Parents’ and Other Caregivers’ Perception of Early Childhood Development Needs and Quality: A Study of the PLAN-Assisted Programs in Bawjiase, Ghana

by

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M.Sc., University of Science and Technology, Kumasi, Ghana, 1997

A Project Submitted in Partial Fulfillment of the Requirements for the Degree of

MASTER OF ARTS

in the School of Child and Youth Care,

Faculty of Human and Social Development

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ABSTRACT

Early childhood development (ECD) programs are designed to support the developmental needs of young children. Assessments provide a basis for determining program effectiveness and the extent to which children’s optimal development is enhanced. Quality in ECD programs is an important element in assessing program effectiveness and is directly related to what children need to develop.

This study focused on creating an understanding of children’s needs and quality ECD programs from the perspective of parents and to compare these perspectives with those of other caregivers and ECD program managers. The study used the PLAN assisted ECD programs in the Bawjiase area in Ghana and employed quantitative and qualitative approaches in the design, data collection, data management and analysis and reporting. The surveys covered 90 parents from three rural communities and 27 headmasters. Interviews were also conducted with ECD teachers, teachers from lower primary (Primary 1-3), heads of ECD programs, District ECD Co-ordinators and the Bawjiase Area Program Manager. Observation of ECD centres were conducted to provide an overview of the learning environment for children in rural communities.

The major findings of the study indicated that parents are knowledgeable about what children need to develop and what is involved in designing quality early childhood development programs. The perception of parents did not differ significantly from that of other respondents. Parents’ perceptions were also similar to what was found in the existing literature on children’s needs and quality ECD programs.
The study recommends the inclusion of parents as key stakeholders in defining quality in ECD programs and in assessing the effectiveness of ECD programs.

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ACKNOWLEDGEMENTS

I wish to acknowledge with sincere gratitude many individuals who have helped in making this study possible. I wish to particularly thank my academic supervisor, Prof. Alan Pence, for his advice, guidance and supervision throughout the course of this study. I am particularly grateful for his patience with me towards the end of this study when I had to take on a new appointment.

I also wish to thank Dr. Judith Evans my Faculty of Graduate Studies member and Dr. Francis Amedahe, my in-country supervisor for their direction and support through the course of the study. I am also grateful to Dr. Jessica Schafer for her support in developing the thesis proposal and Dr. Terry Rennie for his comments on the draft thesis. My thanks also go to Lynette Jackson, the Cohort Manager and the entire ECDVU cohort, whose support and encouragement saw me through the ECDVU program.

My deepest appreciation go to my husband Charles, and children Selorm, Seli and Ena for their support and encouragement throughout the three-year ECDVU program and particularly in the course of undertaking this study. Without their love and support, I would not have completed this course.

Finally, I am grateful to the funders of the ECDVU program – the World Bank, Norwegian Educational Trust Fund, UNICEF, CIDA, UNESCO, Bernard van Leer Foundation and for in-country support received from the Ghana National Commission on Children, the Ministry of Women and Children’s Affairs, UNICEF Ghana, UNFPA and PLAN Ghana.
CHAPTER 1: INTRODUCTION

Background to the Study

It is the desire of every nation (and every parent) that children develop to their fullest potential and become responsible adults in later life. This is reflected in the almost universal ratification of the UN Convention on the Rights of the Child, which provides among others, that “state parties recognize that every child has the inherent right to life” and “state parties shall ensure to the maximum extent possible the survival and development of the child” (Article 6) and further that “State parties agree that the education of the child shall be directed to the development of the child’s personality, talents and mental and physical abilities to their fullest potential” (Article 29a). The realization of this goal/desire is, however, highly dependent on what experiences a child has (or does not have) in his/her early years.

Myers (1989) observed that when considering the effectiveness of primary school systems, there is a tendency to overlook the important education, growth and development that occurs in the earliest years before a child enters formal schooling. He notes that this is so even though a growing body of evidence shows that early childhood development programs can have important effects on a child’s primary school readiness, enrolment, progress and performance. Reviewing the evidence on the effect of early childhood development on primary school, the review suggests that the most basic education of all begins during the preschool years, and that attempts to strengthen primary schools must therefore include interventions developed for the preschool years.

The government of Ghana has also recognized the importance of early childhood development as an important strategy for increasing school enrolment and achievement
towards the overall human resource development of the country. This is reflected in the
government’s policy statement on the agenda for growth and prosperity, the Ghana
Poverty Reduction Strategy (2002-2004). Furthermore, in pursuance of the Education for
All (EFA) goals, the Ministry of Education has adopted a policy to attach kindergartens
to all primary schools in the country. For the achievement of these laudable objectives,
ECD programs will have to ‘go to scale’ with existing programs. In order to ensure the
effectiveness of such ‘wholesale’ programs, due care will have to be taken in the design
and implementation of such programs in order to ensure that they will have the desired
impact on children, their families and communities.

Early childhood development (ECD) has been defined as a comprehensive
approach to policies and programs for children from birth to eight years of age, their
parents and caregivers, with the purpose of protecting the child’s rights to develop his or
her full cognitive, emotional, social and physical potential (UNICEF, 2001). This
definition of early childhood development presupposes that programs designed to address
the developmental needs of children should be integrated in such a way that these
programs yield maximum benefits to the children. The effectiveness of ECD programs in
“yielding maximum benefits” depends, to a large extent on the quality of the programs.
The question is what constitutes ‘quality,’ who is defining quality and who sets the
‘standards’ for measuring quality in these programs?

In Ghana there are different forms of ECD programs delivering services directly
to children. These include institutional/centre-based pre-school programs which are either
public or privately owned and managed, and home-based care. Public pre-school
programs are mostly community-based programs while private centres are mostly urban-
based. However there is currently no standard assessment instrument for assessing the
effectiveness of these programs.

**Thesis Statement**

Early childhood development programs are designed to meet the developmental
needs of children transiting from home to school. There are, however, many stakeholders
involved in the design and subsequently the quality of the programs. These include the
government, program managers, teachers, parents, community leaders, employers, child
development experts, politicians, funding agencies, research investigators, and children
themselves (Woodhead 1996). Researchers and ECD experts have proposed the inclusion
of parents in the definition of quality in ECD programs. Parents are the primary
caregivers of children and the inclusion of their views in the definition of quality
programs and the setting of standards is important not only as a way of ensuring a
participatory approach to ECD programming but also as a means of ensuring the
sustainability of programs. This study focused on creating an understanding of quality
and effectiveness of community-based ECD programs, from the perspective of parents,
teachers and managers of ECD programs.

This study provided an important reference point for developing standard
assessment instruments for assessing the quality of ECD programs in Ghana. It explored
the perceptions of parents on what children (0-8) need to develop as well as quality ECD
programs. It also attempted to find out if the views of parents were different from those
of teachers, program managers (head teachers and ECD heads) and government officials
(District ECD Coordinators). In order to understand the learning environment and
provide a framework for justifying the development of standards for ensuring program
effectiveness, this study further provided a description of the learning environment in an eco-cultural context and the challenges (eco-cultural risk factors) associated with these environments. The study addressed the following research questions:

1. What are parents’ perception of what children aged 0-8 years need in order to develop?

2. What are parents’ perceptions of a quality ECD program?

3. Are there differences in parents’ perception of what children need and the perceptions of other caregivers and ECD program managers?

4. Are there differences in parent’s perception of quality ECD programs and the perceptions of other caregivers and program managers?

In order to address the above questions, questionnaires were administered to parents whose children attended/were attending community-based ECD programs in three rural communities in Ghana. Questionnaires were also completed by headmasters of 27 schools with PLAN assisted ECD programs. Teachers and program managers were interviewed and an observation checklist adapted from Evaluation Design: UNICEF/United Nations Development Program – Socialist Republic of Vietnam, was used to provide a description of the ECD centres attended by children in the communities. The PLAN assisted Community-based ECD programs in the Bawjiase area in the Central Region of Ghana provided the settings for the investigations. These community-based ECD interventions for 4-6 year olds were initiated by the communities themselves. However, for several years most of the programs did not have the requisite infrastructure and caregivers did not receive the requisite training. PLAN Ghana decided
to adopt these community-based programs designed to address the quality of basic education in some rural communities.

The study was not an attempt to do an in-depth assessment of the PLAN-assisted ECD programs but rather to provide an understanding of quality from the perspective of parents, other caregivers and program managers. These locally contextualized views are important in the definition of quality ECD programs that are culturally appropriate for meeting the developmental needs of young children in Ghana.

The views collected provided a basis for recommendations towards defining quality ECD programs and, therefore, provides a basis for developing appropriate standards for assessing the quality of ECD programs.

_Rationale for the Study_

This study was driven by the need to move beyond increasing access to ensuring quality in ECD programs in Ghana. The enrolment rate for 0-6 year-old children was estimated at 23% in 1997 (Ghana Statistical Service, 1998). Ghana has gone through the process of developing a comprehensive Early Childhood Care and Development policy that proposes the expansion of ECD services to benefit at least 80% of the relevant age group within the next decade. It is, however, important that while planning to increase access to benefit majority of young children, consideration should also be given to the quality of services to be delivered to the children. In other words, if programs are to have the desired impact, it is important to ensure that they are well conceived to meet the developmental needs of the children.

Assessments provide a basis for determining program effectiveness. Instruments for assessments, on the other hand, are based on some established standards (e.g., desired
outcomes) for children. These desired outcomes are premised on values, beliefs and expectations of children as they attain developmental milestones. Standards are also influenced by commitments made by national governments at various international fora, to the development of their children. In order to ensure that ECD interventions are effective, however, it is important to know how different actors perceive quality in the programs that have been designed to support children’s development. The definition of quality is also premised on conceptions of what children need to develop appropriately and therefore this study also sought to find out perceptions on what children 0-8 years need to develop appropriately.

The choice of the topic is personally motivated by the desire to see Ghanaian children complete school successfully and the conviction that education for all children is a key to lifting them (and their families) out of poverty. Education is also viewed as a key to solving the developmental problems that Ghana faces as a country. Early childhood development programs provide a good foundation for promoting/enhancing children’s cognitive ability as well as their social development and preparation for later learning. It is therefore important to ensure that ECD programs are well conceived and implemented to meet the needs of children.

*Importance of Study*

Education of children is acknowledged as the one most important factor that can bring development to an individual, a community and to any nation. Children’s positive experience within the educational system and their achievement however depends on how well prepared they are for learning. ECD programs offer interventions that can prepare children for learning and support the best possible start in life for them. The
effectiveness of ECD programs however depends on the quality of the programs. The inclusion of parents and other caregivers in the process of defining quality in ECD programs is necessary to ensure that quality assessment instruments are culturally appropriate and relevant to assessing children’s development in Ghana.

Another justification for undertaking this study is that the quality of basic education in Ghana leaves much to be desired. The results of Criterion-Referenced Test conducted among a sample of public schools nationwide over the period 1992-1997 show that across the regions, the proportion of public school pupils attaining the mastery score of the tests has been extremely low (UNICEF/GoG, 2000). In the literacy (English) test only 6.2% of the pupils attained the mastery criterion score of 60% in 1997. In the numeracy (Mathematics), only 2.7% of the pupils attained the mastery criterion score of 55% in 1997. Even though the performance is said to be improving since 1997, the pace is said to be painfully slow. Also of much concern are the dropout and repetition rates. Many factors including socio-economic and cultural factors, school factors, nutrition and school health factors and financial, managerial and institutional factors account for this state of affairs (UNICEF/GoG, 2000). A key factor, which is very often left out of the equation or played down, is the years preceding primary school. As was observed by Myers (1989), when considering the effectiveness of primary school systems, there is a tendency to overlook the important education, growth and development that occurs in the earliest years before a child enters formal schooling. He notes that this is so even though a growing body of evidence shows that early childhood development programs can have important effects on a child’s primary school readiness, enrolment, progress and performance. In addressing these problems, therefore, it is important to go back and take
a look at the early years and what is happening to children at that stage. Since it has been proven that early childhood development programs have great implications for academic progress and success in life, what needs to be done is to ensure quality in the design of ECD programs and interventions. But what is a ‘quality ECD program’ and who is defining it?

This study is also important considering several emerging global issues regarding children’s development in Ghana. The government of Ghana, like many countries, has pledged itself to develop and implement a comprehensive early childhood development policy when it joined other member states to unanimously adopt a Declaration and Framework for Action, “A World Fit for Children,” at the UN General Assembly Special Session on Children in May 2002. The framework is to assist countries to create a world fit for children. The General Assembly recognized, among other issues, that a world fit for children is one in which “all children get the best possible start in life and have access to a quality basic education, including primary education that is compulsory and available free to all” (UNICEF, 2002). Providing the best possible start in life for children includes the provision of quality ECD programs that are effective in meeting the needs of children within that developmental age group.

