated using a structured observation tool. Interviews were carried out with 12 nurses, five mental health providers, and a convenience sample of 50 clients.

Key findings/Outcomes: 11,042 women (83% of clients) at ANC and 6,065 women (67% of clients) at PNC were screened. 2% were identified with suspected PD at ANC. 74% referred cases were confirmed by mental health providers. Nurse performance scores increased from 68% to 86%. Nurses felt the intervention fell within their scope of work. 74% of clients felt comfortable sharing their problems with nurses.

Conclusions: Integration of mental health into ANC and PNC is feasible in a low-resource PHC setting. Nurses can detect PD with reasonable accuracy.

Recommendations: Mental health screening and counseling should be integrated into PHC through simple tools.

Dr. Given Hapunda, FHI 360, Rwanda and Zambia: *Supporting workforce to implement & scale playful parenting*

Key objectives. To investigate the success of playful parenting programs in building the capacity of the workforce providing service delivery to caregivers at scale by examining: a) the composition of the workforce, b) their own perspectives on their capacity, c) their motivation, and d) the challenges they face. Methodology/implementation process. Methods include a standardized knowledge assessment pre and post training, as well as a survey administered via phone 3 months post training to capture their level of comfort and knowledge with playful parenting principles, the support and supervision they receive, and their experiences in service delivery to caregivers. This is coupled with observations of home visits and group sessions using tools like MDAT, as well as in-depth interviews with a sub-sample of providers. Key findings/results/outcomes/learnings. Data show that the volunteer workforce face challenges sustaining the program following program closeout in Rwanda and home visit content often focuses on topics outside of play & stimulation. In Zambia, CBVs have struggled with keeping up their load of family visits, and at least half of them are not receiving supervision and oversight on a regular basis. A group session delivery modality currently being rolled out offers possibilities for addressing workload challenges and reaching more families. Implications of findings for policy and action. Workforce challenges around reaching families via home visits and needs around supervision raise important questions for system actors on what it takes to in sustain and scale playful parenting.

Ms. Daphne Mugizi, UNICEF, Uganda: *Expanding access to quality ECCE*

Roundtable Discussion 5: Scaling up and Innovating

Dr. Marc Aguirre, Hope Worldwide South Africa, South Africa: *Implementing Corporate Marketing and Communications Strategies to Amplify and Scale Community Advocacy & Reach for ECD Parenting Programs: The Caregiver Learning through Play (CLTP) Example in South Africa.*

Ms. Akwang Beatrice, Ministry of Education and Sports, Uganda: *Stimulating Environment and Number Concept Development in Lira District, Uganda Development in Lira District*

Introduction: This research aims to explore the relationship between a stimulating environment and number concept development among preschool children. A pilot study will be conducted in Lira District, focusing on stimulating environment and number concept development among preschool children. Purpose: Conduct a pilot study in Lira District on relationship between stimulating environments and number concept development through play-based learning and hands-on materials. Objectives/Questions: The objectives include developing comprehensive play materials, designing a physically engaging environment, and fostering collaborative learning and positive social interactions. Methodology: The study will employ a quasi-experimental design over 12 months, involving 32 teachers and 48 children from 8 preschools. Expected Outcome: The expected outcomes are the development of learning materials, an engaging physical environment, and the establishment of collaborative spaces, resulting in demonstrated understanding, engaged exploration, and active participation in mathematical activities. Conclusions: Age-appropriate activities and a stimulating learning environment with math-rich resources are crucial for number concept development. Recommendations: Funding is recommended to support the design of age-appropriate activities, creation of a stimulating environment, and incorporation of numeracy-building activities like counting, sorting, and shape recognition. This project will contribute to evidence-based strategies for optimal preschool learning outcomes and academic success for children

Mrs. Beatrice Nyakwaka Ogutu, Investing in Children and their Societies (ICS SP), Kenya: *Combining parenting education, nutrition counseling, child protection and cash transfer to improve outcomes for children 0-3 Years in Kilifi, Kenya.*

Dr. Hamis Mugendawala, National Planning Authority of Uganda, Uganda: *Policy Conflicts, and Innovations in delivery of Early Childhood Education and Development (ECED) in Uganda: The Double Jeopardy.*

Mr. Joseph Kabanda, BRAC Uganda, Uganda: *BRAC's Two-Generation Model of Holistic Child and Family Development in Ugandan Refugee Context*

Introduction: BRAC Uganda's innovative approach combines Humanitarian Play Labs (HPLs) with the Ultra Poor Graduation (UPG) model to cater to the holistic needs of children and parents in challenging humanitarian contexts. By creating child-friendly environments and empowering parents, especially women, through livelihood support, it aims to foster holistic development.

