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A Model of Transformational Learning for Early Childhood Community-based Workers: Sajag Training for Responsive Caregiving

Emma C. Pearson¹ · Clare Rawdin² · Reema Ahuja³

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Abstract

A global goal for early childhood education and care is to ensure universal, “quality” provision that reaches all children. Achieving this goal requires a well-prepared workforce that is equipped to adapt to and deliver early childhood programs across the vastly diverse contexts and communities where children are growing up around the world. Yet currently there is a severe shortage of early childhood workers, particularly in “low resource” and complex communities. Evidence to support appropriate training for such workers is also lacking. In response, this paper presents findings from a case study of a large-scale training program for community-based early childhood workers in central-east India. A total of 650 community-based Village Communicators were trained to deliver a responsive caregiving package to parents of young children. Data collected over 3 months highlight how the unique contextually grounded, caring and reflexive approach to training resulted in profound personal and professional change among training participants. The findings are of significance in informing policy and practice associated with global goals for early childhood. First, they challenge the technical, programmatic approaches to training that are commonly adopted for preparing this workforce. Second, they evidence the potentially transformative, long-term impact of person-centered approaches to training that facilitate knowledge-sharing to understand local needs and attitudes. Third, they provide insight into ways in which training programs can support enhanced local relevance and effectiveness of early childhood services implemented for children and families across diverse contexts.

Keywords Community-based programs · Early childhood workforce · Globalization · Culturally-sensitive · Responsive caregiving · Relationship-based approaches · Transformational learning

Highlights

- Caring, consultative approaches to training support transformative changes in knowledge and practice among community-based early childhood workers.
- Community-based workers comprise a crucial yet under-researched workforce globally.
- Active contribution to adapting early childhood interventions for greater local relevance empowers community-based workers as well as enhancing program content.
- Training for community-based workers in early childhood needs to shift away from overly programmatic, technical approaches.
- Meeting global goals for early childhood development requires localized responses.

✉ Emma C. Pearson
epearson@uaeu.ac.ae

¹ College of Education, United Arab Emirates University, Al Ain, Abu Dhabi; School of Education, The University of Sheffield, Sheffield, United Kingdom

² Independent researcher, Doncaster, United Kingdom

³ Independent researcher, Delhi, India

Opportunities, challenges and complexities associated with ways in which international goals, imperatives and tools are shaping early education and development across diverse national contexts, are widely discussed (Li, Rao, & Tse, 2012; Nuttall, Thomas, & Wood, 2014; Pearson, 2015). The United Nations Sustainable Development Goals (SDGs), for example, consist of 17 global goals for human development to be achieved by 2030. The fourth goal of the SDGs

centers around education and includes a target for countries around the world to ensure that all young children have access to quality early childhood provision by 2030 (United Nations, *n.d.*). Such provision should incorporate support for the development and maintenance of nurturing caregiving environments that attend to children's health, learning and development needs through responsive, culturally appropriate interventions (Britto et al. 2017 (Britto et al., 2017; Daelmans et al., 2017)). Given the vast diversity of contexts in which young children around the world are growing up, the SDG focus on equity and achieving access for all has highlighted an urgent need for research that addresses complexities in provision across diverse settings. There is a need for published evidence on innovative approaches to supporting early child development that are responsive to unique needs, knowledge and capacities of local families and communities.

Appropriate preparation of early childhood personnel requires training that promotes contextualization of child-care and education provision (Richter et al., 2017). However, as outlined in studies from a range of contexts, there is a serious shortage in availability of such personnel, particularly at community level in "low resource" contexts (Chen et al., 2014; Floyd & Brunk, 2016; Rodríguez et al., 2015; Sharma et al., 2008; Swaminathan, 2003; Chen et al., 2014). Relatedly, there are gaps in available evidence about how preparation and training for such personnel can best support them in facilitating a responsive, reflexive approach to working with children and families (Pearson et al., 2018; Sharma et al., 2008; Yousafzai et al., 2014).

This article aims to contribute to addressing these gaps through a case study of an innovative early childhood program known as "Sajag". The program provided training for community-based early childhood personnel working across three State-level Government Departments in India. The program was implemented across 164 villages located in a specific District within a Central Eastern State, using a cascade training approach. Two Process Coaches (PC) supported 33 Master Trainers (MT) in delivering training to 650 community-based Village Communicators (VCs). The program was initiated in partial response to concern over high rates of child malnutrition and mortality rates across the District and achieved significant positive impacts on children's growth and nutritional status in participating communities (Centre for Learning Resources, 2014, 2015). Our aim in documenting the program was stimulated by anecdotal evidence of the transformative learning impacts that the program had achieved across the diverse group of workers recruited to participate from three Government Departments (District Literacy Mission Authority; Women and Child Welfare Department and State Health Resource Center). Given the aforementioned lack of published evidence on appropriate training for community-based

workers, analysis of this program offers an important opportunity for learning and insights to support work on providing appropriate preparation for community-based early childhood workers.

We begin the next section with an overview of the context of training for community-based workers in India; we link issues within this context to international gaps in evidence to support training for this unique workforce. Our analysis of the Sajag "case" draws on a model of transformational learning that promotes caring, consultation and creativity (Thoresen, 2017). In particular, we highlight evidence from the Sajag training approach to suggest that training for community-based workers should acknowledge their existing knowledge and experiences by building in strategies to engage them in contextualization of early childhood programs for implementation in their local communities. Thoresen (2020) describes such training as "dependent on the presence of critical thinking, caring, collaboration and moments of creativity that convert past knowledge into constructive new insights" (p. 217). As the Sajag case illustrates, such training offers the potential for sustained impact on members of this workforce that will ultimately benefit children and families.

India's Integrated Child Development Services (ICDS) and the Sajag Program

Introduced during the 1970s, India's nation-wide ICDS provide a useful model of the community-based, unified approach to early childhood provision that is currently widely promoted as key to achieving SDG target 4.2 (Britto et al., 2017). ICDS are designed to provide a combination of supplementary nutrition, immunization, health check-up and referral services, as well as access to early childhood education, for children aged from birth to 6 years of age throughout India (Manhas & Dogra, 2012; Siraj-Blatchford, 2003). They are usually delivered by trained community-based paraprofessionals known as Anganwadi workers who are often themselves caregivers from within the local community, alongside Child Development and District Program Officers (Rao & Kaul, 2018).

