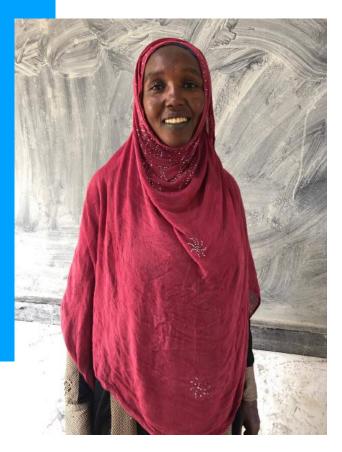


Little Ripples Assessment 2019

Refugee camps Kounoungou and Mile, eastern Chad Assessment date: May 2019



"At the beginning, kids registered [but] didn't attend. They started to see that we are happy teachers and we have mindfulness, songs, food, colors, shapes, sports, language, and numbers. Now, they come and they talk to people. Kids of Little Ripples are now very well. One student just three years old, asks his friends to make a circle around him so he can sit in the middle and do mindfulness like at Little Ripples." - Saida, Little Ripples Teacher



Acknowledgments

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The HIF is funded by aid from the UK Government and the Directorate General of the European Commission for Humanitarian Aid and Civil Protection (DG ECHO). Visit <u>www.elrha.org</u> for more information about Elrha's work to improve humanitarian outcomes through research, innovation, and partnership.

iACT thanks Jesuit Refugee Service for their steadfast partnership. iACT appreciates the dedicated support of the refugee camp-based iACT and Little Ripples team in camps Goz Amer and Djabal who not only assisted in the launch of the Little Ripples program in camps Kounoungou and Mile, but worked tirelessly to help complete this assessment.





Introduction

This report provides an overview of iACT's Little Ripples early childhood education program and the recent results from a one year assessment of the program in refugee camps Kounoungou and Mile in eastern Chad. The goal of the assessment was to provide iACT and its partner, Jesuit Refugee Service (JRS), with concrete information about aspects of LR that are working, areas that need adjustment, and what additional learnings to distribute. This report has been prepared to provide an overview of assessment methodologies, key results, learnings, and next steps.

Context

The Darfur genocide began in 2003, killing an estimated 480,000 individuals and displacing more than 3 million. For the past 15 years, more than 340,000 refugees from Darfur, Sudan have been in 12 refugee camps in eastern Chad. Camps Mile and Kounoungou in eastern Chad are home to a combined 40,241 Darfur refugees. Over the last decade and a half media coverage of the Darfur crisis and these UN Refugee Agency-managed camps has dwindled, as has international support for humanitarian aid and services. As a result, services in the camps have been drastically cut, including food rations consisting of grains, oil, and sometimes salt. Rations are distributed monthly; but, depending on family size, most of these rations are gone weeks before the next ration is available. Additionally, the Darfur refugee community is dealing with tremendous pressure to return home to Sudan—a region that is still facing instability and wide-spread violence.



Little Ripples

Little Ripples (LR) is iACT's early childhood education (ECE) program that empowers refugees and communities affected by humanitarian crises to implement child-centered, quality, and comprehensive pre-primary education that supports the social-emotional, cognitive, and physical development of children ages three to five. Little Ripples is designed to be refugee- and community-led in order to build long-term capacity and address the unique needs of children and communities affected by trauma, violence, displacement, and uncertainty. Refugees and community members learn about the LR pedagogy and curriculum by partaking in three participatory teacher trainings over 18-months where they learn how to implement a play-based ECE program that is grounded in trauma-recovery approaches, restorative practices, empathy development, positive behavior management, peacebuilding, and mindfulness. During training, participants adapt the pedagogy to their culture, content, and the unique needs of children in their community. Little Ripples can be implemented in schools, child-friendly spaces, community centers, and home compounds (referred to as Little Ripples Ponds). The learning space is identified in partnership with each community and education stakeholders.

"The new method we were trained on to deal with children in a positive way has changed the students. It is something we had not learned before. [Before,] they [students] did not say my name; they did not like me or listen to me. From training, we learned to speak with children and be at their level and speak with them peacefully. Now, they see me outside of school and excitedly call me by name; they listen to me and are more excited each day for school."

