



Knowledge hub
-
Collection of best practices

Summary of the best practice

1. Title of the best practice (e.g. name of policy, programme, project, etc.) *

Corner of Hope

2. Country or countries where the practice is implemented *

Kenya

3. Please select the **most relevant** Action Track(s) the best practice applies to *

- Action Track 1. Inclusive, equitable, safe, and healthy schools
- Action Track 2. Learning and skills for life, work, and sustainable development
- Action Track 3. Teachers, teaching and the teaching profession
- Action Track 4. Digital learning and transformation
- Action Track 5. Financing of education

4. Implementation lead/partner organization(s) *

Association Montessori Internationale (AMI)

5. Key words (5-15 words): Please add key descriptive words around aims, modalities, target groups etc. *

transformational education, self-paced learning, lifelong learning, Montessori, sustainability, Internally Displaced People, community-based, under-resourced communities, early childhood education

6. What makes it a best practice? *

The methodology is applicable across many circumstances. It embraces and respects the uniqueness of local communities, cultures and conditions as people work together and exert their resourcefulness, energy and self-reliance. This is fundamental to sustainability and reflects the Montessori approach to every individual's capacity for adaptation, development and growth in a social context.

Description of the best practice

7. Introduction (350-400 words)

This section should ideally provide the context of, and justification for, the practice and address the following issues:

- i) Which population was affected?
- ii) What was the problem that needed to be addressed?
- iii) Which approach was taken and what objectives were achieved? *

Following the post-election violence in Kenya in 2007, many people were forced to leave their homes and settle elsewhere. Internally Displaced Persons (IDP) camps emerged in different parts of Kenya, where conditions were poor, and children lacked access to education. As a response, the Corner of Hope was established in New Canaan, an IDP camp near Nakuru, Kenya. It aims to show how Montessori Teacher Training and Schools can be delivered to the most vulnerable communities such as those in refugee, transit and IDP Camps.

The core values are self-reliance not dependence, community not school. Self-ownership, control, dignity and self-worth all have played an important role in overcoming the effects of trauma experienced by the camp inhabitants.

The Corner of Hope provides a unique model for the establishment of a Montessori school of the highest quality along with accessible teacher training for people in under-resourced contexts. It is deeply embedded in the local community, who are involved in all aspects of the initiative. The teachers are from the community and the school was built by community members. This engagement, in combination with offering training possibilities, both supports the development of the children and the development of skills in adults, building a more resilient community. Through the collaboration of Association Montessori Internationale (AMI), globally recognised as the champion of Maria Montessori's legacy, and the London Maria Montessori Institute, the Corner of Hope builds on the pedagogical principles and practice formulated by Maria Montessori and delivers high quality Montessori education.

Teachers follow a 2-year training, starting with one year focusing on theory and making a full set of Montessori materials. In the second year, the students start their work in the classroom with regular supervision and mentoring. The making of Montessori materials is crucial to this programme's sustainability and replicability. During the training, teachers make their own set of materials based on blueprints of Montessori materials used globally in the children's houses (for children aged 3-6). The materials are made from locally available resources, so they can easily be replaced. Making their own material helps the teachers develop a deep understanding of the purpose and use of the materials, and it enables them to set up a Montessori environment wherever they go.

8. Implementation (350-450 words)

Please describe the implementation modalities or processes, where possible in relation to:

- i) What are the main activities carried out?
- ii) When and where the activities were carried out (including the start date and whether it is ongoing)?
- iii) Who were the key implementation actors and collaborators? (civil society organizations, private sector, foundations, coalitions, networks etc.)?
- iv) What were the resources needed (budget and sources) for the implementation? *

The community came together to establish the Corner of Hope school for the children of the camp. Inhabitants of the camp built the school and followed teacher training to educate the children. The initiative aims to help the community cohere around the provision of a 'corner of hope' for children and the larger community, with the school as the central focus point. This has been done by first setting up a 'Montessori Children's House' for children aged 3 - 6 and then promoting teacher training for people from the camp. The teachers receive sound training, so that when they leave the camp, they can continue to create their own Montessori classrooms, educational resources and materials from local sources in other places. At the request of the parents some teachers have also been trained for the 6-12 level so that children can continue their education at Corner of Hope.

Montessori education relies heavily upon 'learning by doing'. In this venerable setting, each teacher makes themselves a complete set of teaching materials sourced from locally available materials. In effect, each teacher becomes autonomous and effectively creates 'a school in a box' that releases them from dependence on external agencies supplying teaching equipment. Making materials locally is a profound principle and sends the message 'I can do it by myself if you just show me how'. It engages each individual in creating something valuable for the children's future; it creates the possibility of replicating, mending and replacing whatever is needed. The cost of creating a vibrant and fascinating range of hands-on, brain-based scientifically designed developmental materials is negligible, given their longevity.

The Corner of Hope initiative started in 2010 as a collaboration between the New Canaan community, the Catholic Diocese of Nakuru, Association Montessori Internationale, St. Ann's Training College with the support of an anonymous private US Foundation. The annual operating budget is around 64,000 euro for two Corner of Hope schools—the original school in New Canaan, and the Corner of Hope Kisima, which was established at the community's request when a small group resettled in a new location. The schools serve about 290 children and the budget also includes the training of eight teachers from the community annually.

