

# Skilful Parenting and Moulding Behaviour at an Early Age

Bridging the gap between what we know and what we do



PARENTING IN AFRICA NETWORK  
for the Ultimate Protection of Children





## **SKILFUL PARENTING AND MOULDING BEHAVIOUR AT AN EARLY AGE**

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## Foreword

In recent times, factors surrounding early childhood development are becoming a vital focus in social protection approaches among development professionals. Additionally, the future of any society depends on its ability to foster the health and wellbeing of children and young people through successive generations. Simply said, today's children will become tomorrow's citizens: professionals, parents and leaders; hence the need to focus on their foundation in order to foster their wellbeing.

Further, because we recognise that formative years are crucial in imprinting behaviour, character and self esteem in children, PAN and her partners have continued to promote skilful parenting, with the aim of empowering parents and caregivers with skills that inform them on growth and development of children. Parenting skilfully in early childhood years identifies close and constructive parent - child relationships that shape children's behaviour and choices.

This study, spearheaded by PAN in some selected communities, seeks to understand whether parents and caregivers understand this crucial relationship between their inputs - as they raise their children - and the resulting behaviour and choices made by the children. It highlights the specific issues that prevent criminal tendencies in children and how parents can positively influence children to deter their possible entry into violent crime. PAN's aim is to ensure that parents are skilled and that children grow up to become responsible citizens.

Notably, parenting interventions acknowledge that parenting involves sets of emotions, tasks and skills that parents must have to rear children. It is therefore imperative that parents and caregivers understand that behaviour and character formation is a direct product of the manner in which children are socialised at an early age.



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We further thank our most important group; the parents, community leaders and children in the targeted research sites for sharing useful information on the subject. We are grateful to all the public, private and faith-based ECD center management teams through the stakeholders' workshop who shared vital information towards early childhood development and policies guiding management of the centers.

Appreciation is extended to Ministry of Education, Director of ECD Mrs. Leah Rotich for her invaluable insight into ECD policies and the relationship between the National office and all the ECD centers in the country

We acknowledge the dedicated efforts of all the staff of Parenting in Africa Network secretariat, specifically Jared Ogeda, for spearheading the activities that supported this research; and various key staff of Investing in Children and their Societies (**ICS**) who have worked tirelessly towards ensuring that this publication is a success.

The research, documentation and analysis presented in this publication, are envisioned to benefit institutions and professionals in Kenya and beyond, who are keen on making early childhood development work a success.

Finally, the overall research, documentation and publication of this research was possible through the generous support of Open Society Foundations (OSF). We are grateful for this support which shall ensure that parents and caregivers work towards preventing uptake of criminal behaviour from an early age.





## List of Key Acronyms

- CHF:** Children's Hope Foundation
- DICECE:** District Centres for Early Childhood Education
- ECD:** Early Childhood Development
- ECDE:** Early Childhood Development and Education
- ECE:** Early Childhood Education
- EFA:** Education for All
- FGD:** Focus Group Discussions
- ICS:** Investing in Children and their Societies
- KIE:** Kenya Institute of Education
- MDGs:** Millennium Development Goals
- MoE:** Ministry of Education, Kenya
- MRCK:** Madrasa Resource Centre, Kenya
- NACECE:** National Centre for Early Childhood Education
- OSF:** Open Society Foundations
- OSIEA:** Open Society Initiative for Eastern Africa
- PAN:** Parenting in Africa Network
- REEP:** Rural Education and Economic Enhancement Programme
- SRAI:** School Readiness Assessment Instrument



## Definition of Terms

### Child development

It refers to the ordered emergence of interdependent skills of sensory-motor, cognitive-language, and social-emotional functioning. This emergence depends on and is interlinked with the child's good nutrition and health.

### Early Childhood Development (ECD)

This refers to the progressive continuum of identifiable stages of physical, cognitive, and emotional growth and change of a child from birth to adulthood.

### Early Childhood Development Centers (ECDC)

A generic term for various early childhood education and support services provided for children who are below the age of 5, under the framework of ECD services in Kenya.

### Parenting

The process of promoting and supporting the physical, emotional, social and intellectual wellbeing and development of a child from infancy to adulthood.

### Skilful parenting

Possessing the character, qualities and knowledge to support and help children grow and develop to become responsible adults.





## Discussion Summary

The paths to violence and crime most often begin with behavioural problems in early childhood. How societies invest in their children and youth defines not only their society's safety and developmental potential, but also the behaviour change patterns.

Parenting in Africa Network (PAN) with partners, presents findings of a study that sought to assess parents' and caregivers' knowledge on how skilful parenting positively contributes to behaviour change in a child's formative years; which prevents possible uptake of criminal tendencies later in life.

The study is accompanied by a video documentary depicting children's views on the manner in which they are being raised.

From the findings, it emerged that parents have the knowledge of what it means to parent skilfully and quite a number of them are practicing what they believe is good or skilful parenting. They were able to link certain parenting practices to behavior outcomes in their children. However, several parents interviewed in the documentary decried about the fact that today's parent is overpowered by competing responsibilities, which limit the time available for moulding their children.

Largely, the findings also indicate that parents consider provision of basic needs as the most important aspect of good parenting. Other equally important attributes necessary for optimal child growth and character formation such as warm loving relations only elicited a dismal 13% of the responses. It is therefore imperative that parents become aware that skilful parenting is not just about providing, but that play, warm loving relations, and open communication are vital in moulding positive character traits in growing children.

More so, moulding children's behaviour and character as they develop, which prevents violent tendencies among children and youth in our societies, can only be possible through close relations between parents and their children. Active participation of parents at these vulnerable stages of a child's development will produce a highly responsible child, as well as future citizen. The findings in this study indicate that mothers are regarded as bearing the greatest responsibility in parenting while in her absence, an extended family member or a teacher is preferred to the father. While the focused group discussions stressed the importance of both parents bearing equal responsibility in parenting, the findings indicate that the role and presence of a father-figure in most families is not visible.

Further, positive relationships in families are a clear indicator of good parenting. In this case, the manner in which communication within the family is handled becomes the medium through which relations are built. Respondents in this study suggested



that parents should open communication channels for their children to freely express themselves. They further felt that children have a right to ask questions and express their feelings. The findings further show that family meetings ensure interaction between the parents and children (59%). Despite this, the study revealed that although parents value opportunities for families to meet, the opportunities for these meetings are not frequently scheduled as they take place only when there is an issue to be discussed. And, although respondents were of the view that children need an open environment to discuss issues, and ask questions, there is need for more inquiry into the actual practice of ensuring that children have opportunities to express themselves. This came out very clearly in one of the research sites where respondents wondered of what value child expression, in a family, would be.

Because of the very powerful influence of peers, monitoring friendships of children is one sure way of modifying their behaviour. Less than half of the respondents in this research claimed to have actually taken an initiative to know their children's friends and families (43.8%). This finding is an important indicator of the fact that parents are too busy to meaningfully interact with their children in order to control their external circles of influence.

As with other African States, focusing on behaviour and character formation of children, from an early age, has become a matter of concern in Kenya. Youth violence and criminal behavior has been witnessed, with research demonstrating its link to poor parenting. To ensure that children transition from stage to stage, with the knowledge of right from wrong, parenting skills that help in managing their character need to be applied earlier. The study findings indicate that parenting skills were unanimously regarded as fundamental from conception and throughout subsequent developmental stages. It was especially encouraging that 26% considered that parenting skills are vital prior to conception, by indicating that skilful parenting should be applied as early as 0 - 2 years.

According to this household survey, a majority of the families do not rely on public media for information on how to raise children. Most of them identified family members, past experiences and religious forums as the best avenues for learning and sharing parenting tips. Individual knowledge or personal experience on parenting, as the main source of information, was considered by less than 5% of the respondents. This indicates that family relations, through generations, are an obvious form of learning various parenting practices. It would then add value for parenting programs to consider highlighting the powerful influence of role modelling among families, especially because the children copy what their parents do. Role modelling was further stressed by the children's voices as they clearly indicated that there is a lot of negative adult behaviour that they see both among their parents and in daytime television shows that they would rather not see. The children of today will be the parents of tomorrow. There is therefore a need to care about the legacy that today's parent will bequeath to tomorrow's parent. It is extremely important





that a child gets as much ‘good as possible’, and as little ‘bad as possible’ through skilful parenting so as to ensure that they in turn grow into skilful parents.

Largely, the findings identified ECD centres as structures that have been put in place to support parenting during the formative period of child development. However, the services currently offered are merely learning services preparing the child to join primary education, but which are exorbitant and unaffordable for many parents. A few of the centres integrate health, nutrition aid and counselling especially in poverty stricken communities, most of which are donor-dependent, and driven by a religious institution or the civil society.

To date, ECD services in Kenya are not supported by the government, and are therefore operated privately, or by religious and civil society actors. This, to a large extent, means that families who are unable to afford the fees have had their children missing out on this crucial service. Further, despite a limited number providing food aid, health, immunization and nutrition counselling, they have not integrated parenting skills, information or education services. It is PAN’s recommendation that early childhood development policies consider parenting skills’ education as a mandatory service to parents of children in the various ECD centres available. This will ensure that parents receive comprehensive information that will support them in raising their children.



# 1. Parenting and Behaviour Modification in Early Childhood Development

## 1.1 Introduction

In the early development stage, children are most vulnerable to harm as they grow and interact with their environment. In many African traditions, families had a rich cultural heritage from which children were taught and socialised to become responsible members of their society. Over the years though, the rapidly changing social, political and economic circumstances have adversely affected the African family web. Heightening inflation, globalization, conflicts, wars and modernity have had a significant impact on the family and more so parent-child relationships.

Rural-urban migration of families due to economic challenges has left a gap in family ties which are important in raising children. Further, avenues of socialisation through schooling have exposed children to peer influence and contact with other adults from diverse cultural backgrounds. Thus, parenting and character formation is influenced by other sources of information that may contribute more negative than positive outcomes in the character and behaviour of children. Advances in technology have also presented uncensored sources of learning for children, the result being changes in communication channels between parents and children. It is within this confusion that a parent is still expected to raise their children well, mould them to be future citizens and leaders while ensuring that they acquire social skills necessary to foster positive interaction with their environment.

In addition to this, families in Kenya, as is with most African countries, are grappling with poverty, insecurity and conflicting roles as they strive to provide for their families, such that active parenting is left out of the picture. With time, lack of clear roles and responsibilities among parents has left children without proper supervision.

This report presents findings of a study that attempted to examine knowledge gaps on what constitutes skilful parenting and its possible relation to moulding behaviour and character in young children. The findings will provide an informed approach to design tools of working with families to strengthen relations for child wellbeing. PAN hopes that families will ultimately become havens of safety for children as they grow and develop.

## 1.2 Methodology

### Research objective

The objective of the research was to establish a baseline of parents'/guardians' knowledge, attitude and practice on the importance of skilful parenting in moulding behaviour during the early childhood development stages. The findings will be used to design approaches





for strengthening families' capacities in raising children with a clear knowledge of what constitutes skilful parenting.

Specifically, the study aimed to:

- a. To assess knowledge gaps and skills among different categories of parents/caregivers regarding what constitutes skilful parenting.
- b. To identify and document parents' and caregivers' experiences, attitudes and practices in raising children.
- c. To establish existence of supportive programs, services and/or structures that support parents in their parenting roles.

## Scope of the study

### Target geographical area

The research targeted 3 pilot areas in Kenya, specifically where PAN has initiated collaborative efforts with its members in implementing family support and child protection programs. These regions were Western Kenya, specifically Butula constituency, Nairobi, specifically Kayole area in Embakasi constituency and Coast specifically Changanwe constituency. The organisations are community-based. Working closely with communities, they supported the baseline effort in identifying categories of parents in households and various other stakeholders in the specific regions.

Table 1: Survey sites and respective partner organisations

| County  | Constituency | Organisation               |
|---------|--------------|----------------------------|
| Nairobi | Embakasi     | Children's Hope Foundation |
| Mombasa | Changanwe    | Camp David                 |
| Busia   | Butula       | REEP                       |

### Study population

In carrying out the research, both quantitative and qualitative research methods were used to elicit a broad range of information from various sources proposed. The quantitative component involved household surveys using a semi-structured coded questionnaire which was administered to parents at household level. The qualitative aspect involved focused group discussions with parents in the community and key informant interviews with small samples of service providers and opinion leaders from the target areas. In addition stakeholders' forum was held to elicit an expert view of the state of parenting support in the areas targeted for the study.



The target population for the study included:

- i. Parents in households with children of age 0-8. These households are the current households working with REEP, Camp David and Children's Hope Foundation in the selected survey areas. And hence their details were readily available to be used as part of the main sampling frame. The primary caregivers were the respondents in each household. Secondary caregivers working with children in different early childhood development programs and interventions were also considered.
- ii. Key informants in the research areas.
- iii. Children in both private and public ECDE centres.
- iv. Stakeholders involved in skilful parenting, early childhood development and family wellbeing programmes including government ministries and agencies.

### Data collection and sampling methods

The following were the sampling units:

- Household surveys - Households with primary and secondary caregivers as the respondents.
- Key informants' interview - professionals and opinion leaders.
- FGD - Primary caregivers
- Stakeholders' forums – government departments working on ECD matters, ECD institutions, private and public primary schools and CSOs
- Mapping of ECD centres – ECDE centres

### Household survey

The survey employed stratified multi-stage cluster sampling and simple random sampling methodology in an effort to provide unbiased and representative estimation of the information obtained. The sampling frame was derived from the available database of the three partner organisations. Sample size (n) for the entire survey was 600 households, which was distributed throughout the survey sites. The sample allocation was calculated based on the 2009 Kenya Households Population census' results specifically for Embakasi, Changamwe and Butula constituencies, where the partner organisations are located as shown in table 3.