The achievement of goal one of the Education for All (EFA) requires the implementation of large-scale programs that cater for children in African countries, majority of whom are in rural communities. Emerging trends point to a strong need for community-based ECD programs. Community-based programs ensure the participation of communities (in several dimensions of such programs) and this is important for sustaining such programs. With increasing advocacy and demand for community-based
ECD programs, there is an expected increase in investment in such programs and therefore it is important to ensure that these programs make the necessary impact on the target beneficiaries. Ensuring program effectiveness does not only result in the desired impacts but also lead to cost savings and thereby further enabling ECD resources to cater for more children.
CHAPTER 2: LITERATURE REVIEW

The issue of program effectiveness or program impact relates to the concept of child development, the needs of the child, the child’s home environment, what he/she brings into an early childhood development program and what the program is designed to achieve. This chapter summarises the concepts and principles of child development, child development in eco-cultural context, and the specific role and importance of ECD programs. It focuses on the extant literature on definitions of quality in ECD programs and the development of standards, including establishing standards for achieving developmental goals in centre-based programs. A conceptual framework for the development of national (country-wide) standard quality assessment tools is proposed.

Child Development - The Bioecological Model

Myers (1988) defines child development as a process of change in which a child learns to handle ever more complex levels of moving, thinking, speaking, feeling and relating to others. Several theories have been propounded to explain and predict child development. Bronfenbrenner’s bioecological systems theory (1979, 1989, 1993), for example, views the child as developing within a complex system of relationships affected by the child’s biological disposition and multiple levels of the surrounding environment – the micro-, meso- and exosystems (Berk, 1996). According to Bronfenbrenner, the innermost level of the environment is the microsystem and it refers to activities and interaction patterns in the child’s immediate surroundings. The mesosystem comprises connections between microsystems, such as the home, school, neighbourhood, and daycare centre that foster children’s development. He notes, for example that a child’s academic progress depends not just on activities that take place in classrooms but also by
parental involvement in school life and the extent to which academic learning is carried over into the home. He further notes that parent-child and caregiver-child relationships are each likely to support development when there are links, in the form of visits and exchange of information between home and the daycare setting. The exosystem on the other hand, refers to social settings that do not contain children but which affect their experiences in immediate settings. These include government policies and laws. This study focuses on the period of children transiting from the home (the microsystem) to formal school system.

Complementary to Bronfenbrenner’s system theory is Jean Piaget’s cognitive theory that explains the importance of early stimulation in cognitive development. According to Piaget’s cognitive developmental theory, children actively construct knowledge as they manipulate and explore their world (Berk, 1996). What is important to note here is the extent to which children are exposed to objects they can manipulate and how early in their life this ‘exposure’ is made. This study sought the perception of parents and other stakeholders on how early children should be exposed to toys and play materials.

Schwebel (1985) also notes that the important intellectual environments with which children interact at home, in the playground and especially at school are genuinely social creations and adults can modify them in significant ways. The challenge is to determine the kind and degree of interactions that children should have with the physical and social environments that will facilitate their development.

Brain development is a biological process which depends on appropriate stimulation during “sensitive/critical periods” to be “wired” for functions such as math,
language, music and physical activity. The healthy development of the brain is therefore a vital factor in child development. Evans (1996) reports that brain development taking place before age one is more rapid and extensive than previously realized and that the months immediately after birth are critical in terms of brain maturation. During this time, the number of synapses, that is the connections that allow learning to take place, increase twenty-fold. She notes further that children’s early exposure to good nutrition, toys and stimulating interaction with others has a positive impact on children’s brain functions.

The environment affects not only the number of brain cells but the way in which they are wired. Evans (1996) concludes that with increasing knowledge about children’s growth and development, there is an increasing desire to link the quality of programming to developmental outcomes. UNICEF (2001) also asserts that the earliest years (0-3) are ‘critical’ to how the rest of early childhood unfolds. The focus of this study is towards ensuring quality in ECD programs and since the above indicate that healthy brain development has a direct positive impact on cognitive abilities, the consideration for effective ECD programs must take account of knowledge on brain development in these early years.

*Child Development in Eco-cultural Context*

In addition to biological and ecological factors, child development is also recognized as being influenced by cultural factors, such as language, religion, beliefs and practices associated with the child’s individual heritage/context. Mutuku and Mutiso (2001) stress the importance of the need to take a broad ecological view of the conditions that are presumed to be important as potential causes of children’s developmental outcomes in a particular context. Evans (1994) also notes that while childrearing
practices may be different across cultures, there are basic needs that all children have and predictable patterns of development during the early years that are universal. She posits that studies from different parts of the world reveal that young children need adequate nutrition, health and care from birth onwards. Myers (1997) also identifies the following needs of children at different developmental stages:

Very young children (birth-3 years) need:

- Protection from physical danger
- Adequate nutrition and health care
- Appropriate immunizations
- An adult with whom to form an attachment
- Things to look at, touch, hear, smell, taste
- Opportunities to explore their world
- Appropriate language stimulation
- Support in acquiring new motor, language, and thinking skills
- A chance to develop some independence
- Help to learn how to control their own behaviour
- Opportunities to begin to learn to care for themselves
- Daily opportunities to play with a variety of objects

Preschool-aged children need the above plus:

- Opportunities to develop fine motor skills
- Encouragement of language through talking, reading, singing
- Activities which will develop a positive sense of mastery
- Opportunities to learn cooperation, helping, sharing
- Experimentation with pre-writing and pre-reading skills
- Hands-on exploration for learning through action
- Opportunities for taking responsibility and making choices
- Encouragement to develop self control, co-operation persistence in completing projects
- Support for their sense of self-worth
- Opportunities for self-expression
- Encouragement of creativity

Children in early primary grades need the above plus:
- Support in acquiring additional motor, language, and thinking skills
- Additional opportunities to develop independence
- Opportunities to become self-reliant in terms of personal care
- Opportunities to develop a wide variety of skills
- Support for the further development of language through talking, reading, singing
- Activities which will further develop a positive sense of self-mastery of a variety of skills and concepts
- Opportunities to learn cooperation and to help others
- Hands-on manipulation of objects which support learning
- Opportunities for taking responsibility and making choices
- Support for the development of self-control and persistence in completing projects
- Support for their sense of self-worth and pride in their accomplishments
Motivation for and reinforcement of academic achievement

Myers shows, from the above that the hierarchy of needs reflects children’s increasing developmental complexity. Additionally, Woodhead and Keynes (1996) assert that children’s needs are locally contextualized and perceived. It can be concluded from these observations that programs designed to support children’s development must not only take account of children’s needs at different stages in the life cycle but also consider the cultural context within which children develop.

Since cultural beliefs and practices influence, to some extent, the needs and developmental goals that caregivers have for the child, an understanding of the challenges and risk factors in these cultural contexts is important in understanding parent’s perception of children’s needs. This study sought the views of parents on challenges faced by parents whose children attend ECD programs.

The Importance of ECD Programs

The immediate outcome of ECD programs result in better performance in primary school. Reviewing the evidence on the effect of early childhood development on primary school, Myers (1989) posits that the basic education begins during the preschool years, and that attempts to strengthen primary schools must include interventions developed for the preschool years. In the table below, Myers provides a framework for addressing transition from home to school and linkages between the home, the ECD centre and the school (see Table 2.1).
Table 2.1: Learning Environments: The Home, ECD Programs and the School

<table>
<thead>
<tr>
<th>The Home</th>
<th>Early Childhood Programme</th>
<th>The School</th>
</tr>
</thead>
<tbody>
<tr>
<td>An informal, loving adult-child relation</td>
<td>An informal, supportive adult-child relation</td>
<td>A formal, less personal adult-child relation</td>
</tr>
<tr>
<td>Learning through imitation, experience, and trial and error</td>
<td>Learning through play</td>
<td>Learning through didactic teaching, memorization</td>
</tr>
<tr>
<td>Flexibility</td>
<td>Structure with flexibility</td>
<td>Rigidity</td>
</tr>
<tr>
<td>Contextualized learning</td>
<td>A mix of contextualized and decontentexualized learning</td>
<td>Decontextualized learning</td>
</tr>
<tr>
<td>Modeling, one-on-one teaching</td>
<td>Numerous children to one adult</td>
<td>Many children to one adult</td>
</tr>
<tr>
<td>Adjustments to the interests and needs of the child</td>
<td>Adjustments to interests and needs of the child, in the Context of the group</td>
<td>Adjustments of the child to the demands of the school</td>
</tr>
<tr>
<td>Emphasis on the concrete</td>
<td>Use of concrete/objects to teach concepts</td>
<td>Use of symbols</td>
</tr>
<tr>
<td>Active participation in chores and rituals</td>
<td>Activity-based learning</td>
<td>Passive role in learning and school events</td>
</tr>
<tr>
<td>Learning in mother tongue</td>
<td>Learning in mother tongue perhaps with the introduction of national language</td>
<td>Learning in the national language</td>
</tr>
<tr>
<td>Emphasis on language Comprehension</td>
<td>Emphasis on language comprehension and production</td>
<td>Emphasis on language production</td>
</tr>
<tr>
<td>Emphasis on process</td>
<td>Emphasis on process</td>
<td>Emphasis on results</td>
</tr>
</tbody>
</table>

It is clear from Table 2.1 that ECD programs support children’s transition from an informal loving home situation to a rigid, less personal environment. The ‘structure’ of this transition period and the actors involved, determines to a large extent how the child
will fare in the school system. Myers (1997) observed that some early childhood programs seem to do a better job of facilitating the transition than others since the general atmosphere of most early childhood programs is very different from that of the school. In order to ensure a smooth transition, it is important for example to link the lower primary curriculum to what the child has experienced in the ECD program to enable the child adjust to the school system. In this study, teachers in lower primary were interviewed in order to get an understanding of teachers’ perception of young children’s development.

Research has shown that early childhood development (ECD) programs, when well conceived, can have profound impact in promoting developmental outcomes for children, including their socio-cultural development as well as their preparation for school and later learning. Early childhood development programs are seen as an intervention to provide support to the child in transition from home to school. In looking at achieving the goal of Education for All (EFA), Myers (1997) observed that early childhood development and education programs are designed to bridge the gap between home and school, leading to a better adjustment to and performance in primary school.

Many research findings have also established the importance of pre-schools to children’s education and success in life. Caldwell and Bradley (1994) cited in Berk (1996), have indicated that an organized, stimulating physical setting and parental encouragement, involvement and affection repeatedly predict infant and early childhood IQ. Findings of a Head Start Project undertaken in the United States indicate that the model of combining high quality with parent involvement leads to impressive improvements in test scores (Berk, 1996). Research has also shown that infants and young children exposed to poor-quality daycare, regardless of whether they come from
middle or low income homes, score lower on measures of cognitive and social skills (Berk, 1996). Berk (1996) further observed that good daycare can even reduce the negative impact of a stressed, poverty-stricken home life and that a high-quality daycare with support services for parents enhances children’s academic performance when they reach school age.

Myers (1988) notes that enrolment, progress, and performance in school are influenced both by the cognitive and social characteristics a child brings to the school and by the availability and quality of schooling. UNESCO (1996) reviewed the profile of repeaters and concluded that a characteristic of children who repeat is that they have no adequate positive early childhood development and educational experiences before entering primary school.

This implies that the type of ECD setting and the quality of services offered can accelerate a child’s development. Subsequently, children’s performance (or non-performance) in Primary School may be accounted for by numerous factors. The ‘catch’ is therefore to ensure that ECD programs are effective enough to provide the ‘high quality’ service that children need to lay the foundations for later learning.

Another important factor in considering the impact of ECD programs is an understanding of when children really start learning. The Education for All (EFA) believes that learning begins at birth and therefore sets the lower age limit for ECD at zero (or at birth), with the explanation that even though it is not expected that newborns will be found in centre-based programs that follow an organized system of attention including an educational component, parental education programs may be directed towards parents during the pre-natal period or immediately following birth (Myers,
This is understandable because apart from the type and quality of an ECD setting, the performance of children in the ECD programs and subsequently in primary school also depends on what children bring into ECD settings. This study sought the views of parents and others on when children start learning since an understanding of when children start learning is expected to provide the basis for supporting and stimulating children’s development.

