

# Innovating Tomorrow

The Achievements of the Early  
Childhood Development Innovation  
Fund in Latin America and  
the Caribbean





## Authors and Acknowledgments

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The Achievements of the Early Childhood  
Development Innovation Fund in Latin  
America and the Caribbean





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## Abbreviations

<b>AED</b>	<i>Alianza Empresarial para el Desarrollo</i>
<b>ANEP</b>	<i>Administración Nacional de Educación Pública</i>
<b>BMF</b>	<i>Bebés Más Fuertes</i>
<b>CAIC</b>	<i>Centros de Asistencia Infantil Comunitarios</i>
<b>CAIPI</b>	<i>Centros de Atención Integral a la Primera Infancia</i>
<b>CBCL</b>	Childhood Behavioral Checklist
<b>CCAPI</b>	<i>Centros Comunitarios de Atención a la Primera Infancia</i>
<b>CDC</b>	Center for Disease Control and Prevention
<b>CDI</b>	<i>Centros de Desarrollo Infantil</i>
<b>CEIP</b>	<i>Consejo de Educación Inicial y Primaria</i>
<b>CIS</b>	Caregiver Interaction Scale
<b>CLASS</b>	Classroom Assessment Scoring System
<b>COP</b>	Community of Practice
<b>CRAS</b>	<i>Centro de Referência de Assistência Social</i>
<b>CREDI</b>	Caregiver Reported Early Development Index
<b>DANE</b>	<i>Departamento Administrativo Nacional de Estadística</i>
<b>DBS</b>	Dialogic Book-Sharing
<b>DON</b>	<i>Desarrollo Óptimo en Niños</i>
<b>EAI</b>	<i>Espacios Amigos de la Infancia</i>
<b>ECD</b>	Early Childhood Development
<b>ECD Fund</b>	Early Childhood Development Innovation Fund
<b>ECDI-2030</b>	Early Childhood Development Index 2030
<b>EII</b>	Emotional Intelligence Index
<b>ELDEQ</b>	<i>Étude Longitudinal du Développement des Enfants du Québec</i>
<b>ENANI</b>	<i>Encuesta Nacional de Alimentación y Nutrición Infantil</i>
<b>ENSANUT</b>	<i>Encuesta Nacional de Salud y Nutrición</i>
<b>HCB</b>	<i>Hogares Comunitarios de Bienestar</i>
<b>HOME</b>	Home Observation for Measurement of the Environment
<b>Fundación DEHVI</b>	<i>Fundación para el Desarrollo Humano Vital</i>
<b>FCI</b>	Family Care Indicators
<b>GDP</b>	Gross Domestic Product
<b>ICBF</b>	<i>Instituto Colombiano de Bienestar Familiar</i>
<b>IMSS</b>	<i>Instituto Mexicano del Seguro Social</i>
<b>INAMU</b>	<i>Instituto Nacional de la Mujer</i>
<b>INDI</b>	<i>Inventario de Desarrollo Infantil</i>
<b>IPA</b>	Innovations for Policy Action
<b>ITERS-R</b>	<i>Infant and Toddler Environment Rating Scale-Revised</i>
<b>LAC</b>	Latin America and the Caribbean
<b>MICS</b>	Multiple Indicator Cluster Surveys



<b>MIDES</b>	<i>Ministerio de Desarrollo Social</i>
<b>MINED</b>	<i>Ministerio de Educación</i>
<b>MEN</b>	<i>Ministerio de Educación Nacional</i>
<b>NGO</b>	Non-Governmental Organization
<b>OECD</b>	Organization for Economic Co-operation and Development
<b>PAF</b>	<i>Programa de Acompañamiento Familiar</i>
<b>PAHO</b>	Pan-American Health Organization
<b>PED</b>	Play Every Day
<b>PIA</b>	<i>Primeira Infância Acolhida</i>
<b>PRIDI</b>	<i>Proyecto Regional de Indicadores de Desarrollo Infantil</i>
<b>PSOC</b>	Parental Sense of Competence
<b>PSS</b>	Parental Stress Scale
<b>REDCUDI</b>	<i>Red Nacional de Cuido y Desarrollo Infantil</i>
<b>RUL</b>	Reach Up and Learn
<b>SDQ</b>	Strengths and Difficulties Questionnaire
<b>SEP</b>	<i>Secretaría de Educación Pública</i>
<b>SD</b>	Standard Deviation
<b>SIPINNA</b>	<i>Secretaría Ejecutiva del Sistema Nacional de Protección Integral de Niñas, Niños y Adolescentes</i>
<b>SNDIF</b>	<i>Sistema Nacional para el Desarrollo Integral de la Familia</i>
<b>UNESCO</b>	United Nations Educational, Scientific and Cultural Organization
<b>UNICEF</b>	United Nations International Children's Emergency Fund
<b>WHO</b>	World Health Organization
<b>WiP</b>	Well-being in Pregnancy





# Foreword

## Innovation for Early Childhood Development in a Changing World

**Ferdinando Regalia**

*Manager, Social Sector*

*Inter-American Development Bank*

**Early childhood development (ECD)** lays the foundation for a lifetime of learning, well-being, and success. However, in Latin America and the Caribbean (LAC), millions of children lack access to the resources they need for optimal development. Poverty—and, therefore, the lack of basic services, adequate and nutritious food, quality ECD services, and stimulating environments rich in interactions and educational or play materials—is the main barrier preventing children from reaching their full potential.

Forced displacement, natural disasters, or adverse environmental conditions—such as extreme temperatures or poor air quality—can further exacerbate this situation. Moreover, public investment in early childhood in the region lags behind that of middle-income countries and those in the Organization for Economic Co-operation and Development (OECD). In this context, innovation is more necessary than ever to ensure that ECD investments maximize their impact. That is why the work of the **Early Childhood Development Innovation Fund** (hereinafter referred to as the ECD Fund)—a partnership between the IDB, FEMSA Foundation, the Van Leer Foundation, the Maria Cecilia Souto Vidigal Foundation, Porticus, and the Open Society Foundations—is especially valuable.



The ECD Fund has been guided by a broad vision of innovation—one that goes beyond technology and digital tools—to improve the quality of early childhood care services. This vision has been embodied through support for a project portfolio that considers three key elements:

1

**Putting people at the center.** Innovation begins with understanding the context and the specific needs of those who will receive the interventions. The ECD Fund applied this approach in project design, using surveys, censuses, and diagnostic tools in countries such as El Salvador, Panama, and Mexico to better understand the characteristics of young children and their caregivers, parenting practices at home, and the quality of care in childcare centers. This allowed for interventions tailored to the real circumstances of children, their families, and their environments.

2

**Generating evidence to improve early childhood services.** Robust evidence is essential for enhancing early childhood care. The ECD Fund supported experimental and other types of studies to assess the effectiveness of interventions aimed at encouraging attendance in early education services, promoting child development through hybrid modalities, and improving the quality of interactions between children and caregivers—both at home and in childcare centers. The knowledge generated from these evaluations enables the design of better interventions and their scale-up based on rigorous evidence. The Fund also supported diagnostic




studies, the findings of which informed the design of responses to the challenges that had been identified.

3

**Fostering collaboration and learning communities.** Innovation thrives on collaboration. Under the leadership of the IDB, the ECD Fund created a partnership among organizations committed to child development. This alliance—together with the efforts of national and local governments, the private sector, and civil society—was crucial for the design, implementation, and, in some cases, evaluation of the projects.

After eight years of promoting innovative solutions for early childhood in LAC, the Early Childhood Development Innovation Fund is concluding its operational phase. However, its legacy lives on. The projects implemented, evaluations conducted, and partnerships built have demonstrated that innovation is not only possible, but necessary to improve the quality and reach of services for children and their families.



The task does not end here. Let us continue to champion innovation, evidence, and collaboration to ensure that every child in the region has the opportunities they need from the very beginning of life.



# Chapter 1



**The Early Childhood  
Development Innovation Fund:**  
An Investment Model to Close  
Gaps in Latin America and  
the Caribbean






# A. Context

## What is early childhood development and why does it matter?

The period from pregnancy to age 5 is critical for brain development (Shonkoff & Phillips, 2000). During these early years, the foundations for motor, socioemotional, cognitive, and language skills are established. These abilities are essential for future learning, performance, and lifelong well-being. As such, experiences and interventions in early childhood have a powerful and lasting impact (Black et al., 2017). To reach their full potential, children need access to play materials, warm and responsive interactions, and environments that support their emotional well-being and stimulate their development. Children also require good health, proper nutrition, and physical and emotional safety (Britto et al., 2017).



Public policies that enhance the quality of care environments in early childhood—especially for the poorest and most vulnerable populations—can significantly improve child development, advance equity, and generate tangible social and economic returns. In fact, these policies are among the most cost-effective social investments, yielding higher returns than those targeting other age groups. High-quality programs for vulnerable children from birth to age 5 are estimated to deliver annual returns of nearly 14% (García et al., 2020). Failure to invest imposes a high cost on society, as it results in children being deprived of better educational outcomes, higher earnings in adulthood, and improved physical and mental health. This missed opportunity—referred to as the "cost of inaction"—averages 1.6% of Gross Domestic Product (GDP) in Latin America and the Caribbean (LAC) (Nores et al., 2024). Early childhood development (ECD) investment also broadens women's employment opportunities, improves conditions for a largely female caregiving workforce, and promotes a more equitable distribution of caregiving responsibilities within households (IDB, 2024).

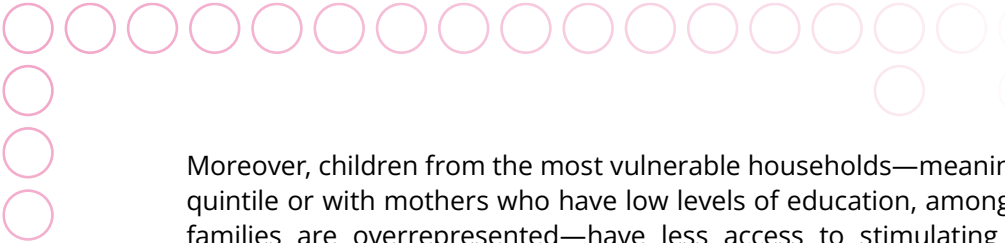
## What gaps and challenges do children in the region face?

Countries in LAC have made significant progress in reducing child poverty and improving early childhood health and nutrition. Since 1989, the number of children under age 5 living in poverty or experiencing chronic malnutrition—two key determinants and reliable proxies for child development (Grantham-McGregor et al., 2007)—has decreased by 40% and 20%, respectively<sup>1</sup>. However, serious gaps remain—ones that become harder and costlier to close later in life. Child poverty in the region stands at 35%. One in four children does not complete the full vaccination schedule (UNICEF, 2022), and 18% of children under age 5 experience stunting or chronic malnutrition,<sup>2</sup> 1.3% suffer from wasting or low weight for height, and 6.8% are overweight (UNICEF, WHO, World Bank, 2021).


<sup>1</sup> The child poverty rate refers to the percentage of children under age 4 living in households with a per capita income below US\$5 per day, adjusted for 2011 purchasing power parity (PPP). This figure represents the average across 16 countries, based on household survey data.

<sup>2</sup> Chronic malnutrition is defined as a z-score below -2 standard deviations (SDs) from the median of the reference population in the height-for-age index. The rate reflects the average for 24 countries. Wasting refers to low weight in relation to height, that is, a weight-for-height index below -2 SDs from the median of the WHO child growth standards. Childhood overweight, by contrast, is defined as a weight-for-height above +2 SDs from the median of those same standards.





Moreover, children from the most vulnerable households—meaning those in the lowest income quintile or with mothers who have low levels of education, among whom Indigenous and rural families are overrepresented—have less access to stimulating experiences and other key determinants of ECD, such as adequate health and nutrition. For instance, among children whose mothers have only a primary education, nine out of ten have fewer than three children’s books at home, and half do not regularly play with their parents—an activity essential to cognitive and socioemotional development. This lack of stimulation can result in cumulative language delays of up to a year and a half by age 5, placing children of less-educated mothers at a disadvantage before they even begin primary school, compared to peers whose mothers have secondary or higher education (IDB, 2024).

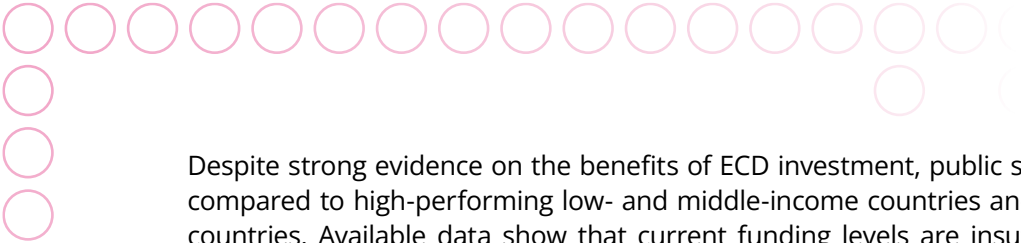


The region also faces challenges in expanding coverage and improving the quality of ECD services—both center-based and family support programs—that are essential to narrowing these gaps. According to the most recent UNESCO data, just 13% of children aged 0–2 and 71% of those aged 3–5 attend a childcare or preschool center (UNESCO, 2024).<sup>3</sup> These figures are less than half of the Organization for Economic Co-operation and Development (OECD) countries average for the youngest age group and 20 percentage points lower for the older one. Family support programs—designed to enhance parenting and caregiving practices through home visits, group meetings, or both—are available at scale in only a few LAC countries. Coverage ranges from 22% of families with children in the target group in Colombia (475,000 families) to just 1% in Chile (14,000) (IDB, 2024). These low coverage rates stem from weak targeting, staffing shortages and high turnover, and other service delivery constraints—and from limited family uptake and difficulties sustaining engagement (Berlinski & Schady, 2015).


The COVID-19 pandemic further widened gaps in access to social, health, and early education services. Preschool closures affected 22.3 million children aged 3 to 5 across LAC (Lopez Boo et al., 2023). Even after reopening, attendance has not fully returned to pre-pandemic levels. UNESCO data shows that attendance fell from 74% in 2019 to 71% in 2022 (UNESCO, 2024). Reduced engagement during the pandemic led to major learning losses. For example, in low-income areas of Santiago, Chile, children’s language development declined to levels equivalent to having a mother with five fewer years of education (Abufhele et al., 2022). In Uruguay, children from disadvantaged socioeconomic backgrounds experienced larger setbacks in motor and cognitive development—especially in math and language—compared to their peers from higher-income families (González et al., 2022).

Beyond coverage, the quality of care is often limited, particularly in terms of warm, responsive, and developmentally supportive interactions. Evidence from several countries in the region shows that the quality of interactions—or process quality—tends to range from low to moderate. This includes low levels of emotional and behavioral support, and of engaged support for learning—the latter being most strongly linked to children’s later performance in formal education (Araujo et al., 2016; Hamre & Pianta, 2007). A review of structural quality standards in center-based programs across four LAC countries shows wide variations in child-to-caregiver ratios, staff qualifications, and experience. Ratios range from 15 in Argentina to 9 in Ecuador and Peru, and between 5 and 6 in Mexico (Rubio-Codina et al., 2021). Family support programs also face challenges in maintaining quality and fidelity when scaling up previously successful small-scale models (IDB, 2024).

<sup>3</sup> Attendance rates are based on the most recent data available between 2022 and 2024. For childcare center attendance, data from 13 LAC countries and 19 OECD countries were used, depending on availability. For preschool attendance, data were drawn from 25 LAC countries and 33 OECD countries, respectively.



Despite strong evidence on the benefits of ECD investment, public spending in LAC remains low compared to high-performing low- and middle-income countries and non-Latin American OECD countries. Available data show that current funding levels are insufficient to ensure equitable, sustainable, and high-quality service provision. Between 2020 and 2021, LAC countries invested an average of 0.34% of GDP in preschool education—compared to 0.54% in non-Latin American OECD countries and 0.90% in Nordic countries (IDB, 2024). When including childcare, Nordic countries spend over 1% of GDP (OECD, 2021). Total public spending per child under age 5 in the Nordic region (US\$11,000 PPP) is more than five times that of countries like Colombia, Costa Rica, and Mexico (under US\$2,000). Investments must also support high-quality interventions to maximize their impact. Hence the importance of having evidence and practical experience on the most effective ECD interventions and implementation models—and the factors that determine their success when scaled with quality.



However, increasing public investment alone is not enough. Strong institutional frameworks, cross-sector coordination, and active public-private partnerships are also essential. At the institutional level, a review of ten LAC countries found that all have adopted national ECD plans, strategies, or integrated policies—and that seven have enacted legal frameworks to support long-term sustainability (Inter-American Dialogue, 2020). Still, in seven of those countries, the agencies responsible for implementation lack autonomy, resources, or clear mandates, and face intersectoral coordination challenges. The private sector can play a complementary role by helping to fill capacity gaps through funding or direct service provision. An increasing number of companies in the region offer employer-based childcare services, and civil society organizations also provide care services and craft partnerships that promote ECD policies (Inter-American Dialogue, 2020). Yet a key challenge remains: creating lasting and effective partnerships among governments, the private sector, and civil society (Inter-American Dialogue, 2020).



## B. The Early Childhood Development Innovation Fund

### What is it?

In response to the challenge of investing more and better to help close ECD gaps, the Inter-American Development Bank (IDB) established the **Early Childhood Development Innovation Fund** (hereafter, the ECD Fund) in 2017, in partnership with a group of organizations committed to early childhood. This initiative mobilized resources from various sources to design, implement, and evaluate innovative, scalable solutions aimed at improving the lives of children under age 5 and their families in the most disadvantaged populations across LAC thereby helping to reduce inequality. The ECD Fund also became a pioneering platform in the region for generating and sharing specialized knowledge on ECD among public, private, academic, and non-governmental sectors.