Objectives: 1. Establish conducive learning environments for children in humanitarian settings. 2. Promote nurturing care for holistic child development. 3. Empower parents through comprehensive interventions. 4. Advance Early Childhood Development (ECD) and Graduation fields in humanitarian settings.

Methodology: The approach involves implementing a play-based curriculum, UPG components, providing play spaces and materials, training play leaders, community engagement, advocacy, and research.

Key Findings: Early results show the effectiveness of two-generational programming in enhancing parental involvement and supporting forcibly displaced children's development. Over 4,700 children aged 3-5 benefit, along with 700 families, integrating social protection, livelihood promotion, financial inclusion, and social empowerment.

Conclusion: The dual-generational approach fills a critical gap in quality care in humanitarian settings, showcasing a comprehensive strategy for caregivers and children's development. Despite challenges, it demonstrates promising results, emphasizing the need for sustained support for scalability.

Recommendations: Scale dual-generational interventions, enhance collaboration, address nutritional needs, ensure equitable access, secure sustainable funding, integrate cultural sensitivity, and provide mental health support.

Ms. Monica Balinako, Kyambogo University, Uganda: *Instructional Media Use and Students' Participation In E-Learning: A Case of ECD Department, Kyambogo University, Uganda.*

Media usage is crucial for national development, addressing digital education gaps, in fulfillment of SDG 4's goal of inclusive and equitable education for lifelong learning. Governments have made significant investments in education to enhance the operating conditions of Educational Institutions. Studies have shown that, pedagogical reforms such as competence based curriculum, policy measures like Affirmative Action, Double shift systems, Universalization of education was implemented in California, Brazil, Ghana, South Africa and Uganda to enhance skilling, marginalized groups and to decongest classes. However, gaps still existed between the utilization of electronic instructional media and students' participation. The purpose of the study was to explore the modes of electronic instructional media being used to promote graduate student participation at department of Pre-primary education, Kyambogo University. A qualitative study design was conducted to give a detailed description of a case study. Interviews were conducted to collect data from the Head of Department and 6 lecturers purposively selected. FGD was used to gather data from 12 students using convenience sampling technique. The study found that Audio Visual electronic instructional media greatly improved students' learning, motivation, engagement, collaboration and confidence, benefiting all graduate students. Focusing on study results, Kyambogo University should consider technical support for lifelong learning, anytime anywhere. Future studies were recommended to explore various student assessment methods using electronic instructional media.

Key words: Electronic Instructional media usage, Students' participation, learning.

Roundtable Discussion 6: Financing

Mr. Gilbert Munyemana, Government and Genesis Analytics, Rwanda: *For the Future: An Investment Case for Early Childhood Development in Rwanda.*

Dr. Moses Emanuel Mnzava, HakiElimu, Tanzania: *The Political Economy of Early Childhood Development in Tanzania Mainland: Status, Practices, Challenges, and Opportunities.*

Introduction: For over two decades ECD has been a public policy priority in Tanzania with notable achievements. Nevertheless, despite concerted efforts to attain universal availability and access to quality ECD services, to-date that remain a distant dream. Through the political economy lens this study investigates why that is the case.

Key Objectives: 1. To describe the Tanzanian Early Childhood Development policy and institutional environment 2. To explore the integration of 'inclusion' in Early Childhood Education. 3. To examine the financing of ECD programs and services. 4. To identify dominant practices in the provisions of ECD services in the country. 5. To scan the level of public awareness and participation towards attaining universal access to quality ECD services. 6. To identify opportunities and barriers towards the attainment of universal quality ECD services. 7. To identify lessons learnt from global ECD policies and practices.

Methodology: A 'descriptive-interpretive' methodology' seeking to portray the nature, availability and access of ECDs services, and unearth related underlying structures.