- Little Ripples Teacher

Implementation of Little Ripples in Camps Kounoungou and Mile

Little Ripples Ponds established

With support from the Humanitarian Innovation Fund, Little Ripples was adapted and implemented by iACT, JRS, and the Darfuri refugee community in camps Kounoungou and Mile. The LR implementation process in these camps began in October 2017. Together, a team of iACT staff members and experienced and employed refugee LR team members from other camps in eastern Chad walked each camp to inform the community about the opportunity to implement a community-led early childhood education program. In partnership with the community, **three homes in each camp** were identified and selected to host the program in their home compound. The learning space in each home is called a Little Ripples Pond (see image below of a Pond structure inside a refugee's compound). Families agreed to host the program for at least three years. A refugee construction team was employed to construct the physical Pond structure within each home and refugee families assisted in refurbishing the home space to ensure the space met safety, health, and hygiene standards for young children. Within 3 months, **six Ponds were constructed** and ready to host children across each of the camps. Implementing the LR program in families' home compounds has made the program more accessible and safer for children. As one mother shared, "Children at Little Ripples are more peaceful than others. In the homes [at Little Ripples Ponds], they are more safe with walls, cooks, teachers, and a very safe, clean space."



Capacity-building

An initial 25 women in each camp were recruited and completed the Little Ripples Teacher Training I (a total of 50 women). Of the 25 in each camp, 8 women were selected and employed as Camp Coordinator, Education Director, and teachers. An additional 6 women in each community were recruited to serve as the cooks of the Little Ripples daily meal program-forming a team of 14 women in each camp. The 28 employed women received two additional trainings over a year-Little Ripples Teacher



Training II and III. *LEAD with EMPATHY*, a human rights and leadership development curriculum, was also provided for the teachers to include during their weekly team meetings after Teacher Training II. iACT considers a Little Ripples team member fully trained after completing the third Little Ripples training. Since the start, the program has maintained **a 100% employee retention rate.** The same group of women who completed Teacher Training I and were employed in November 2017, are still the same group of women employed and managing the program today.

The capacity of the women Little Ripples team has exceeded iACT expectations. The Little Ripples team —women employed as the Camp Coordinators, Education Directors, teachers, and cooks—implement and manage every aspect of the program including the registration, weekly monitoring of children and attendance rates, weekly problem-solving, outreach to parents and community members, daily teaching, and the management of the meal program. They also report to iACT, JRS, and education stakeholders. The women consistently send monitoring data at the end of each month; meet together every month to discuss challenges, learnings, and opportunities; and have identified solutions to challenges they face in the classroom with students. During the first full school year, each Pond enrolled 45 children and maintained a 2 to 45 teacher-to-student ratio and a more **than 80% attendance rate.**

Little Ripples Assessment

In partnership with JRS, the University of Wisconsin Survey Center (UWSC), and the refugee community, three assessments were implemented to measure children's social-emotional, cognitive, and physical health as well as collect information on the daily life of the child and caregiver and household levels of food security. The third and final assessment took place during May-June 2019 and served as a one-year follow-up from the baseline assessment. The survey questions were conducted with 117 caregivers and children of the 180 that were measured at baseline in February 2018.



Methodology

Little Ripples assessments' survey tools and methods are designed in partnership with Dr. Nathan Jones of the UWSC and iACT expert Technical Advisors.

Dr. Jones conducted training of the refugee assessment team and led the first two in-camp assessments in camp Goz Amer. Between January and June 2017, iACT also worked with the Institute of Development Studies to evaluate and redevelop our qualitative and quantitative monitoring and evaluation tools used by the teachers, and to measure the program's impact on the community.

Instrument design: The Little Ripples assessment instruments are composed of four questionnaires. The first questionnaire is administered to the caregiver (parent or primary adult providing care in the home) and asks about characteristics of the family and household. Next, parents are asked a series of questions about each child eligible for or registered at Little Ripples. When the caregiver questions are finished, the interviewer administers a short series of questions and exercises to the child. First, the child is asked questions to test basic cognitive milestones (colors, animals, counting, and alphabet), then asked to do some physical tasks to assess gross and fine motor skills. At the completion of the interviewer-administered questions, the parent and child are directed to the anthropometric measurement and food security.