Although the ICDS program has been highly successful in supporting improved nutrition and health among very young children through medical interventions, several studies point to its limitations in attending to early learning and education (Rao & Kaul, 2018). Evaluations also indicate a pressing need for increased awareness among community-based workers about the importance of supporting communities and parents to provide home-based responsive caregiving and early stimulation (Rao & Kaul, 2018; Swaminathan, 2003).

Although independent of the ICDS, Sajag (translated from Hindi as “to create critical awareness”) was designed to address such concerns among State Government and non-government stakeholders. The program focused on raising awareness about psycho-social development and the importance of early stimulation. It was implemented over a 2-year period between 2012–2014 across 164 villages and consisted of a set of modules and activities, delivered via community-based meetings and home visits, to raise caregivers’ awareness about their critical role in providing nurturing care. As part of the program, 650 community-based Village Communicators (VCs) received training in the delivery of these modules (Ahuja, 2016).

Training Needs of Community-Based Workers Involved in Delivery of Early Education and Development Packages

The crucial role of community-based workers in supporting delivery of early childhood programs, particularly in resource-constrained contexts such as LICs (Low-Income Countries) and LMICs (Low-Middle Income Countries) is increasingly acknowledged (Pedersen et al., 2019). As the key ICDS contact with communities in India, for example, Anganwadi workers play a central role in achieving long-term, positive impact through their work with caregivers and communities (Manhas & Dogra, 2012; Swaminathan, 2003). However, support for the work of such personnel, who constitute a unique cadre of workers, is often limited. Evaluations of the ICDS and associated health interventions have pointed to challenges associated with provision of training for Anganwadi and other community-based workers in India (Lalitha & Standley, 1988; Paul et al., 2011; Seshadri, 2003; Siraj-Blatchford, 2003; Swaminathan, 2003).

Swaminathan (2003) in particular has described training programs as limited in terms of (1) their almost exclusive focus on issues related to health and nutrition and (2) a lack of acknowledgment/attention to cultural differences across diverse community and ethnic groups. In Swaminathan’s (2003) words, “the social situation of children in poverty also tend(s) to be ignored or overlooked in favor of a monolithic abstract model dealing with a ‘theoretical’ child” (p. 72). More recent studies also indicate limited understanding among Anganwadi workers about important child development concepts and key messages, due to a heavy focus in their training on technical and administrative procedures (Manhas & Dogra, 2012).

These concerns are reported at the global level. Reflecting the technical emphasis reported by Manhas & Dogra, (2012), a tendency for training to focus on the logistics of program delivery is similarly implied in literature that describes community-based worker training as

driven by vertical programming. Vertical approaches prepare personnel to work with specific strategies and tools associated with discrete intervention programs (Tomlinson et al., 2014), rather than working towards the broader knowledge and career development that are more likely to result in sustained impact. Studies from South Africa (Costello & Dalglish, 2016), Ethiopia (Sibley et al., 2014), Ghana (Baatiema, Sumah, Tang, & Ganle, 2016), Pakistan (Yousafzai & Aboud, 2014) and from an international perspective (Pearson et al., 2018) have therefore begun to point to the urgent need for strengthened provision of training for early childhood professionals and paraprofessionals whose work is centered primarily around community-based support for children and families.

A key theme across the literature is that there are few published examples of how training for personnel whose work is located primarily within communities should be delivered, particularly in terms of representation from low-resource, complex contexts where access to traditional or mainstream services is limited. This constitutes a significant gap in the structures and processes that would ensure the achievement of universal provision of supports for young children living across vastly diverse contexts reflected in the SDG targets outlined earlier. In response, this study aimed to highlight unique aspects of the Sajag training program that could contribute to knowledge on appropriate training for community-based workers in such contexts.

Method

This study formed part of a broader research project, in which examples of noteworthy practice in the provision of early education and development were conducted across countries in South and South East Asia. The noteworthy practices initiative is facilitated by the Asia Pacific Regional Network for Early Childhood (ARNEC). Its objective is to counter universalized approaches to implementation of early education and development services, by providing accessible evidence of effective, localized approaches that respond specifically to unique contextual situations and needs. In 2014, our research team was commissioned by ARNEC to design and implement rigorous research-informed studies of eight noteworthy early childhood programs across seven countries; one of these constitutes the research reported in this article. The projects each adopted case study designs. In line with the case study approach, each study was intended go beyond the common focus on measuring quantitative outcomes that characterizes much evaluation research in order to provide contextualized insights into the underpinning principles and processes that were contributing to the success of these

Table 1 Sajag case study: defining the “object” and methods

Key elements of the Sajag “case” (cascade training model)	Data collection methods, participants and purpose	Period of data collection
Conception and design of the cascade model	<p>Method 1: Document analysis. Annual CLR reports; Sajag program documentation (learning materials; design notes); evaluation study data. Purpose: To provide insights into the background/ conceptualization of the cascade training model and to facilitate a level of triangulation within the dataset. We draw on this analysis to provide a brief overview of the training model and to add insight to interview findings.</p> <p>Method 2: Interviews with CLR Director; CLR Manager; Sajag Program Manager; Two CLR Process Coaches (PCs). Purpose: To gain insight into key conceptual and procedural underpinnings of the program; to understand the program from the perspectives of the organization and program design team.</p>	<p>Documentary analysis conducted throughout the project (research design phase; familiarization with the project; during interview and focus group data collection and to support thematic analyses). Interviews carried out in headquarters of CLR (capital city of the State) during the last week of April and first week of May 2015.</p>
Delivery of Training of Trainers (ToT): Three sessions led by CLR Process Coaches (PC) for 33 Master Trainers (MTs)	<p>Method 3: Interviews with: District level Government representatives in participating Ministries; Sajag Program Manager; two Process Coaches (PC); five MTs (Master Trainers) selected from the three participating State-level Government Departments. Purpose: To gain insights into participants’ experiences of training of trainers, from the perspective of both the training staff (PCs) and trainees (MTs).</p>	<p>Carried out at the District offices of the three participating Govt. Departments during the second 2 weeks of May 2015.</p>
Delivery of training for 650 Village Communicators (VCs) from across the 3 State Government Departments, focused on techniques for dissemination of Sajag messages and materials	<p>Method 4: Interviews with five MTs (Master Trainers). Method 5: Five focus groups with 20 Village Communicators (VCs) from across 6 villages. Purpose: To understand how the training was experienced by MTs and VCs; to gain insight into changes in knowledge and perception resulting from the training and impacts at village level.</p>	<p>Carried out across 12 villages. A combination of accessible villages (“close to the highway”) and “hard to reach” villages (in the “interior”) were visited. During the months of May and June 2015.</p>

