Evidence-Based Practice, Professionalism and Respect for Diversity: A Tense Relation[1]

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Abstract

There is a global tendency towards evidence-based practice in education, meaning that practice is molded by research that prescribes "what works" to achieve predefined outcomes. This may present serious pitfalls. Considering that early childhood education in all affluent regions and beyond has to deal with social and cultural diversity, professionals will have to work in contexts of unpredictability and complexity. In this manuscript we develop the central pedagogical questions regarding respect for diversity and their consequences for the professionalization of the early years workforce. Professionalism needs to be understood as systemic and reflective. This may be in tension with evidence-based practice, as the latter leads to standardization and prescription, reducing the discretionary space of professionals. Moreover, evidence-based practice may represent serious democratic deficits, excluding children and parents from the societal debate about what early childhood education is for.

Keywords : evidence-based education, diversity, professionalization, parents

The central theme in the 2011 PECERA conference is evidence-based practice. When formulated in one question, this theme would be: "what works?" This is a theme that is increasingly influencing policy and practice in this field. One of the salient examples is the recent publication of a series on early child development in The Lancet (Engle et al., 2011) and the stream of policy papers drawing on evidence about the beneficial effects of ECEC on children's development and on their later achievements (e.g., Naudeau, Kataoka, Valerio, Neuman, & Elder, 2011). Evidence in this vein, is produced by applying standardized, high quality programs (such as the Ypsilanti project) to vulnerable children and measuring the developmental outcomes, compared to children who are not enrolled, at different stages of their life.

Another central strand in this conference is professionalism. Here the main question could be "What competences do professionals need to make it work?" The complex relation between both themes is addressed, taking into account contexts of diversity. This is a growing field of interest, since in all affluent countries and beyond, early childhood education is confronted with a growing diversity in cultural, ethnic and socio-economic terms. Moreover several longitudinal studies have shown that early childhood education is beneficial to children's development and this is most salient for disadvantaged children and children from ethnic minorities (e.g., Adams & Rohacek, 2002; Burchinal & Cryer, 2003; Organisation for Economic Co-operation and Development, 2006; Sylva, Melhuish, Sammons, Siraj-Blatchford, & Taggart, 2004; Unicef Innocenti Research Centre, 2008). The intention of this paper is therefore to examine what happens at the crossroads of these three central themes: evidence based practice, professionalism and diversity. I will argue how these three themes do not always go very well together, or at least have a very tensed relation, drawing on several international studies, including a Europe-wide study in "Competence Requirements for early childhood education and care", conducted for the European Commission for education and culture (Urban, Vandenbroeck, Lazzari, Peeters, & Van Laere, 2011) and several international projects, conducted for the European network DECET (Diversity in Early Childhood Education and Training) and the UNA Global initiative, a world wide network dealing with early childhood education in ethnic segregated communities in five continents, as well as on two decades of work with practitioners in some European countries (Vandenbroeck, Seda-Santana et al., 2010).

Diversity in Early Childhood Education

It is well documented that poverty impacts on children's development and readiness for school (Adams & Rohacek, 2002; Barnes, Belsky, Broomfeld, Frost, & Melhuish, 2005; Himmelweit & Sigala, 2004; Huston, Chang, & Gennetian, 2002; Mistry, Biesanz, Taylor, Burchinal, & Cox, 2004; Vandenbroeck, De Visscher, Van Nuffel, & Ferla, 2008). Many studies have shown the potentials of ECEC on children's development, especially for those who are at risk for educational disadvantage (e.g., Sylva et al., 2004; Vandell, 2002). These converging studies make it even more salient that the quality of care young children receive outside their homes is one of the important pathways through which income affects children (Duncan & Brooks-Gunn, 2000). Indeed, despite the potential beneficial effects of ECEC, children from ethnic minorities and children from lower-income families are to be found more often in lower-quality care than those from middle-income and higher-income families (Phillips & Adams, 2001; Pungello & Kurtz-Costes, 1999). Over the last decades, it has been extensively discussed why this is the case. Whereas initially some scholars thought that parental choices may explain these differences, it is now clear that reality is much more complex. Parents from all classes and ethnicities attach importance to good quality care, but parental choices for a specific type of ECEC or for a specific provision are to a large extent molded by environmental constraints (Himmelweit & Sigala, 2004; Vandenbroeck et al., 2008). Moreover, parents tend to stick to the choice they made and tend to appreciate what they receive. Differences in preferences in fact reflect restricted child care options and we need to criticize the concept of free choice in this matter. To put it more bluntly: parents can only "choose" what is available to them and resign themselves to that (restricted) choice (for a more elaborated account of this discussion see Vandenbroeck et al., 2008). We could summarize these findings by saying that early childhood education and care can make a difference in the lives of young children, but that it very often does not.