Key Findings: Preliminary findings indicate strong supportive policy environment across priority ECD sectors and substantial government DPs and NSAs investments. There is however uneven investment across ECD sectors and geographical settings. Further analysis, will examine LGAs delivery of ECD services; household level participation, ECD services coordination, sustainability and monitoring and evaluation of intervention impact.

Conclusion and Recommendations: Development of national essential ECD services and support package. Strengthening ECD services delivery and coordination. Increased investment, particularly in underserved ECD sectors.

Mrs. Catherine Bateta, Save the Children, Rwanda: *Empowering Entrepreneurial Refugee Mothers in Rwanda Through ECD/Daycares.*

Introduction/Background: Access to quality Early Childhood Development (ECD) services plays a crucial role in shaping future learning achievements, income levels, health, and overall development outcomes (Heckman, 2012). During the critical period from conception to three years old, approximately 700 neural connections are formed every second. Currently, parents in Rwanda, including refugees, face challenges in allocating sufficient time to nurture and meet their children's needs due to various commitments in their daily lives. Research indicates that 30% of children below 3 years old are cared for by their older siblings, often not much older than themselves, while 40% are left at home unattended.

Objectives/Purpose: This project aims to improve the quality of ECD services and child development outcomes in Mahama Refugee Camp in Rwanda while stimulating a sustainable marketplace for education finance products in markets considered high-risk by investors.

Methodology/Implementation Process: We effectively tackle childcare challenges by supporting in the establishment of Early Childhood Development (ECD)/Daycare Center within Refugee Camps,

Key Findings/Outcomes: Within nine months, 95% of mothers experienced a 40% increase in profits, enabling them to afford their children's school fees in Mahama Refugee Camp. The findings also indicate improved child nutrition and increased social interactions. These positive outcomes have emboldened us to consider expansion.

Conclusions: Our ECD/Daycare center in Mahama has boosted business revenues, enhanced child nutrition, and increased social interactions. Moving forward, we aim to expand within Rwanda and regionally, contributing to community resilience and prosperity.

Recommendation: Leveraging partnerships with local stakeholders, governments, and investors can facilitate the sustainability and scalability of such projects, ultimately contributing to the long-term socio-

economic well-being of vulnerable communities.

Mr. Emmanuel Munyemana, UNICEF, Rwanda: *An Investment Case for the Future of Early Childhood Development in Rwanda.*

Key objectives: This investment case reinforces the momentum of child-friendly spending, championing increased investments in children to break the cycle of poverty and ensure a transformative impact on initiatives dedicated to fostering the holistic well-being and development of Rwanda's children.

Methodology: The analysis is anchored in the Nurturing Care Framework and meticulously modelled future financing needs. Drawing on cost-benefit and cost-of-inaction methodologies, it delved into the profound socio-economic impacts of ECD interventions in the medium term. In doing so, it assesses the socio-economic impacts of ECD interventions in the medium (up to 2030) and long term (up to 2050).

Key findings: Expanding broad ECD interventions could reduce infant and child mortality rates by 25 per cent and prevent 2.8 million stunting cases; it will help 70,000 additional children to progress through the school system and improve budget efficiency. Moreover, for every one US\$ invested in ECD, US\$54 is generated for the economy in the form of socio-economic benefits. However, the cost-of-inaction is high and amounts to US \$274 billion.

Implications of findings for policy and action. The study recommends increasing the budget for relevant social sectors; supporting the development of costed action plans and efficiency analyses to prioritise ECD interventions. The study strongly advocates for a substantial increase in budget allocation to key social sectors, highlighting the imperative support in developing precision-driven action plans and efficiency analyses to effectively prioritize ECD interventions, emphasizing crucial need to unlock the full impact of ECD for enduring societal benefits.

Ms. Katie Bullman, Genesis Analytics, Tanzania: *Building the Foundations: An Investment Case for Early Childhood Development in Mainland Tanzania.*

Mr. Naison Bhunhu, ZINECDA, Southern Africa: *ECD Financing in Southern Africa*

Roundtable Discussion 7: Governance and Leadership

Ms. Abella Atieno Owuor, Kisumu Medical and Education Trust (KMET), Kenya: *A Coordinated Nurturing Care for Early Childhood Development (NCfECD). implementation through a multi-sectoral lens: Experience of Lake Region Economic Bloc (LREB).*

Key Objectives: This paper seeks to understand the types of support adolescent mothers, need to realize their personal & parenting aspirations while exploring the contextual factors that affect the well-being of their children

Methodology: This was a cross sectional survey using qualitative techniques to collect data on the teen mums lived experiences guided by semi-structured guides for documentation. A purposive sampling method was used and the assessment was open to 100 teen mothers who met the inclusion criteria (being 15-19 years of age and a parent of 0-3 year's child).

