Presentation on Findings of Focus Group Discussion (FGD) of Para Centres of ICDP, CHTDB-UNICEF

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FUNCTIONAL STATUS OF PARA CENTRES AS FINDINGS OF FGD

General Findings

- The aim of the FGDs was to have closer and interactive discussion with the members of Para Centre Management Committee, parents and community peoples and to cross-check information regarding functional status and routine activities of Para Centres.

- It was found that Para Workers are visited families in a routine way to provide, collect and cross-check information.

- In this regard it was found that some Para Workers are irregular in family visit and in some areas family visit card was not provided, in some areas provided but not hanged with the wall fence of the house nearest to door.
It was revealed that no gender disparity exists in access to education and there is evidence of increasing awareness about, and respect for, women’s and children’s rights.

Para Centres activities have been delivered according to the child and women rights and broadly human rights based on CRC, CEDAW and HRBAP.

The assessment has revealed that remoteness and poor communication has made it difficult to accelerate progress.

It was revealed that a number of Para Centers have become venues for the sectoral services and for other community development activities.
About the Para Workers

- Newly recruited Para Workers needed 25 days basic training. The assessment has found Para Workers needed refreshers training in each year.
- It was revealed that gender issues are addressed in every aspect of operation of the project.
- Para Workers are considered as a role model for children, they can understand their cultural backgrounds and motivating them to the highest performing level.
- It was revealed that Para Workers deliberate on 11 issues in courtyard meeting to motivate and develop awareness of women and mothers.
About the Para Workers

- Para Workers are contributing towards strengthening primary health care and nutritional services of women and children in the CHT area with the involvement of the health workers.
- It was revealed that Para Workers are involved in raising awareness on use of safe water, sanitation, hand washing with soap with the objective of bringing about behavioural change in hygienic practices among the beneficiaries of the project through community participation.
- It was found that Para Workers are involved in providing orientation and building capacity of community women on health care, pre-schooling, water & sanitation management, nutrition development and community organization.
About the Para Workers

- It was found that Para Workers are involved in providing behaviour change hygiene education and assisting in installation of appropriate water point in the communities.

- Para Workers were found to give early childhood stimulation and parenting orientation on ECD.

- The assessment has revealed that with the exception of newly recruited Para Workers, most of them are well experienced and trained; render their services to accelerate progress towards sequentially achieving the objectives and goals of the project.
About the Para Workers

- It was found that Para Workers are playing a vital role as front-line paid volunteers of the project, ICDP should review their remuneration based on employment market to protect drop-out, which affects the performance of the Para Center.

- It was found that the Para Workers and Para Centre’s activities demand close supervision, there is a need to follow up and on-the-job training/coaching of the Para Workers for their professional development and update their professionalism.

- It was revealed that most of the Para Workers are motivated to their roles and responsibilities with the exception of a few.
About the Para Workers

- 96% of the Para Workers were found to be female drawn from the same language-community; the parents are playing a supportive role in regular attendance and in the teaching-learning process.
- The assessment has found that it is very difficult to get a qualified Para Workers as a local teacher, particularly in remote rural areas of CHT.
Para Centre Management

- It was evident that there is a need to ensure regular supply of play materials and stationeries for the learners.
- Most pre-school graduates are mainstreamed in the nearby formal primary schools and retain in the classroom activities.
- The findings of this assessment show that the strategy and management structure of the project are appropriate.
- The assessment found that the Para Centres act as the hub for all development initiatives to accelerate progress towards sustainable development in CHT area.
Para Centre Management

- Most of the Para Centres were found as a demonstration site for kitchen garden, low cost hygienic latrine, safe water and other appropriate technologies.

- It was found that there was an increase in children’s enrollment in primary schools; families are using iodized salt, hygienic latrine, safe water, mosquito nets, and ORT.

- It was found that 3,500 Para Centres are serving as venues for pre-school, meeting place, information centre, service delivery platform for GoB & NGOs, demonstration site for kitchen garden, low cost hygienic latrine, safe water, centre for distribution of vitamin A capsules, fortified biscuits containing vitamins and minerals, winter cloths to the learners, and immunization.
Para Centre Management

- It was found that Pare Centres exhibited medium to high level performance by ensuring community participation.
- The assessment has revealed that there has been significant improvement in women and adolescent girls’ access to health, nutrition and immunization.
- It was revealed that there was a need to discuss Para Center’s development issues in the cluster meetings, and to find appropriate actions to resolve those.
- The assessment has found that most of the Para Centres are functioning well excepting few.
Para Centre Management Committee (PCMC)

- In total 3,500 Para Centres of Bandarban (900), Khagrachari (1,258) and Rangamati (1,342) districts have pre-school program with various capacities.
- The assessment has found that there is a need to strengthen communication with the communities and undertake advocacy work with the stakeholders locally.
- The findings of this assessment state that the implementation strategies of multi-sectoral participatory planning, giving priority to remote communities and ensuring community participation and gender mainstreaming in project interventions have contributed significantly to results achieved till to date.
Para Centre Management Committee (PCMC)

- It was found that above half of the Para Center Management Committees (PCMCs) are not performing well and potentials of PCMCs were not fully utilised to accelerate progress towards socio-economic and cultural development within the communities in CHT.

