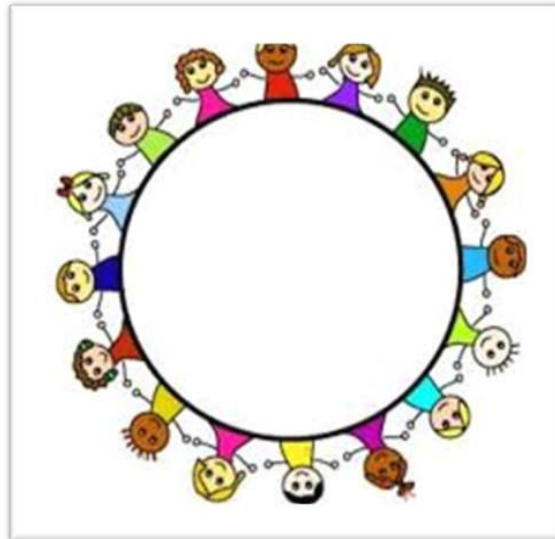


Final Report on
**End-line study of the project – Gender Transformative ‘Early
Childhood Development (GeTECD)**



Submitted To

Plan International



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We would like to express our sincere gratitude and appreciation to all those who contributed to the successful completion of the End-line study of the Gender Transformative 'Early Childhood Development (GeTECD) project.

In particular, we would like to extend our deepest thanks to the GeTECD project staff, Project Manager and Administrative staff of Plan International Bangladesh, for their hard work, dedication and professionalism. We also wish to thank the community people and Government officials who gave so generously of their time and energy to help us with this important study.

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With heartfelt gratitude and appreciation,

The End-line Study Team of GeTECD Project

Creative Pathways Bangladesh

EXECUTIVE SUMMARY

The End-line Study of the GeTECD Project, funded by DFAT and implemented by Plan International Bangladesh, aims to assess the effectiveness of the project in promoting gender-transformative parenting and challenging gender norms and son preference among parents and caregivers of children aged 0-8 years in the intervention areas, measure the progress towards achieving the long-term outcomes of the project, assess the efficiency with which inputs/means have been converted into activities and the quality of the results achieved, evaluate the impact of the project on the community leaders, members, and policy-makers perception of gender norms, assess the involvement of the relevant stakeholders associated with the project, and identify the factors that facilitated or hindered the project's results or objectives.

The GeTECD project has effectively implemented interventions for Early Childhood Development and gender transformation in order to spread awareness and support parents in providing adequate care and development for their young children. Through training and workshops for mothers and fathers, IEC materials and links with organizations, and the Amar Khela Ghor initiative, the project has achieved success in motivating parents to send their children to SBK centres and actively participate in the awareness campaign. The project has also ensured that the children receive the appropriate care and attention that they need to grow and thrive. The project has been successful in fostering gender equality by engaging religious leaders, encouraging shared parenting responsibilities, and providing support for children with disabilities. To ensure sustainability, the project must focus on creating a vested interest in gender equality and positive parenting which equips individuals with the skills and resources necessary to maintain behavioural change.

This survey conducted in both Barguna and Dhaka revealed that a majority of the parents of CWD and Non-CWD children were in the age range of 26-35 and had some form of primary schooling. In Barguna, the majority of households with CWD and Non-CWD children had only one child, while in Dhaka, the majority of households with CWD had one child while non-CWD households had two or three children. It was also suggested that CWD was more likely to be found in households with more children. Both areas had a similar distribution in the gender of the children, with a higher percentage of mothers reporting to have only girls compared to the fathers surveyed. In addition, it was revealed that in Barguna, a higher proportion of households only have one earner as compared to those in Dhaka.

The GeTECD intervention has enabled parents and caregivers (male and female) to better understand the importance of providing nurturing care and a healthy environment to promote Early Childhood Development (ECD). Through the Father's Cafe & Grandparents Cafe program, male family members

are more actively engaging in providing caregiving to newborns and young children. Survey data from Dhaka and Barguna found that over 50% of fathers are actively involved in taking care of both the nutrition and infant care needs of new mothers. The findings from the focus group discussions demonstrated that fathers and grandfathers are dedicating time and energy to support infant ECD and that there is a shift in traditional parenting roles towards a more equal balance of support between mothers and fathers.

The GeTECD project sought to promote gender-equal attitudes towards care work, childrearing, and household decision-making. Through focus group discussions, surveys and analysis, it was found that gender discrimination still persists in both Dhaka and Barguna, Bangladesh. Despite this, the optimistic results of the Baseline and Endline surveys showed a positive change in the perception of people when it comes to equal nutrition intake for boys and girls, and children's access to healthcare. Although the effects of the project are still in their early stages, it has already made substantial progress towards empowering women and shedding light on gender roles and gender stereotypes. Continued support and assistance for the project are important, as it is necessary to eliminate gender bias attitudes and ensure that everyone is provided with the same opportunities and respect.

Family members and gatekeepers, such as in-laws and grandparents, are influential in supporting women's agency, men's engagement in the care of their young children, and the equal treatment of girls and boys. This support is seen in a variety of forms, including male parents attending Grandparent Cafe meetings and training sessions to learn the importance of sharing responsibility at home, providing physical and emotional support during pregnancy, and challenging traditional gender roles in the home and within the community. Survey results show that husbands are helping mothers to arrange medical care for their children, contributing positively to a happy home environment. Although the situation has improved, a lack of education and traditional gender roles remain the primary barriers to men taking an active role in caring for their families.

The GetECD project provided facilitators with the knowledge and skills needed to provide quality, gender-transformative early learning opportunities for boys and girls. This includes creating physical environments that are equitable and inclusive, as well as providing training on addressing the different needs of each gender. Through the project's initiatives, the SBK centres have been able to benefit a total of 2400 children and their families, as well as the support of 550 youth volunteers. Parents also reported noticeable improvements in their children, such as newfound confidence to enter primary school. Despite some limitations with accommodating children with special needs, the project has successfully provided methods for children to acquire habits, norms and knowledge, and addressed their parents on the importance of early childhood development at home.

Local Education Authorities have shown support for creating child-friendly, gender-transformative early grades learning environments. This includes providing resources to teachers, parents, and the community to support smooth transitions from preschool to primary school. Findings from the project reflect positive attitudes towards gender-specific language and a lack of gender bias from teachers in the classroom. However, there is still a need for more resources to help disabled students and comprehensive gender sensitivity training for pre-primary schoolteachers to ensure an inclusive learning environment for all.

The GETECD project has worked to reduce negative parenting and childcare behaviours and practices by engaging with local communities, providing education and resources, and strengthening gender norms. Community-based initiatives such as religious leaders getting involved in activities promoting gender neutrality and early childhood development have been successful in changing the community's outlook and attitude towards gender roles. Surveys also indicate that an overwhelming majority of people in the communities of Barguna and Dhaka are supportive of a man taking an active role in housework and childcare. This shift in attitude suggests that the idea of men being active participants in childcare and keeping the home is becoming more widely accepted and could help to level the playing field and provide both partners with an equal sense of responsibility.

The project is suggested to be sustained for at least five more years while expanding the project's scope and striving to prevent gender stereotypes in the play materials used. Preschool teachers should also be trained in topics relating to child psychology, nutrition, moral education, first aid, and other engaging modules. Local govt should be further empowered and SBK facilitators should be given incentives to perform their roles. Practices should be documented and shared, while dialogues should be opened with intergenerational audiences. Finally, mental health support, wheelchair access and gender-neutral behaviour should be implemented.

The GeTECD project offers holistic approaches to supporting children's development and well-being, with the help of programmes such as early learning opportunities, stimulating environments, age-appropriate activities, and parenting workshops and training. It works to empower families with knowledge and tools, engaging with the wider community and raising awareness for children's needs. The project has seen positive impacts and benefits, such as improved educational achievement, increased parental involvement, equal opportunities and responsibilities within families and improved overall health and well-being. Ultimately, the aim is to provide a strong foundation for future success.

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ABBREVIATIONS/ACRONYMS

ANC	Ante-Natal Care
CMC	Community Management Committee
CwD	Children with Disability/ies
ECD	Early Childhood Development
FGD	Focus Group Discussion
GeTECD	Gender Transformative Early Childhood Development
IDI	In-Depth Interview
KII	Key Informant Interview
P/C	Parents with child/ren
PIB	Plan International Bangladesh
PNC	Post Natal Care
PwD	Person with Disability/ies
SBK	Shishu Bikash Kendro
SMC	School Management Committee

ENDLINE AT A GLANCE

Result level	Indicator	End line Value
<p>Intermediate Outcome 1.1</p> <p>Parents and caregivers (male and female) have strengthened their understanding of ECD and improved their confidence and skills to provide the nurturing care young children need to develop</p>	<p>1.1.1 % of people (parents & caregivers) who demonstrate an understanding of the key developmental milestones of young children.</p>	<p>89% of people (parents & caregivers) demonstrated an understanding of the key developmental milestones of young children.</p>
	<p>1.1.2 % of targeted parenting program participants (parents & caregivers) who can describe key nurturing care practices for young children's survival, healthy growth, and development</p>	<p>80% of targeted parenting program participants (parents & caregivers) can describe key nurturing care practices for young children's survival, healthy growth, and development</p>
	<p>1.1.3 % of people (parents & caregivers) who have at least a moderate level of confidence in their role as parent/caregiver</p>	<p>51% of people (parents & caregivers) who have at least a moderate level of confidence in their role as parent/caregiver</p>
<p>Intermediate Outcome 1.2</p> <p>Parents and caregivers and other family members value girls and boys equally, have appropriate, equal expectations and aspirations for young children, irrespective of their gender and ability, and have gender equal attitudes about men's and</p>	<p>1.2.1 % of people (parents/caregivers) who express son preference</p>	<p>56.35% of people (parents/caregivers) express son preference.</p>
	<p>1.2.2 % of people (parents/caregivers) who have different expectations for young girls versus boys, that are based on gender stereotypes</p>	<p>26.52% of people (parents/caregivers) have different expectations for young girls versus boys, that are based on gender stereotypes.</p>
	<p>1.2.3 % of people (parents/caregivers/ grandparents/other influential family members) who believe that men are able to be nurturing caregivers to young children</p>	<p>71.27%% of people believe that men can be nurturing caregivers to young children</p>

women's roles and responsibilities for care work, childrearing and household decision-making.	1.2.4 % of people (parents/caregivers/ grandparents/other influential family members) who believe that men and women should share responsibilities for household decision-making	47.51% of people (parents/caregivers/ grandparents/other influential family members) believe that men and women should share responsibilities for household decision-making.
Intermediate Outcome 1.3 Influential family members and gatekeepers (in particular in-laws and grandparents) support women's agency, men's engagement in the care of their young children, and the equal treatment of girls and boys.	1.3.1 % of men who feel supported and encouraged by family members and community to engage in care-work, childrearing, and maternal health/wellbeing.	88.12% of men feel supported and encouraged by family members and the community to engage in care work, childrearing, and maternal health/wellbeing.
	1.3.2 % of women reporting moderate or high levels of support from family members for their access to and utilization of maternal health services	100% of women reported moderate or high levels of support from family members for their access to and utilization of maternal health services.
Intermediate Outcome 2.1 ECD facilitators have improved confidence and skills to provide quality, gender-transformative early learning opportunities for girls and boys.	2.1.1 % of ECD facilitators who are observed to provide quality, child-centred opportunities for play and learning.	85.64% of ECD facilitators observed to provide quality, child-centred opportunities for play and learning.
	2.1.2 % of ECD facilitators who are observed to provide gender-responsive opportunities for play and learning.	67.83% of ECD facilitators were observed to provide gender-responsive opportunities for play and learning.
Intermediate Outcome 2.2 Local education authorities are willing and able to create child-friendly, gender-transformative early grades learning environments that support	2.2.1 % of local administrative units (education and school authorities) have implemented interventions for primary school readiness over the last year	95.03% of local administrative units (education and school authorities) have implemented interventions for primary school readiness over the last year.
	2.2.2 % of local education institutions meets minimum quality standards and is gender-responsive, inclusive and disaster resilient	80.94% of local education institutions meet minimum quality standards and are gender-responsive, inclusive and disaster resilient

children's smooth transition from SBK to primary school.		
Intermediate Outcome 3.1: Community members promote changes in gender norms that influence negative parenting and childcare behaviours and practices	3.1.1 % of influential community leaders who support/promote positive changes in key behaviours and practices for children's healthy growth and development	93.09% of influential community leaders support/promote positive changes in key behaviours and practices for children's healthy growth and development.
	3.1.2 % of influential community leaders who support/promote men's engagement in care work, childrearing, shared household decision-making and maternal health/wellbeing	74.86% of influential community leaders support/promote men's engagement in care work, childrearing, shared household decision-making and maternal health/wellbeing.

1. Introduction

1.1 Background

Early childhood is the most critical Development period in a child's life. Parents/ caregivers are the most critical actors in children's lives from before a child is born. Young children's development and happiness depend on the nurturing care they are provided by mothers, fathers or other caregivers. During these first years, parents/caregivers begin treating girls and boys differently based on their ideas about the value, potential and expected behaviours of each gender. In addition, in low-income communities where son preference exists, families may opt to provide girls with poorer quality care than boys.

Plan's ECD programme aims to ensure that young girls and boys equally receive the care and support they need to thrive, free from limiting gender norms. Gender-Transformative parenting has been identified as the priority for delivering on this ambition, including promoting male engagement in parenting and early childhood development. We need to learn how to integrate reflection on gender norms and socialization into existing parenting programmes in ways that are effective and make sense for parents, other caregivers and parenting group facilitators (many of whom are community members themselves).

Under ECD programme of Plan, the GeTECD project has been implemented in Barguna Sadar in Barguna district and Urban slums in Dhaka city. The project is implemented effectively with parents, other caregivers, and parenting group facilitators to sensitively challenge gender norms and son preference so that we can ensure that children aged between 0-8 years have equal opportunities to thrive and develop free from gendered expectations that are limiting and discriminatory. It is a four-year project funded by DFAT and the Australia National Office of Plan is supporting it by providing technical assistance and coordination with the donor. This is an innovative project because this is an aspect of work that few other organizations in the sector are approaching and that affords a thought leadership opportunity, and this is an area that has also not been explored very much in research yet.

Key target Beneficiaries of the project are Children aged 0-8 years (7,000), parents of the children (5,000), Community leaders and policymakers.

