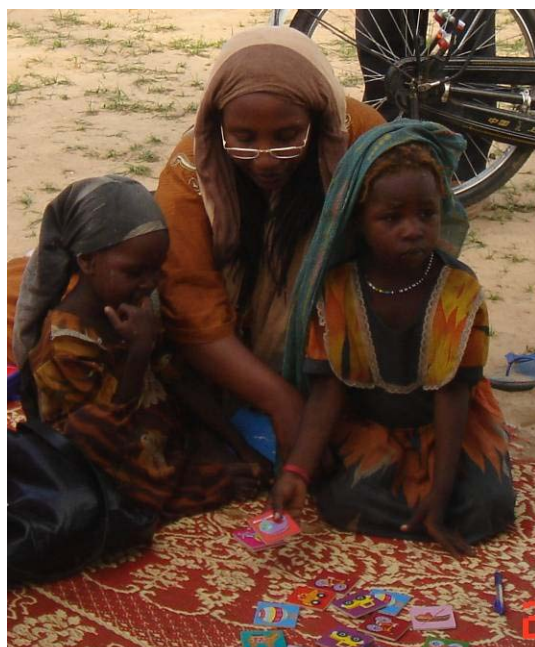


# Final Report of the ECD Kit Pilot

A Synthesis of Pilot Results for the  
Early Childhood Development Kit for Emergencies



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This document reflects the opinions of the author and the diverse perspectives shared with the author from within the global early childhood community, and does not necessarily represent the opinions of UNICEF.

## **Table of Contents**

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Introduction and Background .....	4
Kits in UNICEF Emergency Response.....	4
Early Childhood Development in Emergencies.....	4
An ECD Kit for Emergencies .....	6
Piloting the ECD Kit.....	7
Pilot Process.....	7
Implementation of Pilot by Country .....	8
Results of the Pilot: Training and Guidelines for Caregivers .....	10
Training.....	10
Guidelines for Caregivers .....	12
Providing Needed Support for Caregivers Through Training and the Guidelines .....	15
Results of the Pilot: ECD Kit Contents.....	16
Items for Caregivers.....	16
Items for Children 0-3.....	18
Items for Children 3-6.....	21
Results of the Pilot: Monitoring and Evaluation.....	25
Critical Issues for Finalising the ECD Kit for Emergencies.....	26
Appropriateness of Kit for Children of Different Ages .....	26
Appropriateness of Kit for Children with Special Needs .....	26
Potential for Sustainability.....	26
Appropriateness of Kit to Diverse Cultures and Contexts.....	27
Global Distribution vs. Local Procurement .....	28
Conclusion .....	30
Recommendations: ECD Kit Training and Guidelines for Caregivers.....	30
Recommendations: ECD Kit Contents .....	32
Recommendations: Monitoring and Evaluation .....	35
Immediate Actions .....	36

## **Introduction and Background**

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### **Kits in UNICEF Emergency Response**

UNICEF has long used kits in emergency response to provide the supplies necessary to initiate immediate protective and supportive programming for children, families, caregivers and teachers. Most famous, perhaps, is what is commonly referred to as the School in a Box (SIB) pioneered by UNICEF and UNESCO for use in Somalia and Rwanda (UNICEF, 2000). This kit includes blackboard paint, writing materials and other supplies necessary to re-establish educational processes when schools or school supplies are not available. UNICEF offers several standardised kits for global use and some UNICEF country offices have supported the creation of local kits.

Despite the wide use of kits, most agree that local procurement of materials is preferable whenever possible, as local materials are more likely to be culturally-relevant, economical, appropriate to the specific needs of the current emergency, and supportive of the growth of the local economy and of the development of new skills, particularly among youth. However, in situations when immediate response is necessary and when local procurement is impossible, kits are promoted as a practical means of supplying the materials necessary for protecting and supporting children.

### **Early Childhood Development in Emergencies**

Children living through an emergency often do not receive the care and education they need because normal caregiving networks and schooling systems are interrupted, children are assumed to be resilient (Perry, 1995), and caregivers are forced to deal with the logistics of survival and their own trauma (Sinclair, 2002).

However, few realize that the conditions created by conflict or other emergencies take an even greater toll on younger children, because they affect the organization of the forming brain, interrupting development processes, sometimes irreversibly. Perry's (1995) study of neurodevelopment notes that when children experience trauma, "elements of their true emotional, behavioural, cognitive and social potential are diminished -- some percentage of capacity is lost, a piece of the child is lost forever" (¶14). An emergency can thus influence the development of an entire generation, undermining long-term goals for the development of human capital, civic participation and economic productivity - unless immediate action is taken to protect and support young children and their caregivers.

Early Childhood Development (ECD) programming in emergencies must include complementary services that address children's needs holistically within the context of their community, culture and family:

- . *Child Protection* by offering a safe secondary caregiving environment, and by supporting parents and caregivers in their caregiving responsibilities
- . *Early Intervention* to avoid the accumulation of trauma and risk factors in the lives of children
- . *Healing* through expression in play and art
- . *Consistency* through the creation of routines and a return to normalcy for children, parents and caregivers

- . *Psychosocial Support* for children, parents, caregivers and teachers
- . *Time and Space for Parents and Caregivers*, including older siblings, to address their own survival and recovery needs
- . *Child Development* in all realms, including language, social, cognitive, emotional, and motor skills, for children served and their older sibling-caregivers
- . *Community Cohesion* among affected populations through involvement in a politically neutral activity
- . *Training and Productive Activity* for adults working to staff and supply ECD programmes

The ECD Kit was launched to support programming that could address these critical needs for young children in emergencies.

This report will present a synthesis of results from the recent UNICEF pilot of the ECD Kit for Emergencies. Pilot results include the training process, the Guideline for Caregivers booklet, the ECD Kit contents themselves, and the monitoring process. For each of these areas, comments from pilot participants will be augmented by comments from UNICEF staff and partners at the ECD Kit Pilot session during the 2006 Global Consultation on ECD (GC) and meetings during the Consultative Group on ECCD Annual Consultation, both in New York. The report will conclude with initial recommendations for finalising the ECD Kit.

It should be mentioned that the pilot process is still underway in many countries. The ECD Kit pilot process has taken longer than anticipated, mostly due to unstable conditions in pilot countries. However, due to high demand globally for the ECD Kit, the ECD Unit will work with the Supply division to finalise the kit based on existing feedback so that the kit can be made available for immediate distribution where it is needed.

## **An ECD Kit for Emergencies**

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When the current ECD Kit pilot was initiated, the idea of a standardised ECD Kit had been considered in UNICEF for a number of years. A 1998 working paper for the UNICEF Office of Emergency Programmes suggested that the School in a Box strategy could be revised to address the needs of younger children (Landers). In 2001, the UNICEF Education team developed a list of potential components for an ECD Kit in consultation with several countries that had implemented programming for young children in emergencies. A number of individual countries (Bangladesh, South Africa and Kosovo) were using locally-developed ECD kits, although these were not specifically developed for emergency use (UNICEF, 2005). At that time, there was not sufficient evidence of demand and a kit was not developed. In 2003, UNICEF recommended a review of the School in a Box and Recreation Kit for possibilities of serving younger children. Options considered were the identification of the included items that would also be appropriate for children 0-6 and the development of add-on kits that would enable programmes to include younger children.

In July 2004, UNICEF's IECD (Integrated Early Childhood Development) Unit elected to complete a needs assessment among countries facing emergencies and/or those with a CAP (UN Consolidated Appeal) or included in the HAR (Humanitarian Action Report).<sup>1</sup> The needs assessment indicated that:

- . a majority of countries (83%) believe an ECD Kit is needed to help establish play and learning activities for young children and their care providers in emergency situations;
- . an ECD Kit could be used in multiple contexts, including child friendly spaces, child care centres and refugee/IDP camps;
- . training for care providers, NGO workers, preschool teachers, etc. would be necessary to ensure effective use of an ECD Kit (UNICEF 2000).

The IECD Unit, therefore, developed an ECD Kit designed to provide the materials necessary to facilitate play and learning activities for children from birth to age six, ensure safety and hygienic conditions, and support teachers and caregivers in facilitating programming under situations of crisis. The kit was designed for use in 'emergencies and beyond,' which also includes post-crisis transition, reconstruction, and any situation where materials for young children are simply not available.

The ECD Kit is packaged in an aluminium trunk, with a total weight of 33kg (73lb). Kits are designed to serve groups of 30 children at a time. Kits cost 350 USD, to which an estimated minimum of 100 USD in freight is added.<sup>2</sup>

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<sup>1</sup> The UN releases a UN Consolidated Appeal in emergencies, once the government acknowledges the situation as an emergency and requests UN assistance. The Humanitarian Action Report is an annual UNICEF-specific document that outlines the annual funding needs of various countries in emergency situations.

<sup>2</sup> Freight costs vary depending on distance and mode of travel. Based on short-term use of the current items in the ECD Kit and assuming two groups can be served, the cost per child is approximately 7.50 USD; if programming is arranged to serve four groups, cost per child is reduced to 3.75 USD. However, thorough costing exercises would be required to determine true costs; the materials are highly durable and designed for long-term use, which would reduce the per child costs over time, while the fact that several items are consumable and require replacement would add to costs over time.

