Evidence from Practice and Research: Remote Service Delivery for Early Childhood Development in Humanitarian Settings

Consistency is key in the delivery of early childhood development (ECD) services. Yet, in humanitarian emergencies, acute and protracted, many types of services experience frequent disruption or closure.

Remotely delivered ECD services can offer a solution to the disruption or closure of in-person services. They can support participants with limited time or mobility, tailor information to participants' needs, and provide more frequent interactions than in-person services, which is important in settings where children and their caregivers may have little consistency in their daily social lives as well. However, evidence demonstrates that remotely delivered ECD services cannot replace in-person services. **Discovering how to create effective and practical combinations of in-person and remote ECD services will enable the sector to increase the consistent reach of quality ECD services and improve outcomes for young children and their families.**

The COVID-19 pandemic demanded rapid expansion of remotely delivered early childhood development (ECD) services in order to meet the needs of young children and their families during wide-spread and lengthy closures of in-person services. As the evidence base from research and practice continues to grow, The University of Virginia Humanitarian Collaborative and the Play to Learn Consortium (Sesame Workshop, BRAC, the International Rescue Committee, New York University, and the LEGO Foundation) completed a rapid review to highlight emerging trends, synthesize existing lessons, and pose questions for further learning. The review draws on evidence from Play to Learn partners, recent systematic reviews and meta-analyses, targeted literature searches, and select key informant interviews. See references here.

KEY FINDINGS

📢 REACH

Remotely delivered ECD services can increase uptake and engagement: Remote interventions have shown promise in improving uptake, in some places reaching millions of participants. Additionally, remote approaches may increase improve meaningful engagement, such as caregivers sharing experiences and seeking support from programs and peers.

Remotely delivered ECD services may be able to better reach more men and fathers: Globally, the higher usage of mobile devices by men than women presents a challenge in gender parity, but also an opportunity for remote ECD programming to reach more men than are usually reached in many in-person ECD programs.

Remotely delivered ECD services can exacerbate existing inequalities: Despite the potential to increase reach beyond face-to-face interactions, remote modalities can increase inequalities due to a lack of access to electricity, internet connectivity, or mobile devices. This may be especially true in humanitarian settings where displaced communities generally lack high quality infrastructure.

IMPACT

Remote ECD services can increase knowledge and capacity for facilitators, teachers, and caregivers: Remote approaches can be a good way to build knowledge and capacity for a variety of adults who provide critical support for young children's learning and development.

Remote ECD services can improve caregiver responsiveness and interaction with children: Evidence from a variety of modalities and contexts has shown the positive impact of remote ECD programming on caregiver interactions with children.

Remote ECD services can improve child academic skills, socio-emotional development, and health outcomes: Global evidence has shown impacts of remote ECD programming on children's literacy, numeracy, socio-emotional skills, and a variety of health and nutrition outcomes.

IMPLEMENTATION

Remote ECD best complements in-person services when implementers use multiple modalities with content that targets multiple members of a family: An informed combination of low-tech, no-tech, and high-tech approaches can help ensure that programming doesn't further marginalize children and caregivers. A multiple modality approach can also provide for different learning styles and thereby improve learning outcomes. As children of varying ages may all be present, multiple modalities can help simultaneously engage younger and older siblings. Remote delivery systems can also be used to provide psychosocial support to caregivers and ECD practitioners in the field.

Remote ECD approaches should use pedagogies appropriate to learners' needs: Adults can absorb more abstract information and for them one-way communication can work well. Children learn best when they can engage with peers and adults, learn through play, and immediately apply new knowledge and get feedback, so two-way communication modalities may better suit their needs. Some modalities require more in-person support while some can be effective with minimal in-person components.

Personalization, interactivity, and simplicity drives engagement: Personalizing messages and tailoring support to children's specific needs encourages parents to engage more and generates more learning among children. Remote modalities can also incorporate frequent and timely interaction with participants, positioning those involved as active and participating learners. At the same time, keeping things simple is important for users. This can mean making program enrollment the default, limiting key messages, and keeping messages short, simple, and easily actionable, with accompanying visuals when possible.

Timing matters: Remote ECD programs have to fit into caregivers' schedules, just like in-person services do. Parenting support works best when parents have the time and attention to engage with the message (such as on weekends, after school, after a meal, etc.), so remote approaches should target these windows accordingly.

Safeguarding is always necessary, though the risks are different: It is critical to ensure data privacy and guard against cyberbullying, online exploitation, harmful content, and inappropriate data collection or use.

For further information, contact:

Anjuli Shivshanker
Senior Director, Program Monitoring and Evaluation,
International Impact, Sesame Workshop
anjuli.shivshanker@sesame.org

Lucy Bassett
Co-Director, Humanitarian Collaborative
Associate Professor of Practice of Public Policy,
University of Virginia
lucybassett@virginia.edu

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