1.2 Objectives of the End-line Study

As per ToR, the specific objectives of the GeTECD Project were as follows:

- i. To justify the relevance of the project in the targeted area including project design to project monitoring, implementation & phase out, justify the beneficiary selection appropriateness, projects respond to the needs and priorities of the target project participants, justify the cost-effectiveness of the project activities, etc.
- ii. To assess the effectiveness of the GeTECD project in promoting gender-transformative parenting and challenging gender norms and son preference among parents and caregivers of children aged 0-8 years in the intervention areas.
- iii. To measure the progress towards achieving the long-term outcomes of the project.
- iv. To assess the efficiency with which inputs/means have been converted into activities and the quality of the results achieved.
- v. To evaluate the impact of the GeTECD project on the community leaders, members, and policy-maker's perception of gender norms and its influence on negative parenting and childcare behaviours and practices.
- vi. To assess the involvement of the relevant stakeholders associated with the project.
- vii. To assess the sustainability of project results, impact, and approach at a different level
- viii. To identify the factors that facilitated or hindered the project's results or objectives.
- ix. To identify and document lessons learned, and make appropriate recommendations of general and specific nature for any adjustment and improvement for future project/s

- x. To compare the baseline findings with the end line and measure the project's improvement in comparison with its indicators.

1.3 Study Area

The Gender Transformative Early Childhood Development (GeTECD) Project was implemented in Dhaka's urban slums and five unions of Barguna district under the Barishal division which represents the urban and rural settings.

Urban Slums in Dhaka City	Name of Slum	Rationale for selection
	<ul style="list-style-type: none"> ❖ City Pally Slum- Dhalpur ❖ Mironzolla Slum (Sweeper Colony) (Old Dhaka City) ❖ Rabidspara Slum ❖ Zurain slum- Rale Gate ❖ IG Gate slum- Gendaria ❖ Dhaka Match Colony (Shyampur) 	<ul style="list-style-type: none"> ▪ Dhaka City is the most densely populated urban area. ▪ One-third of the population lives in slums. ▪ Young children in urban slums are not getting adequate ECD services. ▪ Parents are not aware of nurturing care for their girls and sons. ▪ Son preference is very high in urban areas. ▪ Children are very vulnerable and at risk of protection issues. ▪ The prevalence of disability is high. ▪ Sponsored children and their families will be targeted.
Barguna Sadar Unions	Name of the Unions (5 Unions)	Rationale for selection
	<ul style="list-style-type: none"> ❖ Burirchar ❖ Dhalua ❖ Gowrichanna ❖ Aylapatakata ❖ Bodorkhali 	<ul style="list-style-type: none"> ▪ Barguna is a coastal area in the southern part of Bangladesh. ▪ The most disaster-prone area. ▪ This is one of the most marginalized areas of Bangladesh. ▪ Stereotype gender norms are being practised by the people of this area. ▪ The prevalence of physical violence against women in the Barisal division among ever married is 44.6% (BBS Report on Violence against woman survey 2015) which is quite high. ▪ Child labour and child marriage are common practices. ▪ Sponsored children and their families will be targeted. ▪ Plan International Bangladesh has worked in the Barguna district for many years.

		<ul style="list-style-type: none"> The prevalence of disability is very high compared to the national average. (Population survey, BBS, 2011)
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1.4 Limitations of the Study

- i. Due to busy work schedules, the government representatives & some other interview participants could not be able to give adequate time for the interview.
- ii. The key participants of this study (fathers of the children) were mostly busy while the study team visited their houses. So, there might be some biased responses from them so that they could finish the interview quickly.
- iii. The researcher's presence may have influenced the participants' behaviour, leading to observer bias and affecting the accuracy of the data collected.
- iv. Participants may have provided answers that they believe are socially desirable rather than truthful, which can skew the data.
- v.
- vi. The methods used to collect the data collection phase may be limited by factors such as time constraints and resource limitations, which can affect the quality and quantity of data collected.
- vii.

2. Methodology

The end-line evaluation study adopted a mixed methodology approach using both qualitative and quantitative tools and methods. The methods and instruments used for data collection and analysis were finalised in consultation with the Plan International Bangladesh (PIB) management team.

2.1 Quantitative Methodology

Initial Sample size

Initial Sample Size:

$$n_0 = \frac{Z_{95\%}^2 \times p(1-p)}{e^2} = \frac{1.96^2 \times 0.5(1-0.5)}{(0.05)^2} = 384.16 \approx 384$$

Where,

n_0	=	Sample size	477
$Z_{95\%}$	=	Z value for 95% confidence interval	1.96
p	=	The proportion of the population	0.5
e	=	The degree of precision (Margin of error 5%)	0.05

Adjusted Sample Size: According to the ToR, the target beneficiaries are the 'parents of the children', N=5000.

$$n = \frac{n_0}{1 + \frac{n_0 - 1}{N}} = \frac{n_0}{N + n_0 - 1} = \frac{5000 \times 384}{5000 + 384 - 1} = 356.68 \approx 356$$

The planned sample size was 356 But the Creative Pathways Bangladesh study team collected a sample of **362** for quantitative analysis. The sample distribution is given below in a graphical format:

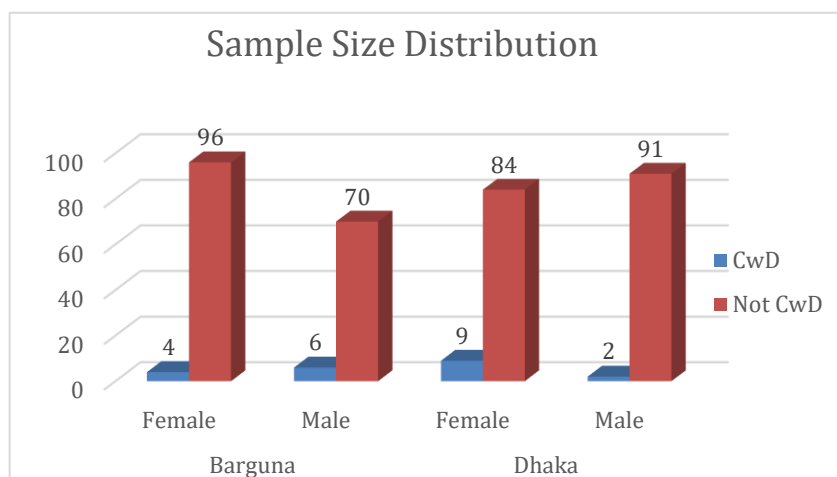


Figure 1: Sample distribution (quantitative data)

In Barguna, 4% of female respondents & 7.89% of male respondents are parents of children with disabilities (CwD) & in Dhaka, 9.68% of female & 2.15% of male respondents are parents of CwD. Also, all the respondents have children aged between 0-8 years old.

2.2 Qualitative Methodology

The study team applied a holistic approach in capturing the information from different types of study participants. The qualitative sample frame allowed us to observe the views and involvement of different stakeholders in the project. We followed the tools of Key Informant Interviews (KII) and In-depth Interviews (IDI) and FGDs to collect qualitative data. However, the final sample size for qualitative data collection is presented below:

FGD	KII	IDI
<ul style="list-style-type: none"> i. Mixed Parents group (2) ii. Grandparents Group iii. Youth Group (Female) iv. Youth Group (Male) v. Fathers Group vi. Parents of CwD (Father & mother) 	<ul style="list-style-type: none"> i. Youth moderator ii. Teacher iii. URC iv. Religious leader v. SBK facilitator (2) vi. SMC member vii. Community leader viii. CMC ix. CwD Father 	Project Staff
Total- 7	Total-10	Total-1

2.3 Data Triangulation

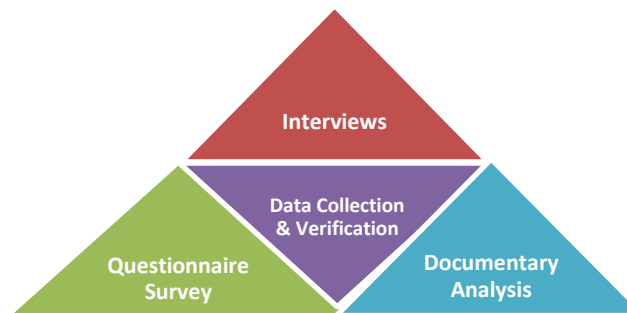


Figure 2: Data Triangulation

The literature review of relevant project documents and other papers helps to develop the questions for tools. Multiple sources were used to contrast and compare data to establish supporting and/or contradictory information. The reliability and accuracy of data management were ensured through the triangulation (use of) different sources and/or methods in its collection and analysis. Strict quality control was maintained for quantitative data, from field entry of data in KOBO to analysis. Quantitative data were randomly verified by research assistants/associates in the field. The research team analysed quantitative data daily to get the essence of the nature of the data. It helps the team to collect specific qualitative nature of the data during conducting qualitative tools. After completion of the data collection stage, the team triangulated with qualitative and quantitative data and cross-check with project performance data.

3. Findings

3.1 Socio-demographic Findings at a Glance

a) Age Group

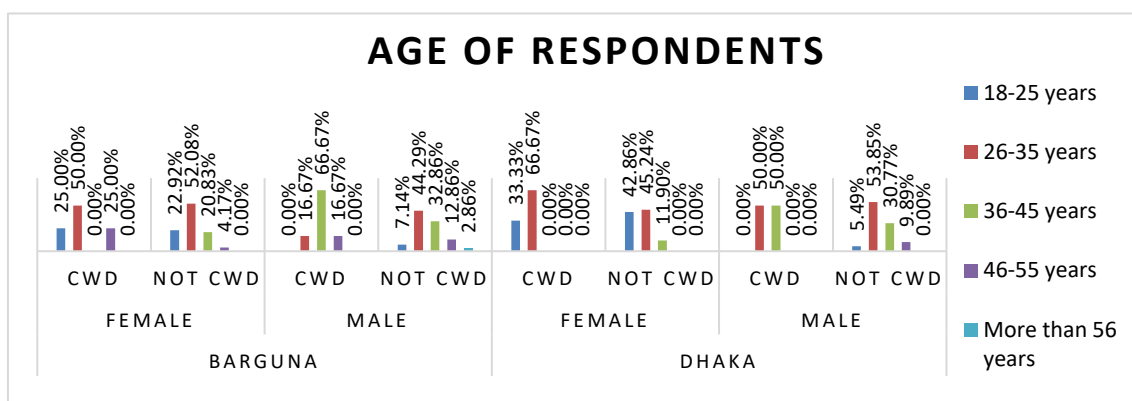


Figure 3: Age of the survey respondents

Based on the survey conducted in Barguna, the most populated age group for female parents of CWD children was from 26-35 years old at 50%, with around 25% of female parents coming from the 18-25 years old age range. In contrast, the most populated age group for female parents of non-CWD children was from 26-35 years old at 52%, with the majority of male parents from the 35-45 years old age range at nearly 68%. There were no children or parents surveyed that were above the age of 56. Overall, these results suggest that the majority of the surveyed parents were in their mid to late thirties or below.

The age of the parent participants of the CWD and non-CWD children in Dhaka is largely varied. Among the female parents, the majority (66%) are from the age range of 26-35 years old; around 34% are from 18-25 years old. For the Non-CWD female parents, the majority (45%) are also from the age range of 26-35; however, there were no participants above 56 years of age. On the other hand, when looking at the male parents, 50% of the male parent are from the age range of 36-45 and another 50% from the 26-35 range. For the Non-CWD male parents, the majority (54%) are from 26-35 years old and 31% are from 36-45 years.

Among the female respondents In Barguna, the most common family size among households with

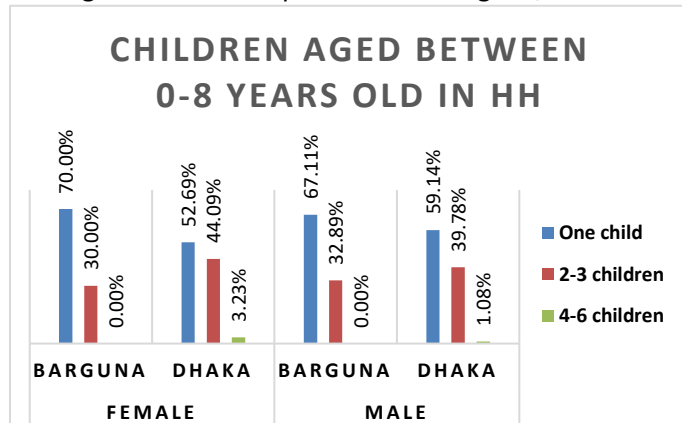


Figure 4: Age of the respondent children

children is small. An overwhelming majority—70%—have only one child. The remaining 30% of households have two or three children. Among the male respondents, 67% of households have just one child, with 32% having two or three children. In Dhaka, the family demographic is slightly different. Slightly more female respondents have one child—52%—and 59% of male respondents have one child. However, a larger proportion of households in Dhaka

have two to three children which is 44%, shared by the female respondent. Among the male respondent, the rate is 40%.

b) Education Level

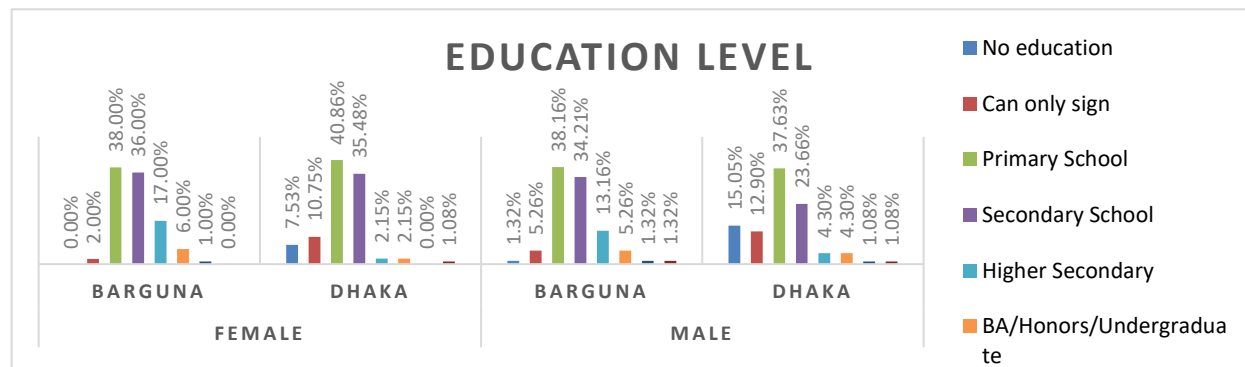


Figure 5: Education level of respondents

The education landscape among the respondents is presented above. It is interesting to note that the overall educational level among the surveyed female respondents is the same in both places; nearly 40% had primary schooling, and around 35% had some secondary school education. Among the male respondents, the educational landscape of Barguna followed the same distribution as the females, with 40% having some form of primary schooling. However, in Dhaka, 24% of male respondents had only secondary school education, which is comparatively lower.

c) Number of Children in the HH

The female respondents in Barguna who have a CWD typically have 1 child or 2-3 children with the majority (75%) having 1 child. On the other hand, the mothers who do not have a CWD typically have either 1 child (70%) or 2-3 children (30%). This indicates that those who have a CWD are slightly more

likely to have multiple children (2-3) compared to those who do not have a CWD. Among the male respondents from Barguna, those who have CWD had, on average, more children than those who did not have CWD. Specifically, 83% of those with CWD had 1 child, while 66% of those without CWD had 1 child. 16% of those with CWD had 2-3 children, whereas 34% of those without CWD had 2-3 children. This indicates that those with CWD had a greater propensity to have multiple children than those without CWD.

