



Catch-Up Programme: Action Learning Report



BACKGROUND

World Vision initiated the Catch-Up Programme in response to COVID-19 education disruption as a pilot program with the intention to develop and field-test appropriate guidance and resources to adapt and inform scale-up across contexts as part of the Education Continuity in Crisis initiative. This report documents some of the key lessons, short and longer-term recommendations emerging from a process of action learning within the pilot program. The report is structured around a series of learning themes and questions that were codesigned and prioritized to inform the refinement of program guidance, adaptation and future evidence-building.

INTRODUCTION TO THE CATCH-UP PROGRAMME (CUP)

In response to COVID-19 related education disruptions WV explored a programmatic solution that was scalable across multiple contexts, leveraged organizational strengths in community engagement, and focused on most vulnerable children in early grades with the aim to mitigate learning losses and drop out. Existing Unlock Literacy interventions would not meet the scope and scale of learning loss. Leveraging Global COVID Emergency Response funding, World Vision designed and rapidly piloted a Catch-Up Programme in 3 countries (Cambodia, Ghana, Zimbabwe), with the intention to learn lessons for adaptation and future scale out. The approach was developed using existing evidence and guidance from INEE and the AEWG to design and rapidly deliver a solution in collaboration with a global technical team (internal and external to World Vision) and country level technical and operational teams.

CUP focuses on acquisition of early grade literacy and numeracy skills in community-based CUP clubs designed to provide safe, play-based, inclusive and carefully sequenced instruction at the right level that also addresses social emotional learning of children. It capitalizes on WV's strengths in mobilizing communities to support children's learning, working with and supporting the well-being of community facilitators, and forging partnerships with schools and teachers to provide holistic support.

The CUP curriculum is structured in two levels for both literacy and for numeracy. The blue level focuses on priority learning outcomes aligned to grade one using the UNESCO global proficiency framework, and the orange level that aligns to grade two.

PILOT SUMMARY

The pilot began in late 2021 with a process of assessment in each country. CUP technical guidance was developed iteratively and based upon input with piloting field teams in early 2022. The three countries conducted orientation and subsequent trainings in February/March of 2022 and by end of March most CUP clubs were launched. Most of the data on children's progress was collected in late May (Ghana and Cambodia), while in Zimbabwe the assessments were completed in July. The table below summarizes key statistics for each country.

	Cambodia	Ghana	Zimbabwe
Number of Children Screened using DAPA	242 (116 female)	681 (340 female)	1080
Number of Children participating in CUP	436	240 (140 female)	600 (331 female)
Number of Children completing CUP	206 (113 female) of which 142 also had baseline DAPA	240 (140 female)	477 (225 female) defined as having baseline and endline DAPA scores
Number of CUP clubs	10	12	30
Number of CUP facilitators	24 (12 female)	20 (19 female)	30 (24 female)
CUP level and number of sessions	30 sessions literacy - blue and orange 10 sessions numeracy - blue and orange	34 - literacy blue	15+ sessions Literacy and Numeracy (sessions ongoing)

METHODOLOGY

The approach to action learning was guided by a framework of inquiry directly related to the work of the Catch-Up Pilot Programme. The framework includes a set of simple considerations co-created with the pilot team. Importantly, the approach is not evaluative rather an accompanied learning process.

The action learning framework consisted of the following priority learning areas and questions:

- ✓ **Tools and guidance** - How were the CUP tools and guidance applied? Were the tools and guidance fit for purpose?
- ✓ **Implementation experiences and adaptations** – What were the common and differing experiences of delivering CUP? Were there changes to the way CUP was delivered in practice -how and why? How were resources used in CUP delivery?
- ✓ **Fidelity and quality** - What were the considerations around quality and fidelity? Were standards set and met?
- ✓ **Stakeholder Experiences** - What are the perspectives and experiences of key stakeholders involved in CUP? What capacities did they bring and what supports did they need?
- ✓ **Results for Children** - What are the emerging results for children? For whom? What are the perspectives and experience of children participating in CUP?
- ✓ **Considerations for Scaling and Sustainability** - What next for CUP in pilot sites, pilot countries and beyond?

Information was gathered systematically in a series of routine calls and a reflection workshop as well as through review of program documentation including formal and informal reports and available monitoring data.

LIMITATIONS

The approach was not evaluative and was constrained to the timeline of the pilot period. Due to COVID-19 travel restrictions, no field visits were conducted. An action learning process was planned for in the pilot design however, action learning started at the implementation stage after country assessments and the initial programme design/ toolkit was developed. Much was learned at the initial stages of the process but this was not documented as part of the action learning process. Further, the pilot implementation began without harmonized monitoring and evaluation tools for systematic data collection both qualitative and quantitative. Some M&E resources were introduced in the course of implementation but application was limited (more in sections below).

Learning outcomes, sequences and sample session plans were used in different ways. In Cambodia, a detailed scope and sequencing of lessons was developed as part of language adaptation by technical staff in the field office. Notably, Khmer has a much larger alphabet and set of blending sounds than English. In Ghana and Zimbabwe adaptations were made for local language learning in literacy. The process in Zimbabwe was undertaken with teachers who were oriented to the early toolkit. Similarly, in Ghana the toolkit was used to develop a local curriculum.

The guide supplied 20 sample learning sequences, 10 learning sequences with suggested activities and 2 scripted lessons per level. This was intended as a starter for field offices to develop the full set of 32 sessions per level. It is unclear how additional session plans were developed from learning outcomes in detail and ultimately rolled-out by facilitators. All three pilot teams mentioned the involvement of teachers or other education officials in the adaptation and development of curricular resources. Feedback from Zimbabwe was that the toolkit was long and facilitators required more training. In Ghana, the primary resource provided to facilitators was also the toolkit. In Cambodia, the language demands (coupled with volunteer policy implications see next section) led to more content being delivered through longer sessions.

Field offices were also unclear on what constituted a full learning cycle during implementation calls, indicating the prioritisation and sequencing of learning outcomes and session plan design was not fully mapped out. The DAPA tool was universally appreciated for its simplicity and practical application. It served the purpose of assessing eligible children and placing them into right levels and the purpose of assessing learner progress. FO's clearly desired a simple progress measure as the DAPA was also applied at mid-point in Ghana and Cambodia (which was outside of the purpose of the tool).

Ghana and Zimbabwe trained teachers on the use of the DAPA, whereas the DAPA was used by M&E staff in Cambodia. In Ghana and Zimbabwe, teachers were selected based on perception of alignment to their skills in assessing learners, and in the case of Ghana as a step removed/independent verifier to facilitators who delivered CUP sessions. Working with teachers on DAPA had the advantage of building teachers' skills in assessment for learning and improving awareness of the learners needs in school, but this removes these advantages from the CUP facilitators who are facilitating sessions with the targeted learners.

In Cambodia, the DAPA tool was adapted to the language and curriculum. This led to an extra-layer of levelling being incorporated into the DAPA (creating sub-levels for each skill) resulting in a more complex tool and subsequent analysis of learner progress.

