Early Childhood Care and Development Education at the Community Level

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Children at an ECCDE centre in Southern Province, Zambia.

We could be building Zambia's next president here!

MANYAANA, Mazabuka Zambia -- Wisps of steam waft from the water in the big pot which sits over the fire in the compound. Margaret Choongo bends to stoke a flame from the burning twigs, then scoops a basin several times into an open sack, pouring the powdery contents into the bubbling liquid. Grasping a large wooden spoon, she stirs the mix, adding a handful of salt, some sugar, and a generous squirt of peanut oil from a plastic bottle. Lunch is being cooked for 90 children, aged from 3 to 6, who come here daily for their lessons and games.

From inside a tin-roofed single storey classroom the muffled sounds of the children’s voices can be heard. Enter and the scene is a buzz of activity, some boys and girls around a long table clutch crayons and draw designs, some sit on the floor, encircling a teacher leading them in participatory exercises, including singing lessons.

This is the Early Childhood Care and Development Education (ECCDE) Centre at Manyaana village, in Mazabuka Southern Province, Zambia. Margaret is a key member of the community team known as the Caregivers’ Committee which assists with its operation. The centre is 7 kilometers from Zambia’s main road south from Lusaka, in a farming district, and the children who attend are gathered in from a wide area. Operational since 2002, it is one of eight in the area supported by UNICEF and coordinated by the non-governmental organisation, Child Hope.

Child Hope local chairperson Jervis Chipuya explains how vigorous encouragement is given to all families to send their children for the daily 2-hour sessions the centre provides. Jervis recounts the benefits gained, “We see a real difference in the children who attend. They learn to write, they learn to speak English, have better health – and they treat us elders with respect.”

The Caregivers’ Committee, made up of five men and five women, has been formed for just one year. “We prayed for guidance on how to cooperate and how to manage all the activities,” says Margaret. Managing means not just the teaching, done by a series of volunteers, and the serving of lunch every day, but also extends to a range of support activities to communities and families to help them with their children’s development. The centre at Manyaana is also acting as a focalpoint for the neighbourhood for maternal and child health comprising ante-natal care, immunization, growth monitoring, nutrition surveillance, and parenting education.

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Play, of course, is part of an ECCDE session.

Importance of the Child’s Early Years

In addition to school preparedness and developmental readiness, ECCDE is aligned with the push for increased child survival embodied in Zambia’s adoption of the Accelerated Child Survival and Development strategy (ACSD). ACSD involves putting in place a set of high impact, low cost interventions designed to help reach the targets of Millennium Development Goals 4 and 5 to reduce infant mortality and improve maternal health.

Since 2003, over 50 ECCDE centres have been established. Within a decade, it’s envisaged that ECCDE centres will be functioning all over the country. UNICEF has supported the ECCDE policy process in recognition of the benefits early stimulation confers, helping children’s learning achievement, as well as meaning more children go on to enrol in primary school, and more of them stay there to complete grade 12.

“ECCDE helps children go to school, stay in school, and complete school and this combines to support school access, participation, and completion,” said Michael Banda, UNICEF Zambia Education Specialist.

Providing a Nutritious Meal:
A patch of rutted red-brown earth behind the school hut is being hoed, ready for planting when the rains come. “With this we’ll have some maize and vegetables to add to the children’s meal and share among the women,” explains Margaret, “That way it will help us keep them participating in the centre.”

Parents’ participation at a weekly meeting on Fridays is vital, the Caregivers’ Committee members explain. At this time, progress with the village action plan is shared and information about the health activities given out. Nurse Eskelly Chirwa from the rural health centre at Magoye, 15 kilometres away, travels to the centre regularly for these visits, which include weighing each child aged under 5 and recording the result on the child’s health card.

Eskelly says, “I can spot problems such as if a child is underweight. I ask the mother what she is feeding it and advise her on diet. If the case is severe, the mother’s advised to come into the health centre.” Margaret is 42 and has many memories from her 20 years of experience in community health, first as a traditional birth attendant and later, trained as a health worker. She explains how it’s a community’s choice, through the headman, as to who gets elected to the Caregivers’ Committee. “They know I’m good with children,” she says, smiling modestly, “I like bathing them and I know how to cook properly.” To her care will be consigned the follow-up of the cases Eskelly identifies.

“These small chaps,” says Margaret, gesturing at the groups squatting on the ground, now rapidly scooping spoonfuls of porridge into their mouths, “they’re faster than us at picking things up. We ourselves didn’t have these opportunities - so we need to pay the best attention to them. After all, it’s possible we’re building a future president and ministers for the country here!”