Some countries have traditionally considered ECEC as a private matter in which states are not supposed to intervene. Provisions operate mainly on the private market and local or central authorities complement or compensate the market mechanisms with voucher systems. This is the case for diverse countries such as Chile (Camoy, 2002), the US , Hong Kong and Taiwan (Lee, 2006; Yuen, 2007) and The Netherlands (Noailly, Visser, & Grout, 2007).

Other countries consider ECEC as part of the formal education system (e.g., Sweden) or of the Welfare system (e.g., Denmark) in which every citizen is entitled to quality ECEC, entirely funded by local or central authorities. Many continental European countries have a mixture of both systems (Organisation for Economic Co-operation and Development, 2006). Despite the claims of the former (private market oriented) system, it is clear that, from the point of view of equity, it does not keep its promises (Moss, 2009). A first reason has to do with availability. Privatization of ECEC tends to increase the number of provisions in more affluent and more urban regions, leaving rural and underprivileged areas behind (Noailly et al., 2007). A second reason has to do with quality. One of the most important conditions for quality is the level of staff qualifications and professionalism (Sylva et al., 2004; Urban et al., 2011), while independent studies in different European countries have shown that private provisions tend to hire lower qualified staff in order to reduce the costs (Misplon, Hedebouw, & Pacolet, 2004; Osgood, 2004).

This brings us to the central concept of *quality* in contexts of *diversity*. Early childhood education matters, but not every early childhood education matters in the same way. As the EPPE study (Sylva et al., 2004) made perfectly clear, only high quality ECEC makes a difference. The average is just not good enough. But then, what constitutes high quality in a context of diversity? The EPPE study included qualitative observations in those centers that made a difference for children's outcomes. According to Iram Siraj-Blatchford (2006), a leading researcher in this study, respect for diversity is one of the quality criteria that correlates most with positive outcomes for disadvantaged children. This is not surprising. Although what constitutes good practice with respect for diversity may vary substantially from one setting to another (Vandenbroeck, 2007), some guidelines may be set on what quality in this matter may be. Since the famous works of scholars including Bronfenbrenner (1979), but also thanks to the work of Barbara Rogoff and colleagues (Rogoff et al., 2005) we know that cultural context plays a major role in learning processes. Laevers (1997) puts it this way: children only learn when they feel well and when they are involved in activities. Wellbeing and involvement are two major criteria for educational quality. This implies that children should have a feeling of *belonging* to the ECEC center. For many children, their introduction with ECEC represents their first step into society. It presents them with a mirror on how society looks at them and thus how they may be looking at themselves, since it is only

in a context of sameness and difference that identity can be constructed. It is in this public mirror that they are confronted with these essential and existential questions: who am I? And is it OK to be who I am? A positive self-image is closely linked to wellbeing. Different scholars have documented that these essential and existential questions regarding identity, may be problematic for children from ethnic minorities and how important it is that ECEC providers take into account family cultures in the curriculum (Vandenbroeck, 2001, 2011). Children are confronted with many messages about how it is to be who they are. These messages are often unconscious and unintentional. It may be that a child does not feel represented in all children's cultural items such as books or dolls or other play materials. It may be that the child's own language is not recognized as valuable. It may be that the child's eating or sleeping habits are considered as "strange". Or that his or her family composition is never represented. Therefore a child-centered curriculum is always also a family-centered curriculum. In practice this implies that the curriculum needs to balance between two pitfalls: denial and essentialism. Denial of diversity would imply that one treats "all children the same". It may be common practice among educators valuing equality, especially in contexts in which a strong separation between the public and the private domains is welcomed, precisely in order not to discriminate any children (Brougère, Guénif-Souilamas, & Rayna, 2008). Yet it is obvious that every child is different and an equal treatment therefore would imply that every child is treated differently. Moreover, in practice, treating every child the same may imply that the educator addresses what she (or once in a while "he") considers to be an "average" child. Most often this average child is what is constructed as an average through the dominance of developmental psychology: a middle-class, white child, living in a traditional nuclear family (see for instance Burman, 1994 for a critique of this construction of the average child). This may easily lead to what is sometimes labeled as "racism by omission". The other (and opposite) common pitfall is *essentialism*. This implies that a child is reduced to its (ethnic or cultural) background. It may be common practice in traditional "multicultural" programs that wish to celebrate cultural diversity. It assumes that there is such a thing as "Muslim practices" or "African culture", denying not only the huge diversity within cultures, but also the agency with which parents as well as children shape their own multiple belongings or multiple identities (Beck, 1997). One cannot simply assume that a child from North African descent loves to eat tajine, refuses to have pork meat or that her parents would

