

TC ABSTRACT

I. BASIC PROJECT DATA

Country/Region:	Republic of Suriname
TC Name:	Support for Early Childhood Development (ECD) Policy
TC Number:	SU-T1067
Team Leader/Members:	Ian Ho-A-Shu (SPH/CSU); Florencia Lopez-Boo (SPH/SCL); Donna Harris (SPH/CJA); Tiphani Burrell-Piggott (SPH/SCL); Mariska Tjon A Loi (CCB/CSU); Naomi Akoy-Bouguenon (CCB/CSU); Martha Guerra (SCL/SPH); and Bernardita Saez (LEG/SGO)
Type of Operation:	Client Support
Reference to Request:	(IDBDocs# - link x)
Date of TC Abstract	8 April 2013
Target Beneficiary:	1,721 children in the 0-4 age group; and 130 female headed households from Resort Kwarasan in the Wanica District of the Republic of Suriname.
Executing Agency and contact name	Foundation for Human Development
IDB Funding Requested:	\$550,000
Local counterpart funding, if any:	\$90,0000
Disbursement period:	36 months (30 months execution period)
Required start date:	June 2013
Types of consultants:	Firms and individuals
Prepared by Unit:	Social Protection and Health Division (SCL/SPH)
Unit of Disbursement Responsibility:	Country Office Suriname
Included in Country Strategy (y/n):	Y
TC included in CPD (y/n):	Y
GCI-9 Sector Priority:	Social policy for equity and productivity

II. OBJECTIVE AND JUSTIFICATION

- 2.1 **ECD Policy.** The objective of this TC is to support the Government of the Republic of Suriname (GoS) in its efforts to implement and refine its national Early Childhood Development (ECD) Policy. The infant mortality rate (IMR) in Suriname is estimated at 33 per thousand, while the probability of dying under five years of age (U5MR) is 38 per thousand.¹ IMR and U5MR are at least twice as high where the mother's education is lower than 'secondary plus'. More specifically, per-capita consumption in households whose head has ten years of schooling is SRD481 per month against SRD235 in households whose head has no schooling.²
- 2.2 **Health and Educational Outcomes.** In grades 1 to 3, nearly one in five students repeat and one in ten are lost to student attrition. Overall, 38.5 percent of children aged 36-59 months are attending pre-school. Urban, rural and interior differentials are significant – the figure is as high as 49.4 percent in urban areas, compared to 29.5 percent in rural coastal areas and 7.3 percent in rural interior areas. Overall, 88.4 percent of children who are currently in the first grade of primary school were attending pre-school in the previous year which suggests that children are receiving formal cognitive stimulation late in the important 0 to 5 years cycle.³ On average, 80 percent of students

¹ MICS 2006.

² IDB Proxy Means Test Household Survey, 2007.

³ UNICEF, Child Info Website.

entering secondary school have repeated at least one grade at the primary level. Only 46 percent of those who enroll in first grade complete the last grade of primary.⁴ Child malnutrition is also a grave concern, with comparatively higher rates than other LAC countries and potentially severe health risks and life-long consequences. Currently, 13.9 percent⁵ of infants are born with a low weight, 11.1 percent of children under five years are moderately underweight, 9.5 percent are moderately stunted and 5.4 percent are moderately wasted.

- 2.3 **The Integrated ECD Policy and Action Plan for Suriname.** In 2012 Government developed The Integrated ECD Policy and Action Plan for Suriname for the period 2013 to 2016. The ECD Policy and Action Plan (ECDPAP) focuses on the importance of ECD as part of the comprehensive development of a child and highlights the impact of ECD on school performance and the development of intellectual and social skills. Partners germane to the success of the ECDPAP include: (1) the Ministry of Health (MoH) (2) the Ministry of Social Affairs (MoSA), (3) the Ministry of Education and Community Development (MINOV), and (4) various NGOs which offer parent education and other forms of support.
- 2.4 **Registration of Children.** Government has identified the timely registration of children at birth as a key pre-requisite to the implementation of the ECDPAP. An estimated four per cent of births go unregistered in Suriname on an annual basis.⁶ These unregistered children likely represent poor or displaced families from The interior who may not have access to the procedures for child registration or may be unaware that child registration is essential to accessing basic social services.

III. DESCRIPTION OF ACTIVITIES

- 3.1 **Activity 1: Implementation Support.** TC resources will fund the engagement of a consultant to provide start-up implementation support for the execution of the ECDPAP. Using the PM4R methodology, the consultant will develop and supervise a detailed project implementation plan (including a risk assessment matrix, a resourcing plan and implementation milestones).
- 3.2 **Activity 2: Pilot Project.** The TC will fund a consultant to design the implementation mechanism for a pilot in the District of Wanica and also provide hands-on implementation guidance for the pilot. The pilot will test policy assumptions and provide a controlled environment to assess the early impact of promoting comprehensive child development support services (including basic health practices among young mothers). The District of Wanica was selected because its demographics mirror the wider Suriname context, providing a suitable test case. In addition, 17 percent of the population lives in Wanica (near 95,125)⁷ of which 28.5 percent is in the age group 0-14 years. 20 percent of these children are also estimated to be living with some form of developmental impairment.
- 3.3 **Activity 3: Communication Plan.** The TC will fund a mass communications consultant to design and implement a communication plan for the pilot.
- 3.4 **Activity 4: Research Activities.** The TC will fund a consultant to undertake a rapid assessment of the safe motherhood, breastfeeding activities and nutritional profile in the District of Moengo. Based on the results of the assessment, the consultant will develop a training plan on safe motherhood and optimal breastfeeding and nutrition practices. This training plan will be piloted in the District of Moengo prior to national roll-out.