In Dhaka, 44% of respondents who have CWD have 1 child, while the remaining 56% of mothers have between 2 and 3 children. On the other hand, among those who do not possess CWD, 54% of mothers have only 1 child, while 44% reportedly have between 2 and 3 children. These statistics indicate that there exists a correlation between CWD and the number of children, with more CWD-possessing

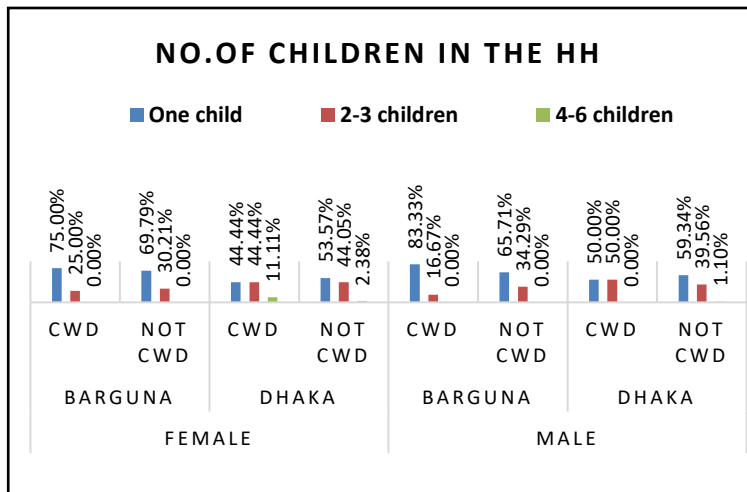


Figure 6: No. of children in the HH

mothers tending to have fewer children. In Dhaka, among the male respondents who are living with Chronic Wastewater Disease (CWD), 50% of them have one child while the remaining 50% have two to three children. On the other hand, among those who do not have CWD, 59% of them have one child and 40% of them have two to three children. This shows that the prevalence of CWD is linked to a greater number of children in the family, which might potentially be an indicator of family economic conditions.

d) Gender of the Children

In Barguna, mothers reported that 23% of households have both boys and girls, 41% have only boys, and 35% have only girls. Fathers reported that 21% of households have boys and girls, 34% have only boys, and 43% have only girls. This suggests that more single-gender households are led by fathers than mothers. Similarly, the majority of households headed by fathers are single-gender households, while almost half of the households headed by mothers have both boys and girls.

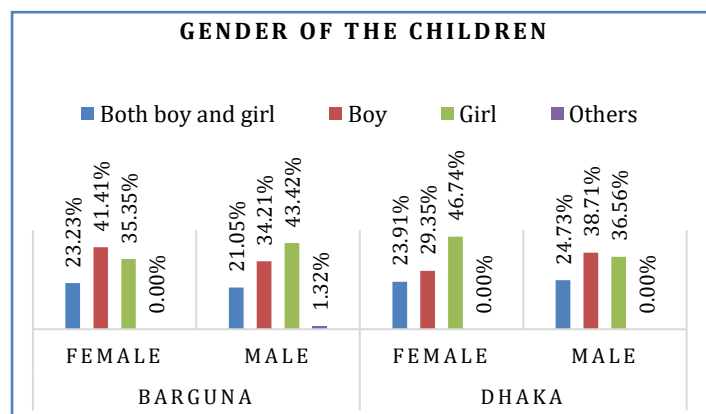


Figure 7: Gender of the children of respondents

Of the mothers surveyed in Dhaka, 24% reported having both boys and girls, while 29% reported having only boys and 47% reported having only girls. Among fathers also surveyed in Dhaka, 25% reported having both boys and girls, 39% reported having only boys and 37% reported having only girls. This indicates a slight difference in the gender representation among the surveyed families, with a higher percentage of mothers reporting to have only girls compared to the fathers surveyed.

e) No. Of earning members in the HH of Respondents

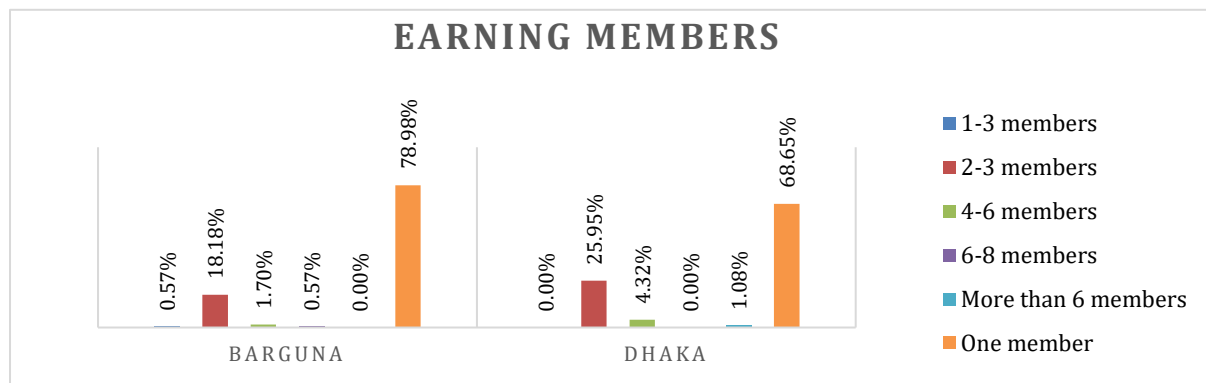


Figure 8: No. of earning members.

In Barguna, the majority of the surveyed households have only a single earner, at a rate of 79%. A considerably smaller percentage of households in the area (18%) comprised two or three earners. Meanwhile, the figures are slightly different for households in Dhaka, where 69% were reported to have a single earner and 26% were revealed to have two or three earners. In other words, in Barguna a higher proportion of households only have one earner as compared to those in Dhaka.

Education levels in the surveyed population were relatively low, with 38.67% having only received primary education and a mere 0.83% having completed their graduation-level qualifications. With an overwhelming 73.68% of households consisting of one wage earner, the responsibility to provide for the family largely rests on the male respondents. In rural areas, 35% of the males are employed in the agricultural sector, while approximately 20% and 16% of males working in urban areas take up cleaning and driver or day labour roles respectively. This highlights the considerable financial pressure the male respondents face in order to ensure their households are supported and their needs met.

3.2 Indicator-wise findings

i. Parents and caregivers (male and female) have strengthened their understanding of ECD and improved their confidence and skills to provide the nurturing care young children need to develop.

During the Focus Group Discussions (FGD) among mixed parents, the majority of them spoke of their newfound understanding of Early Childhood Development (ECD) thanks to the GeTECD intervention. Through this intervention, they have come to understand the importance of providing their children with nurturing care and a healthy environment in order to support their physical and mental growth. Parents shared that the intervention has allowed them to become more engaged in the development of their children, and they plan to continue to follow the guidance provided to maintain the healthy development of their children.

Training sessions are carried out to help mothers and families become aware of the importance of properly caring for their babies during infancy in order to ensure proper Early Child Development (ECD). As per baseline data, research suggests that wives/mothers appeared to take on substantial responsibility for their own nutrition following childbirth in both Dhaka and Barguna, with 67% of mothers in both areas doing so. Husbands in Dhaka (31%) and Barguna (38%) follow, with the mother and mother-in-law of the mother also taking on some of the responsibility. Endline data will measure the degree of how which this knowledge was actively put into practice and assimilated by these mothers and families following the training sessions.

Take care of Mother Nutrition & Infant care: Having a supportive partner during the post-natal period is essential for the health and well-being of a mother and her newborn infant. The survey data

from Dhaka and Barguna found that over 50% of fathers are actively involved in taking care of both the nutrition and infant care needs of new mothers. This is an achievement in the intermediate outcome, as it demonstrates that fathers go beyond traditional expectations and actively engage in the nurturing of their loved ones. Furthermore, the data also showed that fathers are not the only ones providing support during the post-natal period. Other male members of the family, such as uncles, brothers, and grandfathers, are playing an active role in helping new mothers with infant care. The combination of fathers, uncles, brothers, and grandfathers demonstrates the strong sense of community and commitment to the health and wellbeing of new mothers and their newborn infants in Bangladesh.

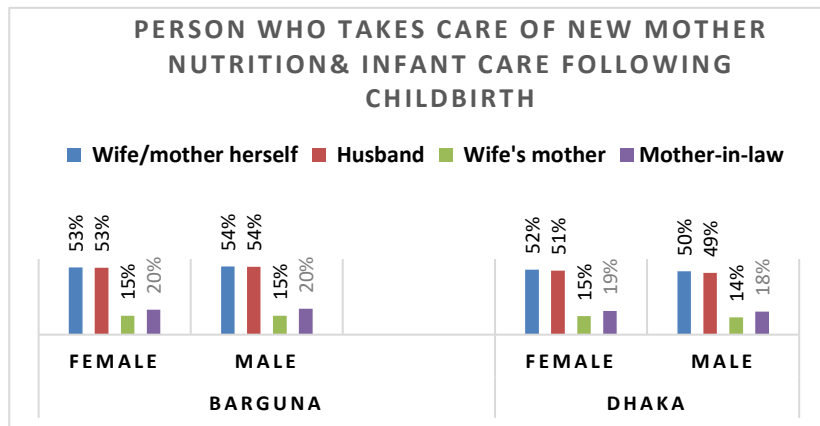


Figure 9: Person who takes care of new mother & infants after childbirth.

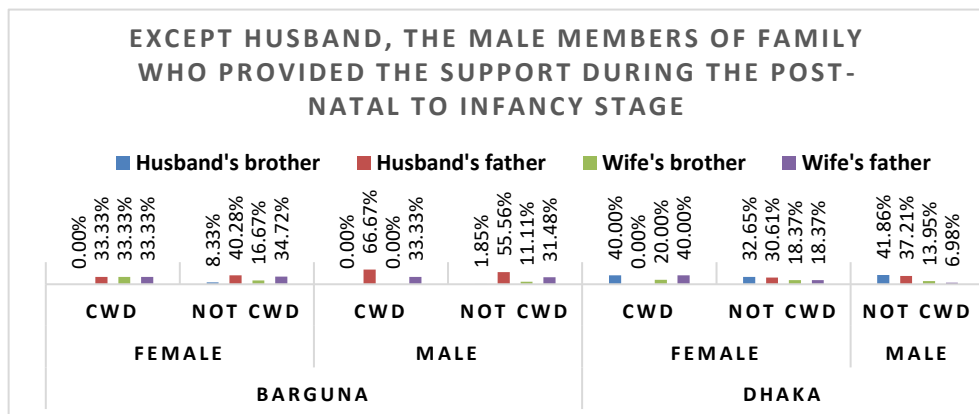


Figure 10: male members of the family apart from child's father provided the support

It appears that both male and female parents with a child with a disability (CwD) turn to their respective fathers during the prenatal to infancy period for support.

Specifically, around 37.50% of female CwD parents stated that their child's maternal grandfather supported them during this period, while 66.67% of male CwD parents said their child's paternal grandfather provided assistance. Surprisingly, the highest percentage of both male and female parents without CwD also looked to the child's paternal grandfather for help during this time. This data points to an interesting dynamic between both sets of parents and their respective fathers when it comes to caring for a child with a disability. It is possible that there is a strong programme intervention to bring these changes.

Activities related to nurturing care of the infant & toddlers are given below:

Activities	Baseline		End line	
	Primary	Secondary	Primary	Secondary
Takes care of infant's hygiene (changing nappy, bathing etc.)	Mothers (Wives) 71% in Dhaka, 82% in Barguna	a) Fathers (Husband), 31% in Dhaka, 38% in Barguna b) Wife's mother, Dhaka (23%) Husband's mother, Barguna (25%)	Mothers (Wives) 80% in Dhaka, 83% in Barguna	a) Fathers (Husband), 11% in Dhaka, 42% in Barguna b) Wife's mother, Dhaka (11%) Wife's mother, Barguna (40%)

Takes care of infant's feeding (other than breastfeeding)	Mothers (Wives) 85% in Dhaka 93% in Barguna	a) Fathers (Husband), 34% in Dhaka ,37% in Barguna b) Wife's mother, Dhaka (19%) Husband's mother, Barguna (26%)	Mothers (Wives) 91% in Dhaka 89.07% in Barguna	a) Fathers (Husband), 55.91% in Dhaka 65.59% in Barguna b) Wife's mother, Dhaka (16.13%) Husband's mother, Barguna (10%)
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Nurturing care of the infant & toddlers:

The activities observed in both the baseline and end-line surveys are related to the care of infants. In terms of taking care of the infant's hygiene, the primary caregivers in both Dhaka and Barguna were primarily the mothers (wives). In Dhaka, 71% of mothers were responsible for taking care of the infant's hygiene, while in Barguna, this number was slightly higher at 82%.

When it comes to secondary caregivers, the fathers (husbands) were responsible for this task in both locations, but their involvement varied. In Dhaka, only 31% of fathers took care of the infant's hygiene, while in Barguna, this number was higher at 38%. Additionally, in Dhaka, a significant proportion (23%) of wives relied on their own mothers for help with infant hygiene, whereas in Barguna, a higher percentage (25%) depended on their husband's mothers.

In terms of taking care of the infant's feeding, the primary caregiver in both locations was again the mother (wife). In Dhaka, 85% of mothers were responsible for infant feeding, while in Barguna, this number was even higher at 93%. Among secondary caregivers, fathers (husbands) were again involved, but their participation varied. In Dhaka, 34% of fathers took care of infant feeding, while in Barguna, this number was slightly higher at 37%. Similar to caregiving for hygiene, in Dhaka, a significant proportion (19%) of wives relied on their own mothers for help with infant feeding, while in Barguna, a higher percentage (26%) depended on their husband's mothers.