Implementation: Different than in previous Little Ripples assessments implemented in refugee camp Goz Amer and Djabal, iACT shifted from paper-based to tablet-based surveys. This change improved the quality of the data collection (it eliminated form entry-related errors) and accelerated and improved the quality of our data entry and analysis. It was Dr. Nathan Jones of the UWSC who recommended we speed-up the data entry and analysis process by using a Google survey form. The implementation of the survey instrument was conducted in teams of two (the assessor team): an iACT team member in partnership with a trained refugee team member and translator. Each team member had a copy of the survey in English and Arabic. The iACT team member posed each question and answer options in English and the translator repeated the question and answer options in Arabic and adjusted for local dialects and cultural nuances. The translator then relayed the caregiver or child's response to the iACT team member to insert into the electronic survey. The assessor teams remained the same for the duration of the four questionnaires.

Anthropometric measurement: The assessor team (an iACT staff member and the trained refugee team member and translator) conducted the height and weight measurements and made a series of subjective health observations with each child. First, the assessor weighed the child with a scale and the assistant records the measurement in kilograms. The scale's screen displays up to a tenth of kilograms, so weight was recorded to one decimal place. Height was measured with a height measuring board. One assessor read the height measurement and the other team member recorded the height in millimeters after the two agree on the reading. During the anthropometric measurements, the assessor team also gave a subjective rating of the overall health status of the child.

Food security: Caregivers were asked a series of questions based on the USAID's Household Food Insecurity Access Scale (HFIAS).¹

little ripples

¹Coates, Jennifer, Anne Swindale and Paula Bilinsky. *Household Food Insecurity Access Scale (HFIAS) for Measurement of Household Food Access: Indicator Guide* (v. 3). Washington, D.C.: Food and Nutrition Technical Assistance Project, Academy for Educational Development, August 2007.

Analysis: Upon completion of interviews and once connected to the internet, surveys were uploaded and available for Dr. Jones at the University of UWSC for analysis. Dr. Jones entered all the data into statistical program R Code, created a spreadsheet of raw data of each indicator result, and produced a report of results for iACT and Little Ripples stakeholders.

Implementation Learnings

iACT experienced thee key implementation challenges that give additional context to the results and findings of the assessment:

I) iACT was not able to measure the same total number of caregivers and children at baseline and at each follow-up assessment over the duration of the project. In February 2017, iACT completed a baseline assessment with 180 caregivers and children, however not all 180 participated in the follow-up assessments in February 2018 and May-June 2019. While we did attempt to address this issue by I) offering families a small incentive of 1,000 XFA for their participation, 2) adjusting the timeline of the assessment to ensure families were more likely to be in-camp (not away at their gardens), and 3) increasing the amount of advanced notice and conducting household visits for recruitment and reminders, we found that it was still too difficult for families to spend a day at the assessment instead of doing work and chores to meet their essential daily needs. To understand this challenge it is important to understand the context in which these refugee families live: food rations have been cut with some camps going several months with no rations at all, there are very limited livelihood opportunities, and families are resorting to spending more time away from their home in order to look for work outside of the camps, tend their gardens, and find opportunities to gain a livelihood and make up for the cut in food rations.

2) The group of children in refugee camp Mile that were measured at baseline and considered the control group, did not remain a control group. Once the Little Ripples Ponds were open, the community became aware of the high quality of the program and that they included a daily meal. The families that were measured at baseline as the control group advocated that their children be able to attend a Little Ripples Pond. The community, including leaders and the iACT Little Ripples refugee Program Director, agreed that the control group children could attend a Pond. As a result, the number of control group children in the follow-up assessments are significantly lower than the baseline assessment. They were measured and considered Little Ripples students in the assessment. As a result, iACT measured a fewer number of control group children and therefore this report focuses on the results of Little Ripples students from baseline to follow-up.

