**STANDARD SECTOR INDICATOR CODE:** HE-125

**Able to Identify Practices to Improve Early Childhood Development:** Number of individuals able to identify at least 3 evidence-based practices to improve early childhood development.

**HEALTH SECTOR**

**Sector Schematic Alignment**
- **Project Area:** Maternal, Neonatal, and Child Health
- **Project Activity Area/Training Package:** Early Childhood Development

<table>
<thead>
<tr>
<th>Type: Short-term Outcome</th>
<th>Unit of Measure: Individuals</th>
<th>Disaggregation:</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td><strong>Sex:</strong> Male, Female</td>
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<td><strong>Age:</strong> 0-9 years, 10-14 years, 15-17 years, 18-24 years, 25+ years</td>
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**To be counted for this indicator the following criteria must be met:**
- The individual must have attended at minimum of at least 1 hour of training or individual mentoring on early childhood development
- The training/mentoring must have been conducted in an individual or small group setting.
- Research shows ideal group size is less than 25 individuals, although in some instances group size can be significantly larger.
- The individual will identify at least 3 methods to improve early childhood development and attachment.

**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 help to promote 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

**3 or more methods or activities to improve early childhood development:** Any activity that promotes age appropriate development of parent-child attachment, intellectual, physical and mental skills through stimulating one of more of the five senses count toward this indicator. Examples of simple age appropriate early childhood development activities are shown in the chart below.
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 and exposed to HIV often lack opportunities for early childhood education and care. They frequently lack adequate parent-child attachment and stimulation and are developmentally delayed or at risk of becoming delayed in their development. Many 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 (for Peace Corps staff use):** Volunteers should use data collection tools to measure progress against project indicators. A data collection tool to measure this indicator could be based on one of the following methods—interview, survey and observation—though there may be other data collection methods that are appropriate. Please check PCLive for data collection tools. Once a tool has been developed, post staff should have a few Volunteers and their partners pilot it, and then distribute and train Volunteers on its use.

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:** This indicator builds off of indicator **HE-124: Educated individuals on early childhood development.** Therefore, baseline data collected in the form of program records for HE-124 would apply to this indicator.

4. **Frequency of Measurement:** After taking the baseline measurement (described above), Volunteers should take at least one follow-on measurement with the same individual(s), typically after completing one or more activities focused on achieving the outcome in this indicator and once they have determined that the timing is appropriate to expect that the outcome has been achieved. Please note that successful documentation of a behavior change or new practice may not be immediately apparent following the completion of activities and may need to be planned for at a later time. Once Volunteers have measured that at least one individual has achieved the indicator, they should report on it in their next VRF.

Volunteers may determine to take more than one baseline and one follow-on measurement with the same individual (or group of individuals) for the following valid reasons:

- Volunteers may want to measure whether or not any additional individuals initially reached with activities have now achieved the outcome in the indicator, particularly for any activities that are on-going in nature (no clear end date);
- Volunteers may want to enhance their own learning and the implementation of their activities by using the data collected as an effective monitoring tool and feedback mechanism for the need to improve or increase their activities;
- A Peace Corps project in a particular country may choose to increase the frequency of measurement of the indicator and Volunteers assigned to that project will be required to follow in-country guidance.

In all cases, any additional data collection above the minimum expectation should be based on the time, resources, accessibility to the target population, and the value to be gained versus the burden of collecting the data. Following any additional measurements taken, Volunteers should report on any new individuals achieving the outcome in their next VRF.

5. **Definition of change:** The minimum change to report against this indicator is that an individual is able to
identify at least 3 evidence-based practices to improve early childhood development. If the Volunteer’s work provided the individual with the skills and opportunity needed to be able to identify early childhood development evidence-based practices then that individual should be counted for this indicator.

6. **General Reporting in the VRF**: This indicator is intended to capture programs targeting PLHIV, caregivers of OVC and others interacting with young OVC. The numerator can be generated by counting the number of individuals who were able to identify 3 evidence-based practices to improve early childhood development as a result of receiving training or mentoring in this area. The denominator is generated by counting all individuals who participated in a training or mentoring activity with whom the Volunteer works.

7. **Reporting on Disaggregated Data in the VRF**: This indicator is disaggregated by “Age” and “Sex”. 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