

Community participation in an Early Childhood Care and Education Model: Scaling the Inclusive Home-Based Early Learning Project in Marginalised Communities

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Executive Summary

Early childhood development (ECD) services are increasingly recognised as essential in improving children's developmental needs and mitigating the effects of intergenerational poverty in Africa. Research and practice have shown that ECD services improve children's health and nutritional status, performance and retention in school. Though the benefits of preschool exposure are well understood, only 30% of the preschool age children in Sub-Saharan Africa are actually enrolled in preschool.

In Zimbabwe, the enrolment of children with disabilities is at 0.85% way below the target of 25% which is a violation of the local and international conventions which recognise the right to education of ethnic, racial, cultural linguistic and religious groups, persons with disabilities and children.

Some parents of children with disabilities are against sending their children for ECD classes due to challenges ranging from the unsuitability of school environments, lack of resources, transport issues, the nature of the disability, financial constraints and lack of knowledge on the value of educating these children.

The Model: Inclusive Home-based Early Learning Project (IHELP) is an action research model that was developed by Kyambogo University in collaboration with Masinde Muliro University of Science and Technology, Kenya; University of Zimbabwe and Sense International, Uganda.

The model was developed as a hybrid of home-based and centre-based nursery school models, which helps it to maximise the strengths of both models. The IHELP model sought to establish 32 centres with 16 in Uganda, 8 in Kenya and the remaining 8 in Zimbabwe.

These innovations should have an eye of scaling at the beginning to ensure that what works cascades to similarly marginalised communities.

Recommendations

Recommendations from this include the following;

- Provide combined livelihood and nutritional support to the centres to improve the economic situation of the parents and nutritional situation of the children.
- Strengthen father involvement in early child development services.
- Involve parents in production of play materials.
- Make children with disabilities and their families central in the centres to deal with negative community perceptions on children with disabilities working with disability specialists in the schools and local education offices.

Policy Strategies for Community Participation

School feeding The IHELP project has shown that school feeding programmes are highly scalable and helpful in the running of the centres. School feeding has shown to be useful in retaining children at the centres, attracting more children and making the centres useful in improving health and nutritional statuses for the children.

Father involvement The project has shown that when fathers are involved, the children, their families and the centres benefit a lot since fathers ordinarily leave mothers to work on the centres with some concentrating on drinking beer only. We attracted them to the project by incentivising play material production.

Play pedagogy Another scalable aspect of the centres in the communities involved the use of play pedagogy. In the IHELP project we trained parents on play pedagogies, incentivised play material production and invited the parents to bring their common play games and conduct them with the children. Most parents were initially

against play pedagogies thinking that children should concentrate on learning literacy and numeracy skills only through rote instructions.

Livelihood projects and skills training Another important scalable community facet of IHELP centres involve use of livelihood strategies and savings clubs. The IHELP provide parents with training on how to run the livelihood projects and savings clubs, give them start-up capital for their livelihood projects of choice together with training on how to run their own family projects.

Keywords

early childhood development

scaling

community participation

home-based centres

parental involvement

inclusive education

Introduction

Early childhood development (ECD) services are increasingly recognised as essential in improving children's developmental needs and mitigating the effects of inter-generational poverty in Africa (Clark et al., 2024). Research and practice have shown that ECD services improve children's health and nutritional status, performance and retention in school. Though the benefits of preschool exposure are well understood, only 30% of the preschool age children in Sub-Saharan Africa are actually enrolled in preschool (Akkari, 2022). Enrolments are even poorer for children with disabilities. In Zimbabwe, the enrolment of children with disabilities is at 0.85% way below the target of 25% according to the Ministry of Primary and Secondary Education Statistics Report (Ministry of Primary and Secondary Education (Zimbabwe), 2018). This is a violation of the local and international conventions which recognise the right to education of ethnic, racial, cultural linguistic and religious groups, persons with disabilities and children. The exclusion of children with disabilities is based on varied reasons. Indeed, much of the existing evidence on early child development programs is based on interventions conducted in developed countries that rely on reasonably well-functioning welfare systems and well-organised bureaucracies. In contrast, there is little research on what early child development interventions that can be sustainable, affordable and scaled up in low-income contexts, especially in Sub-Saharan Africa (Justino et al., 2023).