3) Lastly, the assessors did encounter issues in getting young children to respond to questions measuring their cognitive development. These questions were directed at the children and entailed children sharing their name and age, counting and reciting out loud, and identifying colors, shapes, posters, and animals. Children displayed shyness and hesitancy in answering the questions. The organization of the assessment was likely intimidating for the children. While children were in the care of their caregiver at all times, they were being interviewed by two unfamiliar adults (an iACT team member and a translator, a male from another refugee camp). To try to create a more welcoming and comforting space, the Little Ripples teachers led activities with the children while families waited their turn and offered children toys to play with. However, some children were still very reluctant to respond and this has impacted the data results that iACT is able to report on and to pull conclusions from.



Key Results

Within a challenging context, we did find that some key program, learning, and child development outcomes improved among the children who participated in Little Ripples program from baseline to follow-up. Below, some promising findings are reported.

Safety

Little Ripples is the only program in refugee camps Kounoungou and Mile offering safe, nurturing spaces for young children while their parents and caregivers are working to meet the daily needs of their family.

• 100% of caregivers reported 'Yes' when asked if they **feel their child is safe** at Little Ripples. Whereas, 56% of caregivers <u>do not</u> feel their child is safe in their camp.

Social-Emotional Development

Social-emotional learning incorporates executive functions and self-regulation, which are extremely important tools for children who have experienced violence or who are growing up in a displaced setting. Since a nurturing environment is crucial for the early years of a child's development and mindfulness practices can provide children with tools to address both stress and their reaction to trauma. Through guided mindfulness activities, mindful movement transitions, welcome and goodbye circles, and purposeful emotional check ins with children teachers help children cultivate inner peace.

The values of peace, helping, and sharing are also integrated into the LR curriculum: peace as a foundation helps the children feel safe (physically and emotionally), 'helping' allows the children to feel supported and learn how to give support, and 'sharing' creates a welcoming and generous environment. All of these values are taught in order to assure that this younger generation has strong emotional foundation.

- The assessment demonstrated that children are able to identify the **Little Ripples program values**:
 - At baseline, no child was able to identify the posters of the three Little Ripples values of 'Peace, Helping, and Sharing.'
 - At follow-up, 68% of children in the Little Ripples program were able to identify all three posters (the posters are used as a learning tool and hang on the classroom walls).
- Little Ripples increased the number of children able to do something **independently**:
 - At baseline, in camp Kounoungou, 59% of caregivers in the Pond group reported their child is 'never' able to do something independently. In camp Mile, more than 55% of Pond group caregivers reported their child was 'sometimes' able to do something independently. Less than 25% reported their child was 'always' or 'sometimes' able to do something independently.
 - At follow-up, in total from both camps, 85% of caregivers of Pond children reported their children either 'sometimes,' 'often,' or 'always' being able to do something independently, with the highest reported being 'always' at 32%.
- The assessment found an increase in the number of children **sharing**:
 - At baseline, the Pond group in camp Kounoungou reported that 17% of caregivers stated their child 'never' shared. 42% of caregivers reported their child 'sometimes' shared. 36% of caregivers reported their child 'often' shared.
 - At baseline, the Pond group in camp Mile reported that 20% of caregivers stated their child 'never' shares. 40% of caregivers reported their child 'sometimes' shares. 27% of caregivers reported their child 'always' shares.



• At follow-up, in total from both camps, 16.5% of caregivers reported their child 'never' shares, 42% reported their child 'sometimes' shares, 17.5% reported their child 'often' shares, and 24% reported their child 'always' shares.

Cognitive Development

Cognitive development means how children think, explore and figure things out. It is the development of knowledge, skills, problem solving and dispositions, which help children to think about and understand the world around them.² Brain development is part of cognitive development.

