

OFFICIAL REPORT
ON
THE HURRIED CHILD PROJECT: AN AFRICAN PERSPECTIVE

Submitted to:

Presented By:

A Mother's Love Initiative
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Dear Sir/Ma,

REPORT ON THE HURRIED CHILD PROJECT: AN AFRICAN PERSPECTIVE

We hereby submit to your office a comprehensive summary of our engagements as a non-governmental organization on the subject matter above for the purpose of information, advisory, and corrective action as the case may apply.

We are hopeful and in good faith that the issues associated with the hurried child syndrome as addressed in this report will be given urgent attention with special reference to its fundamental effects on the wellbeing and future of the African child.

Thank you for your attention and cooperation so far. We look forward to positive feedback on the subject matter.

Highest Regards,



Rtn. Hanatu A. Enwemadu Esq.
Chief Executive Officer
A Mother's Love Initiative

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1.0 BACKGROUND TO THE PROJECT

1.1 Introduction

- A Mother's Love initiative was duly registered as a not-for-profit organization in 2018, 2 years after the idea was conceived. The vision of the organization was to "safeguard the wellbeing and future of the Africa child" and the philosophies and driving principles of the organization were anchored on three major processes - Research, Advocacy, and Psychosocial Interventions.
- The Hurried Child Project in Africa (THCP) is designed and aimed at sensitizing, mobilizing stakeholders and the public on the prevalence and effects of the practice of hurrying a child through life, is a ten-year project (2022-2032) with a short, medium and long term impact that has received the endorsement of relevant government agencies. The Project is a media, research, and psychosocial intervention initiative with a focus on reducing the hurried child syndrome in Nigerian and African families, schools, and communities.
- This project seeks to identify and address the root causes of a syndrome that is impacting economic, political, socio-cultural, academic, and health issues. The Hurried Child Syndrome brings to the fore the lack of, or gradual erosion of the basic essence of education and child up bring in our society. The truncation of the child's appropriate progression in consonance with the applicable school curriculum, and /or child life activity, compromises the child's opportunity to acquire the full complements of knowledge, skills, emotional, physical and moral development.
- The overall goal of the project is to help improve the wellbeing and the future of the African child by establishing a sustainable network that will address the culture that emphasizes success and immediate gratification; of children being bombarded daily to grow up too quickly; pressured to learn to read and count even before they can walk; to outperform the other children in their class; in their community.
- To address this Syndrome, the Project is designed to implement several initiatives drawn from the research and stakeholders' inputs and buy-in components of the proposed 10-year intervention plan.

1.2 Objective of the Hurried Child Project

The main objective of the hurried child project in Africa is to reduce the causative/risk factors associated with The Hurried Child Syndrome through targeted specialized sensitization, counseling; regulatory enforcement, individual and community counselling, social-emotional learning psychosocial support and media-based advocacy at family, school and community levels.

Specific Objectives include:

1. To reduce the practices associated with hurried child syndrome at the family level by 60% among single parents and co-working parents in Nigeria through specialized counselling and therapy by the year 2025.

2. To reduce the practices associated with the hurried child syndrome at the school level by 80% among public and private secondary schools in Nigeria through counselling, social-emotional learning and psychosocial support by the year 2025.
3. To reduce the practices associated with the hurried child syndrome at the community level by 50% among employers of labour in the private and public sector, vulnerable communities and the neighborhood through community counselling, psychosocial support and media-based advocacy by the year 2025.

1.3 Proposed Intervention Strategy/ Result Framework for School-Level Intervention

In increasing the protective factors, THCP will implement research and learning activities that will stimulate social and emotional development through a set of age-appropriate activities conducted within and around the school system; and enable policies that protect and care for the child at all levels of the educational system.

In reducing the risks factors, school level activities will strengthen the capacity of the school system through advocacy initiatives at the school level including the formation of club activities, early childhood education, group counselling for teachers, caregivers, school management, and school associations; strengthen the capacity of educators and school counsellors to act as in loco parentis.

1.4 Project Result Framework

Attainment of the component objectives will allow us to realize the project's purpose of reducing the hurried child syndrome in Nigeria through enhancement in family wellbeing, improvement in the quality of school life, and mass advocacy against the practices of hurrying a child in the community and society. THCP supports critical agencies and ministries of the Government in five program areas: Education, Youth and Social Development, Health, Employment and Economic Growth.

