

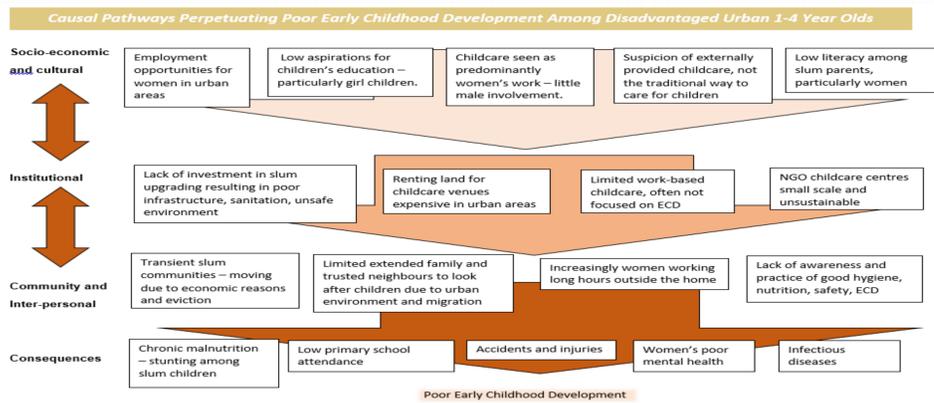
# Urban 'Anchal'

## Understanding child-care and early childhood development in urban slums: a mixed methods study from Dhaka, Bangladesh

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### BACKGROUND:

Why are slums such a challenge for early childhood development (ECD) and health?



Dhaka, Bangladesh, where over 1 million inhabitants live in slums, exemplifies the adverse conditions shown in the diagram above.

Community-based day-care for under 5s in rural Bangladesh has been found to reduce risk of all-cause mortality by 44%, drowning by 82% and injuries by 88% (Rahman, et al. 2012).



Delivering sustainable day-care in poor urban neighbourhoods presents several challenges to the delivery of financially sustainable day-care to cover the hours women work. In collaboration with government, NGOs and communities, we are developing and testing a day-care model for Dhaka.

### Objectives

Here we present initial findings to meet these study objectives:

- To map and understand long day-care models currently being implemented in Dhaka
- To understand the extent and nature of demand for day-care in slum communities and neighbouring non-slum communities in Dhaka
- To identify appropriate ECD tools

**Target population:** low-income households that meet the UNHABITAT definition of a slum<sup>2</sup>.



**Methods:** A sequential mixed methods approach is being used in the study, with qualitative work exploring quantitative findings.

To date we have surveyed 200 households with under 5 children to determine day-care needs and assess ECD (parent reported and direct assessment) and the feasibility of four ECD measuring tools MELQO, IDELA, ECHI and CREDI assessed quantitatively and qualitatively.

Qualitative methods help understand demand and perceptions of day-care. Data collection is ongoing and includes: 2 focus groups and 10 individual interviews with women with under 5 children, 5 with those supervising children while mothers work and 2 focus groups with fathers and 5 individual interviews with community leaders and day-care providers and managers.

A ward in Dhaka South City corporation was selected for the study as this typifies communities with slum and non-slum households living next to each other.

### Interim Findings

#### 1. Mapping of day-care providers:

Two main providers of day-care have been identified so far. MoWCA and others NGOs are also providing day-care, but still to be included in the study.



Amrao Manush, Sajida Foundation

- 7 centers
- 6 months to 6 years
- 30 children per centre
- Available 24hrs to care for street-dwellers
- Staff: teacher and assistant, paramedic, para counsellor, cook, guard, helper, manager
- 7 day training and refresher by ICDDR,B