Key Findings:1. 54% dropped out of school due to lack of school fees, shame, fear, social stigma and in some cases harassment by the teachers had the desire to go back to school or join a tertiary institution to learn a trade. 2. 33% admitted to not being able to fully concentrate in class as they were worried about their children back at home, and could not practice exclusive breastfeeding for the child while facing difficulty in balancing school and house chores. 3. Key support was financial support, medical care for themselves and their children, food, support for the baby, beddings, clothes, sanitary towels and information/training/mentorship on how to take care of the baby. 4. 69.6% had received SRH education, did not use contraceptives due to misleading information.

Implications of findings for policy and action: Establishment of comprehensive and integrated care programs tailored to the specific needs of teenage mothers, incorporating prenatal education, socio-economic empowerment, parenting workshops, and counselling services.

Mr. Godfrey Mwesigye, International Rescue Committee, Uganda: *Kulea Watoto Advocacy: Championing the two-generation approaches to Early Childhood Development in the refugee setting.*

Background: Kulea Watoto (KW) Advocacy is implemented by a consortium of 5 partners – IRC, AfriChild Centre, KRC, LABE, and MECP. The 3-year project is funded by the Conrad N. Hilton Foundation. KW initiative uses a two-generation approach with an aim of improving early childhood development and transforming livelihoods of refugees and host communities in Uganda.

Advocacy Objective: Advocate for an enabling legal and policy environment for the provision of quality ECD service provision.

Implementation process: Kulea Watoto advocates work closely with the government ministries of Education, Health, Gender, Local Government – as collaborators.

Key findings: Evidence (Mosle & Sims, 2021; Shonkoff & Fisher, 2013) shows that two-generation initiatives are more effective than single-focus programs because the children's outcomes are intertwined with their home environment and reinforce impacts on both parents and children. Coalitions can achieve more in advocacy for ECD compared to the individual organizations working on their own. Local champions contribute to positive advocacy results through engaging the decision makers at the local level.

Conclusion: There is power in collaborating with the government and working on advocacy engagements in a consortium. Local champions can influence decision making at community level.

Recommendations: Invest in quality two-generation programs for ECD and establish the evidence base.

Strengthen collaboration between the government and non-government actors implementing ECD interventions. Strengthen advocacy coalitions for ECD and two-gen models to have strong voices. Empower local champions for two-generation models and ECD to influence decision making.

Ms. Pamela Josephine Anyango, Ministry of Health, Siaya County, Kenya: *Multisectoral approach implementation to enhance nurturing care for early childhood development in Siaya County.*

Mr. Richard Omasete, International Rescue Committee, Uganda, Tanzania and Ethiopia: *System strengthening for continuous professional development in early childhood education (ECE) using learning through play.*

Introduction: Learning through Play is an active teaching and learning method in which children learn through guided, hands-on, meaningful, play-based interactions in safe and inclusive environments.

Objective: To strengthen continuous professional development systems that integrate LtP training, coaching, and mentoring of ECE educators in host and refugee settings.

Methodology: PlayMatters aims to demystify the myth that play does not belong in the classroom by integrating LtP practices in teacher development and management systems in Uganda, Tanzania, and Ethiopia.

Key Findings: A behavioral study conducted by PlayMatters in 2020, revealed a misconception that ECD is expensive and should not be prioritized for funding citing that learners can progress directly from home to primary, moreover, ECE educators lack standardized training.

Findings: Learning through play can be applied across all ages, classes, subjects, and contexts of the Child's social ecological environment i.e. home, school and community.

Recommendation: A call for centralized systemic solutions for ECE educator accreditation.