Looking at the end-line data, there have been some improvements in both locations in terms of primary caregivers taking care of infant hygiene and feeding. In Dhaka, the percentage of mothers taking care of infant hygiene increased to 80%, while in Barguna, it remained relatively stable at 83%. Similarly, the percentage of mothers taking care of infant feeding increased in both locations, with 91% in Dhaka and 89.07% in Barguna.

Among the secondary caregivers, the involvement of fathers increased in both locations. In Dhaka, the percentage of fathers taking care of infant hygiene increased to 11%, while in Barguna, it increased significantly to 42%. However, the reliance on wives' mothers for assistance decreased in both locations, with 11% in Dhaka and 40% in Barguna. The involvement of husband's mothers in Barguna remained at 25%.

Overall, the data suggests that there has been an increase in fathers' involvement in both hygiene and feeding tasks, while the reliance on wives' mothers for assistance has decreased. This indicates a positive shift towards shared caregiving responsibilities within the family.

Father's Cafe & Grandparents Club:

According to the findings from the FGDs, the Father's Cafe & Grandparents Cafe program has had a positive impact on the female parents of the community. Through these programs, not only has the role of fathers and grandparents been elevated in taking part in caregiving for newborns and young children, but this influence has extended to other male members of the family as well. They are now equipped and willing to become caregivers in the absence of the mother or if the mother is preoccupied with other tasks. With this, the female parents expressed gratitude for the program and that it has reinforced the traditional family roles for both men and women.

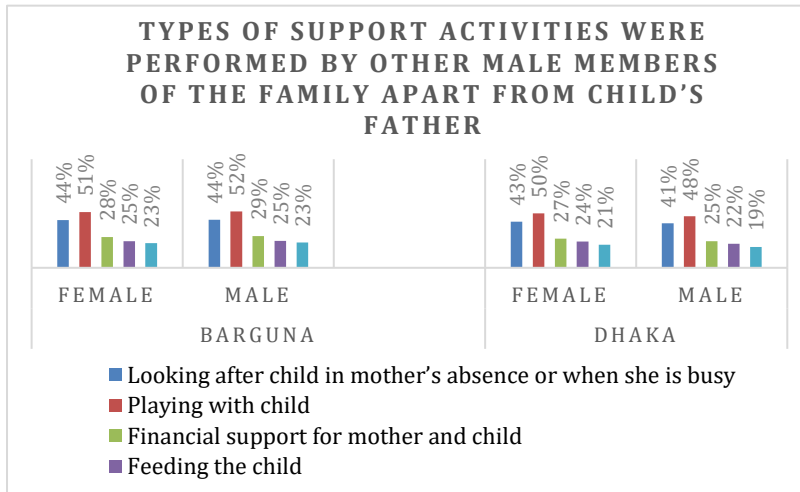


Figure 11: Types of support activities performed by other male members of the family apart from child's father.

More than half of the respondents in the survey had expressed that male family members in likes of the child's grandfather had dedicated their time and energy towards the infant's Early Childhood Development (ECD). This was done in a myriad of ways, such as helping to feed the child, playing with them, and even providing financial aid to both the mother and child if necessary. In addition, during the focus group discussion, one grandparent mentioned how,

by helping the son's wife, he would be taken care of in his own old age. Furthermore, this whole process of participating in their grandchild's ECD served to break the pre-existing belief of only the mother being solely responsible for the child, with the involvement of male family members providing a welcomed change. This was further reinforced by their newfound purpose, as they expressed feeling feelings of being useful, and no longer consumed by the boredom and loneliness within their own households.

Upon attending the FGDs with the parents of children with disabilities (CwD), the father of CwD expressed how his beliefs about child rearing had changed. Before the meeting, he had the traditional belief that women are solely responsible for taking care of children while males merely provided financial support. Now he understands how the bond between parent and child is strengthened through spending nurturing them while like feeding and expressed that they care of their children the SBK Center should

"Smile on daughter-in-law's face,
happiness on grandson's face"-
Grandparent from Barguna

all kinds of children with special needs. This way, every child can get to utilize the facilities and activities available at the SBK Center to facilitate their physical and mental growth. This also creates an inclusive and safe environment for them, providing a much-needed sense of comfort for the parents as well.

Based on the findings during the focus group discussion, it is evident that they believe the characteristics of a successful parent involve taking care of the children (feeding, bathing, keeping while the mother is cooking), helping with tasks, keeping the household clean, feeding the family, and fulfilling the needs of the family. Moreover, male members today have seen an increase in fathers getting involved with household chores such as caring for infants and other children, which is a result of the awareness sessions conducted by the GeTECD. This suggests that men have been actively taking on more of the roles to support the family, balancing the traditional parenting roles between mothers and fathers. Furthermore, it is generally agreed upon among caregivers that both mothers and fathers must work in harmony together to ensure successful parenting practices. This shift in traditional parenting is a reflection of the growing acceptance of gender equality within the family unit.

Abstract of the indicator i:

- The GeTECD intervention has helped parents understand the importance of Early Childhood Development (ECD) and engage more in the development of their children.
- Fathers and other male family members are actively involved in supporting new mothers and their infants during the post-natal period.
- Parents, both with and without children with disabilities (CwD), turn to their respective fathers for support during the prenatal to infancy period.
- The primary caregivers for infant hygiene and feeding are mothers, but fathers and grandmothers also play a significant role.
- The Father's Cafe & Grandparents Club programs have elevated the role of fathers and grandparents in caregiving and strengthened traditional family roles.
- Male family members, such as grandfathers, have dedicated their time and energy to the ECD of infants.
- The involvement of male family members in childcare has broken traditional beliefs of only mothers being responsible.
- The GeTECD intervention has changed the beliefs of some fathers regarding child rearing and the importance of spending quality time with children.
- The characteristics of a successful parent include taking care of children, helping with tasks, maintaining a clean household, and fulfilling family needs.
- There is a growing acceptance of gender equality within the family unit, with fathers taking on more traditional parenting roles.

“Before, I used to feel disinterested in doing HH works & willingly ignored taking care of the child but after attending Parenting meeting, I tried to help my wife whenever I can & also learnt how to take of the infant.”- *Father's Café Beneficiary*

ii. Parents and caregivers and other family members value girls and boys equally, have appropriate, equal expectations and aspirations for young children, irrespective of their gender and ability, and have gender-equal attitudes about men's and women's roles and responsibilities for care work, childrearing, and household decision-making.

Parents and caregivers have a responsibility to provide a nurturing and equal home environment for their children, regardless of gender or individual talents and interests. Both boys and girls should be granted the same opportunities and expectations when it comes to education and extracurricular activities and are encouraged to explore the full range of activities, interests, and careers available to them. It is also highly important that all parents and caregivers have a gender-equal attitude and understanding of the roles and responsibilities that men and women each have in regard to care work, child-rearing, and household decision-making. By recognizing that both genders have an equal share of both responsibility and significance, the family will be able to foster an inclusive and equitable environment and allow their children to grow into individuals who are free of preconceived judgement or societal norms. The GeTECD project identified this important outcome in the project.

During the focus group discussion (FGD), the parents of children with disabilities were asked to express their concerns about the most challenging aspect of giving care to such children. In response, they commonly highlighted the difficulties in caring for young girls and women with disabilities. They discussed how entering into adolescence increases the risk of facing sexual violence which made them more fearful of leaving these young girls alone for any period of time. It was noted that mothers take a large responsibility in caring for both young boys and girls with disabilities, making sure to treat their children equitably and without discrimination. As taking care for these vulnerable populations can be quite difficult, they emphasised the need for further support in terms of education and resources in order to make parenting easier and keep their children safe and healthy.

The results of a survey conducted in Dhaka and Barguna revealed that gender discrimination is still prevalent among respondents in both cities. In Dhaka, 53.41% of respondents indicated that a family is not considered complete without a male child, while the percentage increased to 59.14% in

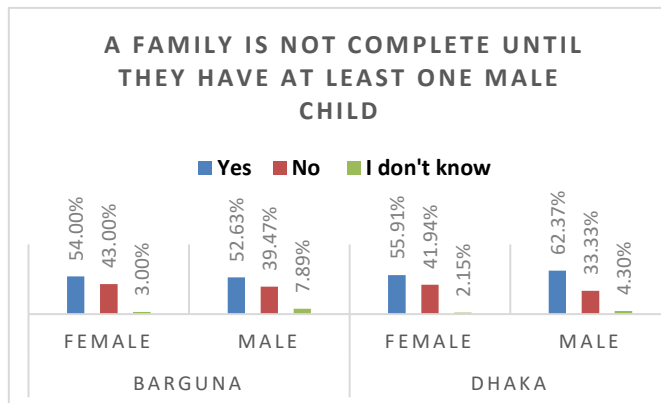


Figure 12: Survey question to find out 'gender discrimination' situation.

Barguna. This data indicates that this form of gender discrimination still persists even in this day and age, with a majority of respondents believing that a male child is essential for a family. This fundamentally undermines the importance and legitimacy of female children, and the GeTECD project addressed this issue in order to ensure that both genders are treated equally and without prejudice. 'Gender concepts have changed a lot since before, but there are still some prejudices. Some have not taken these changes well and many have taken them well.'- Youth Club Moderator

In the Barguna district, approximately 40% of parents with children respondents believe that important decisions in the family should be made by men, while 58% of respondents who have a child with a disability hold the same view. This means that the majority of respondents in Barguna reinforce the idea that men are responsible for making decisions in the household, rather than giving equal representation to all genders. The End line situation is given below:

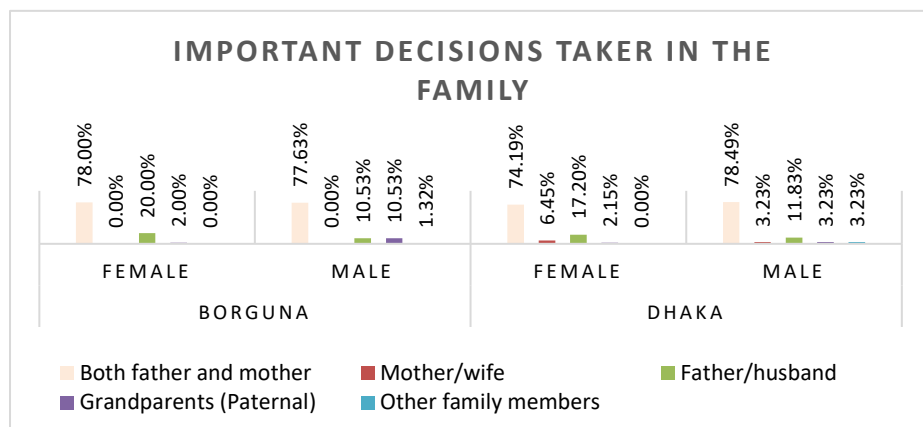


Figure 13: Important decision taker in the family

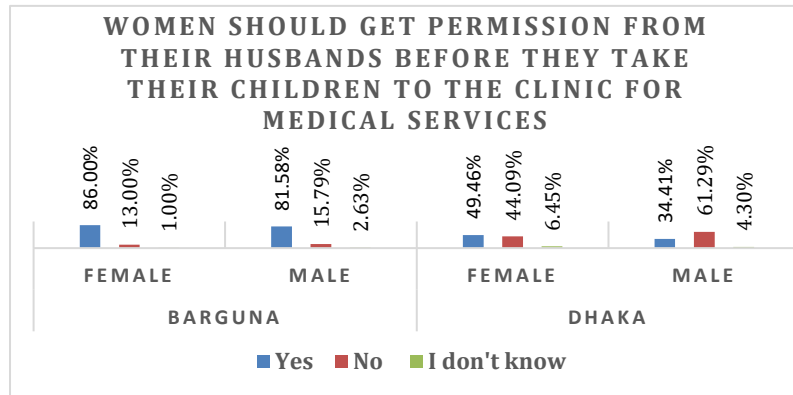
Before PIB's awareness program, many men in the area had a traditional, misogynistic view that the husband should make all important decisions for the family. This outlook was generally due to a lack of education and knowledge.

However, with the program, the mindset has shifted to the belief that both husbands and wives should participate in the decision-making process of the family. This shift is evidenced by the 78% of parents/caregivers with CwD that were surveyed claiming both parents are involved in the decision-making process. Such a move towards recognizing women's equal participation in the family unit has been definitively positive. In addition, it has increased communication, collaboration, and problem-solving in homes throughout the area.

The results of the Baseline and Endline surveys conducted in Barguna and Dhaka demonstrated a positive change in the perception of people when it comes to general nutrition intakes of boys and girls. Specifically, only 13% of people from Barguna and 10% from Dhaka believed that boys need more food than girls during the Baseline survey while the End line survey showed a reduction in that number as only 13.54% from both Barguna and Dhaka combined supported the statement. More notably, the reduction was more prominent in Dhaka, where the initial 10% dropped to only 5.38% in the End line survey. This notable improvement could be a result of ongoing efforts at both government and project levels to educate the masses on the need for equal nutritional intake for boys and girls. Such change

in perspectives demonstrates that people's mindset is gradually improving in terms of gender equality in terms of nutrition.

The quantitative data shows that gender roles can still play an important role in some instances, especially when it comes to healthcare access for children. In particular, it has been found that in many cases, the decision-making power in healthcare facilities lies with the men in the household. This indicates a gender bias which puts children at a potential disadvantage when it comes to making sure they are able to get the best healthcare services.



62.43% of the respondents (among them, 81.58% male respondents from Barguna, 34.41% male respondents from Dhaka) think that women should get permission from their husbands before they take their children for medical services. Interestingly, 86% of female parents from Barguna & 49.46% of the female parent from Dhaka also think the same way.

Figure 14: Women should get permission from their husbands before they take their children to the clinic for medical services.

According to religious leaders, due to religious influences, women seek permission from men before taking any decision. Also, when the study team asked the question whether 'daughters should be sent to school only if they are not needed to help at home', 29.53% of female parents & 23.08% of male parents replied 'affirmatively' which implies that there still gender stereotypical mindset exists among people. According to Project Staff, 4 years is a very short time to bring changes in mindset, especially in rural areas where the gender bias mindset comes from previous generation people or elderly people. So, to eliminate this gender bias attitude, this project needs to be continued.

"Family decisions are mostly made by the father or the male person, but the consent of the women is taken."

