

# WIDE OPEN VISTAS EDUCATION PLAN

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## BACKGROUND

The concept of human capital pertains to individuals' knowledge and abilities that allow for changes in action and economic growth {Becker, 1986 #2341}. There are many ways to invest in human capital, include schooling, on-the-job training, medical care, vitamin consumption to name just a few (Becker & Tomes, 1986; Becker, Murphy & Tamura, 1994). Most literature focuses on individual's 'intellectual' human capital by measuring their completed grades of schooling or educational attainment. However, in particular in low-resource countries, human capital also refers to physical or health human capital, as it reflects an individuals' capacity to undertake manual labour (Robeyns, 2006). Nevertheless, education is considered as the key agent of development for individuals, communities, and countries (Becker, Murphy & Tamura, 1994). The reason is that the effects of education move beyond the more traditional effects on cognition and productivity by equipping children and young adults with the knowledge and skills considered valuable and necessary for employment in a progressive and competitive society (UNICEF & UNESCO, 2007). Education also provides the opportunity for emotional development and socialisation outside the family, enhanced employment and earning opportunities, especially important for economically and socially marginalised children (UNICEF & UNESCO, 2007). It also plays a vital role in safeguarding from taking part in exploitative and hazardous labour and sexual exploitation, promoting human rights and democracy, and protecting the environment, personal freedom, and empowerment (UNICEF & UNESCO, 2007). Whether education influences health and well-being through health-specific education, general literacy skills, or earning capacity, it is believed that educated persons have a higher accumulation of *human capital* compared to uneducated individuals (Caldwell, 1979; Elo, 1992).

For governments around the world, the provision of free education has been considered an "investment" in that it will produce the required 'manpower' which will yield both social and private returns in the future. However, it has also been provided as a response to social demand, in particular from the international community. The most notable of these demands has been the Millennium Development Goals (MDGs), which are a set of eight quantitative benchmarks (or 'goals') to be achieved by 2015, focused on reducing poverty, hunger and disease around the world (UN, 2013). The achievement of universal primary education, which is the second of the MDGs, can have powerful impacts across a number of sectors and goals, for example, reductions in poverty (MDG1), promoting gender equality (MDG3), reductions in child (MDG4) and maternal (MDG5) mortality, and preventing communicable diseases (MDG6) have all been linked to advances in education (United Nations, 2009). Similarly, progress in education depends on advances in achieving other public goals, including the MDGs not related to education. It is important that these links are recognised in order to adequately and comprehensively address poverty and disadvantage, especially in low resource countries where parental human capital is generally low, and where access to basic education may provide the only chance to exit the poverty cycle. This makes education of utter importance for the poorest communities in Kathmandu, for which social and economic disadvantage may prevent them, particularly children, from reaching their full potential in adulthood. For example, children living in poor households may not only suffer

from poor nutritional status but may also be forced to enter the workforce at a young age. Children's unique vulnerability and lack of skills means that any employment gained, is likely to be informal and therefore unsafe, low-income work. As children and their parents become accustomed to the contribution to the household income by working children, it increases the chances of complete withdrawal from school (Moffat & Finnis, 2005; CARE, 2008; Lumanti Support Group for Shelter, 2008; Bhattarai & Conway, 2010; UN-HABITAT, 2010a, 2010b; Khatiwada, 2013).

## 1.1 EDUCATION IN NEPAL

The Department of Education, under the Ministry of Education and Sport (MOES) is responsible for implementing and monitoring education programmes (Ministry of Education, 2012). In 2014, 16% of the total government budget was allocated to education, of which 78% came from the Government of Nepal and 22% from aid partners (Ministry of Finance, 2014a). Until 2009, the education system in Nepal consisted of five levels: pre-primary or early childhood education for three to four years of age; primary (grades 1-5), lower secondary (grades 6-8), secondary (grades 9-10), and higher secondary (grades 11-12) (Ministry of Education, 2012). Recently however, the School Sector Reform Programme (2009–2015) has restructured these levels into basic (grades 1–8) and secondary (grades 9–12) level.