Problem

In many African countries, children with disabilities are often excluded from ECD services as many parents lack the support services to help these children (Holness et al. 2023). The challenges are further compounded by societal barriers such cultural and religious beliefs attributing disabilities to curses, incest, a punishment for past-life sins or sins committed by family members. Recent estimates suggest that as many as 250 million children in developing countries are at risk of

not reaching their developmental potential, with two-thirds of those at-risk children living in sub-Saharan Africa (Jeyam et al., 2022). The at-risk children include those from rural areas, those from poor households or displaced communities and those who have disabilities (Akkari, 2022; Grimes et al., 2023). The African Child Policy Forum (The African Child Policy Forum, 2011) revealed that only less than 10% of children with disabilities in Africa receive education with the majority of these staying in urban areas even though 90 per cent of children with disabilities living in rural areas. Access to ECD services for children with disabilities are even scarcer (The African Child Policy Forum, 2011). Some parents of children with disabilities are against sending their children for ECD classes due to challenges ranging from the unsuitability of school environments, lack of resources, transport issues, the nature of the disability, financial constraints and lack of knowledge on the value of educating these children. Indeed, many families either hide their children with disabilities or concentrate on seeking rather than timely looking for educational and health assessments and interventions (Clark et al., 2024). Thus, for children with disabilities, ECD services are affected by communities those children live hence the term neighbourhood disadvantage. There is a social gradient in the way community level factors impact children's developmental trajectories; the more disadvantaged the community in which a child grows up, the worse their developmental trajectory (Goldfeld et al., 2021). Research suggests that the impacts of neighbourhood disadvantage can be mitigated by community-level factors (e.g. social capital, neighbourhood facilities) that affect the functioning of families and children, particularly on the resources families can access for promoting good development (Goldfeld et al., 2021).

Inclusive Home-based Early Learning Project (IHELP) is an action research model that was developed by Kyambogo University in collaboration with Masinde Muliro University of Science and Technology, Kenya; University of Zimbabwe and Sense International, Uganda.

The model was developed as a hybrid of home-based and centre-based nursery school models, which helps it to maximise the strengths of both models. The IHELP model sought to establish 32 centres with 16 in Uganda, 8 in Kenya and the remaining 8 in Zimbabwe. In Zimbabwe the centres are in Masvingo province, 4 in Bikita and the other 4 in Zaka districts. IHELP also integrates early learning with health by collaborating with health centres to provide deworming, vit A supplements and disability screening. The model is a community level model that combines the centre and home-based models but is implemented in homes in marginalised communities. Using the Ubuntu spirit, the centre is managed by a group of volunteer parents who form the management committee.

Policy Strategies

School feeding

The IHELP project has shown that school feeding programmes are highly scalable and helpful in the running of the centres. School feeding has shown to be useful in retaining children at the centres, attracting more children

and making the centres useful in improving health and nutritional statuses for the children. A study conducted in Botswana showed that ECD centres in urban areas provide meals without the recommended nutrients such as iron, calcium, carbohydrates, and protein while those in remote areas do not provide at all or their food is poorly prepared (Mwaipopo et al., 2021). Mwaipopo argue that poor nutrition affects children's cognitive, motor, and socio-emotional development which impacts their readiness for school and their success in school and lifetime learning and that good nutrition in a child's early years lays an important foundation for future health and well-being. ECD centres are considered important platforms for providing young children with nutritious meals. Similarly, Kabue et al. (2022) was able to show that nutritional support was impactful in ECD interventions among refugee communities in Kenya. Equally still, Justino et al. (2023) showed in Rwanda that ECD interventions that included nutritional support had significant impact among the preschool children. In the IHELP project we involved the centres in mobilising and preparing food for their children which had an impact in attracting and retaining the children, that all the centres in Zimbabwe had 199 children by the end of 2023. We trained parents and supported them in contributing food item and preparing food for their children.