Table 2: Population census results for the survey sites

| Constituency | Population       | Household      | Area Sq. Km | Population/Households |
|--------------|------------------|----------------|-------------|-----------------------|
| Embakasi     | 925,775          | 296,942        | 204         | 3.1                   |
| Changamwe    | 282,279          | 86,528         | 54          | 3.3                   |
| Butula       | 121,870          | 25,953         | 247         | 4.7                   |
| <b>Total</b> | <b>1,329,924</b> | <b>409,423</b> | <b>505</b>  | <b>11.1</b>           |

Source: Kenya Household Population census 2009, KNBS.





Table 3: Sample allocation for the target Households

| Organisation               | Target households | Children     | Sample proportion | Sample allocation |
|----------------------------|-------------------|--------------|-------------------|-------------------|
| Children's Hope Foundation | 178               | 742          | 0.28              | 169               |
| Camp David                 | 500               | 800          | 0.29              | 177               |
| REEP                       | 1,300             | 1 500        | 0.42              | 254               |
| <b>Total</b>               | <b>1 978</b>      | <b>3 042</b> | <b>1</b>          | <b>600</b>        |

Table 4: Household survey design

| Features  | Possible definition   |
|---|---|
| Strata  | Regions/Counties(Constituencies)  |
| First-stage sampling units  | Census enumeration areas or geographic area or village in rural strata. |
| Second-stage sampling units   | Housing unit addresses  |
| Third-stage sampling units (since only primary caregivers are included) | Household members   |
| Observational units   | Households  |

### Key informants

Six key informants were purposively selected in each survey area. They included religious leaders, government officials, and opinion leaders, among others.

### Focus Group Discussions (FGDs)

There were two FGDs per site, women's and men's, with each group comprising of six members, two enumerators and a facilitator. The group members, all being caregivers, were randomly selected from different locations/wards of the constituencies.

### Stakeholders' Forum

The workshop participants represented ECD care workers, parents, Ministry of Education department that deal with ECD education, institutions such as children's homes and Civil Society Organisations working with parents and children.

The stakeholders came from diverse backgrounds, thus provided varying views based on the environment they were drawn from. But in general, the stakeholders arrived at consensus on various issues. There was good representation from urban as well as rural settings, public ECD centres, as well as rural and institutional (children's) homes. Work and implementation of the government's ECD policy was not discussed because the relevant officers were unavailable for the meetings.



### **Mapping of ECDE centres**

Mapping of various centres that focus on early childhood development was done in all the 3 sites. The aim was to identify the services and interventions provided in the centres and their relevance to parenting and holistic development of children. ECD centres sampled included private, public and those supported by religious groups. The same criterion was used to identify the key stakeholders and players in provision of ECD services in the study areas.

### **Study questionnaires and formats**

Data collection was through desk reviews, household surveys, key informant interviews focus group discussions and a stakeholders' forum. This involved sorting primary responses of caregivers into issues related to skilful parenting and behaviour modification in early child development. The household questionnaires had both open-ended and closed questions, hence generating qualitative and quantitative data. Likert scale format questions were used to measure attitudes and assess the extent to which the sampled units related to respective aspects of the questionnaire.

The study facilitated a collection of views, attitudes, feelings and perceptions of key informants on the subject, through the use of interview guides. Key informants included professionals in the sampled areas, such as social workers, health providers, local and religious leaders as well as teachers.

Focus group discussions explored the perceptions, experiences and understanding of parenting skills and behaviour modification during the early stages of child development. Broad discussion points were developed and discussed with the selected primary caregivers whose opinions were recorded and verified.

The stakeholders' forum was organised in a two day workshop. The participants were drawn from participating PAN member's project sites, specifically Butula in Busia County, Embakasi in Nairobi County and Mombasa County. 15 individuals out of the 20 invited attended the workshop. The list of participants was constructed based on residency at the project sites, as well as knowledge and involvement in programs targeting children and families.

Desk review, on available literature addressing the study subjects, was conducted to augment the collected data. This included previous studies performed in the selected survey sites and at any other locality within Kenya, touching on the subject matter. Close analysis of these documents gave in-depth information, which was not availed by the sampled respondents.





Table 5: Tools and methods for data collection

| Information required   | Method /tools  | Source   |
|--|--|--|
| Knowledge of any available parent support services (what services, relevance, accessibility, sustainability) | Interviews (structured questionnaire for parents at household levels), key informant interviews, | Parents, stakeholders, program officers (key informants) |
| Levels of knowledge among parents on effective parenting skills  | Household interviews , FGDs  | Parents  |
| Levels of knowledge among parents pertaining to particular needs of children at early developmental stage    | Household interviews, FGDs   | Parents, stakeholders, key informants                    |
| Challenges and obstacles that impact on the parenting roles  | Household surveys, FGDs, stakeholder fora, desk reviews, key informants' interviews              | Parents, program reports, stakeholders                   |
| Available laws and policies that aim at supporting families  | Desk reviews and key informant interviews  | Documented laws and policies                             |



## 2. Research Findings

### 2.1 Stakeholders

Based on the knowledge, opinions, experiences and recommendations of stakeholders in the consultative forums, Early Childhood Education (ECE) in Kenya emphasises on education development of a child from 0-8 years. Early Childhood Care and Education (ECCE) stresses on care, for example, child-care centres/ family-care centres and education and services to children, while ECD is about a holistic development of the child (cognitive, language, physical, psychosocial and emotional development).

ECDE encompasses health and nutritional wellbeing of children, socialisation and behaviour modification to issues of education, such as transition from home to school, acquisition of skills and values, to identification of children's talents as well as enhancing their language development.

### 2.2 Parental involvement in transition from home to school

From 0-3 years, children are mostly at home and under full responsibility of parents. Therefore, parents play a critical role in transitioning of children from home to school. They have a key role in linking their children to learning services available for that stage. According to stakeholders' discussions, children at this stage require early stimulation and preparation to transit from home to school. In addition, parents need to ensure that children receive primary health-care services such as immunization, health monitoring, and religious classes. Caregivers should also work towards ensuring the safety and protection of children within the centres of learning. This is mainly by fencing the school compound, providing adequate sleeping facilities, growth monitoring, de-worming, immunization and toilets for their children. It was also their opinion that active parental involvement in functioning of the early learning centres would lead to parents increasingly providing learning and education facilities and materials for the benefit of their children. Although parents are able to support the learning of children both at home and in ECD centres, many lack the know-how or understanding of how to make their contribution to the centers and services provided.

The main benefit of parental involvement in ECDs concentrated more on the educational environment such as training caregivers, creating a friendly working environment and motivating the caregivers. Parents' meetings at the centers enables them to get knowledge in building the self-esteem of children, providing counsel, enhancing child participation and communication, as well as their sense of security. Close engagement between parents and caregivers makes it possible for parents to learn more about ECD programmes. Such interaction also enables parents to learn from one another, thus supporting the institutional development of ECD programs and also strengthening the family institution (bonding of children with parents and role-modelling).





### **2.3 Hindrances to parental involvement in ECD programs**

According to the stakeholders, most parents have not been actively supporting the development of early learning programs for children. They are not ready to invest in the education and development of 0-5 year-olds, mainly because of the Free Primary Education (FPE) policy in Kenya, which allows parents to enrol children in standard one at the age of 7, without paying fees; in contrast, for early learning programs, fees are mandatory since the centres are not supported by the FPE policy. According to the discussions, the parents do not understand why the government has not included ECDE programs in the FPE policy.

Stakeholders, including community leaders, indicated that the free primary education (FPE) policy has impacted negatively on ECDE programmes. Situations were cited where parents are removing their children from ECDE centres and retaining them at home until they are aged 7, to start Standard one. Some parents are also pushing their young directly into primary school at the tender age of 5.

There are parents who, due to poverty and limited education, do not know the benefits of investing in care and education programmes for children under age 4. Others are unable to participate due to certain vulnerabilities like single parenthood, child parents or being grandparents. Due to this it is impossible for service providers to reach some vulnerable families, in ECD programs that integrate supportive services.

Further, some parents being alcoholics and drug addicts do not prioritise either ECD services or the wellbeing of their children.

Parents are required to shoulder finance physical facilities for ECD programs, play and learning materials, feeding programmes for children, and paying caregivers' salaries. Many parents perceiving this cost as a burden shy away from participating in the programmes.

There are others who, after paying the related fees, assume they have completed their roles and leave their children entirely to the care of teachers or caregivers at the centers.

### **2.4 Services available to parents through ECD programs**

The study found out that there are some ECD programs that provide service and support to parents. One such service is provided through the MRCK (Madrassa Resource Centre Kenya) approach and curriculum. The MRCK approach strongly enhances parenting skills. The approach provides trainings on parenting skills for the school management committees, community resource teams and community mobilisers. The training emphasizes the inclusion of children with disabilities in the learning centres, and involvement of parents in decision making at the level of management of the centres.



Both Public and Private ECDEs implement the official Kenya government ECDE curriculum, developed by Kenya Institute of Education, which is strong on the relevant education components. Involvement of parents in these ECDEs is more about soliciting for parental contribution to fund for resources of running the programmes in schools.

Children's homes also implement the national ECDE curriculum in addition to providing other services to parents such as counselling and parenting education. Further, children's homes sensitise and mobilise the communities on the rights and needs of children.

Table 6: Guides on the ECDE Services available in Kenya

| Category            | Age range   | Type of service   |
|---------------------|---|---|
| Pre-school/nursery  | 4-6   | Model used by most public ECDE centres  |
| Kindergartens       | KG I 2-3 year olds<br>KG II 3-4 year olds<br>KG III 4-5 year olds | This are commercial oriented ECDs, not particularly attached to any school.               |
| Child Care Centres  | 2-4 years   | Some are commercial, others are linked to pre-schools or primary schools                  |
| Religious           | 2-5 year olds   | Preparation to schools through religious institutions - in a church, or Mosque facilities |
| Family Care Centres | Up to 3 years   | Targets toddlers  |
| Home-based care     | Up to 3 years   | Under family care or private care services  |

## 2.5 Policy Challenges on ECD

Stakeholders appreciated the government of Kenya for its progress in developing the ECD sub-sector:

- The government has established guidelines and standards for the management, supervision and ECDE curriculum development.
- The District Centres for Early Childhood Education (DICECE) exist for the purpose of training teachers, providing in-service courses and monitoring ECD programmes.
- Guidelines and syllabuses for ECDE programmes have been developed.
- The national ECD Policy Framework and ECD Services standard guidelines are in place.

However, stakeholders identified a number of policy challenges they face while implementing ECD programmes:

- a. Parents, teachers and other stakeholders at the community level have very little knowledge on the existence of a number of important policies guiding implementation and management of ECD programs.
- b. The capacity of the government to monitor, supervise and support early childhood development has been hampered by the few personnel that government has posted





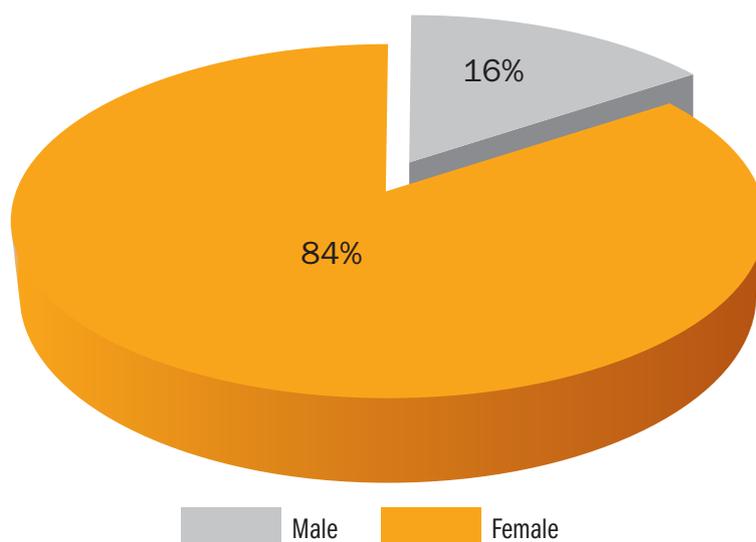
at the district level compared to the number of ECD centers that require support.

- c. Poor remuneration for care workers has led to low morale among the care givers working in ECD programmes especially in public institutions which adversely affect the implementation of ECD programmes in schools and communities.
- d. Few men participate in ECD programmes especially as care givers, thus denying children, in the centres, the father-figure required in parenting and care of children.

## 2.6 Parents and Caregivers

The data collected from household survey shows that 600 respondents were involved in the survey. During the analysis, means, percentages and cross tabulations were used as the main descriptive methods. Respondents who did not respond were also captured in the data analysis.

Figure 1: Gender of the respondents



## 2.7 Demography of sampled households

Most of the respondents engaged at the household level were females (84%). This may be due to the fact that most of their male counterparts at the time of the interviews were in their various working sites. Majority of the respondents were either the household heads (58%) or their spouse (40%). In fact, 39% of the households were male headed with spouse present while 24% were headed by widowers/widows and 22% were female-headed with their husband away. It was clear that the mothers (female parents) were at the centre of management of the various households. Some households had grandparents as the household heads. Therefore, it was deduced that majority of the respondents were the primary caregivers with only less than 10% of the respondents being secondary caregivers as shown in table 7 below.