noteworthy cases (Dooley, 2002; Gibbert, Ruigrok, & Wicki, 2008; Yin, 1982). The cases were identified by the research team via a regional selection process facilitated by ARNEC and based on a pre-determined set of criteria that emphasized representation of early childhood programs operating in under-represented communities. A field study protocol and set of guidelines written specifically for the purposes of this research project was presented and reviewed during a regional workshop and action plans for data collection in each country finalized. Following the workshop, country-based researchers (in this case, the third author, located in India) worked in their respective research sites over a 3-month period. Site visits were conducted by members of the core research team (including the first author of this paper), in order to provide support and to enhance data triangulation.

Participants

Following the case study approach described above and in line with the implementation structure of Sajag, interviews and focus groups were conducted with participants who were involved at key levels of training in the Sajag program, as presented in Table 1.

Procedure

Case studies consist of a specific subject, a clearly defined object and a methodological approach (Thomas, 2011). The subject of this case study, the Sajag program, comprised a mother and child responsive caregiving intervention program delivered across 165 villages by 650 trained Village Communicators (VCs). Our objective was to study key structures and processes of the cascade training program that supported delivery of the intervention. The object of our case study was therefore the training element of Sajag.

Key data collection tools were focus groups, interviews and documentary analysis. Interviews and focus group were conducted by the third author in Hindi. Transcripts were prepared and translated into English by the third author, with further checks conducted by an independent translator. Table 1 (please see above) provides a visual overview of the Sajag cascade training program as object, including participants in the research, the methods for data exploration and collection that were adopted for the Sajag case study and detail on the purpose/utilization of each method. As a first step in data collection, background information on the Sajag program was collected and collated, referencing a range of program materials including annual reports on implementation, program

evaluations and program video clips (available at <https://www.youtube.com/watch?v=Xb8hmzDQfP4&list=PLj3SbrVV50aph1iUz0Qd8HnbkE5CurbCi&index=1>). This data was supplemented with observations recorded in field notes recorded by the first and third authors during data collection and field visits.

This research received approval from the Research Ethics Committee of Universiti Brunei Darussalam. The methodology was also approved by relevant officials at the Asia Pacific Regional Network for Early Childhood. Informed consent was received from all participants and an on-going consent approach was adopted, with attention to participant comfort during interview and focus group sessions.

Data collection focused on understanding how the training was implemented and how the training supported delivery of the broader intervention program. A key focus was to document experiences of participants in Sajag's training program at all levels, from design of the training program to implementation of training and, subsequently, delivery of the responsive caregiving program. Our analyses were guided by our aim to draw on participants' perspectives to understand elements of the training that were unique and could inform both theory and practice in community-based worker training.

Analysis Plan

Documentary evidence was reviewed by the authors of this study at various stages for purposes of familiarization with the Sajag training model. For the third author, intensive review was conducted prior to and during field work. For the second author, review of this evidence formed a critical aspect of data analysis for both familiarization and triangulation. The first author reviewed program documentation prior to designing the study, during field work visits and also during data analysis. The documentary evidence was therefore used extensively to inform analyses and understanding of the program. We begin the Results section (please see below), for example, with a brief overview of the Sajag training model based on the documentary evidence.

Thematic analyses of transcriptions of the interviews and focus groups outlined in Table 1 were conducted using the six-phase protocol established by Braun and Clarke (2006). This approach was chosen for its theoretical flexibility, being compatible with our primary aim of understanding aspects of Sajag's training approach that could inform future training. Our approach to analysis was primarily inductive. Although the intention of our analysis (to understand unique features of the Sajag training program and to interpret these for broader application) was determined and shared from the outset, our aim was to take an inductive stance in understanding how the training program

had been experienced by participants at all levels of the training. Thematic analysis involved a shared process, with authors of this paper conducting and documenting analyses both independently (in the initial phases) and collaboratively (to discuss, develop and confirm themes), in line with recent commentaries on establishing credibility in thematic analysis (Nowell, Norris, White, & Moules, 2017). Responding to highly constructive feedback from reviewers of this manuscript, further refinement of themes was conducted by the first author, in consultation with the second and third authors.

Results

In this section, we begin with an introduction to the Sajag program, based on analysis of documentary sources. This introduction provides important background insights into the design and aims of the Sajag training program. We then present three overarching themes that were constructed based on focus group and interview data, to reflect key characteristics of the training program. In order to highlight possibilities for contributions to the field that are offered by these analyses, we link the three themes to Thoresen's (2017) model of transformational learning. The model promotes caring, consultation and creativity as key elements of learning that supports transformative change.

Introducing the Sajag Training Program

Designed and led by the Centre for Learning Resources (CLR, a non-government organization that works throughout India), the Sajag responsive caregiving program involved the development of an education package (known as "Chakmak Mein Aag") designed to support caregivers in understanding and responding to holistic child development needs. The education package for caregivers consisted of a booklet and a wall calendar. These materials were used by Village Communicators (VCs) to support delivery of key messages around responsive caregiving during community group meetings and home visits (Centre for Learning Resources, 2014). Although key messages covered health and nutrition, the program and associated materials were designed to focus particularly on raising awareness about psychosocial aspects including early caregiver-infant interactions and early stimulation.