Youth Group (Female)

Abstract of Indicator ii:

- Parents and caregivers have a responsibility to provide a nurturing and equal home environment for their children, regardless of gender or individual talents and interests. Both boys and girls should be given the same opportunities and expectations in education and extracurricular activities.
- Parents of children with disabilities expressed difficulties in caring for girls and young women with disabilities, specifically due to the increased risk of sexual violence. They emphasized the need for further support in terms of education and resources to make parenting easier and keep their children safe and healthy.
- Gender discrimination is still prevalent, with a majority of respondents believing that a male child is essential for a family. In the Barguna district, the majority of respondents believed that important decisions in the family should be made by men, reinforcing the idea that men are responsible for decision-making in the household.
- The GeTECD project, through awareness programs, has led to a shift in mindset towards recognizing women's equal participation in decision-making processes.
- The perception of people regarding nutrition intake for boys and girls has improved, with a reduction in the belief that boys need more food than girls. Ongoing efforts at government and project levels have contributed to this change in mindset.

- Gender bias is evident in healthcare access for children, as many respondents believe that women should get permission from their husbands before taking their children for medical services. This bias puts children at a potential disadvantage in accessing healthcare services.
- A significant percentage of respondents still hold a gender-stereotypical mindset, with some believing that daughters should only be sent to school if they are not needed to help at home.
- The project staff acknowledges that changing mindset is a long process, especially in rural areas where gender bias is ingrained. They believe that the project needs to continue to eliminate gender bias attitudes.

iii. Influential family members and gatekeepers (in particular in-laws and grandparents) support women’s agency, men’s engagement in the care of their young children, and the equal treatment of girls and boys.

Family members and gatekeepers can be influential in supporting the agency of women, the engagement of men in the care of their young children, and the equal treatment of girls and boys. In particular, in-laws and grandparents can have an important role in fostering a domestic environment where both genders are treated equitably. They can act as role models to young boys, teaching them the importance of sharing responsibility in the home and treating their female peers with respect. In doing so, in-laws and grandparents can have a lasting and meaningful effect in promoting and preserving gender equality within the family which is one of the intermediate outcomes of the GeTECD project.

Grandparents who attended meetings and training at Grandparent Cafe report feeling more encouraged to support their sons in helping their wives with family and household matters. This shift in perspective was due to the information provided to them on the importance of being involved and the positive impacts it can have. Furthermore, the male parents in the group emphasized the need for men to be active participants during their partner’s pregnancy to ensure the health of both the mother and unborn child. This is because of the medical knowledge acquired in the meetings, which stresses the need for the father to provide physical and emotional support for their partners throughout the entire process. They believe this support is essential not only for the mother but also for the future of their child. The mentioned activities are given below:

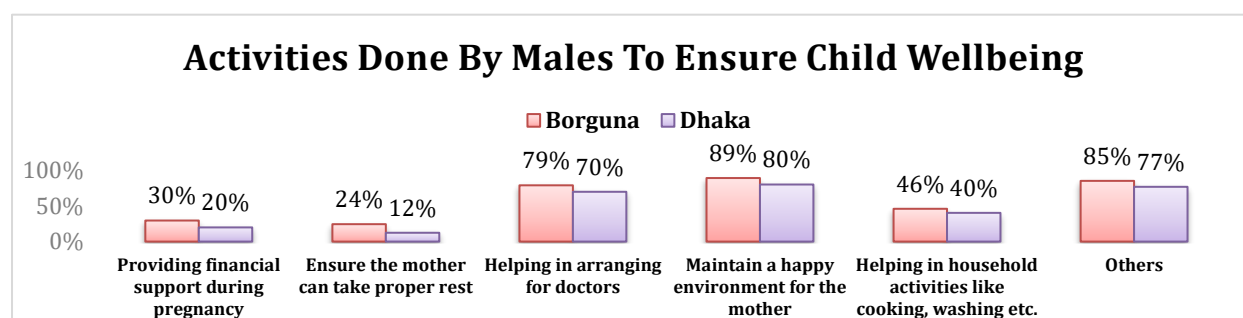
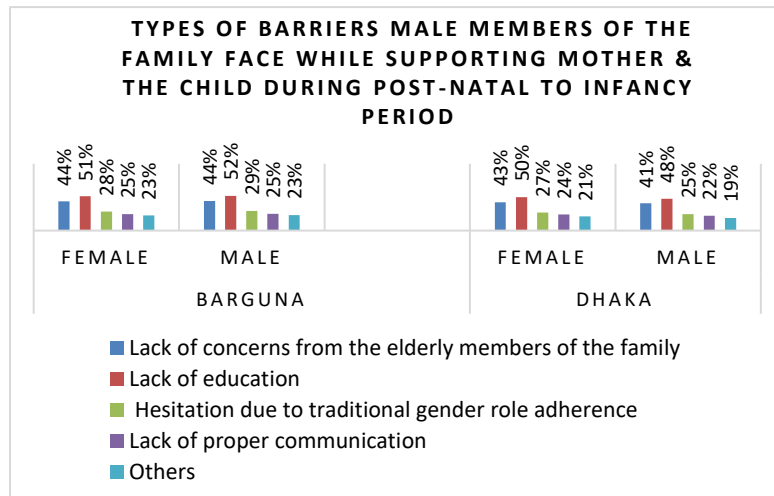


Figure 15: Activities done by males to ensure child & mother’s wellbeing.

The survey results revealed that a majority of the respondents believed the husband has a positive impact on the home environment and also provides aid to the mother in arranging doctor visits. Specifically, over 80% stated that the husband creates a happy environment for the mother, and more than 70% commented that the husband helps the mother to arrange medical appointments. This suggests that husbands have an active role in ensuring the physical and emotional health of their wives, providing a strong sense of support in a variety of ways.

Many male members face various kinds of barriers when it comes to supporting mothers and their children in their post-natal to infancy period. While 28.73% of the respondents were able to identify their own experiences with such barriers, the most common responses included lack of knowledge about infant care, lack of encouragement from family members to participate in childcare tasks, financial reasons, work-related commitments, stereotypes and other social structures, pressure from

the community, and long-distance relationships. The FGDs revealed that the local practice of childcare is so strong here that taking care of the children is the responsibility of the mother whereas male does not have any involvement. This is a social stereotype that exists in many areas of Bangladesh. This practice does not care about the unpaid work of the mothers. These factors render them unable to adequately support their families and partner through this critical period. The barriers are given below in a graphical format:



The greatest challenge to supporting mothers and infants during post-natal to infancy, as found by a survey of respondents, is a lack of education. Over 50% of the respondents thought this was the primary barrier, while 20% highlighted an additional cause: hesitation due to traditional gender roles. Based on further interviews conducted with government representatives, it was found that traditional gender roles proved to be an obstacle both within households and within the community.

Figure 16: Barriers faced by male members while supporting mother & child.

Education is essential to empowering individuals to challenge entrenched stereotypes and provide better access to and knowledge of necessary tools and services.

The data from the survey indicates that there has been a positive change in the involvement of fathers in doing additional activities for the wellbeing of the mothers of the children. In Barguna, 77% of non-CWD fathers were reported to have helped the mothers, while in Dhaka, this percentage was slightly higher at 79%. This suggests that the fathers in both locations are actively participating in supporting the wellbeing of their partners.

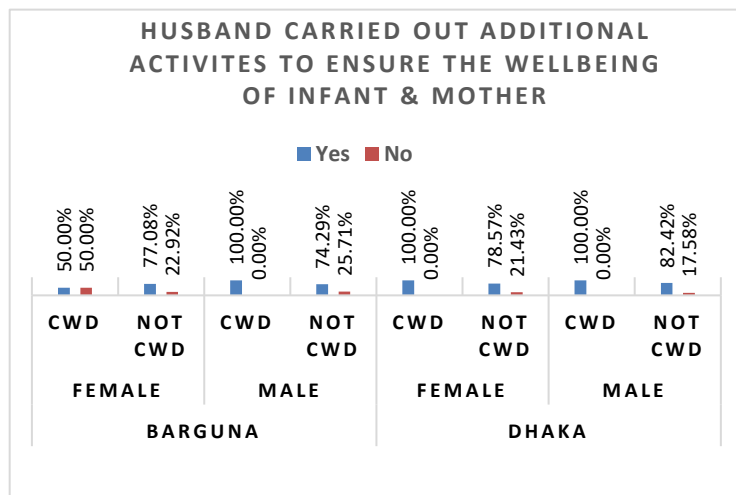


Figure 17: Husband carried out additional activities.

Moreover, when asked directly, 74% of fathers in Barguna acknowledged that they assisted in additional activities for the mothers' wellbeing. This percentage was higher in Dhaka, with 84% of fathers admitting to doing additional work. This indicates that fathers are now more aware of the importance of their contribution to the overall wellbeing of the mothers and are actively participating in household chores or other responsibilities.

Additionally, when focusing on CWD in Dhaka, the survey findings indicate that 100% of the mothers reported that their husbands contributed to additional work for their wellbeing. However, in Barguna, the percentage dropped to 50%. This suggests that while CWD fathers in Dhaka are fully engaged in supporting their partners, there is room for improvement in Barguna.

Overall, the data highlights a significant achievement of the project, as fathers of the children are becoming more aware of the importance of their involvement in additional household activities for

the wellbeing of the mothers. This shift indicates that the project has successfully raised awareness and encouraged fathers to take on more responsibilities within the household. This not only benefits the mothers but also helps foster a more equal and supportive family dynamic. By actively participating in additional activities, fathers are able to reduce the burden on mothers, promote gender equality, and contribute to a healthier and happier family environment.

As per female parents/caregivers, the current situation is improved a lot. Before, the male members of the family especially the husbands used to be disinterested in HH work and used to make excuses if asked for some help. Now, they are gradually starting to support their wife in HH work & child-rearing. Nowadays, they are often seen taking the children outside the house, playing with them, reading them story books, and sometimes even feeding them. According to one male parent during FGD, 'People who are uneducated, shy, and superstitious do not help with housework. Many people say that the man is crazy for his wife if they do housework. About 60-70% have changed due to yard meetings& now many are ashamed to say this kind of stuff again'. All fathers report that fathers love girls more than boys, but boys and girls are equal in all other respects, when it comes to rights, both girls & boys are treated equally.

'Earlier when men did HH work, people used to say that you have become a woman, people didn't know these things before, now they don't say so.'- *Religious leader.*

Abstract of the Indicator iii:

- In-laws and grandparents play a significant role in promoting gender equality within families by acting as role models and supporting the engagement of men in caring for their young children.
- The Grandparent Cafe program has successfully encouraged grandparents to support their sons in helping their wives with family and household matters, highlighting the positive impact of male involvement.
- Survey results show that husbands have an active role in creating a happy environment for their wives and helping them arrange medical appointments, demonstrating their support and involvement in the physical and emotional health of their partners.
- Barriers to male support for mothers and infants include lack of knowledge about infant care, lack of encouragement from family members, financial constraints, work-related commitments, stereotypes and social structures, pressure from the community, and long-distance relationships.
- Lack of education and traditional gender roles are identified as the main obstacles to supporting mothers and infants during the post-natal to infancy period.
- The involvement of fathers in additional activities for the wellbeing of mothers has increased, with significant percentages of fathers admitting to assisting in household chores and other responsibilities.
- While there has been progress in the involvement of fathers, improvement is needed in supporting fathers of children with disabilities.
- The project has successfully raised awareness and encouraged fathers to take on more responsibilities within the household, promoting gender equality and a healthier family dynamic.
- Female parents/caregivers report an improvement in the support of male family members, particularly husbands, in household work and child-rearing. Male members are seen taking on more responsibilities, such as playing with children, reading to them, and even feeding them. Some participants mention that there is still a stigma associated with men doing housework, but many people have now changed their attitudes and are ashamed to make negative comments about men helping with household tasks. Fathers are reported to love girls and boys equally and treat them equally in terms of their rights.

iv. SBK facilitators have improved confidence and skills to provide quality, gender-transformative early learning opportunities for girls and boys.

The intermediate outcome of the GeTECD project stated that the facilitators of the ECD have seen a dramatic improvement in their knowledge and abilities when it comes to providing quality, gender-transformative early learning opportunities for both boys and girls. They should develop the capacity to not only create the physical environment which allows for learning to take place but also to ensure that a comprehensive learning experience is available to all children regardless of their gender. Through the training provided to the facilitators, they have become more confident in being able to address the varying needs of male and female children, giving them the skills to create a space in which each gender receives the same educational opportunities. SBK currently supports approximately 2400 children and their families through its 170 facilitators, who have been trained in gender-responsive education. Additionally, 550 youth volunteers are working and providing gender-oriented support for early child development. These volunteers are helping ensure that children and families benefit from gender-responsive care.

Regular Activities in SBK:

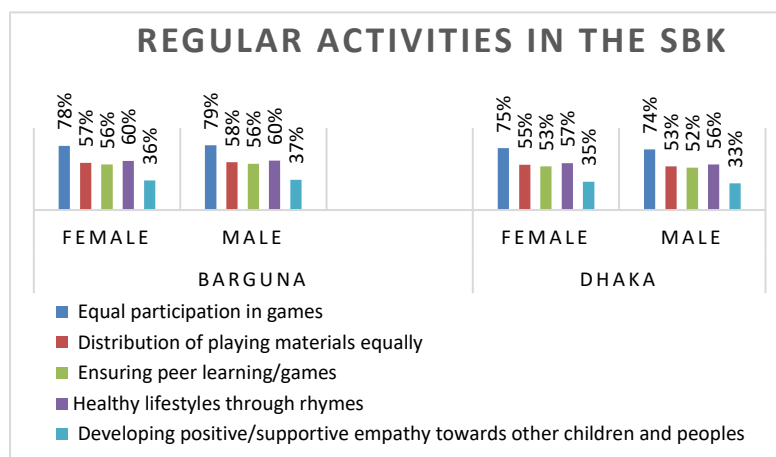


Figure 18: Activities in SBK

In Barguna and Dhaka, the percentage of females and males who believe in equal participation in games is relatively high. In Barguna, 78% of females and 79% of males believe in equal participation, while in Dhaka, 75% of females and 74% of males believe in it. This shows that a significant portion of the population recognizes the importance of equal opportunities for both genders in sports activities. Similarly, the

distribution of playing materials equally is also seen as important by the majority of respondents. In Barguna, 57% of females and 58% of males believe in this principle, while in Dhaka, the percentages are slightly lower at 55% for females and 53% for males. This indicates that there is still room for improvement in ensuring that playing materials are accessible to all children, regardless of gender.

Ensuring peer learning and games is another aspect that is given importance by respondents in both regions. Approximately 56% of females and males in Barguna, as well as 53% of females and 52% of males in Dhaka, believe in the significance of peer learning and games. This suggests that creating opportunities for children to learn from each other and engage in group activities is seen as beneficial by the majority.

Promoting healthy lifestyles through rhymes is also considered important by a considerable percentage of respondents. In Barguna, 60% of females and males believe in this principle, while in Dhaka, the figures are slightly lower at 57% for females and 56% for males. This shows that there is awareness of the role that rhymes can play in encouraging healthy habits among children.

