

Evidence and Learning: Strengthening crisis and risk-related data and institutional education information system

Case Study – BRAC Institute of Educational Development

Rapid retooling and adaptation of EIE data processes and programming : Pashe Achhi Model in Early Childhood Education in Emergencies in the Rohingya Camps of Bangladesh

Brief description of practice and the key learning

In March 2020, after the coronavirus cases in Bangladesh were confirmed, both Humanitarian Play Labs (HPL) and mainstream Play Labs temporarily stopped their face-to-face operations according to the government mandate. The pandemic endangered people's physical health and highly impacted their socio-economic and mental health conditions. Hence, BRAC explored alternative approaches and designed a telecommunication model, Pashe Achhi, to support all the direct beneficiaries during the pandemic. The objective of the intervention was to be connected with the beneficiaries and promote children's wellbeing and development through play-based learning, positive parenting, and self-care practices of caregivers.

Since caregivers are the core agent for children's learning and development during the pandemic, the model provides psychosocial support and learning support to them. To facilitate the calls, the model trained facilitators on ECD, learning through play, playfulness, and mental health. Pashe Achhi is a telecommunication model consisting of tele-counseling and tele-learning components. After receiving the training, the Play Leaders started to call the families every week to conduct a 20 minutes phone session (10 minutes with the mother and 10 minutes with the child) based on the scripts delivered. In the first 10 minutes, Play Leaders give mothers and caregivers basic psychosocial support, tips on engaging with children and discuss health and hygiene issues.

The COVID-19 pandemic meant BRAC had to rapidly transform both ECD delivery and related data collection methodologies, this required large amounts of capacity building both within the organization and externally with affected populations and stakeholders. This process revealed that to 'retool' and adapt EIE programming and data production processes at speed and scale, building foundational skills and capacities such as smartphone usage is critical. Furthermore, building data collection processes and programme delivery from an understanding of what connectivity is already available and leveraging existing community networks within affected communities enabled the rapid transformation achieved by BRAC with Rohingya communities. Despite challenges with connectivity, capacity, data literacy and access, BRAC was still able to continue to collect validated EIE data which was essential for informing, iterating and ensuring continuity of ECD in EIE.

What challenges does the practice/initiative address and why was the change needed?

Due to the emergence of the COVID-19 pandemic in March 2020, all in-person interventions, including data collection processes, in the camps had to be temporarily put on hold. Under such circumstances, responding to the COVID-19 crisis as well as continuing with all the regular services provided proved extremely challenging as BRAC could not reach or connect with the beneficiaries in person. So, BRAC

resorted to online situation analysis and data collection from field to explore all possible alternative remote modalities of reaching beneficiaries. From the analyses, it was found that the entire camp area did not have radio coverage and hence, employing radio as a remote modality to reach beneficiaries was not feasible. However, since almost every family in the camps owned feature phones, a basic type of phone with no internet connectivity, proceeding with telecommunication as the possible modality seemed like the best option. BRAC utilized this opportunity to create the Pashe Achhi telecommunication model to reach beneficiaries remotely. To monitor the effectiveness of the model, BRAC also redeployed the remote analysis and data collection used for the situational analysis and built in means of validating the data.

What were you trying to achieve? How do the aims and objectives relate to improving the identification and monitoring of education needs and barriers in crisis-affected contexts and emergencies?

The practice aimed to connect to children and their caregivers to address their developmental, wellbeing and psychosocial support needs. The COVID-19 crisis also demanded the dissemination of COVID-19 awareness and precautionary messages. The Pashe Achhi remote learning mechanism is intended to promote caregivers' and children's wellbeing and foster child development through play-based learning, positive parenting, and self-care practices of caregivers. Since providing psychosocial support became increasingly pivotal during the pandemic, this model has incorporated psychosocial support via learning through-play approaches to encourage positive interactions between the caregivers and children.

In order to provide this support, there is a need to accurately assess and develop the capacity of the facilitators. So, BRAC has been continuously working on their capacity development on ECD and psychosocial support under a learning and healing framework and enabling them to provide context appropriate support. Throughout the lockdown, BRAC has remotely monitored the crisis setting and invested itself in situation and needs analysis to ensure the education and psychosocial support needs of the beneficiaries are met.

Did your practice meet the initial aims and objectives? What were the main results?

Yes, the practice did meet the initial aims and objectives. The Pashe Achhi telecommunication modality proved to be effective for meeting the education needs of children and capable of ensuring the psychosocial development and wellbeing of children and their caregivers in a crisis context. The 'Annual Assessment of HPL and Play Lab models on Children, Caregivers and Facilitators' Outcomes (2020)HPL/Play Labs' was conducted by BRAC IED Research team and the findings showed that Pashe Achhi Telecommunication Model achieved significant success in promoting children's development despite the tremendous challenges posed by the COVID-19 crisis.