## Piloting the ECD Kit

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### Pilot Process

Any Kit developed for global use should undergo a thorough piloting process in countries with diverse cultures, physical characteristics, economic and political contexts, and experiences with conflict and other emergencies. A pilot process for the ECD Kit was proposed for seven countries, representing four of UNICEF's seven regions:

The Americas and Caribbean Region (TACR)	Jamaica
	Guyana
Regional Office for South Asia (ROSA)	Maldives
Middle East and North Africa Region (MENA)	Iraq
West and Central Africa Region (WCAR)	Chad
	Liberia
	Congo

The primary goal of the pilot was to gather field experience with the kit to assess its relevance and utility in emergencies and beyond. Additional benefits were the opportunity to increase the number of local professionals trained to support ECD in emergencies, build country-level knowledge on providing ECD trainings nationally, and create a cadre of people invested in emergency preparedness and programming.

The pilot process included five stages: Planning, Orientation and Training, Implementation of Kit and Monitoring, Evaluation, and Final Revision, described in detail below.

- *Planning* During the Planning stage, country offices identified the sites for piloting as well as national and local coordinators to oversee the pilot, facilitators to train caregivers on use of the kit, and the caregivers who would be implementing the kit with children and families in diverse settings.
- *Orientation and Training* The two-tier Orientation and Training stage was designed to provide necessary information and training to stakeholders at all levels. The orientation of coordinators and facilitators was designed to share principles of adult education and participatory learning and communication techniques. A sample workshop agenda for the orientation of coordinators and facilitators was provided. Facilitators then provided trainings to caregivers, introducing the Kit to these ECD professionals and building their knowledge of the unique needs of young children in crisis situations.
- *Implementation of Kit and Monitoring* ECD Kits were distributed to selected sites with plans for an implementation over 4-6 weeks. During this period, weekly monitoring forms were to be completed by caregivers, then collected by facilitators. At the end of the pilot, facilitators were to interview care providers, parents and children regarding the use of the Kit.
- *Evaluation and Reporting* Facilitators and UNICEF Programme Officers were to evaluate the results of the pilot through observation and assessment of monitoring forms and interviews, then prepare a final report for UNICEF HQ.
- *Final Revision* The results of the pilot and discussion among the experts participating in the 2006 Global Consultation on ECD would be used to revise and finalize the ECD Kit for distribution and use.

The full pilot process began in 2004 when the ECD Unit conducted the needs assessment and offered ECD Kits to countries interested in participating in the pilot. Selected pilot countries were those first to submit a request for ECD Kits, until the total available of 200 kits had been allocated. Planning and implementation of pilot activities occurred at the country level and was scheduled to occur during the first half of 2006, with plans for the revised ECD Kit to be finalized and available for distribution by the end of the year.

### **Implementation of Pilot by Country**

Familiarity with the circumstances of the pilot in each country is necessary to understand the pilot results. The process did not occur precisely as planned in every country, and is still underway in several countries. However, important lessons can be learned from each case, including those countries where it has not yet been possible to complete the process. Following is a summary of pilot implementation in each participating country.

In Jamaica, it was decided that the Kit pilot process should include sites that have provided services during past emergencies, but that it should also include sites without such experience. Sites were located in both urban and rural settings and included both formal, centre-based care and more informal settings. Five facilitators and 14 caregivers were identified to implement the pilot over six weeks from May to July 2006. The process was completed successfully and 80% of monitoring forms were received. The country office submitted a final report and presented findings at the Global Consultation on ECD.

Initially, Guyana represented a non-emergency context, yet the country suffered its first emergency in 100 years with the floods of early 2005. Some parallels to emergency contexts were created by repeated flooding in early 2006, local violence, ethnic strife and political uncertainty due to an upcoming election. Selected caregivers came from sites in both urban and rural locations. A variety of difficulties, including concerns about security and about low demand for services in rural areas, twice forced the shifting of pilot site. As a result, the caregiver training and kit implementation was completed in one intensive week. Guyana submitted a final report and presented findings at the Global Consultation on ECD.

The Maldives requested ECD Kits for implementation in the ongoing recovery and reconstruction from the 2004 tsunami. The kit was tested in tsunami-affected preschools and health posts as well as in IDP camps where child-friendly spaces were being established. The pilot process was not completed and no formal reporting occurred but some preliminary feedback is available from use in preschools and IDP camps.

Security concerns in Iraq delayed completion of the pilot in that country. However, Iraq was able to engage in the Planning and Orientation stages of the process and presented findings at the Global Consultation on ECD. As this report is being finalised, UNICEF Iraq is initiating the Caregiver training portion of the pilot.

**Image 1: Coordinators from Iraq Review ECD Kit Contents**



Photo Credit: Maria Klappe

Prior to the official pilot process, a preliminary version of the kit was presented in a refugee camp in Chad near the Sudanese border. Trained caregivers were already providing preschool classes in the camp, although they had no materials to support or stimulate activities. These

caregivers were asked to provide feedback on the kit and its proposed use; this information was summarized by UNICEF HQ in a case study on this initial pilot process. Coordinators from Chad joined those from Iraq for the orientation but findings were not presented.

Due to the security situation in both Congo and Liberia, the ECD Kit has yet to be tested.

While unfortunate that complete results were not available from contexts facing chronic or current crisis, it is precisely the instability and insecurity of these contexts that create the strongest argument for a readily-available and easily-deployed vehicle for initiating programming to support and protect young children.

The following sections present the results of the ECD Kit pilot, based on all available feedback from pilot countries and contributions from discussion at the 2006 UNICEF Global Consultation on ECD and the Consultative Group on ECCD Annual Consultation. The report concludes with recommendations for the administration and implementation of the kit and the finalisation of the kit contents so that the kit can be made available to the countries requesting kits for immediate use.

## **Results of the Pilot: Training and Guidelines for Caregivers**

This section will consider the two areas related to the preparation of pilot participants for use of the ECD Kit: the training of facilitators, coordinators and caregivers, and the Guidelines for Caregivers booklet that is included in each kit. First reviewing pilot country experiences and responses to the suggested training agendas, this section will then review the Guidelines booklet. Recommendations for finalising ECD Kit training and Guidelines will be considered in the conclusion to this report.

### **Training**

Feedback on the training process is available from several countries. Four out of seven pilot countries (Guyana, Jamaica, Chad and Iraq) completed the Orientation for Coordinators and Facilitators, while both Guyana and Jamaica also completed the Training of Caregivers. Iraq is currently implementing this training but feedback is not yet available.

Lessons learned from training during the pilot process address two issues: i) the sample training agendas developed by UNICEF HQ for provision to all country offices requesting the kit, and ii) the coordination, administration and monitoring of training at regional and country levels. This section primarily focuses on the training agendas so that UNICEF HQ can revise these for global use, feedback from pilot experiences on local administration and monitoring will be shared so that these lessons will be available during future implementation experiences.

Sample agendas were created and distributed to pilot participants for both the 'Orientation Workshop for Coordinators and Facilitators' and the 'Caregiver Training.'<sup>3</sup> The agendas include references to available resources, such as relevant modules from the ECD Resource Pack, to help facilitators implement the trainings, and address the following topics:

- . ECD and child rights
- . Children's needs in emergencies
- . Therapeutic language for children
- . The healing role of play and art
- . Creating an environment for children
- . Implementing ECD in emergencies
- . Needs assessment, monitoring, evaluation and reporting
- . Planning for country implementation of ECD in emergencies

Training structures and timelines varied by country, influencing the content and methodologies used. In Guyana, the training process had to be restructured to fit within the limited timeline remaining after the pilot site was switched twice. Both the training and implementation of the kit with children occurred during one week, blurring the lines between the two. Caregiver comments suggest they viewed the full week as training, and found it an intensive and useful process, with the only complaint being that there was little time available for making materials from local resources. In Jamaica, the time in

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<sup>3</sup> Agendas are available in Appendix II.

formal training was also shortened, with some activities completed in under half the time allocated. The fact that the two countries where caregiver trainings occurred structured these trainings differently suggests that it would be beneficial to collect information on the effectiveness of each model to share with others in the future.

In general, the responses to the training agendas were quite positive, although each country contributed unique topics and activities to the training agendas. Because only two of 31 participants from Iraq were familiar with the Convention on the Rights of the Child (CRC), the portion of the agenda dedicated to child rights received additional attention there. Coordinators in Jamaica also included additional information about child rights. After discovering that participants equated ECD with preschool, trainers in Iraq added a section that provided information on ECD as an integrated field that addresses early stimulation at home, health, nutrition, protection, education and other developmental needs. In Guyana, some caregivers withdrew from sessions related to psychosocial support as it recalled their own trauma from the recent floods. The likelihood that this will be an issue in many emergency contexts suggests that sample agendas might do well to incorporate and address caregivers' needs for psychosocial support. The positive feedback on sample agendas demonstrates that these, with minor revisions, should continue to be offered to country offices requesting the ECD Kits. However, the diverse experiences in trainings also suggest that coordinators should be encouraged to revise the agendas to meet local needs, providing the skills and preparation caregivers will need for sustainable programming in their context.

Different training methodologies were used in Jamaica and Guyana to accommodate local training styles. Participants from Jamaica felt the training methods and activities were appropriate, and found that interactive elements of the trainings were the most effective. In contrast, the training in Guyana used a more formal approach, as that was deemed more appropriate for caregivers in that context.

The pilot process suggests that training will be even more successful when initiated in advance, as incorporated into a larger emergency preparedness/response plan that includes the participation of local/regional actors from various levels. UNICEF Jamaica plans to promote the development of a local training informed by the ECD Kit training agendas, and to fund trainings in collaboration with international partners, the government, Jamaican Red Cross, and other NGOs. Such efforts to coordinate emergency training and response at country and/or regional levels will increase possibilities that ECD programming will be thoughtfully integrated in the emergency response efforts by local, regional, national and international players.