- It was revealed that most PCMC’s meeting was held with no important agenda and some PCMC’s meeting was held irregularly.
Routine Activities of Para Centres as Findings of FGD

General Findings

- It was revealed that project activity progress monitoring and evaluation system is not up to the mark and not functioning well.
- The assessment has revealed that the project activities of ICDP are well accepted by the CHT communities and they think it’s an opportunity for them for life changing initiatives.
- It was revealed that Para Workers are delivering pre-school education and child development, health and nutrition development, water supply, sanitation and hygiene promotion in an integrated way.
General Findings

- It was revealed that no support was extended to individuals or families for economic activities or livelihood support or income generation activities.

- It was revealed that appropriate curriculum and teaching-learning materials are developed with the support of UNICEF incorporating the culture and heritage of CHT people.

- It was revealed that as the program has expanded, it has become very difficult to monitor the progress of activities in comparatively remote areas of CHT.
Pre-schools have been established in total 3,500 Para Centres, providing safe and child-friendly environments where children participate in learning activities facilitated by the Para Workers.

The pre-school of Para Centre is found to be a unique education programme in the CHT region for the children of 11 indigenous communities.

The indigenous children of 3-6 years were found to have good participation in their pre-school classroom and their performance was found to be good.

It was found that pre-school programme helping children of indigenous communities to get basic education and it is also helping in reducing learners’ dropout in primary schools.
Child Development and Education

- In most Para Centres attendance of pre-school learners was found to be high; enrolment in formal primary schools was also significantly high; similar high attendance was also noted in courtyard meetings.

- It was noted that fortified biscuits were distributed among children during pre-school hours, which increased the motivation of children to attend classroom activities regularly.

- Most Para Centres are found to be well maintained by the Para Worker, classroom floor and the Para Centre premises are kept clean, teaching-learning materials, game materials, various register and document are well maintained, IEC materials are displayed in organized way.
Child Development and Education

- It was noted that rhymes, songs, physical exercise, reading, sound practice, picture reading, assembling different parts of a picture, playing with materials, writing, math practice, Bangla alphabet are being taught in the pre-primary course to develop children’s competencies.

- It was found that in some CHT areas primary schools are too far and PC’s graduates find it difficult to be enrolled and attend classroom activities on regular basis. This is especially true for river/lake areas of Rangamati district, mostly in Bandarban district and partly in Khagrachari district.

- Seasonal variation was found to create communication barrier. Shifting cultivation also hampers regular attendance of young children in pre-school activities in general and more so in comparatively remote areas.
The activities of Para Centers are found to create awareness among community people on importance of immunization of children and women, vitamin-A supplementation to mothers and children, intake of iron tablets, de-worming tablets, vitamin mineral powder & fortified biscuits in reducing under five mortality rate, preventing and controlling anemia among mother and children of CHTs.

The assessment has revealed that a rate of immunisation is satisfactory among the infants, children, women and pregnant mothers excepting some remote areas.

It was found that the project interventions are preventing diseases and promoting health and nutritional status of children, adolescent girls, women and pregnant mothers and decreasing anaemia and malnutrition among the children and mothers in the CHT area.
Child Development and Education

- The assessment also revealed that Para Workers are maintaining register for pregnant women; health workers are providing those women health awareness education, treatment, medicine, TT, vitamin-A capsules, case referrals to Upazila Health Complex and District Hospital, iron tablets, pre-natal and post-natal support and services to mothers and new born infants and family planning services.

- It was found that pre-natal care, safe delivery, and post-natal follow up and care are constrained by distance, poor communication, remoteness, socio-economic condition and limited availability of services from Upazila Health Complexes and District Hospitals.
Water Supply, Sanitation and Hygiene Promotion

- It was found that there was low awareness among people on safe water, sanitation, hygiene education, malaria, tuberculosis and related other diseases in most remote areas of CHT.

- The assessment found moderate to high level awareness among the indigenous and Bangali stellar on use of safe water and sanitary latrine, and personal hygiene practices excepting in remote CHT area.

- The assessment found that there has been a significant improvement in the access to safe water and half of the households reported to have no sanitary/pit latrines.

- It was found that the ICDP has ensured easy access of children to safe drinking water and sanitary latrines in the Para Centre.
BENEFITS OF ICDP INTERVENTIONS

- Children of CHT communities have received pre-school support at their doorsteps.
- The pre-school graduates are mainstreamed in formal primary school, their retention is good.
- The pre-school learners are provided with polio drop, winter cloths, fortified biscuits, vitamin A capsules, de-warming tablets and immunization support.
- Women receive immunization support, iron folic tablets, vitamin A capsules and awareness education on 11 development issues through participation in courtyard meetings.
- Infant, child and maternal mortality, birth of under weight babies and anemia among the children and mothers have reduced.
- Use of safe water, sanitary latrine, adoption of safe personal hygienic practices like hand washing before taking food, food preparation, and after using latrine, has improved.
CHANGES HAPPENED DURING THE PROJECT PERIOD

- Pre-school learners are gradually changing their attitude and behaviour; less shy than before.

- Enabling environment is inspiring children to attend pre-schools; few children are found out of school and dropout has also reduced.

- Incidence of diarrhea, malaria, dysentery, underweight child birth, child and maternal mortality has reduced.

- Accelerated promotion of cleanliness of house premises, hand washing with soap, calculation and accounts in market sales and buy.

- Adolescent girls who are the future mothers have been participating in health and nutrition, water, sanitation and hygiene promotional activities of the ICDP.
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