All FO's expressed interest in continuing to use the DAPA tool including in applications outside of CUP (in Unlock literacy in Ghana or new grants including in-school programming in Cambodia).

Tools and Guidance: Fit for purpose

Key Lesson	Short Term Recommendations	Longer Term Recommendations
Conducting a deliberate assessment increased shared understanding of CUP by stakeholders and elevated considerations for engaging children.	Include simple, inclusive assessment tools and process guidance in CUP tools.	Consider developing resources for engaging with country-level stakeholders including Ministries of Education, UNICEF and donors.
The DAPA tool was universally applied and appreciated. The DAPA tool was effective for assessing children for right-level instruction and for assessing progress.	Sustain the use of the DAPA tool. Be explicit about facilitators as primary users in CUP portal. Keep it as simple as possible. Develop a digital application for DAPA and other learner profile and tracking data.	Consider additional applications for the DAPA tool in literacy and numeracy programming. Further validate the use of the DAPA for numeracy (given limited use in pilot period).
Given the urgency of the pilots, field offices used curricular resources in the toolkit to get started and did not all have the time and resource or capacity to develop the detailed full set of lessons. Some field offices relied upon local stakeholders to extend what was provided as samples in the toolkit.	Provide a full set of learning sequences and scripted lessons and detailed guidance to adapt and align with education stakeholders to government learning outcome priorities or catch-up policies or guides.	Directly equip facilitators with full curriculum resources. Include monitoring of the use of the session plans in practice in future programs. Consider further support and guidance for language adaptation.
The timeframe of the project (funding) was the key factor in determining the CUP learning cycle duration in the pilot projects.	Provide clear guidance on the recommended length of learning cycles and scenarios for completing learning cycles.	Further field-test a full 32 session CUP club curriculum.

2. Implementation Experience and Adaptation - What were the common and differing experiences of delivering CUP? How were financial resources used in CUP delivery?

Common and differing experiences in delivering CUP?

All pilot countries had experience with Unlock literacy reading clubs. This benefitted CUP piloting in two ways:

1. It built upon positive experiences of informal learning at community level;
2. It leveraged existing capacities at community and project level including reading club venues, reading club facilitators and field level staff familiar with supporting reading clubs.

At the start, the differences between CUP and reading clubs needed to be continually emphasized. The experience with UL reading clubs also likely contributed to the choices to start with literacy and not numeracy in CUP (more on that below).

All pilot countries engaged with education stakeholders including local schools early in the roll-out. At this point, more queries on roles of stakeholders surfaced. A few major themes emerged:

- 1. Role of the Teacher** – In Ghana and Zimbabwe it was assumed that teachers should conduct the DAPA, since teachers are experienced in ‘testing’ learners. Similarly, workshops were held with teachers to adapt and build out the CUP curriculum. In Cambodia, the approach was slightly different with CUP facilitators conducting DAPA and a WV technical staff developed the detailed CUP curriculum.

- 2. Staging of CUP clubs** - Initially, pilot programs were positioning CUP clubs as afterschool clubs to be hosted in school venues. While this made sense on many levels in the operating contexts, CUP is intended as a community-based programme that provides continuity when education is disrupted. Further, CUP targets learners in and out of school and staging in school would create barriers for children out of school. These two points were emphasized in calls to guide pilot programs to situate CUP in community and ultimately clubs were set in community venues.
- 3. Mobilisation** - While communities were engaged at various times in the start-up, the recruitment of eligible learners in Zimbabwe and Ghana was through the school. Teachers conducted the DAPA on learners recruited at school. This was efficient as enrolment is very high but is not effective in reaching highly vulnerable children who are out of school or do not attend regularly. This reflection was shared by the country pilot teams and relevant to have more inclusive, community-based enrolment processes at scale.

In Ghana, the pilot delivered only literacy sessions. In Cambodia, CUP began with literacy sessions and numeracy commenced when the literacy package was completed. By the end of the grant period, less than a half of the planned numeracy sessions were completed in Cambodia. In Zimbabwe, literacy and numeracy was delivered concurrently (see fidelity and quality section). All pilot teams expressed less confidence with numeracy than with literacy (despite the numeracy curriculum requiring less adaptation than literacy). Similarly, pilot teams relayed that CUP facilitators had less confidence in delivering numeracy sessions than literacy sessions. Children in Cambodia and Zimbabwe had slightly lower proficiency skills in literacy than numeracy based on DAPA findings.

In Cambodia, the DAPA was adapted based on experience with WV's School-Based Test About Reading (STAR)¹ resulting in an instrument and analysis that included detailed sub-levels for each literacy skill. This adaptation aligned the DAPA with the detailed CUP curriculum but also made it more complex. This meant that it was less accessible to CUP facilitators to level learners or gauge their progress at a glance of the data and analysis and feedback was done by WV staff to inform placement and progress.

CUP facilitator training was conducted by field offices. Each developed their own training plan and resources and shared these plans for brief technical feedback. This experience informed the decision to develop further training resources for future scale-up.

CUP facilitator motivation and capacity was an initial concern in all pilot countries. Both Ghana and Cambodia provided monthly cash allowances to CUP facilitators in alignment with the country volunteer policy. In Cambodia, the allowance for volunteers was for a minimum of two hours of daily work, which contributed to longer CUP sessions (see more in fidelity and quality). The majority of CUP facilitators were existing reading club facilitators. In Zimbabwe, CUP facilitators were not provided cash allowance but were selected by schools and communities based on their ongoing involvement in education in communities. There were no reports of facilitator attrition in the pilot period.

When considering future scale up, all programs made recommendations for dedicated staffing. The layering of CUP into Unlock Literacy programmes meant that existing Area Programme level staff were unable to provide the consistent on-site support and follow up to CUP clubs and facilitators that a new initiative like CUP requires. This also relates to the technical activities required at start up including curricula adaptation, consultations and trainings which requires dedicated time and support by technical staff.

¹ School-Based Test About Reading – this tool is used in WV Unlock Literacy Programs and measures reading skills for minimum proficiency in reading comprehension at grade three.

How were financial resources used?

The COVER grant availed \$25,000 per country for the CUP pilot. Field offices invested this in similar ways including technical oversight (education technical leadership time and/or travel), facilitator training, teaching and learning resources and CUP venue materials (minimal). In Ghana and Cambodia, budget was also applied to facilitator allowances. In Zimbabwe, resources were used for workshops involving education stakeholders including district level staff, school leaders and teachers. Notably, Zimbabwe covered more catchment primary schools (13) than Ghana (6). A weekly meal was purchased and provided to CUP learners in Ghana.

Decisions on scale were largely influenced by what was considered a small pilot for learning purposes. Thus, the pilot is not a good representation of value for money considerations at this stage in the process. Despite this, there are clear efficiencies in integrating CUP within existing education programming within WV's Area Programmes. The three field offices leveraged resources from Unlock Literacy and thus additional investments were marginal.