Lastly, developing positive and supportive empathy towards other children and people is an area that has room for improvement. In both Barguna and Dhaka, the percentage of females and males who believe in this principle is relatively low. In Barguna, only 36% of females and 37% of males believe in developing empathy, while in Dhaka, the percentages are even lower at 35% for females and 33% for males. This suggests that there is a need to promote empathy and understanding among children, helping them develop positive relationships with others.

Overall, these findings highlight the areas where there is consensus among respondents in Barguna and Dhaka regarding the principles and values that should be promoted in children's development. However, there are also areas that require attention and further efforts to ensure equal opportunities and positive social interactions among children.

The SBK facilitators at SBK ensure an inclusive and equitable learning environment for everyone by providing equal opportunities to every participant to showcase their talents and capabilities. Further, the SBK facilitators help in fostering peer learning and healthy lifestyles in children, as seen through the rhymes and other activities in the centre. Parents showed significant approval of this initiative since their children get to learn so many new things and get the desired level of confidence to step into a primary school. Despite the presence of several forms of disability, the SBK centres have managed to provide a conducive and comfortable atmosphere for learning and growth.

Boys play with dolls and other toys:

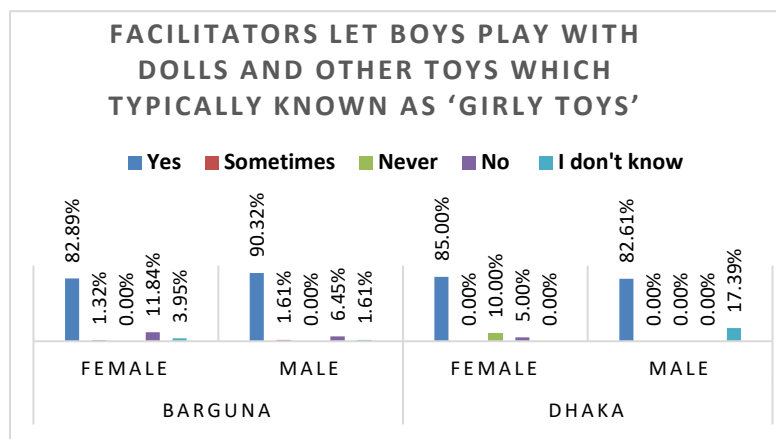


Figure 19: Gender Responsive behavior of ECD facilitators

From the survey data, we can see the responses to the question about whether the facilitators let boys play with dolls and other toys typically known as "girly toys". In the district of Barguna, 86.23% of the respondents answered "Yes", indicating that the facilitators do allow boys to play with these toys. Only 1.45% said "Sometimes", while 9.42% answered "No". A small percentage of 2.90% responded "I

don't know". Breaking it down by gender in Barguna, we can see that 82.89% of females answered "Yes", while 1.32% said "Sometimes" and 11.84% answered "No". Additionally, 3.95% of female respondents were unsure about the facilitators' attitude towards boys playing with such toys.

In contrast, a higher percentage of male respondents in Barguna, 90.32%, indicated that they are allowed to play with "girly toys". Only 1.61% said "Sometimes", 6.45% answered "No", and 1.61% were unsure. Moving on to the district of Dhaka, where the responses were different. Here, 83.72% of the participants answered "Yes", indicating that boys are allowed to play with these toys. However, 4.65% said "Never" and a small percentage of 2.33% responded "No". Additionally, 9.30% answered "I don't know" when asked about the facilitators' stance on boys playing with "girly toys". Breaking it down by gender in Dhaka, we see that 85.00% of females answered "Yes", while 10.00% said "Never" and 5.00% answered "No". None of the female respondents were unsure about this issue. In contrast, in Dhaka, 82.61% of male respondents answered "Yes", while none of them said "Never" or "No". However, 17.39% of male respondents were unsure about the facilitators' attitude towards this matter.

Overall, when looking at the grand totals, the majority of respondents, 85.64%, answered "Yes" to the question about whether facilitators let boys play with "girly toys". A small percentage of 1.10% said "Sometimes", while an equal percentage answered "Never" or "I don't know". Additionally, 7.73% of respondents answered "No". The data shows that there is some variation in the facilitators' attitudes towards boys playing with dolls and other toys typically known as "girly toys" across different districts and genders. In Barguna, the majority of both male and female respondents stated that boys are allowed to play with these toys, with slightly higher acceptance rates among males. However, there is

a higher percentage of females who answered "No" or were unsure about the issue compared to males. In Dhaka, the majority of both male and female respondents also stated that boys are allowed to play with these toys. However, there is a higher percentage of females who said "Never" or "No" compared to males. It is interesting to note that no female respondents in Dhaka were unsure about the facilitators' stance on this matter.

Overall, the majority of respondents from both districts and genders agreed that boys are allowed to play with "girly toys". However, there are still a significant number of respondents who expressed doubts or disagreement with this idea. It is important to recognize that these results are based on the opinions and perceptions of the respondents and may not reflect the actual practices in the respective districts. Additionally, the data does not provide information on the reasoning behind the facilitators' attitudes towards boys playing with "girly toys". Further research and analysis would be needed to understand the underlying factors influencing these attitudes.

This project presented a challenge as not all children with disabilities could be accommodated in the centre due to the centre's conditions to only accept manageable children. Specifically, a child with special needs and cerebral palsy who was unable to understand and follow instructions was not able to attend the centre. As such, the project was unable to address these particular needs of individuals, and alternative solutions had to be found to ensure all children with disabilities, regardless of their individual situations, were adequately provided for.

Girls play with Cars:

The data shows that a majority of both male and female respondents in Barguna and Dhaka believe that facilitators should let girls play with car toys and other toys that are typically known as "toys for boys". In Barguna, 81% of females and 80% of males said yes to this statement, indicating a strong agreement. Only 3% of females and 12% of males said no, indicating a small percentage of disagreement. Additionally, 5% of females and 7% of males stated that they don't know, suggesting some uncertainty about the topic.

In Dhaka, 64% of females and 47% of males said yes to the statement, showing slightly lower agreement compared to Barguna. On the other hand, a significant portion of respondents in Dhaka, 26% of both females and males, said no, indicating a substantial disagreement. Furthermore, 8% of females and 25% of males stated that they don't know, again reflecting some uncertainty about the topic.

Interestingly, in both locations, there were no respondents who said they never let girls play with such toys. However, in Dhaka, a small percentage (1%) of respondents said that they sometimes let girls play with these toys. Overall, the data suggests that there is generally a positive attitude towards letting girls play with car toys and other "toys for boys", particularly in Barguna. However, there is a

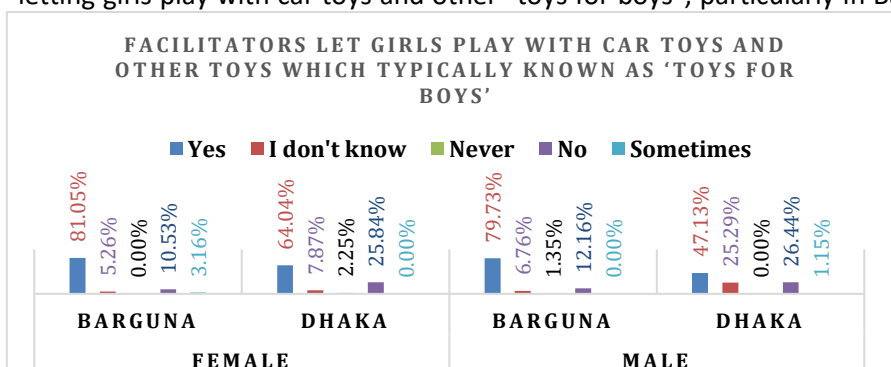


Figure 20: ECD facilitators attitude towards teaching children 'gender neutral'

larger portion of disagreement and uncertainty in Dhaka.

Throughout this project, we received training related to taking care of children, child marriage etc. once every month in the SBK centres.

Doctor assessments for children with disabilities in the

centres were arranged and assistive devices such as stands, and chairs were provided. Therapies for the children with disabilities were also arranged for those who needed it.'- **FGD respondents from Mixed Parents Disability Group**

Parents groups in the Dhaka slum neighbourhoods are fully aware of the significance of early childhood development initiatives taken under this project. Children are regularly voluntarily brought to the SBK centre by their parents and other caretakers. At this young age, the two to three hours of learning via enjoyment at the centre help them acquire habits and norms. Ultimately, this makes children more eager to enter the classroom and reduces their anxiety about a different environment. The project's initiatives also benefited the parents. Through meetings, workshops, and training, parents were informed about the early stages of the development of their children. Therefore, children are being nurtured at home by their parents. Through field observation, it is found that SBK facilitators help children to get a range of benefits, including early learning opportunities, social and emotional development, school readiness, and language and communication skills etc. By providing a structured and supportive environment, the SBK facilitator contributes to children's holistic development and lay the foundation for their future success.

Gender Analysis:

The role of facilitators in the SBK center is crucial when it comes to promoting the healthy development of gender aspects among children. One way this is done is by encouraging boys to play with typical girls' toys and inviting them to participate in activities alongside girls.

When boys have the opportunity to engage with toys that are traditionally associated with girls, such as dolls, kitchen sets, or crafts, it helps break down gender stereotypes and allows them to develop a more well-rounded understanding of gender roles. By playing with these toys, boys learn important skills such as empathy, nurturing, and communication, which are often associated with typical girls' toys. This early exposure helps boys understand that there is no inherent limitation on what they can play with or be interested in, thus promoting a greater sense of gender equality and acceptance.

Similarly, when girls are encouraged to play with both boys' and girls' toys, it provides them with a broader understanding of their own capabilities and interests. By engaging with toys that are traditionally associated with boys, such as building blocks, cars, or sports equipment, girls develop skills that are often perceived as more stereotypically "masculine". This exposure allows them to challenge societal expectations and fosters a sense of empowerment, as they realize that they can excel in areas typically assigned to boys.

The facilitators in the SBK center play a crucial role in these processes. They create an inclusive and supportive environment where children feel encouraged to explore their interests freely, without being confined to gender-based limitations. They provide guidance and opportunities for children to engage with different types of toys and activities, ensuring that they have a well-rounded and balanced development of gender aspects. By fostering an environment that promotes the play and exploration of both boys' and girls' toys, the SBK center helps children develop a more comprehensive understanding of gender. This early exposure allows them to challenge stereotypes and societal expectations, ultimately contributing to the promotion of gender equality and empowerment in their future lives.

Abstract of the Indicator iv:

- The GeTECD project has led to a significant improvement in the knowledge and skills of SBK facilitators in providing gender-transformative early learning opportunities. They are now more confident in addressing the needs of both boys and girls and creating an inclusive learning environment.
- The regular activities in the SBK centers focus on promoting equal participation in games, distributing playing materials equally, ensuring peer learning and games, and fostering

healthy lifestyles through rhymes. However, there is room for improvement in developing empathy and understanding among children.

- Survey data shows that the majority of respondents in Barguna and Dhaka believe that boys should be allowed to play with dolls and other toys typically associated with girls. However, there is variation in attitudes across districts and genders.
- Similarly, a majority of respondents agree that girls should be allowed to play with car toys and other toys typically associated with boys. However, there is more disagreement and uncertainty in Dhaka compared to Barguna.
- The SBK centers provide inclusive learning environments and support children with disabilities. However, there are limitations in accommodating all children with disabilities, and alternative solutions are needed.
- The ECD facilitators in the SBK centers play a crucial role in promoting healthy gender development by encouraging boys to play with girls' toys and inviting girls to participate in activities typically associated with boys. This helps break down stereotypes and promotes gender equality and empowerment.

v. Local education authorities are willing and able to create child-friendly, gender-transformative early grades learning environments that support children’s smooth transition from SBK to primary school.

The GetECD project worked for local education authorities proactively that they work to create nurturing early grades learning environments in their districts that prioritize the needs and development of young children in making the transition from preschool to primary school. These settings are specifically crafted to be child friendly and also to promote equality between genders, enabling young learners to find their footing in an environment that is both compassionate and inspiring. Furthermore, local education authorities back up these initiatives with resources that can be accessed by not only teachers but also parents and members of the community, allowing everyone to come together and support a student's transition to elementary school.

The Project staff reported having the full support of the local government, such as the ward Councillor and women, during the implementation of the project. During the Covid pandemic, the local government even went the extra mile of providing cooked meals for the parents of the children. During a Focus Group Discussion with both male and female parents/caregivers, they expressed how Pre-schools offered play-based sessions that effectively support young children in their development. They were also grateful for the additional assistance provided by the government during difficult times.

94.89% of the respondents from Barguna & 95.16% of the respondents from Dhaka also stated that Pre-schools provide sessions that are play-based and support young children’s development. According to the project staff, in Barguna, Govt. has already declared that schools must have arrangements for 4-year-old kids but there they have no resources to start it. Preschool basic training

for 15 days is being conducted by Plan International for government teachers. Since PIB had the curriculum already hence, they were able to take the training.

As per 51.10% of respondents’ primary school is disabled-friendly. In terms of available facilities, 87.78% of respondents think that there is a drinking water

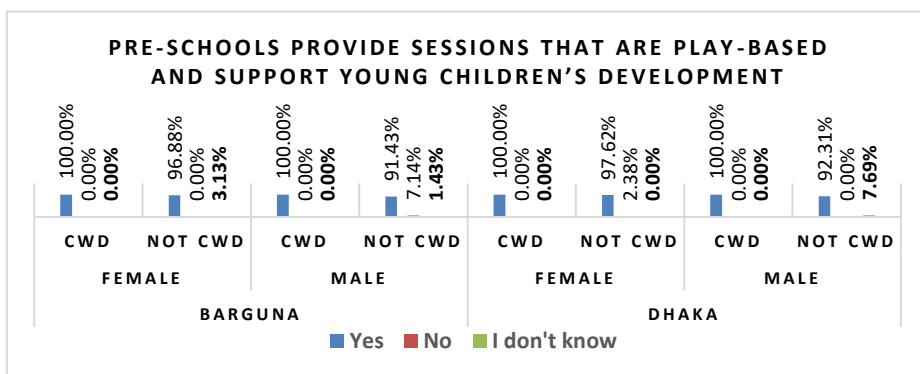


Figure 21: Pre-schools provide sessions that are play-based and support young children’s development.

facility available in the school, 80.94% affirmed that there is a separate sanitation facility available in Pre-primary school & 87.85% asserted that handwashing facilities are available in the preschool premises.