1.5 Assumptions for Successful implementation of project intervention plans at the school level

1. Private and Public schools are willing and able to participate in the project
2. Donors are interested and willing to extend their contract if the project tenure changes
3. AMLi will have the capacity to engage, both individually and collectively the schools involved
4. The baseline surveys will inform the priority areas for intervention
5. The legal and regulatory environment will promote and facilitate increased access to schools

2.0 THE PROJECT TRAJECTORY

- Four decades ago, Prof. David Elkind, a renowned child psychologist published a book titled “The Hurried Child” to express his concerns on how children of the middle class are being hurried in America. He made several attempts to show parents and teachers where hurrying occurs and why. Also, Elkind offered insight, advice, and hope for encouraging healthy development while protecting the joy and freedom of childhood with a specific interest in western society.
- The Hurried Child Syndrome is the root cause of most mental and psychosomatic problems facing a growing child and psychosocial adjustment problems they encounter in adulthood. While such practices are prevalent among the middle- and high-income families, it is also experienced in low-income families.
- This Project has carried out many media and advocacy activities in Lagos state in the past five years with remarkable impact. These programs and meetings with stakeholders and potential partners brought to the fore the reality of the National scope of the syndrome.
- That realization is the bases for the current impetus to scale up the project on a national scale, driving on a preliminary plan covering the 9-month period from the 25th of January, 2022 to the 31st of October, 2022. This is in preparation for the National Roll out of the Grand Master Plans as encapsulated in The Hurried Child Project Intervention Document.
- The period under reference above falls within Year 1 of the Project Implementation Plan and is focused on comprehensively assessing the current regulatory environment and existing child development challenges and opportunities for the project; these surveys and assessments are expected to provide an evidence-based and realistic basis for formulating strategic directions for each component.
- There is a considerable amount of evidence that child abuse affects the wellbeing and future of a child. According to the World Health Organization (2009), a long list of mental illnesses is consequent to child abuse. Of particular interest is the hurrying practices inflicted on a child in their formative years by parents and society.
- These practices of hurrying lead to a childhood problem termed “the Hurried Child Syndrome”- a set of stress-related behaviors displayed by a child due to the expectations of parents and society on him or her to perform tasks that are beyond their mental, social and emotional capacities. In another word, the hurried Child syndrome can be defined as a condition in which parents over-schedule their children's lives, rush or push them hard for academic success, and expect them to behave and react as miniature adults.
- Further research into the problem led to a broader discovery that captured the enormity and multifarious nature of the problem. This discovery was the “Hurried Child Syndrome”; which by the simplest definition refers to any activity of a parent, caregiver, school system or community that predisposes a child to stressors in their formative

years thereby making them grow into miniature adults lacking in socioemotional wellbeing.

- In the areas of advocacy, due to the wake of COVID 19, we started by exploring the use of social media for education and sensitization purpose with key focus on parenting, childhood development, quality of school life and family wellbeing. we engaged professionals relevant to childhood development and limited our scope to family and school systems. Our media team also conducted interviews with parents, teachers and school owners to gain more insights into the severity of the problem in Nigeria. We had a pidgin version tagged “Children na di future and korokoro truth”.
- In the areas of psychosocial interventions, our small team of counsellors carried out pockets of intervention by conducting individual counselling at the family levels and group counselling at the school level to prevent and remediate issues that are evidently caused by the hurried child syndrome. Based on the feedback from our engagements and directions given by our Board of Experts, we ranked the priority areas of need and came to the realization that fathers played a pivotal role in control the syndrome despite been neglected and uncared for by the society. These lines of thought gave birth to the “Committing to Fatherhood Project”-a media advocacy intervention geared towards improving the mental wellness of fathers by giving them a platform to express their emotions and celebrating their sacrifices. Beyond glamorizing fathers was to re-educate them on their roles as “fathers” and “father figures” in preventing the spread of the hurried child syndrome. This modular intervention strategy was amplified by the men of the press and publications were made in both traditional and online platforms to extend the advocacy to the Nigerian Public. This successful event gave rise to strategies in the subsequent months.
- In 2021, AMLi team conducted quantitative research using an online cross-sectional survey to examine the attitudes and practices of 436 Nigerians parents towards hurrying their children in the home, school and the society. The survey was filled across 21 (with representations across the 6 geopolitical zones) out of the 36 states in Nigeria including the diaspora. About 62.8% of the respondents were from Lagos state, followed by Abuja (9.6%), Oyo (6.2%) and the rest shared amongst the remaining 18 states. The outcomes of the survey reinforced the existing evidences of the hurried child syndrome in Nigerian families, school systems and society and implications were drawn for further research, practice and policy development.
- Looking at our impact in numbers, from the facility-based perspective, AMLi has reached 3,455 children, 530 families and 15 private schools. From the community base perspective, AMLi has implemented 35 special interventions, reached 20 families and engaged 1 community.

