# ESSENTIAL PACKAGE



#### Introduction



A situational analysis helps program managers to better understand the cultural beliefs, concerns, and needs of a community with regards to early childhood development and orphans and vulnerable children before they begin to implement their programs. It helps to builds mutual trust and understanding between program staff and community members. The questions and steps below will help guide the formative phase of your program.

Programming for young vulnerable children and their caregivers requires understanding of the

types of services and referral mechanisms that are available in the surrounding community as well as where the gaps exist. Service mapping is a part of this formative phase that will inform how to best implement your program. Therefore, program staff should use the table (provided on pages 6 and 7) as a guide for the different services needed per age and stage (prenatal to 8) to find out what is available and add to the services, when necessary.

Programs can also use this information to adapt the Essential Package materials (e.g., Visual

Guide) to best meet the needs of their community context.

# **Steps To Conduct Your Situational Analysis**

Step 1: Review and select questions from the categories below that are relevant to your program.

- Step 2: Gather information from multiple sources to inform your formative research (e.g. focus group discussions, key informant interviews, reports, etc.).
- Step 3: Analyze all the data that you have collected through the different sources and determine what the findings mean with regards to the needs and services available within a community.

Use the following questions to guide your formative research with regards to programming for young vulnerable children and their caregivers.

#### **OVERARCHING QUESTIONS**

- ☐ How do communities/caregivers define early childhood development?
- ☐ How do communities/caregivers define a vulnerable child?
- ☐ How do communities/caregivers define quality of service delivery?
- □ What are the existing positive parenting practices and how can the program build off of them?
- ☐ What are the major barriers preventing households from accessing needed services?
- ☐ Which structures exist to address the needs of vulnerable children and households?
- ☐ How is the health of local children? What are their specific health needs?
- □ What is the malnutrition and/or morbidity rate among 0 – 8 year olds?
- □ What is the percentage of children (0-8) who are orphaned? Live in child headed households? Living on the street?

## **Questions for Communities and Caregivers**

### Community Knowledge/Perceptions of OVC and ECD

- ☐ How is childhood defined in the community?
- ☐ How does the community define vulnerability?
- What types of play are children involved in? Who plays with them? What are local perceptions of play?
- ☐ How do young children spend their days? Are they left alone for long periods? Why? How safe is the environment in which children spend most of their time?
- □ What concerns do community members have for their children's physical, social and intellectual development?

- ☐ How do people tell whether the child is developing normally or not? What are considered to be the reasons for any delays or disabilities?
- □ What are the community attitudes towards children with disabilities? Towards children who have lost one or both parents?

# Household Knowledge of OVC and ECD (collect information on household knowledge and perceptions of the needs of young children, probe for understanding on whether gender disparities exist)

- ☐ How do caregivers rank the needs of their 0–8 year old children? Where do nutrition, growth, and intellectual and social development fall on their list of priorities?
- ☐ What are the caregivers' hopes, expectations and worries about their children? What qualities do they want to encourage? Why? For girls? For boys? For children with disabilities?
- □ What opportunities do parents/caregivers want for their children? What are the basic things they want to provide for their children? What are the important things for children to learn boys and girls?
- □ What are the caregivers' common child-rearing beliefs, attitudes and practices for 0–8 year old children? Are there differences for boys and girls? For children with disabilities? For orphans?
- □ Who cares for children? From what age are children (boys/girls) left to care for themselves? From what age are children (girls/boys) considered competent to care for younger children?
- ☐ Are there clearly defined gender roles? What are the broad differences in roles of men and women, boys and girls, groups in the community?
- ☐ How are protection issues addressed in the community?

Access to Services (e.g. Healthcare, Legal Protection, Food and Nutrition, Psychosocial Support, Education and Learning Opportunities, Shelter, and Economic Strengthening)

- □ In the areas of learning opportunities and positive caregiver-child interaction/early childhood education, psychosocial support, health, food and nutrition, legal protection and livelihoods, what are the various services available in the community to address families' needs?
- ☐ Who provides these services within the community (government, NGO, CBO, other community groups, etc)?
- ☐ Where are the services located in relation to the community?
- ☐ How many women/children typically get seen per month?
- ☐ Who is reached by these services (e.g. pregnant women, children 0-59 months, etc)
- □ What type of income generating activities (IGAs) are available for families affected by HIV and AIDS?
- □ Do OVC receive free services in the community? If so what kind of services? Are social welfare services available for families? Are ECD services, either home-based or center-based, readily available for families?
- Do caregivers have a safe place to leave their children to engage in income generating activities?
- □ What are the barriers to accessing services? How are vulnerable families identified/reached in the program area?
- ☐ How can your program ensure that the most vulnerable children have access to ECD services?

