

TRACER STUDY

I. Executive Summary

Between 2009 and 2011, Bala Mandir took on the task of coordinating an intervention cum tracer study to assess the impact of good parenting practices during early childhood. The study was modeled on the Tracer Studies pioneered by the Bernard Van Leer Foundation in the Eighties which sought to establish an impact assessment methodology to understand the efficacy of various interventions on child development.

The study involved a process of tracing children from various communities across different settings and states in India. 4 environments, where objectives and working patterns had been mutually established, were selected for the study:

Migrant workers – Mumbai Mobile Creches (MMC), Mumbai, Maharashtra;

Rural parents – Self-Employed Women’s Association (SEWA), Ahmedabad, and Kheda, Gujarat;

Tribal and rural communities – Suraksha Community Centre for Family Health, Nagercoil, Tamil Nadu;

Peri-urban communities – Society for Development of Women and Children (SODWAC), Bangalore, Karnataka.

**A 5th environment was added in 2012 - Children in institutional settings – Bala Mandir Kamaraj Trust, Chennai, Tamil Nadu.*

In each of these areas, the partner NGOs possessed a solid footing in the communities through their ongoing interventions in various fields including childcare, health care and community development, and their many years of work had earned them a good rapport and standing with parents and the community.

The intervention took place in two phases. Phase I involved training of field level workers, creating a baseline of parental knowledge, strengthening partner abilities, and delivering parenting messages to the community. Phase II commenced in April – June 2011 where the intervention process took on a more structured form through “PRIDE” sessions with the community and assessments of children. In 2012, Bala Mandir became a part of the study with regular assessments of the children in the Day Care Centre and staff training like other NGOs.

Planning and decisions regarding assessments were done jointly by an inter-disciplinary team comprising of trainers and researchers. Each site was considered the primary responsibility of one team member, with Bala Mandir serving as the coordinator of the entire project.

In 2012, the project was evaluated through a peer assessment with the head of each NGO visiting the organisation of an assigned counterpart. During this time, the assessor met with the NGO staff, implementers and visited the project sites where they interacted with the parents who had benefited from the interventions. Their reports provided valuable insights on the project successes which included changes in attitudes and practices among parents as well as an increase in knowledge about child development.

While the tracer study has come to an end, its impact lives on. Each NGO has chosen to take forward the work on parenting and early childhood development in their own ways. Bala Mandir and Suraksha have in fact continued the project interventions with periodic impact and child assessments.

The project also led to the development of various data collection and assessment formats which continue to be in use.

This report highlights the important lessons learnt through the course of the two-year project and can serve as a useful reference for anyone interested in carrying on similar endeavors. The emphasis here is not on the process itself but rather on the insights gained from the peer assessment which have scope for review and learning and carry important lessons for the future.

II. Background

The founding principle of holistic early childhood care and development is to ensure the right kind of psychosocial experiences in the early years, which have a significant impact on all other domains of development as the child grows. Good parenting is central to these experiences.

Started in 1949 by the late Sri. K. Kamaraj and Smt. S. Manjubhashini, Bala Mandir Kamraj Trust (BMKT), Chennai, is a premier social welfare organisation which has over the years sheltered thousands of orphans and destitute and socio-economically deprived children. From its inception, Bala Mandir has always had a “below 6 years only” admission policy, recognising the criticality of early childhood.

In 1997, Bala Mandir Research Foundation (BMRF), a unit of BMKT, entered into a partnership with the Hinks-Dellcrest Centre, Canada, to bring the latter’s Learning Through Play (LTP) programme and materials to India.

The Learning Through Play Calendars (LTPC) are pictorial resources that depict the successive stages of child development, along with brief descriptions of simple play activities that show parents what they can do to promote healthy child development. They focus on five key areas of development: Sense of Self, Physical, Relationships, Understanding and Communication. The simple, low-literacy pictorial format make the calendars an ideal tool for training and dissemination of parenting messages to lettered and unlettered parents alike.

Since 2000, BMRF’s work has focused on the promotion of positive parenting practices and taking holistic and inclusive ECCD programmes into the community through training, dissemination, and research. BMRF works with partners across various sectors including NGOs, government bodies and schools in both rural and urban settings.

Around the year 2000, Bala Mandir also extended its academic contacts with the Bernard van Leer Foundation, leading to an interest in their Tracer Studies in different sites where they ran early childhood programmes.

The idea of a tracer study emerged from the dual need to expand the work on parenting as well as to formulate a methodology to assess the impact of such work. For widescale

applicability, it was decided to work with diverse communities through 4 trusted partner NGOs which were well established and respected in their fields.