**Effective ECD Programs**

Studies have linked program effectiveness with program quality and practice. Schweinhart et al. (cited in Evans, 1996) report that quality is essential to the effectiveness of pre-school programs after a longitudinal study in which the experience of two groups of children were monitored - one with pre-school experience and the other without, from the time they were three years of age until they were age 27. Thus longitudinal assessments of the impact of ECD programs provide a basis for ensuring quality in ECD programs. The authors of the High/Scope Perry longitudinal study in which one group of children had preschool experience while the other did not, also concluded on the basis of their results that quality is essential to the effectiveness of preschool programs (Schweinhart et al. 1993, cited in Evans, 1996).

Admittedly no one type of ECD program is described as effective because programs vary in terms of goals, curricula, forms of organization, responsibilities for adults involved, training methods, and degrees of parental involvement. However, ECD programs can be assessed as effective when children who attend these programs meet some defined expectations, including being prepared to enter school. School readiness assessment
instruments have been developed and are often used to determine children’s readiness for school. According to Myers (1997), a child who is prepared to enter school should be:

- physically healthy and well nourished
- able to handle basic cognitive concepts
- able to communicate in everyday transactions and in the language of school
- able to relate well to others
- psychologically self-assured, with a good self concept
- able to work independently
- motivated to learn

Defining Quality in ECD Programs

Researchers and ECD experts have attempted to define ‘quality’ in ECD programs. According to Berk (1986), ingredients of high quality daycare or ‘developmentally appropriate’ Early Childhood Development Programs, include the physical setting, group size, caregiver-child ratio, daily activities, teacher qualification and relationship with parents. This thesis looked at some of these ‘ingredients’ with reference to community-based ECD programs. Love, Schochet, and Meckstroth (2002) posit that quality is a concept typically used to describe features of program environments and children’s experiences in these environments that are presumed to be beneficial to the children’s well being based on research and practice. They observed that the definitions posed by researchers reflect two types of ingredients, namely, the structure and the dynamics of the program or classroom. They identified the following ingredients of quality childcare and education:

For classroom and (program) structure:
- appropriate and effective group size, child-staff ratio, composition, safety
- supportive administration and services
- staff characteristics

For classroom dynamics:
- positive teacher behaviours (e.g. attentiveness, encouragement, engagement, sensitivity, responsiveness)
- positive child behaviours (e.g. Interaction with materials, cooperation, joy)
- effective teacher-child interactions (e.g. teacher responsiveness, verbal interaction)
- stability and continuity

The following components of a quality program were also outlined by Schweinhart (cited in Evans, 1996):

- The program offers a validated child development curriculum.
- The program uses a validated child development assessment strategy.
- The number of young children per teacher is low enough to enable staff to positively influence young children’s development.
- Staff are trained to know how to positively influence young children’s development.
- Staff receive systematic in service training and supervisory support to positively influence young children’s development.
- Families are partners with teachers in positively influencing young children’s development.
- The program meets child health and family needs.
The above provide a broad outline of what is involved in considering quality ECD programs but these would require a delineation of limits or ranges; for example, what is the nature of training that staff receive and what are the defined or identified health and family needs?

Reviewing elements of quality in early education programs, Myers (2001) identified the following elements:

1. **Aims and objectives** – Clear aims and objectives set and shared by teachers and parents, understood by children, and subject to modification through a process involving all interested parties. The process of agreeing on the aims and objectives may be more important than the outcomes.

2. **Education agents** – The continuous presence of sensitive, healthy, committed, loving and responsible adults, who as a result of experience and training, are knowledgeable about how children develop, and who interact with children in a consistent, respectful, supportive, and unthreatening way.

3. **Curriculum** – A proven curriculum that takes a holistic view of a child’s development; provides a variety of relevant, stimulating, and enjoyable learning experiences for both ‘setting roots’ and ‘learning to fly’; encourages children to play, explore and initiate their own learning activities; that respects and attends to individual differences. A quality curriculum integrates education and care, attending to children’s physical, social and emotional needs, as well as to their cognitive and intellectual needs and it fosters sound relationships of the child with self, with others, and with the environment.
4. Physical Environment – A clean, ventilated, stimulating, secure and healthy environment providing enough space for children to play.

5. Evaluation – Use of systematic and validated evaluation methods by education agents and parents to adjust teaching to children’s needs.

6. Ratio of children to adults – A ratio low enough to permit frequent interaction and personal attention when needed.

7. Training and Supervision – Meaningful training on the job and supervisory support fostering continued professional and personal growth.

8. Program leadership – Strong leadership that devotes much time to coordinating and managing, yet stays close to the daily process of educating and socializing children.

9. Parental and community participation – Real involvement and participation of families and communities as partners in the program, helping the program to set appropriate standards, to function well, and to adjust to local conditions and needs at the same time that they learn to improve their attention to young children.

10. Resources – A consistent and permanent financial and material resource base sufficient to support working in an appropriate way with children and to sustain educational activities so that education agents need not be distracted from their immediate task of educating children.

The above elements reflect very much a comprehensive approach to the development of the child and in my view, encapsulates the concept of quality that should be associated with any quality ECD program.
Woodhead and Keynes (1996) observed that quality is a subjective and dynamic judgement that entails negotiation between different stakeholders’ perspectives, which change over time, and that rather than being prescriptive, quality standards should be established within each context to respond to real needs of parents and children. They observed that judgements about quality are closely linked to goals and expectations for the program in particular and children in general and proposed that a starting point for the process of negotiation should be an attempt to answer the questions: Who are stakeholders in the ‘quality’ of a program? Who are the perceived beneficiaries from ‘quality’? What are taken to be indicators of ‘quality’? They identified stakeholders to include program managers, teachers, parents, community leaders, employers, child development experts, politicians, funding agencies, research investigators and children themselves.

Theories and research in child development have supported the concept of developmental appropriateness. Woodhead and Keynes (1996) posit that developmental appropriateness draws attention to the distinctive features of children’s emotional, social and cognitive functioning associated with their age and the developmental stage and argue that since these are a product of particular child rearing contexts, these contexts must be taken into consideration. They proposed the introduction of a complimentary concept, which they termed ‘contextual appropriateness.’ They suggested that this could be combined with developmental appropriateness to provide what they termed Practice Appropriate to the Context of Early Development (PACED).

The above positions suggest that establishing children’s universal basic needs provide a basis for defining quality but from a contextual point of view, children’s needs
are not ‘universal.’ Even within the same country what is considered as children’s basic need in an urban context, for example, might not be the same in a rural context. This study explores children’s needs and development from a contextual perspective.

Nevertheless, the above definitions provide some framework for assessing program quality, based on the structure, content and the processes outlined. The aim of this thesis however was to provide an understanding of quality ECD programs from the perspective of parents, other caregivers and ECD program managers.

Assessing the Effectiveness of ECD Programs

The effectiveness of programs has to do with the ‘desired outcomes’ of what programs have been designed to achieve. Measurements have been developed to assess the dimensions of individual child’s development. For example “Intelligence Quotients (IQ) offer a way of finding out whether a child is ahead, behind or on time (average) in mental development in relation to other children of the same age” (Berk, p 232). With regard to research on human cognition, Schwebel (1985) indicates that focus is shifting from the measurement of intelligence in the form of IQ, which was considered as relatively unchangeable, towards the facilitation of intellectual functioning.

Apart from individual child assessments, a variety of instruments exist for rating physical environments. These include the Early Childhood Environmental Rating Scale (ECERS), and the High/Scope Program Quality Assessment: Preschool Version. The ECERS quality assessment tool has been developed and is being used to assess the quality of programs mostly in developed countries. The ECERS provide an overall picture of the surroundings that have been created for children and adults who share an early childhood setting (Harms, Clifford and Cryer, 2003). It consists of 43 items (see
Appendix 1) that assess the quality of the early childhood environment including use of space, personal care routines, program structure, language reasoning and interaction.

Sylva and Siraj-Blatchford (2001) used the rating scales to assess children’s developmental progress in pre-school. Their study was to assess ‘process’ characteristics such as the day-to-day functioning within settings – social interaction, children’s activities and physical facilities by using the Early Childhood Environmental Rating Scale (ECERS-R), which includes sub-scales on space and furnishing, personal care routines, language reasoning, activities, interaction, program structure, parents and staffing. In order that more ‘educational’ or curricular aspects of English centres could be assessed, the ECERS-E, which comprises four additional sub-scales relevant to the English National Curriculum - language, mathematics, science and environment, and diversity, was developed. Their study showed wide variations across England in the quality of provision as measured by the ECERS-R and also its English extension, ECERS-E. They concluded that the ECERS-E was a better predictor of children’s linguistic and cognitive progress and this was found to be interesting because the ECERS-E failed to predict social or emotional outcomes. They concluded that if academic achievement is valued at the start of school, then the ECERS-E is a good predictor of children’s ‘readiness’ for school in England. However if social outcomes are valued, then the social interaction scale on the ECERS-R is a better predictor of a child’s good start at school because they found that the social outcomes related most to the ‘processes’ observed in the ECERS-R were children’s independence and cooperation/conformity. The use of these rating scales is relevant (and possible) in the context in which the assessments were carried out (in England), however these are scales
that can not be easily used in the Ghanaian context due to cultural variations. The values and interpretations placed on the items of the sub-scales have different meanings for England and for Ghana because the value systems are not the same.

The High/Scope Program Quality Assessment (PQA): Preschool Version, is another rating instrument for evaluating the quality of early childhood programs and identifying staff training needs (High/Scope Educational Research Foundation, 1998). The PQA, which reflects ‘best practices’ in the early childhood field and was designed for use in centre-based preschool and child settings, is a comprehensive tool which examines all aspects of program implementation, from the physical characteristics of the setting to the nature of adult-child interaction to program management. The PQA has 72 items organized into seven sections that altogether cover all the areas essential for evaluating the quality of early childhood programs.

Assessments are important to ensure that programs are meeting the objectives for which they have been established. They provide a basis for improvements in the delivery of programs and also act as a pointer to specific areas that need to be improved and further ensure an efficient use of available resources. It is important, however to define who is involved in defining the tools or setting the standards with which assessments are carried out.

The need to begin considering quality in ECD programs in Ghana calls for the development of culturally appropriate tools that can be used across the country. This study is an attempt to begin the process of developing culturally appropriate tools for Ghana.
Standards and Program Quality

Kagan and Britto (2003) define early learning standards as broad statements of expectations for children’s learning or the quality of schools and other programs. Larner and Phillips 1994 (cited in Evans 1996), also note that when professionals assess child care quality, their goal is typically to identify the features of child care settings that are associated with positive experiences and outcomes for children. They noted further that their concepts of quality are designed to be concrete, objective and quantifiable, so they can be applied fairly across a wide range of programs. They further noted that professionals would rather focus on structural features of child care programs, such as adult-child ratio, group size and caregiver qualifications that are often associated with safe, positive experiences for children. Evans (1996) notes that there is little or no discussion of what happens in the setting relating to the process of education and concludes that the work that has been done to assess the long term impact of ECD programs clearly points out that the kinds of dynamic experiences the child has in the setting, e.g., with materials, through activities, and through interaction with adults, are far more important in determining child outcomes than the static indicators. But since the static dimensions are easier to measure and assess, they generally become the focal point. Penn (1994) cited in Evans (1996), notes that any regulatory model based solely on minimum standards rather than on principles and process has the effect that many providers, particularly in the private sector, equate meeting such standards with quality provision. As a result, providers can claim that because they have met the regulatory requirements, they are offering a quality service.
Culturally Relevant Standards for Program Assessment

Timyan (1988) observes that with the assessment of individual children, universal grids for the measurement of child development have essentially been created using data taken from non-African societies. He notes further that various measurements and scales which are used to indicate psychosocial developmental milestones of the normal child are all the result of research done in the West, through observation and testing of Western children, and as such they use categories and concepts of development which are deeply rooted in Western cultural traditions. Evans and Myers (1994) also note that while childrearing practices may be different across cultures, scientific knowledge suggests that there are basic needs that all children have and a predictable pattern of development during the early years that is universal. They posit that studies from different parts of the world reveal that all young children need adequate nutrition, health and care from birth onwards. Within the context of traditional beliefs and practices and scientific knowledge, they propose that strategies for developing appropriate programs should include the gathering of information that should provide an overall view of the practices and beliefs within the given culture. The gathering of information as a basis for providing knowledge base for programming is very relevant and important if programs are to reflect and benefit the population for which the program is intended. In the same vein, instruments for evaluation of ECD programs must of necessity reflect the values and beliefs of the children and families for whom it is developed. Evans (1996) identified four types of culture that has an impact on the process of defining quality: a) the local and family cultures within which the child is living, b) the culture of early childhood programs as they exist in the world today, c) the emerging global culture and d) the culture(s) of the
future. Each of these, she notes, has a ‘claim’ within the process of defining quality services for young children. Again it is very common to have programs developed for communities and see these programs becoming ‘white elephants’ because the communities were not involved in the design, implementation, monitoring and evaluation of the programs.