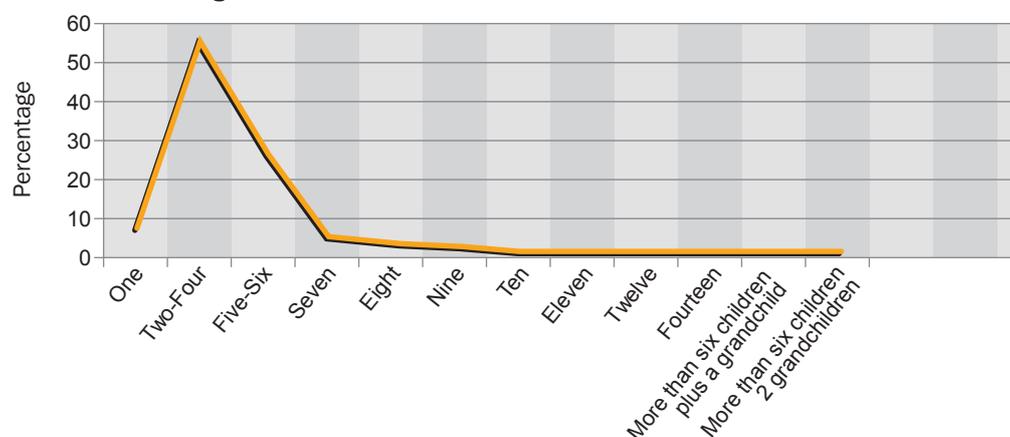


Table 7: Respondents characteristics (n=600)

| Characteristic                | n   | %    |
|-------------------------------|-----|------|
| <b>Relationship to the HH</b> |     |      |
| Self                          | 350 | 58.3 |
| Spouse                        | 240 | 40   |
| Son                           | 4   | 0.7  |
| Daughter                      | 1   | 0.2  |
| Uncle                         | 1   | 0.2  |
| Grandparent                   | 2   | 0.3  |
| No response                   | 2   | 0.3  |
| <b>Head of Family</b>         |     |      |
| Male headed, Spouse present   | 237 | 39.5 |
| Male headed, Spouse Away      | 23  | 3.8  |
| Female headed, Husband Away   | 131 | 21.8 |
| Widow/Widower                 | 144 | 24   |
| Child headed                  | 9   | 1.5  |
| Grandparent headed            | 43  | 7.2  |
| Single mother                 | 6   | 1    |
| Uncle                         | 1   | 0.2  |
| Nephew                        | 1   | 0.2  |
| Stepmother                    | 1   | 0.2  |
| No response                   | 4   | 0.7  |

According to the survey, more than half of the respondents had two to four children under their care. About 7% of the households have one child under their care while more than 10% have more than seven children. In some cases, households had ten, eleven, twelve and even fourteen children under their care. This translated to a number of young children in the households having a varied source of attachment and influence in their immediate settings.

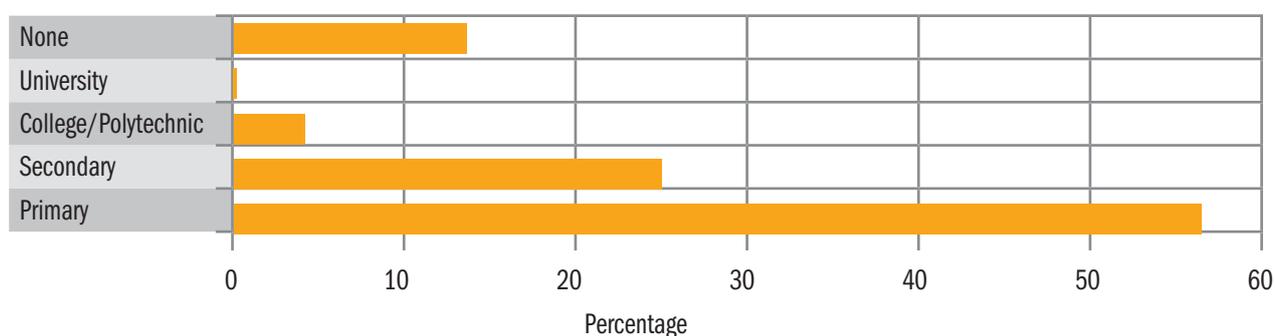
Figure 2: Number of children in a household





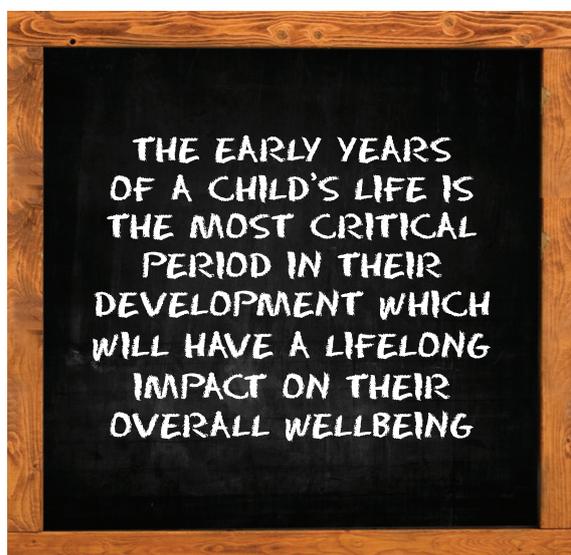
Most of the respondents had fairly good educational attainment levels with slightly half of them citing primary school education as their highest level of education and a quarter of the remaining respondents having attained secondary education. Less than 5% of the respondents had college/polytechnic education while only two respondents reported to be university graduates. Of the respondents interviewed, 14% of them had not attended any educational institutions.

Figure 3: Respondents' educational attainment



## 2.8. Knowledge on needs at the early stages of development of children

The early years of a child's life is the most critical period in their development which will have a lifelong impact on their overall wellbeing. Physical growth, social competence, emotional maturity, communication, language and cognitive skills are some of the very important aspect of a child's wellbeing. These formative years set the foundation for their success in school and adulthood. Parents, teachers and caregivers ought to know and understand how well their children are doing, and work towards giving them a good start in life through skillful parenting in order to maximize children's holistic development. Moreover, this stage presents a window of opportunity to mould the character of children by inculcating social norms, values and habits.



Respondents in the study identified various necessities such as nutrition, education and health care as vital for early childhood development. The tables below provide an analysis of responses from the group discussions in the three project sites.



*Table 8: Necessities for physical growth and development of a child in Changamwe*

|   |
|---|
| <ul style="list-style-type: none"> <li>• A balanced diet, according to women, may be expensive but blending of locally available food will enable the parents and caregivers provide a balanced meal most of the time.</li> </ul> |
| <ul style="list-style-type: none"> <li>• This includes immunization and primary health care.</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Children need to exercise to strengthen their limbs and enhance blood supply. Play enhances social interactions among children.</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Instilling discipline to children should start at an early age.</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Parental understanding facilitates smooth raising of children.</li> </ul>  |
| <ul style="list-style-type: none"> <li>• This will enable them take better care of their children.</li> </ul>   |

Source: Changamwe FGD proceedings

*Table 9: Necessities for physical growth and development of a child in Butula*

|  |
|--|
| <ul style="list-style-type: none"> <li>• Balanced diet</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Taking time to play and talk with the child; and provision of play items</li> </ul> |
| <ul style="list-style-type: none"> <li>• Provision of basic needs</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Interacting with others so as to explore their talents on their own.</li> </ul>     |
| <ul style="list-style-type: none"> <li>• Expressing love to children</li> </ul>  |
| <ul style="list-style-type: none"> <li>• Teaching children to do things on their own</li> </ul>                              |
| <ul style="list-style-type: none"> <li>• Medical check-up and immunization</li> </ul>  |

Source: Butula FGD proceedings

*Table 10: Necessity for physical growth and development of a child in Kayole*

|  |
|--|
| <ul style="list-style-type: none"> <li>• An affordable balanced diet</li> </ul>                                |
| <ul style="list-style-type: none"> <li>• Peaceful and hygienic environment with clean running water</li> </ul> |
| <ul style="list-style-type: none"> <li>• Regular health and developmental check ups</li> </ul>                 |
| <ul style="list-style-type: none"> <li>• Parents should know their children's friends</li> </ul>               |
| <ul style="list-style-type: none"> <li>• Moral support from parents and life skills</li> </ul>                 |
| <ul style="list-style-type: none"> <li>• Adequate space for playing</li> </ul>                                 |
| <ul style="list-style-type: none"> <li>• Basic needs such as food, clothing and shelter</li> </ul>             |
| <ul style="list-style-type: none"> <li>• Play</li> </ul>   |
| <ul style="list-style-type: none"> <li>• Education</li> </ul>  |

Source: Kayole FGD proceedings

Generally, and in all the research sites, most respondents cited a balanced diet (35.7%) and medical care (34%) as the most essential needs for child development during the formative years as shown in figure 4. However, this differed from one site to another with most respondents in both Kayole and Changamwe citing medical care (immunization) as more important for child development than a balanced diet, while those in Butula ranked balanced diet as the most important, followed by Medical care (Immunization) and early childhood education, in that order.





Figure 4: The most essential needs for child development in the survey sites

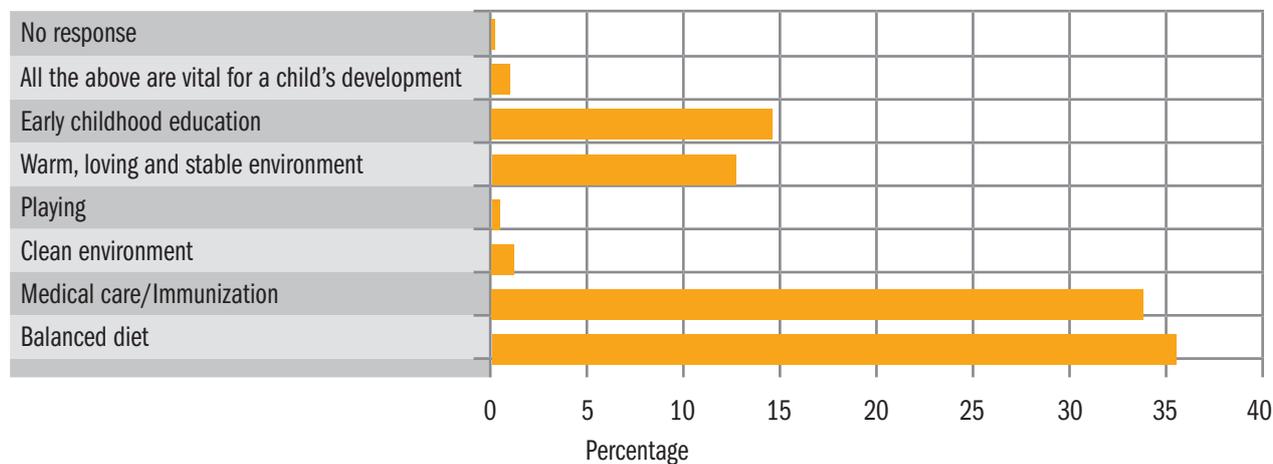


Table 11: The most essential need for child development per survey site ( % )

| CONSTITUENCY     |                                     | Rank 1     | Rank 2     | Rank 3 |
|------------------|-------------------------------------|------------|------------|--------|
| <b>BUTULA</b>    | Balanced diet                       | 52.8       | 18.9       | 11.5   |
|                  | Medical care/Immunization           | 13.8       | 30.3       | 20.6   |
|                  | Clean environment                   | 1.2        | 6.7        | 20     |
|                  | Playing                             | 1.2        | 2          | 3      |
|                  | Warm, loving and stable environment | 10.6       | 2.8        | 13.3   |
|                  | Early childhood education           | 20.1       | 8.7        | 31.5   |
|                  | No response                         | 0.4        | 30.6       | 0.1    |
|                  | Total                               | 100        | 100        | 100    |
| <b>CHANGAMWE</b> | Balanced diet                       | 15.8       | 33.9       | 34     |
|                  | Medical care/Immunization           | 47.5       | 19.8       | 13     |
|                  | Clean environment                   | 0.6        | 2.8        | 15.7   |
|                  | Playing                             | 0          | 0.6        | 0.7    |
|                  | Warm, loving and stable environment | 20.3       | 30.5       | 23.5   |
|                  | Early childhood education           | 13.6       | 5.6        | 13.1   |
|                  | All                                 | 2.3        | 0          | 0      |
|                  | No response                         | 0          | 6.8        | 0      |
| Total            | 100                                 | 100        | 100        |        |
| <b>EMBAKASI</b>  | Balanced diet                       | 30.8       | 45.6       | 13.7   |
|                  | Medical care/Immunization           | 50.3       | 21.9       | 16.1   |
|                  | Clean environment                   | 1.8        | 9.5        | 21.7   |
|                  | Playing                             | 0          | 0          | 4.3    |
|                  | Warm, loving and stable environment | 8.3        | 13.6       | 24.8   |
|                  | Early childhood education           | 7.7        | 7.1        | 19.3   |
|                  | 7-All                               | 1.2        | 0          | 0      |
|                  | No response                         | 0          | 2.3        | 0.1    |
| <b>Total</b>     | <b>100</b>                          | <b>100</b> | <b>100</b> |        |