- Mumbai Mobile Creches (MMC), Mumbai, Maharashtra:

MMC is a not-for-profit organisation in Mumbai that works to provide migrant children on construction sites a safe, happy, and healthy childhood. Through comprehensive and holistic day care centers on construction sites, MMC addresses the educational, health, and nutritional needs of such children.





- Self-Employed Women's Association (SEWA), Ahmedabad, and Kheda, Gujarat:
 SEWA is a trade union headquartered in Ahmedabad that promotes the rights of low-income, independently-employed female workers. SEWA is framed around the goal of full employment in which a woman secures for her family: income, food, health care, childcare, and shelter.





- Suraksha Community Centre for Family Health, Nagercoil, Tamil Nadu:
Suraksha is a registered NGO working in the Kanyakumari District since 1987. Its many areas of work include running creches, hospital counselling services, self-help groups and health projects in tribal areas.





- Society for Development of Women and Children (SODWAC), Bangalore, Karnataka:



Intervention into their on going health, nutrition , early intervention and community development programme.--TRED



Parents of the balavadis –NAVAJIVAN—SINGING PARENTING SONGS.



PAVEMENT DWELLERS - FAMILIES -APSA



III. Intervention Process

The project was divided into two phases. During the first phase, the emphasis was on training and capacity building of partners and field workers as well as understanding the ground realities based on which parenting messages could be formulated. The second phase involved structured interventions through Information, Education and Communication (IEC)

meetings and home visits including assessment of children to measure the effectiveness of the parenting messages. The entire process was guided by an inter-disciplinary team of experts in the field of child development, each of whom anchored one site.

While the primary objective in each project area was to study the impact of positive parenting practices on child development in the early years, varying strategies and methodologies were used to best suit each diverse local community.

Phase I

- Training and capacity building of partner NGOs and field staff by BMRF resource persons. Trainings included in-depth sessions on various topics such as understanding child development and concepts in the Learning Through Play Calendars, as well as communication and maintaining records.
- Field visits to understand the ground realities and needs in order to tailor parenting messages, accordingly, keeping in mind cultural sensitivities of the communities.
- Creation of a baseline based on a 15Q format and preparing a work schedule based on the needs of the communities as well as the ability of the field workers. The 15 Questions covered a range of parenting and child development issues, including readiness for pregnancy, bonding and attachment, brain development, feeding and problem behaviours.

Phase II

- Focus Group Discussion (FGD). The FGDs were based on a 3PPQ format to broadly assess Parenting Perceptions on raising an 'ideal' child. Group sizes varied from 5 to 15 mothers in each village. The field staff acted as group facilitators, introducing topics for discussion, and helping the group to participate in a lively and natural discussion amongst themselves.
- Home Visits to conduct individual child assessments and disseminate important parenting messages:
 - Individual child assessments were based on a Child Assessment Profile (CAP) format, which measures each child's progress in terms of the 5 developmental markers as identified in the LTPC. The CAP format was translated into various local languages before implementation.
 - Dissemination of age-appropriate messages to parents based on the LTPC including simple activities that parents can do to stimulate development and listen to and answer any parental concerns.
- PRIDE (Pregnancy, Relationships, Involvement of Family, Discrimination and Early Childhood Care) Sessions. 5 PRIDE sessions were held at each site for parents to promote awareness on each issue. Each NGO adopted a range of different interactive methodologies and teaching tools for each area, including games and activities, role-plays, songs and rhymes, toys, posters, charts, and flash cards.
- Peer Assessment – This included:
 - Sharing of the different communicative methodologies and materials used i.e., conversations, FGDs, role-plays, assessment kits, etc.
 - Visits to childcare centers for observation of activities, demonstrations, and parent interaction.

- Home visits to assess frequency of visits, time spent with the family and observe child assessments by childcare workers using the calendar and their interaction with parents.
- Sharing and discussions between the host organisation and visiting team on problems encountered during the intervention, in terms of content of messages, timeframe, reactions of mothers and caregivers to the home visits and messages, etc.

Each of the NGOs formulated their own schedules of home visits and group meetings, along with different means of reaching out to parents.

IV. Learnings

There have been a vast number of lessons learnt through the two-year intervention given the wide diversity among the partner NGOs in terms of context of work, skill, and ability. Equally, many learnings have come from the wide spectrum of beneficiaries ranging from tribal to urban communities in terms of the importance of cultural sensitivities and messaging relevance.