As a signatory to the MDGs, The Government of Nepal has committed to providing free 'basic' education (grades one to eight) (FHD & RIDA, 2009). However economic and political instability have meant that plans to make 'basic' education free, have not been universally implemented (FHD & RIDA, 2009). Despite this, Nepal has made great strides in primary school education. Analysis of the latest household surveys show more parents are sending their children to school than ever before. Among 6-10 year olds, primary school attendance rose from 64% in 1990 to 96% in 2013. (Government of Nepal & UN country Team, 2013; Government of Nepal, 2014). Given that education is not compulsory in Nepal, this improvement in attendance is impressive, but most importantly has made the current generation more educated than the previous one, and also more equal. Today, 1.6 and 1.5 million boys and girls aged 6-10 years, or 96% boys and 95% girls aged 6-10 years, are enrolled in primary school, making girls 50% of the primary school population (Government of Nepal & UN country Team, 2013). This is a great achievement. A study by the Foundation for Human Development (FHD) and Research Inputs and Development Action (RIDA) in 2009, suggested that this improvement in education may be attributed to the willingness of parents to send children, including girls, to school, as well as the ability of schools to meet the demands of communities and households (FHD & RIDA, 2009). Nevertheless, it appears that in spite of significant success in enrolling children into primary school, retaining children in school remains problematic (FHD & RIDA, 2009). For various reasons related to community and individuals, secondary education remains low, with only 42% of all primary students surviving to lower secondary (grade 6), and only 28% surviving to secondary (grade 9) (CBS, 2011). There are also wide inequalities in survival rates on the basis of gender, wealth, and region in which people live. For example, the latest figures

suggest that the survival of girls to secondary school is lower than that of boys (26% for girls and 30% for boys), while 57% of households from the richest quintile but only 8% of households in the poorest quintile, reach secondary education (CBS, 2011). The study by FHD and RIDA (2009) points to a huge discrepancy in the amount of household income spent on education (FHD & RIDA, 2009). For instance, households from the richest quintile spend an average of NRs 958 (US \$9.70) on education per month, compared to NRs 81 (US \$0.82) per month for households in the poorest quintiles (FHD & RIDA, 2009). Although traditionally greater proportion of urban dwellers have achieved secondary education (59% for urban and 39% for rural) (CBS, 2011), increased rural-to-urban migration has created wide intra-urban disparities in access to services (UN-HABITAT, 2010b). In Nepal, it has been suggested that most rural-to-urban migrants are the rural poorest or those who have been forced to leave their villages due to the Maoist conflict (Nguyen *et al.*, 2011). Thus the influx of inevitably unskilled rural dwellers into urban areas, has been seen to increase the poor population in urban areas, essentially “shifting” poverty from rural to urban settings (Nguyen *et al.*, 2011). For these rural-to urban migrants, there is an increased preoccupation with income generation in order to meet their daily basic needs in their new urban environment. Like other poor individuals around the country, children belonging to poor urban families are at risk of leaving school poorly prepared relative to their better-off counterparts, with many disengaging with school prior to reaching secondary education.

Although in Nepal, government schools provide education for 72% of children and adolescents, the public education system in Nepal is characterised by poor infrastructure and facilities, low-quality teachers, weak management and regulation, and low achievement, (Thapa, 2012, 2013). For example, the pass rate of school leaving certificate exam (exam taken at the end of grade 10 to enrol in grade 11) at public schools was 30% in 2013 (Ministry of Education, 2014). In addition, 20% of schools have no toilet facilities, while 35% of schools with toilets, did not provide separate toilet facilities for girls and boys (Ministry of Education, 2014). Moreover, 23% have inadequate access to drinking water, and 87% have no electricity (Ministry of Finance, 2014b). In Kathmandu, where education facilities are widely available, parents opt for private schooling if they can afford it, with the private sector providing education for 70% school-age population (CBS, 2011c).

The literature shows that children are more likely to complete primary schooling if they enter at the right age (Glewwe & Jacoby, 1995; Daniels & Adair, 2004). A delay in starting school or grade repetition, translates to an increase in the time that children are dependent on their households, and therefore consuming household funds instead of contributing, leading to higher drop-out rates (Glewwe & Jacoby, 1995; Daniels & Adair, 2004). In addition, evidence shows that it is at the secondary level that the stronger impact of education on child nutrition and survival, skill-acquisition, economic wellbeing is more clearly observed, especially for girls (Kravdal, 2002; WHO, 2005; Little & Green, 2009). Previous research from Nepal, has found that absenteeism or complete withdrawal of children from school are coping strategies that families adopt during financial ‘shocks’ or difficulties. While these coping strategies attend to short-term shocks, the consequences of withdrawing children from school can have longer-term implications, because these temporary withdrawals often lead to