Implementation Experience and Adaptation		
Key Lesson	Short Term Recommendations	Longer Term Recommendations
The role of school and community stakeholders in CUP needed to be continually reinforced in the process of implementation.	Clarify the recommended roles of school and community stakeholders best aligned to the aims of CUP as an agile community-based program in CUP resources.	Develop resources for in-school remediation. Develop a flowchart/ decision matrix for making contextualized decisions on prioritizing education program approaches including CUP.
Experience with Unlock Literacy enabled CUP piloting but also required consistent messaging on the differences between CUP clubs and reading clubs.	Continue to emphasize what is the same and what is different about CUP compared to UL. Cross-reference relevant technical resources from UL in CUP resources.	Consider : - What resources and learning from CUP may be relevant for UL ? - How to package CUP as an enabling model for UL?
There is limited experience in numeracy implementation in the CUP pilot.	Address lower confidence in numeracy as a subject area in CUP tools and guidelines in general, and specifically in the training and support of CUP facilitators.	Support numeracy in scale-up of CUP to develop more evidence and experience around numeracy programming.
Field office capacity needs highlighted in the pilot include technical development and adaptation of CUP curriculum and routine support to CUP clubs and facilitators at field level.	Include staffing recommendations that account for the level of effort of education specialist staff in adapting CUP curriculum resources, training of CUP facilitators and ongoing technical support and the level of effort required of field staff in providing routine support to CUP clubs and facilitators.	
There were no major challenges in recruiting and selecting CUP facilitators. CUP facilitators demonstrated the competencies and commitment to deliver CUP during the pilot period.	Reinforce CUP facilitator competencies in development and dissemination of CUP technical resources. Refer also to WV volunteer policies.	Further research in CUP facilitator competencies and considerations of retention, particularly in CUP programmes of recommended length (9-18 months).
CUP was piloted with minimal additional resources in UL contexts.	Promote CUP as a cost-effective response within UL contexts.	Promote CUP as an enabling project model.

3. Fidelity and Quality - What were the considerations around quality and fidelity? Were standards set and met?

Monitoring tools were developed during implementation and thus not fully applied. Apart from DAPA, no primary data was systematically shared. Thus, considerations of quality and fidelity are based upon what was reported in update and technical calls and final reports.

Field offices reported good adherence to session routines with CUP clubs following the session parameters set out in the guidance.

The main quality concern of field offices was the ratio of learners to facilitators. In Zimbabwe and Cambodia children continued to present to CUP after initial assessment. In Zimbabwe, the demand for CUP was high and facilitators opted to split to double the number of CUP clubs (but without the recommended ratio of children per facilitator). In Cambodia, facilitators did not turn away additional learners and this affected ratios as well as continuity of the data (on 33% of CUP participants had both entry and exit assessment data points). In Ghana the CUP clubs retained only the children assessed initially, though they did receive feedback from caregivers and communities who saw the need for more children to benefit.

In Cambodia, CUP sessions were two hours or longer in duration. This led to children becoming disengaged and some attendance issues, particularly since CUP sessions were on the same days that children attended school. The longer sessions were driven by the volunteer policy which set minimum work hour benchmarks for allowances which CUP sessions were then crafted around. The field team shared concerns about attrition of children as well as reports that some were reporting to home that they were attending CUP when they were not. CUP facilitators devised a system for reporting attendance in real-time via social media to parents.

Whereas Cambodia delivered literacy sessions first and proceeded to numeracy once literacy was completed, CUP clubs in Zimbabwe combine literacy and numeracy in the same sessions. This has likely effects on quality, particularly as most CUP clubs have only one facilitator. Managing two focus lessons and appropriate games and activities for two subjects is not only difficult for facilitators but also extends the sessions beyond the duration of one hour that was recommended by the technical team.

All three pilot countries reported that the foundational training of CUP facilitators was good but insufficient for what was expected of them and CUP facilitators required ongoing support and supplemental training. The extent and nature of the ongoing support offered included some refresher training and some reflection meetings. Supportive visits including observation of sessions and coaching was done but all pilot programs indicated more was needed. In Ghana, 'super-facilitators' were trained and equipped to provide coaching and supervision.

Some elements of the CUP design were not fully executed in the pilots due, in part, to the short period of implementation. These included ongoing engagement of caregivers and support for children's learning at home, referrals and supports to most vulnerable children, and in-school remediation.

Implementing teams reflected that greater engagement with caregivers on supporting children’s learning is a priority and opportunity to strengthen in future. While child protection awareness including signs of abuse and referral services was included in the CUP facilitator training there was no reporting on any actions taken to support or refer individual CUP learners. In school remediation was not reported either, though there were mentions of teachers being more aware of learning levels of children and this leading to more support or a greater appreciation of children’s capacity to progress by teachers.

Fidelity and Quality		
Key Lesson	Short Term Recommendations	Longer Term Recommendations
Pilot programs tended not to turn away children who presented to CUP clubs during the learning cycle and this resulted in enrolling children 1. Without entry assessment; 2. In numbers higher than the recommended per club.	Emphasize effective targeting of CUP to learners who most need the intervention with facilitators and caregivers to alleviate pressure to accommodate many children. Include procedures for rolling intake of eligible children including collecting data and making accommodations in facilitator trainings.	Explore scenarios for implementation with concurrent UL activities including reading clubs to learn more about parallel tracking.
Key quality issues identified in the pilot included ratios of facilitators to children and session duration. Pilots tended toward reach and coverage of skills/curriculum.	Ensure CUP guidance and technical support includes clear quality standards and rationale for the standards, and mitigates pressures to go faster, cover more content and reach more children.	
M&E tools introduced during implementation were not fully used.	Refine the M&E package in CUP guidance. Include reflections/ feedback on M&E tools in emerging CUP programmes.	Provide digital M&E tools and dashboards for CUP data visualization and adaptive management similar to WV’s ‘MEQA’ tool.
On reflection of how to strengthen CUP in future, pilot teams prioritized adding caregiver sessions to strengthen participation and learning at home.	Include existing caregiver engagement resources from Unlock Literacy into CUP guidance.	Refine resources for caregiver sessions to meet specific CUP objectives.
As the pilot programs were short in duration, there were no systematic activities to provide deeper support to MVCs through a case management approach. Similarly, in-school remediation was not implemented in the pilots.	Support CUP programmes at a full duration of one to two years to enable delivery of the full scope of the design. Include action learning on Child Protection and case management and in-school remediation in emerging CUP programmes.	Develop technical resources for in-school remediation; Consider how technical resources including teacher training could be integrated or complement Unlock Literacy teacher training.

4. Stakeholder Experiences - What are the perspectives and experiences of key stakeholders involved in CUP? What capacities did they bring and what supports did they need?

School and Teachers

School stakeholders were involved in different ways in the pilot program. In Zimbabwe, teachers were trained on DAPA and to support community-based volunteers. Teachers as well as other education officials also played a role in contextualizing and developing CUP curriculum content. In Ghana, teachers played a similar role in conducting the DAPA and supporting CUP facilitators. In Cambodia, schools had limited involvement in the pilot and the team recommended that teachers are involved in the curriculum development in the future.