This section presents successes and challenges ranging from conceptual to organisational.

Conceptual Successes

- Sense of Self: It is common knowledge that parenting reflects a larger reality of today's world which places emphasis on academic achievement above all else, and parental aspirations too tend to be skewed in this direction from very early on. This necessitates that the child's psycho-social development lay central to the intervention. Some of the messages have resonated well with parents. In the rural area of Pothiyadi in Nagercoil, field workers reported that messages to do with letting the child make decisions, talking to the child in the womb, and teaching new words and concepts through play were well received. In Powai where Mumbai Mobile Creches carried out their intervention, one mother said that "earlier they used to stop the child from doing some activities, but now we know that we have to support and motivate the child. Even if the child is small, we let him be and play by himself – we keep a watch so that the child will not hurt himself when walking, playing or running".
- School Readiness: This was another concept well received in some of the communities. Expecting parents to interpret this as readiness for the 3 Rs, field staff were able to challenge these expectations and offer a more holistic and age-appropriate definition of school readiness. Field workers from Mumbai Mobile Creches noted that parents understood how certain types of play can help the child learn language and arithmetic skills. They also observed that when parents engaged in this type of play, it improved the child's communication and social skills as well.
- Brain Development: Migrant parents in Agirpada, a construction site in Mumbai which is home to construction workers from West Bengal, said that they found the

information on brain development to be very useful. The field worker from Mumbai Mobile Creches reported that “they got to know that there are specific stages of development according to the age of the child. The mothers did not know that the brain develops when child is in the womb itself. They thought that brain development happens when the mother and father give the child some knowledge”. Even in some of the rural communities where SEWA was working, such as Kheda district, parents believed that the brain begins to develop only after 7-8 months.

- Understanding of the ‘Why’ and ‘How’: It is safe to assume that all parents, however ill-informed, have their children’s best interests at heart, and parents on many occasions did engage and spend time with their young children. However, many of them noted that they did it without realising how important it is. For instance, a migrant worker whose child attends a crèche run by Mumbai Mobile Creches said that “earlier we used to do many things with our children, but not realise why we were doing it, such as talking to the child. Now we know that we need to do it because it helps the development of the child’s language. So, there are many things that we have learnt about the development of children”.

In another example, one parent said that “earlier we did not get time to spend with our children, but now we have learnt that we need to make time for our children. Children behave well when we pay attention to them”.

- Stimulation and Play: One of the main themes of the parenting messages given to the community has been to ensure that parents begin to engage with the child and gain knowledge about what they can do to stimulate the child in various domains of development, with emphasis on psychosocial stimulations. During the final evaluation in a rural community in Gujarat, mothers said that the concept and importance of stimulation was something that they did not know about before and were very glad to learn about; earlier they believed that the child developed unaided through a natural biological process.

Conceptual Challenges

- Marital and Pregnancy Readiness: Entrenched cultural norms have led to almost all communities, particularly those which are economically or socially backward, to follow early and in some cases even child marriage. Girl children are often married before the legal age and in some cases, marriages are arranged from when the children are toddlers.

Although times have changed and such practices are now illegal, they continue to exist. All the NGOs have emphasised the importance of marital and pregnancy readiness during their interaction with parents. In one positive case, in the suburban region of Lakshmisagara just outside of Bangalore, it was found that most of the mothers wanted to arrange marriages for their daughters only by the age of 22-23 in contrast to their own circumstances of early marriage. They were also found to be spacing the second child often 3 to 5 years after the first.

However, the same cannot be said of all communities. In one migrant community, despite being told about the ill effects of early marriage, girls got married from as

early as 11 or 12 years. They continue to live with their parents till they reach puberty.

- **Involvement of Fathers:** In Khanpur village in the Kheda district of Gujarat, the SEWA staff said that initially only mothers used to attend the meetings. As the intervention progressed, some of the fathers came along too as well as other women in the family, i.e., mother-in-law, aunt, etc. This was also observed in the urban centre of Sayyed-ni-dargah, Gujarat, where a marked difference was observed in fathers and their involvement. The field staff attributed this to regular one-on-one interactions using the Learning Through Play Calendars.

However, there continues to be resistance from the older generation to adapt to an expansion of traditional gender roles. A field worker from SEWA who worked in the rural areas said that “even though the parents were shown through the LTPC that the fathers must carry the children, they feel they need to show respect for and listen to the elders in the family. If the father does pick up the baby, the elders make remarks such as “look at what he is doing, has his child come down from heaven that he has to carry it”?