Finally, actors at all levels will benefit from information and guidance. Local coordinators will benefit from good practices and lessons learned elsewhere, if such information is compiled and available. For example, reports from the Maldives suggest the difficulties of initiating psychosocial interventions and creating child-friendly environments in a country without a prior history of this type of early childhood programmes. Some success was achieved by building interventions on programmes, such as preschools and health posts, already present prior to the tsunami. Implementing

countries can benefit from lessons learned elsewhere, yet coordinators will also need to determine how best to customise ECD Kit use to their contexts. Training, ongoing support and monitoring systems should be influenced by global experience and local accommodations to ensure successful and sustainable implementation. UNICEF may wish to consider how best to support these efforts, including through the collection and dissemination of lessons learned, in a decentralised organisation.

### **Guidelines for Caregivers**

Feedback on the Guidelines is available primarily from those pilot countries that completed the pilot process; however, comments have also been submitted from several other pilot countries and from experts familiar with similar guidelines available from UNICEF and other organisations.

The Guidelines for Caregivers booklet provides background information on child development and responses to trauma, as well as concrete ideas for talking to children, creating safe environments, discipline, making materials from locally-available resources, and play activities using the materials included in the kit. The Guidelines is a 30-page booklet written in English and included in every ECD Kit. The body of the document is divided into three sections:

- . What Children Need in Emergencies,
- . Organising Activities with Children, and
- . How to Make Play Materials Locally.

The remaining half of the booklet is an Annex devoted to a list of 27 clearly-outlined play activities utilising the kit materials, followed by a listing of the materials.

The Guidelines booklet received positive feedback from pilot participants in Guyana and Jamaica. In Jamaica, 100% of caregivers found all three sections of the report helpful; their comments included: “It does not give you limitations. It helps to broaden my imagination to create and develop activities for the children.” and “It inspires creativity as well as assists the development of focus. Moreover in a genuine unstable situation this would provide great occupational therapy.”

Perhaps because both are English-speaking countries, neither Jamaica nor Guyana commented on the use of English as the language of the Guidelines. Indeed, while use of English is quite common at the international level, few national staff and local caregivers will understand more than the illustrations. UNICEF Iraq had the draft Guidelines translated to Arabic as none of the caregivers spoke English. The section on creating home-made materials is illustrated with pictures and the Annex uses simple, clear English to describe activity ideas, yet the remainder of the document requires a strong facility with the English language.

The 6-page School in Box (SIB) Guidelines serve a different purpose than the ECD Kit Guidelines, as they provide only basic information on the purpose, contents, administration and ordering of kits. They are intended for UNICEF country-level staff, who are to develop, in consultation with national/local authorities, a teacher’s guide in the appropriate languages. In contrast, the ECD Kit Guidelines were intended to provide

the comprehensive guidance responders and caregivers would need to initiate programming immediately. However, the exclusive use of English severely limits the audience for these guidelines. Some have suggested that, since the SIB Guidelines are available in English, French and Spanish, the ECD Kit Guidelines should be offered in at least as many languages; staff in Iraq and Chad also highly recommend translation to Arabic. In addition, many have suggested that the Guidelines use illustration throughout the booklet, as even translation to local languages will not facilitate the Guidelines' use by caregivers who are illiterate.

The information on creating materials out of local resources was highly popular, as these

**Image 2: Toy Truck Made from Local Materials in Chad**



Photo Credit: Nurper Ulkuer

toys are inexpensive, familiar, and the process of making them contributes to an interactive relationship between children and their caregivers. Iraq greatly appreciated this section, and wished the emphasis on the use of local resources had been stronger in other sections. In Jamaica, 93% of caregivers reported making play materials with local resources. This is also the only illustrated section of the Guidelines, enabling caregivers who do not speak English to use this resource. Finally, the following section notes caregiver requests for additional materials, many of which could, in fact, be made from local resources in most contexts. This suggests that an expanded version of this section would increase the utility of both the Guidelines and the ECD Kit.

Experience suggests that even trained ECD caregivers require guidance and ideas for creative use

of materials (Sinclair 2001). Facilitators in Iraq found that caregivers identified only very limited uses for the materials included in the Kit. In contexts where the pilot was implemented, the Guidelines' Annex did seem to have a significant impact on caregivers' development of activities and materials for use with children, and many suggested the Annex be further developed. In Jamaica, 100% of caregivers used the activity guides in the Annex and caregivers requested instructions for materials for which activity ideas had not been supplied, such as the matching game. Caregivers in Chad engaged immediately with the materials but the matching game also caused confusion in this context. However, the creation of an entire book of activity ideas by caregivers in Guyana serves as a

reminder of the expertise and creativity of caregivers. Both the training and Guidelines can honour this expertise by providing useful guidance and new ideas rather than rigid instruction.

There were few comments on the presentation of the Guidelines, although caregivers in Guyana suggested that key information on durable material would ensure use for long-term reference. Other experts in the field suggested that a laminated version of the full Guidelines would greatly improve the usefulness and permanence of this booklet.

Some suggestions were made for adding content to the Guidelines. For example, participants in Jamaica requested information on different learning styles. Participants in both the pilot project and the Global Consultation agreed that attention to children with special needs was sorely missing. Caregivers everywhere benefit from training on how to adapt materials and activities for children with unique needs; this seems an even more critical component in emergency contexts.

Surprisingly, the list of Kit contents received more comments than any other portion of the Guidelines. First, the contents listed were somewhat different from the actual Kit contents, causing participants confusion. In addition, it was not always obvious which material corresponds to the item name used by Supply. The similarities between wood blocks and cubes, for example, created some confusion. Regarding the first point, this review found that the list of Kit materials provided in the Guidelines was a prior draft. Caregiver comments also suggested that the division of materials by age was not appropriate. First, the list did not designate materials as appropriate for both the 0-3 and 3-6 groups, when, in fact, many items could be used effectively with both groups. Second, it was suggested that the strict use of age to define appropriate materials might not be desirable, given that some children will be at developmental stages below their chronological age. However, safety is a key issue and the Guidelines must indicate which age groups can safely use each material. It seems that the trainings and narrative portions of the Guidelines may be best suited to reminding caregivers to adapt activities and material use to the unique needs of each child, while the list of kit contents can convey precise safety information.

Experts both within and outside of UNICEF have suggested that a revision of the Guidelines would be appropriate. Feedback from pilot participants has focused on revisions and improvements to the current Guidelines, as noted above. Others, however, have suggested that the ECD Kit Guidelines should be revised within a broader effort to compile the best guidance for early childhood caregivers in emergencies. Such an effort that would consider the coordination of similar booklets developed by various agencies and the 2007 review of the UNICEF CCCs.<sup>4</sup> Although this has been proposed and funded, and an initial CCCs for ECD has been drafted, this approach to revising the

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<sup>4</sup> The Core Corporate Commitments outline the initial, life-saving interventions that will structure UNICEF's emergency response in the first 6-8 weeks, and then describe the broader spectrum of activities that may be added. The initial version of the CCCs did not include ECD activities but the ECD Unit has been invited to contribute text on early childhood for the 2007 revision.

Guidelines would indeed be lengthy.<sup>5</sup> If, as appears likely, UNICEF elects to finalise the ECD Kit before such a process can occur, the organisation may wish to make suggested revisions to the current Guidelines while coordinating a more thorough revision process for the coming year.

### **Providing Needed Support for Caregivers Through Training and the Guidelines**

It may be because the ECD Kit Contents are concrete, colourful items that they received considerably more attention in pilot reports and presentations than did the training and Guidelines. However, those same reports and presentations demonstrated precisely how critical the training and Guidelines are.

Participant descriptions of the benefits of the ECD Kit pilot focused far more on caregiver knowledge and children's behaviour than on the availability of new materials. Indeed, the materials can be used to expand children's skills and abilities, but only within a safe and welcoming environment and supported by caregivers through warm and positive interactions. The training and Guidelines provide information and guidance to support caregivers in creating these environments.

In order to sustain supportive ECD programming, however, caregivers also need support, particularly in emergency contexts, where they are often dealing with their own trauma as well. Such support should be part of training and the Guidelines, and should continue through ongoing supervision and monitoring. Without a formal monitoring system, it is unclear how coordinators can assess the needs of caregivers, whether related to psychosocial support, use of materials, or interactions with children. After the following review of kit contents, this report will return to the issue of monitoring in further detail.

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<sup>5</sup> The newly-convened ECCD in Emergencies Working Group of the Consultative Group on ECCD has proposed this review and coordination of the documents used by organisations working in this field.

## Results of the Pilot: ECD Kit Contents

Feedback on the physical contents of the ECD Kit comes from pilot participants from Jamaica, Guyana, Chad, Maldives and Iraq, as well as from early childhood and emergency response experts participating in the 2006 Global Consultation on ECD and the CG Annual Consultation.

Overall participant responses to the set of materials supplied in the ECD Kit were positive and included praise for the contents' attractiveness, quality and durability. Participant reviews of individual items will be grouped according to their listing in the Guidelines, beginning with items for caregivers and followed by those for children 0-3 and 3-6. For ease of reading, reviews of kit contents will be summarized in table format, including comments from pilot countries or participants in the Global Consultation on ECD, when available.

### Items for Caregivers

The items for caregivers received considerably less feedback than did the items for children. As indicated in the table below, however, participant opinions on these items were generally positive.