appreciate that the staff addresses her in Arabic. Consequently, the curriculum of ECEC cannot be constructed upon the belief that the provision should be "a home away from home", as many parents precisely choose for ECEC for those things in which it differs from the home (Vandenbroeck, Roets, & Snoeck, 2009). On the other side, an ECEC curriculum cannot be build on constructions of the average child either. This has far reaching implication for daily practice. There is indeed a major difference between asking a child's parents to bring some music from their culture to the center, or asking them if there is any music they often play at home and they would like to share with the group. As this simple example shows, child-centered curricula can only be constructed with the participation of the child's family. A good summary of guiding principles for a respectful curriculum is given by the European DECET network (www.decet.org).

ECEC provisions need, according to DECET, to be places where:
- Every child, parent and staff member should feel that he/she belongs. This implies an active policy to take into account family cultures when constructing the curriculum.
- Every child, parent and staff member is empowered to develop the diverse aspects of his/her identities. This implies that the curriculum fosters multiple identity building and multilingualism by building bridges between the home and the institutional environment as well as with the local community.
- Everyone can learn from each other across cultural and other boundaries.
- Everyone can participate as active citizens. These implies that staff develops an explicit anti-bias approach and takes appropriate action to involve all parents.
- Staff, parents and children work together to challenge institutional forms of prejudice and discrimination. This includes a critical study of availability andaccess policies and structural inequities.

Professionalism

There is a broad consensus among researchers, practitioners, and policy makers that the

quality of early childhood services-and ultimately the outcomes for children and families-depend on well-educated, experienced and 'competent' staff. But what exactly makes a competent early childhood practitioner? Based on a study of the international literature, a survey in 15 European countries and an in-depth analysis of seven case studies of successful practices, it is clear that competence cannot be reduced to the individual practitioners' level, but rather needs to be understood as systemic (Urban et al., 2011). This is to say that the quality of early childhood education depends on complex interrelationships between the competences of the individual practitioners, competencies of the provision, inter-institutional competencies and competencies at local or central governmental levels. A key feature of a 'competent system' is its support for individuals to realize their capabilities to develop responsible and responsive practices that respond to the needs of children and families in ever-changing societal contexts. At the level of the individual practitioner, being and becoming 'competent' is a continuous process that comprises the capability and ability to build on a body of professional *knowledge*, acquire *practical skills* and develop and show professional *values*. Most importantly, practitioners and teams also need *reflective competences* as they work in highly complex, unpredictable and diverse contexts (Vandenbroeck, Peeters, & Bouverne-De Bie, in press). A 'competent system' requires possibilities for all staff to engage in joint learning and critical reflection. This includes sufficient paid time for these activities. A competent system includes collaborations between individuals and teams, institutions (pre-schools, schools, support services for children and families…) as well as 'competent' governance at policy level.

Working in contexts of diversities means working in continually changing contexts of complexity and unpredictability. As explained above, it is crucial to create environments in which children and parents can actively participate and belong. This asks for continuous mediation with parents and local communities about "the good life" and what role early childhood education can fulfill. It is obvious that "parental ethnotheories" or "folk pedagogy" (Bruner, 1996) - the beliefs parents hold about what is good for their children - may substantially vary in settings marked by diversity. International ethnographic studies (Brougère et al., 2008; Tobin, 2011; Tobin, Hsueh, & Karasawa, 2009) show, for instance, that parents hold diverging and often opposing opinions about multiculturalism, about how to foster multilingualism, and other aspects of upbringing children in a diverse society. This

entails that professionals cannot suffice with knowledge about the "average" child, or the "normal" development, but need to work in contexts of disagreement. As explained elsewhere, disagreement does not need to be a burden, but can mean an exceptionally rich opportunity for professional development (Vandenbroeck, 2009). For the reflective practitioner, this means four basic, generic competences (Vandenbroeck et al., in press):

- The ability to look for (always provisional) solutions in contexts of dissensus. The most significant results are achieved in teams who display the ability to discuss different opinions intensively and where on the basis of these debates concrete decisions are taken and put into practice.
- To focus on the meeting of the Other, the one we do not know. The orientation to try to understand the parent who is 'different' is a basic competence to work in child care.
- The ability to co-construct knowledge with others (colleagues, parents, children), including the competence of being able to construct new practical knowledge, new ways of working with children, parents and colleagues.
- Acting with a focus on change. Participation in action research projects enhances the belief in the possibilities of experimentation and help to discover what is possible in working in early childhood education.