In a study on child upbringing practices in some communities in Ghana which was aimed at establishing culturally affirming community-based learning systems, Nah (2001) observes that the processes of education begin from birth as the child is inducted into the learning structure.

*Children’s Needs, Standards and Quality ECD programs – A Conceptual Framework*

The framework below expresses the relationship between children’s needs, standards and quality ECD programs. Children’s needs are defined by national governments based on scientific knowledge of what children need to develop appropriately as well as social constructs of children based on indigenous knowledge about children’s development. The knowledge of program implementers and managers is also key in ensuring that programs designed to support children’s development are well administered to meet the established goals.
Standards are necessary to ensure program quality, therefore, in developing standards for assessing program effectiveness and children’s progress, it is important to take into account the views of all these stakeholders. A common understanding of what constitutes quality ECD interventions for children in a particular society is important to ensure that all actors support the process in order to have the necessary impact on the lives of the children and families being served.
Early Childhood Development Programs in Ghana

In Ghana Early Childhood Development Programs comprise daycare programs based at centres or schools, in-home programs where caregivers go to the homes of children and in Nanny homes where parents take children to the homes of nannies. There are also after-school-home-care where children who close earlier from their centres are sent until their parents pick them up after work (Agor-Sah, et al. 2002). These facilities are either privately owned or owned by the government.
CHAPTER 3: METHODS

Early childhood development programs support children’s development and preparation for later learning. Assessment of such programs are essential to ensure that the programs are effective in meeting the developmental needs of children. It has been established that quality is an essential element in assessing the effectiveness of ECD programs. This study sought to provide an understanding of quality from the perception of parents, teachers and managers of ECD programs by addressing the following research questions: What are parents’ perceptions of what children aged 0-8 years need in order to develop?; What are parents’ perception of a quality ECD program?; Are there differences in parents’ perception of what children need and the perceptions of other caregivers and ECD program managers?; Are there differences in parent’s perception of quality ECD programs and the perceptions of other caregivers and program managers?; and What is the learning environment for children in community-based ECD programs?

This chapter provides a description of the study design and procedures. It covers a discussion on the study population, sampling frame and numbers, sampling method, survey design, protocol for obtaining data, data management and how the data were analysed.

The Study Area

The study was undertaken in the PLAN Ghana Bawjiase Program Area which is located in the Eastern fringes of the Central region, about 30 kilometres north-west of Accra, Ghana’s capital city. The study covered all the 27 communities with PLAN assisted ECD programs in the Bawjiase Program Area. The 27 beneficiary communities
were in 3 districts, namely Awutu-Efutu-Senya, Ga and Agona districts (see Appendix VII).

Twenty-four of the communities were in the Awutu-Efutu-Senya District, two in Agona and only one in the Ga District. The communities were predominantly rural farming areas, with most of the population engaged in subsistence farming on small family land holdings.

A two-day recognizance survey was undertaken to the study area in order to be familiar with the communities. The visits provided an overview of the communities in terms of the general layout, accessibility to communities and the population distribution and helped in determining the sample. The visit revealed that most of the working population in the area was engaged in subsistence farming. It also provided an opportunity to find out the ‘entry point’ or contact persons for the communities, the expected procedures for entry into the communities and when parents were likely to be available for interviews. The visit also provided an opportunity to discuss with some headteachers the availability of data on the ECD programs in the communities. Finally, the visit revealed that in addition to headmasters who have responsibility to manage the schools from the ECD level to the Primary and Junior Secondary School level, there are also designated heads of the ECD programs who report to the headmasters.

**Study Design**

This study was conceptualized as a descriptive survey research, which employed both quantitative and qualitative research methods. The choice of descriptive survey was considered the most appropriate study design because in the study, variables were not manipulated (Goodwin & Goodwin, 1996).
With the quantitative methods, two surveys were carried out. One involved the administration of questionnaires to parents and the second involved self-administered questionnaires for all 27 headmasters of the PLAN-assisted schools.

Quantitative methods were also employed to solicit views from headmasters on the 27 ECD programs in the Bawjiase area in order to provide a description of the community-based ECD programs from the point of view of program managers.

With the qualitative methods, interviews were carried out with ECD teachers, lower primary teachers, ECD heads, District ECD Co-ordinators and the Bawjiase Program Area Manager.

In order to provide a description of the community-based programs, observation of the ECD settings were undertaken with a check list adopted from Evaluation Design: UNICEF/United Nations Development Program – Socialist Republic of Vietnam.

Sample

Sampling procedure.

For the survey of parents, the target population included parents (fathers and mothers) whose children were attending or had attended the community-based ECD centres. The accessible population, however, comprised parents in the 3 selected communities who were available during the data collection. With the headmasters, questionnaires were given to all the 27 headmasters in the program area to complete.

In the case of the interviews, interviewees comprised teachers at the ECD centres, teachers in lower primary (Primary 1 – 3) all 3 ECD heads in the 3 selected communities, all 3 District ECD Coordinators and the Program Manager for the Bawjiase Program Area.
Sampling method and sample size.

While the survey of headmasters covered all 27 communities, the study employed purposeful sampling to select 3 out of the 27 communities for the survey of parents. The selection of the three communities was done with the help of the Bawjiase Area Program Manager, based on the following criteria:

(a) That there should be at least one community from each of the three districts covered by the program

(b) That communities should have run the ECD program for at least 5 years.

Based on the above, Akotsi, Fante Mayera and Fianko with total populations of 1,206, 340 and 1,350 were respectively selected.

After selecting the 3 communities, stratified, simple random sampling was employed to select a total of 90 mothers and fathers from the selected communities - 30 parents were drawn from each of the 3 selected communities. From each community, purposeful sampling was employed to select households with fathers and mothers whose children had attended or were attending the ECD centres. Simple random sampling was then employed to select fathers or mothers whose children had attended or were attending the ECD centres.

With the interviews, all District ECD Co-ordinators, all ECD heads and the Program Manager were all selected. With ECD teachers, 2 teachers each were randomly selected from Akotsi and Fianko while the only ECD teacher in Fante Mayera was automatically selected. A total of 5 ECD teachers were therefore interviewed. With lower Primary Teachers, 2 Teachers from each school were randomly selected for the interview, making a total of 6 teachers.
Procedures

Data collection protocol.

In compliance with ethical requirements for research projects (Goodwin & Goodwin, 1996), informed consent and assurance of confidentiality was ensured for this study. Permission to use the PLAN ECD programs for the study was sought from the PLAN Country Director at the beginning of the research. The purpose of the research and its intended use were explained to the management of PLAN. The Country Director of PLAN wrote to the Bawjiase Area Program Manager who thereafter wrote to all 27 headmasters managing schools with ECD programs and the 3 District ECD Co-ordinators to inform them about the research and solicit their co-operation in completing the questionnaires.

In order to obtain informed consent from parents, the chiefs of each of the 3 communities were informed about the research and its intended purpose a week before the data collection exercise, and a token amount was paid for the beating of the gong-gong to alert the community and solicit their cooperation. A day before data were collected from each community, the chiefs ordered the beating of the gong-gong to inform parents about the research and also solicit their cooperation and availability for the exercise. Before the administration of questionnaires, each parent was briefed again about the purpose of the research and their voluntary participation was sought. Before each interview and observation in a setting, the purpose of the study was explained and voluntary participation was sought from respondents. In all the above instances, participants were assured of confidentiality of any information provided.
Training and pilot testing of instruments.

In order to ensure efficiency in the data collection process, a two-day training was conducted for the field assistants which comprise four research assistants from the Institute of Statistical, Social and Economic Research (ISSER) of the University of Ghana, Legon, and one officer from the Bawjiase Area Program office. The training covered a discussion of the objectives and expected outcome of the study, discussion of the data collection instruments and pre-testing of the instruments. The language of the study communities are Twi and Ga and therefore the understanding and translation of terminologies, such as psychosocial skills, language skills, brain development, in these local languages was critical to the data collection exercise. The pre-test was conducted in Madina Old Town, a community with similar socio-economic characteristics as the communities in the selected study area. The pre-testing results brought relevant revisions to the instruments. For example, it turned out that in some cases where multiple answers were provided, respondents readily agreed with all answers provided – this did not seem to reflect their own perceptions so in such cases, questions were left open to parents to provide their own views on the issues. Pilot-testing the instruments also helped to estimate the amount of time/days required for data collection and analysis.

An evaluation of the two-day preparation for the field work indicated that it was very useful. The field assistants felt adequately prepared for the data collection exercise.

Survey questionnaires.

Survey questionnaires were designed for parents (see Appendix II). However, because most parents were not literate, they did not complete the questionnaires themselves. They had to be interviewed. The questions were designed to find out, among
other things, the perception of parents on what children 0-8 need to develop, when children start learning and how they learn, the importance of play and when to expose children to play materials and toys. Other questions focused on quality ECD programs in terms of perceptions of a good ECD centre, role of parents and care givers in ECD programs and characteristics of a good caregiver. Self-administered questionnaires for headmasters reflected the same questions for parents but included more questions relating to the ECD programs and the Primary School – enrolment, repetition and drop out rates (see Appendix III). Most of the completed questionnaires were returned by headmasters to the PLAN office within 2 weeks except for a few which field assistants followed up to the schools to collect.

**Interviews.**

A semi-structured interview schedule (see Appendix IV) was developed and administered to 5 ECD teachers, 6 Lower Primary teachers, 3 ECD heads, 3 District ECD co-ordinators and the Bawjiase Area Program Manager. The interview schedule included some of the same questions addressed to parents and headmasters so as to compare the responses of these different stakeholders with those of parents. In addition, there were questions on challenges facing the implementation of ECD programs. Each interview lasted on the average for 30 minutes.

**Observation.**

An observation check list (Appendix VI) adapted from a UNICEF/UNDP Program for the Socialist Republic of Vietnam, was used to collect data on ECD centres in the 3 selected communities. The checklist provided for a description of the centres in
terms of facilities and equipment, learning materials, children’s characteristics, teacher’s status and teacher/child interaction. The items on the check list were not scored since the purpose of the observation was only to provide a description of the setting and not to do an in depth assessment of the ECD programs. Provision was made for the observers to make additional comments on any issues of interest or offer explanations where necessary.

Data Management and Analysis

Quantitative data.

The management of the data involved editing of the completed questionnaires to check and eliminate errors, preparation of coding manuals for each set of questions, coding and screen designing with the SPSS statistical analysis software. This was followed by data entry. The data base was then cleaned to eliminate typographical errors.

Descriptive statistics was used to summarize parents’ responses, headmasters responses as well as the observation data. Cross tabulation was done to generate data for comparison of responses between sexes and among communities.

Qualitative data analysis.

The qualitative data from the interviews were transcribed and summarized into short statements. These statements were then interpreted and compared with data obtained from parents and headmasters.
Data quality.

In order to ensure the validity and reliability of the data and results of the study, measures were taken to minimize threats and biases throughout the study. According to Trochim (2001), threats to external validity could be minimized by use of random selection of respondents. The sampling for the survey of parents employed random sampling in order to enhance the generalizability of the outcome of the survey to parents in rural communities. With the use of the observation instrument, care was taken to minimize observer subjectivity by using multiple observers. Two field assistants observed the same settings independently.

Scope and Limitations of the Study

The study was designed to inform the process of assessing the effectiveness of ECD programs in Ghana. The study was, however, limited to a few rural communities most of which were located in the Central Region of Ghana. Ghana has 10 administrative regions with 110 districts with people of different ethnicity, values, beliefs and childrearing practices. However the study was limited to PLAN communities in the Bawjiase area. In terms of ethnicity, only two major ethnic groups, namely Gas and Fantes were represented. In terms of socio-economic status, the selected communities were representative of most rural communities in Ghana.

It was planned to have a balanced gender representation for the parents’ survey, however this was not achieved.

The study was also limited by time. The study was designed to meet the requirements for completion of an M.A. degree, which was scheduled to be completed within a specified time period. The study was therefore limited to a few communities and
a sample size that could allow time for the data collection, data entry, analysis and writing of the report within the scheduled time frame. Time did not also allow for repeated observations. However, to minimize observer subjectivity, two observers observed the same settings with the same instruments at the same time and the outcome was compared and discussed.