**Figure 1: Pilot Feedback on Items for Caregivers**

Item Name	Quant.	Unit	Additional Comments
<b>Items for Caregivers</b>			
Lockable Metal Box for Storage	1	EA	<i>Guyana:</i> Too bulky and heavy to be carried in a flood. Include backpacks to transport contents. <i>Iraq:</i> Too heavy. <i>Supply:</i> The box is the only viable option because it best protects the materials for long-term shipment, storage and use.
UNICEF Decal	2	EA	<i>Jamaica:</i> Recommended for inclusion in final kit. <i>Iraq:</i> UNICEF logo presents security concerns. Decal removed from kit.
Ruled Exercise Book	2	EA	<i>Jamaica:</i> Recommended for inclusion in final kit.
Adhesive Tape, Box of 20	1	BOX	<i>Jamaica:</i> Caregivers found using tape with children unmanageable due to the time taken in cutting pieces of tape, but recommended to be included for caregiver use.
Ball-point Pen, Box of 10	1	BOX	<i>Jamaica:</i> Recommended for inclusion in final kit. <i>GC:</i> Pens may dry out. Complement pens with pencils.
Markers, Asst. Colours, 4-Pack	2	EA	<i>Jamaica:</i> Recommended for inclusion in final kit.
Soap, Toilet Bar	5	EA	<i>Jamaica:</i> Recommended for inclusion in final kit.
Bag,carrier,A4,interlock seal	20	EA	<i>GC:</i> Plastic bags are useful to store and protect materials, including caregiver records.
Pre-pack Carton, 15 cdm	1	EA	Note: This item is a box in which some items come prepacked. It is not designated for specific use other than packaging.
T-shirt, UNICEF, cyan blue,cotton, L	2	EA	<i>Jamaica:</i> Recommended for inclusion in final kit. <i>Iraq:</i> UNICEF logo presents security concerns. Shirt removed from kit.
Collapsible Water Container	1	EA	<i>Jamaica:</i> Caregivers used this for diverse purposes, including for handwashing and as a play item. Recommended for inclusion in final kit.
<b>Possible Items to Add for Caregivers</b>			
Radio			<i>Jamaica:</i> Recommended for inclusion in final kit. <i>Guyana:</i> Recommended for inclusion in final kit. <i>GC:</i> Radio adds to cost without guarantee that will be useful in all contexts. Recommended for omission from kit, or replacement by musical instrument.
Pencils and Pencil Sharpener			<i>GC:</i> Include pencils to complement pens. Requires sharpener.

The most popular items in this set of materials were the collapsible water container, soap, ballpoint pens and the exercise book, included for record-keeping purposes. One concern that applies to the ballpoint pens and exercise book, as well as to the tape, markers and soap, is the need to replenish them once consumed. The issue of consumable supplies also emerges in later sections. Some also expressed concerns that ballpoint pens would dry up, and suggested pencils be included instead or in addition to pens. Pencils are included for student use in the School in a Box, but that kit also includes only pens for teachers (UNICEF, 2002). However, it seems that adding a box of pencils and a pencil sharpener would not add significantly to weight or cost, and may prove useful in some contexts.

One serious concern expressed in Iraq was the security risk to children or staff created by the use of the UNICEF logo, shown prominently on the UNICEF decal, t-shirts, water container and board book (item for children 0-3). To avoid such risks, Iraq planned to remove the decals and t-shirts from the kit prior to pilot distribution. While UNICEF logos may, in some places, create a sense of security, it is clear that, in others, the opposite is true. Interestingly, the book and water container did not raise concerns in Iraq, although it is unclear whether this was because these were acceptable or simply because the incomplete pilot process yielded only partial feedback. Staff in Iraq did request either that the logoed items be packed together or that special orders for kits without logoed items be made possible for such contexts.

The aluminium box in which Kit contents are stored and shipped was not popular among participants; however, there was no consensus on a workable alternative. The box (with contents packed inside) is too bulky and heavy for caregivers to carry, yet must be stackable and durable to endure shipping and storage under varied conditions. Having completed a thorough review of all possible containers, Supply division noted that all UNICEF kits use the aluminium box because this best protects the materials for long-term shipment, storage and use.

The pilot process yielded only minimal feedback for the remaining items, including the plastic bags, markers and tape. However, as all of these items were recommended for inclusion in the final kit, it seems that participants felt they would be useful over long-term implementation of the ECD Kit.

In response to requests by both Jamaica and Guyana for a radio or tape recorder, UNICEF Supply has identified a solar/wind-up AM/FM/SW radio, available at a price of 38 USD, however comments from UNICEF HQ remind us that the type of radio service available in many emergency contexts is not child-friendly (i.e. news, rather than music). While Global Consultation participants support the idea of incorporating music in ECD programming and, in some cases, to make the radio available to the full community, many suggested that the added weight and cost of including a radio would not be worthwhile, given that it may not be useful in many contexts. The radio was suggested as a possible item for local procurement during emergency preparedness and response and a musical instrument was suggested as a way to include music (see below).

### Items for Children 0-3

The items designated for children 0-3 were quite popular among caregivers and children served, although participants expressed concern about the appropriateness of a number of the items. In many cases, the item type (ball) was deemed appropriate, even if the specific item (small, rubber ball) selected was not.

**Figure 2: Pilot Feedback on Items for Children 0-3**

Item Name	Quant.	Unit	Additional Comments
<b>Items for Children 0-3</b>			
Board Book "Transport"	2	EA	<i>Jamaica:</i> Book is popular but the Caribbean is excluded. Recommended for inclusion in final kit. <i>Guyana:</i> More books requested. <i>GC:</i> Inappropriate book choice; not universally-appropriate. Recommended exchange with different book.
Ball, sponge rubber,60-80mm diameter	5	EA	<i>Jamaica:</i> Recommended to be replaced by larger, softer balls. <i>Guyana:</i> Recommended to be replaced by larger, softer balls.
Cubes, wood or plast., coloured, set of 100	2	EA	<i>Jamaica:</i> Popular for older children; too small for this age group. Recommended for inclusion in final kit.
Treasure-basket,plastic,12 pieces	2	EA	<i>Jamaica:</i> Unsafe for younger children. Too difficult for older children. Not recommended for inclusion in final kit. <i>Guyana:</i> Recommended for inclusion in final kit.
Blanket,cotton,baby,90 x 130cm	5	EA	<i>Jamaica:</i> Blankets are popular but would larger blankets would be preferable. <i>Iraq:</i> Blankets are locally available; removed from kit.
Plastic bucket,2.7 litres	2	EA	<i>Jamaica:</i> Recommended for inclusion in final kit. <i>GC:</i> Risk that bucket will be used for repeated handwashing, compromising hygiene. Recommended for removal from kit. <i>Supply:</i> Recommended for removal, as item type is commonly available in local markets.
<b>Possible Items to Add</b>			
Manipulative cushions or books			<i>Jamaica:</i> Recommended for addition to kit.
Stacking rings			<i>Jamaica:</i> Recommended for addition to kit. <i>GC:</i> Recommended for omission from kit as Guidelines encourage making this item from local resources.
Musical instrument			<i>Jamaica:</i> Recommended for inclusion in final kit. <i>Guyana:</i> Recommended for inclusion in final kit. <i>GC:</i> Recommended for inclusion in final kit. Xylophone suggested choice for rhythmic and melodic qualities. Recommended to replace suggested radio.

All items in the kit comply with European toy safety standards for the indicated age group, but caregivers felt some items were not age-appropriate. This was the case for several popular item types. For example, the rubber balls and wooden cubes were highly popular but were often used with older children as caregivers worried these items were not safe for the 0-3 age group. Participants at the CG Consultation noted that the balls, also found in the Recreation Kits used during response in Lebanon, were found too small and hard, even for the older children served by the kits. The almost universal rejection of the selected balls by caregivers suggests that larger, softer balls would be more appropriate. Caregiver concerns about safe use of the wooden cubes for the 0-3 age range are understandable, given that these are approximately the same size as the blocks for the 3-6 range. The multi-shape blocks provide opportunities for more complex skill-building for older children but the wooden cubes would be better replaced by fewer (so as not to occupy more space) but larger and softer cubes to promote safe, early block play for infants and toddlers.

While reaching a consensus was possible on some materials, this was not always the case. The plastic shape sorter kit was highly popular in Guyana, while caregivers in Jamaica found it inappropriate for both age groups of children. The plastic bucket was popular as a toy in Jamaica, yet Global Consultation participants expressed concern that it might compromise hygiene through use for repeated handwashing. UNICEF Supply suggested the bucket be removed altogether, as similar items are commonly available in local markets. The blanket was removed from the kit in Iraq, yet was highly popular in Jamaica, despite caregiver requests for larger and more numerous blankets. Unless the concerns from one country suggest a certain item's inclusion would compromise the safety or quality of programming, it seems best to retain the item if it was deemed useful elsewhere.

In general, participant comments suggested a perception that the Kit was predominately focused on children 3-6 and many requested the addition (or substitution) of more materials for infants and toddlers. Ideas included dolls, manipulative cushions or books, stacking rings and a musical instrument. Dolls were considered initially, but were rejected due to the impossibility of identifying a universally-appropriate doll. It was also felt that dolls could be easily made from local materials, as outlined in the Guidelines. A manipulative book (with shoelaces to tie, buttons to button, etc.) was also considered but was rejected **WHY?** Similarly, proponents of locally-created materials argued that a stacking ring set should not be included as the Guidelines offer instructions on making these from local resources. Finally, while some suggested that musical instruments could be created from local materials, others felt that one instrument should be included as inspiration to create others when possible. Discussion among Global Consultation participants and UNICEF staff led to the selection of a xylophone for its rhythmic and melodic qualities. This item could also be used with both age groups.