A key defining aspect of the Sajag program was its "evolutionary" (to quote participants) approach to developing learning materials. This approach, reflected in the results reported below, facilitated on-going adjustments to content to ensure, first, that messages about early development delivered to caregivers were contextualized, meaningful and relatable; second, that effective delivery was

facilitated by responsive training and capacity-building for VCs responsible for delivering the responsive caregiving program.

The training program was conducted using a cascade model whereby Master Trainers selected from across the three State Departments involved in the program attended Training of Trainers sessions delivered by experienced CLR Process Coaches. Training was delivered over five sets of 3-day residential training sessions. The Master Trainers (MTs) subsequently conducted training for approximately 650 community-based workers drawn from the same State Departments. These 650 trainees (known within the Sajag program as Village Communicators) were then engaged by the State Government to disseminate Sajag materials and messages through a combination of multiple home visits and village/community meetings. Village Communicators (VCs) worked primarily within their own communities and largely on a voluntary basis, but were remunerated for organizing community meetings to support awareness about holistic child development, or for attending sector-level training to support delivery of caregiver materials.

Topics covered during the training covered key messages presented in the caregiver booklet, including The Role of Touch Talk and Play during every-day caregiver-child interactions and Toy Making from Simple Materials at Home. Further topics focused on delivery, including Effective Training Skills with Focus on Listening, Conducting Effective Home Visits. For MTs, an additional module on providing Effective Feedback to Village Communicators was also included (Centre for Learning Resources, 2014a).

Pedagogical approaches used in the training emphasized role playing the delivery of caregiver messages and dialog to support in-depth understanding about the meaning of key messages delivered via the caregiver learning packages. As explained by the CLR Project Manager:

One of the core principles.... is interactive sessions.. if you look at the materials for training that we have used...including the materials we have designed like chakmak mai aag or other materials or games.....there is always a sort of dialogic training.... Trainings were not done for less than 3 days....we realized that you need to drive across a message you need to spend time.

Program documentation highlights a careful, intentional approach to design and a deep concern with achieving sustained impact (Centre for Learning Resources, 2014). This approach was further shared during interviews with senior CLR staff:

Our primary objective in some sense...was to make sure the parents learnt about child care practices...

good child care practices...our key principle was to ensure that enough capacity...is being built within the local context..... that would be an ongoing process after this project is over...new children will be born... their parents will continue to need support...what we wanted to do was to make sure that local expertise is available...create it.. that would remain available to future parents as well (interview with CLR Director).

The implementation team sought to achieve this through a fundamental emphasis on incorporating strategies for understanding the local context and reflecting this in program materials: “(S)o you take a set of messages and a set of materials but whether it will work in a particular environment it depends on what the local environment is like... so it is very important to pilot these things” (interview with CLR Manager).

Training was also characterized by a highly person-centered approach that involved building personalized relationships to motivate MTs and VCs:

(T)hat is a process question that is how you get people who are going to be intermediaries in this whole process...to be invested in it sufficiently and own it sufficiently that they say this is our program and they take it forward (interview with CLR Director).

As part of their tailor made strategy, CLR also focused on providing on-going support and monitoring for 12 MTs as they delivered training to VCs at community level during a first phase of the program. The purpose of this support was to ensure that training was implemented effectively via the cascade model. Supports included regular telephone calls, help with logistics, observation of training by CLR staff and a reflection session following each training session (Centre for Learning Resources, 2014, 2015). This model of support was documented and utilized by monitoring staff in the participating Government Departments in subsequent phases of training (Ahuja, 2016). As a senior CLR staff member explained:

(A) whole set of processes that we have been able to bring about within the Sajag program for strengthening the government systems... kind of coaching MTs and VCs were provided and the kind of monitoring systems we put in place... a very important element in Sajag because counseling others is not a process of simply distributing packets... it is a soft, complex area and people who are at the front line ...they need a lot of on-going support... Anybody outside the government system will turn around and say what is the big deal in that but in government it is as alien as Mars and Jupiter are to us (interview with CLR Manager).

This brief overview provides brief insight into unique features of the Sajag training program. For further visual evidence of the rich, person-centered and contextualized approaches described here, readers are encouraged to access the materials (including videos, parenting resources and pictorial resources) available at <https://clrindia.org/sajag/>.

Construction of Themes: Transformational Learning

Thematic analysis of the interview and focus group data, as follows below, was designed to provide more in-depth analysis of ways in which the approaches outlined above were experienced by participants during training. In refining our themes to highlight what we see as important take home messages for the development of training for early childhood community-based workers, we draw on Thoresen's (2017) model of transformational learning. This model, developed as part of a program of work carried out across 140 institutions in 50 countries to support capacity-building for teachers involved in education for sustainable development, emphasizes the importance of learning that supports learners "not only to understand what they have been taught but also to re-conceptualize and re-apply this understanding to their daily lives" (Thoresen, 2017, p. 915). The model fits comfortably with the references to long-term, sustained change and personal investment that were shared by participants in the Sajag training as important aspects of the program.

The model presented by Thoresen (2017) is unique in that it identifies three core elements that are modeled during and result from transformational learning. These elements, outlined below, support participants in engaging with new knowledge not only on intellectual terms, but also on an emotional level that is highly motivational. They include caring (a genuine interest in a topic, concern with the present as well as future conditions, and compassion); creativity (active learning to nurture generation of alternative ideas and possibilities that could be useful in solving problems), and consultation (acknowledging learners' past experiences and supporting reflection on how these experiences connect to current learning; open and frank exchange of feelings and opinions) (Thoresen, 2017). Taken together, these three elements constitute a strongly values-based approach to learning and can result in what Thoresen (2017, p. 915) describes as a "magic synergy of creative caring".