The experience of teachers in CUP had a few benefits including:

- Teachers who conducted DAPA assessments were more aware of learners who needed catch up support and skill levels of learners overall;
- Teachers helped identify community volunteers who have been active in education
- Teachers provided support to CUP facilitators.

One of the challenges of working with teachers was availability to support CUP during school holidays.

**“CUP is making my workload lighter”
(Primary teacher, Zimbabwe)**

**“[Child] is always quiet in class. She doesn’t seem to want to talk to anyone, even me. It was later that I found out about her learning difficulties and continuously tried to get close to her”.
(Grade teacher, Ghana)**

**“CUP is helping to bridge the gap in learning created by COVID”
(Head teacher, Zimbabwe)**

CUP facilitators

The majority of facilitators in Cambodia, Ghana and Zimbabwe were drawn from existing reading club facilitators. Across all contexts the majority of the facilitators were female. Most also had a secondary level education qualification. Pilot implementation teams found that CUP facilitators met their expectations, and in some cases were ‘pleasantly surprised’ by the capacities and contributions of facilitators. Pilot teams also felt that facilitators needed more training and support in the delivery of CUP. In addition to support on literacy and numeracy, pilot teams recommended more training and support to facilitators on providing psychosocial support to children.

Feedback from CUP facilitators included the following:

- CUP facilitators expressed feeling their work was meaningful and helping children.
- CUP session delivery and planning is quite demanding and requires dedicated focus. Having volunteer responsibilities beyond CUP (including for concurrent reading clubs) was difficult for facilitators to manage.
- CUP facilitators expressed the need for additional training and support beyond the foundational training.
- The need for more support in numeracy session content.
- In Cambodia, facilitators requested accompanying workbooks for learners in part to reduce the burden of mapping and mobilising local education materials for use in CUP.

Vatey Chheng is a Reading Camp Facilitator and was a co-facilitator of a CUP club in Cambodia. She said, "I can say that the training for me was very short but precise". She added that she gained more confidence and motivation to teach the children when her children were very active and showed satisfaction during the classes. Vatey shared that she really appreciated the teaching technique called "I do, we do, you do" because it provides more opportunities for all children to practice. "When children started with the club, they were so shy and not so keen to participate in the class activities; they could not recognize and read all letters, and they did not recognize the first and the second series of Khmer consonants. After one and a half month with the CUP club, they started to know all vowels and consonants so that they could blend the letters and vowels together well. In addition, they can write the letters better and in the correct order," she said.



Vatey and her children were very sorry that the project was so short. She said that her children were at very a great pace. Vatey confirmed that if there is another catch-up project after this pilot, she will be excited to join and commit to ensure that the result for her children becomes even better.



"CUP is being supported by parents in the community. Some didn't discover their children's ability when it comes to education but CUP is helping them to catch up with others at school. Learning and playing is enjoyable to children which makes them attend CUP".
(Gladys Chofamba, Facilitator, Zimbabwe)

Caregivers

The support of caregivers has been critical to ensuring children enrolled into CUP attended regularly. Pilot programs had varying ways of engaging caregivers. In Ghana, in addition to initial sensitisations on CUP objectives and processes, reading awareness trainings were conducted with parents. Focus Group Discussions with children indicated their caregivers provided material and emotional support to attend CUP. Caregivers indicated they were happy to send their children to CUP so they could catch-up with lessons in school and were pleased to see their children making progress in CUP clubs. In Cambodia, feedback from caregivers also indicated their wish that the program was a longer duration. They also expressed confidence in the CUP facilitators. Stories from the field highlighted cases of collaboration between CUP facilitators and caregivers in providing encouragement to learners and following up on attendance. As stated in section above, all pilot implementation teams recognized engaging caregivers in deliberate sessions on supporting children's learning at home as an opportunity to strengthen CUP in future.

A father of a 10-year old CUP learner in Ghana initially held little hope that CUP would make an impact, especially given the duration of the CUP sessions.

He stated "I knew it would be same learning experience for Edwina so I wasn't bothered much about her joining". He shared that his confidence grew when the facilitators met with him to discuss allowing her some space and providing her support to see what can be done in the few days of CUP. Within a few weeks, the father shared ""Edwina's situation has changed for the better. I am happy that she can identify the alphabets".

"I was planning to have my child repeat grade 2. I am grateful now he is catching up." (Mother in Zimbabwe)

Communities

Community engagement experiences in CUP were crucial to initial processes and ongoing support. Pilot teams leveraged existing relationships in networks within the programming areas that CUP was implemented. All countries reported strong support by local authorities including the identification of CUP venues, discussions on scheduling of CUP clubs and the mobilisation of caregivers and local resources. In Cambodia, village leaders advocated for commune budget allocations to support CUP in future and also valued the engagement of youth facilitators.



Ra Chhat is a female village leader in Cambodia. She is supportive of CUP and helped facilitators with the registration and follow up of children. She spent time with caregivers of children who dropped out. "Many low-performance children who are from the really poor families dropped out and although I went to remind parents to encourage their children to classes, they did not prioritize their children's learning at all." Ra also informed through her visit to the classes, she could see children were very enthusiastic and participating in the club activities. She really appreciated the catch-up and she wanted to have the catch-up classes again because she believed that Covid-19 really made students struggle in learning.

Stakeholder Experiences

Key Lesson	Short Term Recommendations	Longer Term Recommendations
Teachers appreciated CUP and engaged in ways that support learners and facilitators. When CUP is situated as a community-based intervention, teachers play a complementary role that adds value without requiring significant additional workload or relying upon teachers for consistent session delivery.	Explore how teachers can support CUP facilitators including involvement in DAPA in such a way that increases teacher's awareness of individual learner needs and does not disempower CUP facilitators.	Develop technical resources for teachers for in-school remediation, including simple diagnostic and assessment tools for use by teachers.
CUP facilitators demonstrated commitment to deliver CUP. Facilitators desired greater support in order to help children more effectively.	Extend the support to CUP facilitators with additional technical and well-being resources including more on providing psycho-social support to children.	Advocate for and elevate the support for community level education workers including CUP facilitators in the local education ecosystem.
Caregivers that provided feedback were very supportive of CUP and motivated where they saw progress in their children's learning.	Engage caregivers in an ongoing process including sharing the progress of their children. Incorporate simple strategies for learners and facilitators to share progress and or concerns regarding learners with caregivers.	See other section on developing caregiver engagement resources.

5. Results for children - What are the emerging results for children? For whom?

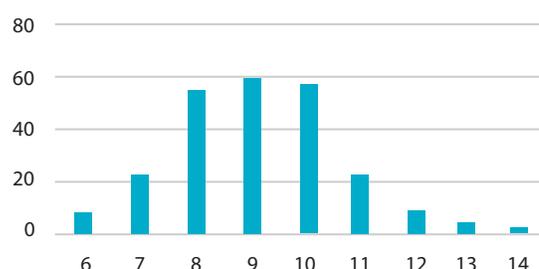
The target group for CUP is children aged 6-9 with low foundational literacy and numeracy proficiencies who need support to effectively catch-up and learn in formal education. The majority of children who participated in CUP met this criterion with a few exceptions for children who were older than 9. These cases were appropriate to include and were admitted based on literacy or numeracy skills as assessed using DAPA.