Finally, the study was limited by inadequate resources. More resources, in terms of funds and field personnel, would have been required to extend the study to cover more communities and a larger number of respondents.

The above limitations affected the generalization of the study outcome to all rural communities in Ghana. However the results of the study provide an important reference point for assessing ECD programs in Ghana.
CHAPTER 4: FINDINGS

This study sought to find out the perception of parents, other caregivers and ECD program managers on children’s development and quality ECD programs in order to provide a reference for inclusion of these stakeholders in assessing ECD programs. It involved the administration of questionnaires to a total of 90 parents in three rural communities and headmasters of 27 assisted ECD programs. Interviews were conducted with ECD teachers, Lower Primary teachers, ECD Heads, District ECD Coordinators and the Bawjiase PLAN Area Program Manager. Additionally, observations were carried out at 3 ECD centres to provide a description of the learning environments for children in the community based ECD programs. This chapter presents the outcome of the study.

Response Rate

In all, 90 parents were selected for the survey. The response rate was 100%. However, a balanced gender representation of 50% males and 50% females was not achieved because it was not possible to assemble all parents with children who attended or were attending the ECD centre before selecting those to be interviewed. Secondly because not all households had parents with children with ECD experience, interviewers had to randomly select any parent whose child had attended or was attending the community-based ECD program.

All the completed questionnaires from the 27 headmasters were returned to the Bawjiase Area Program Office. With the qualitative study, except for Fante Mayera where there was only one ECD Teacher for all the 3 classes, interviews were carried out with all selected respondents.
Profile of Respondents

The age of parents in the survey ranged between 19 and 65 years. Out of the total number of 90 parents, 38 (42.2%) were fathers while 52 (57.8%) were mothers. Table 4.1 shows the gender distribution of respondents by community.

Table 4.1: Respondents by Community and Sex

<table>
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<tr>
<th>Community/Sex</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fianko</td>
<td>8</td>
<td>22</td>
<td>30</td>
</tr>
<tr>
<td>Fante Mayera</td>
<td>14</td>
<td>16</td>
<td>30</td>
</tr>
<tr>
<td>Akotsi</td>
<td>16</td>
<td>14</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>38</td>
<td>52</td>
<td>90</td>
</tr>
</tbody>
</table>

As shown in Table 4.2, 47 (about 52%) of the parents were farmers, 25 (27.8%) were traders and 11 (12.2%) were business persons. While three of the fathers were government employees. None of the mothers were employed by government and none of the fathers were traders.

The employment pattern in Table 4.2 seem to be a reflection of the educational levels in Table 4.3, where for example none of the mothers are government employees because none of them had either senior secondary, vocational or tertiary education.

Table 4.2: Occupation of Parents by Community and Sex

<table>
<thead>
<tr>
<th>Occupation/Sex</th>
<th>Fianko</th>
<th>Fante Mayera</th>
<th>Akotsi</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
<tr>
<td>Farmer</td>
<td>7</td>
<td>7</td>
<td>11</td>
<td>9</td>
</tr>
<tr>
<td>Trader</td>
<td>11</td>
<td></td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Govt. Employee</td>
<td></td>
<td></td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Business Person</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>
Of the 5 ECD teachers interviewed, three had professional training in ECD – two of them at the National Nursery Teachers Training Centre. Two of the 3 ECD heads have also had some professional training at the National Nursery Teachers training Centre while 2 of the 6 lower Primary teachers have also received some professional training in ECD. Most of the interviewees with professional ECD training had participated in the training as part of PLAN Ghana’s sponsorship program. The heads of the ECD centres have held their positions for a period ranging between 4 to 15 years.
The Bawjiase Area Program Manager holds a second degree and has received training in Administration and Management but had no professional training in early childhood development.

With regard to respondents’ perceptions, there was a set of questions that were responded to by all - parents, headmasters, teachers at the ECD centres, Lower Primary teachers, District ECD Co-ordinators and the Bawjiase Program Manager. The responses to these questions are presented and analysed together since this illustrates the differences in their perceptions on children’s development and quality ECD programs.

*What Children (0-8) Need to Develop*

On parents’ perception of what children aged 0-8 years need to develop, 17% of all respondents indicated that children need a balanced diet, 12% indicated that children need good health care, 13% indicated that children need good parental care while 8% of respondents indicated that children need to play with toys. Comparing the responses of parents to that of headmasters, it could be seen that the pattern is the same except that while 8% of parents think that children need to play with toys, a relatively higher number of headmasters (13%) think that children need to play with toys (see Fig. 4.1 and 4.2, respectively). It was also interesting to note that some parents mentioned discipline as something children need for their development. They explained that discipline take the form of beating, scolding and denial or withdrawal of some privileges to ensure that children do the right thing. It was also intended to make them learn to become responsible adults.
Fig. 4.1: Parents’ Perception of What Children 0-8 Need

![Parental Perception Chart]

Fig. 4.2: Headmasters’ Perception of what Children 0-8 Need

![Headmasters Perception Chart]

The pattern was the same for ECD teachers, ECD heads, District ECD Coordinators and the Program Manager except that they added immunizations, breast milk, rest, enough time for children to play at home, security, a conducive atmosphere to learn and proper health attention.
Perceptions on Brain Development

Figure 4.3 indicates that both mothers and fathers had a good understanding of the importance of the early years. On the period of most rapid brain development, 78% mothers and 69% fathers think that most rapid brain development occur from 0-6 years. Headmasters also indicated that brain development occur rapidly from age 0-6 years (by 52%). However, a significant number of headteachers (37%) indicated 7-12 years as the period of most rapid brain development.

Fig. 4.3: Parents’ Perception on Brain Development
In the interviews, ECD teachers, heads of ECD centres, District ECD Coordinators, the Program Manager and Lower Primary teachers were all of the view that most rapid brain development occurs between 0-6 years.

*Perceptions on When Children Start Learning*

On the question of when children start learning, Fig. 4.5 indicates that 44% of mothers and 45% of fathers think that children start learning only after one year. Another set of respondents (40% mothers and 39% fathers) think that children do not start learning until after 3 years. There is a different view of headmasters on this subject indicated by Figure 4.6. They think contrary to the parents, that more than 35% of children start their learning process at birth. This could be attributable to the fact that some headmasters have had some professional training in early childhood development.
Perception on How Children Learn

With regard to how children learn, Fig. 4.7 indicates that 56% of mothers and 39% fathers think that children learn best through play, and 14% of mothers and 24% of fathers think children learn best through reading. Twenty-one percent of fathers and 16% of mothers think that children learn best through mimicking. When asked about the
importance of play, however, 39% of fathers and 56% of mothers thought that play was important for both boys and girls.

**Fig. 4.7: Parents’ Perception of How Children Learn**

**Fig. 4.7b: Parents’ Perception of Importance of Play for Learning**
Fig 4.7b above indicates how parents feel about the importance of play for learning. Eighty-one percent of fathers and 79% of mothers underscored the fact that children learn through playing.

Figure 4.8 also indicates the perception of parents in different communities. In the three communities surveyed, parents in Akotsi sees play as more important than the other two. This may be due to the higher levels of education in Akotsi. In all communities parents thought that play was an important way of learning. About 81.5% of headmasters however, think that children learn best through playing, 14.8% through watching, while 3.7% thought that children learn best through mimicking (see Figure 4.9).

Fig. 4.8: Parents Perception of How Children Learn by Community
The pie chart in Figure 4.10 shows the percentage of headmasters who strongly agree that play materials enhance learning the most. Ninety-two percent of headteachers (92%) agreed strongly that play materials enhance children’s learning. A small percentage (4%) however, did not agree that play materials enhance children’s learning.
When to Expose Children to Play Materials and Toys

In Figure 4.11 majority of parents think that children should be exposed to play materials and toys after one year.

*Fig. 4.11: Parents’ Perception of When to Expose Children to Play Materials and Toys*

*Fig. 4.11b: When to Expose Children to Play Materials and Toys by Community*
Parents in the communities also agree unanimously by their high indications in Fig 4.11b above that children should be introduced to play materials and toys after one year.

**Perceptions of a Good ECD Centre**

ECD centres or pre-schools provide a period of transition from home to school. Fig. 4.12 below indicates that parents perceive a good ECD centre as a centre with good school building, drawings and writings on the walls, play equipment and toys, learning and teaching materials and adequate playground. Other characteristics cited include good kitchen/adequate cooking utensils, toilet/urinal/bathroom, good drinking water, good teachers/trained teachers/good caregivers, good environment/safe environment, regular caregivers, good resting place, and affordable school fees. In Figures 4.12 and 4.13, both parents and headmasters place high premium on playing and teaching equipment.

**Fig. 4.12: Parents’ Perception of a Good ECD Centre**
Heads of ECD centres interviewed were also of the opinion that a good ECD centre should have teaching/playing materials, give good care, have trained care givers, instil discipline, provide enough time to play and appreciate the efforts of caregivers and provide in-service training for caregivers.

*Role of Parents in ECD Programs*

Figure 4.14 indicates that both parents (fathers and mothers) think that it is important to provide all the support children need to go to school (support include money to buy food, uniforms, footwear, etc). Headmasters (Fig. 4.15) also rated very high the need for parents to provide basic needs, and regularly visit the ECD centres.
Lower primary teachers (primary 1 to primary 3) see parents’ role in ECD programs as paying school fees regularly, provide necessary school materials, encourage children to go to school regularly and be punctually, feed their children properly, visit
school to interact with teachers and children, and organise communal labour to clean the school environment regularly.

With regard to the role of caregivers, Figures 4.16 and 4.17 indicate that both parents and headmasters think that it is important that caregivers ‘teach’ well, and treat children as their own. Rated lowest on the parents’ chart was the idea that caregivers should have a good relationship with parents. In other words, parents do not think that it is important to interact with the caregiver. Nonetheless, in terms of parents reports on how often they visit the ECD center, it would appear that they visit often (44% said they came at least once a week, 37% said once or twice a month, 17% said once a term, 3% said they have never had time to go to the centre). On reasons for visits, 71% said they went to discuss children’s school work while about 40% said they went for Parents and Teachers’ Association (PTA) meetings.

Fig. 4.16: Parents Perception of Role of Caregivers in ECD Program
The role of caregivers, according to ECD teachers, should be to teach children well, take good care of them, come to school regularly and be punctual, play with them, watch them when they are playing and be patient when dealing with them. They also agree that a good caregiver at an ECD centre should be someone who is patient and also treats children like their own. Lower Primary Teachers shared the same views but added that Care givers should ensure good interaction with both children and parents. ECD heads also added that good caregivers would be expected to go the extra mile and visit children at home and praise and reprimand children when necessary.

Reasons for Sending Child to ECD Centre

Parents in all communities had several reasons for sending their children to ECD centres. As is seen in Figure 4.18, 50% of the respondents said ECD programs provide a good foundation for primary school, about 15% said it allows parents time to work while about 13% indicated that it allows children to have good education. It also became apparent that children who did not attend an ECD program were not admitted to primary
one. Others also said because their children were too young for primary school training, they enlisted them in the ECD centres.

Fig. 4.18: Reasons for Sending Child to ECD Centre by Community

Challenges Faced With Community-Based ECD Programs

Responses stated in Figure 4.19 with respect to challenges faced with the ECD programs were unique only to headmasters. Highest on the list was the lack of cooperation of parents due mainly to illiteracy on the part of the parents as to the importance and resultant outcome of the ECD programs. Feeding children at the centres were also posing problems which leads to the next biggest problem of the headmasters, which is lack of proper parental care and adequate provision.
All District ECD Co-ordinators also iterated the lack of trained caregivers, transport for monitoring, non-existence of teaching/learning materials and non-payment of attendants and caregivers as challenges facing the ECD programs.

Teachers at the ECD centres enumerated the following challenges: inadequate, irregular, non-existent salary; disinterest of head teacher of basic school in ECD programs; disinterest of some parents in their children’s education; lateness of children; inadequate caregivers; no water containers and cups; no mats to sleep on; non payment of school fees; weedy surroundings, children being sent off to ECD centre without food; people destroy playing equipment at centre; flooding of classrooms.