Reflections shared by our participants, as highlighted across the themes that follow, closely mirror this concept of creative caring. Three overarching themes were constructed from the interview and focus group data to connect the unique characteristics of Sajag's approach to training community-based workers with Thoresen's (2017) model. The first, titled Caring, reflects a shared concern about

responding to features of local communities that underpinned the Sajag training. A caring approach was also reflected in the strong orientation to relational learning and safe spaces for sharing personal and professional early childhood knowledge, developed through a concern about establishing trusting relationships. The second theme, titled Consulting, reflects the consultative, dialogic approach to training that revealed important knowledge and insights into local capacity and cultural customs. These insights resulted in important on-going adjustments to the training program, as well as the broader responsive caregiving intervention program. The third theme, titled Transformative Change Through Creativity, provides insight into the impact of Sajag's unique approach on participants in the training program. Across all levels of implementation, participants reflected on critical moments of transformation in their own understanding of themselves as mothers and trainers within their communities, as well as their knowledge of child development.

Theme One: Caring

A key feature of Sajag's curriculum highlighted across multiple data sources was the strong emphasis on development of close relationships among members of the program training team and, at community level, between Village Communicators and caregivers. This emphasis reflects Thoresen's (2017) caring component, which refers to the importance of genuine interest. Genuine interest is demonstrated through Sajag's concern with understanding and tapping into existing community relationships. Rarely do training programs seek to engage at such a meaningful level with relationships and informal interactions that form part of daily life at community level. However, data from interviews with the CLR Director and CLR Manager indicate that caring about and responding to such community-based strengths formed an important and intentional aspect of the Sajag program:

I think it is a very significant part (that) local people... everyone connects (sic) with a parent is somewhere from the village and they can chat... when they are walking down the street, they can chat when they are fetching water from the well... they can chat when they are walking back... when they are meeting for social occasions... there is a lot of opportunity for information dissemination that automatically increases the reach of such a program (interview with CLR Director).

Explaining community vulnerabilities caused by high malnutrition, childhood mortality rates and low rates of adult literacy, the Sajag Project Manager described the

close-knit nature of relationships within these communities as a particular strength:

(But) ... the community is actually so bonded with each other that the child is never alone... he can spend the whole day in the neighbor's house and there will be no problem... if in a village I ask for a child's house... 15 people will come walking with me showing the house... so everybody knows everybody... they know where they stay... that's some kind of bonding that I have noticed (interview with Sajag Project Manager).

This relational approach to situating programs within specific contexts for effective delivery is reflected in the residential nature of Sajag training, which involved 3-day intensive training sessions where trainers and trainees were supported in engaging in active dialog around program content. CLR participants indicated that the decision to hold residential training was intentional and worth the additional investment required.

A representative from one of the participating Government Departments explained in an interview how this approach was reflected in training of MTs and VCs: "(I)t's not just a training package, it's a relationship-building process". Field notes recorded by the first author during the same interview highlight the significance of this focus on building relationships as part of the training: "Intensive (residential) training approach leads to internalization of messages (the training is residential and very focused on building bonds)". These messages (in the words of the Government representative) therefore become the "new tradition".

This quote aptly describes the transformative experiences that many participants attributed to their learning within the Sajag program. The relational, interactive methods adopted by CLR provided safe space for sharing perspectives and learning that supported the development of new understandings of child development through critical reflection on existing knowledge. The CLR Manager described the nature of interactions between Process Coaches (who delivered training of trainer sessions for MTs); Master Trainers (who trained Village Communicators) and the Village Communicators:

(The) relationship (between MTs and VCs) was very close and personal as there were long discussions about their personal lives and each one used to share their experiences and as trainers (Process Coaches) also they formed a close bond with the Master Trainers. It was residential training so women used to stay for 2–3 days and they (MTs and VCs) became friends, all of them were very supportive of each other.

The importance of these relationships was also referenced in interviews with the MTs and use of the term "Didi", (an affectionate term of address used by younger siblings when talking to older siblings) by both MTs and Village Communicators in reference to one another:

One of the Process Coaches (...) has helped me quite a lot and now I can openly talk (notes on interview with MT). With Sajag, there's an emotional connection (interview with MT).

Program staff are like family to me (interview with MT).

Field notes recorded by the third author further underscored how this opportunity for building relationships and establishing personal connections was experienced by both trainees and trainers: "While she was talking about Sajag you could notice constant smile on her face and a spark in her eyes" (third author notes on interview with Process Coach). "She sees CLR program staff as her friends and she says we never used to take them as senior madams but as friends with whom we could share anything" (third author notes on interview with MT).

This caring approach to training appeared to characterize CLR's concern with ensuring that the training content and approaches to delivery were fit for purpose through facilitation of opportunities for continuous feedback and reflexivity. Importantly, as this next theme highlights, the CLR team (CLR Manager, Project Manager and Process Coaches) were proactive in responding to feedback from participants throughout the training, adjusting program content and materials following consultation with participants.

Theme two: Consulting

This theme highlights the crucial role of simple consultative steps in achieving contextualization of training (often referred to as "evolutionary" by interviewees). The approach, as outlined below, facilitated key adjustments to suit the unique circumstances and needs of both the trainees (VCs) and caregivers/communities. Participants' reflections indicated that this consultative approach supported reflexivity and key adjustments to both the responsive caregiving program for parents and the training program itself. These are reflected in the two sub-themes presented here, which highlight changes to the caregiving program (hence training materials) to reflect local knowledge, as well as changes to the training program to reflect trainee needs and capacities.

As evidenced in participants' reflections, the consultative process was centered around a concern about acknowledging

and responding to participants' knowledge of their own communities, and was crucial for ensuring that key early childhood development messages could be effectively conveyed at local level. Importantly, the consultative approach also reflects Thoresen's (2017) concept of creativity (active learning that promotes generation of alternatives to address potential problems) as a core aspect of transformational learning. Two sub themes presented below highlight the kind of learning that Thoresen (2017, p. 217) associates with "moments of creativity that convert past knowledge into constructive new insights"; a necessary step in responding sensitively to unique cultural customs and beliefs.