All pilot countries perceived that CUP benefited the Most Vulnerable Children. All children were included in CUP clubs based on low proficiencies (though for those children who joined after assessment we do not know). In Ghana, 97% of CUP learners had literacy scores of 0 (no letter recognition) or 1 (only letter recognition, no word reading) thus almost all were at 'blue' level. In Cambodia, entry assessments were more mixed thus blue and orange levels were offered.

"they gave us pencils, exercise books, erasers and storybooks to use at home. And I am very happy" – Wisdom, 9 years, Monkra Community

"I am always happy at CUP because we sing, and play bowling game" – Vida, 7 years, Ahomahomaso Community

Ghana - Age distribution of CUP learners



Though all children were considered vulnerable by local interpretation, CUP pilots did not register any children that were considered out of school. When queried it was clear that out of school children were not excluded, rather they were difficult to identify or register. Enrolment in early grades is considered near universal in areas where CUP was delivered. Also, CUP was implemented in the period following efforts to ensure children return to school after extended school closures.

In all countries, only a few children with disability were identified in CUP registration. While the mobilisation and eligibility criteria emphasized inclusion of out of school children and children with disability, the registration did not systematically capture these variables. The few children with disability that were identified were those with physical disabilities that were easily identifiable including a few with hearing or mobility impairments.

Children enrolled ranged from grade one to four (Ghana, Cambodia) and ages were from 6 to 13 (Ghana)². No gendered issues coming up in analysis of who participated. There were no notable differences in participation by gender. The average literacy baseline and end of learning cycle assessment scores were higher for girls than boys in all 3 countries³.

All pilot countries registered skill gains by CUP learners using DAPA profiles. It should be noted that in the pilot, assessments were undertaken before learning cycles were completed due to the end of grant reporting and spending requirements.

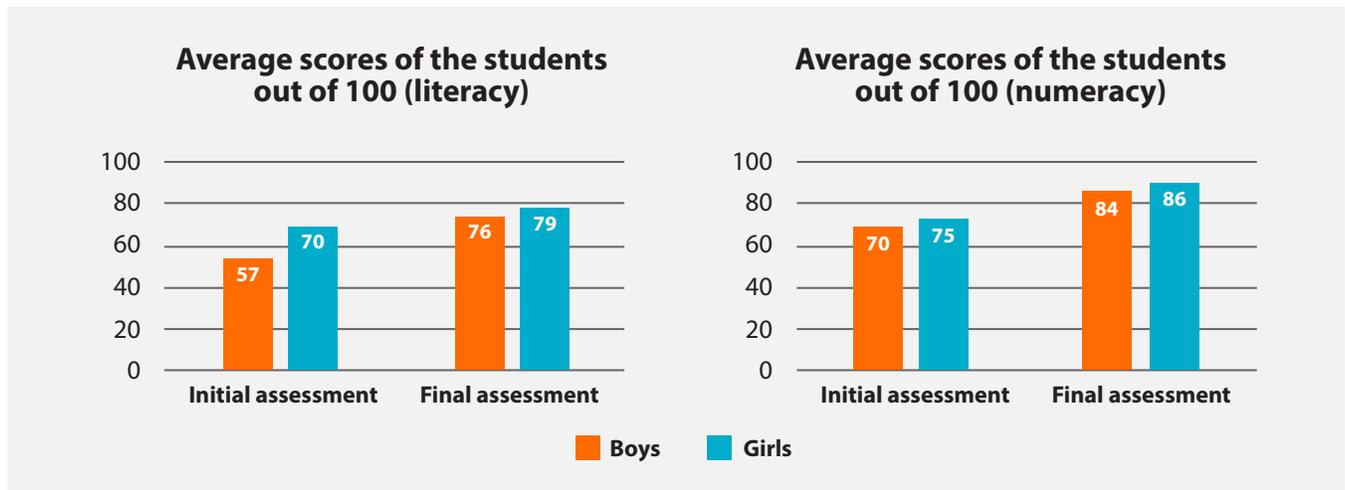
Chapp is a boy in grade 2 in Cambodia. He entered into the 'Happy Children' CUP club being able to recognize a few letters (3 out of 10 vowels, 14 of 20 consonants, 3 out of 10 sub-consonants) and not read any words. By the end of the pilot he identified nearly all letters and was reading grade-level words.

²No age data was captured in assessment records from Zimbabwe

³This is reflective of global trends where girls perform slightly better on literacy assessments in early grades, while boys perform slightly better on numeracy assessments in numeracy assessments. See [Are Children Really Learning? Exploring foundational skills in the midst of a learning crisis - UNICEF DATA](#)