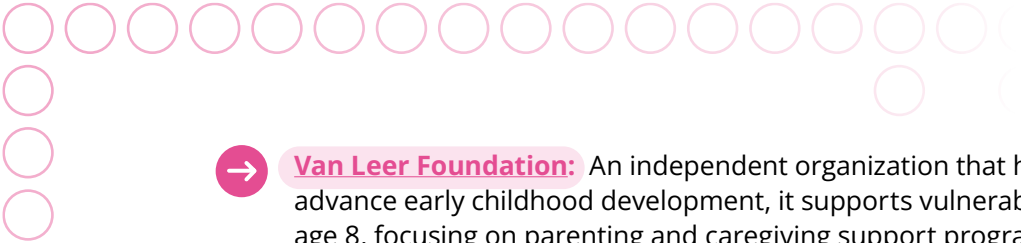

### Why an Innovation Fund?

The creation of the ECD Fund was driven by several factors. First, it recognized the important role of the private sector and civil society in expanding access to quality services as a complement to government action (Center for Universal Education at Brookings, 2017). Second, it aimed to mobilize greater financial resources to address ECD gaps through innovative approaches—such as new, effective strategies to improve service quality or expand coverage. By combining resources from the IDB's ordinary capital with non-reimbursable funding from other entities, the ECD Fund diversified funding sources around a shared goal. Third, it responded to the need for mechanisms capable of absorbing the risks associated with testing novel approaches that are not always feasible under traditional programming or within government structures. Adopting experimental models or methodologies—such as pilots, prototypes, or emerging technologies—can involve high risk due to the inherent uncertainty of innovation. However, the ECD Fund offered a mechanism to manage those risks, enabling such initiatives to be implemented and scaled to drive lasting, positive changes in childhood development. Finally, the Fund also sought to strengthen networks, build communities, and foster knowledge exchange in ECD at the local, regional, and global levels.

### Who is involved?

The ECD Fund was coordinated and administered by the IDB in partnership with the following donor organizations:

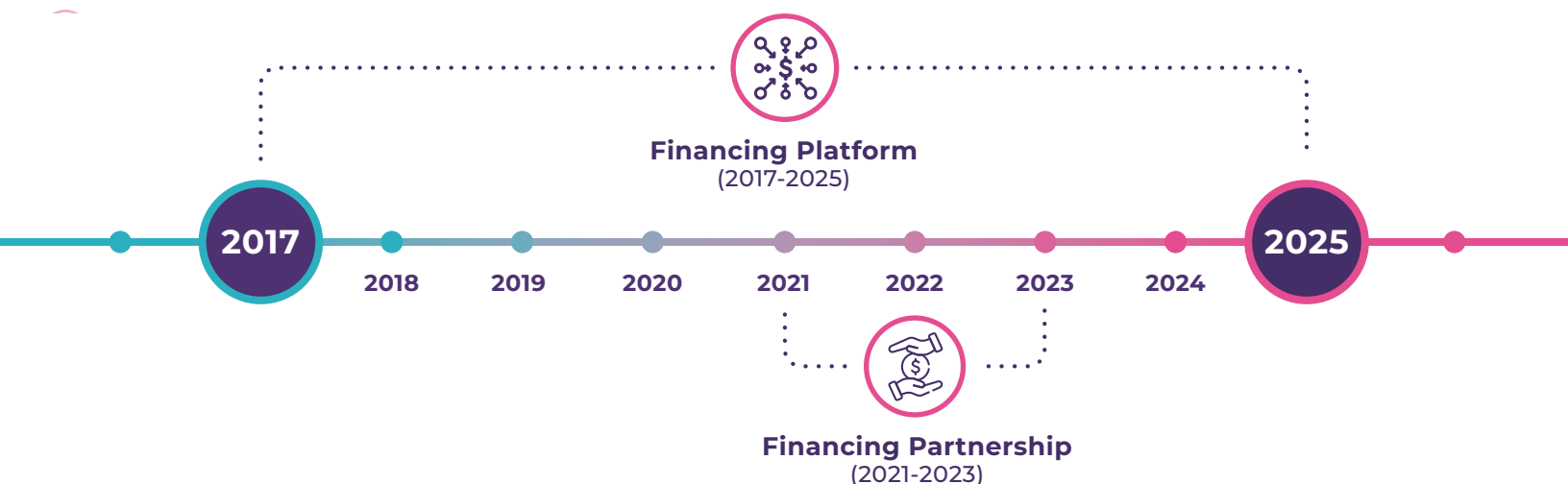
- **FEMSA Foundation:** Established in 2008 to generate a positive impact for people and communities through social investment projects focused on sustainability, FEMSA Foundation invests in water security, early childhood, arts and culture, and the circular economy. In early childhood, it funds programs that promote children's cognitive, social, and emotional development, builds parents and caregivers capacities, encourage healthy habits, and create child-friendly environments.

- 
- **Van Leer Foundation:** An independent organization that has worked since 1949 to advance early childhood development, it supports vulnerable children from birth to age 8, focusing on parenting and caregiving support programs. Its priorities include integrating child development into urban planning and management and promoting best practices and evidence to scale successful ECD programs.
  - **Maria Cecilia Souto Vidigal Foundation:** Established in 1965, it promotes child development in Brazil with a focus on early childhood and families. It works to raise awareness about the importance of early childhood for human development and supports projects that improve early education and care quality, including strengthening parenting, caregiving, and professional skills.
  - **Porticus:** Established in 1995, this private philanthropic organization supports initiatives in environmental sustainability and climate change; social justice, equity, and community resilience; faith-based organizations working for the common good; and inclusive, quality education—particularly programs that foster socioemotional skills in children and adolescents facing adversity.
  - **Open Society Foundations:** Founded in 1993, this philanthropic network funds civil society groups around the world to promote respect for human rights, democratic governance, freedom of the press, and access to justice, education, and quality healthcare.
- 

The IDB led the coordination of the ECD Fund due to its added value as a strategic partner for LAC countries. With presence in 26 of the region's 33 countries and ongoing dialogue with national governments, the IDB is well-positioned to identify specific needs and develop projects with ECD components. These projects represent investments of over US\$1.2 billion in 2025. In addition, the Fund's coordination leveraged the IDB's accumulated knowledge of the most effective solutions to ECD challenges, along with its broad network of partners across government, civil society, the private sector, and academia— through which it promotes evidence-based policies and programs.

## How does it work?

The ECD Fund combined funding from multiple sources, including both the IDB and its donor partners. Between 2017 and 2025, it operated under two financing schemes: (i) the Financing Platform and (ii) the Financing Partnership. The following section outlines the structure used to organize and manage the Fund's resources, as well as the mechanisms applied for selecting, managing, and monitoring the supported projects.



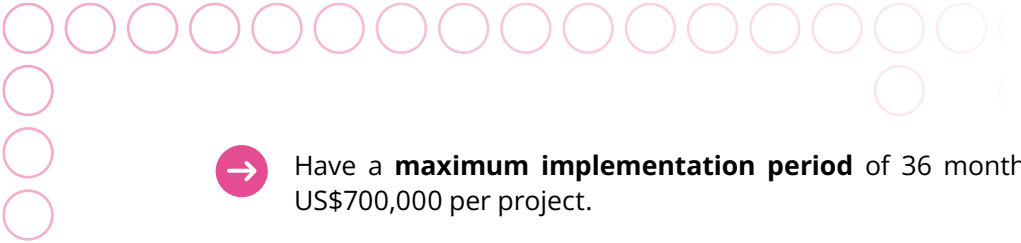
## The Financing Platform (2017-2025)

The Financing Platform combined resources from three sources: (i) the IDB's Strategic Development Program, (ii) the Multi-Donor Fund, and (iii) earmarked Specific Projects Contributions from external donors.

The Strategic Development Program operated with resources from the Bank's ordinary capital to provide non-reimbursable technical cooperation for projects in member countries. The Multi-Donor Fund was established as a multilateral trust fund, supported by contributions from the Open Society Foundations and FEMSA Foundation. These donors provided general funding to support projects selected through predefined mechanisms. In turn, earmarked contributions from Porticus and the Maria Cecilia Souto Vidigal Foundation were allocated to finance specific projects. All selected projects were managed by the IDB in accordance with its policies and procedures for implementing non-reimbursable operations.


To be eligible for funding, projects had to meet the following **criteria**:

- Be implemented in IDB **member countries**.
- Be **scalable**, considering factors such as affordability, cost-effectiveness, public resource feasibility, sustainability beyond the project's duration, and impact measurement.
- Focus on **disadvantaged populations**, including the poorest 20% and other vulnerable groups such as children with disabilities, Indigenous communities, displaced or refugee families, and individuals affected by violence, among others.
- Offer **innovative solutions** to ECD challenges.
- Be **co-designed** by national or subnational governments and non-governmental organizations.

- 
- Have a **maximum implementation period** of 36 months and a funding cap of US\$700,000 per project.
  - Promote **co-financing**, defined as in-kind or cash contributions from other sources, including public and private sector institutions.

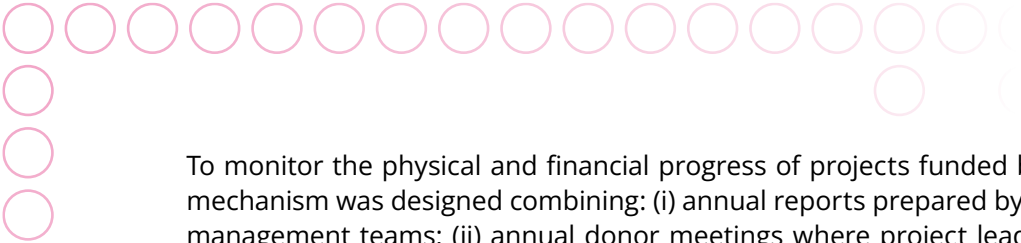
Additionally, proposals had to align with the ECD Fund's definition of **innovation**, which included: (i) new services, tools, or operational processes; (ii) improved versions of existing programs; (iii) existing solutions applied to new contexts; or (iv) innovative financing mechanisms, such as social impact bonds and other investments.

Finally, projects needed to align with at least one of the five priority thematic areas defined by the ECD Fund:

- 
- 1 Improving the quality of center-based and family support programs:** Design and test new models, operational processes, technologies, or tools to enhance the quality of early childhood care—whether center-based, family-based, or remote—for vulnerable populations. This includes adapting existing interventions to new contexts or populations.
  - 2 Scalable family support programs:** Design, implement, and evaluate family support programs to identify the elements needed to expand their reach and increase effectiveness.
  - 3 Integration of ECD services into ongoing health, social protection, education, or other related interventions:** Support intersectoral collaboration by aligning initiatives at the national and subnational levels, and by integrating ECD components into broader programs in health, nutrition, social protection, and education.
  - 4 Data generation, diagnostic studies, evaluation, and learning sharing:** Produce quantitative and/or qualitative evidence through technical assistance, rigorous monitoring, and impact evaluations on the effects either on child development or on service quality, with the goal of improving their design or scaling them based on evidence.
  - 5 Strengthening regional ECD networks and promoting knowledge exchange:** Raise awareness among key audiences and promote the sharing of knowledge and good practices through activities such as regional events and the development of a professional network.

Projects funded through the Financing Platform were selected via competitive calls. Five open rounds for proposal submissions were held in 2017, 2018, 2019, 2020, and 2021. Proposals were evaluated by the IDB and donor partners using a scoring system based on: (i) alignment with the selection criteria, (ii) relevance to priority thematic areas, (iii) the implementing organization's capacity, and (iv) inclusion of an evaluation methodology. Projects were also identified for future funding, pending the availability of additional resources.






To monitor the physical and financial progress of projects funded by the ECD Fund, a tracking mechanism was designed combining: (i) annual reports prepared by IDB sector and partnership management teams; (ii) annual donor meetings where project leaders presented updates; (iii) semiannual or annual reports aligned with each donor's reporting requirements; and (iv) a project tracking dashboard. This collaborative monitoring approach enabled the assessment of objectives, activities, outcomes, and expected deliverables of the ECD Fund.



## **The Financing Partnership (2021–2023)**



In 2021, the Financing Platform was expanded to include new donors and additional funding through the Specific Project Contributions modality. With support from the Van Leer Foundation and the FEMSA Foundation, new resources were allocated to projects focused on innovative areas—particularly the use of behavioral science to enhance ECD services. Under this model, the IDB led the identification of project proposals, ensuring they met the Financing Platform's eligibility criteria and had the support of government authorities in the countries where the projects would be implemented, thereby promoting ownership and effective execution. The IDB assessed the proposals' technical quality and compliance with eligibility standards before submitting prioritized projects to donors for annual selection.



# Chapter 2

**Results from Eight  
Years of Innovation  
in Early Childhood  
Development**

## A. Results of the ECD Fund

Since its launch in 2017, the ECD Fund has invested US\$10 million in **23 projects across 10 countries\***, reaching over **700,000 children, 300,000 parents and caregivers, and 5,000 childcare centers**. Between 2017 and 2025, a total of 30 projects were selected, of which 7 were later canceled due to institutional or external challenges affecting implementation. Key factors included the COVID-19 pandemic, which significantly disrupted planned activities, and changes in institutional counterparts, which led to a shift in intervention priorities



**23**  
projects



**10**  
countries



**+700**  
thousand  
children



**300**  
thousand  
parents and  
caregivers



**5**  
thousand  
childcare centers

Regarding the regional distribution of the projects, 54% were implemented in Central America; 25% in the Andean region; and 17% in the Southern Cone. The remaining 4% correspond to Caribbean countries. The following map provides details on project funding by country.

The achievements of the ECD Fund projects are diverse and include the following highlights:

- Bringing service quality to the forefront of the early childhood policy agenda in the countries where quality-focused projects were implemented.
- Developing and supporting hybrid service delivery models during a critical moment—the COVID-19 pandemic—while generating knowledge to improve them, particularly for reaching remote populations.
- Generating new evidence through evaluations, including insights into which types of training for parents and caregivers are most effective for promoting positive changes in parenting practices. Many projects included impact evaluations and/or qualitative assessments (e.g., process evaluations, acceptability studies). Some also carried out censuses and diagnostic exercises focusing on understudied populations, such as "skipped-generation" households, where children are raised by grandparents in the absence of parents.
- Addressing the early childhood agenda through an intersectoral approach, as some of the projects involved the participation of multiple sectors engaged in early childhood service provision—such as early education and health.

\* The ECD Fund projects comprise 10 countries: Brazil, Colombia, Costa Rica, El Salvador, Guatemala, Honduras, Jamaica, Mexico, Panama, and Uruguay. For the project "The Impact of Parental Migration on Early Childhood Development in El Salvador" (see Project Profile 11), an analysis of secondary data was initially carried out in Honduras, Guatemala, and El Salvador; however, the exploratory census was conducted only in El Salvador.

- Exploring key yet often overlooked issues, such as the mental health of children and caregivers, and the situation of migrant children, by supporting projects that introduced new models to promote caregiver mental health and ensure continued preschool access for migrant children.
- Implementing projects that designed practical management tools, informed by behavioral economics, aimed at improving caregiving practices and enhancing the quality of early childhood services.



Additionally, the ECD Fund contributed to the dissemination of knowledge, evidence, and best practices in early childhood development through two platforms: the [Community of Practice \(COP\)](#) on ECD and the [ECD Hub](#).

Established in 2022, the **Community of Practice on ECD** is a network of over 200 members from governments, NGOs, the private sector, and academic institutions. It was created to facilitate the exchange of experiences and knowledge on ECD, including evidence and lessons learned from the ECD Fund's projects. Its aim is to inform evidence-based policymaking and share best practices in implementation and evaluation.

Between 2022 and 2024, the COP held nine virtual sessions, including four public webinars and five workshops for members, with participation from over 12,000 people across 30 countries.

Most sessions—co-organized by ECD Fund members—focused on sharing diagnostics on the status of early childhood in the region, as well as lessons learned on topics such as ECD service adaptability, care for migrant children, and the effectiveness of behaviorally informed interventions. To extend reach and visibility, 15 publications and 43 blog posts were produced, collectively surpassing 250,000 views and downloads. Annex 1 provides details on the COP session topics and links to related materials.



**5** Community of Practice workshops



**4** open webinars with **12.000** participants



**200** members

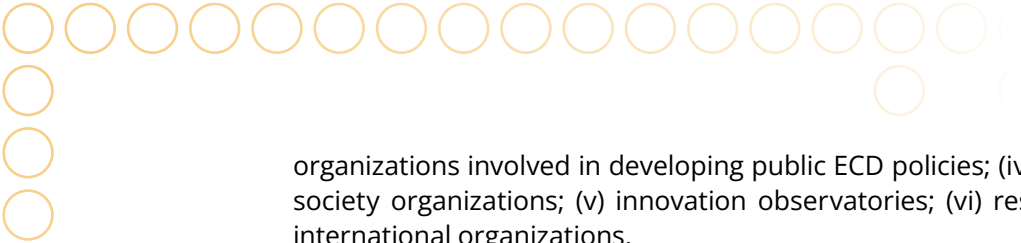


**43** and over **250.000** blog posts views


Launched in 2022, the **Early Childhood Development Hub** is a repository of over two thousand resources focused on child development in LAC. Designed to promote knowledge exchange, the ECD Hub provides open access to regional information on this topic. Available in Spanish, English, and Portuguese, this initiative supports collective learning and is aimed at governments, the private sector, civil society, academia, international organizations, students, families, and anyone interested in ECD.

Freely accessible online, the Hub had received over 200,000 visits by 2025. Its main resources include:

- ➔ **ECD Innovations Interactive Map:** This tool allows users to explore a catalog of innovative ECD projects across the region. These initiatives were selected because they address local ECD needs by employing novel or improved tools, services, or operational processes. The map also features adapted interventions for new contexts or populations, as well as scaled-up programs and impact evaluations related to child development and service quality.
- ➔ **Publications:** Downloadable repository of academic articles, policy briefs, research studies, reports, and technical notes focusing on ECD in LAC countries.
- ➔ **Measurement Tools:** A selection of surveys and instruments used in the region to assess ECD outcomes and the quality of family environments—such as the Multiple Indicator Cluster Surveys (MICS) and longitudinal studies.
- ➔ **Tools:** Links to manuals used in the region for implementing family- or center-based programs, curricular guides, protocols, and guidelines used to deliver ECD services aimed at caregivers, educators, and service providers.
- ➔ **Organizations:** A directory of institutions working on ECD in LAC, including: (i) early childhood networks; (ii) information platforms; (iii) public-sector, national-level



organizations involved in developing public ECD policies; (iv) private sector and civil society organizations; (v) innovation observatories; (vi) research centers; and (vii) international organizations.

- **Blogs, videos, podcasts and courses:** Featuring articles from [\*Primeros Pasos\*](#) (First Steps) Blog published by the IDB which covers early childhood topics, as well as links to multimedia resources that explain concepts and provide information and learning on ECD in the region.
  - **Events:** A repository of recordings from regional events, seminars, and conferences featuring a wide range of topics—from early childhood diagnostics to the development of national and local ECD policies.
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## B. An Overview of the ECD Fund Projects and Key Lessons

Below is a description of the types of projects funded by the ECD Fund, according to the area of implementation: (i) family support projects and (ii) center-based projects. Annex 2 presents a table with information on each project initiative, while Annex 3 includes project profiles for each initiative, highlighting objectives, key characteristics, and major findings.

