Overview of the Innovation

This project trained and placed unemployed young women, in internships in early childhood development (ECD) centres. The women have a minimum of secondary Grade 3 level of education and the majority of them are girls who dropped out of secondary school. Upon completion of their training, they will be able to work as certified ECD caregivers in socio-economically disadvantaged communities where there is limited access to pre-schooling for children aged 3-5 years. The caregiver professional development package consists of 3 elements: (i) work readiness, (ii) caregiver skills, (iii) functional English literacy. 165 young women were trained in a play-centred approach which focused on children’s cognitive development, such as literacy and numeracy skills, and social and physical development which can prepare them for school. The women were then placed in a total number of 56 existing ECD centres in Kigali, Kamonyi, Musanze and Burera as interns.

The budget for this innovation was GBP 686,918.

Grant Recipient:
The project was implemented by Education Development Centre, a US NGO, in partnership with Volunteer Services Overseas (VSO) as well as two national NGOs: the Strive Foundation and SOS Children’s Villages Rwanda.

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What makes it innovative?
The project is new to the Rwandan context, with similar programmes having been developed in Malawi, Tanzania, Honduras, Nepal and Bolivia. The project was adapted to be more focused on a child-centred and play-based methodology, making it a pilot for a new way of working.

The combination of the provision of employment opportunities for girls and young women, changing the way ECD delivery takes place in ECD centres in Rwanda is key to the innovation.

An important aspect of the caregiver training programme was the girls’ placement in ECD centres as interns. This element of providing opportunities to apply the training as part of the actual training programme is seen as a crucial part of the innovation.

Relevance to education priorities:

Main theme: skills development
Sub theme: gender
The ESSP places major emphasis on expanding the provision of ECD for pre-school children. The project has the potential to improve school readiness of children as they enter P1; an issue highlighted in the 2010-2015 ESSP.

For the trainees, there are clear links with the government priorities for improving the quality and relevance of TVET education for youth employment. The project has a specific focus on employment for young women which government is keen to promote.

Project learning (output/activity to outcomes level)
- The high quality, comprehensive caregiver training curriculum produced during the pilot, following a child-centred, play-based approach, was essential to the success of the project.
- The quality and relevance of the training, and the engaging way it was delivered, generated great enthusiasm amongst the 158 training participants and officials at the decentralised levels.
• Drop-out rates for the young women in the training programme have been considerable (38%) but the reasons for drop out were mostly not related to the training itself. Often the cause was not being able to combine the training with duties/work at home and the resulting loss in household income. This issue will need to be addressed when working towards scale up.

• Involvement of DEOs and SEOs was strong and showed the advantages of gaining and working with government support. In some cases, training facilities were made available by the Sector Education Office free of charge.

**Project outcomes and reflection on monitoring and evaluation:**
The evaluation design compared an intervention group of unemployed female youths trained by the project with a control group of existing caregivers. The evaluation tested the school readiness of pre-school children in the ECD centres who were cared for by these two groups (tests at baseline and end-line). The impact on the trainees’ (and caregivers’) knowledge and practices was investigated using questionnaires and observations.

No significant difference was observed between the control and intervention ECD centres regarding pre-school student school readiness, indicating that this project’s model of training was just as effective as existing training. The majority (97.5%) of girls who went through the caregiver programme demonstrated good knowledge of ECD and reporting rates for confidence and work-readiness were high, with 73% of trainees strongly agreeing that they had the skills to succeed in the workplace. There was no difference in the control and intervention caregivers in terms of teaching practices, though the intervention group had a wider range, but their practices were not performed so consistently as those of the control group (thought to be related to the latter’s experience).

The project has contributed to the employment of some of the unemployed youth trained. Around 5% of girls who completed the caregiver programme became entrepreneurs and established their own ECD Centre and over 50% were employed as a result of the training.

The design of the study was complicated. Comparisons between the two groups at both baseline and end-line was not over an equivalent period of teaching time and the analysis was not sophisticated enough to compensate for this. This, combined with the lack of demonstrable validity and reliability of the measurements, undermines the modest results that the trainee caregivers are at least as good as existing ones.
Conditions for success
This project addressed two key challenges to the Rwandan education system and highlighted the need for the project in the long-term. Reflections on the processes of innovation suggest that conditions for success are dependent upon advocacy within MINEDUC and the Workforce Development Authority (WDA) and within the communities where the ECD centres are based. This is particularly in relation to the benefits of a play-based teaching methodology.