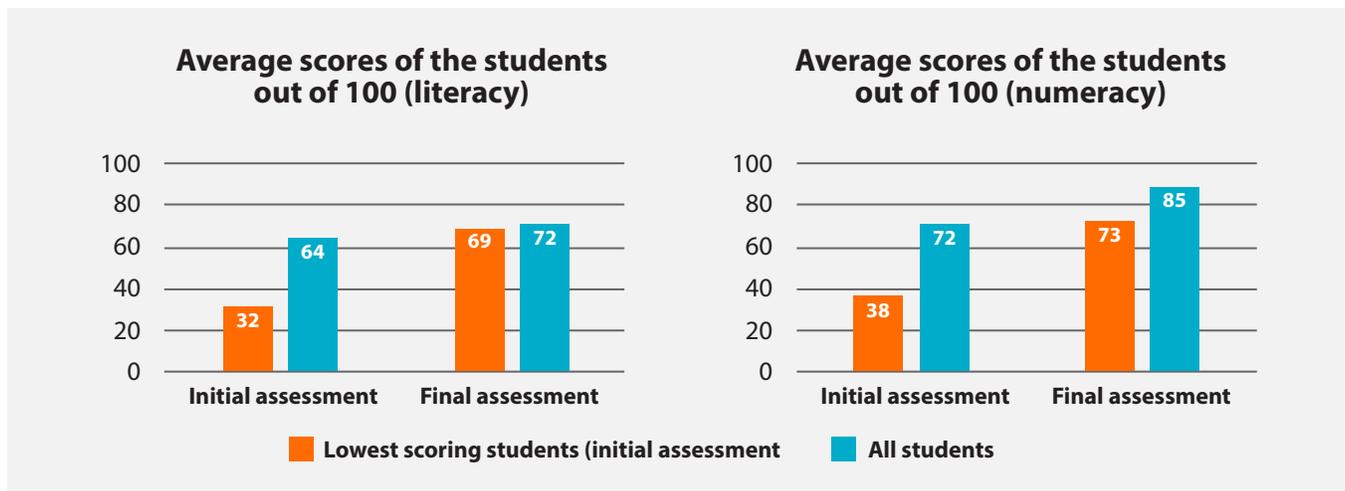


Figure 1: Cambodia Summary Learning Results

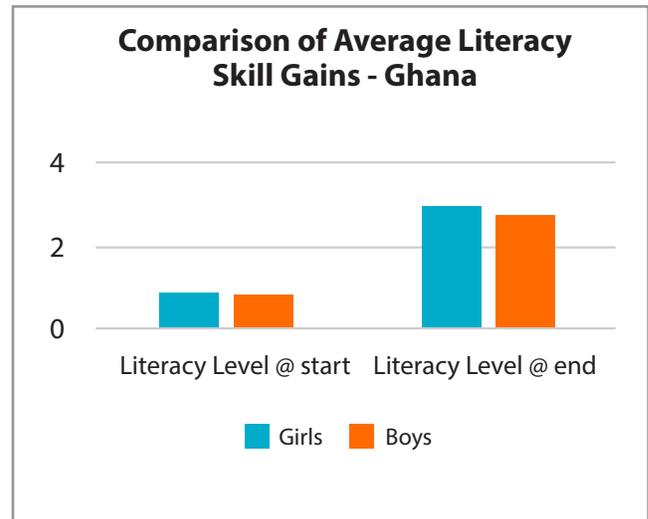
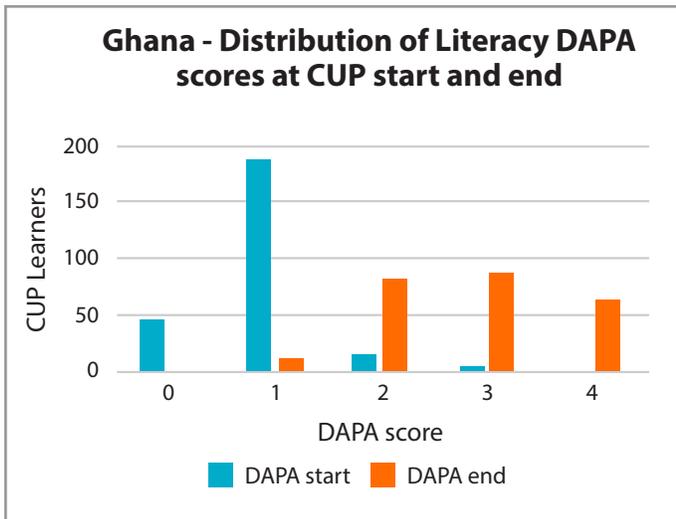


Subgroup analysis of the Cambodia cohort revealed two additional findings. 1. Learners with the lowest proficiencies at start of CUP made the most progress; 2. On average boys had lower literacy and numeracy scores at initial assessment and made more progress but did not 'catch-up' to the averages for girls at post assessment.

Figure 2: Cambodia - Comparing Learners Entering with Low Proficiencies to all Learners

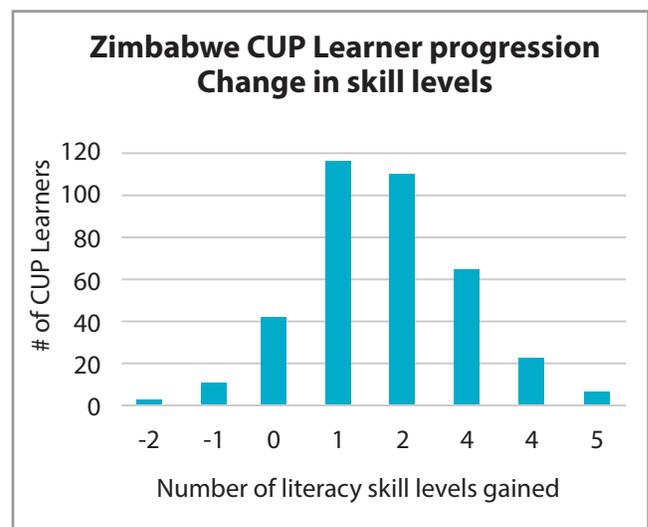
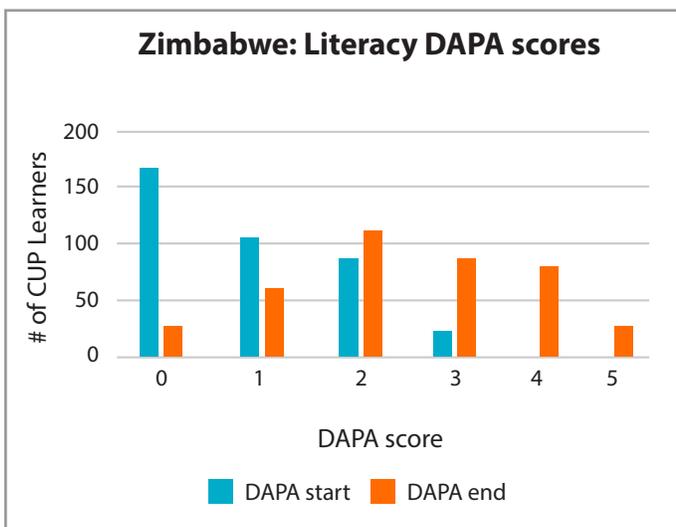
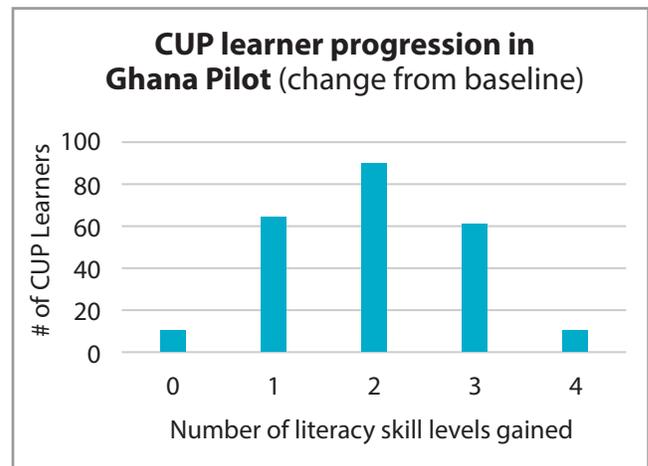


Similar trends were observed in Ghana. Gains in skills were observed in the vast majority of the children. Only 5% of learners in Ghana did not advance a complete skill level (i.e. moving from one skill to another). There were no clear trends among this group (when analysed by age or gender). All those who did not advance a skill level entered with low proficiencies (score of 1, indicating letter recognition or score of 2-reading grade 1 level words).