Of all items in the kit, the Transport board book sparked the most intense discussion. A successful choice of picture book will engage both caregivers and children in the development of rich and varied stories by showing images familiar to the experience of children and caregivers in any one context, yet without relying on images so specific that they exclude or alienate children and caregivers elsewhere. Identifying a universally appropriate picture book is indeed a difficult task.

The Transport board book is a UNICEF-produced book that begins with a world map with numbers marking a number of locations, each of which corresponds to the page number of a drawing representing that location. The book was overwhelmingly popular, yet caregivers expressed some concerns about the images shown, whether they seemed to exclude (neither the Caribbean nor Africa is represented, while New York and several European locales are shown) or to be culturally inappropriate for some contexts (images of a church and a bottle of wine).

A representative of Scholastic, Inc. expressed an interest in working with UNICEF to supply a new board book. The bulk discount offered by Scholastic results in a per book price of approximately 2.5 USD, similar to the price of the Transport book. However, after several meetings with UNICEF representatives, Scholastic presented a number of

sample books, all with themes or pictures inappropriate for global use, including a strong focus on light-skinned children in resource rich environments or themes specific to particular contexts. Virtually all Scholastic books include text although the company will reformat any book with a minimum order of 5,000. Given the demand for the ECD Kit, meeting this requirement would not be difficult. It seems possible that a partnership with Scholastic might yield an appropriate book, yet it would certainly require working closely

**Image 3: Caregiver Reading Book to Children in Chad**



Photo Credit: Nurper Ulkuer

with the company's representatives to outline precise specifications. One option to consider would be to hire a consultant to work with Scholastic in identifying an appropriate book.

Another option would be to choose an untitled UNICEF board book that shows an alien visiting children in different regions of the world. The alien book has large pictures with many details, facilitating use with large groups of children and offering rich storytelling potential. UNICEF was unable to secure sufficient quantities of this book for the pilot, although it was included among the sample

materials brought to Chad, shown in image 3.

This book addresses some of the concerns participants raised about the Transport book, but may present some new ones. Without the map coordinates and specific location references (i.e. taxi cabs in New York City) seen in the Transport book, the pictures in the alien book represent regions more generically and more inclusively. Also, by focusing on children surrounded by plants and animals of their natural environment, the alien book avoids the problems (church, wine, etc.) created by the Transport book's use of human civilisation as background. However, the pictures may be interpreted either as representatives of generalised but real realities around the world or as unfair stereotypes, depending on the perspective of the viewer. For example, the relative level of undress in "hot" places, contrasted with the full outfits of children in Northern countries, can be viewed from either perspective. While it is only realistic to expect diverse reactions to the images, regardless of the book selected, efforts to identify a book least likely to provoke negative reactions will certainly be worthwhile.

While the representation of children, animals and plants from many varied regions suggests that caregivers and children in any context should find some familiar images, it also means that many images will be very unfamiliar; to many, a penguin will be just as

mysterious as the alien. In Chad, a caregiver developed a story about a yellow soccer ball based on a yellow circle intended to represent the sun. This, alone, should not preclude the book's selection. Most important, is that the images shown inspire caregivers and children to engage with the book, which clearly happened in this case.

Compared to the choices presented thus far, the alien book seems to best represent the diverse realities of children without alienating others whose environments are different. However, before the decision is made to include the alien book in the final ECD Kit, it would be ideal to request feedback from all pilot countries. This process may be even more productive if countries are asked to select the best from a selection of several books.

Discussion on the topic of books at the Global Consultation focused on the merits of including books in the Kit and of advocating for emergency preparedness planning that includes the identification of locally- and culturally-relevant books. Most participants appeared to feel that to do both would be the most appropriate action. It is hoped that the included book, whatever the final selection may be, will inspire local actors to augment the kit with appropriate, local-language books.

Finally, although Iraq did not mention the board book, the UNICEF logo is featured prominently on the front and back covers, potentially presenting security concerns and creating the possibility that the book would not be used in similar contexts. If a UNICEF book is selected, it will be worth following up with Iraq to determine if the presence of the logo on the book would be problematic.

### Items for Children 3-6

The materials designated for use by children 3-6 were generally very popular, with the majority recommended for inclusion in the final ECD Kit for Emergencies. Nevertheless, pilot participants shared some ideas for improving the set of materials for this age group.

**Figure 3: Pilot Feedback on Items for Children 3-6**

Item Name	Quant.	Unit	Additional Comments
<b>Items for Children 3-6</b>			
Pad of Plain Paper, 50 sheets	2	EA	<i>Jamaica:</i> Recommended for inclusion in final kit.
Wooden blocks, Set of 50	1	EA	<i>Jamaica:</i> Blocks are appropriate for 0-3 and 3-6 but these are too small. Recommended for inclusion in final kit. <i>Guyana:</i> Recommended to be exchanged with larger blocks.
Modelling Clay, Asst. Colours	5	BOX	<i>Jamaica:</i> Appropriate for 0-3 and 3-6. Should be non-toxic and labeled. Recommended for inclusion in final kit. <i>Guyana:</i> Not widely used.
Sketching Pad, 50 sheets	10	EA	<i>Jamaica:</i> Recommended for inclusion in final kit.
Wood Beads (25mm), 100-ct, with Laces	1	BOX	<i>Jamaica:</i> Appropriate for 0-3 and 3-6 but the beads are too small. Box that contains beads is too difficult to open. Recommended for inclusion in final kit. <i>Guyana:</i> Too small. String should be stiffer.
Polyester Skipping Rope, 10-pack	2	EA	<i>Guyana:</i> Frightened some children, who associated it with corporal punishment, but rope was popular among other children. <i>Jamaica:</i> Blistered children's hands; recommended to be replaced by rope with plastic grip. Requires vigilant supervision. <i>GC:</i> Rope without handles provides opportunities for diverse and creative use. Rope may not be safe in contexts where large groups of stressed children are under minimal supervision.

Wax Crayons, 8 Asst. Colours, 12-pk	1	BOX	GC: Crayons are too small. <i>Jamaica</i> : Recommended to be replaced by jumbo crayons. <i>Guyana</i> : Recommended to be replaced by jumbo crayons.
Hand Puppet, Set of 6	1	EA	<i>Jamaica</i> : Puppets highly popular with some concerns. Unfamiliar animal puppets frightened children. Bulky and unattractive colours. Appropriate for 0-3 and 3-6. Must be kept clean. Recommended for inclusion in final kit (preferably with labels). <i>Guyana</i> : Puppets highly popular but some colours frightened young children. <i>Maldives</i> : Highly popular but some concern about lifespan in tropical climates. GC: Including puppets is important but also include in Guidelines as material to be made from local resources. <All comments apply to both sets of puppets>
Glove Puppet, Set of 6	1	EA	
Safety School Scissors, Box of 10	1	BOX	<i>Jamaica</i> : Scissors popular but recommended to be replaced/complemented by safer scissors. <i>Guyana</i> : Recommended to be replaced/complemented by safer scissors.
Classroom Glue, Squeeze Bottle	1	BOT	<i>Jamaica</i> : Should be non-toxic and labeled. Recommended to be included in final kit.
Matching game	1	EA	<i>Jamaica</i> : Recommended for inclusion in final kit. <i>Guyana</i> : Matching game very popular. Recommended for inclusion in final kit, in addition to other, similar games.
<b>Possible Items to Add</b>			
Puzzles			<i>Jamaica</i> : Recommended for addition to kit. GC: Missing pieces significantly reduce usefulness of puzzles.
Powder Paint or Chalk			<i>Jamaica</i> : Recommended for inclusion in final kit. <i>Guyana</i> : Recommended for inclusion in final kit. GC: Either of these items would be useful only in some contexts.

The glove and hand puppets, made of soft cloth and representing a variety of animals and insects, were highly popular in all pilot countries, as they could be used to explore and teach a variety of topics with children in both age groups. These were the most popular item in the Maldives, although caregivers worried about their lifespan in a hot, tropical climate. In Jamaica and Guyana, some concerns were expressed about unattractive colours and unfamiliar animals, which frightened some children. Participants in Jamaica debated the benefits of including animals unfamiliar to local children, ultimately deciding that as long as some animals were familiar, including some unfamiliar puppets would be an acceptable way to expose children to a globalising world. Jamaican caregivers requested the puppets be labelled so that caregivers would know how to introduce them to children, although the vast number of languages used by caregivers suggests the difficulty of accomplishing this. The fact that some puppets elicited fear in children in both countries suggests that these items might be reviewed for appropriateness to use in emergency contexts, where children facing chronic crisis and trauma may be additionally sensitive.

Perhaps the greatest concern about the items for children 3-6 was appropriateness for ages served. It is possible that some concerns stemmed from the use of these materials to supplement the small number of materials for younger children, but feedback also showed a heightened awareness of safety concerns for materials destined for use by traumatised and stressed children.

Some materials, namely the crayons, blocks and beads, were simply considered too difficult to use. The most common complaint was that the thin crayons broke easily. The small size of the wooden blocks and beads for stringing made these activities difficult for children, as did the floppy string included with the beads. Participants in Jamaica also found the box holding the bead stringing set too difficult to open.

Despite concerns that crayons broke easily, paper and crayons were overwhelmingly supported for inclusion in the final kit, due to the healing properties of expression and art. Switching the crayons for thicker ones would make this set of items indispensable to the Kit.