### B1. Family Support Projects

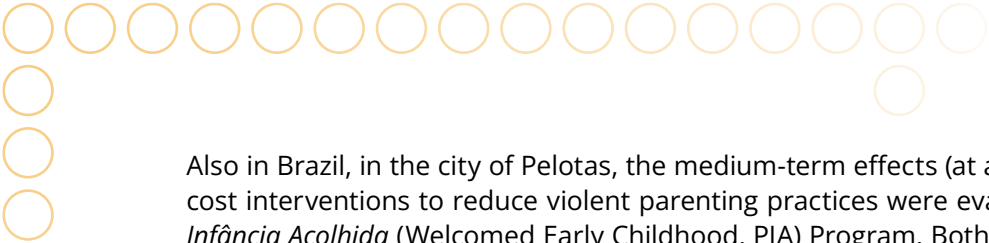
The family is one of the cornerstones of early childhood care, development, and well-being. The actions of caregivers and the environments in which they interact with their children are essential for the development of cognitive and socioemotional skills (Francesconi & Heckman, 2016). For this reason, family support programs are a priority line of action for the ECD Fund, which has promoted initiatives aimed at improving parenting practices, encouraging play and caregiver-child interactions, and empowering caregivers to cope with adverse situations.

The COVID-19 pandemic brought new challenges to ensuring child development and family well-being. Prolonged closures of in-person services led to significant setbacks in early childhood development (González et al., 2022), while rising poverty, inequality, and unemployment worsened physical and mental health, particularly in the most vulnerable households (Abufhele et al., 2022). In response, several ECD Fund-supported projects adapted their delivery models by combining in-person and remote formats or shifting fully to virtual platforms to ensure service continuity and to help close widening gaps.

In total, the ECD Fund supported 16 family support initiatives, targeting diverse populations. Of these, 5 were delivered in person and 11 were delivered through remote, virtual, or hybrid formats.


One such initiative in **Jamaica** adapted the *Reach Up and Learn* (RUL) program to ensure continuity of support for child development during the pandemic. The program transitioned from in-person home visits to remote, and later hybrid, formats. RUL is a structured home-visiting program that strengthens parenting skills to promote children's development. Its implementation in several countries—both within and beyond the region—has shown positive effects on cognitive and language development (Jervis et al., 2023). In the context of the ECD Fund project, a hybrid model combining in-person visits and remote sessions was implemented by primary healthcare staff. Its effectiveness was assessed through both an impact evaluation and a qualitative study to inform scaling-up strategies.

In **Boa Vista, Brazil**, an intervention based on the RUL curriculum was expanded to cover topics such as breastfeeding, early attachment bonds, and maternal mental health, with the goal of improving neonatal survival and ECD outcomes. Implementation was carried out through home visits or group sessions for pregnant women and mothers with children under age 3, led by social service workers.



Also in Brazil, in the city of Pelotas, the medium-term effects (at ages 3 and 4) of two brief, low-cost interventions to reduce violent parenting practices were evaluated as part of the *Primeira Infância Acolhida* (Welcomed Early Childhood, PIA) Program. Both aimed to reduce violence and encourage positive communication. One modality promoted shared reading between caregivers and children, while the other offered group sessions on emotional management and child development—designed to address high levels of household aggression.

In **Colombia**, in response to the effects of armed conflict and forced displacement, a mixed-methods study was conducted to assess the scalability potential of *Semillas de Apego* (Seeds of Attachment), a community-based mental health and ECD program for caregivers of children aged 0 to 5. The intervention consists of weekly group sessions led by community facilitators and focuses on emotional regulation, strengthening affective bonds and resilience. The approach integrates psychosocial care with ECD promotion in highly-vulnerability contexts.



Also in Colombia, considering the increasing migration of Venezuelan families, a strategy was implemented to support young children in transit and their caregivers. Physical welcome spaces were established along key points of the migration route, and educational kits and digital tools were distributed to provide early stimulation, psychosocial support, and learning materials. This project offered valuable lessons for designing relevant care strategies for migrant families in transit.

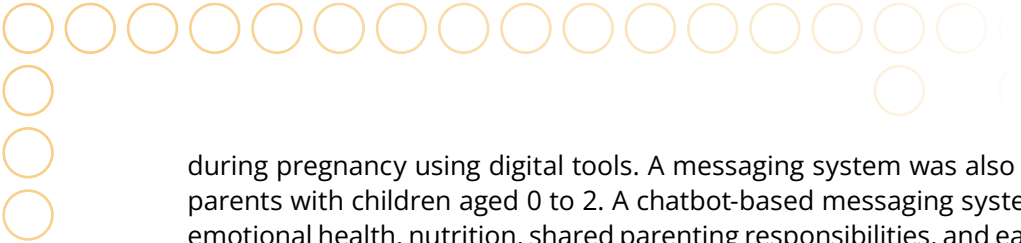
In addition, through the Community Welfare Homes (HCBs) managed by the Colombian Institute for Family Welfare (ICBF), the program *Educación con Equidad* (Educate with Equity) was implemented. Based on *Think Equal*<sup>4</sup>, this hybrid initiative sought to strengthen socio-emotional skills in children aged 3 to 6 in areas affected by violence. The program was linguistically and culturally adapted to the local context and implemented in regions historically most affected by armed conflict. Digital and audiovisual materials supported the development of empathy, emotional regulation, and resilience from early childhood, with direct work involving family caregivers. The project's impact was assessed through an experimental evaluation.

In the same country, the *Conectar para Educar* (Connect to Educate) strategy was designed and piloted using participatory, user-centered approaches. It combined technological tools with a multimodal pedagogical model to strengthen early education in low-connectivity areas. Training materials were developed for educational agents and tailored activities for families were delivered via WhatsApp, radio, and printed materials. The initiative emerged in response to challenges exposed by the COVID-19 pandemic, aiming to ensure continuity in home-based learning and improve pedagogical interactions.

In **Uruguay**, the home-visiting service of the *Programa de Acompañamiento Familiar* (Family Support Program) was adapted to a remote format in response to high demand and mobility restrictions during the pandemic. Weekly calls, personalized messages, and an interactive chatbot—enhanced with Artificial Intelligence (AI)—were implemented to analyze family interactions and guide support. As demand for the program exceeded its capacity, families were randomly selected for inclusion, allowing for rigorous impact evaluation.


Also in Uruguay, the *Crianza Positiva* (Positive Parenting) program was expanded to support parents

<sup>4</sup> *Think Equal* is a program developed by international experts to create opportunities for social-emotional learning among children aged 3 to 6. It aims to provide them tools to cope with difficult situations and manage their emotions, while promoting educational innovation to help break cycles of violence and discrimination.



during pregnancy using digital tools. A messaging system was also introduced for participating parents with children aged 0 to 2. A chatbot-based messaging system delivered information on emotional health, nutrition, shared parenting responsibilities, and early stimulation—making key information in vulnerable contexts more accessible and using behavioral science principles. Its impact was evaluated by means of an experimental study.

In **El Salvador**, two exploratory censuses were conducted: one for households with children aged 1 to 7 and another with children and adolescents aged 0 to 18. The goal was to examine the impact of parental migration on child development and performance. Data were collected on family composition, parenting practices, education, and emotional well-being to inform policy and interventions in high-migration contexts.



Based on the census of children aged 1 to 7, which identified “skipped generation” households—where children are raised by grandparents in the absence of parents—the *Tuchan* program was designed. Through text messages, phone calls, WhatsApp groups, training on cognitive and socio-emotional development stimulation, and printed materials, *Tuchan* supported grandparents and other caregivers by promoting sensitive parenting practices adapted to contexts of poverty and migration. The impact of various intervention modalities—with and without training—was assessed through experimental methods.

In addition, the *Empodera tu Mente en Familia* (Empower Your Mind as a Family) program was developed to foster a growth mindset among caregivers of children aged 4 to 7. The intervention combined home visits, phone sessions, and text messaging to promote effort-based praise and perseverance, strengthening caregiver-child interactions in contexts affected by school dropout and violence. The program's impact was evaluated experimentally.

In **Guatemala**, to prevent further deepening of ECD gaps during the pandemic, a messaging campaign was launched targeting cognitive and socio-emotional development. It supported caregivers of children aged 4 and 5 in vulnerable households throughout the closure of childcare centers. The differential impact of including socio-emotional content versus purely cognitive content was evaluated using experimental methods.

In **México**, the *Juega Todos los Días* (Play Every Day) program was adapted and implemented from Sesame Workshop's Play Every Day for households with children aged 0 to 2. This initiative promoted cognitive and socio-emotional development through play, combining in-person and remote sessions. Educators guided caregivers in play-based activities to stimulate home learning. Its impact was assessed using both quantitative (experimental evaluation) and qualitative (semi-structured interviews) methods.

Finally, also in Mexico, two initiatives—*Bebés Más Fuertes y Desarrollo Óptimo de Niños* (Stronger Babies and Optimal Child Development)—were developed and implemented to improve parenting practices in households with young children. These interventions provided group and individual sessions covering physical, emotional, and cognitive development; breastfeeding counseling; self-esteem; language stimulation; and socio-emotional skills. Both initiatives were evaluated using mixed methods: both quantitative and qualitative assessments.

## B2. Center-Based Projects

Childcare centers (early childhood education) and preschools are another key setting for fostering early childhood development, as they provide care, learning opportunities, nutrition, and, in some cases, health services. Ensuring both access—especially in vulnerable settings—and service quality, in line with defined standards is therefore essential. This requires a comprehensive approach that addresses various dimensions of quality, including infrastructure and organizational aspects, and above all, focusing on the quality of interactions between children and caregivers. The ECD Fund supported innovations aimed at increasing child development outcomes by improving center quality. In total, seven center-based initiatives (in childcare centers or preschools) received funding, including one delivered remotely.

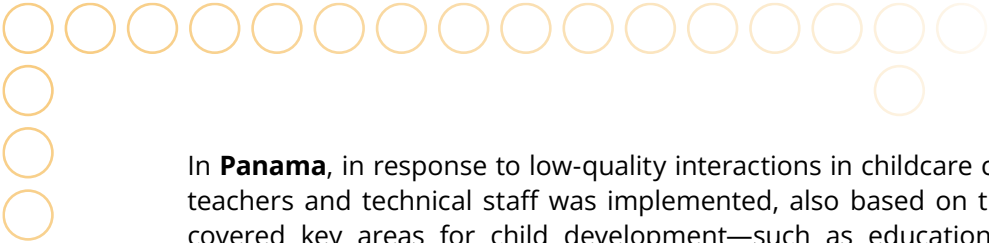
In **Uruguay**, to address absenteeism in preschool—particularly among children from lower socioeconomic backgrounds—a behavioral science-based intervention was implemented. For thirteen weeks, caregivers received text messages highlighting the benefits of regular attendance and offering strategies for organizing family routines. The initiative aimed to reduce cognitive barriers and boost parental engagement in early education. It was evaluated through an impact assessment.

In **Brazil**, to generate evidence on the long-term effects of access to childcare centers amid limited availability, a lottery was introduced in 2007 to allocate childcare slots in Rio de Janeiro. Years later, this experimental design enabled a medium-term evaluation (between 2010 and 2018) of the impact of attending public childcare centers on academic performance and educational trajectories. It relied on administrative schooling records.

In **Mexico**, a nationwide study was conducted to assess the quality of childcare services. The research evaluated both structural quality and quality of interactions (process quality) in public centers for children under age 3, using standardized tools to measure classroom dynamics and physical environment.

Following this diagnostic, and aiming to improve the quality of interaction in centers, the *Luciérnaga* (Firefly) program was developed. It is a mentorship strategy co-designed with educators and officials from the Mexican Social Security Institute (IMSS). The program is implemented in cycles of planning, observation, and feedback, centered on 12 prioritized practices to strengthen caregiver-child interactions. It includes a toolkit with guides, videos, and other resources for continuous training of female mentors and educational agents. A qualitative evaluation is currently underway to inform future scaling.

Also in Mexico, to improve educational quality in the Community Childcare Centers (CAICs) located in vulnerable areas, a pilot of the *aeioTU* model was launched. Inspired by the Reggio Emilia philosophy, *aeioTU*'s methodology considers the child as a protagonist of his own learning, emphasizing exploration, art, and play as pathways to holistic development. The pilot included virtual training, pedagogical coaching, and space adaptations to foster play, exploration, and active learning, as well as the creation of a methodological guide. However, the project was not fully completed due to shifting priorities among the partner organizations.



In **Panama**, in response to low-quality interactions in childcare centers, a training program for teachers and technical staff was implemented, also based on the *aeioTU* model. The content covered key areas for child development—such as educational planning, play, and family engagement— and included theoretical and practical modules to promote more intentional practices and enriched learning environments in the *Early Childhood Comprehensive Care Centers* (CAIPs). The program trained 29 teachers, 10 administrators, and 5 supervisors, who then instructed caregivers in 94 CAIP centers across the country using a cascade model.

In **Costa Rica**, to address the limited availability of childcare services and its impact on women's workforce participation, the *Gane Tr3s* public-private co-responsibility model was developed. The initiative introduced co-payment schemes among companies, employees, and other stakeholders, thereby expanding access to childcare. In addition to shared financing, technical assistance was provided to childcare centers, strengthening their pedagogical and managerial capacities through training. Based on a pre- and post-evaluation, the results of this experience have inspired the design of a shared-payment program for small and medium-sized enterprises in the country.

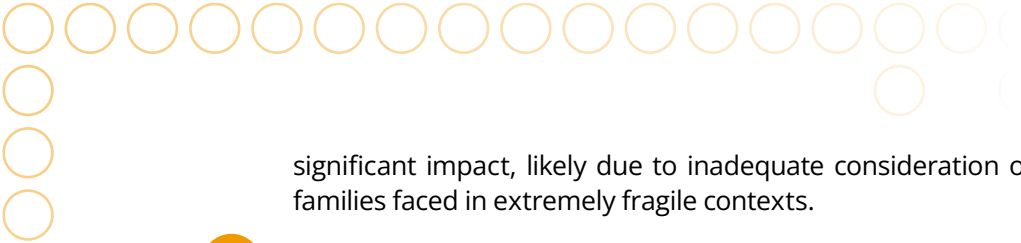


### **B3. Lessons Learned from the ECD Fund Projects**

The implementation and evaluation of the 23 ECD Fund projects generated valuable insights for improving services for children and their families in LAC. Below are some of the key lessons, related to both project content and implementation processes:


**1 Hybrid and remote modalities proved useful for scaling service delivery and reaching populations in challenging contexts.** Initially developed to maintain service continuity during the COVID-19 pandemic, these models improved access for families in remote, hard-to-reach, or emergency-affected areas. In several cases, positive impacts were observed. Projects reported changes in parenting and caregiving practices, parental behavior, and some child development outcomes. For instance, the evaluation of *Educuar con Equidad* (Educate with Equity) in Colombia found improvements in stimulation practices, caregiver mental health, and children's prosocial behavior, self-awareness, and cognitive learning. In Jamaica, the hybrid RUL model increased caregiver-child activities, yielding modest but statistically significant gains in fine motor skills and developmental quotient. In several of these experiences, the use of materials grounded in behavioral economics principles appeared to enhance effectiveness.

**2 Innovative delivery models—such as remote, hybrid, or group-based approaches—have the potential to expand service coverage but require adaptation to diverse contexts.** The ECD Fund experience suggests that without well-designed, context-sensitive implementation strategies focused on the needs of target populations, these models may not generate significant impacts. While such approaches allow for broader reach and lower costs, in highly vulnerable or complex settings, more intensive, comprehensive interventions—or complementary delivery mechanisms providing sustained support to beneficiaries— may be necessary. For instance, in Uruguay, a text message campaign improved preschool attendance among children with moderate absenteeism (25th–75th percentiles) but had no effect on those showing an extreme one (75th–100th percentiles). Similarly, in Brazil, the PIA program—based on group sessions promoting non-violent parenting—had no



significant impact, likely due to inadequate consideration of the multiple hardships families faced in extremely fragile contexts.

**3 Age-appropriate interventions—including those beginning in pregnancy—can yield important benefits for children and their families.** Some ECD Fund projects suggest that early interventions—during pregnancy or the neonatal period—can have positive effects on child development. In Boa Vista, for example, the RUL curriculum was adapted to include pregnancy and early postnatal support, which was associated with reduced infant mortality. In Uruguay, expanding the Crianza Positiva program to start in the second trimester of pregnancy was linked to maternal well-being (more outdoor activity and self-care)—suggesting greater uptake of paternity leave and, consequently, increased parental involvement in early childrearing. Together, these experiences highlight the importance of early support for families in promoting healthy child development.

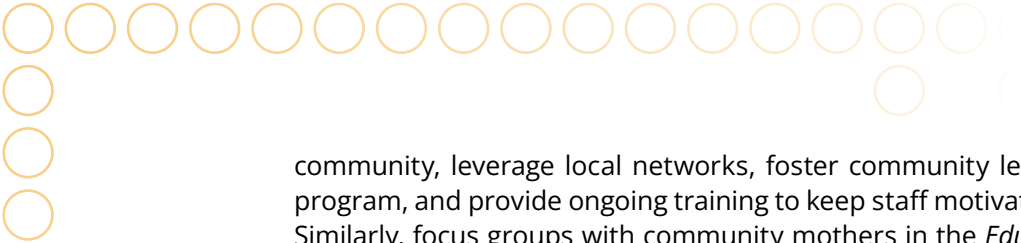


**4 Targeted diagnostics and censuses in specific populations have proven to be valuable tools for identifying relevant, tailored solutions to meet the needs of beneficiary groups.** The ECD Fund financed two diagnostic and data collection exercises that deepened the understanding of specific challenges and supported the development of context-appropriate responses aligned with local realities. These tools are essential for assessing situations, identifying key gaps, and designing suitable interventions—ultimately enhancing the efficiency and effectiveness of resource use. In El Salvador, for instance, two censuses shed light on the experiences of children growing up in households where one or both parents were absent due to migration. In Mexico, a diagnostic study evaluated the quality of services at childcare centers. Both exercises yielded critical insights that informed the design and implementation of entirely new programs tailored to these specific needs: *Tuchan* in El Salvador, and *Luciérnaga* in Mexico.

**5 Strategies such as co-creation, collaborative work, and iterative improvement cycles help refine project design and implementation.** These methodologies allowed for the systematic inclusion of input from a range of stakeholders—from technical teams to end users—and enabled adjustments to interventions based on their needs and experiences. In Mexico's *Luciérnaga* program, three successive cycles of prototyping, piloting, and refinement led to a user-centered solution tailored to different implementation levels. This approach also fostered stronger ownership by local teams and improved their responsiveness to on-the-ground realities. Similarly, in Colombia, the *Conectar para Educar* (Connect to Educate) initiative developed a technology-based training tool that incorporated feedback from teachers, educational agents, and community mothers, along with technical teams and experts. Through an iterative co-creation process and agile evaluation methods, the final version was more relevant, user-friendly, and better adapted to local needs and beneficiaries.