more permanent drop-outs. Parental perceptions about the value of schooling have also been found to be important in the educational attainment of children. For example, parents who consider education irrelevant to future prospects (due to caste or traditional occupations) have been linked to the early withdrawal of children from school. For some families living in poverty, meeting the direct (e.g. school fees) or indirect costs (e.g. transport, uniforms, books) of educating all their children is increasingly difficult. The situation is often worse for girls, where if a choice has to be made between sending a boy or a girl to school, the boy will usually be given precedence, predominantly as a result of the patriarchal norms and culture found in Nepal. For instance, the withdrawal from school for girls, has been linked to parental perceptions about the value of ‘investing’ in education for girls who will traditionally leave the family home upon marriage (Ashby, 1985; Stash & Hannum, 2001), and more recently the inadequate availability of sanitation infrastructure of some schools, especially for adolescent girls during menstruation (WaterAid, 2009; Hamal & KC, 2014). This female disadvantage has led to the social exclusion and increased vulnerability of women to poor health and poverty.

## **1.2 WIDE OPEN VISTAS’ POSITION: URBAN POVERTY AND EDUCATION**

The influx of rural migrants into urban centres like Kathmandu, is changing the traditional concept of ‘disadvantage’ in Nepal (Pradhan, 2004). For a country like Nepal, where poverty and disadvantage has traditionally been linked to rural living and certain caste and ethnic groups, the concept that poverty can exist in urban areas, where more paid-employment opportunities exist, and that those opportunities are largely determined by education rather than caste, is challenging (Subedi, 2010; Dahal, 2011; Subedi, 2011). However, previous studies have found that among urban poor communities in Kathmandu, *Brahmin* and *Chhetri* castes record a higher incidence of lowest daily income compared to Janajati and Dalit caste groups (Dahal, 2011). Furthermore, the study concluded that in urban areas, poverty in terms of household income, is not dependent on ethnic background, but rather on population characteristics such as age, gender, and family type, as well as household size, nature of work, and working hours (Dahal, 2011). Specifically in low-resource countries like Nepal the notion that not all urban residents enjoy the same advantages offered by urban living is not new. In fact, there is increasing evidence around the world of what is known as the “*urban penalty*”, in which a number of key development indicators (e.g. education, mortality rates etc.) for the urban poor are as bad or worse to that of rural populations (UN-HABITAT, 2003; Sverdlik, 2011). In Nepal however, data on the urban poor is limited. This is largely because Nepal remains a rural country with 83% of its population continuing to live in rural areas (CBS, 2012), while the increased concentration of services in urban areas has been assumed, until recently, to automatically lead to increased access (CBS, 2005; Acharya, 2010; ADB, 2010; Dahal, 2011).

Wide open Vistas (WOVs) acknowledges the hardships that poor, often migrant families experience in their new urban environment, and is committed to supporting poor urban families to ensure their children complete their education and grow up healthy, in order to give them an opportunity that may allow them to escape poverty in the future. It is part of

WOVs plan to support equal of access to education, with three priority areas: migrant families; girls; and secondary education. These priorities are reflected in our vision and mission statements:

## **2 VISION**

Wide Open Vistas envisions that the most all urban communities, families, and children have access to equal educational and health opportunities in order to achieve their full social and health potential and increasing their livelihood opportunities.

## **3 MISSION**

The mission of WOVs is to help support the educational and health needs of disadvantaged children in Nepal.

## **4 PRIORITIES**

### **4.1 POOR FAMILIES**

Poverty and disadvantage is often captured in measures such as educational attainment, employment type, income, housing, access to services, and social networks (Becker & Tomes, 1986; Coleman, 1988; Brooks-Gunn, 1995), and is an important determinant of long and short-term nutritional status, food security, adequate healthcare, and education for the family. For children growing-up in poor families, poverty exposes them to inadequate nutrition, poor sanitation and hygiene, frequent illness, and reduced healthcare, hindering their developmental potential both physically and mentally (Haveman, Wolfe & Spaulding, 1991; Brooks-Gunn *et al.*, 1995; Gluckman *et al.*, 2008; Shonkoff, Boyce & McEwen, 2009). The adverse conditions a poor mother endures during pregnancy, are likely to negatively impact the health of their children (through low birth-weight and shorter offspring), and continue to impact negatively throughout the child's life-course, as they have the least access to resources that will enable them to overcome their early life disadvantage (Brooks-Gunn, Klebanov & Liaw, 1995; Brooks-Gunn & Duncan, 1997; Grantham-McGregor *et al.*, 2007; Black *et al.*, 2008). The failure of poor children to fulfil their full potential, plays an important part in the intergenerational transmission of poverty, and as such growing up in poverty is said to be one of the most detrimental environments in which a child can develop.