Mrs. Beatrice Nyakwaka Ogutu, Investing in Children and their Societies (ICS SP), Kenya: *Strengthening Government-led intersectoral workforce to accelerate scaling up of ECD based outcomes in low resource settings.*

Ms. Khadija Abdulrahim Karama, Catholic Relief Services, Kenya: *County Government Investing in ChildCare.*

Dr. Susan Greyling, Northwest University (NWU, Potchefstroom Campus), South Africa: *Management Training for Foundation Phase teachers who strive towards Principal positions: Case study in the NorthWest Province.*

Roundtable Discussion 8: Monitoring progress

Ngoma Mwimbu; Joke Van Belle; Loy Lin Apiyo; Liliose Mukantagwera, VVOB - education for development, Rwanda, Uganda, Zambia: *Scaling and institutionalizing play-based learning in ECE. Lessons from Rwanda, Uganda and Zambia based on the 'ECE Systems Learning through Play Readiness' tool.*

Ms. Agatha Kafuko, The AfriChild Centre Uganda: *Access Challenges and Availability of Early Intervention Services for Children with Developmental Disabilities in a Ugandan Refugee Settlement.*

Introduction: Globally 52.9 million children have developmental disabilities and 73% of these are in the Sub-Saharan Africa region. Neurodevelopmental disability affects key aspects of cognition, communication, behavior, and motor skills. Children in refugee settlements are at a higher risk of developmental disabilities due to multiple factors such as nutrition, trauma, and limited access to healthcare. While early intervention is important to mitigating effects of developmental disabilities, and enabling independence, children in refugee camps face significant barriers to accessing services.

Objective: To investigate early intervention services for refugee children with developmental disabilities (CDD) and delineate barriers in accessing these services.

Methods: The research was conducted in Kyaka II refugee settlement. Qualitative data collection involved 4 focused group discussions with 34 caregivers, and 11 interviews with service providers, analyzed using a reflective thematic approach.

Findings: Despite a range of services like healthcare, rehabilitation, community screening, early childhood education, specialized services for CDD are lacking. Barriers to access exist at personal, interpersonal, community, and institutional levels, including inadequate awareness of childrens' conditions, financial constraints, negative attitudes, family conflicts, stigma, and service delivery issues. Institutional challenges include fragmented intermittent services and drug shortages.

Policy Implications: Integration of specialised services, and targeted interventions tailored to families with CDD to mitigate livelihood challenges and combat stigma.

Ms. Tina Asnake Belaynehe, World Bank, Uganda, South Sudan, Sudan, Global: *Effects of Early Childhood Development (ECD) programs on the socio-emotional well-being of children and caregivers in refugee and forced displacement settings.*

Early childhood is a crucial period during which children learn the necessary skills to succeed in life. Socioemotional wellbeing of children and their caregivers not only supports this learning, but also ensures strong health and nurturing relationships, among other long-term benefits. Forcibly displaced children face significant and multifaceted trauma and stress, which can have lasting deleterious effects. It is thus crucial that interventions for refugee children can support and nurture children's socioemotional wellbeing. This paper presents a review of the evidence of early childhood development (ECD) interventions' effectiveness in supporting the socioemotional wellbeing of forcibly displaced children and their caregivers. A literature review and interviews with experts informed the following findings and recommendations. First, parents' mental health is highly correlated with their ability to care for their children, so ECD interventions must target both the caregivers and the child. Next, ECD interventions, even those implemented amidst challenges, have demonstrated promising outcomes in caregiver and child wellbeing and fill important gaps to build school readiness and developmental foundations, so interventions' spaces, content, and materials must be well-designed, child-friendly, culturally sensitive, and trauma-informed. Many low-cost modalities with various in-person and remote approaches facilitated by a trained and empowered workforce have proven to be scalable, making them an attractive solution for policymakers. Finally, sustainable funding to retain the realized impacts is a common challenge across interventions, so it is crucial to continue generating evidence and advocating for increased investments towards the early years in fragile settings.

Dr. Eunice Mueni Williams, University of Cambridge, Sub-Saharan African countries and Tanzania, Kenya and Uganda: *Taking Stock of Research Evidence on Early Childhood Development in Eastern African Countries: Comparative Analysis of both Published and Unpublished Research.*

Mrs. Mary-Ann Scheiner, UNICEF, Ministry of Community Development, Gender, Women and Special Groups, Oxford Policy Management THRIVE Project, Tanzania: *Situation Analysis of ECD in Tanzania Mainland: Policy and Implementation Gap Analysis.*

Introduction: As commitments made in the Tanzania Generation Equality Programme and the National-Multisectoral ECD Programme (NM-ECDP), the government of the United Republic of Tanzania is accelerating ECD progress to scale multisectoral childcare programs.