It is obvious that these reflective capacities can only flourish in contexts of systemic competences. On the institutional level this includes for instance the possibility to have (paid) time off, to document the activities and the learning of children, to plan, and to discuss documentation and planning with colleagues and parents. In many successful contexts this means that some kind of external or internal counseling or coaching is available to the staff.

On the inter-institutional level this entails opportunities to collaborate with other colleagues in the area, to take part in action research projects with researchers, to work together with training institutions and to build close working relationships with other educational and social agencies.

On the governmental level, this means that education is promoted as a public good and that curricula address education it its broadest sense, rather than a narrow focus on learning, as well as setting standards for adequate working conditions through legislative initiatives (see

also OECD, 2006 for more examples of this).

Evidence-based Practice

The tendency of evidence-based practice (and its counterpart: practice-based evidence) has considerably gained attention over the last few decades; first in medicine, then in psychology and at present it is quite popular in education. It seems self-evident from a policy point of view as resources are scarce and one wishes that public investments in education were both effective and efficient. It also seems evident from a practice point of view as all children deserve education that "works" and, consequently, practitioners should therefore rely on what science has to say about "what works".

The term originated from "evidence-based medicine" and David Sackett and his colleagues from the NHS Research and Development Centre for Evidence-based Medicine are often considered as its pioneers, advocating for taking decisions towards patients, based on research. In a much-cited article from 1996, they defined it as follows:

> Evidence-based medicine is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients. The practice of evidence-based medicine means integrating individual clinical expertise with the best available external clinical evidence from systemic research (Sackett, Rosenberg, Gray, Haynes, & Richardson, 1996)

Sackett and colleagues have repeatedly stressed that it is about a combination of knowledge through research, personal experience and preferences and choices of the patient. They were very explicit about this last part:

> Evidence-based medicine is not "cookbook" medicine. Because it requires a bottom up approach that integrates the best external evidence with individual clinical expertise and patients' choice, it cannot result in slavish, cookbook approaches to individual patient care (Sackett et al., 1996).

Also in later discussions, they continuously repeated that evidence-based practice cannot be reduced to applying research evidence but always asks for negotiations with the individual patient (Sackett, Rosenberg, Gray, & Richardson, 1996).

In the late 1990's and early 2000's, evidence-based practice became popular in psychology in general and in psychological counseling in particular, especially in the USA. Yet at the same time, the concept of evidence-based practice seems to have been narrowed, especially with regards to what can be considered as valid evidence, with a particular attention for Randomized Controlled Trials (RCT). It is probably not a coincidence that this form of evidence-based practice is particularly popular in countries with a liberal welfare state regime, where social services are to a large extent privatized and access to care is therefore regulated by private insurance companies. These companies obviously prefer short-term therapies with proven outcomes. One of the results is that in the US almost only behavioral therapies are accepted, rather than systemic or psycho-dynamic therapies, leading, in turn, to disputes among psychologists. Finally, the *American Psychological Association* (APA) started a task force, consisting of twenty leading researchers from the US and Canada, who formulated a vision on the matter (APA Presidential Task Force on Evidence-Based Practice, 2006). The task force states that the concept of evidence based practice has often been misused in the context of the dissemination of health care funds, "not always to the benefit of the patient" and concludes that the concern about effectiveness and efficiency has known several counter-productive effects, such as a focus on short term therapies and a lack of attention for factors that explain variations in results, due to the focus on generalizability of results. They stated:

> The psychological community - including both scientists and practitioners - is concerned
> that evidence-based practice initiatives not be misused as a justification for inappropriately
> restricting access to care and choice of treatments.

Consequently they propose the following definition, remarkably similar to the work of Sackett and colleagues:

> Evidence-based practice in psychology is the integration of the best available research with
> clinical expertise in the context of patient characteristics, culture, and preferences.