**6 Successful projects depend not only on knowing what to do, but also on how to do it—implementation is a key component.** Qualitative and process evaluations provide insight into the mechanisms behind interventions, helping refine strategies, identify relevant contextual factors, and uncover operational details critical to achieving expected results. In Colombia, such evaluations of the *Semillas de Apego* program revealed key scaling challenges, such as the need to tailor content to each





community, leverage local networks, foster community leaders' ownership of the program, and provide ongoing training to keep staff motivated and reduce turnover. Similarly, focus groups with community mothers in the *Educar con Equidad* project, also in Colombia, helped clarify the mechanisms behind observed changes—essential input for replicating the initiative elsewhere.

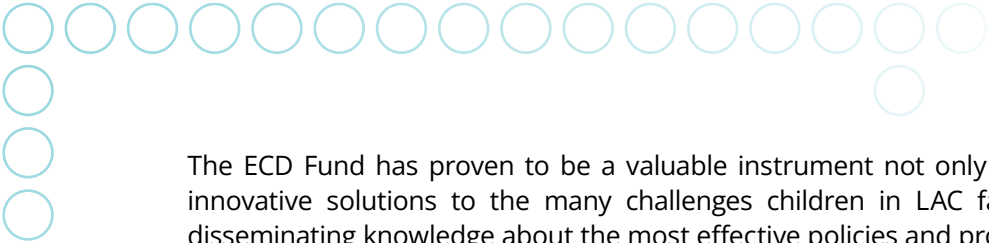
The ECD Fund's projects provide practical, evidence-based recommendations for ECD policies in the region. We are confident that this legacy will inform the design of more adequate policies that can be implemented more effectively.



# Chapter 3

**The ECD Fund's  
Strategic Contributions**

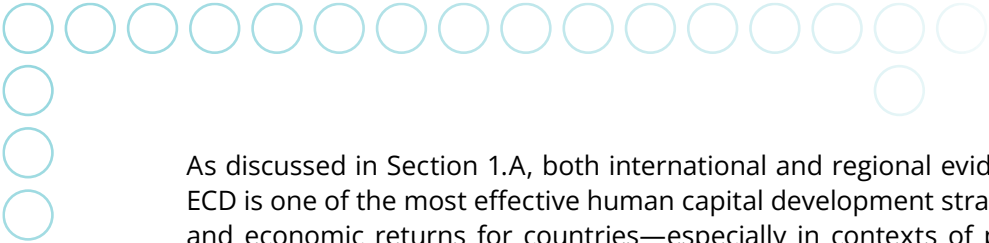




The ECD Fund has proven to be a valuable instrument not only for generating and replicating innovative solutions to the many challenges children in LAC face, but also for sharing and disseminating knowledge about the most effective policies and programs for closing gaps in child development. It has successfully brought together stakeholders from the public and private sectors, academia, and civil society across the region, helping to elevate the priority of this critical agenda.


As the Fund comes to an operational close, it is worthwhile to reflect on its key contributions:

- 
- **Promotion of strategic partnerships and an innovative financing model:** The ECD Fund has successfully structured strategic alliances among diverse actors—governments, civil society, the private sector, and multilateral organizations—towards a common goal: closing gaps in access to quality ECD services for the region's most vulnerable children and families, and to support their full developmental potential. It also stands out as a model for mobilizing and coordinating resources from multiple sources, combining financing from the IDB, private companies, NGOs, and other entities.
  - **Scalable solutions with replication potential:** The ECD Fund supported eight experimental evaluations to analyze the impact of innovative interventions—such as hybrid and remote service delivery—and to identify key elements for successful scaling. These evaluations generated new knowledge about the replicability and scalability of various approaches, expanding the range of solutions available to address ECD gaps in different contexts.
  - **A catalyst for public policy:** Several ECD Fund projects have informed the development of early childhood public policies across the region by strengthening interventions at every stage of the policy cycle: design, implementation, and evaluation. For example, based on findings from the impact evaluation of *Educación con Equidad* (Educate with Equity) in Colombia, the ICBF launched *Sanar para Crecer* (Heal to Grow), a new program aimed at promoting socioemotional skills development in early childhood. Likewise, in Mexico, the *Luciérnaga* (Firefly) model is being expanded within IMSS childcare centers.
  - **Dialogue and knowledge exchange:** The ECD Fund's dissemination platforms illustrate how partnerships can be leveraged to enhance regional dialogue on public policy. By building a network of ECD stakeholders, the COP provides a space where policymakers, academics, and service providers can share experiences, learn from one another, and explore opportunities to maximize results for young children in their countries and institutions. In parallel, the ECD Hub—a free, open-access knowledge repository—offers a unique platform in LAC for sharing insights and showcasing innovative programs.
  - **A space for innovation:** Projects that employ novel approaches or emerging technologies often involve greater risk due to the uncertainties inherent in innovation. However, the ECD Fund embraces this risk in pursuit of transformative, rather than guaranteed, outcomes. Its structure allows for investment in pilot projects, the development of prototypes, and the testing of disruptive technologies or unproven methodologies that could yield long-term benefits. Additionally, its flexible resource allocation enables real-time adjustments as projects evolve. By supporting solutions that have not yet been tested at scale, the ECD Fund assumes the necessary risks to drive meaningful and lasting change in early childhood development.



As discussed in Section 1.A, both international and regional evidence confirm that investing in ECD is one of the most effective human capital development strategies—with the highest social and economic returns for countries—especially in contexts of poverty and vulnerability. The early years of life, including the prenatal period, are critical for a child’s holistic development, and timely, high-quality interventions can yield sustainable benefits for their well-being, learning, and overall success in adulthood. Moreover, these policies not only impact children but also help promote gender equity and strengthen employment and caregiving opportunities within communities.

In this regard, the ECD Fund served as a valuable instrument for designing, testing, and scaling innovative solutions that respond to the specific needs of children and families in LAC. Through its projects, the ECD Fund demonstrated that a broad vision of innovation—one that prioritizes people, is based on evidence, and is rooted in collaboration—is essential for designing and implementing effective and relevant interventions. Diagnostic studies and censuses conducted allowed initiatives to be tailored to local realities; rigorous evaluations provided the evidence needed to refine and scale interventions; and strategic alliances strengthened the capacity for collective action.



Furthermore, the ECD Fund also acted as a strategic catalyst for advancing the ECD agenda in LAC. Over the course of its work, it not only mobilized resources and forged alliances across a range of stakeholders but also fostered the generation and dissemination of key knowledge to improve the quality, reach, and effectiveness of services for young children. With tools such as the COP and the ECD Hub, it laid the foundation for a regional ecosystem of collaboration, dialogue, and continuous learning among governments, academia, civil society, and the private sector. Its legacy demonstrates that investing in transformative solutions for early childhood is not only possible but essential for closing gaps and ensuring that all children can realize their full potential from the earliest years of life.





# Annexes

# Annex 1. Community of Practice Activities

**The Early Childhood Development (ECD) Community of Practice (COP) is an initiative that fosters knowledge exchange** and collaboration across sectors committed to early childhood. This network comprises more than 200 stakeholders—including government officials, NGOs, private sector representatives, researchers, implementers, and innovators from both the region and around the world. This diversity of actors allows for the perspectives of Latin America and the Caribbean (LAC) to be elevated on the global stage through regular meetings, content generation, and strengthened knowledge networks. Between 2022 and 2024, five COP sessions were held, as described below:

- 1 *Adaptability and Innovation: Keys to Quality Early Childhood Services (May 2022).*** Co-organized by all ECD Fund partners, this session was moderated by international expert Joan Lombardi, Adjunct Professor at the *Stanford Graduate School of Education*. It featured lessons learned on designing and implementing virtual and hybrid early childhood services in Brazil, Ecuador, Jamaica, and Panama as well as innovations developed in Peru. [\*Read the blog post summary here.\*](#)
- 2 *Caring for Young Migrant Children: Challenges, Opportunities, and Lessons Learned (October 2022).*** Co-organized by the IDB and the FEMSA Foundation, this session featured presentations about migrant children aged 0–5 and their families in LAC. Speakers included Felipe Muñoz, Head of the IDB’s Migration Unit; Eva Fernández, Social Investment Manager for Early Childhood at FEMSA; Brenda Campos, Senior Director of Social Impact at Sesame Workshop in Latin America; Paula Fernanda Rivero Díaz, National Officer for Prevention, Demobilization, and Reintegration at the International Organization for Migration (IOM); and Nancy Ramírez, Director of Policy Advocacy at *Save the Children Mexico*. [\*Read the blog post summary here.\*](#)
- 3 *Bridging Scientific Knowledge and Public Policy for Early Childhood: The Experience of Núcleo Ciência Pela Infância (NCPI) in Brazil (May 2023).*** Co-organized by the IDB, the Maria Cecilia Souto Vidigal Foundation, Porticus, and NCPI, this session focused on early childhood policy and issues in Brazil. Participants included Morgan Doyle, former IDB Representative in Brazil, and presentations by Priscila Costa, Head of Research and Innovation at NCPI, and Maria Beatriz Linhares, a researcher from NCPI’s Scientific Committee. The session concluded with group discussions. [\*Read the blog post summary here.\*](#)
- 4 *Turning Behavioral Insights into Action (October 2023).*** Co-organized by the IDB and the Van Leer Foundation, this event featured presentations by Florencia Attademo-Hirt, former IDB Southern Cone Department Manager, and Jesse d’Anjou, IDB Representative for the Netherlands, along with Sam Sternin from the Bernard van Leer Foundation. It also featured presentations on behaviorally informed interventions by Ana Luiza Colagrossi (Brazil’s *Familia+* program), Ana Balsa (Universidad de Montevideo, Uruguay), and Ivan Budassi and Paula Caccia (Behavioral Science Unit of Argentina’s Ministry of Economy). [\*Read the blog post summary here.\*](#)



5

***Challenging Inequalities: How to Close Early Childhood Development Gaps (November 2024).***

To commemorate World Children's Day, the IDB convened regional experts to discuss the challenges and urgent actions required to reduce inequalities affecting young children in the region. Speakers included Diana Rodríguez Franco, Special Advisor on Gender and Diversity to the IDB President; Mauricio Hernández Ávila, Director of Economic and Social Benefits of the Mexican Social Security Institute (IMSS); Eunice Deras, Executive Director of El Salvador's *Crecer Juntos* Institute; David Evans, former Lead Economic Advisor for the IDB Social Sector; Florencia López Boo, Director of *Global TIES for Children* at New York University; and Marta Rubio-Codina, Lead Economist and Early Childhood Development Specialist at the IDB's Social Protection and Labor Markets Division. [\*Read the blog post summary here.\*](#)

## Annex 2. Project List

Project Profile ID	Project Name	Country	Type of Intervention	Delivery Modality	Type of Evaluation	References and Relevant Links*
→ 1	<b>Hybrid and remote modalities of <i>Reach Up and Learn (RUL)</i> in Jamaica</b>	Jamaica	Family support	Hybrid and remote	Impact and qualitative evaluation	<a href="#">Smith et al. (2023)</a>
→ 2	<b>Parenting interventions in Boa Vista: Evaluation of a support modality through individual and group sessions</b>	Brazil	Family support	In-person: home visits and group sessions	Impact evaluation	<a href="#">Brentani et al. (2020)</a>
→ 3	<b><i>Primeira Infância Acolhida (PIA)</i>: A low-cost program for non-violent parenting in Pelotas, Brazil</b>	Brazil	Family support	In-person: group sessions	Impact evaluation	<a href="#">Murray et al. (2024)</a>
→ 4	<b><i>Semillas de Apego</i>: Scaling- up a maternal mental health program to promote child development in areas affected by armed conflict and forced displacement in Colombia</b>	Colombia	Family support	In-person: group sessions	Process and scale-up evaluation	<a href="#">Semillas de Apego</a>
→ 5	<b>Childhood in Motion: Care models for migrant children</b>	Colombia	Family support	In-person: physical spaces and digital tools	Process evaluation	<a href="#">ECD Hub Repository "Oportunidades significativas de desarrollo y aprendizaje para los niños venezolanos y sus familias"</a>
→ 6	<b><i>Educuar con Equidad</i>: Promoting social and emotional learning in early childhood in Colombia</b>	Colombia	Family support (in center)	Hybrid	Impact evaluation	<a href="#">Näslund-Hadley et al. (2024)</a>
→ 7	<b><i>Conectar para Educar</i>: Innovation for early childhood education in Colombia</b>	Colombia	Family support	Hybrid	Qualitative evaluation	<a href="#">ECD Hub Repository "Connect to Educate"</a>



→ 8	Using Technology to support parents: Remote <i>Programa de Acompañamiento Familiar</i> in Uruguay	Uruguay	Family support	Remote	Impact evaluation	<a href="#">Bloomfield et al. (2025)</a>
→ 9	Leveraging Technology to Strengthen Pregnancy and Parenting in Uruguay: <i>Embarazo Positivo</i> and <i>Crianza Positiva</i>	Uruguay	Family support	Hybrid	Impact evaluation	<a href="#">Balsa et al. (2023)</a>
→ 10	Children raised by grandparents in El Salvador: A census to understand family structures and needs	El Salvador	Family support (associated with Project Profile 12)	NA	Diagnostic	<a href="#">First Steps blog post "Niños criados por sus abuelos"</a>
→ 11	The Impact of Parental Migration on Early Childhood Development in El Salvador	El Salvador	Family support	NA	Diagnostic	NA
→ 12	<i>Tuchan</i> : A remote family support program to strengthen parenting practices in skipped-generation households in El Salvador	El Salvador	Family support	Remote	Impact evaluation	<a href="#">ECD Hub Repository "Tuchan (Nuestro hogar): Niños criados por sus abuelos"</a>
→ 13	<i>Empodera tu Mente en Familia</i> : Fostering a growth mindset in El Salvador	El Salvador	Family support	Hybrid	Impact evaluation	<a href="#">Innovations for Poverty Action project profile: "Evaluación del desarrollo de la mentalidad de crecimiento en padres e hijos en El Salvador"</a>
→ 14	Purposeful messaging: how a digital campaign supported child development in Guatemala	Guatemala	Family support	Remote	Impact evaluation	<a href="#">ECD Hub Repository "Childhood First &amp; DON - Desarrollo de la primera infancia durante la pandemia de COVID-19"</a>
→ 15	<i>Juega Todos los Días</i> : hybrid family support to boost ECD through play in México	Mexico	Family support	Hybrid	Impact evaluation	<a href="#">Berlanga et al. (2023)</a>



→ 16	Strengthening parenting and child development in Mexico: Evaluation of the <i>Bebés Más Fuertes y Desarrollo Óptimo en Niños</i> programs	Mexico	Family support	Remote	Impact evaluation	<a href="#">ECD Hub Repository</a> <a href="#">"Estudio regional de educación y salud mental a distancia en Guatemala"</a>
→ 17	Attendance and quality in preschool education in Uruguay: Empowering parents through information	Uruguay	Center-based	Remote	Impact evaluation	<a href="#">Ajzenman et al. (2022)</a>
→ 18	Medium-term impact of access to childcare centers: Experimental evidence from Rio de Janeiro	Brazil	Center-based	In-person	Impact evaluation	<a href="#">Carneiro et al. (2021)</a>
→ 19	A snapshot of the quality of childcare centers and the state of child development in Mexico	Mexico	Center-based (associated with Project Profile 20)	NA	Diagnostic	<a href="#">Rubio-Codina et al. (2021)</a>
→ 20	Mentorship program to promote quality caregiver-child interactions: Lessons from the <i>Luciérnaga</i> program in Mexico	Mexico	Center-based	Hybrid	Process and qualitative evaluation	<a href="#">Ríos-Salas et al. (2024)</a> <a href="#">Programa Luciérnaga</a>
→ 21	Implementing the <i>aeioTU</i> educational model in Mexico's Community Childcare Centers (CAICs)	Mexico	Center-based	Presencial	Qualitative evaluation	<a href="#">ECD Hub Repository</a> <a href="#">"Llevar a escala la red de aeioTU en México"</a>
→ 22	Strengthening early childhood care: Training program in Early Childhood Care Centers (CAIPs) in Panama	Panama	Center-based	Presencial	Qualitative evaluation	<a href="#">Freire et al. (2020)</a>
→ 23	<i>Gane Tr3s</i> : Public-private co-responsibility to improve the quality of childcare centers and women's workforce participation in Costa Rica	Costa Rica	Center-based	In-person	Qualitative evaluation	<a href="#">ECD Hub Repository</a> <a href="#">"Gane-Gane-Gane"</a>

\* The references and links column includes academic articles on the projects when available. Otherwise, it provides access to project websites, blog posts, the ECD Hub, and other relevant resources. NA (Not applicable): refers to information that is not available or not applicable to the type of project.



Annex 3.

**Project Profiles**

## Hybrid and Remote Modalities of Reach Up and Learn (RUL) in Jamaica



### MOTIVATION

*Reach Up and Learn (RUL)* is a program designed to equip caregivers of children aged 0 to 4 in vulnerable households with the knowledge, skills, and resources needed to support early development. It also aims to foster self-esteem in both children and their caregivers. The program consists of home visits conducted by a facilitator, who demonstrates age- and developmentally appropriate play and language activities to the primary caregiver, following a structured curriculum. Materials used include low-cost homemade toys, picture books, and conversation prompts, among others. RUL is based on the well-known home visiting intervention developed in Jamaica, which has been later adapted and evaluated in other countries (Grantham-McGregor & Smith, 2016; Jervis et al., 2023). Its original implementation in Jamaica showed that short-term gains in cognitive and language development (Grantham-McGregor et al., 1991) persist into adulthood (Walker et al., 2011; 2022), with positive impacts on academic and labor market outcomes, including higher earnings (Gertler et al., 2021).

In 2019, the Jamaican Ministry of Health and Wellness began rolling out RUL through primary health care centers, with the goal of gradually reaching national coverage. By March 2020, the program was operating in 6 of the country's 14 districts.