**Quality of Services Delivery** (collect information on the quality of existing services and barriers)

- ☐ What is the quality of services for children 0-8?
- ☐ Of the services that exist do people go? Why or why not?
- □ What referral mechanisms exist? Do they function well? If yes, why? If no, why not?

#### **Questions for Program Staff**

**Policy** (collect information on policies at community, provincial, and national level)

- □ Is there a National Plan of Action for OVC? Is it well funded? Does it place a specific emphasis on young children 0 to 8?
- ☐ Is there a National ECD Policy Framework that may be used to guide local decision-making including issues relating to provision, management, accountability, and monitoring of outcomes?
- □ Which Ministries are involved in OVC issues? ECD issues? Do officials in these Ministries demonstrate awareness of OVC/ECD issues? What kind of support do they provide for OVC/ ECD? Are OVC/ECD programs included in their investment plans or budgets? What were the priority areas identified by each Ministry relative to OVC/ECD?
- □ What are existing policies (national/regional/ local levels) relative to OVC/ECD? Are there policies in place to protect children? If so what are these polices at the national, district and community levels?
- ☐ How open are local or national governments (depending on a centralized or decentralized structure) to formal and non-formal ECD alternatives? To NGO interventions/ collaboration?
- □ Are there policy barriers (national/regional/ local levels) preventing successful OVC/ ECD activities and programs (e.g. labor laws accommodating parents/caregivers, health standards of 0 – 8 year olds etc.)? If yes, what are these barriers?

The information gathered in your situational analysis may be complemented by a service map in which communities identify the key service points available for children (0-8) and their caregivers. Adequate attention should be paid to the availability of health and social services and may be broken up as suggested in the table below. Categories are listed as examples and should be tailored according to the program being implemented.

Category	List Services available in the community (i.e. all services for children, families)	Access to Services (note whether families are accessing services and indicators that reflect this)	Critical Barriers (note any critical barriers to access and receipt of services)
Health	☐ Antenatal Care /PMTCT ☐ Health clinic/ immunizations ☐ Support group for psychosocial support ☐ Other ☐ None	□ Families have access to health facilities □ Families have access to safe water and sanitation □ Testing/ Counseling services available □ Family knowledgeable about HIV and services □ Family Planning/ Reproductive Health services available □ Mental health services available in the community or nearby □ Rates of immunization high	
Food & Nutrition	Counseling & feeding programs (replacement feeding)  IYCF Growth Monitoring Community therapeutic care for nutritional rehabilitation Food distribution (i.e.World Food Program) Other None	<ul> <li>☐ Households have sustainable access to food (i.e. backyard garden; food distribution program)</li> <li>☐ Households have access to counseling &amp; feeding programs</li> <li>☐ Households have access to growth monitoring</li> <li>☐ Households have access to community therapeutic care for nutrition</li> <li>☐ Children 0-6 months are exclusively breastfed</li> <li>☐ HH members eat at least 1 meal a day</li> </ul>	
Care & Development (includes Caregiving Behavior)	Parenting support group/ training  Home-based ECD (learning opportunities, stimulation, positive caregiving practices)  ECD center or other play group  Social support networks/ counseling  Other  None	□ Children have opportunities to play/learn □ Households have access to ECD center or play group □ Households have access to home-based ECD services □ Households have access to psychosocial support □ High levels of participation in parenting programs □ Caregivers understand children's physical and emotional needs □ Caregivers value and use praise to encourage children □ Caregivers have support for childcare	

Strengthening	□ Livelihoods training, income generating activities and life skills training □ Social services or community support □ Social Welfare Services for cash transfer, foster care grants, pensions	☐ HH have access to livelihoods or life skills training ☐ HH know how to access social welfare and other government services ☐ HH generally engaged in income generating activities or have other source of income (cash transfers/ remittances)	
	☐ Other		