Father involvement

A scalable policy option for the centres is father involvement. The project has shown that when fathers are involved, the children, their families and the centres benefit a lot since fathers ordinarily leave mothers to work on the centres with some concentrating on drinking beer only. We conscientised father and other male caregivers on the importance of father involvement. We attracted them to the project by incentivising play material production. A study that was conducted in Sierra Leone showed that ECD interventions that strengthened father's involvement in child rearing significantly improved parental practices such as responsiveness, stimulation, discipline, child health (while reducing wasting and stunting) and family cohesion (Chandra et al., 2021). Fathers got involved in activities such as feeding, clothing, preparing children for schooling, hygienic behaviours and promoting discipline (Chandra et al., 2021). Similarly, Kabue et al. (2022) showed that father involvement had lasting impact in ECD interventions among refugee communities in Kenya. Justino et al. (2023) revealed that father involvement in ECD interventions had lasting impact. Father involvement was assured in the IHELP from the beginning though it needed strengthening.

Play pedagogy

Another scalable aspect of the centres in the communities involved the use of play pedagogy. In the IHELP project we trained parents on play pedagogies, incentivised play material production and invited the parents to bring their common play games and conduct them with the children. Most parents were initially against play pedagogies thinking that children should concentrate on learning literacy and numeracy skills only through rote instructions. We conscientised father and other male caregivers on the importance

of father involvement. The play pedagogies have made the learning more interesting and culturally rooted. This has created an opportunity for parents to get enjoy their teachings as they have the experience in these plays. This has provided opportunities for the centres to train these children on socioemotional development and to even make the parents understand the purpose of early child development as many of them had thought that literacy and numeracy teaching were the core expectations of early child development. Justino et al. (2023) wrote that the production of play materials by parents at home for their preschool children impacted on the parental time and material investment. Play also had an effect on children in the services as it improved communication, fine-motor, and problem-solving skills on the children. Studies do show that mainstream approaches reveal lack of knowledge of appropriate practices and teaching strategies involving teacher-centred approaches that focus more on children's academic development than on other areas such as physical development (Mwaipopo et al., 2021). For example, in Zimbabwe lack of basic skills in ECCE syllabus interpretation has forced teachers to resort to formal teaching instead of the recommended child/play centred learning (Moyo et al., 2012). In the beginning most parents did not understand the role of play pedagogy, but involving them in material production and play pedagogy in the IHELP project improved their appreciation of the role of play in child development and well-being.

Livelihood projects and skills training

Another important scalable community facet of IHELP centres involve use of livelihood strategies and savings clubs. Usually, parents in marginalised and poor rural areas lack sustainable livelihood opportunities which worsen their vulnerability and the learning opportunities for their children. The IHELP provide parents with training on how to run the livelihood projects and savings clubs, give them start-up capital for their livelihood projects of choice together with training on how to run their own family projects. Kabue et al. (2022) in a study on ECD interventions among impoverished refugee communities showed that economic empowerment was important for impact among children in Kenya. The findings from this qualitative work generally indicated that important ECD gaps and needs include nutrition, economic empowerment, limited time for caregiving, and inadequate involvement of fathers in child caregiving. Justino et al. (2023) were able to show in Rwanda that economic empowerment through cash transfers had positive impact. Livelihood support clearly built resilience in families and communities in the IHELP project as the parents who were idle and hopeless were economically empowered while providing ECD services to their children.

Conclusion

Communities should invest more in the early learning of their children particularly in marginalised communities. Parents and communities are usually the basic teachers of their children. Nonetheless, mobilising and organising these communities need a lot of investment and innovativeness in terms of strategies and working with policy makers. These

innovations should have an eye of scaling at the beginning to ensure that what works cascades to similarly marginalised communities.