Objective: To showcase evidence of scalable, ECD models accelerating gender equality as fundamental to child rights.

Methodology: The Parenting for Lifelong Health programme in Tanzania is a parenting solution to promote healthy child development and prevent violence in the home and wider community throughout the life course.

Findings: Evidence from the pilot shows that parents/caregivers increased their knowledge in gender-transformative parenting, benefiting the whole household and communities.

Conclusions: Empowering parents and caregivers with gender-transformative parenting skills is key to transforming imbalanced power structures in families, preventing violence, changing attitudes on social and gender norms and overall approaches to parenting.

Recommendations: Adapt the parenting programme for parents/caregivers of children under 5 years of age to promote positive gender socialization. Engage and promote fathers and men's increased involvement in parenting programmes and childcare. Empower frontline workers and implementing partners to support parents/caregivers to employ gender-transformative parenting approaches.

Mr. Alex Alinaitwe, The Africhild Centre Makerere University, Uganda: Evidence review and synthesis on two generation intervention programming- lessons for Kulea Watoto Project in Uganda.

Introduction: The two-generation approach focuses on providing support and services to both parents and children simultaneously. The purpose was to produce existing evidence to inform the co-creation process of the entire project and specifically to; 1. Find out what works for a two-generation approach. 2. Explore linkages between livelihood programming, and early learning. 3. Understand best practices in integrating nutrition in Economic Recovery and Development (ERD)/food security

Methodology: 1. Mapping both grey and peer reviewed literature. 2. Identification of research questions. 3. categorizing studies per research question. 4. Data Extraction. 5. Summarising reports

Key findings: 1. Reasons why two-generation initiatives are considered to be more effective. 2. Children's outcomes are intertwined with their home environment. 3. The quality of a child's "proximal" is crucial for his/her development. 4. Serving parents and their children impacts on both parents and children. 5. Factors that influence two generation programs include; Intensity, Quality, Intentionality and Program modality.

Conclusions: 1. Contextual Adaptation to social culture is key. 2. Women empowerment is key. 3. Need to pay attention to quality, modality, and intensity. 4. Measure and account for both children and parents outcomes. 5. Aligning and coordination with other actors.

Recommendations: 1. Boost multi-stakeholder coordination. 2. Monitoring interventions that use the two-generation approach. 3. Need for integration of a two-generation approach in the national and sub national programming. 4. Increase the investment in early childhood development services

Dr. Deborah Rebecca Kyazze, National Curriculum Development Centre, Uganda: *Strategies and challenges in advancing early childhood care and education through implementation science, a case of Uganda.*

Introduction: This study investigates strategies and challenges in advancing Early Childhood Care and Education (ECCE) through implementation science.

Purpose: The study aims to identify effective strategies for implementing ECCE initiatives, assess challenges

in the implementation process, and provide recommendations for enhancing the integration of research findings.

Theory: The study is underpinned by the social cognitive theory and Implementation Science, which focuses on studying the methods, strategies, and processes involved in successfully implementing evidence-based practices in real-world settings.

Methodology: A mixed-methods approach was used, involving qualitative interviews with key stakeholders and quantitative data analysis. The sample size of 236 participants was determined using Krejcie and Morgan's table.

Results: Comprehensive capacity building for stakeholder collaboration, evidence-based curriculum development, and supportive learning environments were identified as effective strategies in advancing ECCE. These strategies positively influenced children's holistic development and learning outcomes. Contextual factors, including cultural diversity and socioeconomic disparities, also posed unique challenges.

Conclusion: This study contributes to the progress of ECCE by addressing the identified challenges and implementing the recommended strategies. It underscores the importance of incorporating evidence-based practices and implementation science to achieve optimal outcomes for children's development and well-being in ECCE settings.

Recommendation: To advance ECCE, recommendations include increased investment in research and implementation science, fostering stakeholder collaboration, developing comprehensive policies and guidelines, providing ongoing professional development and training, and considering contextual factors in intervention design and implementation.

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