3.0 CONCLUSION AND RECOMMENDATIONS

3.1 Conclusion

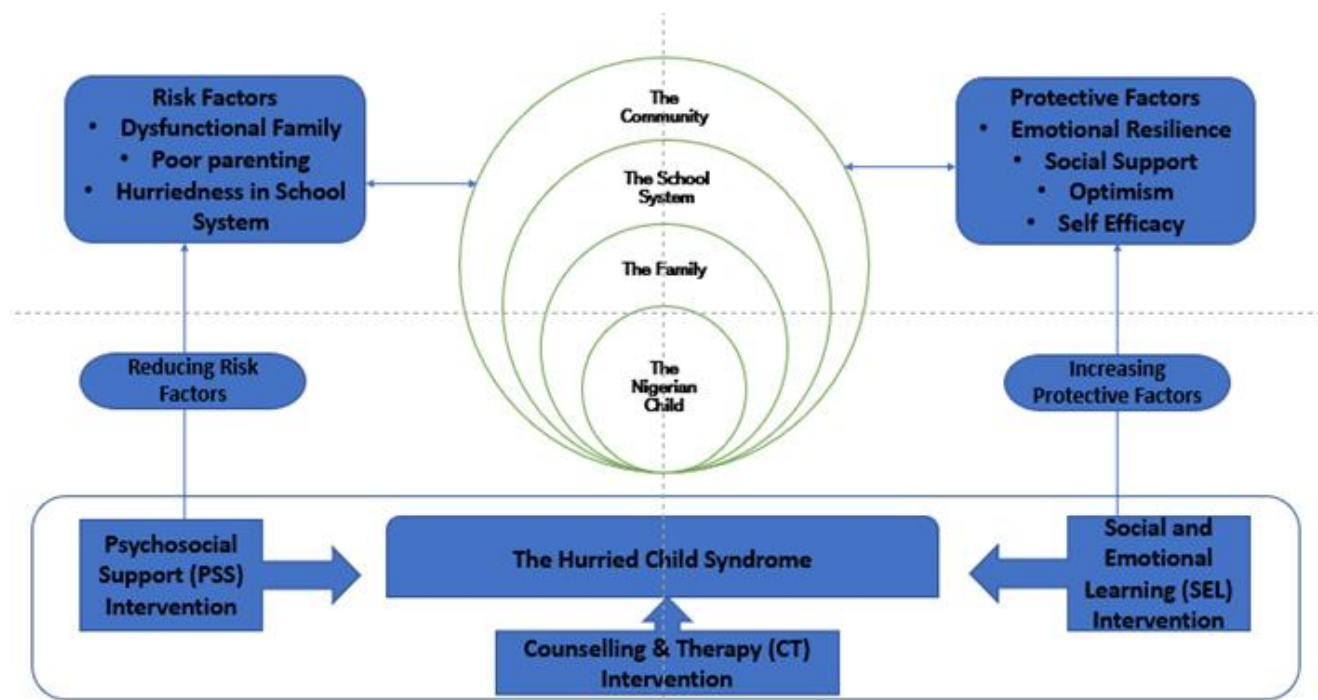
- While AMLI has championed the cause of making a case for the African child against the hurried child syndrome, the impact is still far from the objective of the project. Our plans for the future is to enable pathways to sustain the campaign and interventions toward curbing the hurried child syndrome in Nigeria.

- We are aware of our limitation in the areas of capacity and structure to plan and implement a multilevel project and as such require collaborations with state and non-state actors to ensure that the wellbeing and future of children in Nigeria are safeguarded.
- We are interested in learning more from the extant resources and wealth of experiences in the foundation and equally ready to initiate sustainable alliances that will not only reduce the hurried child syndrome in Nigeria and Africa but also serve as a model for adoption across the world.

3.2 Policy Recommendations

1. Psychological assessment of stress in children should be a critical indicator in the admission process and must be implemented in both private and public educational institutions in Nigeria.
2. Classroom management and school activities must be designed to reduce stressors in the learning process.
3. Government should establish post-marital counselling clinics in each Local Governments Areas
4. The school system must make play-based learning at the early childhood level and extracurricular activities at the secondary levels

Appendix A: CONCEPTUAL FRAMEWORK



Effects and implications of the hurried child syndrome.	Low quality of life
	hyperactivity
	Unhealthy attachment styles
	Negative coping mechanism
	Stress
	Anxiety
	Poor emotional adjustment
	Poor social adjustment
Causal Factors for hurrying a child	Home Factors;
	Parenting practices
	The use of devices
	Home Climate
	School Factors;
	Quality of teachers and caregivers
	Quality of the school system
	Jumping Classes
	Academic overload/overloaded Curriculum
	Economic needs of the school (remember, we are in no way blaming the school).
	Societal Factors
	Technology
	Unhealthy Competitions
	Living in Isolation
	Economic responsibilities at a tender age
	Expectations of the Society
	Overload Information
	Peer pressure
	Child Neglect
Research-based Intervention	
Media Advocacy	
Policy Development	
	The Child
	The school
	The Community
	The Government
	International
	The Child

Appendix C: Project Result Framework

