**STANDARD SECTOR INDICATOR CODE:** HE-124

**Educated Individuals on Early Child Development:** Number of target population reached with individual or small group education on developmental milestones, early childhood stimulation and development activities.

**HEALTH SECTOR**

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**Type:** Output  
**Unit of Measure:** Individuals  
**Disaggregation:**
- **Sex:** Male/Females  
- **Age:** 0-9 years, 10-14 years, 15-17 years, 18-24 years, 25+ years

**To be counted for this indicator the following criteria must be met:**
- The individual must have attended at least 1 hour of training or individual mentoring on the developmental needs and milestones, early childhood stimulation and development activities of children 0-8 years old.
- The services must have been provided as a result of the PCV’s efforts or by the PCV and their partners.
- Research shows ideal group size is less than 25 individuals, although in some instances group size can be significantly larger.
- Receipt of service must be documented by the Volunteer or their partner

**Definitions:**

- **Early childhood** is broadly defined as children from 0-8 years old but generally is targeted at children prior to attending primary school.

- **Developmental milestone** is an ability or set of functional skills or age-specific tasks that most children can do at a certain age range. Developmental milestones can involve physical, social, emotional, cognitive and communication skills such as walking, sharing with others, expressing emotions, recognizing familiar sounds and talking.

- **Early childhood stimulation and development activities:** activities that encourage a child’s interest, promote parent-child attachment and provide age-appropriate intellectual development, physical and mental skills through stimulating one or more of the five senses are considered early childhood stimulation activities. There are several practical and effective techniques that parents and caregivers can learn to promote attachment, intellectual and sensory development in children 0-8 years old.

- **Responsiveness:** parenting that is prompt and appropriate to the child’s immediate behavior, needs and developmental state.

- **Orphans and Vulnerable Children:** Children < 18 affected by AIDS, often referred to as orphans and vulnerable children (OVC) are children who have lost a parent to HIV/AIDS, who are otherwise directly affected by the disease, or who live in areas of high HIV prevalence and may be vulnerable to the disease or its socioeconomic effects.

- **Caregiver of an OVC:** A parent, guardian, foster parent (formal or informal) who has primary responsibility in the home for caring for a child affected by HIV/AIDS.
**PLHIV:** Persons living with HIV/AIDS

**Rationale:** Early child development (ECD) remains one of the most powerful levers for accelerating Education For All (EFA) and meeting the Millennium Development Goals for reducing poverty. Children living in poverty often lack opportunities for early childhood education and care. They frequently lack stimulation and are developmentally delayed or at risk of becoming delayed in their development. They are unready for school and tend to repeat grades and drop out early. Early childhood development (ECD) is considered to be one of the most cost effective strategies for promoting mental, physical, and emotional development with lifelong results and has been shown to be an effective strategy for reducing poverty and social inequity.

**Measurement Notes:**

1. **Sample Tools and/or Possible Methods:** Volunteers should use data collection tools to measure progress against project indicators. For this Standard Sector Indicator, a tracking sheet that collects the names, sex and age of participants who have attended at least 1 hour of training on the developmental needs and milestones, early childhood attachment, stimulation and development activities of children 0-8 years old will capture the needed data. A tracking sheet may include:
   - The name/title of the intervention/project
   - The start and end date
   - Location where the intervention is conducted
   - A brief description of the activities of the intervention
   - Beneficiaries - see disaggregation
   - Names of organization/partners collaborated with in implementing the intervention
   - Source and amount of funding, if funds are used

2. **General Data Collection for Volunteer Activities:** All Volunteer activities should be conducted with the intention of achieving outcomes – knowledge change (short-term), skills demonstration (intermediate-term), and behavioral changes (intermediate to long term) as defined by the progression of indicators within the objectives of a project framework. The progression of measurement for all Volunteer activities should begin with baseline data being conducted prior to the implementation of an activity (or set of activities), followed by documenting any outputs of the activities and then later at the appropriate time, measurements of specific outcomes (see the bullet on frequency of measurement).

3. **Activity-Level Baseline Data Collection:** Because this is an output indicator that does not measure any change, there is no need to take a baseline measurement before reporting the results of this indicator. However, Volunteers should take baseline measurements for any outcome indicators that are related to this output indicator. Refer to the project framework to review related outcome indicators.

4. **Frequency of measurement:** An output indicator only needs to be measured once—in this case, every time the Volunteer holds a training event (or series of events) or individual mentoring on the developmental needs and milestones, early childhood attachment, stimulation and development activities of children 0-8 years old he/she will want to keep track of the number of unique individuals who participated in the event(s) and report on it in the next VRF.

5. **Definition of change:** Outputs do not measure any changes. However, a minimum expectation for any service to be counted for this indicator is that a caregiver of an OVC, PLHIV or an OVC or any other individual must attend at least one (1) hour of training or individual mentoring on the developmental needs and milestones,
early childhood attachment, stimulation and development activities of children 0-8 years old to be counted for this indicator.

6. Reporting: In the case of output indicators, Volunteers only have one box to fill in on their VRF: “total # (number).” This indicator is intended to capture programs targeting caregiver of an OVC, PLHIV, or an OVC or any other individual. The number can be generated by counting the number of caregivers of OVC, PLHIV or OVCs or any other individual in attendance at a training or receiving individual mentoring on the developmental needs and milestones, early childhood attachment, stimulation and development activities of children 0-8 years old.

7. Reporting on Disaggregated Data in the VRT: This indicator is disaggregated by Sex and Age. When reporting in the VRF, a Volunteer should disaggregate the total number of individuals by Sex and Age. When reporting in the VRF, a volunteer should disaggregate the total number of male individuals by 0-9 years, 10-14 years, 15-17 years, 18-24 years, 25+ years and the total number of female individuals by 0-9 years, 10-14 years, 15-17 years, 18-24 years, and 25+ years.

Data Quality Assessments (DQA): DQA are needed for each indicator selected to align with the project objectives. DQAs review the validity, integrity, precision, reliability, and timeliness of each indicator. For more information, consult the Peace Corps MRE Toolkit.

Alignment with Summary Indicator: No Link