The APA further stressed that there are many forms of evidence and no hierarchy can be established between different research evidence such as RCT, case studies, ethnographic research and the like. They particularly stress that research evidence always needs to be coupled with personal experience of the practitioner and taking account of personal preferences of the patient, his of her culture and context.

During the last decade, evidence-based practice has been an influential concept in early childhood education as well. Longitudinal projects on ECEC in the USA (e.g., High/Scope Perry Preschool and Michigan School Readiness Program), demonstrated that high quality programs could yield beneficial developmental effects. These studies have gained particular attention through their theoretical groundings in neuroscience (e.g., Shonkoff & Phillips, 2000) and especially through the ways in which they have been translated into economic predictions of high returns on investments (Heckman, 2006). These studies in turn have highly influenced international donor organizations, financing early childhood education, including the World Bank (e.g., Naudeau et al., 2011), UNESCO (e.g., UNESCO, 2010) and Unicef (Unicef Innocenti Research Centre, 2008). As a result, there is a growing belief that it is indeed the role of scholars to produce evidence that early childhood education "works", that a) we can universally define what quality is, b) that we can universally define how this quality should be implemented in programs, and c) that the best evidence is evidence stemming from Randomized Controlled Trials. A salient example of this is the new Lancet Series, publishing a meta-study of effectiveness studies in the developing world (Engle et.al., 2011), yet applying a very narrow view on what constitutes valid evidence.

The multiple warnings in evidence-based medicine and in evidence-based psychology seem somewhat overlooked in the present-day attention for evidence-based education, leading up to two series of problems: methodological problems and especially ethical problems.

On the methodological side, it is important to keep in mind that research can - in the best of cases - produce evidence on what *has worked*, not on what *will work*. Research can (and should) document how educational contexts and styles have influenced the learning and the development of groups of children, but this cannot predict how a particular child will react on this specific setting or teaching method. In many cases the research that evidence-based education refers to is about larger cohorts of children, often using comparative methods and correlational, cross-sectional studies. As Connolly (2006) explains, it would be an "ecological

phallacy" to apply these results to "predict" the impact of a method on a singular child, as statistical research cannot yield generalizations towards individuals (Fendler, 2006).

Second, research that suggests that a specific method has "worked", does not necessarily inform us about why the method worked. Indeed, international research coincides to say that probably the most salient factor is the educational relationship between teacher and child, rather than the methods applied. However, studies looking at efficient and effective learning models, do not often address the personality of the teacher (nor the child), the commitment, the social context or the multiple micro-events that shape the learning relationship (such as the valuing attention of the researcher for teacher and child, but also the fact that the teacher may take care of the child in many more ways than just what is measured as "learning").

Third, when effects of a specific method are studied, practitioners are often asked to stick to the method described a strictly as possible, in order to ensure reliability and validity of the study. After all, if every teacher would adapt the method to his of her own feelings and to each individual child, we would never know if alleged positive results can indeed be ascribed to the method at study. Inevitably, this kind of research leads to a form of standardization that precisely goes against the warnings of Sackett and APA regarding evidence-based practice.

Democracy, Diversity and Evidence-based Practice

Apart from the methodological problems described, there are also serious ethical problems related to evidence-based education. Since many decades, scholars have pointed at the fact that science can never be neutral and this is particularly the case in social and human sciences (e.g., Bourdieu, 2001; Foucault, 1990). They have for instance showed how knowledge and power are inextricably linked: prevailing power relations influence what knowledge is considered as "truth" and in turn, knowledge is productive of power relations (Foucault, 1971, 1984). Research in this sense should neither be considered as an activity preceding practice (and informing the practitioner about how to act), nor as following upon practice (and evaluating the practitioner). Research should on the contrary be considered as an ethical practice, or *praxis* (action + reflection) in itself (Freire, 1970), influenced by the very (social, historical, political) contexts in which it takes place.

This reflection is related to the fundamental critique of Biesta (2007) on evidence-based education, for its democratic deficit:

> Evidence-based education seems to favor a technocratic model in which it is assumed that the only relevant research questions are questions about effectiveness […] forgetting that what counts as "effective" crucially depends on judgments about what is desirable. On the practice side, evidence-based education seems to limit severely the opportunities for educational practitioners to make such judgments in a way that is sensitive to and relevant for their own contextualized settings (Biesta, 2007: 5).