Consultation to generate "creative alternatives" – changing key messages to reflect local knowledge Participant reflections on their experiences of Sajag training highlighted the many important ways in which materials and key messages for the mother child intervention program were refined in response to local knowledge shared by participants. The fundamental role that consultation ultimately played in enriching the Sajag program is expressed by the CLR Director, who describes the importance of context in meaning-making:

In any significant way unless you connect it (learning) with your own experiences and you make your own meaning of all that stuff and all our training processes focus on that... unless you contextualize you cannot hope for it to become meaningful to the people...

(It (materials and key messages) depends on the kind of traditions a particular culture has... kind of messages and stories a particular culture has... (interview with CLR Director).

As outlined by one of the Process Coaches who oversaw the training sessions, this stance involved providing space for localized learning from both MTs and VCs as an essential part of the training process. The open, non-judgemental and caring nature of consultation in this training program is summarized by one of the Process Coaches: "After formal training sessions had finished at the end of each day, the group would meet up to discuss parenthood and related matters in the evening" (interview with Process Coach). And one of the Master Trainers: "(We) had a very good relationship with CLR staff... used to share close bonding. During training sessions we used to crack jokes, dance, sing, laugh and play. In-between through play and interactive sessions we learnt many useful concepts" (interview with Master Trainer).

Field notes recorded by the first author based on discussions with various participants in the training support

these comments. Specifically, they highlight comments that point to the key role that this informal, relationship-based approach played in establishing awareness about the importance of contextualizing content and materials. Discussions highlighted that guidance for providing responsive caregiving (caring for babies and interacting with them) would have to be carefully tailored to the local community context in order for it to be meaningful and relatable to caregivers. Notes highlight that, during interviews, the Process Coaches in particular spent a lot of time describing how this was done throughout the training.

An example provided below by one of the Village Communicators highlights how, during the training and as a result of dialog between trainers and trainees, caregiver messages were tailored to reflect the important role of agricultural work in communities where the program was implemented: "I feed my child, play with my child. I have gained confidence and communication skills through the program. I learned that the bowl that layers all its leaves properly has no leaks!" (VC, shared during a focus group session with MTs and VCs, emphasis added).

This metaphor, reflecting the local custom of layering leaves in a bowl to prevent leakage, was developed by the training team to more meaningfully depict the idea that all components of a child's development (health, nutrition, psycho-social well-being and learning) are equally important (i.e. to prevent leakage). As the CLR Manager explained:

So we really need to pull apart the thread where... simple elements of each rationale without any jargon so that the..mother can see what is the long term benefits of the practice that she is doing with the child.....(the process coaches) brought a lot of feedback from the field and that was built into a lot of discussions that the project manager and trainers and I had....so there is a lot of bottom up feedback....as well as insights that... take the feedback and insights into account and of course bringing our own ideas and the.. continuous(ly) evolve the (training) program design.

Responsivity to context, and genuine caring with regard to the impact of training, was also reflected in efforts by the team to address beliefs and practices shared by participants that could counter practices espoused by the Sajag program. For example, the CLR Manager described two closely held traditions practiced during early infancy. The first involved heavy restriction of mothers' diets during the first few weeks after delivery. A transcript from one of the VC focus groups confirmed that some mothers were reportedly given only black tea, hot water and sonth laddoo – a traditional sweet that contains herbs to promote lactation - for some days after delivery. The belief that certain foods should be advised during the confinement period is recognized as

widely-held in Hindu society (Gatrad, Ray, & Sheikh, 2004). In response, carefully developed, contextually relevant examples were developed in order to ensure that Village Communicators and caregivers could both relate positively to an alternative perspective: “When a cow gives birth to a calf, we give bright green colored grass for the cow to eat so that her energy levels increase and she can produce more milk to feed the child” (interview with VC).

First author field notes expand on this extract, explaining that local acceptance of the need for a rich diet following child birth among livestock was drawn upon to persuade caregivers that, in the same way, a human mother needs more nutrition after delivery in order to breastfeed her baby.

The second widely-held belief that was perceived to be counterproductive to mother-infant bonding was that infants’ faces should be covered during breastfeeding to avoid them being affected by the “evil eye”. References to this belief were made frequently across interviews and focus groups. Similar beliefs about the potential harm caused to infants through eye contact with individuals who may feel envy or ill-will have been reported by researchers working in other rural contexts in India (Qamar, 2016). As the Sajag Project Manager explained: “(L)ike one of the things is... covering the child’s face while breastfeeding the child... ahh.. this is a belief which they say that... but it should not be seen, while feeding the baby, people should not even see” (interview with Sajag Project Manager).

In response, as field notes prepared by the third author indicate, trainers provided an alternative, contextually-relevant perspective that involved dialoguing with mothers about the possible impact on babies of always being covered up and “in the dark”. Importantly, the dialogic, interactive approach to training the trainers, training sessions for VCs, and subsequently to delivery of key messages at community level, facilitated co-learning through which such issues could be explored. According to first author field notes, one of the Master Trainers indicated during an interview that prior to the Sajag training she had been unaware that babies can learn anything from before the age of 6 months and even expressed surprise that they can make eye contact from birth. Although this limitation in her knowledge may have been somewhat exaggerated in discussing the beneficial impacts of Sajag training, her reflections are notable in highlighting two important points. First, the atmosphere of personal caring and genuine interest in participants’ knowledge established during training facilitated genuine reflection. Second, training for community-based workers should acknowledge and respond to their capacity and experience by extending beyond technical delivery of content as this can support critical reflection that results in genuine, transformational and more sustained learning.

Consultation to generate “creative alternatives” – changing modes of delivery in response to local capacity As this second sub-theme illustrates, tailoring the training to contextual circumstances required flexibility and on-going reflection not only in crafting key messages but also in terms of ensuring that teaching methods and materials were appropriate. As the CLR Director explained this reflected a key defining feature of the Sajag curriculum, “(s)o you take a set of messages and a set of materials but whether it will work in a particular environment it depends on what the local environment is like...so it is very important to pilot these things”. A specific example of how this approach strengthened the training involved substantial changes to learning materials for the VCs. During the course of the Master Trainer sessions, CLR staff became aware that although many of the VCs had experience of working in the field, many had left school at an early age and might struggle with the text-dominated training materials. The CLR Manager highlighted adjustments made in response: “So you know as soon as we realized what the context is... we just completely revised the (training) documents... so that is one element of Sajag”.