Evidence reveals that when father involvement, play pedagogies, economic empowerment and nutritional strengthening are included in community-based and community-owned early learning projects children, families and the communities do benefit. These centres can become centres for learning for all community members. Nonetheless, schools and school officials should be at the centre of these initiatives.

Policy Recommendations

1. Provide combined livelihood and nutritional support to the centres to improve the economic situation of the parents and nutritional situation of the children
2. Establish centres in the marginalised communities with the support of the policy makers and the existing centres and ensure that the centres are run by the parents elected management committees for community ownership
3. Deliberately strengthen involvement of fathers in the care of their children and the running of the centres in ways that possible and appropriate in the community to improve child, family and community welfare.
4. Involve parents in the production of play materials and play pedagogies using community customs while ensuring socio-emotional and physical stimulation of the children.
5. Make children with disabilities and their families central in the centres to deal with negative community perceptions on children with disabilities working with disability specialists in the schools and local education offices.

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References

- The African Child Policy Forum. (2011). *Educating children with disabilities in Africa: Towards a policy of inclusion*. The African Child Policy Forum. <https://www.eenet.org.uk/resources/docs/6519.pdf>
- Akkari, A. (2022). *Early childhood education in Africa: Between overambitious global objectives, the need to reflect local interests, and educational choices* (Vol. 52, pp. 7–19).
- Chandra, A., Mani, S., Dolphin, H., & Dyson, M. (2021). *Impact Evaluation of an Integrated Early Childhood Parenting Program in Sierra Leone*. <https://www.iza.org/>
- Clark, B. J., Holness, W. A., Nyamadzawo, R. T., & Moogi, D. (2024). *Implementing early childhood education for children with disabilities in South Africa and Kenya* (Vol. 13, p. 1326).
- Goldfeld, S., Villanueva, K., Tanton, R., Katz, I., Brinkman, S., & Giles-Corti, B. (2021). *Findings from the Kids in Communities Study (KiCS): A mixed methods study examining community-level influences on early childhood development* (Vol. 16, Issue 9, p. e256431).
- Grimes, P., Dela, A., Diana, C., Soliman, M., Lester, J., Kaisa, N., Sol, L., Sophia, C., Vocaes, I., Foster, R., Brigitte, C., Desiree, R., Cheona, B., & Guevarra, G. (2023). *Mapping of the progress towards disability inclusive education in Eastern and Southern African countries, good practices, and recommendations*. https://www.unicef.org/esa/media/12201/file/Full_Report_Mapping_of_Progress_towards_disability-inclusive_in_ESA.pdf
- Jeyam, A., Kadt, J. de, Muuo, S. W., Schmidt, E., & Okello, G. (2022). *Promoting inclusive early childhood development in Kenya: Baseline finding*. Sightsavers.
- Justino, P., Leone, M., Rolla, P., Abimpaye, M., Dusabe, C., Uwamahoro, M. D., & Germond, R. (2023). *Improving Parenting Practices for Early Child Development: Experimental Evidence from Rwanda* (Vol. 21, Issue 4, pp. 1510–1550).
- Kabue, M., Abubakar, A., & Ssewanyana, D. (2022). *A community engagement approach for an integrated early childhood development intervention: a case study of an urban informal settlement with Kenyans and embedded refugees* (Vol. 22, p. 711).
- Ministry of Primary and Secondary Education (Zimbabwe). (2018). *Primary and Secondary Education Statistics Report*. <https://www.globalpartnership.org/sites/default/files/2016-07-education-sector-strategic-plan.pdf>
- Mwaipopo, C., Maundeni, T., Seetso, G., & Jacques, G. (2021). *Challenges in the provision of early childhood care and education services in rural areas of Botswana* (Vol. 9, Issue 3, pp. 753–561).