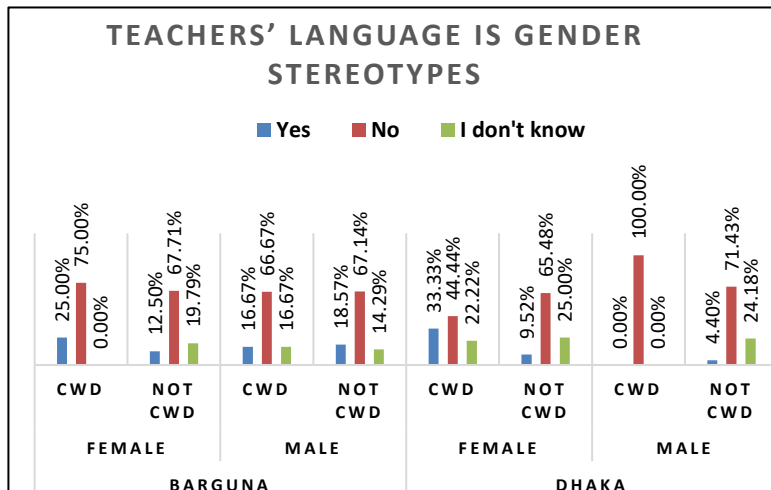


Figure 22: Teacher's Language

Field observation indicates that the pre-primary school has not been made accessible to disabled students. The outdoor space lacks a footpath or walkway specifically designed for wheelchair access. Similarly, the school has not adopted any audio-visual materials that could help students with visual impairments to understand better. The lack of appropriate teacher training also suggests that teachers at this school do not have an understanding of how to best accommodate the varying needs of

their students; this places a burden on students with special requirements as they are not helped or supported in the same way as other students. This general attitude of inadequacy towards special needs students is reflected in the charts presented.

Based on the data collected, it is evident that most pre-primary schoolteachers are aware of gender-based needs in the classroom. However, only 11.60% of the respondents think that the language used by teachers is gender specific. This highlights the need for teachers to be more cognizant of gender-sensitive topics and conversations. Additionally, an alarmingly low 8.01 per cent of respondents think that teachers exhibit gender bias in their behaviour or attitude. This calls for comprehensive gender sensitivity training to be conducted for pre-primary schoolteachers to ensure that the classroom environment is free of any gender disparity. This is essential to ensure equal opportunities for youth from all backgrounds and promote an inclusive educational experience.

TEACHERS ARE AWARE OF GENDER-BASED NEEDS IN THE CLASSROOM/SCHOOL

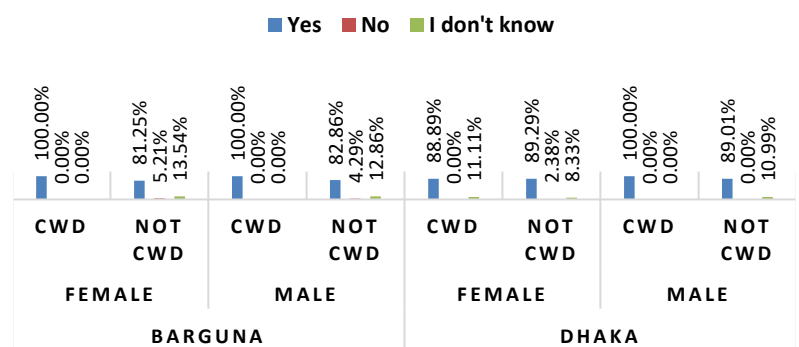


Figure 23: Teacher's awareness regarding gender-based need in the class

Abstract of Indicator v:

- The GetECD project aimed to create nurturing learning environments for young children transitioning from SBK to primary school. It prioritizes the needs and development of children and promotes equality between genders.
- The project receives strong support from the local government, including the ward councillor and women. During the Covid pandemic, the government provided cooked meals for parents.
- A focus group discussion with parents/caregivers revealed that preschools offer play-based sessions that support children's development. Parents appreciated the additional assistance provided by the government during difficult times.

- In Barguna, the government has declared that schools must have arrangements for 4-year-old children but lacks resources to start it. Plan International conducts preschool basic training for government teachers.
- According to respondents, 51.10% of primary schools are disabled-friendly. However, field observations indicate that pre-primary schools lack accessibility for disabled students, such as wheelchair ramps or audio-visual materials for visually impaired students.
- Most pre-primary schoolteachers are aware of gender-based needs in the classroom, but only 11.60% of respondents think that the language used by teachers is gender-specific. This points to the need for teachers to be more aware of gender-sensitive topics and conversations.
- Only 8.01% of respondents think that teachers exhibit gender bias in their behaviour or attitude. This highlights the need for comprehensive gender sensitivity training for pre-primary schoolteachers to ensure an inclusive and equal educational experience.
- Respondents overwhelmingly agree that pre-schools provide play-based sessions that support young children's development.
- The majority of respondents affirm the availability of drinking water facilities, separate sanitation facilities, and handwashing facilities in pre-primary schools.
- The local government provides support and resources for the GetECD project, including the provision of cooked meals for parents during the Covid pandemic.
- In Barguna, the government has mandated arrangements for 4-year-old children in schools but lacks resources to implement it. Plan International conducts preschool basic training for government teachers.
- Field observations reveal a lack of accessibility for disabled students in pre-primary schools, including the absence of wheelchair ramps and audio-visual materials for visually impaired students.
- The lack of appropriate teacher training suggests a lack of understanding in accommodating the varying needs of students with disabilities.
- The majority of pre- primary schoolteachers are aware of gender-based needs in the classroom, but there is a need for more gender-sensitive language and behaviour from teachers.

vi. Community members promote changes in gender norms that influence negative parenting and childcare behaviours and practices.

Through engaging with local communities, education and efforts to strengthen gender norms, the GETECD project worked to reduce negative parenting and childcare behaviours and practices. Community-based initiatives and organisations that provide resources and support to parents and families also play an important role in providing a support system that allows for positive changes. Community-based initiatives encouraged parents to not only understand the importance of gender equity, but also to demonstrate by example the values of equity, equality, respect, fairness, safety, and non-discriminatory behaviour in family life. This created a model for positive parenting, which can be a powerful tool for ending gender-based violence in the home, as well as negative parenting and childcare practices.

In a focus group discussion among mixed parents, male respondents revealed that attitudes in the community towards men performing household and parenting tasks have changed drastically since the promotion of these activities by the organization PIB. Male respondents described that earlier, they would be made to feel ashamed and embarrassed for helping with housework or being involved in child-rearing, but that now they are more confident in doing such tasks and paying little attention to the negative views of others in the community. Furthermore, the increasing awareness created by PIB's constant door-to-door campaigns has resulted in a positive change in outlook in the community, making it much more accepting of men getting actively involved in household tasks and caring for their own children.

Youth clubs, school management committees (SMCs), centre management committees (CMCs) and other groups are actively trying to create an awareness of gender roles in the community. The involvement of religious leaders in activities which promote gender neutrality, as well as in early childhood development (ECD), has been instrumental in changing the perspective and attitude of community members towards gender roles. These initiatives have been instrumental in creating a more inclusive and equitable environment for all genders. Below given quantitative data findings regarding the community's attitudes towards male involvement in childcare & HH works:

The survey conducted in Barguna and Dhaka, Bangladesh, reveals encouraging attitudes towards gender roles and family dynamics. A majority of people in both locations believe that the community will respond favourably to a male figure helping a female member of the family with household chores. In Barguna, this approval rate stands at 67.05%, while in Dhaka, it is slightly lower at 61.83%. These results indicate that the community is gradually becoming more accepting of men contributing to housework, possibly due to changes in gender roles and perceptions of masculinity.

Another positive finding is that a significant percentage of respondents in both locations support the idea of a man taking leave from work to support his pregnant wife and newborn baby. The approval rate for this scenario is 80.94%, with 81.25% in Barguna and 80.65% in Dhaka expressing their support.

Moreover, the majority of people in both cities view positively a man accompanying his pregnant wife to ANC/PNC visits. The overall approval rate for this behaviour is 85.32%, with 82.95% in Barguna and 87.57% in Dhaka expressing their belief in the community's positive response.

Furthermore, the survey indicates that families in both districts are supportive of a man taking financial responsibility for his wife and children. The combined approval rate for this action is close to 88.12%, with 86.93% of respondents in Barguna and 89.25% in Dhaka showing encouraging attitudes. The survey findings indicate that a significant percentage of respondents in both Barguna and Dhaka believe that the community will respond positively to men helping female family members with household chores (64.36%), taking leave to support pregnant wives and newborns (80.94%), accompanying pregnant wives to ANC/PNC visits (85.32%), and financially supporting their families (88.12%). Additionally, a high percentage of respondents believe that the community will react positively to fathers engaging in various childcare activities, such as feeding their children (88.95%), cleaning them (81.11%), washing their clothes (74.86%), putting them to bed (87.29%), accompanying them to school (92.27%), teaching them at home (95.29%), and playing with them (93.09%). These results demonstrate a favourable attitude towards men's involvement in caregiving and family responsibilities within the community.

A significant majority of the respondents, ranging from more than 60% to more than 90%, have demonstrated a positive outlook towards male involvement in childcare and housework. This finding is encouraging, as it suggests that the idea of men playing an active role in these areas is becoming more widely accepted. Moreover, it reflects an increasing willingness among members of society to embrace what is traditionally seen as the female role in nurturing children and keeping the home. This shift in attitude could have a profound impact on the gender dynamics that exist in many households. By allowing men to take a deeper role in looking after domestic matters, it could help to level the playing field and provide both partners with a more equal underlying sense of responsibility and fulfilment.

As per the School teacher, due to constant promotion & awareness videos showing gender roles & ECD materials help improve community people's change in behaviour & attitude regarding these issues. Now, Community members promote changes in gender norms to change the stereotype mentality & get rid of misconceptions.

3.3 Challenges of the Project

- Adapting to the social milieu in which children and their families live is one of the main obstacles. Due to the environment, it is challenging to establish and maintain norms among children.
- There should be more than one or two parent group training sessions per month. Some parents are still ignorant of their children's physical and mental development, which prevents them from giving their children the parental support they require for growth.
- According to the ECD coordinator, the overall outcome of the project is not fully achieved due to the ignorance about ECD among the parent group in the localities. So, to establish the idea of ECD with a gender transformative mindset, this four years long timeline is not enough.
- The implementing partners normally work on multiple projects at a time. As a result, they cannot provide the required manpower support.
- There is a lack of advocacy in this project from the government level. Though local government officials and the Education Ministry were included, this couldn't connect the central government.

3.4 Limitations of the Project

- Due to the limitation of enough space, not all the children can join the SBK centre. Normally the project locations in Dhaka are overcrowded, so a large number of children are out of these opportunities.
- The SBK facilitators and staff are generally hired in the local areas. Though, there is still a communication gap between the beneficiaries and the project implementation authorities and volunteers.
- According to Ward Councillor Dhalpur, the project is serving a limited number of beneficiaries in slums; while there are a good number of children who need to be brought under the same light.
- According to project staff, the 5 years duration of such a project is not enough. Due to the pandemic project intervention was not stopped but could not be done on a broader scale. There is more work to be done to bring about changes among men in this patriarchal society.

4. Evaluation of the project through DAC Criteria Lens

Relevance

The project intervention is doing the right thing. The project is aware of valuing and treating young girls and boys equally without any discrimination. The male and female parents also understand the importance of providing healthcare facilities for women and antenatal visits for safe deliveries. Moreover, the project teaches men and boys to be egalitarian in nature by taking part in household chores and childcare activities. This helps in forming a more gender-inclusive society and supporting early childcare development. The project intervention also provides support in the case of any emergency and education on how to refer to such cases. All these efforts are helping to create a society that recognizes early childcare and development.

“2 hours session regarding early childhood development for 3-5-year-old kids were provided in the SBK centre. Parenting session (P-3) also been provided through SBK. In these sessions, the facilitators usually visited the houses of the mothers who are pregnant, & two sessions were conducted one is individual session and the other is group session.” - *SBK facilitator.*

The project intervention is contributed a lot to the society by involving religious leaders to spread the message of Early Childhood Development (ECD) in a gender transformative environment. These religious leaders are granted enough authority within the community to enact real change. Thus, by raising awareness and advocating for these societal issues from a religious standpoint, religious leaders have the power to influence the attitudes, beliefs, and behaviours of community members and encourage positive change. Moreover, involving both Muslim and Hindu religious leaders allows for a more inclusive approach to the project interventions, allowing all community members to be included. Therefore, the project intervention is focused on creating widespread understanding and acceptance of important issues, such as gender equality and ECD, which is the objective of the GeTECD project.

Effectiveness

Through the GeTECD project, local resources (SBK facilitators, SMC members, youth groups, etc.) have become involved and created awareness among communities, youth groups, and families. Similarly, volunteers (SMC, CMC) have been involved which has brought new perspectives due to the learning from the Grandparents Cafe. As a result, elderly people are now more engaged in activities with their grandchildren rather than spending their time praying or gossiping, which has helped to challenge and ultimately shift their traditional role.

“SBK facilitators make a carton of 1-1.5 foot and decorated it with colourful poster papers and then named it “My Playhouse (Amar Khelaghor)” so that all the children could play in the house. The partner organization didn’t have to buy any toys for the children. Since Sisimpur is the partner, they also provided puzzle and story book named “When Tuktuki will grow up (Tutktuki Jokhon Boro Hobe)” to the children in the SBK centre.”-**Project Staff**

The project was able to establish SBK centres which were used to provide support to the children. Due to Covid project could not reach all the targets as per plan. However, through its innovative ‘Amar Khela Ghor’ initiative, the project was able to motivate parents to send their children to the SBK centre. The parents were so motivated that the cartons which were provided were filled with toys made by them and some even bought toys for their children. It also encouraged the fathers to actively participate in the awareness campaign and activities. The project has been successful in creating such an environment where children with disabilities can be included in the community without any stigma or discrimination. The centres provide a safe place for all children to have fun and learn as they would in any other facility. The project also encourages parents to spend their time and gives them the opportunity to learn and interact with other children. The reward system that the project has put in place is also an important part of the project’s success. Awarding ‘best father’ motivates more fathers to actively participate in the awareness campaign and activities. This creates an environment of acceptance and inclusion wherein parents will not feel ashamed or embarrassed to send their disabled children to the SBK centres. The project also ensures that disabled children receive the appropriate care and attention in the centres. This includes providing the necessary support from trained staff, providing a safe and stimulating environment, and making sure the children receive regular assessments. This makes sure that the children can learn and interact with their peers in a safe and inclusive environment. Overall, it is clear that the intervention is achieving its goals. It has been successful in motivating more parents to accept their disabled children and provide them with

opportunities for education and interaction with other children. This is essential in creating an inclusive environment where the disabled can feel safe and enjoy their learning experiences. The project has also ensured that the children receive the appropriate care and attention that they need to grow and thrive. The reward system further encourages more fathers to join the awareness campaign and actively participate in it. All of these initiatives are integral in creating a safe and friendly environment for children in the project.