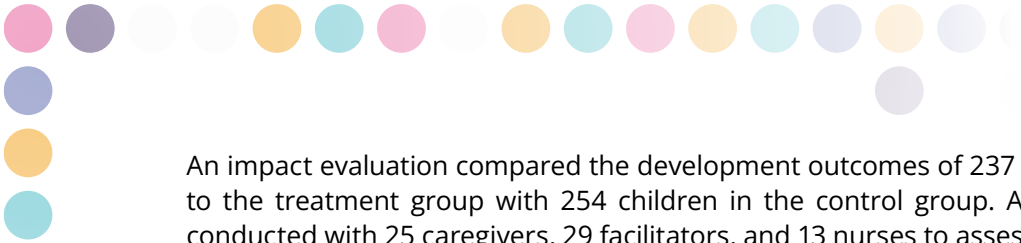
### PROJECT

With the onset of the COVID-19 pandemic, the program was suspended and, beginning in September 2020, shifted to a remote modality: biweekly home visits were replaced with biweekly phone calls from facilitators, accompanied by weekly text messages to reinforce contents discussed during the calls. A *Parent's Manual* was also developed to guide caregivers during the calls. The manual provides play and language activities organized in three-months age bands, prioritizing core RUL activities that require minimal or no materials and can be carried out as part of daily routines (Rubio-Codina & Lopez Boo, 2022). Evaluation of the remote modality showed good acceptance among both caregivers and facilitators—despite some missing the in-person contact—and a 0.34 standard deviations (SD)<sup>5</sup> increase in caregiver-child play activities, as measured by the Family Care Indicators (FCI) based on caregiver reports (Smith et al., 2023).

In 2022, the Ministry of Health and Wellness, in collaboration with the University of the West Indies, developed and implemented a hybrid model combining in-person and remote sessions. Facilitators alternated between biweekly phone calls and home visits, delivering materials during the in-person visits. Caregivers also received the Parent's Manual and weekly reinforcement text messages. The intervention was implemented in municipalities across 12 of Jamaica's 14 districts (3 urban and 9 rural).

<sup>5</sup> Standard deviations (SD) measure how dispersed data values are within a distribution relative to the mean. While SD may be an unintuitive unit for expressing impact, it enables comparisons of effect sizes across different studies or populations. For instance, the effect size of the original home visiting intervention in Jamaica (Grantham-McGregor et al., 1991) is at least three times greater than that of any subsequent implementation of RUL or similar interventions in Latin America and the Caribbean.






An impact evaluation compared the development outcomes of 237 children randomly assigned to the treatment group with 254 children in the control group. A qualitative study was also conducted with 25 caregivers, 29 facilitators, and 13 nurses to assess their experiences with the hybrid modality.



## FINDINGS

According to a preliminary report, the hybrid modality yielded modest but significant benefits in developmental quotient (0.17 SD) and fine motor skills (0.20 SD), as measured by the Griffiths Scales of Mental Development.<sup>6</sup> It also found improvements in the home environment (0.27 SD)—understood as the quality and quantity of stimulation and support a child receives at home, measured by the Home Observation for Measurement of the Environment (HOME)—and in parenting practices (0.18 SD), as measured by the FCI. These findings are encouraging, suggesting that hybrid modalities—when leveraging health system resources and capabilities—can offer scalable and effective programs to support families.



The evaluation also highlighted several implementation challenges, including inconsistent support for facilitators, training gaps due to staff turnover, and fewer caregiver-family contacts than originally planned. Notably, while the cost of the hybrid program (US\$245) was equivalent to the in-person version, its impacts in comparable areas were significantly lower—for example, fine motor skills (0.17 vs. 0.27 SD) and home environment (0.27 vs. 0.37 SD).<sup>7</sup>

<sup>6</sup>The developmental quotient in the Griffiths test is analogous to an intelligence quotient (IQ) or a mental development index.

<sup>7</sup>Program costs were estimated using facilitators' hourly wages. Home visits were assumed to last one hour, plus 30 minutes for travel time. Phone calls lasted approximately 30 minutes and required no travel. The caregiver-to-facilitator ratio was kept constant across both modalities. While in-person visits involved higher labor costs due to longer time commitments, these are offset by the additional expenses of phone calls, text messaging, and manuals in the remote component of the hybrid modality.



## Parenting Interventions in Boa Vista: Evaluation of a Support Modality through Individual and Group Sessions



### MOTIVATION

Despite progress in reducing child mortality over the past 25 years, neonatal health and malnutrition—both closely tied to child poverty—remain critical challenges in Latin America and the Caribbean. In 2021, the under-5 mortality rate in the region was 12.9 per 1,000 live births; and in Brazil it reached 15.5 per 1,000 (PAHO, 2024). According to data from the National Survey on Infant Feeding and Nutrition (ENANI), undernutrition is most prevalent among children aged 0 to 11 months (9%) and 12 to 23 months (10.2%). Stunting is also highest among those aged 0 to 11 months (5%) compared to 3% in children under 5 overall (de Albuquerque et al., 2024).

The state of Roraima, in Brazil northwest, is no exception. Despite progress between 2019 and 2023, child and adolescent poverty levels remain alarmingly high and above the national average<sup>8</sup> (UNICEF, 2025). Growing up in conditions of poverty, malnutrition, poor health, and unstimulating environments has harmful and lasting negative effects on cognitive, motor, and socio-emotional development (Walker et al., 2007). Children in such conditions are more likely to experience poor academic outcomes and lower earnings in adulthood, perpetuating the transmission of intergenerational poverty.





### PROJECT

From 2017 to 2021, the *Survive and Thrive* (S&T) program was implemented in Boa Vista, the capital of Roraima, with the goal of reducing child mortality and improving development of children aged 0 to 36 months. The program was based on the adaptation of the [Reach Up and Learn](#) (RUL) curriculum to the Brazilian context (see Project Profile 1) and delivered in two modalities: home visits and group sessions with 6-10 caregiver-child dyads held in social service centers (CRAS). Locally appropriate toys were designed and adapted and left with families to encourage continued interaction between sessions. Social workers facilitated both modalities.

S&T introduced two major innovations relative to the original RUL model. First, the design of a group-based modality with greater potential for service scalability. In this format, each facilitator could support up to 240 caregivers biweekly, compared to 40 through individual home visits over the same period. Second, the program included a specific module for women starting in the second trimester of pregnancy, covering breastfeeding, early bonding, and maternal mental health.

To measure the impact of both delivery modalities, a phased design was used. Forty-two neighborhoods with high levels of poverty and vulnerability were randomly assigned to receive either home visits or group sessions at CRAS centers across three successive years (Year 1, Year 2, Year 3). In each phase, women in neighborhoods not yet assigned to a treatment group served as the control group. Eligibility required meeting at least one of the following conditions: (i) being

<sup>8</sup>The multidimensional poverty rate among children and adolescents in Brazil decreased from 59.5% in 2019 to 55.9% in 2023.




a mother under 20; (ii) experiencing domestic violence; (iii) receiving Bolsa Familia cash transfers; or (iv) belonging to a household with income below one-quarter of the national minimum wage.



## FINDINGS

The impact evaluation, based on administrative data and child development assessments, yielded mixed results. National systems for live births (SINASC) and mortality (SIM) were used to assess child survival. Child development was measured using the Caregiver Reported Early Development Index (CREDI) and the *Proyecto Regional de Indicadores de Desarrollo Infantil* (PRIDI). The home visit modality showed positive effects, with a 0.3 SD improvement in child development (PRIDI) and a significant reduction in neonatal mortality, with a risk ratio of 0.57 compared to the control group (1.00).

In contrast, the group session modality did not show significant impacts on either child development or neonatal survival. Qualitative evaluations suggest that implementation barriers—such as high dropout rates and difficulties maintaining small facilitator-to-caregiver ratios—may have limited its effectiveness. Only 12% of caregivers attended more than five sessions, and fewer than 5% more than ten. Qualitative data from participant interviews indicate that transportation costs to the centers were a key reason for the high dropout rates.



IP

## ***Primeira Infância Acolhida (PIA):*** **A Low-Cost Program for Nonviolent Parenting in Pelotas, Brazil**



### **MOTIVATION**

Persistent exposure to aggression in early childhood is a key predictor of violent behavior later in life (Moffitt, 2018; Murray et al., 2018). UNICEF (2017) estimates that 300 million children aged 2 to 4 worldwide are subjected to violent parenting practices by their primary caregivers. In five LAC countries, an average of 56% of children are regularly exposed to physical and/or psychological violence as a form of discipline<sup>9</sup> (IDB, 2024).

Recent studies suggest that family support programs that help caregivers recognize and change harmful parenting behaviors can significantly benefit child development (Jeong et al., 2021). However, most evidence comes primarily from high-income countries, with interventions that are often too costly to replicate in regional contexts (Mejia et al., 2017).



### **PROJECT**

In 2018, the city of Pelotas (Rio Grande do Sul, Brazil) launched the *Primeira Infância Acolhida* (Welcomed Early Childhood, PIA) initiative—a partnership involving the municipal government, the IDB, the Maria Vidigal Souto Foundation, FEMSA Foundation, and researchers from the *Universidade Federal de Pelotas* and the *Instituto Cidade Segura*. The goal was to provide evidence on the effectiveness of two independent short-term and relative low-cost (given their group-based nature) interventions aimed at helping caregivers eliminate violent parenting practices and reduce aggressive children's behavior.

The first intervention, *Dialogic Book-Sharing* (DBS), promoted by the World Health Organization (WHO, 2022), aims to strengthen caregiver-child interaction, as well as sensitivity and responsiveness to children's needs. It involves weekly group sessions over eight weeks, where caregivers share picture books with their children and receive feedback from a tutor. Community workers are trained as tutors by mentors instructed in the methodology.

The second intervention, *ACT Raising Safe Kids*, consists of nine weekly group sessions for caregivers only (without children). Participants receive guidance on child development stages, emotional regulation strategies, positive communication techniques, and problem-solving skills. Sessions were led by trained pairs of facilitators with at least a college education in related fields (psychology, educational psychology, etc.).

A total of 369 children and their primary caregivers participated. All were from low-income urban households with a high prevalence of violent parenting practices. Participants were randomly assigned to one of three groups: 124 to the DBS program, 123 to ACT, and 122 to a control group. Impacts were measured in the short term (8 months after the intervention) and medium term (3 to 4 years later).

<sup>9</sup>The calculation includes Argentina (2019–2020), Ecuador (2018), Honduras (2019), Mexico (2021), and the Dominican Republic (2019).



## FINDINGS

According to the evaluation results, neither intervention—DBS nor ACT—produced significant effects in reducing aggressive behavior in children, either in the short or medium term, as measured using the aggression subscales of the Childhood Behavior Checklist (CBCL) and the aggressive behavior questionnaire from the *Étude Longitudinale du Développement des Enfants du Québec* (ELDEQ). No changes were observed in other behavioral issues (e.g., hyperactivity, prosocial behavior), as assessed by the Strengths and Difficulties Questionnaire (SDQ), or in language development, measured using the Brazilian Test of Receptive and Expressive Vocabulary. Likewise, there were no impacts on violent parenting practices<sup>10</sup> or caregiver stress indicators, evaluated through two researcher-developed questionnaires and hair cortisol analysis (Murray et al., 2024; preliminary internal report).

Researchers suggest that the extreme vulnerability of participating families may help explain the program's lack of impact. They recommend implementing more comprehensive interventions that address structural factors—such as access to basic services, nutrition, health, and education—alongside targeted efforts to reduce household violence, like those included in the PIA program.

<sup>10</sup>Parenting practices—both positive and harsh—were assessed using caregiver-completed questionnaires, video recordings of parent-child interactions during structured and free play tasks, and shared reading activities between caregiver and child.

IP

# ***Semillas de Apego: Scaling Up a Maternal Mental Health Program to Promote Child Development in Areas Affected by Armed Conflict and Forced Displacement in Colombia***



## **MOTIVATION**

The well-being and mental health of mothers, fathers, and other caregivers at home are essential to child development (Evans et al., 2021; Lieberman et al., 2011). Exposure to armed conflict and forced displacement can have severe consequences for children's mental health and development. A nurturing and responsive environment can buffer children from toxic stress and foster conditions that make stress tolerable. However, few initiatives have addressed these issues in a structured manner. In Colombia, by the end of 2023, 8.6 million people had been internally displaced due to armed conflict—18% of the national population—making it the country with the highest number of internally displaced persons globally (Unidad para las Víctimas, 2024).





## **PROJECT**

*Semillas de Apego* (Seeds of Attachment) emerged in response to this challenge, offering a community-based psychosocial support model for mothers, fathers, and other caregivers of children aged 0 to 5 living in contexts of conflict, violence, and forced displacement. The program provides a space for reflection and tools to process these experiences, strengthen emotional regulation, and recognize personal resilience. Its curriculum was developed by experts from the Universidad de los Andes in partnership with the Child Trauma Research Program at the University of California San Francisco (UCSF), and adapted to the Colombian context based on two of its interventions: *Child-Parent-Psychotherapy* (Lieberman et al., 2005) and Building Bridges (Reyes & Lieberman, 2012). These were tailored through semi-structured interviews and focus groups with displaced women, along with teams from the Victims' Unit, the Ministry of Health and Social Protection, and the Bogota Mayor's Office.

The initiative consists of 15 weekly sessions, each lasting 90 minutes, delivered in groups of 15 participants led by two community facilitators. It aims not only to improve maternal mental health as a goal but also to serve as a key mechanism to strengthen emotional bonds and promote child development. The approach is rooted in the need to break the intergenerational transmission of trauma and poverty—challenges exacerbated by prolonged violence, displacement, and social instability.

Between 2018 and 2022, the program was implemented and evaluated in Tumaco (Nariño), one of the municipalities most affected by armed conflict. Its impact was assessed through a randomized controlled trial involving 1,372 mothers, fathers, and other caregivers of children aged 2 to 5 attending 18 childcare centers (CDIs) in the urban area. Half of the CDIs were assigned to a treatment group—where primary caregivers were invited to participate in *Semillas de Apego* in addition to receiving regular services—and the other half formed the control group, receiving only the standard services. Eight months after the program began,





significant improvements were observed in the mental health of mothers and children, as well as in child development outcomes—particularly among displaced participants and those with more severe symptoms at baseline (Moya et al., 2024).

To evaluate its potential for scale-up, in 2022 the ECD Fund supported a mixed-methods study to identify factors that could affect the program's expansion and impact in other settings. The qualitative analysis was based on semi-structured interviews with 24 members of the implementation team—both technical staff and the operational partner—to identify challenges related to program fidelity, acceptability, relevance, and feasibility. The quantitative analysis drew on indicators of attendance, participant engagement, and session fidelity and quality, collected as part of the routine monitoring process. The program was rolled out in four municipalities (Barranquilla, Soledad, Jamundí, and Tumaco), reaching 894 households across two cohorts per municipality. Implementation followed a cascading model: adaptation, guidance, and oversight were led by the teams from Universidad de los Andes and UCSF, while operational management was handled by Heartland Alliance International. This partnership enabled an assessment of the capacity transfer process to a third party and the challenges of scaling up.



## FINDINGS

The scale-up process faced multiple challenges. A key one was adapting the program to communities with different demographic and socio-cultural characteristics than Tumaco, which required adjustments to ensure community acceptance.

Local infrastructure was another obstacle. A shortage of suitable spaces and limited local networks hampered delivery. To address this, partnerships were established with local operators and community leaders, facilitating access to safe venues and encouraging community participation.

Staff turnover was another major challenge. High facilitator mobility and administrative burdens affected continuity and training. To mitigate this, an apprentice model was introduced: participants from previous cohorts took on supervisory roles, strengthening the community-based nature of the program and helping ensure its sustainability.

Monitoring and evaluation efforts were limited by the absence of a real-time management information system, which hindered implementation tracking. In addition, some self-reported indicators were influenced by participant expectations.

Lessons from this experience underscore the importance of contextualized planning, ongoing training and support to motivate and retain staff, and a robust monitoring system as essential conditions for ensuring the effectiveness and sustainability of maternal mental health and ECD programs in highly vulnerable settings.

# IP Childhood in Motion: Care Models for Migrant Children



## MOTIVATION

The humanitarian crisis in Venezuela has triggered an unprecedented wave of migration. In 2024, an estimated 2.8 million Venezuelans were living in Colombia—25% of whom were children and adolescents (Colombian Ministry of Foreign Affairs, 2024). Among them, the so-called *caminantes*—migrant families traveling long distances on foot under extremely vulnerable conditions—face malnutrition, toxic stress, violence, and severe economic deprivation, all of which directly affect child development.

Early childhood is a critical period for cognitive and emotional growth. However, most services available along migration routes are typically designed for adults and fail to address the specific needs of young children (UNICEF, ODI, 2023). Services aimed at promoting early stimulation or facilitating access to essential resources for children in transit are largely absent.



## PROJECT

To address this gap, the IDB, together with the Presidential Agency for International Cooperation of Colombia (APC-Colombia) and UNICEF, launched a project aimed at providing safe learning spaces and comprehensive support for migrant children and their families.

The care strategy combined the creation of *Espacios Amigos de la Infancia* (Child-Friendly Spaces, EAls) at strategic points along the migration route with the use of digital tools to support families in transit with children aged 0 to 5. The EAls provided safe environments where children received early stimulation, psychosocial support, and educational materials designed to foster development. Trained teams staffed these spaces, identifying needs and strengthening socioemotional skills in both children and their caregivers (UNICEF & ODI, 2023).

The project also developed and distributed an *Early Childhood Development Support Kit*, which included pedagogical materials and caregiver self-care tools. In addition, a digital platform was created with interactive content on parenting and early stimulation to provide migrant families in transit with access to vital information.



## FINDINGS

The project established six permanent EAls, 28 mobile EAls, and seven traveling units (*Chiquivans*) enabling outreach to families actively on the move. In total, the initiative benefited 15,000 migrant children and 30,000 caregivers, including pregnant and breastfeeding mothers. While most beneficiaries were of Venezuelan origin, services also reached children of other nationalities—primarily Colombian returnees and other migrants in transit.

The project yielded key lessons for future interventions in migration contexts. Combining physical spaces with digital tools broadened both reach and effectiveness. Adapting materials to the realities of mobile populations proved essential to their usability. However, the experience also underscored the need to strengthen coordination with local and national actors to ensure the sustainability of such models (UNICEF & ODI, 2023).



## Educación con Equidad: Promoting Social and Emotional Learning in Early Childhood in Colombia



### MOTIVATION

Socio-emotional skills—such as empathy, teamwork, goal-setting, and emotional regulation—are largely shaped during early childhood and are essential for academic success, mental health, and future employability. In Colombia, these abilities are recognized as key drivers of school performance and labor market integration (Cunningham et al., 2016). However, their development can be hindered by prolonged exposure to violence—including armed conflict, gangs, and organized crime—especially when coupled with the absence of nurturing emotional bonds. This combination results in toxic stress (Center on the Developing Child, 2018), which affects mental health, brain architecture, and children's cognitive and socio-emotional development, with long-lasting consequences for human capital formation (Currie & Stabile, 2006; Heckman, 2006).