- **Discrimination:** Related to the previous point is the preference in most communities for male children and an unequal distribution of resources between boys and girls. While most parents felt that they did not discriminate, it was clearly visible in many areas. For instance, in her interaction with one migrant community, a Mumbai Mobile Creches field worker said that “the demand/preference for boys over girls is there. ‘Bhai ke peechey bhai chahiye’ (if they have one son, they want another)”. However, there was a small percentage of parents (among the more educated) who said that they were not fussy about whether they had a girl or boy.
- **Tackling Superstitious Beliefs:** The teams during their initial field visits found there to be strong prevailing superstitious beliefs in many of the communities. These included: Not eating bananas (and brinjals) during pregnancy as they are sticky and will “create a stickiness in the womb” which is detrimental to the fetus; not showing a mirror to a baby as she will then not grow teeth or will grow crooked teeth; not combing the hair of a baby before a ‘mundan’ because otherwise the hair will not

grow; not breast feeding the baby soon after birth and giving water and sugar lumps instead; not to eat too much during pregnancy as the baby will grow too big in the womb and the delivery will then be very difficult. *There has actually been a case of a woman from a migrant community starving herself because she was so apprehensive of the baby growing too large.*

The field staff noted that the process of challenging these beliefs would be slow and can only be done through persistence.

Successful Strategies

During the peer assessment it was found that there were certain processes unique to this intervention which proved to be critical to its success as detailed below.

- Emphasis on Qualitative Methods: In most social research, a standard questionnaire is used with the pre-set responses being selected/marked by the respondent or by the researcher when responses are given orally. Such approaches sometimes carry an underlying assumption of a higher outside authority demanding information. In this study, it was a deliberate choice to treat the respondents as partners in the process of defining their reality.

The current portfolio of research in the social sciences offers a great deal of variety in methodology. Many unique methods, including observing parent-child interactions, talking to mothers and grandmothers, and eliciting their views without judgement, suggesting alternate ways of dealing with children and relating to them personally and with warmth were woven into the home visits and parent meetings. Focus group discussions (FGDs) were also easily accepted by the communities and where mothers were found to be too busy to attend meetings, home visits were used to convey parenting messages.

- Field Workers and Teachers as Partners: A conscious decision was made to train the field workers and teachers in the childcare centers as “research assistants”. They were ideally suited for this role having already gained acceptance and respect within the communities they worked in.

They knew the mothers and the children well and were aware of the economic constraints under which the families lived. They were also aware of some of the specific cultural practices and beliefs of the people they served. Most importantly, there was no social distinction between the parents and the teachers in the day care centers, making the parenting messages more relatable to the beneficiaries.

- Relevant and Need-based Messaging: While the core or essence of the parenting messages are universal, they must be tailored to suit local cultures. The NGOs and field implementers were the best judges of what and how the parenting messages needed to be conveyed keeping in mind existing practices and beliefs, which are often in contradiction to accepted scientific knowledge. These include giving the child honey or sugar as soon as she is born instead of breast feeding, or not permitting the father to see the newborn. The field workers, without directly challenging these practices, spoke about the importance of breast feeding and the

father's role in building the child's sense of self from infancy. To enable change, these messages must be persistently yet gently reinforced.

Similarly, many of the NGOs also added messages on hygiene, nutrition and immunisation based on local needs. The emphasis varied according to the practices of the community as well as their economic status.

- Visual Aids Work Best: All field workers from each of the organisations were unanimous in their view that the Learning Through Play Calendars as well as the Flash Cards were the most useful in eliciting responses from parents who are unlettered. They described various interactions where only pictures have prompted rich discussions on parenting practices.

Changes in parenting practices

Tilaka from Pothiyadi in Nagercoil said she had never allowed the children to explore. And she had never played with the children. She said that after attending the meetings, she understood how play is important for children.

The balwadi used to be a dumping place according to the teacher from Pothiyadi, Nagercoil. "They were never bothered about the children's learning. Now they take care of the children, bring them well dressed on time and enquire and discuss about the progress of the child", she reported.

In the tribal village of Thatchamalaj, Jikku and Ajithkumari live in the lower terrains as compared to the rest of the community. While they had very specific food practices, they reported that after being told about the importance of nutrition, they have begun feeding their children mashed carrots and apples.

One mother from Chanpura, Gujarat said "earlier we used to just leave our children to run around. "Even after they soiled themselves, we would just let them be. Now we know that we must clean them up. We need to wash the children and wash our hands too."