The GeTECD project employed several strategies to ensure gender transformation in early childhood development (ECD). One of the key approaches was to enhance the male-female support mechanism for childbirth, particularly for antenatal care (ANC) and postnatal care (PNC). This involved engaging and educating both men and women on the importance of ANC and PNC and encouraging active participation of fathers and other male family members in the care of newborns and young children. By involving men in these traditionally female-dominated roles, the project aimed to challenge gender norms and promote shared responsibility for caregiving and child development. Another important aspect of the project was to involve both male and female family members in childcare and development. This was achieved through the establishment of clubs and cafes at the community level, where discussions and trainings were held to improve the knowledge and skills of both men and women in nurturing and providing appropriate stimulation to young children. By engaging both genders in these activities, the project aimed to break down traditional gender roles and promote gender equality in childcare. Additionally, the GeTECD project worked on improving the learning environment and quality of education in pre-primary schools. This included providing training and support to teachers to promote gender equality in their teaching practices and curriculum. The project also aimed to address gender-based violence and discrimination in schools, creating safe and inclusive spaces for all children to learn and develop. Lastly, the GeTECD project recognized the crucial role of early brain development in shaping a child's future. To ensure gender transformative ECD programming, the project relied on the trained SBK (Stimulation, Bonding, and Knowledge) facilitators who played a key role in stimulating and enhancing the brain development of children in an integrated way. These facilitators integrated gender-transformative practices into their interactions with children and their families, promoting equal opportunities and outcomes for both boys and girls.

In summary, the GeTECD project implemented various strategies to ensure gender transformation in ECD, including involving male family members in childcare, improving the learning environment in pre-primary schools, and promoting gender equality in early brain development. These efforts aimed to challenge gender norms, empower women, and create more equitable opportunities for children to thrive.

Efficiency

The resources that are used in the PIB projects are being used effectively and efficiently to deliver the desired outcomes. A number of programs are underway at the SBK Centre, facilitated by trained staff. These programs focus on gender equality, Early Childhood Development (ECD) and other related issues. To ensure the efficient use of resources, staff capacity and knowledge on gender issues and other related topics is highly emphasized. Furthermore, training is regularly provided on gender sensitivity to ensure that children who visit the Centre have the best possible experience. The Centre is limited in space, and some events are not suitable due to the limited space. Despite this, the Centre is a suitable environment to promote gender equality and all the games and toys provided strive to do this. The toys that boys usually select, such as balls, animal toys and puzzles are provided and adjusted

to promote gender equality. For example, more dolls are added to the selection of toys to encourage boys to understand the importance of gender equality. Overall, the resources for the GeTECD project are being used efficiently to achieve the objectives of the programmes. Ultimately, this enables the projects to reach desired outcomes and further the mission of PIB.

The funds gathered were efficiently used for the implementation of interventions in the education system like training and lessons for the pre-primary level, sessions for fathers, information sources and linking with organizations for the welfare of deprived children as well as supplies needed to run ECD centres. Human resources like skilled teachers, and project staff have played a vital role in the effective implementation of the interventions.

They worked closely with the children and parents to mobilising support for the promotion of gender transformative ECD. They also developed various IEC materials for awareness which was utilised across districts for creating awareness and positive attitude towards gender issue. It was found that the role of PTI and other government education officials is of vital importance for Gender Transformative Early

“Initially, we planned that 20 fathers would participate in the meeting, however only 15 or 12 would come and gradually it became much less. The main reason was that fathers were working all day and they could not leave their work in the middle and participate in the meeting”. – **Father's Cafe**

Facilitator

Childhood Development (GeTECD). They have integrated GeTECD into Pre-primary education by providing teachers with training. Both the PTI instructors and TEOs interviewed as part of this GeTECD project have commented on the value and importance of this project, both personally and professionally. However, out of the 128 schools in Barguna district, only 10 have implemented the GeTECD components. It is suggested that the replication and implementation of the project should be increased on a wider scale. As a result, this network was instrumental in creating a strong pathway for project implementation in the other districts. Moreover, material resources such as IEC materials to create awareness of gender issues and the importance of ECD were used for educational sessions and environments created for children in the classrooms and extended support through home visits. Similarly, games and other toys for the children's recreational activities were also utilized to ensure quality ECD services. It can be concluded that GeTECD project has been using its resources efficiently taking into account its limited budget and achieved its goals. However, for better results, there is a need to provide better remuneration to the staff and support from relevant stakeholders for effective implementation and monitoring of interventions.

Impact

The intervention has made a positive difference in knowledge, attitudes, and practice levels towards children among male members. Fathers are now taking a more active and engaged role in parenting, from helping with childcare to seeking out ANC/PNC, to allocating more time for their children and providing assistance with household duties. This increased involvement has helped to reduce conflict between family members and fostered healthier relationships between fathers and their children. It has also opened up opportunities for men to be more mindful and engaged parents.

“I used to be ashamed of housework now I don't get it. My mother used to get angry if I helped my wife with housework, now she doesn't”. – **Male Parent during FGD**

The intervention also makes a significant difference in providing support to families with disabled children. It provides access to resources such as government assistance, access to assisted devices, support for mainstream education, and gender transformative ECD. These initiatives create opportunities that otherwise would not have been available for many families, thus improving their overall quality of life.

The intervention of Sissimpur made a significant difference in the community. Through the use of video shows, open airs, folk songs, pot songs, street theatre, billboards, and school-based campaigns, the project helped promote positive fatherhood, early childhood development, gender transformation roles, and non-discrimination issues.

“During one video show in Khilgaon, one mother was saying to her son that “You see how everyone is equally participating in the housework in the videos but when I ask for one glass of water from you, you did not give it to me”. At the end of the session, they asked the child about whether his perception has changed after watching the video show and he mentioned that he would participate along with other family members in the household work from now on”. - **Project Staff**

The parents were educated in the early stages of the development of their children through meetings, workshops, and training, helping them to nurture their children at home. This has led to children being more eager to enter the classroom and reducing their anxiety about a different environment. Overall, this intervention has helped build stronger and more resilient communities. The intervention has had a positive impact on the youth and children, as it has allowed them to better understand that men and women are equal and can play different roles in a family and their community. This new understanding has allowed them to better prepare

for schooling and feel more confident in a new environment, as they are able to access SBK centres which have also led to improvements in their social and cognitive development. The intervention has also had a positive influence on local government, as they have committed to allocating budget for the children and youth, allowing them to access better resources. This shows that the intervention is successful in its aim to empower young people and build a better and brighter future.

Sustainability

The potential long-term benefits and achievements that could result from this project will largely depend on the degree and level of engagement that is achieved and maintained among those that have been identified as stakeholders. For the project to continue to be effective, there must be a commitment from those who are most closely involved at the family and community level, such as parents, teachers and grandparents, in creating sustained behaviour change in their households in support of gender equality

other important aspects development. This kind sensitize individuals to is increased gender behaviour changes, setting, that reflect this the project is assessed

“Earlier people living in the area used to think that a child with disability is a huge burden for the family, but this project has changed their perception and they are ready to overcome any challenges and take care of their child.”- **FGD participants.**

and positive parenting and of early childhood of intervention serves to visualise a future where there equality and to inspire especially within the family shared vision. As the impact of over time, one can expect that

the initial shifts in attitude and consequential behaviour exhibited in households as a result of exposure to the project's various activities will have a degree of permanency.

Sustaining positive learning and behaviour gains requires continued and sustained engagement, with communities and individuals equipped with the relevant resources and tools to maintain behavioural change and improved parenting, alongside continuously adapting to changes in the socio-economic context. Change ranging from improvement in understanding of and behaviour towards gender equality to positive parenting techniques is important but a continuous commitment of resources is essential for success. The success of the project lies largely in its ability to create a vested interest in gender equality in individuals, equip them with the skills and knowledge, and inspire the social norms to sustain the positive behavioural change initiated.

5. Recommendations

- ✓ It is strongly suggested that the current project interventions should continue for at least five more years to ensure sustainability. Additionally, the scope of the project should be expanded in order to create a wider impact. In addition to this, careful consideration should be given when selecting play materials to be used in the SBK centres in order to prevent any type of stereotypes or roles associated with specific genders.
- ✓ Pre-school teachers should be thoroughly trained in essential topics such as child psychology, mental health, nutrition, moral education, first-aid, children's literature, music, song, drawing, play and child-appropriate teaching methods. Curriculum packages provided in Primary Teacher Training Institutes should comprehensively cover all of these topics, allowing teachers to develop a deep understanding and effective strategies for engaging young learners. Child psychology, for example, is paramount for preschool teachers to be aware of. It equips them with the best ways of understanding and motivating children's behaviour and selecting suitable teaching approaches. Likewise, having a good understanding of nutrition is important to ensure the physical and mental well-being of the children, since an unhealthy lifestyle can lead to physical and mental procrastination. Also, emphasising the importance of moral education is crucial to cultivate desirable values and behaviours in young minds. Furthermore, providing essential information on first aid is essential for the safety of the children. Lastly, covering other topics such as children's literature, music, song, drawing, and play in their training will ensure teachers are well-versed in engaging and educating young minds in a fun and meaningful manner.
- ✓ The local government's role should be strengthened more and make them more sensitised and accountable for promoting gender transformative ECD through active engagement and resource allocation. That's why local-level advocacy needs to be strengthened by the project.
- ✓ SBK centre facilitators are the key actors at the community level therefore more investment in training/ capacity building on ECD, gender and social inclusion, and positive parenting should be included with other incentives which would be reinforced to perform their role and responsibilities and build more ownership of the program.
- ✓ Good practices of ECD initiatives should be documented and disseminated wider level.
- ✓ Family Day, Father's Day and Mother's Day should be observed and inter-generational dialogue with men and boys should be organized more by the project.
- ✓ For creating more ownership through project planning- evaluation all the relevant stakeholders should be engaged.
- ✓ In DRM and climate change action gender transformative ECD issues needs to be incorporated.

- ✓ SBK facilitators and youth volunteers, teachers' capacity needs to be strengthened more on life skills education and more follow-up actions required. 2 days of training for the teachers is not sufficient, need refreshers also based on the TNA.
- ✓ For gender transformation, long-term interventions are required. It's not possible with only project-based interventions, needs multisectoral coordination and multi-stakeholder engagement.
- ✓ SBK centre is not disability friendly either. There is no wheelchair access through the gate, in fact not in the primary school. So, need to make it disabled-friendly so that every child gets equal opportunities to enjoy the facilities.
- ✓ The kind of English words that PIB uses doesn't go down well with the locals. For example, Father's Cafe or Grandparent's Cafe, if these are used in Bengali, it would be easier for people to understand. Besides, many people don't know what SBK or GeTECD does or what they mean, they only know the short forms.
- ✓ Weekly meetings should be arranged for the parents of the children with disabilities and to ensure the father's attendance in these meetings they should be arranged during the Eid holidays or any other holidays.
- ✓ Most of the participants mentioned that the healthcare centres are very congested, and people have to wait for a long time to get treatment. Machines are also very less in these centres. The quality of healthcare for children with disabilities is still not good. Proper attention should be given to this issue. Under this project, another "Health care centre" for children with disabilities can be introduced to ensure proper health care for them.
- ✓ "Mental health support centre" can also be introduced for the parents of children with disabilities. An open space for the parents can be arranged so that they can talk about different issues and the challenges of disabled children openly.
- ✓ All kinds of toys are kept in SBK, but girls mostly play with dolls or items related to kitchen stuff. Respondents claimed that the reason is not known why they are playing, and it is so natural. So, ECD facilitators need to be more careful in teaching children gender-neutral behaviour.

6. Conclusion

The GeTECD project focuses on providing a holistic approach to children's development. They offer early learning opportunities, stimulating environments, and age-appropriate activities and these projects ensure that children receive the necessary foundation for future learning, health, and well-being. This ECD project helped children to develop the skills and competencies needed for a successful transition to formal schooling. By focusing on early literacy, numeracy, and social skills, these projects enhance children's school readiness. They provide a strong foundation, reducing the risk of academic and developmental gaps later in life. The 'Shishu Bikash Kendra' (SBK) is playing a vital role to demonstrate ECD issues effectively.

This project involves parents and caregivers. They provide support, resources, and guidance to parents, helping them understand and fulfil their role in their child's development. Parenting programs and workshops/training/sessions offered by these projects equip parents with knowledge and skills to provide a nurturing and stimulating environment for their children. As an example of 'Father's Café'.

This project support families in various ways. They provide access to information and resources related to child development, health, nutrition, and early education. By empowering families with knowledge and tools, these projects enable parents to make informed decisions and actively participate in their child's growth and development & also engage with the wider community. They work collaboratively with community members, local organizations, and authorities to create an enabling environment for children's development. By raising awareness and mobilizing community resources, these projects contribute to building a supportive ecosystem for children and families.

This project has long-term benefits for the beneficiaries, such as improved educational achievement, parenting issues, equal opportunities and responsibilities in the family, male involvement, caregivers, community perspectives etc. By investing in early childhood development, projects contribute to promoting social mobility and fostering long-term well-being.

From the findings from FGD and KII, this ECD project provided a range of benefits to beneficiaries. They support children's holistic development, enhance school readiness, empower families, engage communities, and create a positive trajectory for individuals' long-term outcomes. SBK facilities provide a structured environment where children have engaged in age-appropriate activities and receive early learning opportunities. These activities promote cognitive development, language skills, numeracy, problem-solving, and creativity. SBK facilities helped children build a strong foundation for future academic success.

With the help of this project, SBK provided a setting for children to interact with peers and develop social skills. Through collaborative play, group activities, and shared experiences, children learn to communicate, cooperate, and develop empathy. Children are exposed to experiences through conversations, story time, songs, and rhymes collaboratively.

From the beneficiaries' level, they need more training/workshops/sessions for building their knowledge about this ECD issue. In a nutshell, SBK facilities offer a range of benefits for children, including early learning opportunities, social and emotional development, school readiness, and language and communication skills etc. By providing a structured and supportive environment, this project contributes to children's holistic development and lay the foundation for their future success.

Overall, this project has been successful to change a huge number of residents of Barguna & Dhaka areas people regarding gender roles & ECD but still, there is much work left to be done hence it is highly recommended to extend the time period of the project & scaling it up so that it can help more people to change their perspective & become aware regarding gender roles.