Phulki

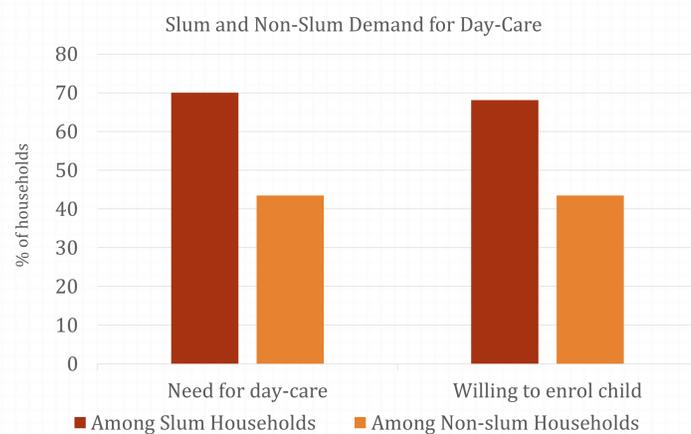
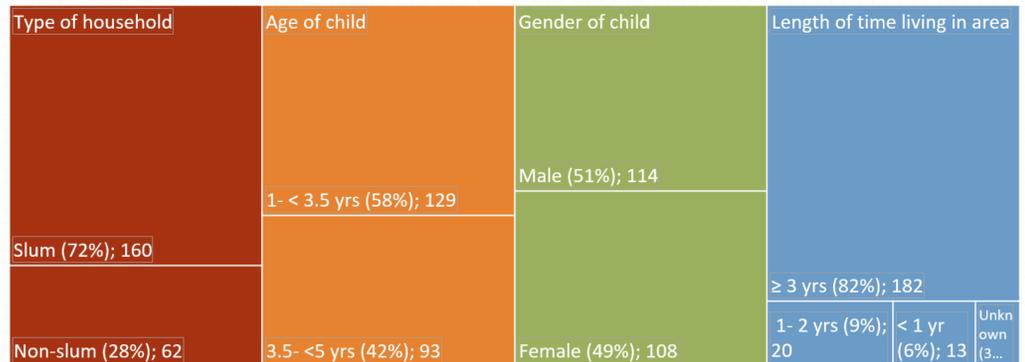
- Over 80 centers in the community
- 22 in the garment factories
- 2-6years old
- 20 children per centre
- Available 7:30 to 20:00
- 2 care-givers
- 8 day training by Phulki

### Initial Survey Results

289 households were approached, 95.8% responded giving a total sample of 222.

Key Characteristics of the Sample of Households with Under 5 children

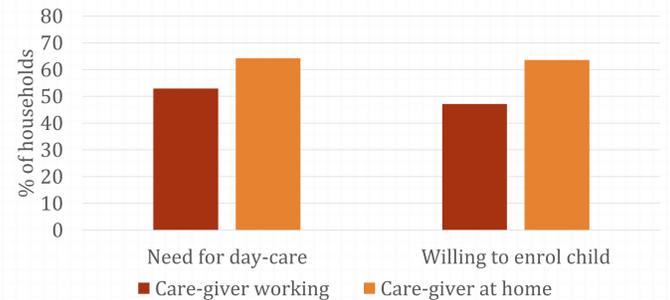
• Type of household • Age of child • Gender of child • Length of time living in area



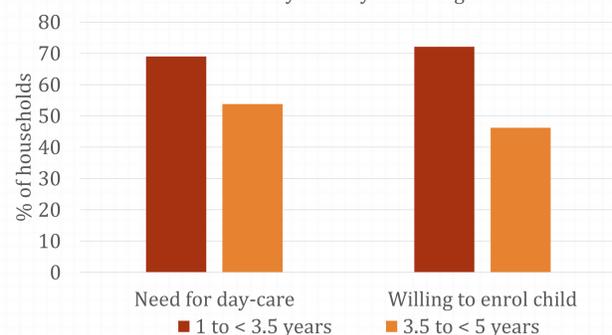
Our survey showed that households categorised as non-slum were less likely to need or want to enrol their child in day care. Qualitative work highlighted slum families sending children back to rural villages due to childcare challenges.

#### Demand for Day-Care Among Care-Givers Working Outside and at Home

Care-givers at home wanted their child to go to day-care, more than those out at work. Our qualitative work will explore whether this is in order to seek work.



#### Demand for Day-Care by Child's Age



Demand for day-care was higher among those with children less than 3 1/2 years old.

In interviews, parents worried about the safety of their children playing in poor neighbourhoods, particularly in terms of injuries, safe-guarding and picking up 'bad' language and habits from other children and adults in the area.

Those that wanted their children to attend day-care felt that the staff should be like "a mother", well educated, well behaved and able to feed and look after children.



Data on feasibility of ECD tools is still to be analysed, however initial reflections by data collectors were that some tools were much easier and more acceptable to parents than others. For further findings please be in touch.

### Conclusions

While our study is ongoing, our interim analysis clearly shows a high level of demand for day-care, particularly among slum households. Lack of adequate provision of day-care is likely to be restricting families, particularly women's, ability to take on paid work.

Provision of good quality day-care has the potential to improve ECD and health outcomes for children, setting them on a positive trajectory. Day-care also has an important role to play in enabling poor families to increase their earning potential, leading to long-term improvements for children and their communities.

### REFERENCES

<sup>1</sup>Rahman, F., Saidur, M. et al., *Cost-Effectiveness of an Injury and Drowning Prevention Program in Bangladesh*. Pediatrics, 2012. **130**(6): p. e1621-e1628

<sup>2</sup>UNHABITAT/WHO (2013) Hidden Cities: Unmasking and Overcoming Health Inequities in Urban Settings

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