Figure 5: The most essential needs for child development in Butula

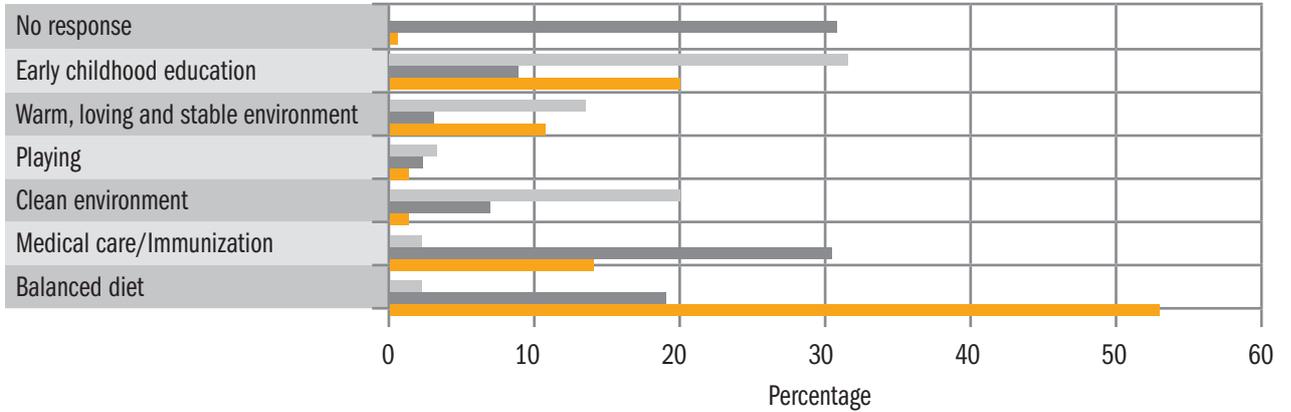


Figure 6: The most essential needs for child development in Changamwe

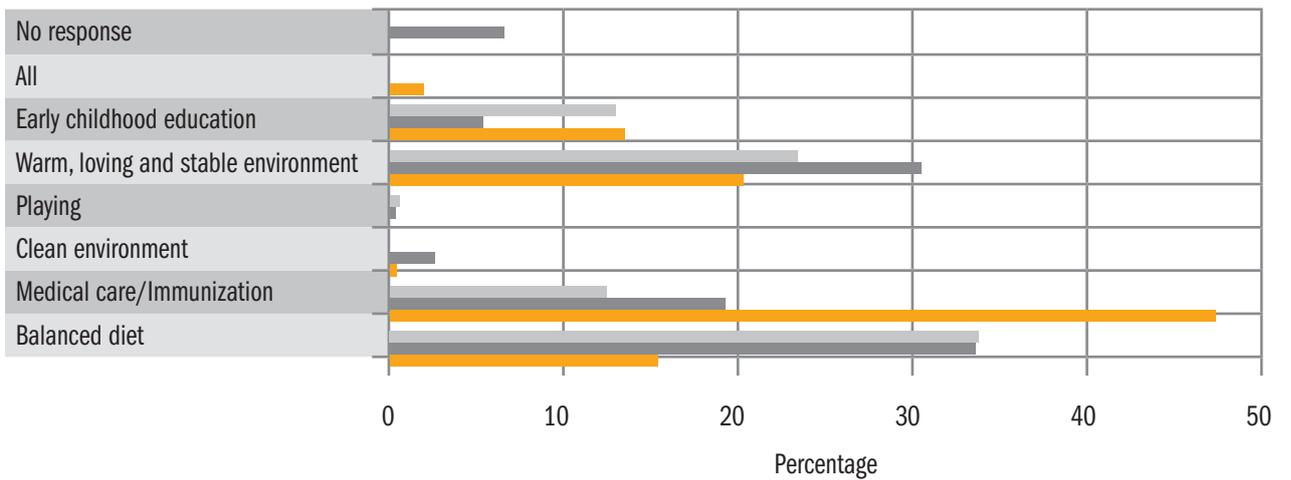
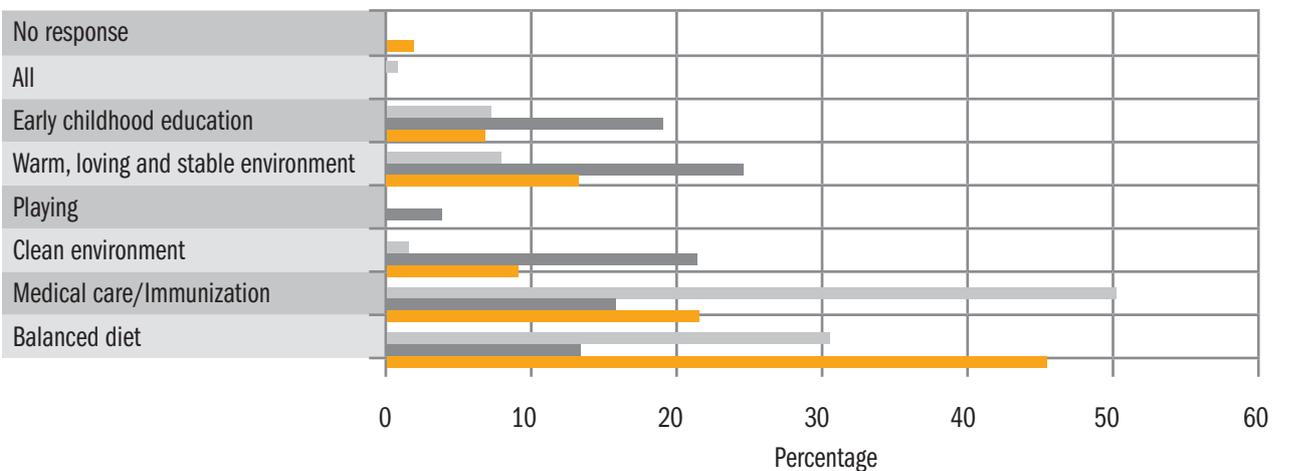


Figure 7: The most essential needs for child development in Embakasi



**KEY:**

Rank 3 Rank 2 Rank 1





According to the analysis above it is clear that parents consider provision of basic needs for children as most important for child development. Health, nutrition and education are responses that ranked highest among others essential for child wellbeing. This shows that parents need to understand other aspects of child development that equally important for overall wellbeing. For instance, play which is integral for gross motor development as well as enhancement of social skills ranked very low on the responses at only 1% approximately. A warm loving and caring environment which means absence of conflicts, and where the parent is present to understand the needs of the child ranked at about 13% on average. This is another attribute which is crucial at molding good behavior at this stage.

A further analysis of play as an important attribute in growth and development showed that parents did not place a high importance in playing with their children. According to the responses, most caregivers encourage their children to play frequently with their peers (37.5%) as part of their effort to facilitate child's physical growth, while 27% of the respondents said they provide play items or toys. It is interesting to note that only 13% of the respondents prefer playing with children.

Table 12: How parents involve themselves in physical growth of their children

|  | n   | %    |
|--|-----|------|
| Play with them   | 80  | 13.3 |
| Buy them playing items (dolls, balls, jumping ropes, toys)     | 167 | 27.8 |
| Encourage them to play with other children as much as possible | 227 | 37.8 |
| Provide them with balanced diet/food                           | 111 | 18.5 |
| All of them  | 2   | 0.3  |
| No response  | 11  | 1.9  |
| Teach the child what to do                                     | 2   | 0.4  |
| Total  | 600 | 100  |

Hence we can conclude that according to this survey, parents consider a balanced diet and health care as the main ways of ensuring good physical growth and development of a child.

## 2.9 Consequences of failure to provide requirements for growth and development

According to the findings, the respondents seemed to know the consequences of failing to provide of the necessary requirements for child growth and development. Majority of them cited poor health, malnutrition and an uncertain future as the main consequences. Others included sickness that would lead to disruption of the child's progress in education, lack of holistic development, indiscipline, negative psychological effects and becoming a social misfit among others, as mentioned in table 13 below.



Table 13: Main consequences for lack of items necessary for child growth and development

|   | <b>n</b> |
|---|----------|
| Poor health and development   | 182      |
| Child will develop poor health/become malnourished or die                               | 144      |
| The child will not have a good life due to poor health                                  | 72       |
| Body becomes emaciated, hence child may easily fall sick                                | 30       |
| The child will have a miserable life  | 20       |
| The child may become undisciplined  | 16       |
| The child will seek these needs elsewhere and the results may be bad                    | 15       |
| The child becomes illiterate and unhealthy  | 10       |
| The child might fall sick hence disrupt his/her education                               | 9        |
| Malnutrition  | 8        |
| Negative psychological effects on the child   | 8        |
| No holistic growth  | 5        |
| The child will be demoralized   | 5        |
| This makes a child to be inactive   | 4        |
| Poor lifestyle  | 3        |
| The child may end up as a street child  | 3        |
| The child will lack direction   | 3        |
| Child may become resentful towards parents/guardians for failing to provide their needs | 2        |
| The child will be illiterate  | 2        |
| Child becomes a burden to society   | 1        |
| Child may struggle in life because of lack of education                                 | 1        |
| Child might not be able to reach their full potential                                   | 1        |
| May lead to a child not realizing his dreams  | 1        |
| Sickness, feeling of being unwanted, eventually some become thugs                       | 1        |
| The child becomes indiscipline  | 1        |
| The child can become a thief  | 1        |
| The child lacks good morals   | 1        |
| The child may run away from home  | 1        |
| The child may have psychological maladjustments   | 1        |
| The child will become a social misfit   | 1        |
| The child will not be able to differentiate between what is right and wrong             | 1        |





### 3. Parenting practices at the early stage of development

The role and responsibility of parenting is important. It is while parenting that children learn right from wrong, and are modeled on how to behave and their character built. With the competing responsibilities and roles that most adults bear today, the parenting responsibility is lacking, as evidenced by various cases of child neglect experienced in many communities. This has led to confusion over who should bear the greatest parenting responsibility.

This confusion was clear when the respondents were asked to point out people whom they considered as most responsible for the parenting role. 60% of the respondents felt that the responsibility lies on both primary parents, while about 31% of them believed that mothers are most responsible for the role. Another 3% felt that teachers bear the highest responsibility, while 2% felt that extended family members should be most responsible. It is very interesting to see that teachers are regarded as more important than fathers in terms of ensuring the wellbeing of children. Another interesting view shows that respondents preferred that children be raised by extended family members than by fathers in the absence of a mother.

Table 14: The main person(s) responsible for parenting

|                         | n          | %          |
|-------------------------|------------|------------|
| Both Parents            | 360        | 60         |
| Mothers                 | 183        | 30.5       |
| Fathers                 | 14         | 2.3        |
| Teachers                | 17         | 2.8        |
| Extended family         | 15         | 2.5        |
| Religious people/clergy | 1          | 0.2        |
| Social groups           | 1          | 0.2        |
| Grandparents            | 2          | 0.3        |
| Uncles                  | 1          | 0.2        |
| No response             | 6          | 1          |
| <b>Total</b>            | <b>600</b> | <b>100</b> |

In the absence of both parents, respondents felt that teachers would be the best option to take up the parenting roles, while the clergy were favoured as the third option. This showed that according to the respondents, in general, the following people should be taking up the responsibility of parenting in order of priority: Both Primary Parents (father and mother in equal measure) followed by teachers, then fathers and finally, the clergy. This trend was visible mainly in two of the three survey sites: Butula and Changamwe. In Embakasi, an interesting outcome was that 52% of the respondents preferred mothers as bearing the highest responsibility for parenting than both parents, who were rooted for by 40% of the respondents as shown in the table below.



Table 15: The main person(s) responsible for parenting per survey site

| CONSTITUENCY     |                         | n   | %    |
|------------------|-------------------------|-----|------|
| <b>BUTULA</b>    | Both Parents            | 175 | 68.9 |
|                  | Mothers                 | 51  | 20.1 |
|                  | Fathers                 | 5   | 2    |
|                  | Teachers                | 5   | 2    |
|                  | Extended family         | 10  | 3.9  |
|                  | Grandparents            | 2   | 0.8  |
|                  | Primary caregiver       | 1   | 0.4  |
|                  | Uncles                  | 1   | 0.4  |
|                  | No response             | 4   | 1.6  |
|                  | Total                   | 254 | 100  |
| <b>CHANGAMWE</b> | Both Parents            | 116 | 65.5 |
|                  | Mothers                 | 44  | 24.9 |
|                  | Fathers                 | 3   | 1.7  |
|                  | Teachers                | 11  | 6.2  |
|                  | Extended family         | 3   | 1.7  |
|                  | Total                   | 177 | 100  |
| <b>EMBAKASI</b>  | Both Parents            | 68  | 40.2 |
|                  | Mothers                 | 88  | 52.1 |
|                  | Fathers                 | 6   | 3.6  |
|                  | Teachers                | 1   | 0.6  |
|                  | Extended family         | 2   | 1.2  |
|                  | Religious people/clergy | 1   | 0.6  |
|                  | Social groups           | 1   | 0.6  |
|                  | No response             | 2   | 1.2  |
|                  | Total                   | 169 | 100  |

### 3.1 Awareness of the importance of parenting skills in inculcating behavior

Parenting skills play a critical role in managing the future behavior of children. All the respondents concurred that it is important to start parenting as early as possible but they had divergent views about when to start applying parenting skills. This was dependent on a basic understanding of what skilful parenting entails. Majority of them felt that age 0 - 8 is an important age for child development where ensuring good nutrition for optimal growth, inculcating character, self esteem, morals and an overall positive attitude in the children, is crucial. About 40% of the respondents said that it is necessary to apply knowledge and skills in parenting, when raising children aged 2 - 5 while 21% felt that 6 -8 was the ideal age for instilling character and discipline. From conception to below age 2 is the most important phase of a child's life, as 26% of the respondents said. According to them, it is the best time to start getting interested in parenting the child.





