



Nurture First

Uplifting home-based childcare

**Empowering Home-Based
Childcare Providers: *Ensuring
Quality and Protection in Early
Childhood Development***

September 24, 2024

NurtureFirst is focused on catalyzing systems changes for home-based childcare

In low and middle-income countries, children are 3x more likely to be supervised in a home-based environment than in a formal setting

Affordability: More affordable than formal ECD centers, therefore more accessible

Limited Availability of Formal Centers: Only viable childcare option in low-income areas



Convenience: Close to home with flexible hours, making it easier for working parents

Cultural Norms: Aligns with community norms for family, friends & neighbours to provide childcare



Working Definition: Home-based childcare (HBCC) is a form of paid or unpaid non-parental or non-familial childcare of at least one child that takes place in the Provider's home or dwelling on a regular basis.



With partners, we mapped 5400 Providers (~25% of estimated population) to understand what empowerment means to them



Kisumu
Peri-Urban

Murang'a
Rural

Mombasa
Urban

1,798
HBCC Providers
caring for
~6,000 children


1,268
HBCC Providers
caring for
~6,700 children






















2,368
HBCC Providers
caring for
~10,000 children

What have learned?

- **Providers' greatest challenges** are: access to resources for children, sustainable income (to provide food mainly) and training opportunities
- **Almost half of providers** indicated they were lacking access to training and professional development opportunities
- Providers want to learn – they are **particularly interested in nutrition, health, safety and security and early learning**
- ~90% of Providers said they **want to attend trainings**, but **hardly any (3%) are aware** of trainings (either government or NGO) that are available to them
- **Biggest costs related to HBCC** are food, followed by utilities.

NurtureFirst worked with a group of ambitious, experienced, locally-led organizations to design 8 learning interventions

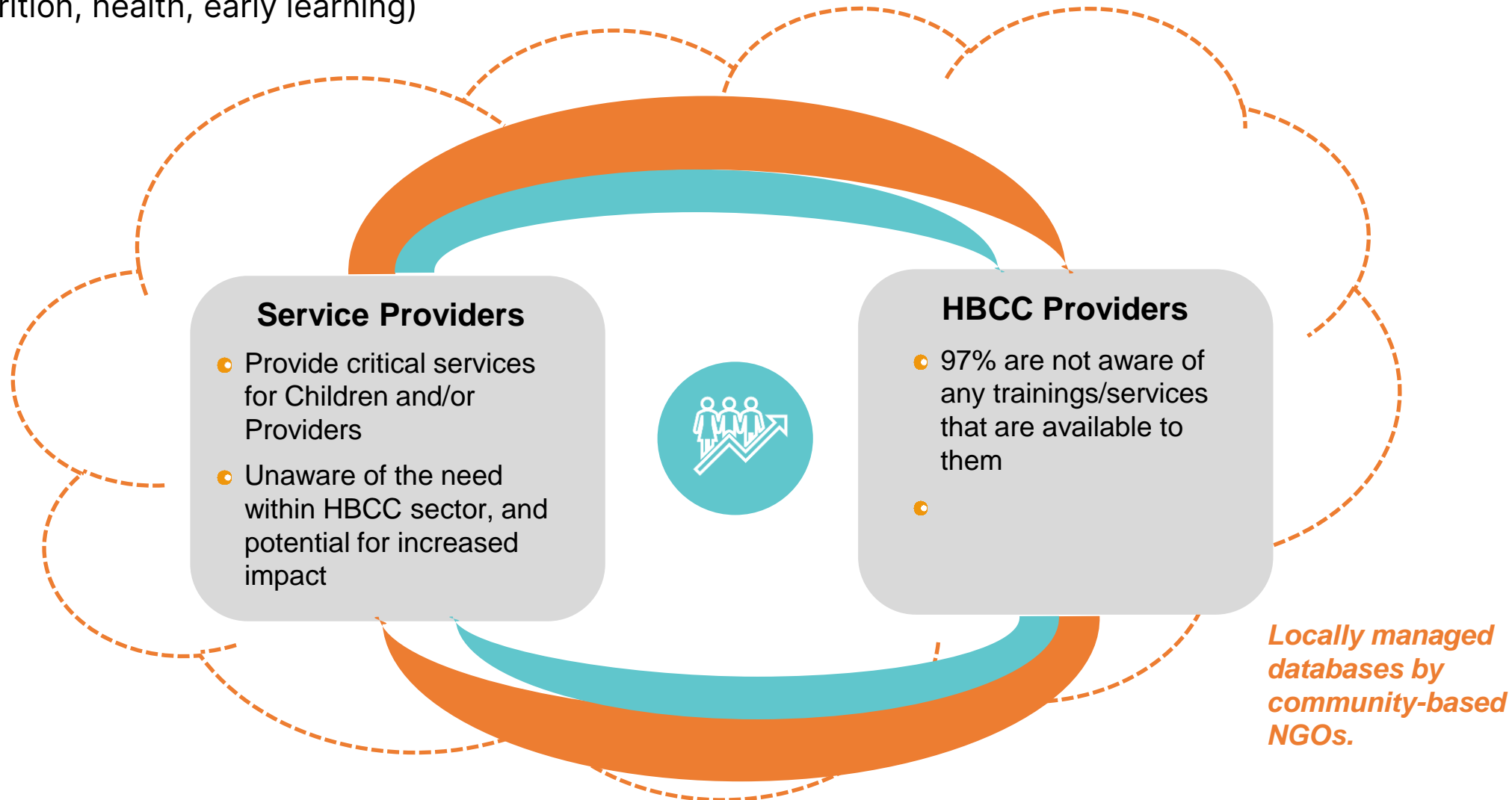
 = Intervention currently being conducted in corresponding county