Data from interviews with the Sajag Project Manager provide further insight into this turning point in delivery of the Sajag training, when the team made the decision to produce a pictorial version of the training materials (known as “Chakmak Mein Aag”) that was then used in place of an existing text-based manual. Similar adjustments were made to the caregiver learning materials, with photographs or visual images added to accompany all key child development messages for clarity.

One of the Master Trainers, who had previously trained as a “Mitanin” (community health worker) talked about how the interactive approach to training, supported by the set of visual images to support key child development messages in Chakmak Mein Aag, had transformed her practice:

This training... was not based on book knowledge it was more practical in nature as in this training (they) used to show pictures and through pictures give messages. When only information is given through the Mitanin program, we tend to forget but through “Chakmak Mein Aag” when we explain it is very effective... along with teaching how to make toys using waste fabrics, bangles, toys available at home. (I) have been with the Health Department since 2002 but never received any training like this... usually used to throw things out and never understood the importance of things like this (interview with Master Trainer).

Similar feedback from participants had been received by senior CLR staff:

Yesterday I was asking (a Process Coach) and she was also saying that during training sessions...many personal stories used to come up... it's an important part of the training process to personalize training because we think that is the only way people learn from anything. You can..... read papers... you can read notes...you can get to learn information but it does not necessarily change you (interview with CLR Director).

Theme three: Transformative change through creativity

While the previous two themes centered around participants' recollections of strategies adopted during the training, this final theme reflects the impact of these on participants' learning. It highlights how the combination of caring and consultation to generate creative alternatives supported personal and professional transformations across groups of participants in Sajag training. Changes reported consistently across all interviews and focus groups indicate growing self-awareness and self-confidence, as relationships were nurtured and participants actively engaged in critical reflection on past and current learning. All participants, including senior staff, expressed surprise at the level of transformation felt by designers of the program as well as training participants. Sajag's role in facilitating a sense of empowerment was referenced widely.

Field notes recorded independently by the third and first authors following interviews with a Process Coach and Master Trainer, respectively, convey the strong impression of transformative change that was achieved via the personalized, caring and relational approach that underpinned Sajag training:

Master Trainers and Village Communicators were mainly women who also play the role of mothers in their family life (they explained) how they experienced emotional connection with this program. They, after learning in training sessions, applied all these concepts in their personal lives and experienced life changing moments. It is difficult to document all these concepts in their personal lives as it is difficult to often articulate that how they became more calm and stopped beating their children. In all their perspectives about children changed and they became more loving and caring. Sajag has (therefore) not only helped parents of children in age group of 0–3 years but also mothers of older children (third author field notes).

These changes were attributed to opportunities for sharing personal stories and building trusting relationships:

The program was originally designed to improve the lives of children, but this project took it to another level because women's personal stories were shared and lives were changed... Any feelings and concerns (could) be shared during the training and program delivery... building relationships has been central to this program. (First author field notes).

Project Managers commented on increased levels of confidence in caregiving at community level resulting from participation in the mother child intervention program:

Mothers became very confident ... because they started talking a lot ... getting freer in their communication ... There were so many women who ... were not confident of facing a crowd... but after involvement in this program ... they started feeling that their confidence has increased (Interview with Sajag Project Manager).

Master Trainers described changes in status of themselves (MTs) and VCs across communities that they worked in. For example:

(Women involved in the program) had never stepped out of their houses and were very shy but now they are so confident and have the skill that they can talk to anybody in the village... can now openly talk and have started living life in a true sense (interview with MT).

Village Communicators explained how participating in the training had changed them:

I used to be a housewife. I never stepped outside my house. I had no idea that children learn from birth. Now I like to make toys (shared during a focus group session).

... when I used to stay at home I was very shy and used to hesitate in interacting with other people but now I feel I have changed so much that I stepped out of my house, met people and got a chance to interact with people (shared during a focus group session).

These sentiments are reflected in the CLR Director's comments on feedback received from MTs and VCs:

“Believe me if you talk to MTs and VCs and ask them how the community got benefit the first they have to tell is how they benefited themselves...”.

In line with Sajag’s concern about building capacity within local government departments to deliver integrated early childhood provision, connections built between participants in the training also facilitated enhanced mutual understanding and cooperation across government sectors, as reported by senior CLR staff:

We found that a great deal of collaboration and working together (across the three sectors) happened at the level of VCs and MTs, they began to work together, learn from each other they become good friends which they never have been even if they were in the same village... because after all of them address one or other part of the child’s life in their respective work (CLR Director).

The broader impact of transformative experiences on the program as a whole are summarized by the CLR Manager, in response to a question about whether there were aspects of the program that had been surprising:

(A)s I said I would not say there were surprises in the sense we have seen that happening in many other places the deep impact that training have made on the people who have been trained... and yet every time it is a gratifying thing... it is not something we take for granted at all..ahh... so when it happens it is a big joy for us clearly that the MTs got so invested in the whole message... was the big turning point for this program because then they really took it forward and they really made it their business to help and train VCs to understanding it and then the VCs made it their business to pass it onto parents so those were the turning points.

Discussion

This study was conducted following evaluation research that had established the positive impact of Sajag’s responsive caregiving interventions on young children (Centre for Learning Resources, 2014; 2015). Focusing on Sajag’s training program as a case, our goal was to examine unique aspects of the training program, in order to contribute to addressing a gap in evidence to support appropriate training of early childhood community-based workers. At a conceptual level, we sought to provide novel insights into opportunities for building bridges between local contexts and realities, and broad, aspirational global targets for young children and families.

The themes presented here offer three important lessons that challenge the standardized, technical approach that, as

we highlighted in our review of literature, characterizes training for community-based workers in many contexts around the world. These insights contribute to understanding the unique needs of a growing workforce that is attracting increased global attention and yet has until recently received minimal attention (Costello & Dalglish, 2016; Pearson et al., 2018; Yousafzai et al., 2014).