### PROJECT

To address this challenge, the Colombian Social Welfare Institute (ICBF) supported the implementation of *Educación con Equidad* (Educate with Equity), an adaptation of *Think Equal*. Developed by experts in education, psychology, human rights, and neuroscience in collaboration with the Yale Center for Emotional Intelligence (YCEI), *Think Equal* has been implemented in over 13 countries. It targets caregivers of children aged 3 to 6 and fosters skills such as empathy, resilience, self-regulation, self-awareness, critical thinking, prosocial behavior, and peaceful conflict-solving to promote equity, empathy, and well-being from the earliest years (*Think Equal*, 2018).

The curriculum is grounded on the Collective Narrative Model, which draws on children's individual personal stories to build a shared, hopeful group narrative through collaborative learning. The program is structured into three levels, each containing 22–24 picture books, 90 lesson plans, and associated materials. It is delivered over 30 weeks, each one beginning with a storybook and three 30-minute lesson plans.

In Colombia, *Educación con Equidad* was implemented in Community Welfare Homes (HCBs)—home-based childcare centers run by so-called “community mothers”—located in Antioquia, Bolívar, Córdoba, Magdalena, and Sucre, regions historically affected by armed conflict or gang activity. The *Fundación Escuela Nueva* (New School Foundation) led a comprehensive review of materials to adapt the program linguistically and culturally to the local context. During the COVID-19 pandemic, the program was redesigned as a hybrid model that combined in-person sessions at HCBs with remote activities. This version involved community mothers in distributing digital materials and actively engaged caregivers in implementation. Weekly digital content included: (a) an audiobook for children, (b) audio guides to support caregiver-led activities, and (c) infographics for caregivers.

The program's impact was evaluated using a clustered randomized trial, with 181 centers assigned to the treatment group and 182 to the control group, involving a total of 1,471 children and 1,222 primary caregivers.



## FINDINGS

The impact evaluation found positive effects on children's cognitive development (0.15 SD), measured using the Caregiver Reported Early Development Instrument (CREDI); prosocial behavior (0.14 SD), measured using the Strengths and Difficulties Questionnaire (SDQ); and self-awareness (0.13 SD), assessed and categorized through the Measuring Early Learning Quality and Outcomes (MELQO) survey protocol (Näslund-Hadley et al., 2024).

The program also had a positive effect on community mothers, who showed increased empathy (0.25 SD), measured with the Emotional Intelligence Index (EII), and improved pedagogical practices (0.27 SD), based on an index capturing communication skills, emotional support, discussions about feelings, and reading activities with children. Caregivers also reported improved parenting practices (0.36 SD), measured with the Family Care Indicators (FCI), and reductions in negative mental health symptoms (-0.14 SD), mirrored by similar improvements among community mothers (-0.22 SD), as measured by the *PULSO* questionnaire by Colombia's National Statistics Department (DANE).

A qualitative evaluation based on focus groups suggests that the active involvement of caregivers and the strengthened relationships with community mothers were key drivers of the program's success.

## Conectar para Educar: Innovation for Early Childhood Education in Colombia



### MOTIVATION

Providing quality early education is a persistent challenge, particularly in contexts where face-to-face interaction with young children and their families is limited. Data from five countries in the region—Argentina, Ecuador, Honduras, Mexico, and the Dominican Republic—shows that children in rural areas grow up in less stimulating environments, with limited access to children's books and learning activities (IDB, 2024). These disparities in the quality of the home environment influence ECD outcomes.

For example, comparable data from Ecuador and Mexico reveal significant language development gaps between children in rural and urban areas: from less than a two-month delay at age two to more than 16 months by age five (IDB, 2024). These differences likely reflect broader developmental delays, as language is a reliable indicator of overall child development (Rubio-Codina et al., 2016). The COVID-19 pandemic further highlighted and deepened the need to strengthen pedagogical practices in low-connectivity settings and to improve the training of early childhood education personnel.



### PROJECT

To address these challenges, the Presidential Council for Children and Adolescents, the Ministry of National Education (MEN), the Colombian Social Welfare Institute (ICBF), and the IDB launched the *Conectar para Educar* (Connect to Educate) initiative. This intersectoral collaboration provided a more robust structure thanks to joint efforts between technical teams from various government agencies and education experts.

*Conectar para Educar* combines a multimodal pedagogical model with a technology-based tool to improve early childhood workforce training, strengthen family interactions, and provide flexible and accessible educational resources.

The multimodal strategy uses a variety of communication channels—WhatsApp, radio, posters, and printed materials—to deliver activities and resources that support children's development at home. Through a participatory process with local communities, content is adapted to ensure cultural relevance and practical applicability.

The training digital tool—co-designed with teachers, educational agents, and community mothers—was developed through multiple prototyping-piloting-adjusting cycles. It offers flexible training courses through microlearning, online events, and access to an educational resource bank. This collaborative design approach helped ensure the tool's relevance and improve its usability.

From March to September 2022, a pilot program was conducted with 125 educational agents in five rural Colombian municipalities to assess the effectiveness of *Conectar para Educar* and

its implementation strategy in the field. Through two iterative cycles of prototyping- piloting- adjusting, the program design was validated, and key lessons were identified.



## FINDINGS

The first pilot cycle helped define the program's theory of change, establishing the relationship between activities and expected outcomes, and identifying key factors affecting implementation. Interviews and cognitive testing were carried out to assess users' experience, identifying points of satisfaction and challenges encountered by early childhood personnel, including teachers, educational agents, and community mothers, when interacting with the digital tool. The need to improve users' feedback, strengthen their digital skills, and simplify activity language were some of the key elements identified for improvement. Based on these findings, adjustments were made to the platform's structure, content, and accessibility. The pilot also identified strategies to integrate *Conectar para Educar* with territorial teams, leveraging the specific service delivery structures of MEN and ICBF.



## R

## Using Technology to Support Parents: Remote *Programa de Acompañamiento Familiar* in Uruguay



### MOTIVATION

Programs that support families and strengthen parenting skills—such as home visiting initiatives—have proven effective in various contexts when implemented at a small or medium scale (Leer et al., 2016). However, scaling them cost-effectively remains a challenge. One strategy to increase scalability is the use of technology—such as phone calls, text messages, and chatbots—which allows standardized delivery to a larger number of beneficiaries without substantially increasing costs. Despite their potential, tech-based remote interventions have sometimes shown less significant and lasting impacts than expected (Balsa et al., 2022).



### PROJECT

At the onset of the COVID-19 pandemic, Uruguay's Ministry of Social Development (MIDES) had to suspend its in-person *Programa de Acompañamiento Familiar* (Family Support Program, PAF)—which provided home visits to parents of children aged 0 to 3 in vulnerable situations—due to public health restrictions. Meanwhile, demand for the program exceeded its capacity. To address both issues, MIDES, in collaboration with an interdisciplinary team of psychologists, speech therapists, and behavioral economists, developed a teleassistance model—Remote PAF—to ensure program continuity during the pandemic and expand access to families on the waiting list.

The program consists of two four-month thematic modules. The first offers general parenting guidance on health, nutrition, protection, stimulation, and caregiver self-care, along with personalized information on available social programs and how to access them. The second focuses on activities and guidance to promote children's language development.

The intervention's main innovation lies in the integration of diverse technologies for implementation. Components include weekly phone calls by MIDES teleoperators; personalized WhatsApp messages delivered to caregivers three times a week, which are tailored to the child's age, gender, and name and to those of her caregiver; a WhatsApp chatbot that provides general information and facilitates communication between the research team and families; and an AI tool that decodes WhatsApp voice messages and provides feedback on caregiver-child activities. Every two weeks, caregivers are asked to send a voice recording of caregiver-child interactions.

Participants were randomly selected from 1,360 families who expressed interest in the program. Of these, 851 were assigned to the treatment group (Remote PAF) and 509 to the control group.



### FINDINGS

The program was well received. Ninety percent of participating families found the chatbot helpful for accessing parenting and language stimulation guidance, and 75% used it to obtain

information about local services (e.g., health and childcare centers) (Bloomfield et al., 2025). Teleoperators also reported that the tool improved communication, especially in rural areas.

After four months, significant increases were observed in access to social benefits (0.30 SD) and employment programs (0.23 SD) among families in the treatment group. At eight months, the program showed positive effects on parenting and well-being: increased caregiver engagement (0.19 SD, measured by the StimQ index); improved knowledge of language stimulation (0.15 SD, based on self-reported responses); reduced parental stress (0.19 SD, based on the Parenting Stress Index); and enhanced caregiver well-being (0.16 SD), measured by a composite index combining CESD-10 depression risk, WHO-5 scores, and questions from McConkey's (2020) well-being scale.

The program was especially effective in households experiencing higher initial stress. The chatbot proved most useful among families with higher educational levels and those displaying behavioral biases—such as present bias (difficulty valuing future benefits of current actions) and cognitive fatigue. These factors can hinder caregiver–child bonding, parental investment, and child development.

Findings suggest that a combination of technologies—such as guided messaging and phone calls—can partially substitute in-person interactions while delivering scalable, sustainable results. This model helped reduce access barriers and expand the program's reach. However, further research is needed to assess the cost-effectiveness of the remote versus traditional (in-person) approach, and to determine whether the program's observed impact is due to its content or to increased awareness of social protection services. Plans are underway to complement the analysis with administrative data and conduct a medium-term follow-up to evaluate the sustainability of effects.



## Leveraging Technology to Support Pregnancy and Parenting in Uruguay: *Embarazo Positivo* and *Crianza Positiva*



### MOTIVATION

Providing mothers and fathers with timely information, resources, and support strategies before, during, and after pregnancy is essential for preventing premature births, reducing infant morbidity and mortality, and promoting child development—particularly in vulnerable settings (Conde Arteaga et al., 2024; Rafla et al., 2024). While home-visiting programs and group workshops have proven effective, their scalability remains a challenge due to operational and logistical costs (Attanasio et al., 2022a). In response, digital technologies have emerged as a viable alternative to broaden the reach of such interventions (York et al., 2018).

Behavioral barriers—including present bias, status quo bias (which leads to inertia and failure to apply new knowledge), and negativity bias (a tendency to remember negative over positive experiences)—can further constrain caregiver-child interactions and hinder development.



### PROJECT

In 2017, a multidisciplinary team from the Universidad de Montevideo, the Universidad Católica del Uruguay, the NGO *Fe y Alegría*, and the *América por la Infancia Foundation* launched *Crianza Positiva* (Positive Parenting), a low-cost initiative that combines behavioral economics and technological advances to support caregivers of children aged 0–2 attending public childcare centers. The intervention includes eight weekly group sessions, followed by text messages sent three times per week for 25 weeks after the workshops conclude.

With support from the ECD Fund, the initiative was expanded to include a prenatal component and enhance the existing postnatal one with digital tools. To support families from the 12th week of pregnancy through childbirth, an interdisciplinary team of neonatologists, obstetricians, gynecologists, midwives, and psychologists designed *Embarazo Positivo* (Positive Pregnancy), a series of interactive, personalized messages focused on emotional well-being, nutrition, physical activity, and childbirth preparation. Messages were delivered via a WhatsApp-accessible chatbot and encouraged partner involvement in pregnancy and early child caregiving.

The chatbot was also integrated into *Crianza Positiva*, offering additional content on breastfeeding, safe sleep, socioemotional development, and co-parenting. Messages were tailored according to the children's developmental milestones to ensure timely, relevant guidance.

A key innovation was the integration with health service providers, from message design to participant selection and follow-up. Using data from the chatbot and baseline and follow-up assessments, the program screened for risks such as depression, food insecurity, and domestic violence, and set up referral pathways to health services as needed.

*Embarazo Positivo* reached 1,190 women, providing virtual support from early pregnancy through six months postpartum. An impact evaluation using phone surveys compared 595 women

assigned to the treatment group with 595 in the control group. Outcomes were measured at weeks 37–38 of pregnancy and when the child reached six months. The assessment covered four areas: (i) mental health, (ii) healthy habits, (iii) shared caregiving, and (iv) knowledge and information about pregnancy. Notably, 49% of women in the treatment group chose to invite their partners to receive the messages.



## FINDINGS

Preliminary findings show that *Embarazo Positivo* had a positive effect on maternal well-being. Participants experienced a 3-percentage-point improvement in pregnancy-related competencies—measured by the Well-being in Pregnancy (WiP) scale—, greater engagement in self-care (up 3.3%), and more leisure time (up 5.4%). Participants reported satisfaction with the information provided, and there was also an increase in paternity leave uptake. However, an unexpected 4.5% increase in depression risk—measured using the Edinburgh Postnatal Depression Scale (EPDS)—was observed, potentially reflecting increased emotional openness or stress related to program expectations.

In the postnatal phase, preliminary findings from the combined intervention were mixed. While maternal well-being improved, there was a decline in height-for-age among children and a rise in the prevalence of anemia—likely due to more frequent checkups and greater parental awareness. No significant differences were observed in parenting practices, shared caregiving, or child socioemotional development. These findings suggest that more intensive support, such as follow-up calls or in-person workshops, may be necessary to strengthen postnatal outcomes.

DS

## Children Raised by Grandparents in El Salvador: A Census to Understand Family Structures and Needs



### MOTIVATION

According to United Nations estimates (UN, 2020), Central America is among the three regions with the highest proportion of “skipped-generation” households—where children are raised by grandparents without the presence of their parents. Household survey data show that, in the Northern Triangle countries, between one-fifth and one-quarter of children aged 3 to 6 are raised by their grandparents: 18% in Guatemala, 25% in El Salvador, and 29% in Honduras. This is often due to the migration of both parents to the United States or Canada, leaving children in the care of grandparents or other relatives (Musalo et al., 2015).

Parental absence negatively affects child development, school attainment, and access to quality employment later in life (Daga et al., 2024; Deleire & Kalil, 2002; McLanahan et al., 2013). Designing effective interventions requires understanding the scope of the phenomenon and its implications for both children and caregivers.



### PROJECT

Between 2018 and 2019, the IDB, El Salvador’s Ministry of Education (MINED), World Vision, and Innovations for Poverty Action (IPA) conducted a census in the municipalities of Soyapango and San Salvador—areas with high levels of poverty and violence—to better understand the situation of children growing up without their parents’ care.

The census collected data from 24,836 households on family structure, socioeconomic conditions, perceived insecurity, and victimization levels. In households with young children, it also gathered information on child development and caregiving practices. The aim was to assess how parental migration affects children’s development, school performance, and emotional well-being, to inform the design of appropriate targeted interventions.

Child development was measured using the Developmental Milestones Checklist designed by the U.S. Centers for Disease Control and Prevention (CDC). Caregiving practices were assessed with the Family Care Indicators (FCI) and the discipline module from the Multiple Indicator Cluster Survey (MICS). The Parental Sense of Competence (PSOC) scale was used to evaluate caregivers’ self-perceived parenting skills and confidence.

This pioneering census provided a detailed look at how family composition affects child well-being and helped adapt strategies to inform programs aimed at improving the living conditions of children and their caregivers.



## FINDINGS

Of all households surveyed, 23% had children aged 1 to 7. Of these, 63% lived with both parents, 33% with only one, and 4% with neither. In most cases of parental absence, the father was missing. In 66% of households where both parents were absent, grandparents were the primary caregivers; in households with only one parent present, this was true in 41% of cases.

Households where one or both parents were absent were more likely to live below the poverty line, report lower incomes, and have fewer assets. The absence of the father was often linked to higher caregiver stress—typically affecting the mother. The same trend was observed in households where one or both parents were absent. Substitute caregivers, such as grandparents or aunts/uncles, were more likely than parents to use physical punishment as a disciplinary method for managing inappropriate behavior.

The study also found lower investment in the development of children growing up without their parents. Caregivers spent less time reading, singing, and playing with them, and these children had fewer toys—especially those that stimulate cognitive development, such as blocks or geometric shapes.

In terms of outcomes, children in skipped-generation households demonstrated lower cognitive and socioemotional skills, likely due to reduced time and resource investment in their upbringing. However, they were more likely to be enrolled in early education centers or schools, suggesting that these institutions may play a key role in mitigating developmental gaps.

DS

## The Impact of Parental Migration on Early Childhood Development in El Salvador\*



### MOTIVATION

Parental migration is an increasingly common phenomenon in El Salvador, with thousands of children growing up in households where one or both parents have migrated. This situation poses significant challenges to children's emotional, social, and educational development. Parental absence can limit access to resources, destabilize the household, and reduce learning opportunities. However, research on the link between migration and early childhood development remains scarce due to limited data (Näslund-Hadley et al., 2020), making it difficult to design effective public policies to support these children and their caregivers.



### PROJECT

To address this data gap, the Ministry of Education of El Salvador (MINED), IDB, Innovations for Poverty Action (IPA), and Yale University conducted an exploratory census in March and April 2024. The effort gathered information from 11,621 households and identified and profiled 19,747 children and adolescents aged 0 to 17. This initiative complements a project funded by the ECD Fund, which collected data in Soyapango and San Salvador from households where children are growing up without their parents (see Project Profile 10 for details).

Data collection combined digital tools (chatbots and web surveys) with direct phone interviews, based on each family's preferences and connectivity. Through MINED school directors, families received a WhatsApp chatbot link to identify their household type and were redirected to the appropriate survey: households with minors and at least one absent parent, those with both parents present, and those without minors. This information was used to define the sample frame and gather basic data. A follow-up phone survey collected more detailed information on family composition, migration history, socioeconomic conditions, caregiving practices, schooling, emotional well-being, and risk behaviors among children.



### FINDINGS

The project's key achievement was the creation of a unique national database on households with children experiencing parental absence. Covering nearly 20,000 children and adolescents across the country, this database offers a crucial input for future analysis and for designing child protection policies in the context of increasing migration.

The project also made progress in establishing data-sharing mechanisms with MINED to integrate this information with administrative records such as school grades and standardized test scores. Although this was only partially achieved—with data accessed for students aged 8 to 12—it marked a significant first step toward linking survey and administrative data, paving the way for deeper

\*As part of the original project, a secondary data analysis was initially carried out in Honduras, Guatemala, and El Salvador.



insights into the educational trajectories of children in migrant households.

Among the key findings, 21.1% of children under 18 had at least one absent parent, and 20% lived in households where one or both parents had migrated since 2015. These results underscore the urgency of adapting social protection and early childhood development policies to the specific needs of these households. Priorities include supporting substitute caregivers (such as grandparents), developing psychosocial support programs for children with migrant parents, and strengthening intersectoral coordination between the education system and social protection services to ensure a comprehensive child protection approach.