Along with the learning losses, the pandemic made children's wellbeing challenging due to HPL/Play Lab closure, lack of recreation and outing, domestic violence, maltreatment, and limited access to resources. Additionally, it was challenging and strenuous for caregivers to play their roles in promoting children's wellbeing and development because of mental stress raised due to uncertainty, unemployment, financial crisis, and lifestyle changes. Hence, Pashe Achhi telecommunication was an opportunity for them to get psychosocial support, scale up their knowledge about ECD and mental health, bring positive changes in attitude, and translate that knowledge into healthy practices such as self-care. Thus, caregivers could improve their wellbeing and engage more with their children. On the other hand, children initially started learning coping mechanisms and resilience skills from HPL/Play Labs through playful activities and continued the learning with Pashe Achhi, which helped them cope with this universal crisis. In such a way,

children's learning loss was efficiently reduced and development was prompted for some children, as a result of caregivers' engagement and children's resilience skills.

What stakeholders were involved? How did you ensure their involvement was participatory and collaborative?

BRAC employs a bottom-up approach when it comes to needs analysis and engages the community-parents, caregivers, Rohingya volunteers, Community Based Child Protection Committee (CBCPC) - and empowering them in matters of education and support in crisis has been an integral part of this practice as well. Prior to implementation of any project, BRAC conducts needs assessment through involvement of the relevant programme team and research team. Moreover, BRAC consults with the communities concerned to address the contextual and cultural needs. The programmes are thus, tailored to the needs of the beneficiaries and are further open to modification through feedback. BRAC has been engaging with and catering to communities for years and as a result, been garnering good reputation and building rapport. Some techniques used, including with the Pashe Achhi model, to understand the community needs include ethnographic observation, one-on-one interviews, focus group discussions, in-depth interviews, community participation in the implementation process and co-design workshops.

How did the practice interact with and potentially strengthen the institutional education information systems in the context?

400 play labs are in government schools and resulted in the training of headteachers and teachers, the model of programming and data processes provided scope for scaling up from the Bangladesh Government and Ministry of Education. Also, the play leaders/facilitators of these 400 play labs have undergone rigorous capacity development process in virtual platforms and have been well acquainted with usage of technology like smartphones and mobile applications. Compared to the situation in March 2020, when the pandemic had just hit, the play leaders/facilitators have significantly developed their technological capacity. This increased capacity and technological and data literacy should spill over into other related processes in the national education system, thus BRAC has potentially contributed to strengthening the institutional education information systems in the context.

What challenges and barriers did you face and how did you change your approach to overcome these?

One key challenge in this pandemic was supporting and ensuring all staff members they can effectively use technology and information systems. The COVID-19 pandemic was challenging, however it opened various opportunities to develop and adapt. Through this pandemic BRAC was required to implement and conduct daily business through remote modalities. This included working from home, transforming face to face intervention into remote modalities, conducting training through online mediums and also collecting data through alternate measures.

All staff members were given training on various apps and software to get used to attending and facilitating online meetings. There was a dramatic shift as within a month all the staff members were well equipped with knowledge and expertise of operating smartphones and laptops. Furthermore, in terms of intervention, service delivery and data processes BRAC was also required to transform its modalities to remote mechanisms. This included conducting training of managers who build capacities of the frontliners on mobile apps and communication mediums. The staff members conducted all Play Lab and Pashe Achhi (telecommunication) service training to the facilitators and teachers through mediums like Zoom and Google Meet.

All the data collection was also conducted through telephone calls and sorted through MIS systems like 'TAROWORKS'. This pandemic has taught the organisation as a whole to mitigate challenges and adapt in times of crisis to modalities out of their comfort zone. Consequently, this has built capacities across the entire organisation starting from Head Office staff members to frontliners conducting intervention in the rural areas of Bangladesh as well as the Rohingya communities of Bangladesh.

During implementation of Pashe Achhi telecommunication service in the Rohingya camps of Bangladesh, a major challenge was collecting phone numbers and maintaining connection through telephone sessions. Given that the Rohingya population did not have documented SIM cards, they remained hesitant to share their numbers. However, our field staff managed to build trust around our beneficiaries, and we were able to collect numbers of over 86% of the population. In terms of the connectivity, conducting sessions was a challenge as the lines dropped after a few minutes of session. This created disruption in service delivery; however, was later mitigated by increasing the session duration to account for call drops.

In early 2021 the fire incidents within the Rohingya camps created certain regulations from the government to ban communication within the Rohingya community. This raised further challenges in implementing phone-based interventions. However, BRAC was creative with its approaches and transformed the phone sessions into home visits to ensure that no Rohingya children or caregivers are left behind nor are they left out of service for any period of time.

What was the key learning from your practice? If you did it again, what would you do differently? What pointers would you give to help someone from another organization facing similar challenges?

Owing to the rapidly changing nature of crisis contexts, the biggest learning of this practice was to be able to continuously adapt to changes as required and respond immediately to the crisis at hand. Moreover, engaging the community members in crisis response is an excellent idea since both challenges and solutions always come from respective communities. Involving community members provides them with the opportunity to be of service to their respective communities and helps develop a sense of ownership in them, which in turn, engenders a sense of responsibility, inspiring them to take matters into their own hands and sustain certain practices.

Supporting Evidence

1. Study summary of: Effectiveness of Pashe Achhi Telecommunication Model in the Rohingya Camps – June 2021
2. Study summary of: Exploring the Effects of Pashe Achhi Telecommunication Model on the Rohingya Caregivers and their Children in the times of COVID-19 – March 2021
3. Draft Report on Annual Assessment of HPL and Play Lab models on Children, Caregivers and Facilitators' Outcomes (2020) – March 2021