The heads of the ECD centres indicated similar challenges as above - non payment of caregivers’ salaries, inadequate number of caregivers, lack of assistance from community, low enrolment figures, non payment of fees, lack of cups and containers for water for children, children not being fed at centre and lack of utensils for cooking.
Recommendations to Address the Above Challenges

Fig. 4.20: Headmasters’ Recommendations to Redress Challenges

ECD teachers recommendations - , they think PLAN should help put caregivers names on the national payroll; parents should be educated to show interest in their children’s education. Some think GES/District Assemblies should pay caregivers; centre keep part of school fees to run centre; GES/District Assembly provide more caregivers; PLAN provide polytanks; community provide water containers and organise communal labour to clean surroundings; PLAN/SMC/PTA discuss challenges with caregivers; community construct gutters; primary school children should fetch water for nursery and kindergarten children; centres must be fenced

ECD heads - GES/District Assemblies pay caregivers, PTA/SMC educate parents on the need to pay school fees and feeding fees, SMC encourage parents to send their children to school. They also saw the need of the GES/District Assembly recruiting preferably more female helps to assist caregivers, and parents visiting schools to interact with caregivers and children. They also believed that the ECD Centre should operate on
its own devoid of being instructed as to what to do as it leads to frustrations. One head facing flooding of its classrooms suggested the community construct a gutter in front of the school to alleviate this problem.

Challenges District Coordinators to alleviate these problems, they have suggested GES post trained teachers to schools, motor bikes or other means of transport be made available to them, books be supplied, and caregivers/attendants be paid. They also suggested JSS/SSS/MSLC leavers of the community be recruited, trained and given appointment at centres. They added that Government/District Assembly/NGOs also provide building materials to cater for infrastructure. The ECD Centres in these districts have also reiterated the above challenges as facing them in their centres and suggested that Government/District Assembly/NGO assist in putting up/maintaining schools, Government/GES supply books/materials for teaching/learning, and GES/District Assembly pay caregivers/attendants.

**Program Effectiveness**

Program managers – headmasters, District ECD Coordinators and the Area Program Manager are all of the view that the community-based programs have been effective because they have resulted in increased primary school enrolment numbers. Twenty-two of the 27 headmasters consider the PLAN programs to be effective, while 4 indicated that the programs were not effective. Reasons attributed to the effectiveness of the programs, according to headmasters, are indicated in Fig. 4.21.
According to headmasters, the provision of infrastructure and the School Health Education Program (SHEP) give an indication that the programs are effective. While these factors could be regarded as contributing to the impact of the programs, the effectiveness of the programs is also reflected in better performance of children at the primary school level and heightened children’s interest in school.

The Bawjiase Program Manager also indicated that the ECD Program on the whole has been a success because it has helped improve enrolment levels.

The Learning Environment: Some Observations

The observations carried out at the ECD centres provided a general description of the ECD programs accessible to young children in the communities. With regards to facilities and equipment, all 6 observers indicated that there were adequate lighting, ventilation, toilet facilities, outdoor play area and play equipment at the centres. While 3
observed that there were kitchens and 4 noted the availability of clean water, 5 indicated that there were no sleeping spaces and sleeping mats. It was also observed by all 6 that there were no scales or growth monitoring charts. While these observations might seem to give a generally positive view of the facilities, 5 of the 6 observers noted that the environment was unsafe, explaining that although there were play areas most of the equipment were rusted and broken down and thus were unsafe to be used by the children. Additionally, the environments were overgrown with weeds and could attract reptiles and so even though there were toilet facilities, this was not used by the children in one centre because it was found to be unsafe to do so.

With regard to learning materials, puzzles and games, play materials, teacher-made toys, teaching aids, chalk board, were available but not in all the centres. It was noted that in 3 out of the 6 centres observed, materials were not easily available to the children. At one centre, the store where puzzles and games were stored had been locked for days and the keys were not available because the headteacher was on course. Children’s art work was only displayed at only one centre.

With regards to children’s characteristics, it was noted by 3 observers that 75% of the children look neat and also that 75% were in uniform but less than the same number had footwear. These characteristics might be considered as a reflection of parents’ socio-economic status and their inability to afford uniforms and footwear. Even though most of the children were rated as not being physically active (this could be due to the children being conscious of ‘strangers’), on the average, most children demonstrated positive interaction.
Except in the case of one teacher, teachers were rated relative high in terms of their self confidence, skills, being well organized, creative and dedication to work. There also appeared to be a good relationship between teachers and the children as teachers responded to children’s needs, encouraged independent and cooperative play, asked and responded to verbal requests and praised children’s behaviour. Most children and teachers were seen to reciprocate affection. These positive observations could be attributable to the professional training received by some of the teachers and also probably due to teachers’ own characteristics.

This chapter summarized the perceptions of parents, other caregivers and ECD program managers on children’s needs and quality ECD programs. It also provided a description of the environment in which children learn. The observations from the settings confirm some of the descriptions of quality ECD programs as noted from the surveys and interviews.
CHAPTER 5: DISCUSSION

This chapter focuses on the findings of the study as they relate to the research questions. The study has focused on children’s needs and early childhood development programs, looked at the perceptions of parents about what children 0-8 need to develop and how they perceive quality in ECD programs. It further explored differences in parents’ perception and that of other caregivers and program managers.

Child Development and Children’s Needs

Child development as defined by Myers (1988) is a process of change in which a child learns to handle more and more complex levels of moving, thinking, speaking, feeling and relating to others. Both biological and ecological factors determine how children develop. Parents are primarily responsible for ensuring the growth and development of their children even though early childhood development programs also play a very important role in ensuring children’s development. The extent to which parents and others responsible for children’s development support their optimum development depends on their understanding of what children really need to develop and the extent to which these needs are provided.

Children’s needs are both universal and contextual. The findings of this study however confirmed the views of Evans (1994) and Myers (1997) on what children 0-8 years need to develop – good nutrition and health care, shelter, love, care and attention and protection. The extent to which these needs are met by parents and ECD programs forms the basis for assessing children’s developmental appropriateness. For example with reference to nutrition, even though parents indicated that children need good nutrition, it is not clear whether they appreciate the important role nutrition play in brain
development and children’s learning. From the responses of ECD teachers and District ECD Coordinators, some children are sent to school without snacks or food and they sometimes share the food brought by other children or just drink water till they go back home. This confirms observations of children at the centres, which indicated that only 2 out of 6 observers noted that 50% of the children at the ECD centres looked well nourished. Even though the inability of most parents to meet the nutritional needs of children may be due to economic reasons since most of them are subsistent farmers and may be earning little from their small farm holdings and petty trading, it is possible that an understanding of how critical good nutrition is to brain development and children’s learning may help parents go a step further in meeting the nutritional needs of their children.

Most respondents also indicated that children need play materials and toys in order to develop however, about 50% of parents think children start learning after one year while almost the same number think that children start learning after three years and believe that play enhances children’s learning. On the question of when children should be exposed to play materials and toys, majority of parents thought children should be exposed to play materials and toys after one year while some think they should be exposed to play materials after three years. It seems clear that parents acknowledge play as an important factor in children’s development. However the perception of some parents on when children start learning and how early children should be exposed to play materials and toys does not reflect the fact that learning begins at birth (Myers, 2001). Knowledge about when children start learning is not comprehended by most parents.
Early Childhood Development Programs and Children’s Development

Early childhood development programs support children’s holistic development and prepare them for school and later learning. Parents gave many reasons for sending their children to the community-based ECD programs. More than 50% of parents in all communities said they send their children to ECD centres in order to lay a good foundation for their primary education. However the extent to which children are prepared for primary education depends on the type of ECD setting and the quality of services offered. The study revealed that parents perceive ECD centre as a centre with good infrastructure, play equipment and toys, learning and teaching materials and adequate play ground. They also cited good drinking water, good/trained teachers, safe environment, good resting place, kitchen and adequate cooking utensils among others as indicators of a good ECD centre. With reference to a good caregiver, both parents and headteachers stated that caregivers should treat children as their own, teach well, visit child at home and be regular and punctual at the centre.

Even though it may seem from the above that parents are knowledgeable about what constitutes effective ECD programs, it is important to look beyond this static indicators and consider the processes - for example, how teachers teach, how many hours are spent on play, how involved are parents in the program and the regularity of supervision.

On the role of parents in ECD programs, most parents indicated that parents’ role in ECD programs include provision of school needs, preparing children for school, discussing children’s performance and co-operate with caregivers. These perceptions however seem to contradict participation of the parents in their own children’s ECD
program. This is evident from the responses from headmasters and ECD teachers on challenges facing the ECD programs, where they indicated that one of the major challenges facing the programs was lack of co-operation from parents.

With regards to nutrition, even though most respondents have cited nutrition as key to children’s development, the extent to which nutrition is factored into the ECD program is minimal. In all three of the ECD centres studied, there was provision for a kitchen facility but food was not prepared for the children at the centre. Most of the headmasters also reported that due to the inability of parents to pay a maximum of €5,000 a term for feeding, most kitchen facilities provided for the centres are not being utilized.

Even though there was no direct focus on the role of government in this study, parents suggested that government create jobs for them. Rural incomes are generally very, very low and for parents to meet the needs of their children, strategies need to be adopted to support their income generating activities.

With reference to care and health needs of children, even though most respondents indicated that children need this, from the observation of the centres, none of the centres in the communities had scales or growth monitoring charts. This implies that there was no growth monitoring at these centres. There were also no first aid boxes to ensure that children receive first aid. This has implications for monitoring the growth of the children.

It may therefore appear that some parents only send their children to the centres so they can have some time to themselves and their work.

The findings of the study indicate that parents are knowledgeable about child development issues and suggest that there is not much difference between children’s
needs as perceived by parents, ECD teachers and program managers. All children need
good nutrition, shelter, love. This confirms the views of Evans (1994) and Myers (1997).
What was of interest was the mention of discipline by some parents. Most of the literature
that refers to basic needs of children would not normally mention discipline. In most
African countries, children are expected to conform to certain societal norms and behave
in a certain manner. When this does not happen, parents take measures to ensure that
children conform.

*Limitations in research methodology*

One major limitation of the research was that the scope was too wide. Considering
the time available for this study, the study should have been limited to the survey of
parents and ECD teachers. The choice of many sets of respondents resulted in too much
data to be analysed. The management of the data and the report writing was time
consuming and finally resulted in some of the data not being used in this report.
CHAPTER 6: CONCLUSIONS

This chapter summarizes the key outcomes of the study and their implications for assessing the effectiveness of ECD programs. The study found out that parents, headteachers, ECD teachers, ECD heads, District Co-ordinators and are all knowledgeable about children’s needs and quality ECD programs. From the analysis however, there were some disparities in the findings as compared to what came up in the literature review. The literature indicates, for example that children start learning at birth, but about 50% of parents hold the view that children start learning after one year. The study also showed that parents are of the view that children also learn through play.

The study focused on creating an understanding of children’s needs and quality ECD programs from the perspective of parents and to compare these perspectives with those of ECD Teachers, quality and effectiveness of community-based ECD programs, from the perception of the key stakeholders (parents, teachers and program managers). They also have an understanding of and expectation that ECD programs will support their child’s development, as was reflected in their reasons for sending their children to ECD centres. Based on these findings the following conclusions can be drawn from the study.

From the above major findings the following conclusions can be made:-

a. The perception of parents does not differ much from the established literature on the issue, however an interesting concept came up with regards to discipline. This could be a reflection of the child rearing practices within the cultures studied. This shows the importance of involving all stakeholders in the design and assessments ECD programs.
b. That parents and other stakeholders associated with ECD programs are knowledgeable about quality ECD programs and what to expect of effective ECD programs.

c. With regards to differences in parents’ perceptions and those of other stakeholders, that is, headteachers, ECD teachers.

Early childhood development programs are designed to support the developmental needs of young children and it is important to ensure that such programs are effective in providing the necessary support towards children’s optimal development. Assessments provide a pointer to for determining program effectiveness Quality is an important feature of program effectiveness and therefore it is important to define and appreciate what is presumed to be quality by all stakeholders in the ECD program.

Parents are key stakeholder in ECD programs and it is therefore important to find out their perception of quality ECD programs, based on what children need to develop. This study was important in establishing the fact that parents are knowledgeable about the features of quality ECD programs.
CHAPTER 7: RECOMMENDATIONS

This thesis has sought to provide an understanding of important consideration in defining quality in ECD programs – the perceptions of parents and other care givers. The study focused on investigating the views of parents and other caregivers on the needs of young children, and their views of quality ECD programs, the roles of caregivers in ECD programs and the challenges faced by caregivers.