Access to some form of credit during times of income shock appears to limit its effect on withdrawals from school. For example, research on conditional cash transfer programmes (where school attendance is a requirement) in Mexico reveals that they can protect enrolments in times of income shock and act as some sort of safety net to schooling (de Janvry *et al.*, 2006; Barber & Gertler, 2008). In adulthood, the children that participated in the programme, were taller and earned more than their peers who had not participated in the programme (Barber & Gertler, 2008). Similarly, research by Ersado (2005) on patterns of

child labour and schooling decisions, showed that in rural Nepal and Zimbabwe access to a commercial bank had a positive effect on child schooling and a negative impact on child labour (Ersado, 2005). Rosati and colleagues suggest that that parents' access to credit provides risk-coping instruments that help protect children from dropping out of school (Rosati, Mealli & Guarcello, 2003).

## 4.2 GIRLS

The role of the mothers' education in child survival and wellbeing has been made evident by several literature on health in developing countries. Girl's education has been shown to delay marriage, increase financial independence in adulthood, alter the traditional balance of power within the family, and dramatically improve the chances that her children will survive, be better nourished, and better educated (Caldwell, 1979; Cleland, 2010; Dupas, 2011; Pamuk, Fuchs & Lutz, 2011; Arthur, 2012; Pandey, Lama & Lee, 2012; Birmeta, Dibaba & Woldeyohannes, 2013; Nimbalkar *et al.*, 2013; Singh, Kumar & Kumar, 2013; Tsegay *et al.*, 2013; Yesuf & Calderon-Margalit, 2013). Thus limiting girl's educational opportunities, cannot only have detrimental effects on the health of future mothers but also on the health of future generations. Gakidou (2010) estimated that between 1970 and 2009, every one year increase in education of women of reproductive age, was equivalent to 9.5% reduction in child mortality. The study showed that globally, compared with 1970, there were about 8.2 million fewer deaths among children younger than 5 years in 2009, of which 4.2 million deaths (51.2%) were averted as a result of increases in educational attainment (Gakidou *et al.*, 2010). For South Asia, the study found that increases in women's education were estimated to prevent 737,000 child deaths in 2009 alone (Gakidou *et al.*, 2010).

Unfortunately, Nepal is a country where traditionally, wide gender differences in school attainment have been recorded (Stash & Hannum, 2001). Several studies have reported that among Nepali families, girl's educational opportunities have been limited due to parental attitudes regarding (1) the traditional gender-based division of house work, in which girls were expected to undertake domestic labour; (2) the perception that non-farm employment was as a more desirable and appropriate occupation for males than females; and (3) the expected returns on investments, particularly since daughters were married off between the ages of 15 and 17, after which they are considered to have joined their husband's (marital) home, while sons were expected to look after their parents in old age (Ashby, 1985; Stash & Hannum, 2001; LeVine, 2006; Parker, Standing & Shrestha, 2014). Analysis of the latest available national figures suggest that such traditional parental perceptions regarding the value of girls' practices continue to be enforced in some parts of Nepal. For example, 5% of boys and 12% of girls aged between 6 and 24 years, have never attended school (CBS, 2011). For 28% of boys and 65% of girls, the primary reason was parent's unwillingness to send their children to school, as majority undertake household chores, such as looking after siblings and cooking, so that their parents can go to work and earn (CBS, 2011). In addition, although it is illegal for girls to marry before the age of 18, marriage in Nepal continues to occur relatively early. Among 20-49 year old women 52% were married by the age of 18, for a median age at first marriage of 17.8 (MOHP, New ERA & ICF International, 2012). This

suggests that deep-rooted social perceptions of gender roles and stereotypes at the household level continue to translate into the unequal allocation of resources among male and female children within the family.