- Little Ripples increased the number of children able to **identify colors**:
 - At baseline, no children from camp Mile were able to identify 5 colors and 70% of children in camp Kounoungou were able to identify 5 colors.
 - At follow-up, in total from both camps, more than 50% of students in the Little Ripples program were able to identify 4 to 5 colors, whereas no children in the control group from either camp were able to identify more than 3 colors.
- Little Ripples increased the number of children able to **count to 10** in Arabic:
 - At baseline, no child surveyed in either camp was able to count to 10 in Arabic.
 - At follow-up, in total from both camps, 64% of children were able to count to 10 and 20% were able to count between 5 and 9.
- Little Ripples increased the number of children who could **identify 4 to 5 animals**:
 - At baseline, no child was able to identify animals.
 - At follow-up, in total from both camps, 20% of children were able to identify 5 animals and 35% of children were able to identify 4 animals.
- Little Ripples increased the number of children able to **recite the alphabet** in Arabic:
 - At baseline, no child was able to recite up to or more than the 10th letter of the Arabic alphabet.
 - At follow-up, in total from both camps, 63% of children were able to recite up to or more than the 10th letter of the alphabet

Health

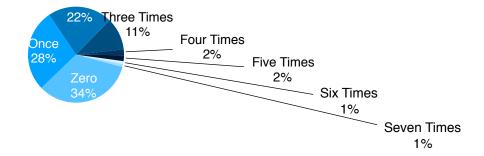
Little Ripples curriculum on healthy behaviors includes handwashing with soap upon arrival, before eating, and after using the latrine, promotion of latrine use, and coughing or sneezing into your arm. Students learn and practice these behaviors every day at Little Ripples.

- The assessment found some improvements in the health and health behavior of Little Ripples students:
 - At baseline, more than 70% caregivers from both camps reported their child 'never' covers their mouth when coughing.
 - At follow-up, in total from both camps, 15.8% reported their child 'always' covers their mouth while coughing. 53.3% reported their child 'sometimes' covers their mouth, and less than 18% reported 'never.'
 - At baseline, more than 70% of caregivers of the Little Ripples students and control groups reported their child having a cough and fever within the past two weeks.

²What is Cognitive Development, (Minnesota: Help Me Grow), //helpmegrowmn.org/HMG /HelpfulRes/Articles/WhatCognitiveDev/index.html



- At follow-up, 52.5% of the Little Ripples students' caregivers reported a cough and fever, whereas more than 70% of the control group caregivers reported a cough and fever within the past two weeks.
- At baseline, the majority of Little Ripples student caregivers in camp Mile reported their child 'sometimes,' 'often,' or 'always' washed their hands after using the latrine. However, at baseline, caregivers from camp Kounoungou reported a much lower percentage. 40% reported 'never' and only 31% reported 'sometimes' regarding their child washing their hands after using the latrine.
- At follow-up, in total from both camps, 72.5% of caregivers reported their child 'often' or 'always' washes their hands after using the latrine and 26.7% reported 'sometimes.'
- At follow-up, in total from both camps, 91.7% of caregivers reported their child 'often' or 'always' washes their hands before eating a meal.
- When asked the number of times their child has visited a clinic in the past two months, caregivers of Little Ripples students reported:



Food Security

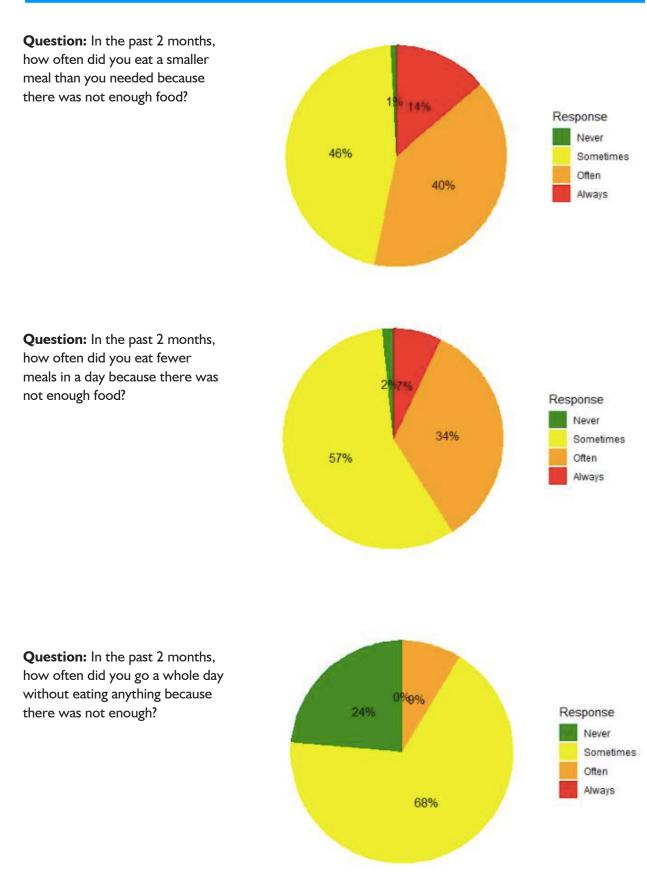
Little Ripples offers a daily nutritious meal to every student. What we're continuing to learn from families and the Little Ripples team of women leading the program, is that the Little Ripples meal program is essential to guarantee one healthy meal per day for refugee children attending the program. The meal program through LR contains a rotation of nutritious ingredients such as vegetables, grains, and meat. The cooks are trained on the structure of the meal program, their responsibilities as cooks, and safe health and hygiene practices. Many LR parents admitted that sometimes this meal is the only one their child receives that day because their food rations are so limited. Food rations consist of grains, oil, and sometimes salt if they are lucky. The food rations in camps Kounoungou and Mile are typically distributed monthly; but, depending on family size, most of these rations are gone before the next ration is available. According to our survey, the majority of families run out of their food rations. Additionally there were periods in 2018 and early 2019 when food rations were cut off entirely for all families in the camp. This further exacerbates the food insecurity of each household and the health of the community at large.