From the findings, parenting, from conception to all stages of development was not unanimously regarded as a fundamental requirement. It was however encouraging that 26% considered the importance of having parenting skills during conception, as depicted by those who felt that the skills should be applied as early as 0 - 2 years.

### 3.2 The main role of a parent

Respondents had diverse views and opinions on the roles of parents in families. This was probably due to the cosmopolitan and multi-cultured nature of the study areas. Gender factor also played a significant role in defining the roles of parents. For instance, FDG discussions seemed to conclude that mothers are responsible for role modelling girls while men, boys. This would suggest that, in single-parent families, there may be a gap in gender-specific modelling. The main roles of parents are listed in the tables below.

Figure 8: The age when parents should start implementing parenting skills

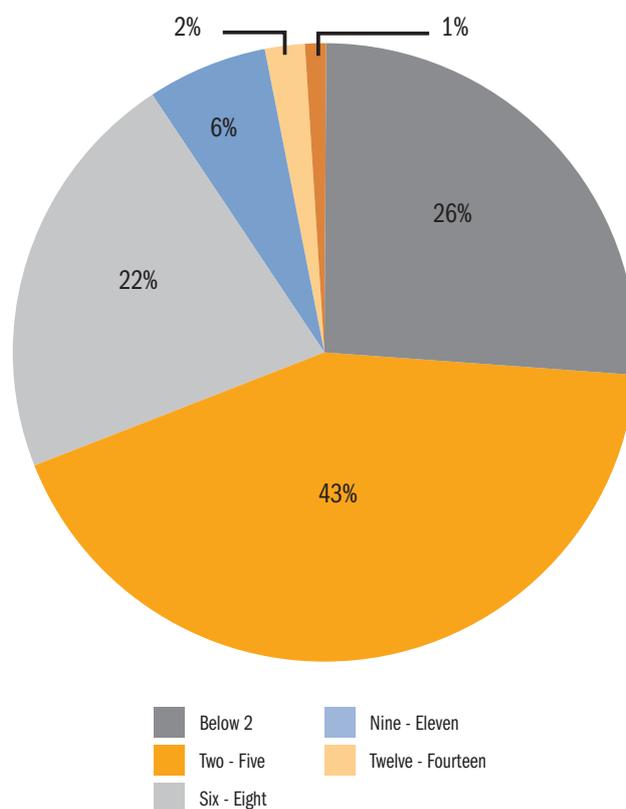


Table 16 a: Main roles of parents in Butula

| Male  | Female  |
|---|---|
| • Teaching children good behaviour                        | • Role-model to children  |
| • Expressing love to build family relationships           | • Provision of education  |
| • Parents should be available whenever needed by children | • Provision of security   |
| • Parents should be honest and open to their children     | • Provision of conducive environment for child growth and development |
| • Provision of basic needs                                | • Provision of parental love  |
| • Provision of education                                  |   |
| • Provision of security                                   |   |
| • Observation of child rights                             |   |

Source: Butula FGD proceedings

Table 16 b: Main role of parents in Changamwe



- Provision of basic needs such as balanced diet, stable shelter, education (academic, social and spiritual), decent clothing and healthcare
- Quick but accurate decision maker
- Setting family rules and regulations
- Instilling discipline
- Parents need to be role models
- Parents are the source of moral support and parental love

Source: Changamwe FGD proceedings

Table 16 c: Main roles of parents in Kayole

- Ensure that the children enrol in schools
- Ensure that children are introduced to religion at a tender age
- Ensure that their children have regular health and development check ups
- Give guidance and counselling
- Provide basic needs
- Provide security and decent shelter
- Act as role models
- Give parental love and take interest in their children's activities so as to help them develop their talents

Source: Kayole FGD proceedings

### 3.3 Understanding good parenting styles

According to women in Changamwe, parenting is a complex task with no specific formula, which requires teamwork from all community members. They further stressed that a lot of the parenting knowledge and skills they have are borrowed from their mothers, personal experiences from their childhood or as parents as well as religious parenting education forums.





Table 17 a: Good parenting style

| Views, of Changamwe women, on good parenting  |
|---|
| <ul style="list-style-type: none"> <li>• Good parenting styles should consider some key aspects such as the culture of parents, their ethnic background, religion and the level of acceptance or adoption of western cultures.</li> <li>• Women believe that good parenting starts during pregnancy, when the expectant mother should attend all prenatal visits, child welfare clinics and get all the necessary immunization, at the right time, and attend subsequent clinic visits where mosquito nets are distributed to them, to help fight malaria.</li> <li>• They also advocate for mothers to deliver in health-care centres staffed with qualified medical personnel in order to avoid cases of maternal &amp; infant mortality.</li> <li>• Their emphasis was on raising children in a warm and loving environment from both parents, and providing all their basic needs such as a balanced diet, shelter, healthcare, decent clothing and education.</li> <li>• Some outdated beliefs and taboos have made parenting difficult. Such cultural practice among various coastal communities should be abolished in order to encourage practices that enhance good parenting skills in Africa.</li> </ul> |
| Views, of Changamwe men, on good parenting style  |
| <ul style="list-style-type: none"> <li>• Traditions still influence parenting, for example, since all children belong to the society, they ought to respect their elders.</li> <li>• While raising children, parents should ensure that their children regard religion.</li> <li>• Children should be given appropriate medical care.</li> <li>• Seminars and barazas are vital for parents acquire parenting skills.</li> <li>• A balanced diet, shelter and clothing should be provided for all children.</li> </ul>  |

Source: Changamwe FGD proceedings

Kayole residents consider provision of basic needs as the basis of good parenting. According to them, this is the main responsibility for parents. In addition, both men and women agreed that communication among family members is beneficial for the wellbeing of the family.

Table 17 b: What men and women of Kayole consider as good parenting

| Men  | Women   |
|--|---|
| <ul style="list-style-type: none"> <li>• When parents provide basic needs to their children</li> <li>• When parents are able to sit down and give guidance and counselling to their children</li> <li>• When parents ensure that children are enrolled in school</li> <li>• When parents know and understand the immunization schedule and ensure that their children are immunized at the right time</li> </ul> | <ul style="list-style-type: none"> <li>• When parents feel compelled to provide basic needs to their children</li> <li>• When there exists good communication between parents and children</li> <li>• When parents know their children's whereabouts</li> <li>• When parents are able to train their children on the importance of responsibilities, and delegation of duties.</li> <li>• If parents are able to give guidance and counselling to their children</li> </ul> |

Source: Kayole FGD proceedings

Men and women of Butula considered the following as good parenting styles in their area



during separate focus group discussions as good:

Table 17 c: Good parenting styles in Butula

| Women  | Men  |
|--|--|
| <ul style="list-style-type: none"> <li>• Provision of education</li> <li>• Giving parental love</li> <li>• Provision of security</li> <li>• Provision of a conducive environment</li> <li>• Provision of good health from conception, including vaccination, feeding habits and expectant mothers attending prenatal clinics</li> <li>• Spiritual guidance and development in children</li> <li>• Giving roles to children with due consideration of their gender</li> <li>• Allocating of time to spend with children</li> <li>• Taking children out for fun activities</li> <li>• Being open with children. Informing them the good and bad aspects of life, and guiding them through the adolescence stage</li> <li>• Defining the roles and rules that guide children while undertaking their chores and relating with others</li> <li>• Giving maximum attention and respect to children</li> </ul> | <ul style="list-style-type: none"> <li>• Ensuring that children get a balanced diet</li> <li>• Provision of education</li> <li>• Allowing children to socialize with others</li> <li>• Allowing open discussion in the family, especially when a problem arises</li> <li>• Parents should be approachable Parents should be role-models to their young</li> <li>• Avoid corporal punishment</li> </ul> |

Source: Butula FGD proceedings

An overall analysis of the responses above indicates that parents are very keen on provision of basic needs and protection to their children. To them this is an important measure of a good parent. Instilling discipline through defining roles and rules to guide behaviour was also mentioned as an important measure of good parenting. This however does not indicate that the parents in question practice all the mentioned attributes.

In an attempt to measure perceptions of what the parents understand to be good or bad parenting styles, support and control statements denoting parental monitoring were designed and respondents were required to respond on a 5 points' scale, ranging from: strongly agree to strongly disagree and with a neutral midpoint of: neither agree or disagree.

Parental monitoring, according to Dishion and MacMahon (1998), is “a set of correlated parenting behaviours involving attention to, and tracking of the child’s whereabouts, activities, and adaptations.” Di Clemente (2001) sees parental monitoring as the need for the parent to know where the child is at all times, and with whom they are associating with when not at home or school.





Table 18: Respondents' perceptions on how to support and monitor children (n=600)

| Statements On Parenting (%)  | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
|--|----------------|-------|---------|----------|-------------------|
| Children need help and support always  | 83.7           | 16    | 0.3     | 0        | 0                 |
| Children need clear rules about what they can and cannot do                          | 56.5           | 40.3  | 2.7     | 0.5      | 0                 |
| Parents need to know where their children are when they are not in school or at home | 60.3           | 36.1  | 3.5     | 0.2      | 0                 |
| Parents need to know who their children are with when in school, home or elsewhere   | 57.6           | 32.9  | 7.2     | 2.2      | 0.2               |

Respondents in the household survey areas had insightful perceptions on the measure of support and control that is adequate for guiding character and moulding behaviour. A Majority of them strongly agreed with the control and support statements which sought to determine the perception of caregivers' role of guiding and controlling the activities of children in their care. In fact, 83% of the respondents strongly agreed that children need help and support always, while none disagreed with this statement. This was a clear message that parents were convinced that children need parental support when they have questions or ideas, and, some level of control to check their behaviour. However, whether the parents in question actually practice these attributes, as described for the wellbeing of their children, is unclear.

Providing clear rules in a family set up, on what children can and cannot do, is a statement that drew mixed reactions from respondents. Whereas 56% strongly agreed on the need for clear rules, 40.3% of the respondents agreed that clear rules are required. This indicates a level of uncertainty. For this kind of measurement, a high enough score of strongly agree would provide a more concrete belief in the attribute of measurement.

Monitoring children's friendships and associates, while providing a balanced level of freedom, is one of the basic attributes of good parenting. It involves parents knowing where their children are when not in school or at home and also the kind of friends and associates they keep. A majority of the respondents believe it is the parent's responsibility to know of their children's whereabouts and whom they associate with at all times.

Based on the responses on statements in the table below, it easy to classify the perception of the respondents regarding what is appropriate parenting. The combination of levels of support and control denotes high support from responses of both 'strongly agree' and 'agree' on support items and low support for all other responses. Similarly, responses for high control included 'strongly agree' and 'agree' while those for low control had other responses. From the table below, nearly all the respondents feel that high parental control and support for children is necessary.



Table 19: Respondents' parental involvement level

| Type of parental control/Monitoring | n          | %          | Type of parental support | n          | %          |
|-------------------------------------|------------|------------|--------------------------|------------|------------|
| High control                        | 535        | 89         | High support             | 599        | 99.8       |
| Low control                         | 65         | 11         | Low support              | 1          | 0.2        |
| <b>Total</b>                        | <b>600</b> | <b>100</b> | <b>Total</b>             | <b>600</b> | <b>100</b> |

Parental monitoring is generally perceived by researchers as the most important aspect of “authoritative parenting.” Authoritative parenting is defined as a combination of parenting behaviours (e.g. setting and enforcing clear rules and standards, encouraging autonomy and communication with parents, and being involved and supportive in a child’s activities). We can therefore deduce that according to this research, the best style of parenting at the early stage of development is high control by monitoring the child’s environment, friends and activities and high support, being present to answer their questions and attend to their needs and requirements.





## 4. Assessment for measuring the parenting practices

### 4.1 Source of information to inform parenting practices

Parenting is a multifaceted discipline that most often requires guidance and information, in order for a parent to be able to deal with most issues skilfully. A lot of people depend on experience or how they were parented or advice from relatives, while others may borrow from books, magazines or whatever is accessible. According to this research, household survey results reveal that a majority of families do not rely on public media for information on how to raise children. Most identified family members and religious factions as the best avenue for learning and sharing on parenting. Individual knowledge or parenting experience as the main source of parenting information was considered by less than 5% of the respondents as the main source of information. Some of the respondents preferred public gatherings or barazas to radio, TV and print media.

This shows that family members and religious factions and institutions are important factors to consider when parenting information is needed for better parenting.