On the question of when brain development occurs most and when children start learning, parents believed that brain development occurs most between the ages of 0 – 6 and that children start learning after 1 year and as such, be introduced to play materials. These beliefs can be seen from their attitude towards the participation of programs and it is the desire of countries and parents that children grow up to the best of their ability. Early childhood development programs play a very important role in supporting or enhancing children’s overall holistic development, preparing them for school and their eventual success in life. The need for interventions that will yield the maximum benefits to the children themselves, to their parents, communities and the country as a whole cannot be overemphasized. The process of defining what is required to attain ‘maximum benefits’ has been the focus of this study.

The need for developing culturally relevant assessment tools has been articulated by many researchers and ECD experts. What this thesis has sought to do was to provide an important pre-requisite for assessing program effectiveness. The results of the study showed that parents and other stakeholders are knowledgeable about what children need to develop. There is however a knowledge gap regarding how children learn. Based on the findings of this study, the following recommendations are proposed:
1. This initial exploratory research should be extended to cover all socio-economic and cultural groups in the country – rural, urban, rich, middle-class, poor and very poor.

2. Parents’ goals for the socialization of their children differ between communities and ethnic and social sub-groups. E.g. while docile, obedient children may be highly valued and adaptive in one context, such behaviour might not be acceptable on the part of parents and educators in another setting where assertiveness and independence are valued.

3. This study has indicated that parents have some knowledge of child development issues. However, it is evident that there is some knowledge gap, especially regarding the issue of brain development, when children start learning, when they should be exposed to materials and toys they can ‘manipulate.’ Research has provided compelling evidence of how these processes affect child development and it is important for parents to have this ‘scientific’ knowledge. First for a deeper level of understanding of their own children and second so that they can provide the necessary support required for their learning. The process should not be seen as ‘imposing’ knowledge but rather acquiring knowledge. The new knowledge is not to erase or condemn what is known (IK) but to complement what is already known for the benefit of the child. Where knowledge gap is evident, parental education/orientation programs should precede the commencement of the actual standards development process.
4. The process should go beyond only parents with children with ECD experience to include non-ECD parents as well.

5. All stakeholders in the development of ECD in Ghana should be identified and involved in the development of standard assessment tools for ensuring quality ECD programs for young children in Ghana.

6. Any instrument developed for nationwide use should be tested widely – in different socio-cultural and economic settings in order to ensure acceptance of the instrument.

7. Items for measurement should be chosen that are relevant to the socio-cultural setting eg. Number of toys available, space available for play, etc. This is because with different socio-economic contexts in the country, what is considered low in one context could be exceptionally high in another.

8. The process should take note of risk factors such as psychosocial factors which are associated with environmental disadvantage and/or problems of parent-child interaction. This is especially important when the assessment instruments are intended to be the standard for use nationwide – risk factors may have implications for different settings/communities. This could help in increasing the predictive validity of the instrument.

9. Effective programs are tied to the availability of resources. Community-based programs usually have limited resources and depend on the
efforts of parents and personnel who have little formal training.

Instruments should be designed to adapt to program needs.

Even though the study was not an assessment of community-based programs, the following additional recommendations can be made towards ensuring effectiveness of community-based ECD programs:

a. It is important to educate parents on the objectives of establishing ECD programs and subsequent roles of parents in the efficient implementation of such programs.

b. The design of community-based ECD programs should include at least one nutritious meal a day for the children.

c. The problem of lack of cooperation from parents should be addressed from the outset by ensuring that parents are well educated on the importance of ECD programs in supporting the developmental needs of the children.

d. In order to retain teachers at the ECD centres, their conditions of service, including adequate provision for their salaries should be incorporated in the total cost of implementing the programs.
BIBLIOGRAPHY


APPENDIX 1: OVERVIEW OF THE EARLY CHILDHOOD ENVIRONMENTAL RATING SCALE (ECERS)

43 items organized into 7 Subscales
Space and Furnishings

1. Indoor space
2. Furniture for routine care, play and learning
3. Furnishings for relaxation and comfort
4. Room arrangement for play
5. Space for privacy
6. Child-related display
7. Space for gross motor play
8. Gross motor equipment

Personal care routines

9. Greeting/departing
10. Meals/snacks
11. Nap/rest
12. Toileting/diapering
13. Health practices
14. Safety practices

Language-reasoning

15. Books and pictures
16. Encouraging children to communicate
17. Using language to develop reasoning skills
18. Informal use of language

Activities

19. Fine motor
20. Art
21. Music/movement
22. Blocks
23. Sand/water
24. Dramatic play
25. Nature/science
26. Math/number
27. Use of TV, video, and/or computers
28. Promoting acceptance of diversity

Interaction
29. Supervision of gross motor activities
30. General supervision of children (other than gross motor)
31. Discipline
32. Staff-child interactions
33. Interactions among children

**Program Structure**

34. Schedule
35. Free play
36. Group time
37. Provisions for children with disabilities

**Parents and Staff**

38. Provisions for parents
39. Provisions for personal needs of staff
40. Provisions for professional needs of staff
41. Staff interaction and cooperation
42. Supervision and evaluation of staff
43. Opportunities for professional growth
APPENDIX II: OBSERVATION CHECK-LIST


Name of Centre: .................................................................

Name of Community...........................................................

District...................................................................................

Class (eg Nursery I, 2, or 3)......................................................

Date of Observation: ............................................................

Name of Observer: ............................................................... 

Please check either Yes or No

1. Facilities and Equipment 

   Yes  No

   Safe environment

   Toilet Facility

   Adequate lighting

   Adequate ventilation

   Clean water

   Sleeping space

   Sleeping mats

   Outdoor play area

   Outdoor play equipment

   Kitchen/cooking area

   First Aid box
Scale/Growth Monitoring Charts

Chair per child

2. Learning Materials

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chalk Board</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note Book per child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Puzzles and games</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Play materials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Display of children’s art work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher-made Toys</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching aids</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher’s Manual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Materials easily available to children</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. Children’s Characteristics

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>50% of children look well nourished</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75% of children look neat/clean</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75% of children have footwear</td>
<td></td>
<td></td>
</tr>
<tr>
<td>75% of children have school uniform</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physically active</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrate positive interaction with observer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. Teacher’s status

   Yes    No

   Self confident
   Skillful
   Active
   Well organized
   Creative
   Dedicated to work

5. Teacher/child interaction

   Yes    No

   Asks questions/responds to verbal requests
   Responsive to children’s needs
   Affectionate (teacher to child)
   Affectionate (child to teacher)
   Praise/acknowledgement of behaviour
   Independent play encouraged
   Co-operative Play encouraged
   Handles child-child conflict with reason

6. Comments:
APPENDIX III: SURVEY QUESTIONNAIRES FOR PARENTS

Name of Community………………………………………………

District:…………………………………………………………

Name of Interviewer………………………………………………

Date:………………………………………………………………

1. Name: …………………………………

2. How old are you? ……………………………

3. Sex
   1. Male
   2. Female

4. Marital Status
   1. Single
   2. Married
   3. Divorced
   4. Separated
   5. Widowed

5. What is your occupation?
   1. Farmer
   2. Trader
   3. Government Employee
   4. Businessperson
   5. Not employed
   6. Any other (Please specify)……………………………………

6. What is your spouse’s occupation?
   1. Farmer
   2. Trader
   3. Government employee
4. Businessperson
5. Not employed
6. Any other (Please specify)

7. Educational Attainment:
   1. No formal education
   2. Primary school
   3. Middle school/JSS
   4. Senior Secondary School
   5. Vocational/Technical Training
   6. Tertiary
   7. Any other (Please specify)

8. How many children do you have?

9. Did any of your children attend the PLAN ECD center?
   1. Yes
   2. No
   (If no please go to question 17)

10. How many of your children attended the PLAN assisted ECD centre?

11. Why did you send this child/these children to the PLAN ECD centre?

12. When your child/children were at the ECD centre how often did you go to the centre?
   1. Everyday
   2. Once a week
   3. Twice a month
   4. Once a month
   5. Once a term
   6. I never had time to go to the centre

13. What did you go to do at the centre?
   1. To discuss my child’s school work
2. To attend PTA meetings
3. To attend other programs organized at the school
4. I did not have time to visit the school
5. I took my children to school

14. Did any of your children who attended the ECD centre repeat a class?
   1. Yes
   2. No

15. Did any of your children who attended the ECD centre drop out of school?
   1. Yes
   2. No

16. If you answer Yes to any of the above, please give reasons for the repetition and/or drop out of the child/children.

……………………………………………………………………………………………………………………
……………………………………………………………………………………………………………………
……………………………………………………………………………………………………………………
……………………………………………………………………………………………………………………

17. Children who attended PLAN’s ECD programs demonstrate good psychosocial skills. Do you agree?
   1. Strongly Agree
   2. Agree
   3. Disagree
   4. Strongly disagree
   5. Do not know

18. Children who attended PLAN’s ECD program demonstrate good language skills. Do you agree?
   1. Strongly Agree
   2. Agree
   3. Disagree
   4. Strongly disagree
19. What would you say are the 3 most important benefits of the ECD program for you as a parent?
1. 
2. 
3. 

20. What would you say are the 3 major challenges facing parents whose children attend the ECD centre?
1. 
2. 
3. 

21. Of each of the challenges identified, what would you suggest should be done to address the issue?

Perceptions on children’s development and quality ECD Programs

A. Child Development

22. In your view what do children 0-8 need to develop?
1. 
2. 
3. 
4. 
5. 

23. In your view what is the period of most rapid brain development?

   (Please check one answer)
24. Young children (0-8 years) learn best through
   (Please check one answer)
   a. watching
   b. reading
   c. playing
   d. mimicking

25. Children start learning
   (Please check one answer)
   a. before
   b. at birth
   c. after 1
   d. after 3
   e. after 6

26. How early should children be exposed to play materials and toys?
   (Please check one answer)
   a. before
   b. at birth
   c. after 1
   d. after 3
   e. after 6

B. Child Development Program

27. Please give your views of a good ECD center
28. What should be the most important items in an ECD centre?
   1. ……………………………………………………………………………….
   2. ……………………………………………………………………………….
   3. ……………………………………………………………………………….
   4. ……………………………………………………………………………….
   5. ……………………………………………………………………………….
   6. ……………………………………………………………………………….

29. Play materials and toys enhance children’s learning at an ECD center.
   1. Strongly Agree ☐
   2. Agree ☐
   3. Disagree ☐
   4. Strongly disagree ☐
   5. Do not know ☐

C. Role of parents in ECD Programs

30. In your view what should be Parents role in ECD programs
   1. ……………………………………………………………………………….
   2. ……………………………………………………………………………….
   3. ……………………………………………………………………………….
   4. ……………………………………………………………………………….
   5. ……………………………………………………………………………….
   6. ……………………………………………………………………………….
D. Role of Caregivers in ECD programs

31. In your view what is the role of a caregiver at an ECD center?
   1. ........................................................................................................
   2. ........................................................................................................
   3. ........................................................................................................
   4. ........................................................................................................
   5. ........................................................................................................
   6. ........................................................................................................

32. In your view who is a good caregiver at an ECD center?
   1. ........................................................................................................
   2. ........................................................................................................
   3. ........................................................................................................
   4. ........................................................................................................
   5. ........................................................................................................
   6. ........................................................................................................

Thank you very much for taking time to complete this questionnaire.
APPENDIX IV: INTERVIEW QUESTIONS FOR ECD TEACHERS, ECD HEADS, DISTRICT ECD CO-ORDINATORS AND BAWJIASE AREA PROGRAM MANAGER

Name of Centre………………………………………………

District:…………………………………………………..

Name of Interviewer……………………………………

Date:……………………………………………………

1. How many years have you been teaching in the ECD centre? …………………..

2. Have you had any formal/professional training in early childhood development?
   Yes/No
   (If no, please go to question 5)

3. If yes, please indicate training institution attended
   …………………………………………………………………………..

4. Please indicate duration of training
   …………………………………………………………………………..

5. What challenges do you face as a teacher at the ECD centre?
   ………………………………………………………………………………………
   ………………………………………………………………………………………
   ………………………………………………………………………………………

6. How do you think these challenges can be addressed?
   ………………………………………………………………………………………
   ………………………………………………………………………………………
   ………………………………………………………………………………………

7. What other challenges face the ECD centre?
   ………………………………………………………………………………………
   ………………………………………………………………………………………
8. How do you think these challenges can be addressed?