9. Results – outputs and outcomes (250-350 words)

To the extent possible, please reply to the questions below:

- i) How was the practice identified as transformative? (e.g., impact on policies, impact on management processes, impact on delivery arrangements or education monitoring, impact on teachers, learners and beneficiary communities etc.);
- ii) What were the concrete results achieved with regard to outputs and outcomes?
- iii) Has an assessment of the practice been carried out? If yes, what were the results? *

The original objectives have been largely met: over 1500 children have attended the school and more than 100 teachers have been trained. One of the initiative's aims was to create a model for inspiration and replication. Throughout the years, the Corner of Hope has inspired many initiatives with two offshoots in the remote northern regions of Samburu and East Pokot. The Samburu and Pokot initiatives successfully apply a similar model of community teacher training and schools whilst adapting it to the local context and the pastoralist lifestyle of the communities. So far eleven teachers from the Samburu community have completed their training and three mobile schools have been set up that have served over 560 children. Seven teachers from East Pokot are currently in training. The first three trainees set up their Montessori environments in East Pokot, with the continuous mentoring support of the Corner of Hope teachers. In addition to these direct offshoots, the initiative also offers great inspiration to people and communities worldwide and has become an example on how to offer authentic Montessori education to under-resourced communities.

Children who experience a Montessori education are creative, independent, innovative, community minded and good problem solvers; we also know that Montessori early childhood education provides a solid foundation for life skills and continuing academic development. In the long-term, Corner of Hope is expected to offer education up to the age of 18.

Assessments have been anecdotal mostly; when the children continue their education elsewhere, they are moved a year ahead. Input collected from the teachers and parents at multiple occasions mentions the changes they observe in the children, both in their cognitive and social development. The school has also been instrumental in demonstrating full implementation of Montessori principles and practices, which has bolstered the submission of the Montessori Curriculum for recognition by the Kenyan government; it was approved and is now awaiting final sign-off.

10. Lessons learnt (300 words)

To the extent possible, please reply to the following questions:

- i) What were the key triggers for transformation?
- ii) What worked really well – what facilitated this?
- iii) What did not work – why did it not work? *

Key triggers for transformation were the need for children to find a safe place where they could access learning designed to meet them where they were and support their social and academic development, and have a nutritious meal. In the context of the IDP camp, Corner of Hope provided a place for children to work towards healing through meaningful activity while feeling valued and supported. Adults noted the changes in the children's behaviour and ability and became strong advocates for Montessori education. Upon the community's request, a 6-12 classroom was established so children could continue their Montessori education after the age of six. Families allocated land in another part of town assigned the only permanent structure as a Montessori school, even though they live in temporary shacks.

The success of Corner of Hope was facilitated through collaboration, a model of teacher training, and a community-based approach. This ensured the needs of the community were met, fostered ownership and commitment, and ultimately ensured the initiative's sustainability.

By using a training model combining theory with material making and teaching practice, the teachers develop skills and knowledge to optimally support the children. Careful mentoring enables them to continue learning and refining their skills. This model has gained strength, as trainees are able to practise in a well-established Montessori environment with experienced teachers. Trainees from other countries in the region have undertaken teaching practice at Corner of Hope, receiving support from the teachers while building skills, understanding and confidence.

Planning the next steps for schools to serve more children and accommodate children up to 18 years is a challenge. The allocation of land has been time-consuming, limiting the options for expansion of the school. It has been important to be flexible and adapt to changing circumstances while making use of opportunities when they arise.

11. Conclusions (250 words)

Please describe why may this intervention be considered a "best practice".

What recommendations can be made for those intending to adopt the documented "best practice" or how can it help people working on the same issue(s)? *

The 12-year experience of Corner of Hope demonstrates that Montessori education can have a profound impact in under-resourced communities. The commitment of the community as well as the teachers is a testimony to the positive impact Montessori education has on the children. At first, the community did not know about Montessori, and they were open but unsure, as they were used to a different educational approach. They were convinced by the visible changes they observed in the children. It is through their trust, support and commitment that the schools have thrived.

The methodology is applicable across many circumstances. It embraces and respects the uniqueness of local communities, cultures and conditions as people work together and exert their resourcefulness, energy and self-reliance. This is fundamental to sustainability and reflects the Montessori approach to every individual's capacity for adaptation, development and growth in a social context.

The Corner of Hope can function as an example on how to engage communities, how to offer education that meets children where they are in their development and that enables them to become the transforming agents in society.

12. Further reading

Please provide a list and URLs of key reference documents for additional information on the “best practice” for those who may be interested in knowing how the results benefited the beneficiary group/s. *

<https://cornerofhope-esf.org/>

<https://montessori-esf.org/>

<https://montessori-ami.org/>

<https://montessori-esf.org/project/samburu>

<https://sarara.co/nomadic-education-program>

<https://www.globalgiving.org/projects/montessori-training-pokot/>

<https://montessoridigital.org/classified-cards-all?language=Swahili>