Food security means having, at all times, both physical and economic access to sufficient food to meet dietary needs for a productive and healthy life.³ According to this definition, and the indicator categorization of the Household Food Insecurity Access Prevalence,⁴ more than half of families surveyed at Mile and Kounoungou are moderately to severely food insecure.

The following pages present the food security survey results of the caregivers / households interviewed in May 2019.

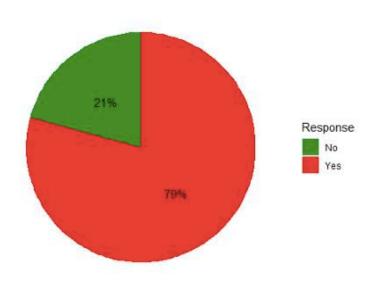
³ Food Security (USAID: 2019), //www.usaid.gov/fallsemester/usaid-101/food-security

⁴ Food Security (USAID: 2019), //www.usaid.gov/fallsemester/usaid-101/food-security





Question: In the past 2 months, was there ever no food at all in your household?



Next Steps

Little Ripples Assessment

The iACT team is continuing to analyze and garner insights from the assessment process and results and is committed to sharing additional results more widely with peers and with the refugee community. iACT plans to create an end-of-year report that provides more visual insights for a wider audience to digest the learnings from the assessment. Additionally, in November of 2019, iACT will be gathering with key Technical Advisors on ways to improve its assessment process including redesigning the survey and reducing the number of questions; identifying creative ways to interview and assess young children that might be more fun and engaging; and identifying additional ways to implement the assessment so that it reduces or minimizes the formal interview process and becomes a process that can be applied on an ongoing basis by refugee community members.

Food Security

iACT is in the process of creating a more in-depth food security report on the conditions in refugee camps across eastern Chad. iACT has been reporting on the alarming levels of food insecurity in Darfuri refugee camps since 2015.

Little Ripples program

iACT is continuing to work directly with Darfuri refugees to support the Little Ripples program in camps Mile and Kounoungou. iACT's continued support includes:

- Salaries for the 2019-2020 school year for each Little Ripples team member (28 women);
- Ingredients for the meal program to provide a daily meal for 270 children (45 children per Pond six days a week);
- Replenishment of educational and meal program materials and equipment; and,
- Remote support and capacity-building of Little Ripples team.



The Little Ripples team members in each camp will enroll children for another school year and continue to lead the program implementation and monitoring with little oversight from iACT or JRS. Starting in October 2019, Little Ripples will be the only formal early childhood education program supporting the social-emotional, cognitive, and physical health of Darfuri refugee children ages three to five in eastern Chad. iACT will also be working with each Little Ripples team and community to identify and test livelihood solutions that might off-set and support the Little Ripples program costs longterm, such as salaries and the costs of the meal program.