Learning Intervention	Description	County		
		Mombasa	Kisumu	Murang'a
 Recognize Providers	Develop county-level Provider and services databases, increase capacity in data registry and management and support registration of HBCC Providers to increase HBCC recognition			
 Develop Accessible Quality Improvement Roadmaps	Identify HBCC needs, quality indicators and develop a non-punitive, needs-based, improvement roadmap			
 Develop Provider Networks and Associations	Support HBCC Providers to form networks to increase representation and access to support services			
Build Government Awareness to Develop and Supportive Policies and Practices	Engage at County and National level to advocate for HBCC Providers and shift government mindsets to ensure Provider support			
Access Systems-Level Funding Streams to Increase and Diversify Allocations for HBCC	Increase funding / in-kind support from diverse funding streams and financing mechanisms to support HBCC			
Enhance Nutrition	Strengthen Providers' ability to improve nutritional outcomes			
Increase and Diversify Income Sources for Providers	Identify new supplementary income sources for Providers including kitchen gardens / animal husbandry, Village Savings and Loan Association (VSLA) group savings, and corporate support			
Strengthen Family Support	Strengthen families' provision of nurturing care via community groups and trainings to complement HBCC			

Access to information is fundamental for empowerment outcomes, yet relevant and contextual information is not readily available to Providers.



NurtureFirst and Partners are developing a comprehensive **Provider and Services Directory** to connect HBCC Providers with essential government and non-governmental support services across key areas (e.g., nutrition, health, early learning)



Improving Provider skills leads to greater agency and well being, directly contributing to improved wellbeing for children in their care



This approach is focused on capacity building *not penalizing* Providers, and includes a clear framework to assess quality, identify needs, and effectively build capacity through training and coaching, thereby enabling quality improvement in childcare delivery.

 **Development of Minimum Standards for HBCC**

 **Pilot Quality Improvement Delivery and Monitoring**

- The NurtureFirst Quality Improvement RoadMap (in development)**
- Aligned to clear Minimum Standards designed for the HBCC sector – leveraging minimum quality guidelines defined by the Mombasa County Technical Working Group
 - Delivery approach informed by preferences of Providers
 - QIRM comprised of 4 main quality domains – Providers opted in during data collection
 - Piloting each domain to track impact of the QIRM

	Mombasa	Murang'a	Kisumu
<i>How often do Providers want training?</i>	• Want to be engaged at least 2x a month	• 2x a month	• 2x a month
<i>When do Providers want to be trained?</i>	• Weekdays when schools are closed and / or weekends when children are on break (higher preference for weekends)	• Flexible with the timing, prior planning would be helpful	• Weekdays- Tuesdays or wednes
<i>Where will Providers leave the children when they are conducting trainings?</i>	• Some have assistants, some leave the children with their immediate <u>neighbours</u>	• Able to make local arrangements with parents who bring their children to the HBCC to help take care of the children while they are away – able to sort payments with them later	• Can make arrangements with a relative or <u>neighbour</u> or hire assist caregivers. • Some can make arrangements w parents to remain with children fo short period during training.

For scale, Provider-level impact is institutionalized through supportive communities, policies and funding, and our beliefs and values

With partners, **advocating for clear definitions** on Childcare and delineation of functions at national level

Support County-level reform efforts to include clear definitions, minimum guidelines, representation of Providers, and non-punitive quality improvement

Enabling Providers to engage with the policy and planning process through **advocacy and representation training and coaching**; Parental engagement and family strengthening

Convening CWGs - **building local champions of HBCC**, all working together to extend and crowd in additional resources for the HBCC sector.

Individual QIRM focusing also on self-efficacy and wellbeing; **connecting Providers to each other** – where this is reinforced.





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Q & A