Also, while all materials comply with European toy safety standards for their age group, pilot participants worried that the beads, skipping ropes, scissors, modelling clay and glue were all popular items, they were unsafe and should be revised. The small size (25mm) of beads elicited concerns about choking. Caregivers in both Jamaica and Guyana felt that the edges of school safety scissors, metal scissors with a plastic guard that fits over the blades when they are not in use, were too sharp. In Jamaica, the final kit recommendations included “a variety of scissors,” suggesting an interest in adding scissors appropriate for younger children, such as those without metal blades.

The skipping ropes, colourful lengths of plastic rope, were very popular yet also elicited a number of concerns. While skipping ropes were recommended by Jamaica for inclusion in the final kit, caregivers noted that the rope hurt some children’s hands, and recommended the ropes be replaced by designated skipping ropes with plastic handles. Support for the plastic ropes stems from their increased possibilities for creative and diverse uses far beyond skipping rope. The ropes were popular with some children in Guyana, yet in an interesting reminder that materials elicit different responses in different places, a number of children in Guyana ran away crying when the rope was introduced, having associated it with corporal punishment. While many identified both pros and cons to including the ropes, some argued strongly against them. Several Global Consultation participants expressed serious concerns about the inclusion of ropes in a kit for use in emergencies, where they may easily present safety issues among large numbers of stressed children under minimal supervision. Indeed, caregivers in Jamaica noted that vigilant supervision would be required to prevent unsafe use. This is noteworthy given that the kit was implemented with groups of an average size of 23 children, and was recommended for implementation with groups of 15 children. It is unfortunate that pilot feedback on the ropes is not available from other pilot countries, particularly those facing chronic crises.

Caregivers in Jamaica and Guyana also worried whether the modelling clay and glue were safe. The packages on both include text in English, but neither says non-toxic. The glue bottle has a small icon showing a slash through “0-3” under a picture of a baby to indicate it should not be used with children of this age. It seems that non-toxic versions should replace the current materials and that the packaging should indicate that they are non-toxic. The issue of language, however, presents the need to consider how to convey that these materials are non-toxic to caregivers around the world.

Some items were not used or were hardly used, such as the glue paste in Jamaica and the clay and blocks in Guyana. However, in none of these cases were the items recommended for exclusion from the Kit. This, combined with their popularity elsewhere, suggest these items should remain in the final Kit.

Participants were surprised that books were designated only for the 0-3 age group. While the list of contents could certainly indicate the picture book for use with children 3-6, storybooks designated for children aged 3-6 simply cannot be included as these must be in local languages. It was suggested that UNICEF promote the procurement of local language books during emergency preparedness planning.

Finally, pilot participants and experts recommended multiple items for inclusion to this set of materials. The most common of these were puzzles and powder paint or chalk. Puzzles with large pieces, such as those that sit in a wooden base, require minimal space and support the development of unique skills, yet a missing piece or two significantly reduces the usefulness of the item. Powder paint and chalk would provide additional opportunities for expression, but each would only be useful in certain contexts.

Initial recommendations for finalising the ECD Kit contents are presented in the conclusion of this report.

## **Results of the Pilot: Monitoring and Evaluation**

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This section will review the pilot monitoring system and offer suggestions for expanding this during ECD Kit implementation. This system was designed to elicit feedback from participant caregivers, coordinators, parents and children. Forms to capture interviews and material use were provided and explained in training; these made information gathering easier for participants and facilitated analysis by structuring the information gathered. It must be recognized that the data informing this report is a result of the pilot monitoring process, even while some changes were recommended to improve the quality and consistency of information collected.

Participants from Jamaica revised the forms prior to their distribution to ensure the clarity of language used. For example, believing that “regular” monitoring could be interpreted in a variety of ways, they determined monitoring should happen weekly and renamed the ‘Regular Monitoring Form’ to ‘Weekly Monitoring Form.’ Coordinators felt that ‘site name’ would elicit more accurate responses than ‘location.’ Also, the list of materials listed on the monitoring form did not precisely match either the list of materials included in the Guidelines or the set of materials in the Kit. Coordinators in Jamaica revised the form so that materials listed matched the materials caregivers would find in the Kit. These minor changes were made easily, and helped ensure clarity during the monitoring process in Jamaica. It is likely that clear language will have been even more critical in contexts where English is not the primary language.

The pilot monitoring process also included interviews with caregivers, parents and children, although forms to structure interviews with the latter two groups were not provided. Jamaica recommended that forms be provided for each suggested interview type.

The monitoring forms developed for the pilot were intended for continued use during implementation. Country offices requesting the kits are responsible for monitoring implementation, and are encouraged to utilise the forms as they see fit, and according to a process that is locally-designed and managed. This can help promote sustainable and quality programming by providing critical feedback to local actors on training needs and material use, while building a global evidence base on the ECD Kit. It should be mentioned that pilots always represent only approximations of real use, as they occur under limited circumstances and during limited periods of time. Only through collection of data and evaluation of the implementation of the ECD Kit in all the diverse contexts and conditions for which it has been created, can its utility and fit for these situations be assessed and improved.

## **Critical Issues for Finalising the ECD Kit for Emergencies**

This section will offer a review of discussions among pilot participants and experts in the field on several critical issues for a standardised ECD Kit for Emergencies. These include its appropriateness for children of different ages and those with special needs; concerns about sustainability; relevance for diverse cultures; and the identification of materials as core items for global distribution versus those to be selected and procured locally.

### **Appropriateness of Kit for Children of Different Ages**

Information collected during the pilot process suggested some revisions to better target the kit to different age groups. As noted above, a number of participants felt the ECD Kit was overwhelmingly targeted toward the 3-6 age group, given the smaller number of items designated for younger children and the perception that even these materials seemed more appropriate for older children. Caregivers in Jamaica specifically noted the lack of items appropriate for infants. At the same time, participants viewed many of the items for 3-6 year olds as having potential for younger children, if only a minor change was made, such as by switching small beads for larger ones. Final recommendations for the ECD Kit contents address this issue. Finally, the report from Jamaica suggested that the ECD Kit be designed to accommodate children 0-8 given that UNICEF designates that age range for ECD programming. It is likely that the ECD Kit is designed for ages 0-6 based on an assumption that an emergency provoking use of ECD Kits will also call for School in a Box and/or Recreation Kits, both of which serve the 6-8 age group.

### **Appropriateness of Kit for Children with Special Needs**

As noted in the section on Guidelines for Caregivers, the pilot demonstrated the need for increased attention to children with special needs. The reports of Jamaica and Guyana, as well as comments from the Global Consultation on ECD, suggested the need to increase attention to children with disabilities in the kit materials and the Guidelines booklet. Caregivers in Guyana requested Guidelines on how to serve children with special needs, including those with HIV/AIDS, while those in Jamaica were concerned at the reliance on chronological age for the determination of appropriateness of materials and activities. Remarking that many children may be at a developmental level below their chronological age, caregivers noted that the Kit contents would adequately and flexibly serve this population, but that the training and Guidelines provide no guidance on this. The final recommendations for the training and Guidelines suggest attention to creative and flexible adaptation to children's unique needs be included.

### **Potential for Sustainability**

Sustainable use of the ECD Kit requires 1) durable materials, 2) the ability to replenish consumable materials, 3) community and caregiver interest in using the Kit, 4) caregiver knowledge of how to use the Kit, and 5) the ability of coordinators to assess and support ongoing implementation needs. After reviewing these five points for sustainable kit use, the discussion will turn to sustainability of desired outcomes.

Regarding the first point, pilot participants suggest that the materials included are high-quality and durable, enabling their use over a long period of time. Perhaps the only

exception is the number of consumable supplies included in the kit. UNICEF intends to create a “refill kit” once the ECD Kit is finalised.

Points 3 and 4 rely on caregiver perceptions of the kit’s relevance to community needs and the quality of training and Guidelines provided with Kit distribution. That participants in all four pilot countries expressed excitement about the ECD Kit suggests that the kit is able to spark interest across diverse communities and contexts. Caregiver knowledge of how to use kit materials will vary, being a function of previous experience, training on the kit, and the level of support provided through the Guidelines and supervision. While UNICEF may have little control in the area of caregivers’ prior experience, the organisation should increase attention to training and support to promote sustainable use.

The fifth point, that of coordinator ability to assess and support ongoing implementation needs, relies on the presence of monitoring systems to provide feedback and information to coordinators, and the supervisory capacity of the same coordinators to provide necessary support. Both monitoring and supervisory capacities are critically linked to sustainable use of the ECD Kit.

More important than sustainable use of the kit, is the sustainability of desired outcomes. The kit design and use must also consider the possibility that children and caregivers may have disrupted access to the kit materials, whether because supplies are consumed or because the communities themselves are displaced. If the ECD Kit and Guidelines serve as a starting point with a strong focus on moving toward local procurement and production of materials, communities can continue to provide supportive and stimulating environments to children even if kit use is disrupted. For this reason, some in the field have suggested that the Guidelines’ section on creating homemade materials should be more extensive, and others have suggested that the kit should be considered as a starting point only. As such, it could include fewer materials, which would reduce cost and increase accessibility of the ECD Kit.

### **Appropriateness of Kit to Diverse Cultures and Contexts**

Given the difficulties of creating a kit appropriate for all the diverse cultures and contexts in which it might be used, the small number of concerns raised on this issue is indicative that the creation of the ECD Kit was the result of a thoughtful planning process.