Table 20: Main source of information on how to raise a child

|   | n   | %    |
|---|-----|------|
| Radio/TV  | 42  | 7    |
| Newspapers/Books/Magazines                              | 12  | 2    |
| Public gatherings                                       | 76  | 12.7 |
| Religious functions                                     | 133 | 22.2 |
| Friends/colleagues                                      | 23  | 3.8  |
| Family members  | 262 | 43.7 |
| The Internet  | 1   | 0.2  |
| Clinics   | 13  | 2.2  |
| Community family matters' programmes                    | 1   | 0.2  |
| Community health strategy, ministry, Aphia plus program | 1   | 0.2  |
| Experience from orphanage                               | 1   | 0.2  |
| Health education  | 1   | 0.2  |
| Interaction with a child                                | 1   | 0.2  |
| Own knowledge   | 23  | 3.7  |
| Religious leaders                                       | 1   | 0.2  |
| School  | 3   | 0.6  |
| Seminars  | 4   | 0.7  |
| Trainings   | 1   | 0.2  |
| NGO's   | 1   | 0.2  |



## 4.2 Parent/caregivers - child relationships

The relationship between children and parents is a clear indicator of parenting. In this case, the manner in which communication within the family is handled becomes the medium through which relations are built. In an attempt to measure this, respondents were asked whether or not children should be given freedom to openly engage with their parents openly in the family. A majority agreed that there is need to provide children the space and freedom to express themselves freely. They further felt that children have a right to ask questions and express their feelings, to their parents, without fear.

The finding was further validated by what they consider as consequences of preventing children to express themselves freely, from an early age. This is provided in the table below:

Figure 9: Extent of agreement on the right of children to ask questions or express their feelings to parents when they need to

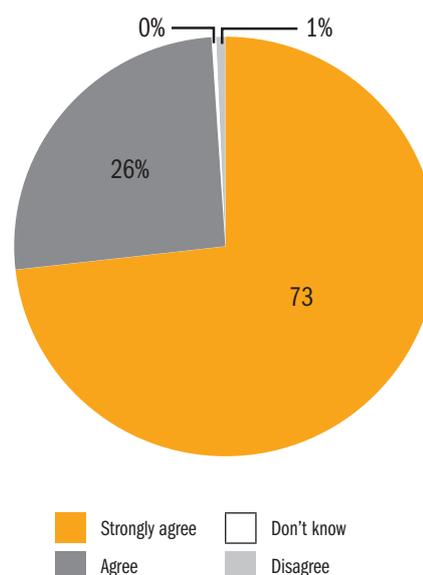


Table 21: Consequences of preventing children to freely express themselves in the family

- The child may look for attention elsewhere therefore easily misled
- The child will keep to him/herself, thus living with unresolved issues;
- The child feels neglected and unwanted
- Poor relationships between parents and children
- Child will not be able to freely open up about his/her experiences leading to repetition of mistakes
- Child will have low self-esteem
- Child may misbehave/become undisciplined or violent
- Child may experience loneliness, fear and anxiety
- Child may be depressed
- Child may pick bad habits from their peers
- Instils fear, among others

## 4.3 Family meetings as an assessment for the parenting practice

Regular family meetings are considered as an avenue for open communication and discussion. This is also a time for bonding, answering questions, discussion as well as validation of rules and regulations in the family.

During the household survey, it was clear that more than half of the households rarely conduct family meetings regularly. According to the findings, family meetings with children





can be triggered by among other things: a new phenomenon or happening such as intention to move house, parents leaving on a trip, sickness, an emergency or issue of concern to inform the children. The other reasons included the beginning and end of school terms; when there is need to discuss the performance of the children. It was also noted that more than half of the families hold family meetings each week. This was an indication of weekly communication among family members.

Table 22: Frequency of family meetings in a household

|  | n   | %    |
|--|-----|------|
| Everyday                               | 224 | 37.3 |
| Weekly                                 | 134 | 22.3 |
| Monthly                                | 36  | 6    |
| When there is an issue to be discussed | 159 | 26.5 |
| Don't have any family meetings         | 30  | 5    |
| Opening/closing schools                | 8   | 1.3  |
| Anytime                                | 1   | 0.2  |
| In the evenings                        | 1   | 0.2  |
| Most of the time                       | 1   | 0.2  |
| Twice a month                          | 1   | 0.2  |
| Weekends                               | 1   | 0.2  |
| More than once in a week               | 1   | 0.2  |
| No response                            | 3   | 0.5  |

According to the research findings, most family meetings ensure that there is interaction between the parents and children (59%). These family meetings take different dimensions, depending on who heads these meetings. There was a general opinion that mothers usually take the central role in running the agenda, and asking the questions. This opinion differed from one study area to another as highlighted below. There is need to evaluate how either a mother or a father, heading meetings, contributes to strengthening parent-child relationships.





Table 23: Structures of family meetings

|  | n          | %          |
|--|------------|------------|
| Father asks questions for others to respond                | 44         | 7.3        |
| Both parents ask the questions for children to respond     | 52         | 8.7        |
| Mother asks the questions while children respond           | 116        | 19.3       |
| There is free interaction between the parents and children | 354        | 59         |
| Other  | 1          | 0.2        |
| Grandparents talk to the children                          | 1          | 0.2        |
| Mother discusses with children, issues pertaining to life  | 1          | 0.2        |
| Grandmother interacts with grandchildren                   | 7          | 1.2        |
| Interact freely as siblings                                | 1          | 0.2        |
| No meetings are held in the family                         | 1          | 0.2        |
| No family meetings so structure can't be defined           | 6          | 1          |
| No family members  | 1          | 0.2        |
| When there is need to do so                                | 1          | 0.2        |
| No response  | 14         | 2.4        |
| <b>Total</b>   | <b>600</b> | <b>100</b> |

In addition, the research findings demonstrated a difference in how the cultures, of each research site, affect management of the family meetings. Competing duties of the parents take up the time meant for family meetings, according to Changamwe respondents. Despite their busy schedules, most of them expressed that they would only make time for meetings if an urgent matter arose. For instance, if the issue in question was about children's misbehaviour causing parent-child conflict, parents would call a meeting to order, and address the problem.

Table 24 a: Family meetings in Changamwe

- Children are allowed and encouraged to freely express themselves.
- Women in Changamwe were of the opinion that girls are usually freer with their mothers while boys turn to their fathers for moral support and guidance.
- Throughout these family meetings, parents motivate children by praising good behaviour, giving gifts and to some extent, holding parties. Although children freely participate in the family meetings, their active involvement depends on their age and gender. They are sometimes also involved in decision making

Source; Changamwe FGD proceedings

In Kayole, most family meetings are determined by parents' nature of work and held when a need arises. They are also held:

- i. Before the family prays together
- ii. During meal times especially supper
- iii. Occasionally, when mothers engage children, while performing their chores





Table 24 b: Management of meetings in Kayole

- The father is mandated to chair the meetings whose magnitude will largely depend on the relationship between the parents and their children
- However, since most fathers are usually absent, arriving home late, the mothers usually take over. The result is that children may have a negative attitude towards their father depending on the perceptions of their mothers, often creating strife and disharmony in the family.
- Mothers feel that fathers have left the role of parenting solely to them, hence their sons are not well fathered. This may lead to sons having an identity crisis.
- Children are involved through:
  - Allowing them to contribute to decision-making:
  - Can be asked to lead a song, before discussions begin.
  - Duties are delegated to them

Source: Kayole FGD proceedings

The structure of family meetings vary from one household to another in Butula. Both men and women groups were in agreement that family meetings mostly happen under some of the following special circumstances:

Table 24 c: Main avenue for family meetings in Butula

- At the beginning and end of school terms
- During evening meals
- Sundays, before and after church
- When a problem arises
- During morning and evening prayers

Source: Butula FGD proceedings

The management of meetings also varies with the household heads. However, according to the Butula women, men do not spare time for family meetings, leaving this responsibility to their women.

Table 24 d: Butula women's views on management of family meetings

- Mothers lead when fathers are away
- Father leads if both parents are present
- Father/mother leads if widowed
- Children lead in child-headed households
- Children are given time to freely express themselves and the parents respond to their concerns in the meeting

Source: Butula FGD proceedings



Table 24 e: Butula men’s views on management of family meetings

- Most parents lack time to hold these meetings
- Many families believe that children have no say in most decision in meetings. “**Mtoto atasema nini?**”<sup>1</sup> was the typical response.
- Some parents use incentives such as tea and soft drinks to enable children to cooperate during family meetings.
- The agenda of the meeting is usually pre-determined to enable children to prepare themselves
- In case of a controversial agenda, parents usually inform the children beforehand
- Children are not allowed to express themselves as parents dictate the direction and topics of the meeting

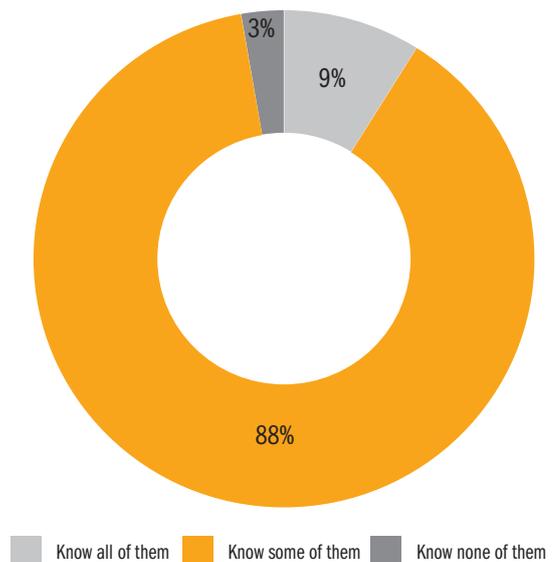
Source: Butula FGD proceedings

In Butula, it emerged that children in this community are to be seen and not heard. They don’t actively participate in family meetings, an aspect of their culture.

#### 4.4 Familiarity with children’s peers and friends

Monitoring friendships is an important parental duty which provides insight into the kind of friends their children keep. This monitors forces of influence that the child would be subjected to. Parents were asked to respond on how well they knew their children’s peers and friends. The responses showed that a majority of the respondents knew **some** of their children’s friends, (88%), whereas only 9% of the respondents knew **all** their children’s friends. It is also worth noting that only 3% of the respondents reported not knowing any of their children peers.

Figure 10: Caregiver’s knowledge of their children’s friends and peers



One sure way of modifying behaviour of children is by monitoring their friends, because of the very powerful influence of peers. Consequently, knowing by name, children’s peers and friends is not enough. The caregivers need to know more about the character, family, religion and culture of these peers who spend a considerable amount of time with their children. The mentioned qualities are bound to greatly influence the behaviour of their children.

<sup>1</sup>“What can a child contribute?”





Most respondents stated that they knew the families of their children’s peers, where they lived and schooled (43.8%). They believed that this would give them insight into the kind of friends their children had. Another group of respondents only knew where the peers schooled and lived (20.8%), while 15% and 11% of the respondents know where they lived and where they schooled respectively.

The table below highlights more responses of the caregivers.

Table 25: Extent to which caregivers know their children’s friends

|   | n   | %    |
|---|-----|------|
| Know their family members, where they live and school | 263 | 43.8 |
| Know where they live and school                       | 125 | 20.8 |
| Know their school only                                | 90  | 15   |
| Know where they live only                             | 66  | 11   |
| Know their family only                                | 33  | 5.5  |
| Do not know   | 2   | 0.3  |
| Those who come to visit at home                       | 5   | 0.8  |
| They play together in the neighbourhood               | 1   | 0.2  |
| Don’t know  | 9   | 1.5  |
| No response   | 6   | 1    |
| Total   | 600 | 100  |

Development of social skills is one area of early childhood development which needs the attention of more players in the family. One of the means for strengthening the social skills of a child is by encouraging them to interact with their peers, and build friendships. But how do caregivers do this?

According to the household survey, many parents usually guide their children on how to identify good friends and peers (60%). They believe that by this, the children would be able to have insight on choosing friends wisely. About 23% of the respondents allow their children to invite friends and neighbours in their homes as a way of encouraging the children to interact with peers. About 2% of the respondents limit interaction of their children with others. This is informed either by their surrounding environment, previous experiences or unforeseen factors.



Table 26: How caregivers encourage their children to interact more with their peers

|   | n   | %    |
|---|-----|------|
| Allow the child to invite friends and neighbours to your home           | 140 | 23.3 |
| Guide your child with information on identifying good friends and peers | 365 | 60.8 |
| Avoid embarrassing your child in the presence of his peers              | 19  | 3.2  |
| Encourage them to invite their friends at home                          | 51  | 8.5  |
| I don't encourage interaction involving my child and other people       | 11  | 1.8  |
| Others  | 1   | 0.2  |
| Tell them to avoid bad company  | 1   | 0.2  |
| No response   | 12  | 2    |
| Total   | 600 | 100  |

#### 4.5 Motivation and role modelling

Parents also determine positive social growth of their children by motivating them, introducing them to religion and role modelling.

Table 27 a: How caregivers in Butula positively contribute to social growth of their children

| Men   | Women  |
|---|--|
| Praising and rewarding good behaviour   | Acting as their role model   |
| Allowing interaction of children with their peers to enable them learn new things | Taking them to school  |
| Nurturing their talents   | Allowing them to bring their friends at home                                   |
| Encouraging them to go to church for spiritual growth                             | Encouraging them to make friends while guiding them in choosing friends wisely |
| Helping them whenever necessary   |  |
| Allowing them to play   |  |

Source: Butula FGD proceedings

Table 27 b: How caregivers in Kayole positively contribute to the social growth of their children

| Men  | Women  |
|--|--|
| Caregivers like teachers, health workers and religious leaders mould children morally, intellectually and spiritually; but it's very important for parents to follow them up and fully support them. | Making sure children attend Sunday school as to be taught virtues that contribute to their moral behaviour   |
|  | Since teachers contribute to the intellectual development of the child, it is important for parents to supplement teachers' efforts in holistically bringing up children who are intellectual and morally upright. |

Source: Kayole FGD proceedings





Table 27 c: How caregivers should positively contribute to social growth of their children in Changamwe

- A child needs spiritual grooming through religious and cultural practices that are universally acceptable.
- Enrolling a child in a school at the appropriate time and age
- Parents should allow their children to make friends but also monitor them
- Some of the emerging issues affecting the society should be discussed at the family level so as to create awareness of their impact on children as early as possible. The issues should be discussed in homes, churches, schools and other social gatherings. The issues include drug abuse, early marriages and pregnancy, sex and HIV/AIDS. This will enable the children to prepare better for their future
- Caregivers should teach children how to budget and save up at an early age. They should further show them how to conserve the environment, water and electricity.
- Parents should act as role models to their children by respecting each other.