Perceptions on children’s development and quality ECD Programs

A. Child Development

9. In your view what do children 0-8 need to develop?

1. …………………………………………………………………………………………………

2. …………………………………………………………………………………………………

3. …………………………………………………………………………………………………

4. …………………………………………………………………………………………………

5. …………………………………………………………………………………………………

10. In your view what is the period of most rapid brain development?

(Please check one answer)

a. 0-6 years

b. 7-12 years

c. 13-18 years

d. after 19 years

11. Young children (0-8 years) learn best through

(Please check one answer)

a. watching

b. reading

c. playing

d. mimicking

12. Children start learning

(Please check one answer)

a. before birth

b. at birth
13. How early should children be exposed to play materials and toys? (Please check one answer)
   a. before birth
   b. at birth
   c. after 1 year
   d. after 3 years
   e. after 6 years

B. Child Development Program

14. Please give your views of a good ECD center
   1. ..............................................................................................................
   2. ..............................................................................................................
   3. ..............................................................................................................
   4. ..............................................................................................................
   5. ..............................................................................................................
   6. ..............................................................................................................

15. What should be the most important items in an ECD centre?
   1. ..............................................................................................................
   2. ..............................................................................................................
   3. ..............................................................................................................
   4. ..............................................................................................................
   5. ..............................................................................................................
   6. ..............................................................................................................

16. Play materials and toys enhance children’s learning at an ECD center.
1. Strongly Agree
2. Agree
3. Disagree
4. Strongly disagree
5. Do not know

C. Role of parents in ECD Programs
17. In your view what should be Parents role in ECD programs
1………………………………………………………………………………
2………………………………………………………………………………
3………………………………………………………………………………
4………………………………………………………………………………
5………………………………………………………………………………
6………………………………………………………………………………

D. Role of Care givers in ECD programs
18. In your view what is the role of a caregiver at an ECD center?
1………………………………………………………………………………
2………………………………………………………………………………
3………………………………………………………………………………
4………………………………………………………………………………
5………………………………………………………………………………
6………………………………………………………………………………
19. In your view who is a good care giver at an ECD center?
1………………………………………………………………………………
2………………………………………………………………………………
3………………………………………………………………………………
4………………………………………………………………………………
5………………………………………………………………………………
6………………………………………………………………………………
Thank you
APPENDIX V: QUESTIONNAIRE FOR HEADMASTERS

Date………………

3. Name of School: …………………………………

4. District:………………………………………………

5. Age of Respondent ……………………………

4. Sex
   1. Male
   2. Female

5. Marital Status
   1. Single
   2. Married
   3. Separated
   4. Divorced
   5. Widowed

6. Number of Children ……………………………..

7. Educational Attainment
   1. Secondary School
   2. Teacher Training College
   3. Diploma
   4. University
   5. Any other (Please specify)……………………………………………….

8. Number of years of teaching experience
   1. Less than 10 years
   2. 10 – 15 years
   3. 15 – 20 years
   4. 20 – 25 years
   5. more than 25 years

9. Have you had any professional training in ECD?
   1. Yes
   2. No

10. If yes, please indicate training institution attended:
11. Please indicate duration of training

12. Have you had any training in administration and management?
   1. Yes
   2. No

13. Please indicate duration of training

Part II
ECD Program

14. When was the ECD program established? ...........................................................

15. What was the total number of children enrolled when first established? ...............

16. What was the enrolment for 2002? .................................................................

17. Has there been an increase in the overall rate of enrolment over the past 5 years?
   1. Yes
   2. No

18. If Yes, what is the approximate percentage increase? ........................................

19. In your opinion what is the reason for the increase?

20. Current enrolment: Please Complete the Table below

<table>
<thead>
<tr>
<th>Nursery 1</th>
<th>Nursery 2</th>
<th>Nursery 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys M</td>
<td>Girls F</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>ECD Trained</td>
<td>Not Trained</td>
<td>Attendants</td>
<td>Toilet</td>
</tr>
<tr>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
</tr>
</tbody>
</table>

21. What is the Child/Teacher ratio? .................................................................

22. Which of the following meals are provided at the ECD centre?
   1. Breakfast ...........
   2. Lunch ..............
3. Snacks
4. None of the above

23. How much is contributed per child towards feeding? 

24. How is this contribution made?

25. If children are not fed by the center how are their meals provided?

26. What kind of health care services are provided at the centre?
   1. Visits by Health Officials
   2. Immunizations
   3. Growth Monitoring
   4. Other (Please specify)

27. How often is the health care service provided?
   Weekly
   Twice a month
   Once a month
   Once a term
   Any other (please specify)

28. How would you rate the overall health status of the children at the ECD centre?
   Very Healthy
   Healthy
   Not very Healthy
   Not at all Healthy
   Other (please specify)

29. Please give reason for your answer

30. What is the level of parent participation in the program?
   1. Parents visit the school to discuss child’s progress
   2. Parents attend PTA meetings
   3. Parents attend other programs at the school
4. Parents drop off children at centre

5. No interaction between parents and the centre

31. How often do parents carry out the above activity/activities?
   1. Daily
   2. Weekly
   3. Twice a month
   4. Once a month
   5. Once a term

32. What is the level of Community participation in the ECD Program?

   1. Involved in the development of the program
   2. Provide financial support
   3. Membership of the Management Team
   4. Involved in the supervision of the Program
   5. Any other (Please specify)………………………………………………

Part III

Primary Education

33. Enrolment, Repetition and Drop Out in Lower Primary (Primary 2)

<table>
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<tr>
<th>Year</th>
<th>Enrolment</th>
<th>Repetition</th>
<th>Drop Out</th>
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<tr>
<td></td>
<td>Boys</td>
<td>Girls</td>
<td>Total</td>
</tr>
<tr>
<td>1990</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1992</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1994</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1996</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1998</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2002</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

34. Do all children in lower primary have the PLAN ECD experience?

   1. Yes
2. No

35. Has any of the PLAN ECD graduates repeated or dropped out in the lower primary?
   1. Yes
   2. No

36. If yes, please indicate repetition/drop out below:

   Repeated
   No. of ECD Children ……. …… …… …… …… …… ……

   Dropped Out
   No. of ECD Children ……. …… …… …… …… …… ……

37. Please give reasons for the repetition and drop out of the children

   ..............................................................................................................................
   ..............................................................................................................................

Part IV

38. Children who attended PLAN’s ECD programs demonstrate good psychosocial skills
   1. Strongly Agree
   2. Agree
   3. Disagree
   4. Strongly disagree
   5. Do not know

39. Children who attended PLAN’s ECD program demonstrate good language skills
   1. Strongly Agree
   2. Agree
   3. Disagree
   4. Strongly disagree
   5. Do not know

40. Does the Primary School Curriculum have any bearing on the ECD curriculum?
   1. Yes
2. No

41. If Yes, can you please explain the relationship?

........................................................................................................................................................................
........................................................................................................................................................................

42. What would you say are the 3 major challenges facing the PLAN ECD program?
   1. 
   2. 
   3. 

43. For each of the above challenges, what would you suggest should be done to address the challenge?

........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................

44. In your view will you say the PLAN ECD programs have been effective?
   1. Yes
   2. No

45. Please give reasons for your answer.

........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................

Perceptions on children’s development and quality ECD Programs

A. Child Development

46. In your view what do children 0-8 need to develop?
   1. .................................................................
   2. .................................................................
   3. .................................................................
   4. .................................................................
   5. .................................................................

47. In your view what is the period of most rapid brain development?
48. Young children (0-8 years) learn best through
(Please check one answer)
a. watching
b. reading
c. playing
d. mimicking

49. Children start learning
(Please check one answer)
a. before birth
b. at birth
c. after 1 year
d. after 3 years
e. after 6 years

50. How early should children be exposed to play materials and toys?
(Please check one answer)
a. before birth
b. at birth
c. after 1 year
d. after 3 years
e. after 6 years

B. Child Development Program

51. Please give your views of a good ECD center
1. ..............................................................................................................
2. ..............................................................................................................
3. ..............................................................................................................
52. What should be the most important items in an ECD centre?
1. .................................................................
2. .................................................................
3. .................................................................
4. .................................................................
5. .................................................................
6. .................................................................

53. Play materials and toys enhance children’s learning at an ECD center.
1. Strongly Agree □
2. Agree □
3. Disagree □
4. Strongly disagree □
5. Do not know □

C. Role of parents in ECD Programs
54. In your view what should be Parents role in ECD programs
1. .................................................................
2. .................................................................
3. .................................................................
4. .................................................................
5. .................................................................
6. .................................................................

D. Role of Care givers in ECD programs
55. In your view what is the role of a caregiver at an ECD center?
1. .................................................................
2. .................................................................
3. .................................................................
4. .................................................................
56. In your view who is a good care giver at an ECD center?

1. .................................................................
2. .................................................................
3. .................................................................
4. .................................................................
5. .................................................................
6. .................................................................

Thank you very much for taking time to complete this questionnaire.
APPENDIX VI: INTERVIEW QUESTIONS FOR LOWER PRIMARY TEACHERS

Name of School ..............................................

District: .........................................................

Name of Interviewer ......................................

Date: ..............................................................

1. How many years have you been teaching at this school? ......................

2. Have you had any formal/professional training in early childhood development?
   Yes/No
   (If no, please go to question 5)

3. If yes, please indicate training institution attended
   ........................................................................

4. Please indicate duration of training
   ........................................................................

5. Children who attended PLAN’s ECD programs demonstrate good psychosocial skills
   1. Strongly Agree ☐
   2. Agree ☐
   3. Disagree ☐
   4. Strongly disagree ☐
   5. Do not know ☐

6. Children who attended PLAN’s ECD program demonstrate good language skills
   1. Strongly Agree ☐
   2. Agree ☐
   3. Disagree ☐
   4. Strongly disagree ☐
   5. Do not know ☐

7. From your experience with the children, will you say that the PLAN ECD programs are effective?
   1. Yes
Perceptions on children’s development and quality ECD Programs

A. Child Development

9. In your view what do children 0-8 need to develop?

1. ..............................................................

2. ..............................................................

3. ..............................................................

4. ..............................................................

5. ..............................................................

10. In your view what is the period of most rapid brain development?

(Please check one answer)

a. 0-6 years □

b. 7-12 years □

c. 13-18 years □

d. after 19 years □

11. Young children (0-8 years) learn best through

(Please check one answer)

a. watching □

b. reading □

c. playing □

d. mimicking □

12. Children start learning

(Please check one answer)

a. before birth □

b. at birth □

c. after 1 year □
13. How early should children be exposed to play materials and toys?
(Please check one answer)
a. before birth  
b. at birth  
c. after 1 year  
d. after 3 years  
e. after 6 years  

B. Child Development Program
14. Please give your views of a good ECD center
1. ……………………………………………………………………………………..
2. ……………………………………………………………………………………..
3…………………………………………………………………………………..
4…………………………………………………………………………………..
5…………………………………………………………………………………..
6…………………………………………………………………………………..

15. What should be the most important items in an ECD centre?
1. ……………………………………………………………………………………..
2. ……………………………………………………………………………………..
3…………………………………………………………………………………..
4…………………………………………………………………………………..
5…………………………………………………………………………………..
6…………………………………………………………………………………..

16. Play materials and toys enhance children’s learning at an ECD center.
1. Strongly Agree  
2. Agree  
3. Disagree  
4. Strongly disagree  
5. Do not know
C. Role of parents in ECD Programs
17. In your view what should be Parents role in ECD programs
1. ...........................................................................................................
2. ...........................................................................................................
3. ...........................................................................................................
4. ...........................................................................................................
5. ...........................................................................................................
6. ...........................................................................................................

D. Role of Care givers in ECD programs
18. In your view what is the role of a caregiver at an ECD center?
1. ...........................................................................................................
2. ...........................................................................................................
3. ...........................................................................................................
4. ...........................................................................................................
5. ...........................................................................................................
6. ...........................................................................................................

19. In your view who is a good care giver at an ECD center?
1. ...........................................................................................................
2. ...........................................................................................................
3. ...........................................................................................................
4. ...........................................................................................................
5. ...........................................................................................................
6. ...........................................................................................................

Thank you
APPENDIX VII: COMMUNITIES WITH PLAN-ASSISTED ECD PROGRAM IN BAWJIASE PROGRAM AREA

Name of Community

1. Fante Mayera
2. Ayensuako
3. Okwampa
4. Obrachire
5. Fianko
6. Akotsi
7. Adawukwao
8. Kwesitwikrom
9. Akufful Krodua
10. Aberful
11. Mfafo
12. Dasum
13. Ahentia
14. Jei-Krodua (Mangoase)
15. Ophembo
16. Topiase
17. Odotonuakubrifa
18. Mfadwen
19. Papaase
20. Odumase
21. Okwabena
22. Gyahadze
23. Penin
24. Esuekyir
25. Bewuanum
26. Akrabong
27. Anim-Akubrifa