Evidence-based education presupposes that what the educator does, is an activity with a specific purpose and that there is a causal relationship to establish between action and purpose. Effectiveness is supposed to be the certain relationship between the intervention and its results. Consequently, effectiveness does not include a judgment about *what* needs to be achieved, the only relevant question being how to achieve the predetermined outcomes.

Yet, education is a highly complex matter in which many variables interfere: context, but also how children and parents accept (or refuse) the intentions of the educator, making causal relationships between intervention and effect highly improbable. But, more importantly, there is the democratic question about who is entitled to establish the educational goals. What changes need to be considered as desirable and who says so (Vandenbroeck, Coussée, & Bradt, 2010)? The fundamental problem with evidence-based practice is that it is the researchers, that define the goals (the desired outcomes) and individual families or practitioners have no say in this debate, as the goals need to be similar for the entire cohort. These goals are then represented as natural, self-evident and "objective". This is what Biesta (2007) labels as the democratic deficit of evidence-based practice. Indeed, democratic practices mean that parents and children are involved in the decisions that are taken about them (Moss, 2007).

Education is first and foremost and ethical and political act, as it always is (and always will be) related to our vision on the world we would wish our children to live in. Education is after all about "ways of imagining a possible future" (Biesta, 2007: 21). Therefore it is ultimately about how we would wish people to be and how we would wish they relate to society. No doubt we could easily agree on some general horizons including a worldview based on

equality, freedom and solidarity. Yet it is highly improbable that we would still agree when it comes to putting this possible future in practice. While some would certainly put individual freedom first and attach much importance to rewarding effort and merit, others may value solidarity and equity more and advocate more strongly for redistributive rewarding systems. While some educators stress autonomy, free choice and self-expression as the highest values, others may wish to limit autonomy to favor inter-dependency and belonging. As Sen (2009) explained through the story of the children and the flute, there is no such thing as one rationalistic truth about what is "just". Precisely the disagreement and the debate about diverging viewpoints on these matters form the heart of what democracy is about (Mouffe, 2005).

Conclusions

We started to explore what respect for diversity in early childhood education may mean. It is about creating a sense of belonging for each child, his or her family, as well as for diverse practitioners. Pedagogies of diversity will necessarily look for a precarious equilibrium between a too narrow (or folkloristic) focus on the child's origins and the denial of these origins. A narrow focus on the origins would risk reducing the child to its history, rather than to its present or self-chosen future. It also may deny other important aspects of diversity, such as socio-economic inequalities. As an international learning group on these issues stated: diversity is seen as problematic in cases of economic inequality (i.e., poverty), not in other cases (Vandenbroeck, Seda-Santana et al., 2010). The denial of origins leads to a "color-blind" approach in which the average (i.e., middle class) child is addressed. The continuous search for this equilibrium entails that pedagogies of diversity (and consequently also the curriculum) will be marked by constant change and unpredictability. Respect for diversity, after all, is not about tolerance towards those who deviate from the norms. Rather it is about questioning the norms that create the deviation.

Moreover, when we indeed negotiate with children, parents and local communities about how to shape the public responsibility in educating the youngest children, it is highly improbable that we would come to simple agreements about educational goals and means.

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And luckily so. It is essential that the debates about what is good for children do not come to final conclusions, but remain at the core of educators' work in contexts of democracy and diversity.

On the level of professionalism this means that there is a need for competent *systems*, rather than predefined lists of competences to be acquired by individuals. The competent system is a system that allows individuals, teams and institutions to document their practice, explore different meanings of the practice and reflect in order to develop pedagogy as a co-construction. This approach has - among others - also been advocated for by the OECD Starting Strong reports, where it is stated that curricula should encompass broad objectives, rather than prescriptive methods and curricula should always be constructed in participative ways with parents and local communities. OECD (2006) advocates for "emerging curricula", taking advantage of the daily emerging micro-events, rather than planned learning activities. This means that teachers take advantaged of unplanned events that occur: a sudden rainfall, the construction of a new house in the neighborhood, the visit of a far-away grandparent, … (see for instance Rinaldi, 2005 for a more elaborated explanation).

It is obvious that this approach to "quality" is in a very tensed relationship with the tendency towards evidence-based education. Evidence-based work implies that outcomes are pre-defined, and therefore precede the educational activity. The very meaning of education is then placed outside of the child, outside of the family and outside of the here and now. It is displaced in an imagined and decontextualized future, designed by researchers. That future may very well be technocratic, rather than democratic and therefore undermining one of the most basic values of education.

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