⁴ Source: Administrative Data MOECD, Research and Planning Department.

⁵ WHO World Health Statistics 2011.

⁶ Source: Suriname Monitoring the situation of children and women. MICS 2010.

⁷ Central Bureau of Statistics, 2010.

- 3.5 **Activity 5: Early Head Start Initiative.** To raise public awareness, Government through the Office of the First Lady will embark on a national Early Head Start Initiative, which will target female-headed households in The Interior given the high incidence of female-headed households with non-registered children in The Interior. The TC will fund promotional kits and the hiring of the mass communications Consultant, who will develop the Early Head Start media campaign.
- 3.6 **Activity 6: Monitoring and Evaluation.** The TC will fund consultants to undertake a rapid assessment of the pilot project in Wanica. This rapid assessment will be conducted in the early stages of the TC, and will follow a rapid assessment protocol. The assessment will be repeated at the beginning of the second year. Key M&E activities include: (i) developing a monitoring and evaluation framework to support the national roll out of the ECD activities; and (ii) design and implementation of a strategy to integrate, resource, certify, monitor/regulate CSOs that deliver ECD interventions.
- 3.7 **Activity 7: Knowledge Sharing and Knowledge Creation.** In order to foster knowledge-sharing between ECD partner institutions, and expand ECD's dissemination efforts in the LAC region while at the same time stimulate new project ideas and innovative thinking for the final design of the Suriname ECD programme, study tours will be arranged to visit best practice models of ECD programmes in LAC.

RESULTS MATRIX

Component	Final Deliverable	Intermediate Milestones (if applicable)	Milestone date (if applicable)	Expected completion date
Implementation Support for the ECD Policy and Action Plan	Detailed Implementation Plan	Project Steering Committee approval of implementation plan	6 months after TC signing	12 months after TC signing
Wanica Pilot Project	Final model for provision of integrated ECD services	Training in family observation techniques Parental guidance checklist Final educational materials	14 months after signing of TC	20 months after signing of TC
Communication Plan for Wanica Pilot Project	Communication Plan including full media elements	Media firm contracted Draft guidelines	12 Months after TC signing	15 months after signing of TC
Research Activities	Assessment of motherhood and breastfeeding practices in District of Moengo Training Plan	Project Steering Committee approval of assessment report and training plan	18 Months after TC signing	20 months after signing of TC
Early Head Start Initiative	National Media Campaign	Media Consultant contracted; and media campaign approved by Project Steering Committee	8 Months after TC signing	12 Months after signing of TC
Monitoring and Evaluation	M & E Framework Regulatory Strategy for CSO's working in the ECD area	Consultant contracted and draft framework developed	18 months after signing of TC	24 months after signing of TC
Knowledge Sharing and Knowledge Creation	Final Report on ECD best practices			20 months after signing of TC

IV. BUDGET

Activity/Component	IDB Funding (\$US)	Counterpart (\$US)	Total Funding
Component 1 – Implementation Support	15,000	0	15,000
Component 2 – Wanica Pilot Project	170,000	0	170,000
Component 3 – Communication Plan	75,000	20,000	95,000
Component 4- Research Activities	15,000	0	15,000
Component 5- Early Head Start Initiative	90,000	20,000	110,000
Component 6 – Monitoring and Evaluation	60,000	0	60,000
Component 7 – Knowledge Sharing and Knowledge Creation	30,000	0	30,000
Project Administration	70,000	50,000	120,000
Final evaluation	15,000	0	15,000
Financial audit	10,000	0	10,000
	550,000	90,000	640,000

V. EXECUTING AGENCY AND EXECUTION STRUCTURE

- 5.1 **Execution Mechanism.** Given its solid track record in implementing previous ECD initiatives, the Foundation for Human Development (FHD) will execute the TC. TC resources will finance an Administrative Officer, Administrative Assistant and Financial Specialist.
- 5.2 **A Project Steering Committee (PSC),** chaired by the First Lady of Suriname, will also be established to provide guidance, oversight and general coordination support for the execution of the TC. The PSC, supported by a Secretariat from the Office of the First Lady, will include representatives from the MOH, Ministry of Social Affairs, Ministry of Youth and MINOV and members of the Private Sector and civil society, including the Medical Mission which is based in The Interior.

VI. PROJECT RISKS AND ISSUES

- 6.1 **Coordination and Collaboration.** There is need for robust coordination and collaboration among stakeholder ministries. This collaboration will be enhanced through active project supervision by the PSC and a dedicated Project Unit at the FHD.
- 6.2 **Cultural factors.** Due to possible feelings of stigma and discrimination, families in the Wanica pilot may be apprehensive to disclose that any of their children may have developmental impairments. This risk will be mitigated through the communication plan coupled with direct counseling which will provide families with crucial information to enhance their decision-making capacity to seek support in the very early stages of child development.
- 6.3 **Implementation Synergies.** In addition, the project will benefit from implementation synergies and wider stakeholder participation through the execution of the recently approved US\$15.0 million IDB-funded Social Protection Support Program (SU-L1013).

VII. ENVIRONMENTAL AND SOCIAL CLASSIFICATION

- 7.1 In accordance with the Policy OC-703, given the nature of the operation's objectives and scope of activities, no environmental negative impacts are anticipated and a classification C is proposed.