The first lesson centers around the crucial importance of acknowledging, *not* underestimating, the capacity of community-based workers with limited formal education. This case study provides ample evidence that, in conducive learning environments, practitioners with limited literacy are able to contribute important local knowledge for enhancing community-based programs, as well as reflecting critically on their own past and current knowledge. For many of the participants in Sajag training, this process of critical reflection resulted in transformational learning that supported personal and professional empowerment.

The second lesson provides important insight into how community-based worker training can create appropriate space and opportunities for participants to gain confidence in contributing and sharing their experiences through a process of sometimes personally challenging critical reflection. The Sajag training program was characterized by genuine care at various levels. Care was expressed and modeled by program designers with regard to understanding features of local contexts. Also, by Process Coaches; Master Trainers and Village Communicators in terms of the care received by and given to each other during training. This relational approach, highlighted throughout participant reflections, supported a feeling among participants that the implementers of Sajag (both the training and the responsive caregiving program) were genuinely interested, committed to and concerned about the present and future impact of the program. As Thoresen (2017) argues, this “caring about” constitutes a necessary condition for transformational learning.

A third lesson reflects the transformative experiences that can result from active participation in contextualization of early childhood programs. Existing literature recognizes the importance of contextualizing materials and content (Richter et al., 2017). Evidence from this case study indicates that a scaffolded and intentional process of sharing knowledge on local customs and values, and adjusting standardized messages to reflect these, not only benefits programs but can empower participants and support sustained learning about the importance of holistic early childhood development.

Meaningful learning is likely to strengthen community-based workers’ investment in delivery of interventions. The impacts on participants described in theme three suggest that transformational learning is likely to result in personal and professional change that supports, positive, sustained understanding about the importance of sensitive caregiving. A Village Communicator who has herself had the opportunity to

reflect on her own caregiving experiences and experience the impact of caring interactions with her own child, is likely to become a powerful advocate within her community.

The findings generally portray Sajag in a very positive light but it is important to acknowledge challenges in implementation of the program that were raised during interviews and focus groups. A key difficulty outlined by several participants, for example, involved coordination of training across three separate Government Departments. Notwithstanding the positive impact of training, Village Communicators reported challenges around salary and retention, noting their low status in employment terms. This reflects broader issues outlined in the introduction sections of this article and points to a need for further investigation of ways in which community-based workers can be supported not only through training, but also through strengthened career pathways and formalized status. Not all Village Communicators recounted transformative experiences: one indicated that she could not remember much about the program. This serves as an important reminder that learning is an individualized process and that one approach is unlikely to serve the interests and needs of all learners.

Key potential limitations in the data presented should also be noted. First, although evaluations had indicated significant positive impacts associated with the Sajag responsive caregiving program on children in participating communities, data indicating changes in caregiving at community level need to be acknowledged as being largely circumstantial. As outlined in the Methodology section, focus groups were held with caregivers across communities where the Sajag materials had been delivered by Village Communicators following the training program. However, engaging caregivers directly in discussions around the impact that the Sajag materials had had at community level proved challenging. As the third author notes in her field notes, participants in the focus groups seemed reluctant to talk openly with someone who was unfamiliar to them. The findings provide evidence of ways in which a responsive, contextualized approach can result in significant transformational change for trainees. However, strong evidence of follow-on impact on caregivers at the community level would require further research.

Notwithstanding these limitations, the Sajag case study provides insights that are relevant not only for training practitioners located in low-resource contexts but also for extending knowledge on training for professionals who work closely with families and communities in more traditional settings. Indeed, the potential for integrated, holistic and nurturing approaches to advance the field in terms of workforce preparation and professionalism are increasingly acknowledged (Moloney et al., 2019). Early intervention studies in countries including Australia, America and the United Kingdom have for some time pointed to the value of

relationship-based approaches in supporting transformational change among both early intervention professionals and caregivers (Blackburn et al., 2017; Gilkerson & Ritzler, 2005; Moore, 2007), through what Moore (2007, p. 5) refers to as the process of “tuning to the other person’s world, understanding their perspective and experience, and establishing a personal connection”. Sajag’s commitment to actively engaging participants at all levels of training through genuine care, consultation and creative reflexivity can be seen to have significantly strengthened the impact of its training.

In terms of bridging local realities, customs and values with global targets and discourse, Sajag’s training approach and Thoresen’s (2017) model of transformational learning together demonstrate the critical importance of, and strategies for, actively engaging local, community-based workers in adaptation of standardized models and programs. Thoresen (2020) highlights empathy, adaptability, moderation and sharing as values that “provide a framework for critical, reflective, even ‘disruptive’ learning practices that involve all participants, even the marginalized, in a constant re-evaluation of the state of the work and their individual contributing to change” (p. 291). The elements of genuine, creative caring and consultation that characterized Sajag training contrast significantly with the technical, programmatic approach that is generally associated with training for early childhood workers with limited formal education. These elements sit comfortably within Thoresen’s (2020) model. They offer important insights into possibilities for moving forward with more appropriate, meaningful training opportunities for community-based workers. As articulated by one of the Sajag Process Coaches, a simple principle underpins this need:

A small idea of love, care can change so many things!

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Compliance with Ethical Standards

Conflict of Interest The authors declare no competing interests.

Ethics Approval Ethical approval for the study was obtained from the Research Ethics Committee of the lead facilitating research institution, Universiti Brunei Darussalam. The work followed a research protocol

that outlined required steps for gaining written and on-going verbal consent from all participants, and ethical conduct of research through reflexive review of proposed research methods at each site with participants and key stakeholders. All methods and procedures were reviewed and approved by an expert regional review panel facilitated by ARNEC (the Asia Pacific Regional Network for Early Childhood), consisting of academics and representatives from key regional non-government organizations including UNICEF and UNESCO.

Informed Consent Informed consent was obtained from all individual participants included in the study.

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