The 38% drop-out rate of the trainees emphasises the need for establishing the right conditions for the girls to complete the caregiver programme (with due consideration given to the socio/economic issues facing the trainees).

A demand-related issue that will need to be carefully monitored is the anticipation of a sustained market for professional caregivers, who are trained by TVET colleges and private training providers.

The main critical success factor for the programme going forward is related to the certification by WDA, which is currently being negotiated, and the related integration in the TVET qualifications framework. It would be the first certified caregiver programme in Rwanda, and certification will open the way for increased employment of girls and young women, and provision of quality service delivery in ECD centres nationwide.

The activities of this innovation cut across a number of sectors and the GoR institutions responsible for these sectors, including WDA for professional education/training, and MIGEPROF and REB both being responsible for ECD delivery. DEOs and SEOs are important players at the decentralised levels. The capacity to link these different actors will be critical for upscaling.

Recommendations for scale up and sustainability
The plan is to scale up and sustain the ECD caregiver training as a one-year programme integrated into certificate one, level three of the Rwandan Technical Qualifications Framework under the TVET system. The training would be delivered at vocational training centres and possibly by other private training providers. The training will meet WDA requirements and is anticipated to include 400 hours of ECD caregiver classroom-based training, 135 hours of Work Readiness training and a three months internship. This means that a number of components of the pilot package will not be considered for scale up, i.e. the provision of ECD materials for the centres and Centre Director and parent training. The implications for sustaining the internships as part of the caregiver training are not fully clear, but there may be a risk of this important component not being continued under the future WDA-certified training programme.

The project has engaged in successful dialogue with GoR stakeholders and made significant progress in positioning itself for scaling up the core of the innovation. EDC rightly indicated the
need for time to test the adjusted package at scale, and be able to further refine the package based on the outcome of this large-scale testing, while building the capacity of the system simultaneously.

Initial agreements with WDA are in place, but there is a need to further plan the process and mechanisms through which (i) certification of students, (ii) accreditation of private service providers and (iii) overall quality assurance will take place.

There is also a need for continued involvement of an external service provider, most likely EDC, to (i) build capacity of WDA to run the programme, (ii) build capacity of TVET colleges and private providers to train future caregivers and to (iii) play an initial advocacy and ‘connector’ role to make sure that the different parts and actors in the system will be linked and work together. This will include a role for EDC to advocate with MINEDUC and MIGEPROF about the need for a play and child centred approach.

**Costing the upscaling/institutionalisation process**

No detailed economic analysis has been undertaken by the project. Only a total cost for the pilot intervention of US$ 300 per trainee is provided, which includes a stipend of US$ 100 for the internship.

For the anticipated up-scaling and institutionalisation phase, no costed scenarios are provided. The project recognises that the cost structure in a scale up intervention would be different, and that an outside organization is necessary to continue pushing the agenda and building capacity until the Government is fully capable of rolling out the programme. There is a need for more detailed costing, including costing the need for EDC involvement to ‘get the system ready’.

Although during scale up there will no longer be the provision of learning materials to ECD centres, there is a need for GoR (REB/MIGEPROF) to see the importance of this and absorb [part of] the costs. It was reported earlier that these would amount to an initial investment of approximately US$ 3,000 for each ECD centre.

**Immediate next Steps**

- Conduct a lessons learnt study to inform national scale up and develop a comprehensive economic analysis for scale up.
- Complete the work with WDA on re-alignment of the ECD program to TVET as part of the professional certification process.
- Train a selection of TVET colleges and private training providers on delivering the new certified programme.
- Build capacity of WDA to be the certifying agency and to quality assure the caregiver training programme.
- Advocate with GoR to establish an approved ‘minimum equipment/materials list’ for ECCD Centres, providing clarity as to who will pay for these materials.
- Advocate with REB and MIGEPROF to adopt a child-centred, play-based approach in ECD centres.
- EDC to play an initial role in connecting the different systemic actors in order to ensure links within the system for a comprehensive approach to ECD professional development, with an objective of handing over this ‘connector role’ to GoR institutions within a pre-defined time frame.
- EDC to identify funding to be able to play its ‘enabler’, ‘institutional capacity development’ and ‘connector’ roles during the coming years.