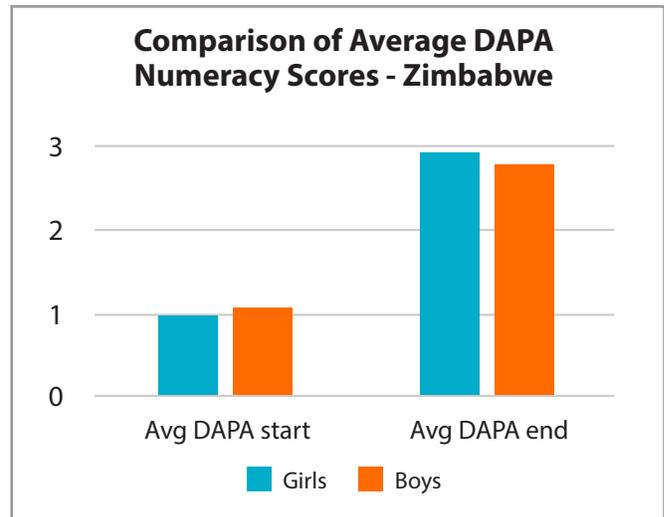
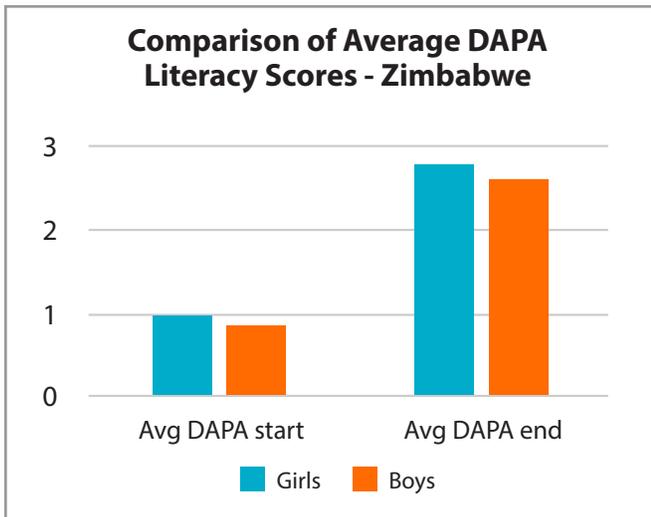


Ghana literacy scores show the majority of learners gained skills and moved levels. When proficiency is defined as skill level 4, 26% of learners in Ghana achieved proficiency. Importantly, this is within the short duration of the CUP pilot. In Ghana, all learners started at blue level and by the end of the short pilot many had achieved orange level competencies.

The figures below illustrate similar findings in Zimbabwe⁴. Most children progressed in literacy skill levels, though 14% regressed or made no progress. 27% of CUP learners in the Zimbabwe pilot achieved basic literacy proficiency.



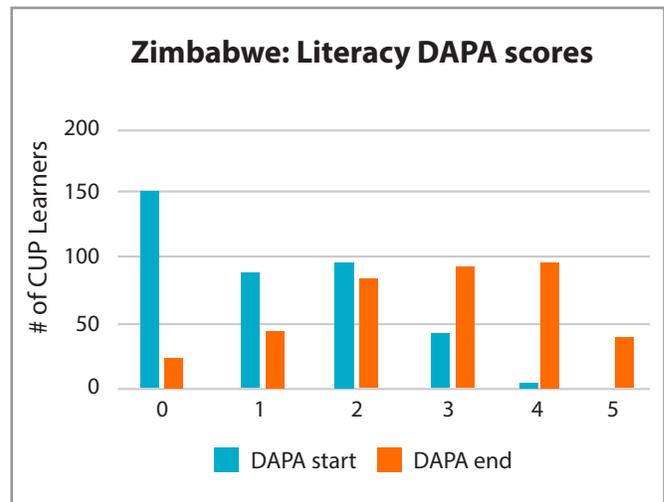
⁴Note the DAPA in Zimbabwe was adapted so the scoring for literacy and numeracy was out of five; whereas Ghana used a 4 point scale for literacy.



The same trends were observed in the analysis of numeracy scores, with 19% of learners regressing or making no progress while 36% achieved basic numeracy proficiency. As is the case for literacy, girls, on average made slightly greater gains in numeracy than boys.

The DAPA assessments indicate the majority of CUP learners assessed did make gains in their literacy and or numeracy skills and stakeholders attributed learning gains to CUP. It must be noted that virtually all CUP learners were also attending school, thus to assess impact in future will require a counterfactual group.

Regarding Social Emotional learning, all three pilot countries perceived that learners' SEL needs were being addressed in reflection meetings. Stories from facilitators and case studies illustrated changes in childrens' confidence and participation in CUP and in school. There was no direct measure of social-emotional learning of children in the pilot.



Trish is in grade 2 in Zimbabwe. She missed much of ECD and grade 1 as her school was closed due to COVID. When she started CUP she could not read a word or order numbers from 1 to 10. By the end of the pilot she was reading grade-level words and was more confident with numbers.

Sylvester is a 12-year old boy who participated in CUP in Ghana. He was considered quiet and lacking in confidence by his teachers and family. The CUP facilitator focused on encouraging Sylvester's efforts as she felt he was limiting himself by thinking he could not read. By praising him the facilitator saw Sylvester improve and move from recognizing letters to reading simple paragraphs. Sylvester's class teacher noticed that he now attempts to read aloud in class, something he would not do previously.

Results for Children

Key Lesson	Short Term Recommendations	Longer Term Recommendations
While all children reached in CUP pilots were considered vulnerable, very few children with disabilities and essentially no out of school children directly participated in CUP clubs.	Ensure adequate time and processes for initial and ongoing community mobilisation with emphasis on reaching those children who may have never gone to school or have not returned.	Prioritize learning more about these most vulnerable groups in future research.
Of the few children with disabilities reached, there was little information on types of disability and most were observable physical disability.	Develop simple tools to provide better data on CWD for all (Facilitators, schools and program level) using Washington group short set questions in DAPA process and learner tracking.	
Most children who participated in CUP gained literacy skills.	Promote the promising results to encourage scale-up of CUP.	In future impact assessment, ensure a large enough sample size to analyse results for sub-groups of interest.
Program data shows children with low foundational skills or proficiencies on entry are making progress. Few children are making little progress and these include a few who entered with very low skill levels and those who entered with higher skill levels.	Emphasize quality standards to focus benefits on those who need CUP.	
Data collected on results for children in the pilot focused on literacy and numeracy proficiencies. While anecdotal reporting showed appreciation of social emotional learning and positive return to education, this was not systematically documented.	Develop monitoring and evaluation tools that integrate age-appropriate measures to capture learner perceptions of social-emotional learning and experiences in return to school, and/or tools that capture the perspectives of stakeholders on the social emotional learning and return to education of CUP learners.	Learn about and contribute to assessment of social emotional learning skills in young children in future research and evidence generation.
Catch up programming provides support to children's learning but needs are multidimensional and not all are met in CUP.	Include considerations for integrated programming in CUP programming resources.	Prioritize learning more about these most vulnerable groups in future research.

6. Considerations for scaling and sustainability - What next for CUP in pilot sites, pilot countries and beyond?

Following the CUP pilot, both the Zimbabwe and Cambodia teams began planning ways to integrate CUP into technical programs in the next budgeting cycle. In Zimbabwe, this was accelerated via a field visit to CUP involving stakeholders from other Area Programmes implementing education technical programmes. In Cambodia, a learning and evidence brief was developed to showcase CUP results and engage national education stakeholders. CUP experiences were also celebrated at Area Programme level (the local area where longer-term integrated development programming is based) and sparked dialogues in how to sustain CUP using local resources. Local government authorities in Cambodia also made funding commitments toward sustaining CUP in their area.