R

## ***Tuchan*: A Remote Family Support Program to Strengthen Parenting Practices in Skip-Generation Households in El Salvador**



### **MOTIVATION**

Growing up in households without parental presence can negatively affect children's caregiving environments and, consequently, their development (McLanahan et al., 2013). These households often face economic hardship, low educational attainment, and limited access to specialized resources, all of which hinder the creation of nurturing environments that promote learning and emotional well-being. Grandparents, who are common caregivers in skip-generation households, also face challenges in providing adequate stimulation, which is crucial for healthy child development.

Census data from Soyapango and San Salvador (2018–2019) highlighted this issue (see Project Profile 10). In response, El Salvador's Ministry of Education (MINED), in collaboration with World Vision, Innovations for Poverty Action (IPA), and the IDB, developed the *Tuchan* program.



### **PROJECT**

*Tuchan* (BID, 2020b)—meaning “Our Home” in the Indigenous Náhuat language—aims to improve parenting practices among caregivers of children aged 2 to 8 in skip-generation households. The program provides information on ECD and suggests everyday activities to stimulate cognitive skills related to math and reading, supported by accessible, context-adapted tools.

Originally designed as a hybrid intervention with both virtual and in-person support to caregivers, *Tuchan* was adapted to operate almost entirely virtually during the COVID-19 pandemic. It includes group sessions, one-on-one training on cognitive and socioemotional development, psychological support, and child development materials. Training was delivered by specialists through workshops and home visits. Thus, *Tuchan* stands out as a pioneering effort to provide specialized training to grandparents and other caregivers in skip-generation households, strengthening their ability to support child development in highly vulnerable settings.

The intervention included two experimentally evaluated modalities: (i) the “information only” group received content through a mobile app and three weekly text messages with reminders about nearby public services (e.g., libraries, milk centers, daycare centers); and (ii) the “skills and information” group received the same support as (i), plus daily remote training via WhatsApp groups, where facilitators shared videos and other digital resources.

Both groups received printed materials and weekly phone calls to monitor the families' progress. The content and design of all messages were based on behavioral science principles.

The evaluation, which involved 533 caregivers/households with at least one absent parent, aimed to determine which type of support was most effective in improving child development outcomes, reducing caregiver stress, and enhancing the well-being of both caregivers and children.



## FINDINGS

According to the evaluation report, children aged 4 to 6 in the "information only" group showed significant improvements in language skills (0.29 SD), as measured by the Measuring Early Learning Quality and Outcomes (MELQO) tool. This effect was not significant for other age groups.

Children aged 4 to 8 in the "skills and information" group demonstrated notable gains in prosocial behavior (0.18 SD), based on the Strengths and Difficulties Questionnaire (SDQ). In both groups, increases in parental investment were also observed, measured by the number of toys in the household, using the Family Care Indicators (FCI): 0.32 SD in the "information only" group and 0.34 SD in the "skills and information" group.

However, results varied depending on caregiver characteristics. For example, in households where the primary caregiver was a woman, text messaging alone significantly increased parental investment (0.52 SD), and adding remote training had an even stronger effect (1.1 SD). In contrast, among caregivers over the age of 65, the impact of remote training was smaller (0.5 SD).

These findings highlight the importance of tailoring strategies to both the child's age and the caregiver's profile to maximize benefits.

## **Empodera tu Mente en Familia: Fostering a Growth Mindset in El Salvador**



### MOTIVATION

In recent years, middle- and low-income countries have made progress in implementing early childhood policies. However, initiatives focused on socioemotional development remain limited. Socioemotional skills not only support cognitive growth but also reduce risky behaviors and improve long-term socioeconomic outcomes (Domitrovich et al., 2017).

These skills are particularly relevant in contexts like Latin America and the Caribbean, where, despite gains in educational access and quality, major challenges persist. Secondary school graduation rates remain low, and in countries such as El Salvador, more than 25% of young people neither study nor work—largely due to poverty and lack of opportunities (OECD, ECLAC & CAF, 2016). Violence and crime exacerbate the problem by disrupting school attendance and increasing dropout rates.

Improving education in this context is no easy task. A growth mindset—the belief that intelligence and abilities can be developed through effort and learning—can play a critical role. Evidence shows that a caregiver’s growth mindset positively influences how they praise children, recognize their effort and achievements, respond to learning processes, provide feedback, and support emotional well-being (Gunderson et al., 2018; Haimovitz & Dweck, 2016).

Fostering this mindset in children, in turn, can strengthen key traits such as resilience, perseverance, attention, and sustained effort—essential for future educational and work successful performance.



### PROJECT

*Empodera tu Mente en Familia* (Empower your Mind as a Family) is a program designed to cultivate a growth mindset in caregivers of children aged 4 to 7, particularly by encouraging them to praise learning processes and discovery. This aims to improve the quality of caregiver–child interactions and support child development. The program taught caregivers what a growth mindset is, why it matters, and how to apply and model it in everyday life using practical strategies.

The program used a hybrid delivery model with three components: (i) an initial home visit, (ii) an eight-session phone-based coaching program, and (iii) reminder messages via text. To evaluate its impact, an experimental study was conducted with 1,536 households in San Salvador, Soyapango, and surrounding areas. Households were randomly assigned to treatment or control groups. Data were collected through phone surveys and home visits, measuring sociodemographic characteristics, growth mindset in caregivers and children, and changes in behaviors and attitudes.



## FINDINGS

Evaluation findings indicate that the program had a positive effect on caregivers' growth mindset, with a 0.22 SD increase in the Dweck and Master (2009) index—which measures beliefs about the ability to improve through effort—and a 0.43 SD increase in the Attanasio et al. (2019) index, which captures attitudes and practices related to growth mindset.

The program also positively influenced certain associated behaviors, such as caregivers' feedback strategies (0.14 SD), referring to how they respond to children's successes or mistakes, and their expectations regarding children's performance (0.02 SD). However, no significant effects were found in other areas, such as resilience, perseverance, or praising styles.<sup>11</sup> This may be due to low program adherence (only 11% of participants completed all sessions) or the fact that developing these skills may require more time.

A noteworthy finding is that children in the treatment group demonstrated greater confidence when tackling challenges. This was evident in the Tangram activity—a puzzle used to assess cognitive and problem-solving skills. Although these children attempted fewer solutions, their final scores were like those in the control group, suggesting greater confidence in their responses or enhanced problem-solving capacity.

In sum, preliminary results suggest that *Empodera tu Mente en Familia* was effective in promoting a growth mindset among caregivers, which may in turn influence parenting practices and child development. The evidence indicates that such interventions could become scalable strategies for improving home and learning environments in high-vulnerability settings. To maximize impact, future implementations should aim to increase participation, extend program duration, and strengthen support for caregivers in transmitting a growth mindset to children.

<sup>11</sup> Resilience was measured using the abbreviated version of the McBride Resilience Questionnaire (NMRQ); perseverance, with the Resilience in Midlife (RIM) scale; and feedback, with an adapted version of the scale used in Meilahn (2007).

R

## Purposeful Messaging: How a Digital Campaign Supported Early Childhood Development in Guatemala



### MOTIVATION

The COVID-19 pandemic disrupted many essential services, including education—particularly early childhood programs. The closure of childcare centers, preschools, and schools forced families to take on a more active role in their children's learning, often under challenging conditions such as limited internet access, scarce socioeconomic resources, and time constraints.

A survey of 62,837 caregivers across four countries—Colombia, Costa Rica, El Salvador, and Peru—revealed that the pandemic widened learning disparities. Children from vulnerable households and their caregivers had fewer resources to cope with the economic and psychological effects of the crisis (Näslund-Hadley et al., 2020).



### PROJECT

To prevent developmental gaps from widening further, Guatemala's Ministry of Education adapted a text message-based intervention previously implemented in Costa Rica. The aim was to promote cognitive and socioemotional skills in children aged 4 and 5 (Hernandez-Agramonte et al., 2024).

Two campaigns were launched. The first focused on cognitive development, offering math and communication activities aligned with the national curriculum. For example: "Let's do some addition! Ask your child: If you have four bananas and I give you two more, how many do you have? Practice daily with different numbers." The second campaign built on this by incorporating messages aimed at fostering socioemotional skills, such as secure attachment, positive parenting, healthy habits, and caregiver self-care.

A total of 4,133 caregivers of preschoolers aged 4 and 5 participated across the country. To evaluate the program's adaptability to the Guatemalan context and its impact, participants were randomly assigned to one of three groups: (i) cognitive development only, (ii) combined cognitive and socioemotional content, and (iii) a control group. This randomized design allowed robust impact measurement. Over 12 weeks, caregivers received 3 to 4 messages per week, totaling 53 messages per participant.



### FINDINGS

The evaluation showed that both campaigns increased the frequency of caregiver-child communication activities (by 0.09–0.15 SD) and improved caregivers' perceived access to educational resources (by 0.03–0.07 SD). This perception may reflect increased parental engagement in

children's learning over the long term. Caregivers in the cognitive-only group also increased the frequency of math-related activities (0.08 SD). However, those in the combined campaign group did not significantly increase either math or socio-emotional activities. One possible explanation is that the number of messages or their content was not appropriately targeted to drive meaningful behavioral changes.

Interestingly, caregivers in the combined campaign group reported higher stress levels, as measured by the Parental Stress Scale (PSS). The campaign's emphasis on child and caregiver well-being—delivered in the context of a public emergency—may have heightened concern over issues perceived as beyond their control.

Neither campaign had a significant effect on children's cognitive outcomes (such as counting, addition, syllabic awareness, oral comprehension, and vocabulary) or on socioemotional skills (such as emotion recognition and empathy).

These findings highlight the potential of digital messaging to inform and engage caregivers, while also emphasizing the need to complement such efforts with more support that address caregivers' socioemotional well-being—and maybe additional tools to influence ECD indicators. The outcomes also provide insight into the type and frequency of messages that could be adjusted and evaluated to design more cost-effective interventions.





## *Juega Todos los Días: Hybrid Family Support to Boost Early Childhood Development through Play in Mexico*



### MOTIVATION

Play during early childhood is essential for stimulating physical, social, emotional, and cognitive development. Parents not only shape how play is defined, valued, and practiced, but also create the environment in which children explore, learn, and grow. Since parental involvement tends to vary—being lower in low-income households—interventions aimed at increasing engagement in these contexts are especially relevant. Most research on play-based learning has focused on in-person visits, so the effects of hybrid approaches—combining face-to-face and remote strategies—remain underexplored.



### PROJECT

To support the cognitive and socioemotional development of children aged 0 to 2, Mexico's Ministry of Public Education (SEP) incorporated the *Juega Todos los Días* (Play Every Day) program into services for children from poor and vulnerable households through Early Childhood Community Care Centers (CCAPI) in the state of Morelos. Adapted from Sesame Workshop's Play Every Day (PED), the program aims to reshape caregivers' perceptions of play and its role in child development and learning.

Over 12 weekly sessions, trained educators led activities that taught caregivers how to engage in play centered on recognizing body parts and their functions, as well as math concepts, environmental awareness, and socioemotional development. Originally designed for in-person delivery, the sessions were adapted into a hybrid format during the COVID-19 pandemic, combining WhatsApp-based remote interactions with in-person meetings. Activity materials were also mailed to participants.

The program was evaluated using an experimental design in which 60 CCAPI centers and 480 caregivers were randomly assigned to the treatment group, and another 60 centers and 514 caregivers to the control group. The quantitative evaluation was complemented by qualitative methods, including semi-structured interviews.



### FINDINGS

*Juega Todos los Días* showed positive impacts at three levels: educators, caregivers, and children (Berlanga et al., 2023). First, semi-structured interviews revealed increased understanding and awareness among both educators and caregivers of the importance of play on child development. Second, there were improvements in the quality of interactions and the time caregivers devoted to activities that promote emotional and cognitive development—such as reading books or looking at pictures (0.12 SD), singing songs (0.11 SD), and playing with toys (0.17 SD)—as measured by the Family Care Indicators (FCI). Third, a 0.19 SD improvement in child development was observed

(measured using the Developmental Milestones Checklist), though only among children who had lower levels of parental involvement before the intervention.

These findings suggest that the use of technology can facilitate access to families facing challenges in receiving in-person services due to emergencies or logistical constraints. They also offer insights for designing more easily scalable initiatives without compromising impact.

## R

## Strengthening Parenting and Early Childhood Development in Mexico: Evaluation of the *Bebés Más Fuertes* and *Desarrollo Óptimo en Niños*



### MOTIVATION

The vital role of play in fostering creativity, imagination, and physical, cognitive, and emotional development in early childhood is beyond doubt. Enhancing parenting practices, interactions, and materials that promote play at home has been shown to positively influence ECD outcomes (IDB, 2024).

In Mexico, as in other Latin American and Caribbean countries, socioeconomic disparities affect the amount of time caregivers devote to play with children. According to the 2021 National Health and Nutrition Survey (ENSANUT), children of mothers with lower educational levels are more likely to grow up in less stimulating environments, with fewer types of play activities and limited access to children's books. Specifically, in households where the mother has not completed secondary school, only 45% of primary caregivers reported engaging in at least four play activities over a three-day period. This figure rises to 75% when the mother has completed secondary education or higher (IDB, 2024).



### PROJECT

In 2022, the Secretariat of Public Education (SEP) in the State of Mexico launched two initiatives to promote positive parenting among caregivers of children aged 0–3: (i) *Bebés Más Fuertes* (Stronger Babies, BMF) and (ii) *Desarrollo Óptimo en Niños* (Optimal Child Development, DON).

The BMF program focuses on supporting children's physical and emotional development, communication, and play through 14 weekly group sessions (in-person or virtual) led by educational guides, along with one-on-one virtual follow-ups. Content covers the benefits of breastfeeding and includes activities to strengthen motor, socioemotional, cognitive and language development, and self-esteem.

The DON program aims to reshape caregivers' perceptions and expectations regarding their children's development while offering targeted activities to foster it. Age-specific questionnaires assess socioemotional aspects, motor skills, and problem-solving abilities. When areas requiring support are identified, findings and activity recommendations are shared with both caregivers and educational guides, who then provide monthly follow-ups via WhatsApp.

To assess the programs' impact, a mixed-methods evaluation was conducted. In the quantitative experimental component, 2,135 caregivers of children aged 0–3—all enrolled in educational centers in the State of Mexico—were randomly assigned to one of three groups: 711 to BMF, 711 to DON, and 713 to a control group. However, significant crossover between groups (caregivers attending sessions from programs they were not assigned to) compromised the integrity of the comparison, so quantitative results are not reported. The qualitative assessment included 30- to 40-minute in-person interviews with 20 caregivers from across the three groups: 7 from DON, 7 from BMF, and 6 from the control group.



## FINDINGS

Interview findings suggest that caregivers in both programs increased the frequency of their activities with children. Participants in the BMF program praised the clarity and quality of the materials and expressed a desire for more and longer sessions. They also reported integrating content and strategies from the program and increasing their knowledge and practice of language and communication activities through play.

DON participants said the program helped them better understand their children's overall and socioemotional development and identify behavioral issues linked to mental health. They also described a shift in their perceptions and expectations regarding developmental stages. However, several caregivers reported difficulties accessing assessment results and educational guidance due to poor mobile connectivity.

## R

## Attendance and Quality in Preschool Education in Uruguay: Empowering Parents Through Information



### MOTIVATION

Ensuring access to quality preschool education is essential to reducing inequalities from the earliest stages of life. However, children who do not attend regularly miss out on learning opportunities and experience disruptions in skill acquisition, which hinders their ability to reach their full potential (Berlinski et al., 2008). In 2018, despite achieving near-universal enrollment of 4- and 5-year-olds in preschool programs, Uruguay faced a serious absenteeism problem: more than one-third of children in this age group attended inconsistently—that is, less than 75% of school days. The absenteeism rate was even higher among children from low-income households.

Parents may choose to send their children to preschool intermittently for several reasons. Some are structural, related to household characteristics and context—such as parents' education levels, household income, or access to transportation to school. Others stem from behavioral biases that influence parental decisions, such as failing to fully recognize the long-term benefits of preschool attendance (present bias).



### PROJECT

To reduce absenteeism in preschool education, the Early and Primary Education Council (CEIP) of Uruguay's National Administration of Public Education (ANEP)—in collaboration with an interdisciplinary team of psychologists, educators, and economists—developed a text message campaign targeting parents of 4- and 5-year-old children enrolled in public preschools. After identifying behavioral biases through focus groups, a series of messages was designed to “nudge” parents into considering the long-term benefits of regular preschool attendance into their decision-making and thereby reduce absenteeism.

Over a 13-week period, families received weekly text messages with information about their child's absences over the previous three weeks. The messages emphasized both the immediate and long-term benefits of preschool attendance and offered strategies to help parents better plan their week and reduce absenteeism. The campaign, which consisted of 43 messages, was delivered through the government's mobile application *GURÍ Familia*, which facilitates educational monitoring and communication between schools and families.

To rigorously evaluate the intervention's impact, 97 public preschools were randomly assigned to the treatment group (which received text messages), and another 97 to the control group (which did not receive messages). The total sample included 9,782 parents in the treatment group and 9,490 in the control group.



## FINDINGS

The impact evaluation found that the intervention had no significant aggregate effect on school absenteeism or cognitive skill development (Ajzenman et al., 2022). While this result may initially seem discouraging, further analysis revealed positive effects among children with absenteeism levels near the median and those attending schools in middle- to low-income areas (income quintiles 1 to 4). In this subgroup, preschool attendance increased by 2% (equivalent to 1.8 additional days), and language development improved by 0.25 and 0.4 SD, depending on the child's initial absenteeism level. No gains were observed in math knowledge, motor skills, or socioemotional development. Cognitive, language, motor, and socioemotional skills were measured using the Child Development Inventory (INDI), developed by the School of Psychology at the Universidad de la República of Uruguay to assesses school readiness in children aged 3 to 6.

The lack of impact among households with very high absenteeism may be due to the need for additional support or incentives beyond text messages, such as subsidized school transportation. Conversely, among households with already low absenteeism, attendance may have reached a "maximum" or "stable" level that cannot be easily improved through reminders or incentives.

IP

## Medium-Term Impact of Access to Childcare Centers: Experimental Evidence from Rio de Janeiro



### MOTIVATION

Access to high-quality childcare centers can significantly support children's long-term development in areas such as education, employment, and health. While the effects of such services have been documented at a small scale—including long-term outcomes (Conti et al., 2016)—few evaluations have examined their medium- and long-term impact when implemented at scale. Conducting this type of study and tracking participants over extended periods involves high costs and logistical challenges that hinder implementation. However, administrative data can help overcome these barriers, provided it can be linked to childcare attendance records and individual-level child data.