As indicated previously, participants from Jamaica shared some concerns about the unfamiliarity of some animals represented among the puppets, but ultimately decided that the exposure to new animals might be beneficial for children. The greatest number of concerns related to the Transport board book, raising questions about possibilities for identifying a universally appropriate picture book. Careful attention to selecting the final book selection is indeed necessary. In general, however, pilot participants appeared to feel the ECD Kit could be used in ways appropriate to the cultures and contexts represented.

At the same time, many participants expressed a desire to incorporate materials specific to the local cultures and contexts, a process that would have to be coordinated locally or regionally. This fits the UNICEF kit philosophy of providing the “basic minimum” that can be used almost universally (UNICEF 2002), while promoting local/regional procurement of materials that can be used to complement and adapt programming.

### **Global Distribution vs. Local Procurement**

One hot topic during the pilot was determining the relative merits of a standardised kit for global distribution and an emergency preparedness and response plan that prioritises local procurement of materials. Although sometimes presented as a dichotomous issue, discussion on this topic demonstrates the benefits of having both systems in place. Selecting the materials appropriate for global distribution remains a challenging task.

Procurement of local materials is promoted for a variety of reasons, noted in the introduction to this report. Emergency responders, however, note that in many cases, local procurement of materials is not immediately possible, whether because the materials themselves are not available, the necessary infrastructure is not in place, or there is insufficient staff to coordinate purchasing activities. So that programming for child protection and psychosocial support can begin as soon as possible, many emergencies may require use of the ECD Kit, at least initially. In response, UNICEF’s supply warehouse in Copenhagen has recently developed the capacity to ship supplies in 48 hours when needed for emergency situations.

One participant at the Global Consultation on ECD noted that local procurement was virtually impossible during the tsunami response in Indonesia; responders relied on materials shipped in from outside the region. With time, officials in Indonesia were able to develop a local kit inspired by the materials provided internationally; this was later used as a springboard for trainings on how to make materials for children out of local resources. With the decision to use a Kit, time and energy can be redirected from

**Image 4:**  
**Locally Produced Materials in Jamaica**



Photo Credit: UNICEF, Jamaica

selecting, purchasing, sorting and packaging materials, to implementing programming that will literally save lives. Later, it can be used as a foundation for local procurement and production of materials for greater sustainability. Reports from the Maldives suggest that the kit is a good beginning, but only that. Efforts to complement it with other materials will provide children with variety and opportunities for developing diverse and complex abilities.

The cost of the ECD Kit will certainly be a significant issue and is likely to be a factor as countries select local and global materials for emergency response. The ECD Kit is well suited for well-funded emergencies where local materials are simply not available, such as the tsunami of 2004. At a price of 350 USD,

not including freight, the kit will be less appropriate in ongoing crises, contexts where materials can be procured locally, and, importantly, countries/regions that have included ECD in emergency preparedness plans. In Jamaica, the cost of the kit was found to be prohibitive, resulting in the decision to purchase only a limited number of ECD Kits to be used as inspiration and foundation for local development of materials.

During plenary discussion at the Global Consultation on ECD, participants discussed the merits of national and regional emergency preparedness planning, a process that should include identification, procurement and storage of locally-available materials. Countries deciding that local language books; dramatic play materials representing local people, food and clothing; and other materials reflecting local experiences and priorities should be a part of emergency ECD programming may elect to procure these items as part of emergency preparedness and response. Interestingly, the kit pilot seems to have sparked interest within both Jamaica and Guyana in exploring the development of local kits. A report from a recent Stakeholder Meeting in Jamaica identified a clear plan to procure a limited number of ECD Kits, while also promoting the development of a Jamaican kit and training for families and community groups on creating their own basic kits. This bodes well for the use of the kit as a starting point and an inspiration for programming with local materials.

Overwhelmingly it was also agreed that an ECD Kit should be available, given that there are often political and economic barriers to purchasing large amounts of supplies “just in case” and a lack of storage infrastructure to ensure safekeeping. The ECD Kit may serve as a means to initiate programming up until local materials become available, or as a foundation to be complemented by local materials from the beginning. Its use will depend on the success of emergency planning processes in each context. With this in mind, UNICEF must determine the selection of materials for inclusion in the standardised Kit so that it may serve both purposes.

## Conclusion

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Following are recommendations for finalising all aspects of the ECD Kit, including its contents and its use.

### **Recommendations: ECD Kit Training and Guidelines for Caregivers**









- . Provide sample training agendas when the ECD Kit is released, as they provide ideas and structure for ECD Kit trainings while also allowing for flexibility to local needs.
  - o Consider adding a more formal unit on the psychosocial needs of caregivers, including teachers and families.
  - o Consider adding a unit on Children's Rights and the CRC.
  - o Consider integrating formal training and applied implementation of the Kit with children to improve the relevance of training. Options include:
    - Lengthening the time devoted to training to incorporate time for applying new learning with children
    - Including a unit to promote the development of creative uses for included materials
    - Offering a follow-up training at least one week after ECD Kit implementation begins.
- . Retain a Guidelines for Caregivers booklet as part of the ECD Kit.
- . Expand the portions of the Guidelines found to be most useful, such as the section on making materials from local resources and the Annex of activity ideas for included materials.
  - o Making materials from local resources
  - o Annex of activity ideas for included materials
- . Broaden the audience of the Guidelines by reducing reliance on English
  - o Increase the number of illustrations. Consider illustrating all sections.
  - o Translate the Guidelines into critical languages.
    - Consider French, Russian, and Arabic.
  - o Promote CO translation to local languages.
- . Bind and laminate the booklet for sustainable use.
- . Restructure the list of ECD Kit materials for clarity.
  - o Ensure the list of materials included in the Guidelines matches those included in the ECD Kit.
  - o Revise the list of ECD Kit materials to enable the indication of multiple age groups for any specific item (See Figure 5).
  - o Consider a more accessible format, perhaps one that includes the name of each item, a picture of it, and a picture of the appropriate age groups (caregiver, infant, toddler, preschooler).
  - o Utilize toy safety standards as a basis for identifying materials for different ages, then revise as needed to ensure safe use among highly stressed children under minimal supervision.
- . Review Training Agendas and the Guidelines, considering how these can better prepare caregivers for addressing children with special needs.

- Consider how the Training Agendas and Guidelines can promote flexible use of materials according to developmental age for cases when that is more appropriate than strict use of chronological age. Include section in each on altering activities according to the needs, skills and interests of children.
- If the ECD Kit is released before the Guidelines can be fully reviewed and revised, make surface revisions recommended here and develop a plan for finalising and replacing the Guidelines in the future.
  - Coordinate revision efforts with other agencies preparing similar documents and with the revision process of the CCCs.
- Develop a Guidelines for Administrators booklet that provides information on ordering, refill kits, monitoring tools, supervision and support of caregivers.
  - Lessons learned that are shared through monitoring or case studies can provide important input to Guidelines for Administrators.
  - Promote monitoring of training, Guidelines use and ECD Kit implementation with the ultimate goal of ensuring sustainable, quality programming.
- Consider a coordinated effort to train country-level staff on ECD in emergencies and to promote emergency preparedness planning at country and regional levels.
- Promote the identification of local materials to complement the kit through national/regional emergency preparedness planning.
  - Consider including a list or pictures of commonly available items to complement the kit, such as bowls and a radio.

## Recommendations: ECD Kit Contents

- . Make an ECD Kit available for use in contexts where ECD materials are not otherwise available.
- . The ECD Kit should include items specifically for the youngest and oldest children, but whenever possible, items should allow use by a wide range of ages to reduce confusion and increase variety for each age group.
- . Reduce the price of the ECD Kit to improve accessibility.
- . Develop a refill kit once the ECD Kit has been finalised
  - o Incorporate costing information into budget estimates and Guidelines for Administrators.
  - o Consider potential issues if consumable supplies are consumed at varying rates.
- . Create a plan for contexts where the logo cannot be used. Options include:
  - o Pack logoed items together for easy removal when this is deemed necessary.
  - o Support a special ordering process that enables the procurement of ECD Kits that do not include logoed items.
  - o If a UNICEF book is selected, follow up with staff in Iraq to determine if the presence of the logo on the book would present safety concerns.
- . Review the recommendations for each specific material suggested for addition to the ECD Kit, summarized in the table below.
  - o Include all items marked with a 
  - o Do not include items marked 
  - o Consider the specific recommendations for each item.

**Figure 4.1: Final Actions on Items Suggested for Addition to ECD Kit**

Contents of the ECD Kit for Emergencies	Final Recommendations	Action
<b>Items Suggested for Addition to Kit</b>		
Puzzles	Do not include a puzzle. Even a missing piece or two compromises the usefulness of these items.	
Powder Paint/Chalk	Do not include powder paint or chalk. Powder paint is messy and requires too many materials, including significant amounts of paper. Many contexts do not have surfaces where chalk can be used.	
Solar/wind-up AM/FM/SW Radio	Do not include radio. Not appropriate for all contexts and adds considerably to price/weight.	
Manipulative Cushions or Books	Do not include manipulative cushions or books. Can be constructed from local materials.	
Stacking rings	Do not include stacking rings. Can be constructed from local materials.	
Musical Instrument	Include as replacement for radio to promote the incorporation of music. Search for a Xylophone.	
Pencils and Pencil Sharpener	Include to complement pens as safeguard against pens drying up.	
Safety Scissors for Toddlers	Include scissors safe for toddlers (without metal cutting edge) to complement School Safety Scissors.	