In Ghana, results were also showcased and CUP is being considered for further resource mobilisation. The education team in Cambodia developed a school-based curriculum and approach to catch-up based upon CUP experience and secured additional funding for this approach. These follow-on steps illustrate how the experience of CUP at country level is leading to efforts to scale.

The technical team commenced work on a more comprehensive set of programming resources while the pilot projects were still in operation. This process was informed by the real-time engagement in the pilot and emerging lessons, fuelled by the positive feedback from the piloting teams. As a result, the team developed a CUP 'portal' of resources including background design considerations, guidance on integration, budgeting guidelines, a logframe and monitoring and evaluation plan, step by step implementation guidance, training tools and a full set of scripted lessons.

The emerging results of the pilot along with CUP portal have been shared across the WV network to various stakeholders to inform annual planning process for scaling within country and emergency response programmes. At the time of this report, at least 13 national offices across regions have indicated plans to implement CUP. Further testing of the model across contexts, including within existing development programs and in emergency responses, such as the Venezuela response, will provide opportunities for greater evidence-building.



Considerations for Scaling and Sustainability

Key Lesson	Short Term Recommendations	Longer Term Recommendations
The CUP pilot provides promising program evidence and experience to support scaling, especially in the face of a deepening learning crisis.	Build more evidence of Catch Up Programming within a scaling initiative.	Include impact assessment (including counterfactual) in scaling plans to gather more robust evidence.
The DAPA is a simple, fit-for-purpose tool that can be applied to understand who may be experiencing learning loss and need greater support in existing programming ⁵ .	Promote/avail the DAPA tool and guidelines for programs for assessing and responding to learning loss in the target age group.	Further analyse the effectiveness of the DAPA as a learning assessment tool.
Based on positive results and experiences, countries piloting CUP have intentions to scale CUP within their technical programs. Notably, Cambodia prepared a briefing document using CUP evidence for engaging national stakeholders.	Support in-country scaling with a more comprehensive set of programming and technical resources (CUP portal).	Develop resources or strategies to support staff for engaging externally with country level stakeholders including Ministries, Education technical partners (i.e. GPE, UNICEF) and Donors to position and mobilise resources for scaling and sustainability initiatives. ⁶
CUP pilots were within AP's in contexts of relatively stable education systems. CUP design is suitable also for fragile and EiE contexts but has not yet been piloted in such contexts.	Build more experience and evidence in emergency and fragile contexts as a continuity in education response.	Integrate CUP in Education Emergencies Programming framework and appropriate delivery platforms/spaces.
CUP is an accelerated learning program designed to supplement learning and restore pathways to learning in school when education has been interrupted for a limited time period (3 months to one year). This is a very specific and narrow focus but there is demand for similar interventions for older children and other Accelerated Education programming.	Ensure there is clarity on when and how to apply CUP within the range of situations children face as a barrier for Education. Leverage CUP as an entry point to develop a wider and stronger programming offer for Accelerated Learning that reaches Most Vulnerable Children at different education levels based on their needs and situations.	Grow technical Accelerated Education Programming offer. Reach out to partners with experience in the AEPs to collaborate, learn, advocate and support scale.

⁵ Updated learning assessments are prioritized in most education response plans. The 'Two Years On: World Visions' Global response to COVID-19 in the Education Sector' internal mixed methods research paper recommended that WV focus attention on learning assessments in the coming months to improve understanding of learning loss among students in WV target locations.

⁶ The same, 'Two Years On' research report found that Field Offices demonstrated good coordination within government and cluster systems but had differing outward facing capacities for engaging and influencing stakeholders and recommended to support WV education leaders in their public facing roles.

CONCLUSION

The Catch-Up Programme pilot leveraged the technical and operational capacity of WV stakeholders, and importantly, networks and capacities in marginalized communities to deliver a relevant intervention to vulnerable children. Detailed recommendations are provided for each section above. Emerging broader themes and recommendations include:

1. Establish CUP within World Vision programming resources.

Based upon the promising results and experience of the CUP pilot, the intervention is relevant and appropriate for scaling, evidence-building and adaptation for varying contexts including fragile and emergency situations. In doing so consider the following:

- Include impact assessment (with counterfactual) in evidence-building plans for CUP
- Promote CUP as an enabling project model within the suite of WV programming resources as an intervention to build the literacy and numeracy proficiencies of children in learning poverty
- Establish CUP experience in emergency and fragile context programming including action learning on adaptation
- Apply experience in delivering CUP in emergency and fragile contexts to integrate CUP in Education in Emergencies programming framework

2. Deepen CUP impact and reach to Most Vulnerable Children

The CUP pilot demonstrated the intervention was most effective for children with low literacy and numeracy proficiency, a population at high risk of sustained learning poverty. Targeting experiences in the pilot were mixed with general pressure to accommodate many children due to the lack of other education interventions in participating communities. While all children reached were considered vulnerable, very few with disabilities and essentially no out of school children accessed CUP clubs. CUP is designed to reach most vulnerable children and to do so requires focus in targeting and the careful integration of program elements including caregiver engagement, case management and referrals for integrated programming. In scaling and evidence building of CUP, consider the following:

- Ensure guidance and practice supports effective targeting of CUP to children who most need the intervention
- Prioritize learning more about MVC including children with disabilities and those out of school in future impact assessment.
- Develop and field-test measurement frameworks for social emotional learning and children's experiences in return to education to complement the literacy and numeracy assessments to more fully capture and learn from the experience of MVC in CUP.
- Strengthen the uptake and depth of integrated programming to address the multi-dimensional needs of MVC, emphasizing case management and referrals as a required program element.

3. Refine tools and implementation guidelines based upon CUP pilot experiences

The urgency of a targeted education intervention, together with the approach of co-design and community engagement in the pilot meant that implementation happened while technical and operational guidelines were being developed. In refining the resources and guidelines for CUP in scaling initiatives, consider the following:

- Refine the M&E package of tools in scale up including digital tools and dashboards for visualisation and data-driven support and decision making

- Expand resources for greater engagement of caregivers in CUP to support effective targeting and reinforce learning through supportive home environments
- Emphasize CUP as a community-led intervention with supportive roles for school stakeholders and tracks to in-school remediation.
- Ensure CUP facilitators are well trained and supported in their role
- Avail comprehensive curricular resources including scripted lessons plans and recommended learning sequences to focus field technical capacity on adaptation rather than creation of CUP lessons.

4. Situating CUP in the education landscape for the future

The lessons of the CUP pilot within the Education Continuity in Crisis initiative contribute the following considerations for the future of education programming:

- Communities play a significant and meaningful role in bridging gaps and providing effective learning opportunities within local education systems and are particularly well-placed in reaching the most vulnerable. This involvement by communities is relevant not only in crisis situations but in strengthening education systems into the future.
- Effective community engagement is crucial to the sustainability of community-led education initiatives.

The learning crisis demands short-term targeted interventions and longer-term systematic approaches to sustainably improve learning outcomes for vulnerable children. CUP serves as an entry point to develop wider and stronger programming for accelerated learning including remedial and accelerated education for children at different education levels and based on their needs and situations.





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