### 4.3 SECONDARY EDUCATION

At the individual level, within-country studies indicate that completion of secondary school provides great benefits for adolescents, improving health and wellbeing, increasing their capacity and motivation to prevent pregnancy (Caldwell, 1980, 1994), empowering them to take responsibility for their own lives, and for improving the lives of others (Caldwell, 1994; Kravdal, 2002). For example in Ghana, husband's secondary education translate to a 30% and 70% increase in the likelihood of their wives attending antenatal care early and giving birth in the presence of trained personnel compared to husband's with no education (Doku, Neupane & Doku, 2012). At the community level, the economic benefits of secondary and higher education are also evident in countries like China, where the creation of skills needed to meet the rising demand for skills in higher-end manufacturing and service sectors, has enabled the country to experience rapid and sustained economic growth (Little & Green, 2009).

For women, previous studies have found that secondary education not only delays marriage but also improves the nutritional status and survival of their children (Cohen, 2008; Gakidou *et al.*, 2010). For example, studies from Kenya and Bangladesh have shown that that compared to mothers who had secondary education or higher, children whose mothers had no education were 29% and 16% more likely to be stunted (Hasan & Nisar, 2002; Abuya, Ciera & Kimani-Murage, 2012). In the seminal work linking women's education to both fertility and infant mortality, Subbarao and Raney (1995) found that the effect of increasing female secondary enrolment rates was much more important than increasing per capita GDP or the number of physicians per capita in reducing infant mortality (Subbarao & Raney, 1995). More recently, a WHO Global Survey on Maternal and Perinatal Health which collected data from 373 randomly selected facilities from 24 randomly selected countries in Africa, Latin America and Asia (Karlsen *et al.*, 2011), found that women with no education, were 2.7 times more likely to die as a result of pregnancy and childbirth, than women with 12 or more years of education (Karlsen *et al.*, 2011). In the same study, women with primary school education were also two times more likely to die during childbirth than those with 12 or more years of education (Karlsen *et al.*, 2011). Specifically for Nepal, Hussain and colleagues (2011) and Shrestha and colleagues (2014) have proposed that Nepal's impressive reduction in maternal mortality has been the result of important national investments in addressing not only healthcare coverage, but also by making education and maternal and child healthcare widely and freely available (Hussein *et al.*, 2011; Shrestha, Bell & Marais, 2014).



## 5 2015 GOALS AND OBJECTIVES

*Goal 1: Provide supportive services that help them keep children in secondary school.*

### *Objectives*

- a) Continue ‘Youth Scholarships’ for 9 current children through November 2015. Evaluate also including December so we can shift with having academic year obligations match our fiscal year which matches the calendar year (synchronicity).
- b) Evaluate current funds and future revenues and establish board position on how best to allocate funds. Starter questions are: Is a flat 10\$ a month toward tuition the correct approach and amount? Do we want to support more kids with less, or fewer kids with more? One year or long term? What about supporting schools with quality teachers, materials, bathrooms? Is this our role? (March 1-April 30th). Costs will go up.
- c) Pilot selection process/data collection form for new/existing families/children (June 1, 2015)
  - a. Finalize Primary Data Collection form, translate it, hire field staff to administer. (May, to be trialed in June).
  - b. Develop set a working agreement/consent with the families including role WOVS plays and contact information. (May, trial in June)
- d) Explore and document evidence for additional family support structures (ongoing)
- e) Develop process for offering micro-loans to needy families (December 1<sup>st</sup> – onwards, to be trialed in 2016).
- f) Develop initial materials and longer range plans for educating/supporting parents through multiple approaches including low-literacy print materials, workshops, and other educational programs (ongoing with activities trialed in 2016).

*Goal 2: Keep kids healthy.*

### *Objectives*

- a) Develop process for incentivizing annual health check-ups for children (September 1).
- b) Establish types and amounts of nutritional supplementation to provide family  
Improve nutritional support approach with feedback from first round of surveys and input with nutritionist (June assess via survey, deliver sometime by November).

*Goal 3: Prevent girls attrition from secondary education*

### *Objectives*

- a) Explore options for ensuring all kids have access to bathrooms while at home and school. (ongoing, trial questions in data collection sheet in November if not sooner)
- b) Investigate and document evidence that we might generalize for increasing self-efficacy. Possibly implement as micro-grant. (ongoing, trial something in 2016 if not sooner).
- c) Investigate presence and resources for sex education for students. (ongoing, trial questions in data collection sheet in November if not sooner)

*Goal 4: Leverage resources and research funds*

- a) Consider new round of micro-research grants to Dhulikel health science students to fund projects and help in WOV active areas.
- b) Investigate feasibility of grant recipients to form part of community-research advisory group to enable WOV to pursue culturally appropriate and current research, and address research issues in a timely manner.

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