Source: Changamwe FGD proceedings

#### 4.6 Self learning

Most communities understand that early childhood serves as the best stage for children to experiment and acquire confidence. According to them, this is the time when children practice the behaviour and activities modelled to them. As they copy and acquire behaviour, they assess their experiences which become part of their heritage. It is therefore important for parents and caregivers to be aware of the activities and behaviour being experimented on by their children. Guiding and nurturing visible talents were cited as some of the ways in which parents and caregivers encourage self-learning and positive experiences among children. Butula, Changamwe and Kayole residents believe that assigning responsibilities is an important avenue in creating a self-learning platform for children.





Table 28 a: How caregivers in Butula encourage self-learning and experiences for children

- Assigning children appropriate duties at different stages of development so as to ensure that they become responsible
- Rewarding children for good deeds
- Allowing children to do things on their own
- Provision of modelling materials to enhance their creativity
- Provision of playing items or toys
- Expressing love
- Guiding and counselling them on good behavior
- Giving them money for school trips and purchasing materials to enable them nurture their talents.

Source: Butula FGD proceedings

Table 28 b: How caregivers in Changamwe encourage self-learning and experiences

- Caregivers should train children age and gender-specific household chores in order to train them to be responsible
- Parents should motivate and encourage children through acknowledging and appreciating their good deeds, for instance with gifts
- Children should be taught virtues and morals such as kindness, endurance, perseverance, love and obedience
- Caregivers should serve as good role models for their children
- Conflicts among parents should never transpire in the presence of the children because children see and hear and may copy this behaviour in future
- Parents should emphasize that children work hard both at school and home.

Source: Changamwe FGD proceedings

Table 28 c: How caregivers in Kayole encourage positive self-learning and experiences among their children

| Men   | Women  |
|---|--|
| a. Giving them liberty to nurture and develop their talents though under parental supervision.                      | a. By involving them in decision making especially on issues directly affecting them |
| b. Guide them in setting goals and decision making  | b. Encouraging them to play and interact with their friends                          |
| c. Encouraging them to read or listen to relevant information such as through the media: local radio and newspapers | c. Encouraging them to attend Sunday school for spiritual nourishment                |
| d. Encourage them to play with their peers, though monitoring the friendships.                                      | c. Assigning them age and gender-specific household chores                           |

Source: Kayole FGD proceedings

Over 60% of the respondents attested to using story telling for supporting a child's learning and acquisition of basic skills. Spending time together in families through functions such as get-togethers and teaching children songs, are also frequently used method by caregivers to enable children acquisition of basic skills.





Table 29: How to support a child's learning and acquisition of basic skills

|   | n          | %          |
|---|------------|------------|
| Story-telling   | 387        | 64.5       |
| Teaching songs  | 35         | 5.8        |
| Playing games together  | 18         | 3          |
| Listening to radio and watching TV/movies together                                | 27         | 4.5        |
| Get-togethers with other families   | 52         | 8.7        |
| Other   | 2          | 0.3        |
| By providing their basic needs  | 1          | 0.2        |
| Doing school assignments together   | 1          | 0.2        |
| Gives support when the child is at home, because, in school, the teacher steps in | 1          | 0.2        |
| Going with them to church   | 1          | 0.2        |
| Guiding them through their chores   | 1          | 0.2        |
| Parent teaching the child   | 1          | 0.2        |
| Providing them with learning materials  | 2          | 0.3        |
| Religious teachings   | 4          | 0.7        |
| Talking to them about life and how to relate with others                          | 60         | 10         |
| Teaching them life's lessons  | 1          | 0.2        |
| Teaching them basic skills and providing learning materials                       | 1          | 0.2        |
| Works together with the child   | 2          | 0.3        |
| Buying the necessary stuff  | 1          | 0.2        |
| Domestic chores   | 1          | 0.2        |
| <b>Total</b>  | <b>600</b> | <b>100</b> |

According to the respondents, a majority of the caregivers recognised the importance of having interest in their children's activities. Listening and play are some of the most important areas where children need their attention. In fact, more than 70% of the respondents in this study felt that attending to children's needs enhances their social and communication skills, while a number of the parents cited an increase in children's confidence which further contributes to their development. Other benefits are listed in the second table below.

Table 30: Importance of listening, playing and attending to children's needs

|                |       |
|----------------|-------|
| No response    | 0.3%  |
| Not important  | 0.2%  |
| Don't know     | 0.2%  |
| Important      | 26%   |
| Very important | 73.3% |

Table 31: How listening and giving attention to children's concerns helps aids their development



|   | n          | %          |
|---|------------|------------|
| Enhance their social and communication skills             | 323        | 53.8       |
| Increase their self confidence                            | 256        | 42.7       |
| Others  | 6          | 1          |
| Become more responsible and disciplined                   | 1          | 0.2        |
| Build strong bonds  | 5          | 0.8        |
| Child is able to differentiate right from wrong           | 1          | 0.2        |
| Child will be satisfied                                   | 1          | 0.2        |
| Helps them to be more responsible and achieve their goals | 2          | 0.3        |
| Increases love in the family                              | 1          | 0.2        |
| Makes them more knowledgeable on life issues              | 2          | 0.3        |
| Does not help   | 1          | 0.2        |
| The child is able to freely interact with you             | 1          | 0.2        |
| <b>Total</b>  | <b>600</b> | <b>100</b> |





## 5. Investing in early childhood development

### 5.1 Programs, Policy and Practice in Kenya

Success in outcomes during early childhood development requires a comprehensive approach to policies and programmes for children from birth to 8 years of age, their parents and caregivers. Its purpose is to protect the child's rights to develop his/her full cognitive, emotional, social and physical potential. Interventions and services that meet the needs of infants and young children are vital, and they should include education on parenting skills, age targeted health services, nutrition, education, water and environmental sanitation in homes and communities. The approach promotes and protects the rights of the young child to survival, growth and development. Experiences from ECD programmes around the world demonstrate the promise for children's wellbeing and for that of their families and communities (UNICEF, 2001).

ECD approaches in Kenya, as defined in legal and policy documents, provides for the holistic development of children from conception to age eight. It involves learning experiences in pre-schools, psychosocial stimulation, community and parental education and mobilization, transition from pre-school to primary school, and health and nutrition surveillance (Republic of Kenya, 2005). However, research findings prove that the practice largely does not include parental education and the services provided are mainly education.

It has been noted that children make remarkable gains in physical and motor development, in linguistic and cognitive functioning as well as dramatic progress in their emotional, social, regulatory and moral capacities if given appropriate care. That is why it is important that children receive appropriate supports in terms of the following: protection (*an environment that is safe from physical and emotional harm*); good health (*safe water, hygiene*); appropriate nutrition (*including exclusive breastfeeding for the first six months*), stimulation (*opportunities to explore the world, express curiosity, engage in problem solving*); language development (*listening and responding*); and most of all in terms of interaction with and attachment to caring adults.

### 5.2 Skilful parenting and early childhood development: Kenyan experience

The most important factor in a child's healthy development is to have at least one strong relationship with a caring adult who values the well-being of the child. Lack of a consistent caregiver can create additional risks for children. Studies have shown that interaction between the parent/caregiver and the child determines the quality of care received and the ways in which the child develops. In this case, skilful parenting becomes a critical aspect to be considered in the child's early developmental stages.



Children's development of the cognitive and social skills needed for later success in school may be best supported by proper parenting. The quality of parenting in Kenya has been on the decline and this could be one of the factors contributing to rising under-five mortality rates, as well as growing concerns about the healthy psychosocial development of children (Republic of Kenya, 2006). Given that parenting is the duty to be undertaken by both parents equally, the fathers have been known to be mostly absent in their children's lives due to their 'economic responsibilities'.

A South African study estimated that 50% of fathers do not have daily contact with their children (Evans, 2000). This situation is no different from the Kenyan one since its findings verify that fathers are not preferred as primary parents. Perhaps fathers regard their role as mainly providing family needs. Those that may have successfully embraced their role as involved parents are torn between their desire to participate in the lives of their children and the pressures of modern working life, which makes the parenting task very difficult, especially when there is little support to the fathers.

Further, a 2009 Kenyan survey of Nairobi West and Industrial Area Remand Prisons, found out that parenting plays a big role in determining the development of a child (Njonjo, 2010). According to the 3,200 prisoners interviewed, the survey argues that the role of a father is particularly important in determining their child's future: At Nairobi West Prison, 52% of 200 inmates grew up without fathers, 10% had abusive fathers and 12% had passive ones. Only 10% responded as having had excellent relationships with their fathers. In contrast, Industrial Area Remand Prison cited that 78% of the prisoners grew up without fathers, 8% had abusive ones, while 6% had passive fathers.

### **5.3 Rationale for Integrated Policy Framework**

The needs of children are complex and diverse. Meeting them involves catering for all areas of their physical, mental, social, emotional, moral and spiritual development. For the child to be healthy, the child requires health, nutrition, stimulation, protection, care and training. No organisation can single-handedly provide all the services that adequately safeguard the rights, and meet the needs of young children.

Consequently, the Kenyan Government, through the national Early Childhood Development Policy Framework (2006), provides a coordinated mechanism through which comprehensive early childhood development services are expected to be expanded and enhanced in Kenya. It provides that the holistic needs of young children are met to help them achieve their full potential. It also recognises and appreciates parents and families as primary caregivers, and health providers, of their children and hence in need of empowerment and support to ensure that they are effective in their roles.





According to the ECD service standard guidelines for Kenya (2006), every child shall have a right to life, survival and development, parental care, name and nationality, registration at birth, non-discrimination, protection from all forms of abuse, education, privacy, leisure and recreation, early stimulation, shelter, proper and adequate nutrition, health care and parental spiritual guidance. An examination of the implementation of the guidelines through stakeholder discussions revealed that most ECD centres provide education services but rarely involve parents in management and decision-making. In addition, there are no empowerment services extended to parents to enable them become better parents, except by Muslim faith-based centres.

Although there is emphasis on the importance of partnership in safe-guarding the mentioned rights, and provision of the services to meet the holistic needs of young children, a visible partnership in service provision is lacking, because most of these centres are privately owned. As noted earlier, they come in the form of community owned NGOs, faith based organisations, civil society, charitable organisations, and private individuals. Hence it becomes quite difficult for the government to monitor the quality of service.

#### **5.4 Existing laws and policies on children and parenting issues in Kenya**

Much of the first two years of human life are spent in the creation of a child's first "sense of self" or identity. This is a crucial part of how children first view themselves, think they should function and how they expect others to function in relation to them. For this reason, early childhood care must ensure that in addition to employing a carefully selected and trained caretaker, policy must emphasize links with family, home culture and home language (Wanjohi, 2011).

According to Section 23(1) of the Children's Act (Kenya) parental responsibility is defined as all the duties, rights, powers, responsibilities and authority which, by law, a parent has in relation to the child and the child's property, in a manner consistent with the evolving capacities of the child. The duties include: to maintain the child and in particular to provide him/her with adequate diet, shelter, clothing, and medical care including immunisation, and education and guidance. Article 20 of the African Charter on the Rights and Welfare of the Child not only states the primary responsibility of parents or caregivers in the upbringing and development of a child, but also highlights how the government shall assist the parents and caregivers in upholding their parental responsibilities.

It is the duty of the parent to protect the child from neglect, discrimination and abuse. It is also their duty to give parental guidance on religious, moral, social, cultural and other values; determine the name of the child, appoint a guardian in respect of the child, receive, recover, administer and otherwise deal with the property of the child for the benefit and in the best interests of the child.



The law dictates on whom the parental responsibility lays, and at what instance. It appreciates the dynamics and social challenges which affect parents in their roles. Section 24 of the Children's Act (Kenya) provides that "where a child's father and mother were married to each other at the time of his birth, they shall have parental responsibility for the child and neither the father nor the mother of the child shall have a superior right or claim against the other in exercise of such parental responsibility. Where a child's father and mother were not married to each other at the time of the child's birth and have subsequently married each other, they shall have parental responsibility for the child and neither the father nor the mother of the child shall have a superior right or claim against the other in the exercise of such parental responsibility."

Other policies and laws (in respect to Kenya) include:

#### **a) Education Bill**

The Education bill takes into consideration the early childhood development concerns at the county level through the help of County Development Boards. The County Development Board is mandated to oversee, in consultation with the county government, the operation and management of village polytechnics, pre-primary education including early childhood care and education programmes in the county. In addition, the board may establish committees specialized on among others, early childhood care and education (Education bill, 2012).

#### **b) Millennium Development Goals**

The importance of ECD has been emphasized in the millennium development goals (MDGs) adopted by the United Nations in 2000. Five of the eight MDGs relate to the health, nutrition, and education of young children. These goals include halving the percentage of children who suffer hunger, reducing by two-thirds the infant mortality rates for children under age 5, decreasing by three-quarters the ratio of maternal deaths to live births, providing all children the opportunity to complete primary education, and eliminating gender disparities in schooling opportunities.