In Rio de Janeiro, childcare centers managed by the Municipal Secretariat of Education (SME) provide full-time care for children aged 0 to 4 living in low-income neighborhoods, offering health, nutrition, and early education services. In 2007, the city had 244 free public centers, but demand exceeded supply. That year, the municipal government implemented a lottery system to allocate available slots, randomly distributing 10,000 available slots among 24,000 applicants.

Attanasio et al. (2022b) compared nutritional and developmental indicators between children who received a slot and those who did not, four and seven years after the lottery. Four years later, they observed improvements in height, weight, body mass index, and cognitive development, along with increased household income due to greater adult participation in the labor market. However, seven years after the allocation, effects on children's cognitive and executive functions were no longer observable, and the household income gains had dissipated.



### PROJECT

To expand and complement the findings of Attanasio et al. (2022b), the ECD Fund supported a study using the same cohort of children. This study combined their data with administrative records from the education system to measure the impact of childcare attendance on academic performance in primary school, between three and eleven years after the lottery (Carneiro et al., 2021).

Researchers used administrative records from quarterly math and language exams for each academic year between 2010 and 2018, as well as results from Prova Rio—a standardized assessment of language and math administered at the end of third grade in all municipal public schools. They were able to link 83% and 64% of the original sample to these records. The final sample included 13,660 of the 24,000 children who had initially entered the lottery—5,729 who were awarded a slot and 7,931 who were not. Results should be interpreted with caution due to high attrition, likely caused by relocation or migration to other regions of the country.





## FINDINGS

The impact evaluation confirmed that, in the short term, winning the lottery increased enrollment in childcare centers by 7% to 13%. Children who received a slot remained enrolled for five months longer, representing a 0.4-year increase in early schooling between ages 0 and 5 (Carneiro et al., 2021).

In the medium term, a reduction of 0.76 days in annual school absenteeism was observed (a 16% decrease), but only among 4-year-olds (preschool level). In terms of academic performance on quarterly exams, no significant overall improvements were found by age. However, when disaggregated by sex, improvements were observed among boys aged 7 to 12. No overall effects were identified on the Prova Rio standardized test either. As with annual performance, gains were observed among boys—particularly in language (6.3%).

DS

## A Snapshot of the Quality of Early Childhood Care Centers and Child Development in Mexico



### MOTIVATION

Ensuring quality childcare services remains both a priority and a challenge for public providers in Mexico and across the region. Traditionally, assessments of these centers have focused on physical aspects—such as infrastructure, equipment, child-to-caregiver ratios, available materials, and pedagogical routines—commonly referred to as *structural quality*. However, process quality—the nature of interactions between caregivers and children—is equally critical. This includes the frequency and quality of warm, responsive, and language-rich interactions, which are essential for children’s cognitive, linguistic, and socioemotional development.

Over the past decade, Mexico has undertaken various regulatory efforts to enhance childcare services and promote development for children under age three. A fundamental first step in improving service quality is conducting a comprehensive diagnosis, with a strong focus on classroom interactions.



### PROJECT

Between 2018 and 2020, the Inter-American Development Bank (IDB) and Mexico’s Executive Secretariat of the National System for the Comprehensive Protection of Children and Adolescents (SIPINNA) collaborated on a pioneering nationwide study on the quality of public childcare centers serving children under three. The study covered 245 centers operated by the country’s five main providers, including a sample of 426 classrooms and 2,115 children and their households.

Both structural and process quality were evaluated. To assess the latter, researchers used the internationally recognized Classroom Assessment Scoring System (CLASS – Toddler version), which measures the quality of interactions in early care environments. CLASS evaluates two main dimensions: (i) emotional and behavioral support, and (ii) support for learning—specifically, whether caregivers promote learning through conversation, participation, and feedback. For the study, four hours of classroom activity were recorded in two classrooms per center. These recordings were segmented and coded following CLASS protocols.

Data on structural quality—including infrastructure conditions, type and availability of equipment, safety, center organization, and daily routines—were collected through surveys administered to centers and classrooms, using both interviews and observations. A household survey complemented the data, targeting up to six children per sampled classroom to gather information on socioeconomic background, home learning environments (based on the Family Care Indicators or FCI), and vocabulary levels using the MacArthur-Bates Communicative Development Inventories (MB-CDIs).



## FINDINGS

Results revealed that, overall, centers scored well on structural quality, with safe facilities, appropriate materials, and diverse play and learning activities. However, the quality of caregiver-child interactions fell within the mid-to-low range. The average CLASS score was 3.3: "emotional and behavioral support" scored 4.2 (considered medium), while "support for learning" scored just 1.8 (low) (Rubio-Codina et al., 2021).

Mexico's average child-to-caregiver ratio was 5.8—lower than in other Latin American countries where similar studies have been conducted, but higher than the U.S. average of 2.7.

The study also highlighted major challenges. Nearly all centers (98%) are in urban areas with low or very low levels of marginalization, limiting access for more vulnerable children. Additionally, children enrolled in these centers typically come from households with more favorable socioeconomic conditions, more stimulating home environments, and higher levels of language development.

While interaction quality remains moderate to low—consistent with other public childcare services in the region—these findings point to an important opportunity to strengthening warmth, emotional support, and cognitive stimulation in classrooms, all of which are essential to improving ECD outcomes.



## Mentorship Program to Promote Quality Caregiver-Child Interactions: Lessons from the *Luciérnaga* Program in Mexico



### MOTIVATION

Following a diagnosis of the quality of early childhood care centers and the developmental status of young children in Mexico (Rubio-Codina et al., 2021)—see Project Profile 19 for more details—a program was designed to address the most pressing area for improvement: the quality of interactions between caregivers and children, which are crucial for early development.



### PROJECT

The *Luciérnaga* (Firefly) program (Ríos-Salas et al., 2024) aims to strengthen the capacities of educational agents (caregivers) through structured mentorship cycles involving planning, observation, and feedback, following a curriculum focused on 12 prioritized teaching practices. These practices were identified through a comprehensive literature review on high-quality caregiver-child interactions, with the Classroom Assessment Scoring System (CLASS) as a reference. The program design drew inspiration from successful mentoring models such as Practice-Based Coaching in the United States, *Un Buen Comienzo* (A Good Start) in Chile, and *Cerrando Brechas* (Closing Gaps) in Ecuador.

Mentoring is delivered mostly by female professionals within the childcare centers—such as pedagogical coordinators or educators—who typically continue their usual roles. These mentors are trained in their new role by external facilitators through a hybrid format that includes in-person introductory training, synchronous remote sessions, and an in-person support visit midway through the program.

One of the program's most innovative aspects is its design process. Unlike most interventions—which are typically designed at an organization's central office and later deployed in the field at a certain scale—*Luciérnaga* was co-developed by technical teams from the Mexican Social Security Institute (IMSS) and the IDB. It was initially tested in 16 centers across the country through three iterative cycles of prototyping, piloting, and adjusting. This led to a “final” version of the program, still evolving based on lessons learned from each new implementation. Because it was built in collaboration with future implementers, *Luciérnaga* is better aligned with the realities of the centers and the needs of their teams—giving the program greater strength and likely to enhance its effectiveness.

To support implementation, the *Luciérnaga* program also developed a practical toolbox: a kit containing the ABCs of the program with tailored materials for caregivers, mentors, and facilitators, which can be adapted to different contexts. The toolbox includes 12 factsheets outlining the prioritized practices and steps for implementation, explanatory videos about the practices and the mentorship process, and resources for ongoing mentor training. These materials are designed to inform and empower participants, allowing them to maximize their impact in the classroom.



## FINDINGS

The program developed a new mentoring methodology based on structured learning cycles that promote continuous professional development and improved caregiver-child interactions in childcare centers. This approach is adaptable and replicable in other settings. It also offers valuable lessons on how to design effective mentoring programs: (i) grounding work in needs and evidence, (ii) building through collaborative, field-based pilot cycles that allow for continuous improvement, (iii) involving center staff directly, and (iv) providing a toolbox of concrete, pedagogically appropriate materials.

In 2024, *Luciérnaga* was implemented in 39 IMSS childcare centers alongside a qualitative evaluation aimed at refining the program content and implementation model as well as identifying scaling challenges. The evaluation includes surveys of participants from all centers and interviews with participants from 10 centers, as well as with facilitators, childcare center department heads, and program design and implementation staff. The data collected is currently being analyzed.

IP

## Implementing the *aeioTU* Educational Model in Mexico's Community Childcare Centers (CAICs)



### MOTIVATION

Young children represent a highly vulnerable population. According to CONEVAL (2022), in Mexico, poverty is most prevalent among children under the age of five, with 48.1% living in poverty. Data from the 2022 National Health and Nutrition Survey (ENSANUT) shows that only 10.2% of children under 3 have access to any form of early childhood care or education. Nationally, 79.5% of children aged 2 to 5 are developing appropriately according to UNICEF's Early Childhood Development Index 2030 (ECDI-2030). However, this indicator also reveals a significant socioeconomic gap: there is an 8.5 percentage points difference between children whose mothers have upper-secondary education (83.0%) and those whose mothers have primary education or less (74.5%), and a 5.9-point gap between children living in urban areas (81.1%) and those in rural localities (75.2%) (INSP, 2024).

In this context, Mexico's Community Childcare Centers (CAICs), operated by the National System for Integral Family Development (SNDIF), provide care and educational services to children in highly vulnerable communities. A recent nationwide study found that although these centers are generally safe and adequately equipped, there is considerable room for improvement in the quality of interactions and in providing emotional and motivational support for learning in the classroom (Rubio-Codina et al., 2021).



### PROJECT

To strengthen educators' skills and improve early learning environments—through training, pedagogical support, and physical space adequacy—a pilot program was launched to adapt the *aeioTU* educational model to the Mexican context. This initiative builds on a similar experience in Panama's CAIPI centers (see Project Profile 22). Successfully implemented in Colombia, the *aeioTU* model has shown its impact in enhancing teacher-child interactions and enriching learning environments for young children (Nores et al., 2019). In Mexico, the model was piloted in three CAIC centers in the state of Morelos—in partnership with *aeioTU*–Fundación Carulla and SNDIF—to test its adaptability.

The pilot featured three cycles of virtual training and mentoring sessions for center directors, teachers, and Trainers of Trainers. The content emphasized innovative pedagogical practices based on play and exploration, while also promoting positive discipline and effective school management. The approach combined theory with practical application in the classroom. An observation and feedback strategy supported the learning process, enabling participants to adapt new practices to their specific settings.

To complement training, pedagogical spaces were adapted in the pilot CAICs, incorporating educational materials, child-friendly furniture, and exploratory learning corners—fostering curiosity and interactive learning. As part of the initiative, a methodological guide was also developed to document the pilot experience and provide recommendations for future adaptations.





## FINDINGS

The pilot benefited 6 teachers, 3 center directors, and 4 Trainers of Trainers through a structured training and support process. Pre- and post-session evaluations showed a 35.67% improvement in participants' understanding of innovative pedagogical practices, positive discipline, and classroom management.

In addition, the physical learning environments in the pilot CAICs also improved, becoming more stimulating and interactive. Preliminary, descriptive evaluations indicated that the project also enhanced the leadership capacity of center directors, leading to better overall management.

Despite its limited scale and early cancellation due to institutional constraints, the pilot yielded valuable lessons on methodological adaptation to local contexts, institutional sustainability, and territorial coordination. It also contributed important insights for improving the quality of early childhood education in vulnerable communities.

IP

## Strengthening Early Childhood Care: Training Program in Early Childhood Care Centers (CAIPs) in Panama



### MOTIVATION

The quality of caregiver-child interactions in childcare centers is increasingly recognized as critical in the region. Evidence shows that these interactions significantly influence cognitive development, vocabulary, nutrition, gross and fine motor skills, socialization, and other core aspects of child development (Behrman et al., 2004; Veramendi & Urzúa, 2011).

In Panama, a recent study found that the quality of interactions in Early Childhood Comprehensive Care Centers (CAIPs)—which provide education, care, health, and nutrition services for children aged 0 to 4—was low (Freire et al., 2020). The average score on the Infant and Toddler Environment Rating Scale-Revised (ITERS-R) was 3 out of 7, placing CAIPs within the “minimal quality” range. According to the Caregiver Interaction Scale (CIS), only 60% of centers engaged children in reading or outdoor play, suggesting insufficient time spent on direct interaction. A major factor behind this low quality was insufficient staff training—only 27% had specialized education in early education.



### PROJECT

To address this challenge, the IDB partnered with the Ministry of Social Development (MIDES) and *aeioTU* to design an intervention model focused on strengthening the training of teachers, educators, and caregivers in CAIPs to enhance the quality of their interactions with children.

The program was informed by a detailed diagnostic of three CAIPs, assessing staff knowledge, space quality, and learning resources. Results—consistent with the national diagnostic study by Freire et al. (2020)—highlighted low quality in key areas such as pedagogical interaction, educational planning, child protagonism, and family engagement. These findings underscored the need to improve staff training and promote more intentional, holistic educational practices.

Ten theoretical-practical training modules were developed based on the *aeioTU* model—created in Colombia and inspired by the Reggio Emilia philosophy. This child-centered approach fosters development through exploration, play, art, and social interaction in stimulating learning environments. The modules covered essential topics in early childhood care, including recognizing the child as an active learner, the importance of meaningful interactions, and understanding child development. They also addressed pedagogical strategies such as purposeful planning, play- and exploration-based learning, learning environment design, and the CAIPs' community engagement role. The training also included content to strengthen trainers' capacities and support ongoing, sustainable professional development.

The program directly reached 44 participants—29 teachers, 10 administrators, and 5 supervisors—who completed the ten modules and received certification. Using a cascade methodology, these trainers are expected to train an additional 267 teachers across 94 CAIPs, indirectly benefiting around 2,400 children.



## FINDINGS

Learning progress was measured through pre- and post-session questionnaires. Across the first eight modules, participants improved by an average of 40 points, with scores rising from 47 to 87 out of 100—showing significant learning gains. The final two modules, which focused on abilities to train other teachers, were not assessed via written tests but showed high levels of participation and content mastery in practical activities.

Another important outcome was the development of a tool to measure pedagogical quality in CAIPs. Based on Argentina's *MIRAr* tool, it assesses interactions between caregivers and children under age 3 (Lopez Boo & Ferro, 2019). The tool was adapted to Panama's context and aligned with national quality standards and curriculum. Its implementation will support ongoing monitoring and improvement of educational practices.

IP

## ***Gane Tr3s*: Public–Private Co-Responsibility to Improve Childcare Quality and Support Women’s Workforce Participation in Costa Rica**



### **MOTIVATION**

In Costa Rica, access to childcare centers remains limited: as of 2021, only 16% of 3-year-old children were enrolled in these services (IDB, 2024). According to an internal project report, the main barriers are the limited availability of centers and the high cost of services. This lack of access not only hinders child development but also restricts women’s employment opportunities and reduces business productivity (Bjorvatn et al., 2025). In January 2023, the female unemployment rate reached 15.2%, compared to 9.5% for men (INEC, 2023).

Public–private solutions that improve both access to and the quality of childcare services offer a promising approach to addressing these challenges.



### **PROJECT**

The *Gane Tr3s* program designed and implemented an innovative co-payment model in which companies, their employees, and other community stakeholders—such as employee associations or sponsors—shared the cost of childcare services to expand coverage. In some centers, the program also provided technical support to help meet the required national quality standards. From 2020 to 2023, the initiative was implemented in collaboration with the National Network for Childcare and Child Development (REDCUDI), the Foundation for Vital Human Development (DEHVI), and the Business Alliance for Development (AED).

The program involved seven companies and 22 childcare centers, 17 of which operated under the co-payment model. Co-responsibility arrangements were tailored to each company and typically combined three funding sources: the employer, the family, and employee associations. The size of each contribution depended on the economic and administrative capacity of each party, with companies covering the largest share—ranging from 64% to 90% of the total cost. Families contributed between 10% and 24%. In all cases, the full cost of childcare was covered for each participating child.

Ten of the participating centers also received specialized technical assistance from DEHVI, which led a process of continuous training and improvement. Through workshops for center directors, training workshops for caregivers, and online courses, both pedagogical and administrative practices were strengthened.



### **FINDINGS**

Seven companies implemented innovative co-payment schemes with clear quality standards, benefiting 1,193 children. For participating companies, a before-and-after comparison of employee outcomes showed reduced tardiness and absenteeism, along with increased job satisfaction following the introduction of the program. Meanwhile, participating childcare centers improved


their compliance with quality standards by an average of 38%, with significant gains compared to the control group on certain standards. Improvements were greatest in centers that initially had the lowest quality scores

The *Gane Tr3s* experience serves as a valuable reference for identifying alternatives that can expand childcare coverage—even in contexts of fiscal constraints—and generate shared benefits for children, families, and businesses. It also highlights how co-responsibility models can create a virtuous cycle in which high-quality childcare, job stability, and employer engagement reinforce one another. Finally, the program has achieved continuity and scale: in 2024, the National Women's Institute (INAMU) launched a co-payment initiative for small and medium-sized enterprises inspired by *Gane Tr3s*.



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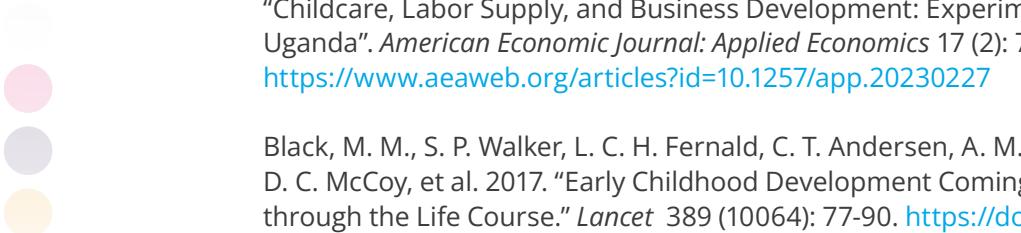


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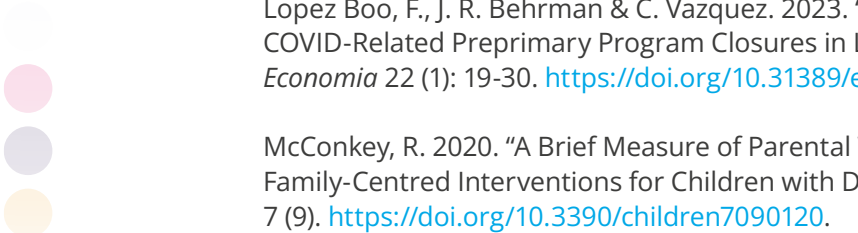
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