- Review the recommendations for each specific material from the ECD Kit, summarized in the table below.
  - Include all items marked with a **↑**, do not include items marked **↓**, revise/replace all items marked **R**
  - Consider the specific recommendations for each item.

**Figure 4.2: Final Actions on Current ECD Kit Contents**

Quant.	Unit	Contents of the ECD Kit for Emergencies	Final Recommendations	Action
<b>Current ECD Kit Contents</b>				
1	EA	Lockable Metal Box	Keep the box; it is difficult to carry but is the only viable option for international transport and storage.	↑
2	EA	UNICEF Decal	Keep the decals. Make appropriate arrangements for contexts where the use of the UNICEF logo creates security concerns.	↑
2	Pack	Ruled Exercise Book	Keep the exercise books. Useful for teachers' record keeping.	↑
1	BOX	Adhesive Tape	Keep the adhesive tape.	↑
1	BOX	Ball-point Pen	Keep the pens.	↑
2	EA	Markers	Keep the markers.	↑
5	EA	Soap, Toilet Bar	Keep the soap. Extremely useful.	↑
20	EA	Bag, interlock seal	Keep the bags. Useful for storing and protecting materials, including caregiver records.	↑
1	EA	Pre-pack Carton	Supply will determine if necessary.	↑
2	EA	T-shirt, UNICEF	Keep the t-shirts. Make appropriate arrangements for contexts where the use of the UNICEF logo creates security concerns.	↑
1	EA	Collapsible Water Container	Replace the water container. Consider a container without the UNICEF logo.	R
2	EA	Board Book "Transport"	Replace the Transport board book with another selection. Take immediate action to identify an appropriate book. Send alien book to all pilot countries, possibly with two other selections, and request from each country immediate feedback and the identification of a preferred book. Consider hiring a consultant to facilitate this process.	R
5	EA	Ball, sponge rubber	Replace the balls with larger, softer balls.	R
2	EA	Cubes, wood, coloured	Replace the cubes with fewer, larger and softer blocks for toddlers.	R
2	EA	Treasure-basket	Keep the Treasure basket shape sorters.	↑
5	EA	Blanket, cotton, baby	Keep the blankets. Popular in most contexts.	↑
2	EA	Plastic bucket	Remove plastic buckets. Create in the Guidelines a list of item ideas to be supplied locally; include bowls on this list.	↓
10	EA	Pad of Plain Paper	Keep the paper. Extremely popular.	↑
1	EA	Wooden blocks	Keep the wooden blocks. Very popular.	↑
5	BOX	Modelling Clay	Replace the modelling clay with a type labeled as non-toxic.	R
10	EA	Sketching Pad	Keep the sketching pad. Extremely popular.	↑
1	BOX	Wood Beads with Laces	Replace the current wood beads with larger beads (30-35 mm) for safety.	R
2	EA	Polyester Skipping Rope	Remove the ropes because vigilant supervision would be required for safe use, but this cannot be ensured. Rope can be supplied locally in contexts where caregivers deem it appropriate.	↓
1	BOX	Wax Crayons	Replace crayons with jumbo crayons for durability.	R
1	EA	Hand Puppet	Replace puppets with prettier puppets representing friendly animals (no rat, for example) so that children feel safe.	R
1	EA	Glove Puppet		
1	BOX	Safety School Scissors	Keep safety school scissors. Also add scissors for toddlers (without metal cutting edge) to ensure safe use by all ages.	↑
1	BOT	Classroom Glue	Replace the glue with a type labeled as non-toxic.	R
1	EA	Matching Game	Keep the matching game. Include instructions/activity ideas in the Guidelines.	↑

The above revisions will result in the following final list of ECD Kit Contents, shown to indicate the age groups indicated to use each item. This format requires a higher level of literacy than a list illustrated with pictures of items, but may be used to summarise content for each age group.

**Figure 5: Final List of ECD Contents**

Quant.	Unit	Contents of the ECD Kit for Emergencies	Items for Use by:		
			Caregivers	0 to 3	3 to 6
1	EA	Lockable Metal Box for Storage	*		
2	EA	UNICEF Decal	*		
2	Pack	Ruled Exercise Book, Pack of 10	*		
1	BOX	Adhesive Tape, Box of 20	*		
1	BOX	Ball-point Pen, Box of 10	*		
1	BOX	Pencils	*		
1	EA	Pencil Sharpener	*		
2	EA	Markers, Asst. Colours, 4-Pack	*		
5	EA	Soap, Toilet Bar	*		
20	EA	Bag,carrier,A4,interlock seal	*		
2	EA	T-shirt,UNICEF, cyan blue,cotton,L	*		
1	EA	Collapsible Water Container (without logo)	*		
2	EA	Board Book (replacement for Transport book)		*	*
5	EA	Soft sponge balls (replacement for rubber balls)		*	*
2	EA	Soft toddler blocks, set (replacement for cubes)		*	
2	EA	Treasure-basket,plastic,12 pieces		*	*
5	EA	Blanket,cotton,baby,90 x 130cm		*	
10	EA	Pad of Plain Paper,50 sheets		*	*
5	BOX	Modelling Clay (labeled as non-toxic)			*
10	EA	Sketching Pad, 50 sheets		*	*
1	BOX	Beads(35m) Laces (replacement for 25mm beads)		*	*
1	BOX	Jumbo Crayons (replacement for small crayons)		*	*
1	EA	Hand Puppet, Set of 6 (replacement for set with scary puppets)		*	*
1	EA	Glove Puppet, Set of 6 (replacement for set with scary puppets)		*	*
1	BOX	Safety School Scissors			*
1	BOX	Safety Scissors for Toddlers (no metal edge)		*	
1	BOT	Classroom Glue (replacement for glue not labeled non-toxic)			*
1	EA	Matching game			*
2	EA	Xylophone		*	*
1	EA	Wooden blocks, Set of 50			*

## **Recommendations: Monitoring and Evaluation**

- . Consider the release of the ECD Kit as a beginning, rather than an end to the monitoring process.
  - o Build the knowledge base on the use of the Kit; this will enable future evaluations and improvements.
  - o Allocate funds for case studies and evaluations.
  
- . Develop a monitoring plan for ECD Kit use and implementation.
  - o Consider how country offices can be encouraged to monitor implementation, and how HQ can collect and analyse that information.
  - o If the above is not possible, consider arranging for staff or a consultant to complete case studies or evaluations on kit implementation in selected contexts.
  - o Revise forms as needed to fit long-term monitoring needs.
  - o Create standardised monitoring forms for each information gathering task (kit use, interviews, etc.).
  - o Include all aspects of kit implementation in the monitoring plan, including: administration, supervision, training, Guidelines, kit contents and their use, ordering and sustainability.

Supporting ECD programming in emergencies is critical to the ability of caregivers and communities to meet the important developmental needs of children. The ECD activities in the refugee camps in Chad provide an example of the informal programming initiated in many emergency contexts. However, the powerful caregiver response to the ECD Kit in those camps also demonstrates that the ECD Kit can greatly enhance programmes and possibilities for children’s stimulation, exploration, healing, growth and development.

It is indeed unfortunate that data is not available from more pilot countries, however, just as emergency conditions precluded the completion of pilot processes in several countries, emergency conditions also create an urgency to finalize and make the ECD Kit available for use. A number of UNICEF country offices are anxiously awaiting the availability of kits for immediate implementation and HQ hopes to accomplish this shortly. However, it is hoped that later feedback can be collected and utilised to improve the ECD Kit for the future.

There is also more to consider than simply the contents of the kit. These are very important, but how they are used is critical, hence the attention in this report to training, guidance, administration, supervision and monitoring. Lessons learned from this pilot process also extend to these areas and should not be forgotten. While these aspects guiding and supporting kit use are overwhelmingly in the hands of local staff and administrators, UNICEF HQ can ensure that these local players have access to accessible and relevant information and resources by revising the Guidelines.

UNICEF’s efforts to make available a high-quality ECD Kit and to provide support in its implementation can indeed make a significant impact in young children’s development during emergency response and beyond.

### **Immediate Actions**

- . Send the list of recommended materials to Supply Division to initiate a search for new items and facilitate bidding processes.
- . Prepare to revise recommendations as Supply obtains information on material availability, cost and weight.
- . Take immediate action to finalise a book choice.
  - o Send copies of the UNICEF alien book to all pilot countries, possibly with two other selections, and request from each country immediate feedback and the identification of a preferred book.
  - o Consider hiring a consultant to facilitate the process of selecting a book.
  - o Draft a very simple form to ensure feedback from pilot countries is constructive and complete. Request reasons why each book would be appropriate and inappropriate, as well as a recommendation for the final book selection.
  - o If the decision is made to send the alien book with two other selections to pilot countries, arrange a meeting with Scholastic to provide clear guidelines for identifying appropriate books, including examples of books and images that are both appropriate and inappropriate for use in a global ECD kit for emergencies.

## References

- UNICEF. (2000). Technical notes: Special Considerations for Programming in Unstable Situations.
- Landers, C. (1998). Listen to me; protecting the development of young children in armed conflict.
- Perry, B. D. et al. (1995). Childhood trauma, the neurobiology of adaptation, and "use-dependent" development of the brain: How "states" become "traits." *Infant Mental Health Journal*, 16: 271-291.
- Sinclair, M. (2001). Education in emergencies. In J. Crisp, C. Talbot & J. Cipollone (Eds.), *Learning for a future: refugee education in developing countries* (pp. 1-84). Geneva: United Nations High Commissioner for Refugees.
- UNICEF. (2005). Thriving through emergencies; early childhood development kit for playing and learning. (Internal document).