#### **c) Local Government Act**

The Act, of Kenya, was amended in 1982 to facilitate the decentralization of service delivery to local government authorities. It strengthened the revenue base of local government authorities, enabling them to manage and finance education, nutrition and health services. The Act has therefore empowered local authorities to provide social services. Their involvement includes paying the salaries of teachers and supervisors, funding teachers' trainings, and providing facilities and materials in pre-schools (UNESCO, 2005).





#### **d) Partnership policy MOE (Ministry of Education)**

The MOE's policy, of partnership to enhance the provision of ECD services throughout the country, was first stipulated in Session Paper No. 6 of 1988 and the National Development Plan of 1989/93, with a goal of boosting the involvement of various partners in the ECD sector. The partnership policy also supports the implementation of the MOE's expanded vision on ECD, catering for the holistic needs of children aged about 0 – 5. The main partners include various government ministries, parents, local communities, private organizations and individuals, NGOs, bilateral and multilateral partners (UNESCO, 2005).

#### **e) PRSP (Poverty Reduction Strategy Paper)**

ECD is part of the country's PRSP, which emphasizes raising the economic base of parents and communities to ensure that they are able to provide for the holistic needs of children and families. It calls for persuading parents of the need for quality ECD services. Research has shown that children who are well cared for in their formative years are more socially stable, enjoy fuller cognitive development and higher academic achievement, suffer lower rates of repetition and dropout and obtain better-paying jobs. Hence such children become assets to society, due to their greater capacities in contributing economically at the family and country levels (UNESCO, 2005).

#### **f) Education for All (EFA)**

Recognizing the importance of a child's formative years is also reflected in the first of the six goals set at the Dakar World Forum on Education for All (EFA) in April 2000: "to expand and improve comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children" (UNESCO 2000). Improving human development in the early years is the surest way out of poverty, because it has a very high economic rate of return.



## 6. Conclusions

The findings in this study indicate that parents, to an extent, have the knowledge of what it means to parent skilfully. Further, the findings have demonstrated that quite a number of them are practising what they believe is good or skilful parenting. It is also evident that they are linking certain parental practices to behaviour outcomes in their children, especially during the early stage of growth. The summary provided in this section will discuss these key findings on skilful parenting and behaviour modification so as to provide workable recommendations for program planning.

### **UNDERSTANDING SKILFUL PARENTING: The needs and requirements at the early stage of development**

Largely, the findings have indicated that parents consider that providing basic needs from an early age of development, is an important aspect of parenting. Other equally important attributes necessary for optimal child growth and character formation such as warm loving relations only elicited 13% of the responses. Respondents realize and appreciate that the parent is solely responsible for providing all that children need and that the consequences are rather dire for the children, if the parent fails. Thus, parents need to appreciate that parenting is not just about providing, but that play, warm loving relations, and open communication are vital too.

#### **Parenting practices (roles, parenting styles, control and support)**

Moulding children's behaviour and character as they develop, which prevents violent tendencies among children and youth in our societies, can only be possible through close relations between parents and children. Active participation of parents at the vulnerable stages of a child's development will highly produce a responsible child, as well as future citizen. The findings in this study indicate that mothers are regarded as bearing the greatest responsibility in parenting while in her absence, an extended family member or a teacher is preferred to the father. While the focused group discussions stressed the importance of both parents bearing equal responsibility, the findings indicate that the role and presence of a father-figure in a family is not visible.

The relationship between children and parents is a clear indicator of the parenting practice. In this case, the manner in which communication within the family is handled becomes the medium through which relations are built. In an attempt to measure this, respondents were asked whether or not children should be given freedom to openly engage with their parents. A majority agreed that parents should open up these opportunities, in order for their children to freely express themselves. They further felt that children have a right to ask questions and express their feelings. The findings further show that family meetings ensure interaction between the parents and children (59%). These family meetings however, are not frequently scheduled as they take place only when there is an issue to be discussed. And, although respondents were of the view that children need an open environment to





discuss issues, and ask questions, there is need for more inquiry into the actual practice, more so because male respondents from Butula, Western Kenya, wondered what value it would add.

Because of the very powerful influence of peers, monitoring friendships of children is one sure way of modifying behaviour. Less than half of the respondents in this research claimed to have actually taken an initiative to know their children's friends and families (43.8%). This finding could be an important pointer to how much time parents spare to interact with their children in order to control their external/circle of influence. No wonder peers are the most influential authority in the life of young people! Parents need to know the character, families, religion and culture of each of these peers; qualities which will be emulated by their children.

#### **Awareness of the importance of skilful parenting in moulding behaviour**

The need to focus on behavior and character formation of children, from an early age, has become a matter of concern in Kenya, as with other African States. Youth violence and criminal behavior has been witnessed, with research demonstrating its link to poor parenting. Parenting skills play a critical role in managing the character of children and needs to be practiced at an early age, to ensure that children transition, from stage to stage, with the knowledge of right from wrong.

Further, although all concurred that it is necessary to shape character and behavior of children, there were divergent views regarding when to start this. A majority of the respondents (90%) felt that age 0-8 is an important age for inculcating character, self esteem, morals and an overall positive attitude in the children. And, whereas 40% agreed that it is necessary to apply knowledge and skills in parenting for children aged 2 - 5, 21% felt that 6 - 8 is the ideal age.

In addition, parenting skills were unanimously regarded as fundamental from conception and throughout subsequent developmental stages. It was especially encouraging that 26% considered that parenting skills are vital prior to conception, by indicating that skilful parenting should be applied as early as 0 - 2 years.

#### **Sources of information which inform the parenting practice**

Parenting is a multifaceted discipline whose skilful practice requires guidance and materials to refer from. Whereas many depend on their own parenting experiences, or advice from relatives, others research in books, magazines or what may be readily available. In this household survey, a majority of the families do not rely on public media for information on how to raise children. Most of them identified family members and religious factions as the



best avenues for learning and sharing parenting tips. Individual knowledge or experience on parenting, as the main source of information, was considered by less than 5% of the respondents. Some respondents preferred public barazas (gatherings) to radio, television (TV) and print media.

### **Availability of supportive services to families**

Largely, the findings identified ECD centres as structures that have been put in place to support parenting during the formative period of child development. However, the services currently offered are merely learning services preparing the child to join primary education, but which are exorbitant and unaffordable for many parents. A few of the centres integrate health, nutrition aid and counselling especially in poverty stricken communities most of which are donor-dependent, and driven by a religious institution or the civil society.

To date, ECD services in Kenya are not supported by the government, and are therefore operated privately, or by religious and civil society actors. This, to a large extent, means that families unable to afford the fees have had their children missing out on this crucial service. Further, despite a limited number providing food aid, health, immunisation and nutrition counselling, they have not integrated parenting skills, information or education services.

### **BEHAVIOUR CHANGE: Linkage between early childhood development and skilful parenting**

In the developing countries, over 200 million children under the age of 5 are not achieving their full potential. Hence they are less prepared for and able to profit from school (Engle, 2009). According to United Nations Millenium Development Goals, there is need to ensure that all children complete primary school and reduce extreme poverty and hunger (United Nations, 2002).in addition, the guardian, is the most influential in a child's life, as is the home and family environment which impacts a child's cognitive development and emotional wellbeing (Center on the Developing Child, 2007). For the above MDGs to be achieved, children need to develop their full potential with the help of their guardians.

Skilful parenting seeks to address and facilitate strong family relations and child wellbeing. Family-centered early childhood skilful parenting interventions emphasize on optimising health, education, character formation and overall wellbeing of children. According to recent research, some of the benefits of early intervention for all children are far reaching and lead to a reduction of some childhood diseases, increased school attendance, improved nutrition and caring parents (UNICEF, 2006). For the above to effectively materialise, parents and caregivers need to actively play their roles.





### Box 1: Behaviour change in early childhood (0-8) years

The important aspects which maximise positive outcomes of care, during the early stages of child development are: a safe environment, proper nutrition and medical care, and most importantly, the consistent presence of stable and caring adults (Center on the Developing Child, 2010). At each stage of their development, children experience different changes, each with specific needs. During this transition, coaching from caregivers is required, which forms the basis for their behaviour modification. Stages of child development and the required parenting skills (Njenga, Frank 2010) are highlighted below:

#### a. Infant - 3 years

For infants, this is a period of attachment to their primary caregiver, especially the mothers, as well as a prime time to start their stimulation. This bond enables the child to learn relating to others, a stepping stone for development of future human and social relations. However, if this bond is broken at this early stage, it is traumatising for the child, resulting in a self-centred and selfish adult. This nature further leads to addiction such as drinking, smoking and overeating, as they search for the same oral gratification that they got when they were suckling at their mothers' breast.

This stage is also crucial for developing language skills through imitating and listening to parents, caregivers and siblings. Caregivers ought to support a child acquire new motor, language and cognitive skills. The emotional and social wellbeing of the child is dependent on the actions and words of others. The level of attachment to its mother also determines a child's capacity for attachment to others, hence parents should spend quality time with their babies to ease crisis in adolescence and prevent drug abuse in adulthood.

#### b. 4-5 years

This is a period of socialisation, when a child is keen to see and do, listen and say. Children learn to think, through expressing words when are confronted with problems or concerns. Caregivers need to encourage their language development through talking, reading and singing to the child. Furthermore, experimenting with pre-reading and pre-writing skills of the child is central. Encouraging children to develop self-control, cooperation and persistence in completing projects and responsibilities, is equally important. Parents should be involved in guiding the children through do's and don'ts. Rewarding good behaviour and carefully using disapproving words for naughty behaviour is paramount, to enable the child experience positive or negative outcomes for their actions.

Through imitation, the child's environment greatly determines their behaviour. They can gain hands-on exploration for learning through action. This should inform parents, caregivers, siblings and community members to carefully consider as a conducive environment for raising children.

#### c. 6-8 years

In Kenya, this is the period for early/lower primary school, where children develop cognitively, emotionally, morally and physiologically. Caregivers should be ready to provide a child's smooth transition from home to school through school readiness training. School readiness is not solely a function of letter recognition, but also of social skills such as working in a group (C. Rouse, J. Brooks-Gunn & S.S McLanahan, 2005). Therefore, it is recommended that caregivers be the first to prepare children for school; although KIE has developed SRAI to be used whenever children join primary school. This is also the stage when children fully develop their experimenting nature. Parents should therefore motivate their children achieve their best, for example, academically. Children will also look up to their caregivers as role models.

Parents also need to talk to their children about their physiological body changes, reassuring them that it's normal. This period also presents a time when children tend to be more independent and increasingly social and forming external attachment, apart from their parents. Parents should therefore encourage this independence, as opposed to fearing that they will lose full control of their kids.

A child's antisocial behaviour such as refusal to attend school, bullying of siblings, involvement in frequent fights & violence, experimenting with drugs and alcohol, may be evident due to parents' pressures on children to excel in many areas, such as school.



#### **d. 8 Years - beyond**

By this stage, children know the consequences of bad behaviour, thus using this knowledge to regulate their actions. This is a period for adolescence and puberty. It is also the period when peers matter more than their parents. It's a stage characterised by fighting for independence and identity. Most of them are curious about everything ranging from their sexuality to their identity. How parents respond to these queries will generally contribute to a child's choices. This is also when parents need to guide and counsel their children.

The manner in which caregivers treat and respond to the children often sends mixed signals especially when treating them as adults, sometimes, and as children in others. Physiological changes in adolescence, tend to make them moody, irritable, confrontational and rebellious. If Parents don't handle the adolescents skillfully, it may lead to severe strain on relationships, causing drastic actions such as running away from home and attempted suicide.





## 7. Recommendations

This pilot study revealed important implications for focusing on immediate response programs, in order to enhance integrated focus on behavior modification in the early childhood. In this regard, the Parenting in Africa Network proposes the following recommendations with the hope that we will provoke further inquiry and research.

These findings should inform advocacy activities targeting various stakeholders in early childhood education and care. Government officials in the ministry of education, children, gender and health-specific departments need to be targeted to begin relooking at the current policies that govern early childhood care. Integrating parenting skills' education along with services offered by various ECD centers is vital.

There is also a need to bring on board civil society actors to advocate for information and education on parenting skills. This would complement government efforts in providing integrated services in ECD.

PAN and partners (especially the Kenya PAN chapter members) need to continue raising awareness on skilful parenting from an early age, to curb crime and violence among youth. Most importantly, parents need to understand that skilful parenting goes beyond provision of basic needs. Further, that there are certain skills that each parent needs to ensure that their child receives all the required care and stimulation throughout their development.

This study has revealed that there are many parents who are not keen to utilize ECD services, mainly because the services are expensive or citing that they are not important. There is need to further map all existing ECD service centers to clearly understand the kind of services they offer, and of what value they add. This will inform strategies to design more comprehensive and integrated services which will be beneficial to not only children attending, but also parents.

PAN Kenya chapter members will need to develop user friendly materials and information packages to inform parents on the importance of self awareness as a parent in need of skills building, in order to ensure that children grow to become responsible citizens.

Success in outcomes during early childhood development requires a comprehensive and integrated approach to policies and programmes for children from birth to 8 years, their parents and caregivers. This report recommends that early childhood development policies consider parenting skills' education as a mandatory service to parents of children in their centres. This will ensure that parents receive comprehensive information that will support them in raising their children.



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